JUSTICE AND SAFETY

Implementation of the VictimConnect Resource Center

Findings from a Rigorous Evaluation of a Technology-Based Victim Helpline

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URBAN INSTITUTE

RESEARCH REPORT

February 2026



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Acknowledgments

This evaluation was supported by Award No. 15PNIJ-22-GG-03290-NONF, awarded by the National Institute of Justice, Office of Justice Programs, U.S. Department of Justice. We are grateful to them and to all our funders, who make it possible for Urban to advance its mission.

The opinions, findings, and conclusions or recommendations expressed in this report are those of the authors and do not necessarily reflect those of the Department of Justice, the Urban Institute, or its trustees. Funders do not determine research findings or the insights and recommendations of Urban experts. Further information on the Urban Institute's funding principles is available at urban.org/fundingprinciples.

This evaluation benefited from the assistance of many people, and the authors thank those whose contributions made this research possible. Foremost, we are grateful to the crime victims and their loved ones, VictimConnect staff, and victim service providers who participated in this study, sharing their perspectives and experiences by survey or interview. We also extend special thanks to partners at the National Center for Victims of Crime for their commitment to this study and steadfast collaboration, including the Deputy Director of the Center of Victims and Survivor Services, John Kemp; Senior Director of Programs, Michele Schwartz; and Chief Operating Officer, Iva Rody. Finally, we appreciate support for this study from the following members of the advisory board: director of research and evaluation at the Rape, Abuse & Incest National Network, Kimberly Goodman; associate professor in George Washington University's Department of Prevention and Community Health at the Milken Institute School of Public Health, Karen McDonnell; chief executive officer at HEAL Trafficking, Amanda Stylianou; program officer at the Center for Victims of Torture, Megumi Layman; and founder of EmpowerDB, Steven Jenkins. Lastly, we thank our Urban Institute colleagues who contributed to this work, including Krista White, Sam Bachman, Susan Nembhard, and Emily Wright.

Executive Summary

According to the National Crime Victimization Survey, in 2024 alone, 6.7 million violent victimizations of people ages 12 and older and 13.1 million property victimizations occurred in the United States (Tapp and Cohen 2025). To help support those who have experienced these victimizations, the VictimConnect Resource Center was formed in 2015 and is the only national helpline providing support and referrals for all crime types. These services are offered through a website and a hotline operated by trained staff called victim assistance specialists (VAS) and available by phone, online chat, and text messaging. In 2019, the Urban Institute began a multiphase evaluation of VictimConnect with funding from the National Institute of Justice. This report summarizes the program and presents findings from its implementation evaluation.

Urban and the National Center for Victims of Crime, which runs VictimConnect, conducted VictimConnect's formative evaluation in 2019 and 2020, followed by concurrent implementation and outcome evaluations starting in 2023. VictimConnect's implementation evaluation aimed to document its functions, understand whether it reaches the target population with the intended services, and assess visitor and staff satisfaction with its technology-based service mechanisms. To do so, we surveyed nearly 1,000 visitors, observed over 350 interactions between visitors and hotline staff, surveyed staff about 250 interactions, interviewed over 20 staff and partners, and analyzed three years of deidentified hotline data. We then used these data to assess VictimConnect's fidelity to its logic model and answer research questions regarding access to victim services, delivery of victim services, protection of victims' rights and confidentiality, and the efficiency of victim services.

Key Findings

Drawing on the extensive data collected independently by Urban from VictimConnect visitors, the technological platform, and staff and partners, we identified the following key findings.

VictimConnect reached visitors from all backgrounds across the United States.

- In 2023 and 2024, VictimConnect received over 1,400 webpage views per day on average and served over 30,000 helpline visitors from every state and most US territories. Surveyed visitors were from all ages, races, education levels, and employment statuses but most were female.

- Nearly all visitors are the victim themselves and are using the helpline for the first time.
- Stalking, nonsexual harassment, and intimate partner violence are the most common harms reported by visitors. However, VAS respond to over 35 different victimization types and polyvictimization (experiencing multiple crimes) is extremely common among visitors.
- Although half had already tried seeking other services for their victimization experience, only a third of visitors surveyed said they felt familiar with local services.

Visitors connect to VictimConnect from a variety of sources and modalities.

- Surveyed visitors said they chose to contact VictimConnect instead of another service primarily due to ease of use, followed by safety, privacy, and lack of availability of other local services.
- Three-quarters of surveyed visitors learned about VictimConnect from the internet, but others found it through another hotline, word of mouth, law enforcement, or a service provider.
- Almost all surveyed visitors felt positive or neutral about VictimConnect's accessibility, ease of use, safety, and privacy. Staff also felt the technology works well and protects victims.
- Roughly 70 percent of hotline users connected with VAS via phone, followed by roughly 20 percent by online chat and 10 percent by text message. Differences in modality usage by time of day and visitors' age and gender indicate preferences that are met by having options to connect.
- Increasing operating hours to 24/7 allowed VictimConnect to meet a clear demand for services: the average number of visitors per month rose 55 percent and the share of chats/texts rose.

VictimConnect provided a range of trauma-informed services to meet visitors' needs.

- VAS consistently assessed visitors' safety, emphasized VictimConnect's anonymity, and asked for only necessary details.
- Visitors reported extremely positive treatment by VAS, which was associated with positive perceptions of VictimConnect's accessibility, helpfulness, and overall satisfaction.
- The referrals and resources provided by VictimConnect were perceived as meeting visitors' needs most of the time and the majority of services provided were considered helpful.
- Surveyed visitors most needed legal assistance, financial assistance, and crime reporting, though many also needed housing, support groups, and mental health care.

- Nearly 70 percent of visitors who spoke with VAS received a referral to another provider, most often to victim service programs, other support services, and victim compensation programs.

VictimConnect supports high-quality service delivery through internal resources and training as well as external collaborations.

- Hotline staff receive 80 hours of initial training, half of which is spent shadowing on the hotline. VAS are then provided ongoing learning, one-on-one supervision meetings, quality assurance checks, and operational checklists. These methods seek to support performance and retention.
- Hotline staff can search an internal database during interactions for resources to provide to visitors, which they used in nearly half their surveyed interactions.
- VictimConnect convenes the National Hotline Consortium, a group of 23 US-based victim support and crisis hotlines. Benefits of participation include peer support, exposure to new technologies, education on trends and best practices, and an expanded network for referrals.

Conclusions and Recommendations

Our goal was to answer four key questions about service access, delivery, protections, and efficiency while understanding to what extent VictimConnect was achieving the activities, outputs, and immediate outcomes they outlined in their logic model. The findings led us to the following overall conclusions:

1. **VictimConnect increased access to victim services** by offering accessible modes of technology, reaching victims from a range of backgrounds, and referring victims to relevant services.
2. **VictimConnect improved delivery of victim services** by operating reliable services as intended through its four technological modalities, including by expanding service availability to 24 hours per day, seven days a week.
3. **VictimConnect's platform and VAS behavior protect victims' and their loved ones' right to anonymity and confidentiality**.
4. **VictimConnect strengthened the efficiency of its own services** by adequately preparing VAS to successfully interact with visitors and the **efficiency of external victim services** by managing the NHC partnerships.

5. **NCVC completed or made significant progress toward each output across the five focus areas in the logic model** (visitors served, technology, staffing, outreach and collaboration, and evaluation and improvement), although some elements were paused or re-envisioned.

These findings also led to several important takeaways for technology-based helplines and the broader field of victim services. First, there is a **clear need for 24/7 services and multiple modes of connection** that are accessible, safe, private, and easy to use. Second, programs should encourage victims to **connect with trained staff to maximize benefits and positive experiences** but also make information available online. Third, victims benefit from **comprehensive trauma-informed approaches and a simplified service model** that does not ask a lot from victims. Finally, programs and funders should invest in **internal data tracking to identify trends and needs**, regular performance assessment, and rigorous evaluation with strong researcher-practitioner partnerships.

This implementation evaluation also resulted in specific recommendations for how hotline operators such as VictimConnect, other service providers, and funders can continue strengthening the response to crime victims nationally. For example, **expanding referral options for specific underserved victimization experiences**, particularly stalking, non-sexual harassment, and gang stalking, will fill gaps in services and reduce challenging interactions for hotline staff. Increased presence at community events, targeted outreach to hard-to-reach populations, and state-level or justice system partnerships will also help build awareness of hotline services. Moreover, we identified the following suggestions to help victim hotline and service organizations **improve the accuracy and efficiency of the information and referrals they provide**:

- Implement protocols, technological mechanisms, and staff training to conduct **warm transfers**.
- Institute **cross-training and information sharing** for frontline staff, both between hotlines and between hotlines and frequently referred service providers.
- Dedicate resources to maintain an **internal resource directory** for frontline staff to easily search during their interactions, including to ensure the platform technology is reliable, accessible, and integrated and to assign staff time to vet resources.
- Maximize opportunities during **training for new staff** to shadow more experienced staff or supervisors and revise trainings to be interactive and specific to the needs and gaps identified by visitors, staff, and data review.
- Continue providing opportunities for collaboration and **mutual learning between hotlines**, such as through the National Hotline Consortium.

Implementation of the VictimConnect Resource Center

The VictimConnect Resource Center (VictimConnect) is the only national helpline serving all crime victims by providing emotional support, information, and referrals. In collaboration with the National Center for Victims of Crime (NCVC), the Urban Institute conducted an evaluation of VictimConnect's implementation between 2023 and 2025 with funding from the National Institute of Justice.[1] This report summarizes our evaluation and presents results. Findings provide helpful insights into how national hotline operations serve crime victims and their loved ones.

In 2019, the Urban Institute began a multiphase evaluation of VictimConnect, which is operated by NCVC and features an informational website and the ability for visitors to contact trained helpline staff through phone, webchat, or text. "Visitors" is the term NCVC uses for the crime victims, loved ones, service providers, and other people who reach out for VictimConnect services. while helpline staff are referred to as victim assistance specialists (VAS).

The first phase of this study, conducted from 2019 to 2020, was a formative evaluation in which Urban and NCVC assessed VictimConnect's evaluability, developed a program logic model, built its research capacity, and planned robust implementation and outcome evaluations (Yahner, Dusenbery, Bastomski, and White 2020). As described in Urban's formative evaluation toolkit, implementation evaluations describe a program's delivery and to what extent it is carried out as planned (Dusenbery, Yahner, and Bastomski 2020). Coupled with Urban's concurrent outcome evaluation of VictimConnect (Yahner, Dusenbery, and Bachman 2025), the implementation evaluation will help hotlines improve their operations and the response to victims nationally through technology. Our goals are

- to document the functions that VictimConnect carries out and whether it meets the expectations identified in its logic model and other program plans,
- to understand whether the program is or is not reaching its target population and providing services as intended, and
- to assess visitor and staff satisfaction with the technology-based mechanisms through which the program's services are provided.

About NCVC and VictimConnect

Founded in 1985, NCVC was established to give voice to victims of all types of crime and support professionals who serve victims. In pursuit of their mission, NCVC offers in-person and virtual training to professionals, resources for victims, two online resource maps, and two hotlines: VictimConnect and the DC Victim Hotline. NCVC established VictimConnect in 2015 with funding from the US Office for Victims of Crime (OVC).

The hotline is staffed by full-time or on-call VAS and volunteers who are required to have relevant experience, take an 80+ hour course upon hire, and undergo a supervisory period during their first weeks on the hotline. VAS are also provided ongoing advanced training on specialized topics. Their goal is to empower survivors while maintaining confidentiality. Services provided on the hotline are tailored to each individual and include emotional support, safety planning, information about crime victim compensation and reporting, and linkage to local, state, and national vetted resources such as housing, counseling, medical-forensic care, and legal services. When visitors connect by phone, chat, or text, VAS assess their needs, identify options for support, and provide relevant information. At the end of each interaction, VAS are trained to record information about the session and visitor in their internal "demographics" database.

Information about VictimConnect is shared on federal websites, by local law enforcement and service providers, and through other professional conferences and associations. In 2015, NCVC also founded the National Hotline Consortium (NHC). The NHC is a collaborative group of 23 victim service and crisis intervention hotlines that serve a wide range of visitors. While most member organizations operate hotlines for crime victims and their families within the US and its territories, some organizations operate hotlines for Americans who are victimized abroad. The NHC seeks to develop and model best and promising practices for hotlines and facilitate communication and coordination among member hotlines to provide a high-quality response to users. Members meet quarterly to discuss technology and emerging issues. They also convene topic-specific work groups.

Methods for Evaluating VictimConnect's Implementation

Urban's primary data sources were confidential observations of hotline interactions, an online survey completed by staff after a random sample of interactions, interviews with hotline staff and service partners, and an online survey of visitors.[1] NCVC also provided deidentified data from their helpline platform, website analytics, and internal service database for 2023 and 2024. Urban worked closely

with NCVC and the project's advisory board to carry out the evaluation while providing appropriate safeguards to visitors who receive services.

Observations. Four members of the research team obtained individual-level accounts in the platform and conducted observations one week a month each of phone, chat, and text interactions by full- or part-time VictimConnect staff who had completed training and their supervisory period. Phone observations were conducted live; chat/text observations were done using transcripts saved on the platform. Data on the type of interaction, quality of service, types of resources shared, and visitor demographics were collected using a protocol programmed in the Qualtrics platform. We observed 354 interactions (168 phone, 127 chat, and 59 text) from January 2024 to February 2025.

Staff survey. The staff survey was pilot tested in January 2024 and relaunched in July 2024. Urban staff sent VAS who had completed their supervisory period calendar invitations on three rotating days a week (or every other week) from July to December. They were instructed to complete a short Qualtrics survey at different times of day about their most recent interaction. The survey covered their perspectives on the interaction and visitor demographics. VAS completed a total of 268 surveys.

Interviews with professionals. Urban received contact information for 47 professionals from NCVC and sent up to three email invitations to each requesting their participation in a voluntary 60-minute virtual interview. A total of 21 professionals participated (45 percent response rate): 11 staff from NCVC and 10 professionals from other organizations. Interviews were conducted between October 2024 and March 2025 by two Urban team members who took notes and requested to save the transcript made by Teams. Topics covered visitor characteristics, familiarity with VictimConnect, services offered and their utility, collaborations between providers, and ideas for improving hotlines.

Visitor survey. Urban's longitudinal survey of VictimConnect visitors who connected through phone, chat, text, or the website was piloted in March 2024 and fully launched from July 2024 to February 2025. The survey was advertised on VictimConnect's webpage and after-hours voicemail and shared verbally by VAS after visitors finished their engagement. Visitors completed the informed consent form and surveys in Qualtrics. The surveys asked respondents about their demographics, the purpose of their visit, what happened during the interaction, feedback on the interaction, and intended next steps. Those deemed valid following Urban's fraud checks were sent a gift card and scheduled to receive the follow up survey link in four weeks. We received 972 valid initial surveys and 287 valid follow up surveys (30 percent response rate). Of those who completed an initial survey, 452 (47 percent) connected with VAS and 520 (53 percent) did not, which comprised our comparison group.

Foundation of the Implementation Evaluation

The formative evaluation led to four specific research questions (and respective subquestions discussed in Dusenbery et al. 2025) that guided Urban's evaluation of VictimConnect. The overarching research questions were as follows:

- RQ1: Does VictimConnect increase access to victim services?
- RQ2: Does VictimConnect improve delivery of victim services?
- RQ3: How does VictimConnect protect victims' rights and confidentiality?
- RQ4: Does VictimConnect strengthen the efficiency of victim services?

The research team also used the VictimConnect logic model as a primary basis of evaluating VictimConnect.[2] Shown in the appendix, the logic model links the program's inputs, activities, intended outputs, and outcomes to describe what services VictimConnect provides to visitors and how it enacts those services (Dusenbery 2020). VictimConnect's activities consist of service delivery through four modalities (softphone, online chat, text messaging, and web resources), use of its technological platform and supporting components to operate the resource center, training of VictimConnect staff and visitors, development of outreach resources, and efforts to conduct ongoing program evaluations. Its outputs are the number of and percent change in visitor interactions over time, the number of outreach materials created, and training and technical assistance (TTA) fulfilled. Two immediate outcomes under the implementation evaluation were whether visitors have reliable access to VictimConnect's call, chat, text, and website platforms, and whether visitors have access to up-to-date, high-quality referrals.

Findings on VictimConnect's Implementation

The data collected by Urban and provided by NCVC reveal important information about who uses VictimConnect, how visitors access VictimConnect, what services are delivered, how VictimConnect prepares VAS to deliver services, and how VictimConnect supports service delivery by other providers. When possible, we identify differences between (1) those who connected with VAS and those who could not or chose to use only the website and (2) those who connected with VAS using phone, chat, or text. All differences presented are statistically significant at the $p < 0.05$ level.

Who Uses VictimConnect

In 2023 and 2024, VictimConnect's VAS documented interactions with nearly 30,000 visitors. The VictimConnect website received roughly 1,400 visits per day. Although about a third of visitors declined to share their location with VAS during their interactions, **VAS reported visitors from every state as well as some territories**. Of those who shared where the crime occurred, the five most frequently cited states were California, Texas, Florida, New York, and Georgia. The five least frequent states were Wyoming, North Dakota, Alaska, Montana, and Vermont. The five states with the greatest increase in visitors from 2023 to 2024 were Alaska, Hawaii, Nebraska, Oregon, and North Dakota. The only territories without any known visitors were American Samoa and Northern Mariana Islands. Over the two years, VictimConnect also received calls from 246 international visitors.

Victimization Experience

Almost all visitors (91 percent of survey respondents and 93 percent of interactions recorded by VAS) identified themselves as the victim, with another four percent identifying as a family member of a victim. The remaining visitors were friends of a victim, professionals such as other service providers or law enforcement, and community members. Those who spoke to VAS were as likely to be a victim as those who did not, with no differences by phone, chat, or text.

Urban's visitor survey asked respondents to select which of 24 victimization types best describe the experience they attempted to contact VictimConnect about and VAS track 35 different victimization types that visitors inquire about or report.[3] Experiencing multiple different types of victimizations is extremely common among VictimConnect users. VAS reported polyvictimization for 33 percent of the interactions they documented in 2023 and 2024, and **75 percent of visitors identified more than one type of victimizations** that led them to reach out to VictimConnect. Similarly, there was also a significantly higher percentage of interactions where the victimization type was unknown to VAS.

As shown in table 1, the top five most common victimization experiences reported in Urban's survey were stalking, non-sexual harassment, intimate partner violence (IPV), assault, and family violence. The top three victimization experiences match what VAS recorded based on their discussions with visitors. Stalking and non-sexual harassment victimizations lack their own dedicated national hotline or resource center, making them the most common victimizations served by VictimConnect. Both the Stalking Prevention, Awareness, and Resource Center and the US Office on Violence Against Women's stalking webpage refer victims seeking help and support to VictimConnect. Furthermore, VictimConnect receives a high volume of contacts related to an experience referred to as "gang stalking" in which

someone perceives they are being followed, stalked, and harassed by a large number of people, often involving different forms of surveillance.[4]

TABLE 1

Most Common Victimization Types as Reported by Visitors and VAS, 2023–25

Victimization types	Percentage of surveyed visitors, 2024–25	Percentage of visitors as reported by VAS, 2023	Percentage of visitors as reported by VAS, 2024
Stalking	52%	39%	35%
Harassment (non-sexual)	46%	25%	20%
Intimate partner violence	36%	16%	12%
Assault	32%	7%	6%
Family violence/Abuse	28%	7%	6%
Child abuse^	27%	4%	4%
Fraud/Identity theft/Economic crimes	26%	9%	9%
Adult sexual assault	25%	4%	4%
Harassment (sexual)	19%	1%	2%
Robbery	13%	1%	1%
Burglary	12%	1%	1%
Violation of court or protective order	12%	1%	1%
Elder Abuse	11%	2%	1%
Homicide*	8%	10%	8%
Unknown/Did not answer	3%	13%	21%

Source: Interactions data collected by NCVC and shared with the Urban Institute. Survey of visitors administered by Urban in 2024 and 2025.
Note: Totals may not add up to 100 percent, as respondents could skip questions and select multiple choices.
^NCVC database includes separate options for adult survivors of child abuse (sexual witness), adult survivors of child abuse (physical, verbal, neglect, witness), child physical abuse (current minor), child exposed to violence (current minor), child sexual abuse (current minor), and child pornography/child sexual abuse images.

Beyond the top three victimizations, assault, family violence, and child abuse were more commonly reported by visitors, and fraud/identity theft/economic crimes (economic crimes), and homicide were more commonly recorded by VAS. Although not always among the most frequent victimizations served, **VictimConnect consistently reaches victims of crimes that traditionally experience gaps in services**. As defined by the Office for Victims of Crime, these include assault, robbery, hate crimes, fraud, homicide co-victimization, and elder abuse (OVC 1997).

VictimConnect also serves victims who may have additional needs. Specifically, victimizations affecting youth (e.g., child sexual abuse, child physical or verbal abuse, neglect, bullying, teen dating violence) were reported by a quarter of visitors and by VAS in five percent of interactions. Although only four percent of visitors surveyed experienced a mass event[5], VictimConnect is one of the primary resources referred to victims after an event and may fill a small but valuable gap in services.

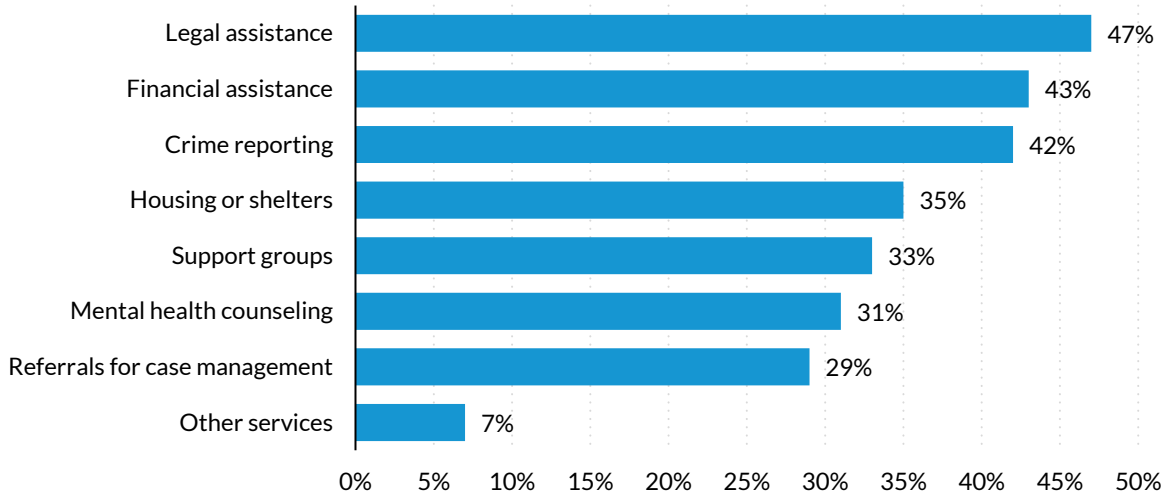
Visitor Needs

Roughly two-thirds (63 percent) of visitors were not experiencing an emergency during the interaction, which meant the visitor reported needing to obtain assistance in the next few days, week, or a few weeks. Of those with more urgent needs, 31 percent needed assistance immediately or that day and 5 percent were referred to 911. As expected, visitors who reported emergency situations were more likely to connect with VAS than those reaching out for less urgent needs (51 percent vs 45 percent), but there was no significant difference in their mode of connecting.

Visitors were asked about their reasons for contacting VictimConnect and, as shown in figure 1, they reported a wide range of needs, with legal assistance, financial assistance, and crime reporting being the most common.

FIGURE 1

Visitor Reasons for Contacting VictimConnect



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Source: Survey of visitors administered by the Urban Institute in 2024 and 2025, n=972.

We also found the following differences among the most common victimization types.

- **Legal assistance** was more likely to be needed by visitors who reported stalking, non-sexual harassment, gang stalking, IPV, assault, family violence, childhood abuse, economic crimes, and sexual assault than those who did not report those victimizations.[6]
- **Financial assistance** more likely to be needed by visitors who reported IPV, family violence, childhood abuse, assault, economic crimes, and sexual assault, and less likely to be needed by visitors who reported stalking.[7]

- **Crime reporting** help was more likely to be needed by visitors who reported stalking, non-sexual harassment, gang stalking, and economic crimes, and less likely to be needed by visitors who reported IPV.[8]
- **Housing or shelters** were more likely to be needed by visitors who reported non-sexual harassment, gang stalking, IPV, assault, family violence, childhood abuse, economic crimes, and sexual assault than those who did not report those victimizations.[9]
- **Mental health counseling** was more likely to be needed by visitors who reported IPV, assault, family violence, childhood abuse, and sexual assault than those who did not.[10]
- **Case management** was more likely to be needed by visitors who reported stalking, non-sexual harassment, gang stalking, IPV, assault, family violence, childhood abuse, economic crimes, and sexual assault than those who did not.[11]
- **Support groups** were more likely to be needed by visitors who reported stalking, non-sexual harassment, gang stalking, IPV, assault, family violence, childhood abuse, economic crimes, and sexual assault than those who did not.[12]

Service History

According to VAS, nearly all visitors are first-time users: 96 percent in 2023 and 87 percent in 2024. Visitors confirmed this perception, with 92 percent completing the Urban survey about their first visit to VictimConnect. Among the eight percent that were repeat users, a quarter had used VictimConnect once before, a quarter twice before, and a third between three and five previous times. A fifth had used VictimConnect more than six previous times. Of the 515 visitors surveyed who did not connect with VAS, 37 percent said it was because VictimConnect was closed and 7 percent because they changed their mind, compared with 22 percent who were just trying to find information on the website.

Only one third of respondents (33 percent) were "somewhat" or "very" familiar with local victim services or other resources, while nearly half (44 percent) were "not at all familiar" or "somewhat unfamiliar." Half of surveyed visitors (51 percent) had already tried seeking other services for the victimization experience that brought them to VictimConnect and one third (37 percent) had sought other services for prior victimizations.

Visitors were more likely to connect with VAS than just use the website if they had already tried seeking services elsewhere (54 percent vs 39 percent), indicating that they may have experienced frustration and other challenges finding the right service for their needs and wanted the help of trained staff. For both prior and current victimizations, visitors were much more likely to have sought out than used services. Those who sought or used other services for their current or past victimization

experiences were more likely to have actually used mental health services and crime reporting services but were more likely to seek but not use legal assistance.

TABLE 2

Visitor Utilization of Other Services for the Current or Past Victimizations

	Current Victimization		Past Victimization	
Service	**Used**	**Sought**	**Used**	**Sought**
Mental health services	21%	47%	30%	47%
Crime reporting services	21%	52%	25%	52%
Legal assistance	12%	60%	15%	60%
Referral for case management	11%	49%	15%	47%
Support groups	11%	47%	16%	48%
Housing or shelters	8%	40%	13%	46%
Financial services	6%	48%	10%	52%
Other	4%	13%	5%	15%

Source: Survey of visitors administered by the Urban Institute in 2024 and 2025, n = 972.

Awareness of and Access to VictimConnect

Roughly three-quarters (78 percent) of surveyed visitors reported learning about VictimConnect from an internet search. Others found VictimConnect through another national hotline (10 percent), word of mouth (10 percent), law enforcement referral (7 percent), or a service professional (6 percent). Those who connected with VAS were statistically more likely to find VictimConnect through a referral source (hotline, law enforcement, professional, word of mouth), whereas those who did not connect were more likely to find VictimConnect on the internet.

There were few statistically significant differences when comparing the victimization experiences reported by survey respondents with the ways by which they said they found VictimConnect. However, people who experienced stalking, non-sexual harassment, or both ("gang stalking") were more likely to find VictimConnect through an internet search. People who experienced stalking or family abuse were less likely to learn about VictimConnect from a law enforcement referral. People who experienced sexual assault were more likely to hear about VictimConnect from another national hotline.[13]

Staff shared in interviews about their outreach efforts, which include strong social media presence (including targeted posts based on identity group), advertising during targeted national television programming (e.g., documentaries, court TV), conferences and events with allied professionals, such as law enforcement and victim service providers, and cards with contact information. Outreach specifically

increased starting in spring 2023 and staff reported seeing a corresponding increase in hotline volume, though the actual level of awareness among the public is unknown. Interview participants from other hotline and service organizations also had a mixed perception of organizations' awareness of VictimConnect, with some saying that their hotline staff are aware of VictimConnect or it is included in their internal resource database and others thinking it is less known outside of hotlines.

> **"Especially when people search 'help for victims' or something along those lines on Google, our number shows up first, and that's usually how people find us… It's easy to find, so I think it's pretty well known to people."**
>
> *—Victim assistance specialist*

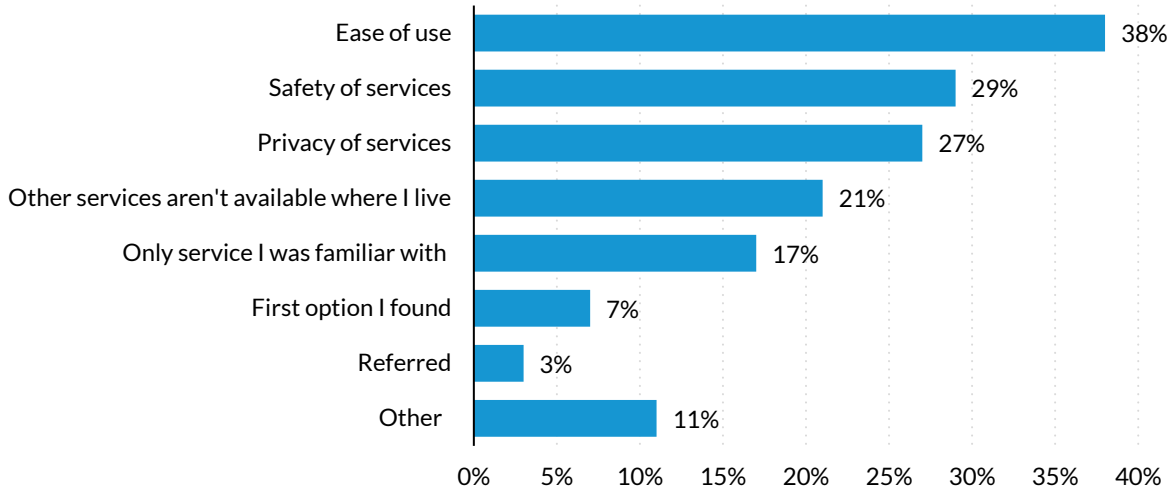
VictimConnect staff reported that, although they are more well-known among providers and law enforcement than among victims, victims are easily able to find VictimConnect through the internet. Two groups that staff cited as possibly having lower awareness of VictimConnect are older adults and children due to lower levels of internet access. NCVC leadership cited wanting to continue increasing outreach and strategizing how to connect with those at higher risk. Interview participants suggested building additional partnerships with first responders, educators, and state agencies, and expanding advertising and social media if enough staff are in place to accommodate an increase in calls. Several visitors also suggested increasing awareness when asked how VictimConnect could improve, such as through social media or a flyer law enforcement can give to victims. As one visitor stated, "It would be so beneficial to people to be able to easily locate this information online if they just knew about it."

As shown in figure 2, surveyed visitors said they chose to contact VictimConnect instead of another service primarily due to ease of use (38 percent), safety (29 percent), and privacy (27 percent). Additionally, roughly a fifth of visitors chose VictimConnect due to awareness and availability. People who contacted VictimConnect because of its ease of use (53 percent vs 42 percent), safety of service (58 percent vs 42 percent), and privacy of service (56 percent vs 43 percent) were more likely to connect with VAS than those who did not cite those reasons. By contrast people who said other services were not available in their area were less likely to connect with VAS (40 percent vs 48 percent). There was no difference in likelihood of connecting with VAS for people who reached out to VictimConnect as the only service they were familiar with.

> **"[I] haven't found or gotten any real help in three years. [I've] called hundreds of people."**
>
> *—VictimConnect visitor*

FIGURE 2

Visitors' Reasons for Choosing VictimConnect Over Other Services



URBAN INSTITUTE

Source: Survey of visitors administered by the Urban Institute in 2024 and 2025, n=972.

Regarding modality, **people who cited ease of use were more likely to connect to VAS by chat or text** (69 percent) than by phone (31 percent), compared to those who did not cite this reason (54 percent by chat or text vs 46 percent by phone). The opposite was true for people who cited other services not being available as a reason for choosing VictimConnect: 45 percent connected by chat or text versus 64 percent of those who did not cite this reason. Those who reported the following victimizations were all more likely to contact VictimConnect because there were no other services available in their area, compared to those who did not cite this reason: stalking (25 percent vs 18 percent), IPV (26 percent vs 19 percent), assault (26 percent vs 19 percent), family abuse (26 percent vs 20 percent), and identity theft (26 percent vs 19 percent).

Visitor Demographics

People from all backgrounds use VictimConnect, as documented in VAS' demographics database and in Urban's survey, which are shown in Table 3. The survey, which was only available to visitors over age 18, found that roughly half of respondents were middle-age adults (age 35 to 54) but that visitors who connected with VAS were younger on average than those who did not connect. Most respondents were female and over half were white, with no statistical differences between those who connected with VAS and those who did not. Slightly more than half of respondents said they lived in an urban area, with another quarter living in a rural area and nearly a fifth living in a suburban area.

TABLE 3

Demographics of VictimConnect Visitors who Completed the Urban Survey

Characteristics	Percentage	Number
Age		
18–24	6%	62
25–34	16%	151
35–44	31%	298
45–54	26%	251
55–64	13%	129
65 and older	7%	70
Sex		
Female	81%	773
Male	18%	169
Race/ethnicity		
White	64%	585
Black	16%	148
Hispanic	13%	119
Native	7%	66
Asian, Native Hawaiian, Pacific Islander	3%	23
Location		
Urban	55%	468
Suburban	19%	166
Rural	26%	218
Employment		
Unemployed	31%	262
Unemployed, seeking employment	18%	156
Employed part-time	17%	141
Employed full-time	21%	181
Disabled	11%	91
Education		
Some high school	10%	98
High school degree or equivalent	21%	195
Trade or vocational school	7%	64
Some college education	27%	253
Associate's or bachelor's college degree	27%	251
Advanced college degree	9%	81
Parental status		
Yes	69%	621
No	31%	279
Currently pregnant	0.7%	6

Source: Survey of visitors administered by the Urban Institute in 2024 and 2025,
Notes: n=972. Urban's survey was not available to visitors under the age of 18, but VictimConnect staff do serve this population.

VictimConnect survey participants also had mixed educational backgrounds and employment status. One third had an associate's, bachelor's, or advanced college degree and another quarter had some college education, one-fifth had graduated high school or the equivalent, and ten percent had only some high school education. Visitors who connected with VAS tended to be more educated than those who did not connect. Conversely, there was no statistical difference between those who connected with

VAS and those that did not regarding employment: 49 percent were unemployed (a third of whom were seeking employment) and 37 percent were employed either full or part-time. Finally, roughly two-thirds of respondents were parents.

VAS only record visitors' demographics after their interactions when explicitly shared by the visitor. As a result, most demographics are unknown. However, some of their recorded demographics align with what visitors self-reported. For example, in 2024, 69 percent of visitors in interactions in which sex was identified were female. Conversely, VAS report that their largest share of visitors by age are older adults (60 years and older), which is not reflected in the visitor survey. Of the 1,329 interactions from 2023 to 2024 in which age was recorded by VAS, 11 percent were age 17 or younger, 14 percent were age 18 to 34, 22 percent were age 35 to 59, 20 percent were age 60 to 65, and 33 percent were age 66 or older. One likely explanation is that older adults may be less willing to take an online survey (Remillard et al. 2014) and therefore are undercounted in the visitor survey.

Nearly all staff believe VictimConnect is reaching populations in need of services given the volume of interactions and range of demographics and crimes. They reported, for example, that people often reach out to VictimConnect when they have not been served by their local communities and do not know where else to turn, or when they have limited economic resources or are experience housing instability. Regarding another group generally characterized as underserved, VictimConnect nearly tripled the visitors served who are not native English speakers from 2023 to 2024. A higher percentage of limited English proficiency (LEP) visitors reached out over the phone than the total population (89 percent called, 8 percent chatted, and 4 percent texted). The majority of LEP visitors spoke Spanish (99 percent of callers in 2023 and 96 percent of callers in 2024). Examples of other languages requested include Russian, Arabic, Hungarian, and Thai. Bilingual VAS rather than an interpreter responded to 70 percent of Spanish LEP visitors and 68 percent of all LEP visitors.

How Visitors Access VictimConnect

Hotline Usage

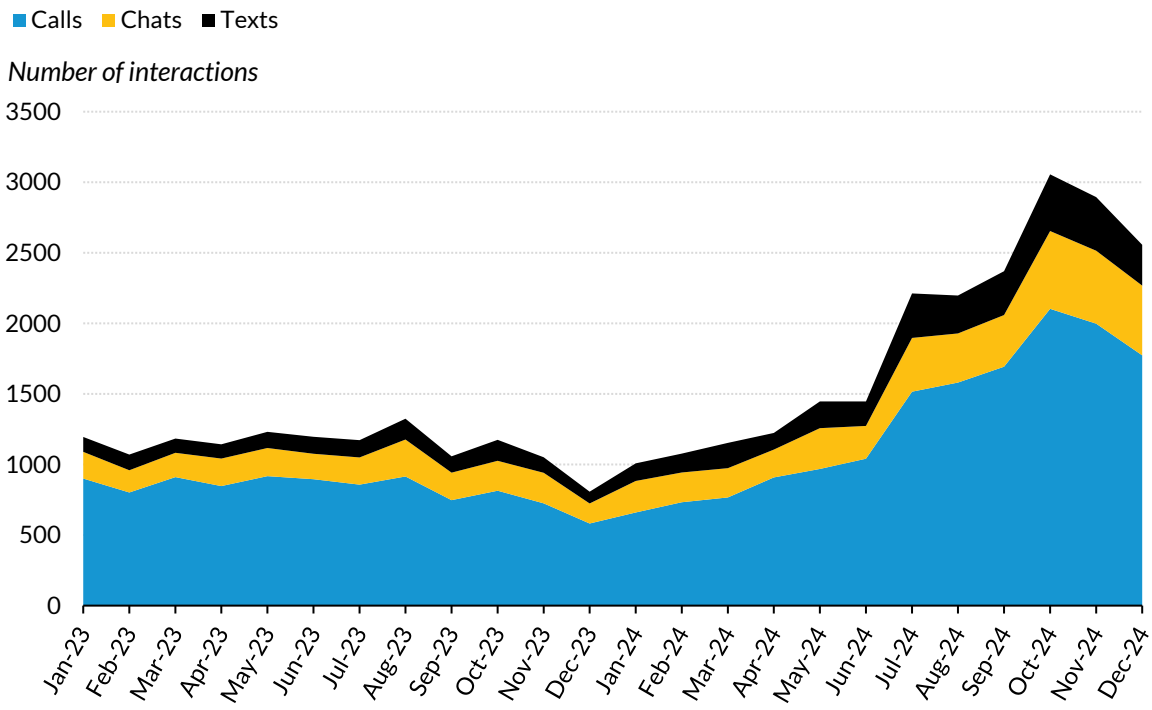
In 2023 and early 2024, the VictimConnect hotline operated on east coast business hours, roughly Monday through Friday from 9:00 am to 5:00 pm. Throughout 2024 these hours gradually expanded, adding in more hours at night and on the weekends until it achieved close to 24/7 availability. NCVC leadership had long held this as a goal, but the expansion took additional planning, funding, and training for VAS. As NCVC increased VictimConnect's hours throughout 2024, the hotline usage increased: the

average number of visitors per month jumped from 1,134 in 2023 to 2,548 in the second half of 2024, demonstrating a clear demand for hotline services. As shown in figure 3, there is still fluctuation across months with noticeable dips during the holiday months of November and December and jumps during January, some summer months, and October, possibly reflecting increased awareness activities related to Stalking Awareness Month in January and Domestic Violence Awareness Month in October.

Figure 3 also shows that, on average across 2023 and 2024, **roughly 70 percent of hotline users connected with VAS via phone, followed by nearly 20 percent who connected by online chat and roughly 10 percent who connected by text message**. Over the two-year period, the share of calls slightly decreased as the share of chats and texts increased. Specifically, the percentage of calls, chats, and texts shifted from 75 percent, 15 percent, and 9 percent, respectively, in the first quarter of 2023 to 69 percent, 18 percent, and 13 percent, respectively, in the last quarter of 2024.

FIGURE 3

VictimConnect Hotline Interactions by Month and Modality, 2023–24



URBAN INSTITUTE

Source: Hotline performance data collected by the National Center for Victims of Crime and shared with the Urban Institute.

The visitor survey revealed some differences in who uses which modality. For example, surveyed visitors under age 35 and male visitors were more likely to chat or text than call VAS. Those who were

employed at least part time were more likely to contact VAS by phone than by chat or text. Type of victimization may also impact modality: those who experienced IPV or sexual assault were less likely to reach out by phone those who did not report those crimes, whereas visitors who experienced non-sexual harassment and identity theft were less likely to reach out by chat than those who did not report those crimes.

Reflecting the stated operating hours of the helpline for most of the year, nearly half of 2024 interactions occurred during the afternoon (12:00 pm to 4:59 pm) with another third occurring in the morning (5:00 am to 11:59 pm) during which over 60 percent of visitors connected by phone. However, the share of visitors connecting by chat and text increased at night: between 10:00 pm and 4:59 am, 31 percent of visitors chatted, 23 percent texted, and only 47 percent of visitors called. Similarly, visitors contacted the hotline fairly consistently on weekdays with slightly higher visitation on Mondays and Fridays. There was little overall difference in modality usage by day of the week, although data shows a slight increase in text interactions on Saturdays (20 percent compared with roughly 16 percent) and a slight increase in chat interactions on Sundays (27 percent compared with 22 percent).

The average length of interactions observed by Urban was 24 minutes, with clear differences by modality. Observed phone calls lasted on average 12 minutes, compared with 32 minutes for chats and 41 minutes for texts. VictimConnect staff reported these differences as well and shared their perceived explanations in interviews. They believe calls are shorter and more direct because visitors are more engaged, whereas visitors take longer to respond over chat and text because they can more easily walk away or get distracted by something else. There are also differences in length of interaction by time of day: interactions in the evening and afternoon have statistically shorter times (averaging 18 minutes and 21 minutes, respectively) compared with the longer interactions in the morning (28 minutes on average) and at night (39 minutes on average). Interactions lasting longer at night may be due to the longer duration of chats and texts, which are more common at night than other times of day.

VictimConnect's hotline operating platform had an average uptime of 99.95 percent in 2022, 99.96 percent in 2023, and 99.79 percent in 2024 (the latter due to a small dip in January and February). Overall, **there were no technological challenges in 90 percent of interactions observed by Urban and 91 percent of interactions surveyed by VAS**. For the few times technology problems occurred, audio issues and being disconnected unexpectedly were the most common challenges identified by staff and observed by Urban. However, many of those challenges were thought to be related to the visitors' technical difficulties rather than the platform's. Another challenge occurred when other calls came though while VAS was on the phone with a visitor, which VAS had to decline. Staff report that aside from the occasional technological challenges, their hotline platform meets visitors' needs.

Privacy Protections

As critical components of VictimConnect, **anonymity and confidentiality are established through technological protections built into the website, hotline platform** that NCVC had contracted for use during the study period**, and VAS protocols**, as follows.

- The website has an escape function.
- The platform does not record or track IP addresses and it does not allow hotline staff to see visitors' phone number on calls or texts.
- Calls with visitors are not recorded. Chat and text transcriptions are encrypted and maintained in the system accessible only to staff with supervisor-level clearance.
- Visitors are not allowed to share photos or files through the platform.

When visitors are inactive on chat or text, they are automatically disconnected from VAS. VAS sends a warning and then ends the interaction after five minutes of inactivity on chats and 15 minutes on texts. This feature helps maintain the visitor's anonymity and makes the queue more efficient but makes it more difficult to reconnect the visitor to the same VAS if the visitor reconnects. Though not required, many VAS also encourage texting visitors to delete the texts from their phone.

Website Usage

For the windows of time provided by Google Analytics in 2023 and 2024, the top page visited by far was the informational page on stalking, surpassing even the homepage. In 2023, 25 percent of page hits were for the stalking page followed by the homepage (13 percent), the online chat with VAS and the resource map (6 percent each), and the financial fraud informational page (5 percent). The top five pages were the same in 2024 but with a slight decrease in the ratio of visitors to the stalking page (20 percent) and increase in rate of visits to the resource map (8 percent). The visitors survey also showed some differences by types of victims, with **visitors who reported IPV, economic crimes, and stalking more likely to just use the website than to contact VAS**.

In 2023 and 2024, users most often visited the VictimConnect website on their mobile devices (65 percent), followed by desktop computers (34 percent) and tablets (1 percent). Roughly two-thirds of visitors got to the website from a search engine results page, whereas 18 percent arrived by directly typing the website into the browser or from another direct source and 9 percent arrived by clicking a link on another website. This is similar to how visitors indicated they heard about VictimConnect.

Perceptions of Technology and Accessibility

As shared above, surveyed visitors most often chose VictimConnect for its ease of use. When asked about their experience with the technology, 96 percent said it was accessible and 95 percent said it was easy to use (including 13 percent and 18 percent who felt neutral, respectively). Similarly, almost all survey respondents felt positive or neutral about VictimConnect's safety (76 percent agree or strongly agree and 21 percent neutral) and privacy (75 percent agree or strongly agree and 21 percent neutral). Overall, nearly all respondents (92 percent) were satisfied with (or felt neutral about) the technology. **Survey respondents who perceived VictimConnect as easy, accessible, private, and safe were substantially more likely to express high or very high satisfaction with its technology**. Satisfaction percentages were 93 percent, 96 percent, 88 percent, and 91 percent, respectively, among those who rated VictimConnect as easy, accessible, private, and safe, compared with satisfaction percentages of 7 percent, 4 percent, 12 percent, and 9 percent among others.

> **"I do really tremendously appreciate being able to text rather than call!"**
>
> *—VictimConnect visitor*

There were no significant differences in perceptions of the technology between phone, chat, and text users, but there were differences by visitors' age and rurality. Specifically, those under age 35 were *more* likely to rate VictimConnect as easy to use (84 percent, compared to 75 percent of those over age 35), agree it was accessible (87 percent, compared to 81 percent), and express satisfaction with its technology (80 percent, compared to 66 percent). Respondents who lived in rural areas were *less* likely to perceive VictimConnect as easy to use (72 percent, compared to 79 percent of those in urban or suburban area) and *less* likely to be satisfied with the technology (62 percent, compared to 73 percent of those in an urban/suburban area), but there were no differences in perceptions of its accessibility.

While approximately two-thirds of website users and others who did not connect with VAS still thought highly of VictimConnect's technology, visitors who connected with VAS had significantly more positive views. As shown in Figure 4, **visitors who connected with VAS were significantly more likely to report high or very high general technological satisfaction** (80 percent vs 59 percent). Nine out of ten visitors who spoke with VAS also thought VictimConnect was accessible (93 percent compared with 73 percent of those who did not connect), easy to use (90 percent vs 65 percent), safe (89 percent vs 65 percent), and private (87 percent vs 63 percent).

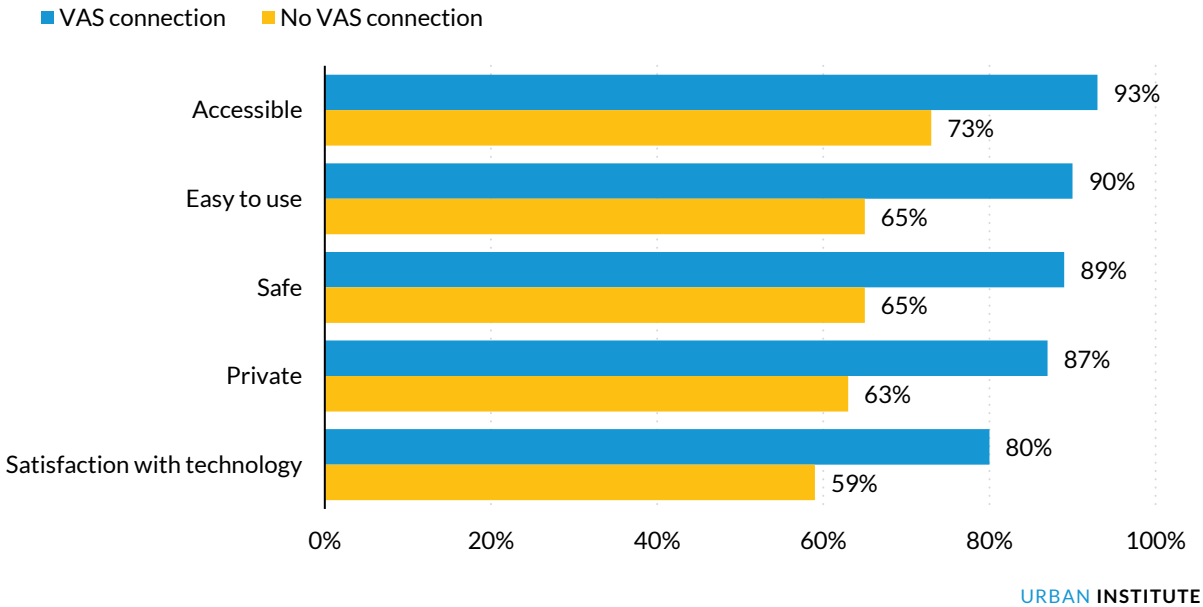
Among the quarter of visitors who wrote in the survey about challenges with VictimConnect, 9 percent were related to technology and 20 percent were related to availability and responsiveness,

most of which have likely been resolved by changes VictimConnect implemented since the surveys were taken. For example, some had issues navigating the platform or connecting, which may be addressed by the new platform VictimConnect switched to in January 2026. Similarly, challenges related to VictimConnect being closed when the visitor tried to connect (with many suggesting VictimConnect expand their hours of operation) were resolved when hours did expand to 24/7 in late 2025.

Others recommended having shorter wait times even when VictimConnect is open, which requires hiring enough staff. For example, one visitor suggested faster response times because "survivors of trauma only have mere seconds sometimes to chat online." Other practical suggestions included sharing wait times with visitors, adding a chime when VAS join a chat, an indicator like an ellipse when VAS are typing, and enlarging the chat box. Finally, some visitor suggestions—such as keeping the chat open to access referral links, having VAS email or text links, or being able to share more personal details with VAS—are not possible due to VictimConnect's privacy protections.

FIGURE 4

Visitor Perceptions of the VictimConnect Technology



Source: Survey of visitors administered by the Urban Institute in 2024 and 2025.

According to staff, the hotline platform generally met visitors' needs and is easy for them to use. Staff also think VAS can easily operate it once they get used to it. Only one staff member said the platform can make it difficult to scroll up in chats to review what had been shared already and another noted it can be hard to enter data about the interaction in one system while navigating the helpline

platform.[14] Leadership indicated that staff have training videos available as refreshers if needed and staff report that there are always supervisors available to assist in case of technical difficulties. Staff also value being able to communicate with other VAS and supervisors to address technology challenges in live time using NCVC's internal messaging system. Moreover, staff think the website is "accessible and works perfectly." Leadership also reported in interviews that they plan to implement the ability to respond in Spanish to visitors over chat and text, which is currently limited.

> **"With other hotlines, they ask [visitors] what you want your name to be and other questions that are sometimes unnecessary. But with VictimConnect it's kind of just like you get put on the queue right away. And the only questions that matter to us are if you're in a safe place to talk and to let them know that we're anonymous and confidential."**
>
> *—Victim assistant specialist*

What Services Are Delivered

Goals and Trauma-Informed Approaches

According to staff, VictimConnect's goal is to offer visitors emotional support, identify specific needs, and provide relevant local and national resources that best suit their needs. VAS are instructed to ensure that visitors are in a physically safe place to talk and inform them that VictimConnect is anonymous and confidential at the start of each interaction. VAS assessed safety in 97 percent of interactions observed by Urban and conveyed anonymity in over 95 percent of interactions surveyed and 90 percent of observed interactions. If they did not, it was often because a phone visitor was too distraught to let VAS speak or a chat or text visitor never responded after the initial message.

Along with anonymity, confidentiality, and emotional support, staff reported employing the following trauma-informed practices:

- Interviewed VAS reported being careful to only ask for details necessary to share resources that meet the visitor's needs and to not pry beyond what the visitor is comfortable disclosing.
- Some visitors may feel hesitant speaking with VAS if they believe that the hotline is connected to a government entity, so VAS reemphasize VictimConnect's independence and anonymity.
- VAS are trained to refer victims to local resources first; if they cannot find any local or statewide resources, they will look for national resources. National resources are generally a last resort because they usually cannot provide direct assistance or as tailored of information.

- If a visitor reconnects after being disconnected, staff will use their internal messaging system to figure out which VAS they had spoken with and if they are free to take the interaction so the visitor does not have to repeat their needs and what had already been discussed.
- Warm transfers or handoffs are when VAS call an external provider on behalf of a visitor, ensure someone is available, and provide context before connecting the visitor. These can reduce time and burden for the victim. VAS executed warm transfers for visitors occasionally, most often to well-known providers, but it is not currently standard practice.
- If a visitor has multiple needs, VAS may ask the visitor directly what would be the most helpful or provide multiple options, often creating a "hierarchy" of needs with visitors to connect them with the resources that may provide the most immediate relief.

Services Provided

VAS record the services discussed and provided after each interaction. In 2023 and 2024, the top five services discussed were crime reporting, advocacy, civil legal services, safety planning, and victim rights referrals. However, as shown in table 4, there are some clear differences by year, with a **drop in the frequency of discussing advocacy and victim rights referrals by nearly half and an increase in the frequency of discussing hotlines, crisis counseling, and mental health services**. Similarly, and aligned with VictimConnect's overarching goals, the top services VAS documented providing were emotional support, information on hotlines, information on safety planning and victim rights, and referrals.

TABLE 4

Services Discussed with Visitors as Reported by VAS, 2023 and 2024

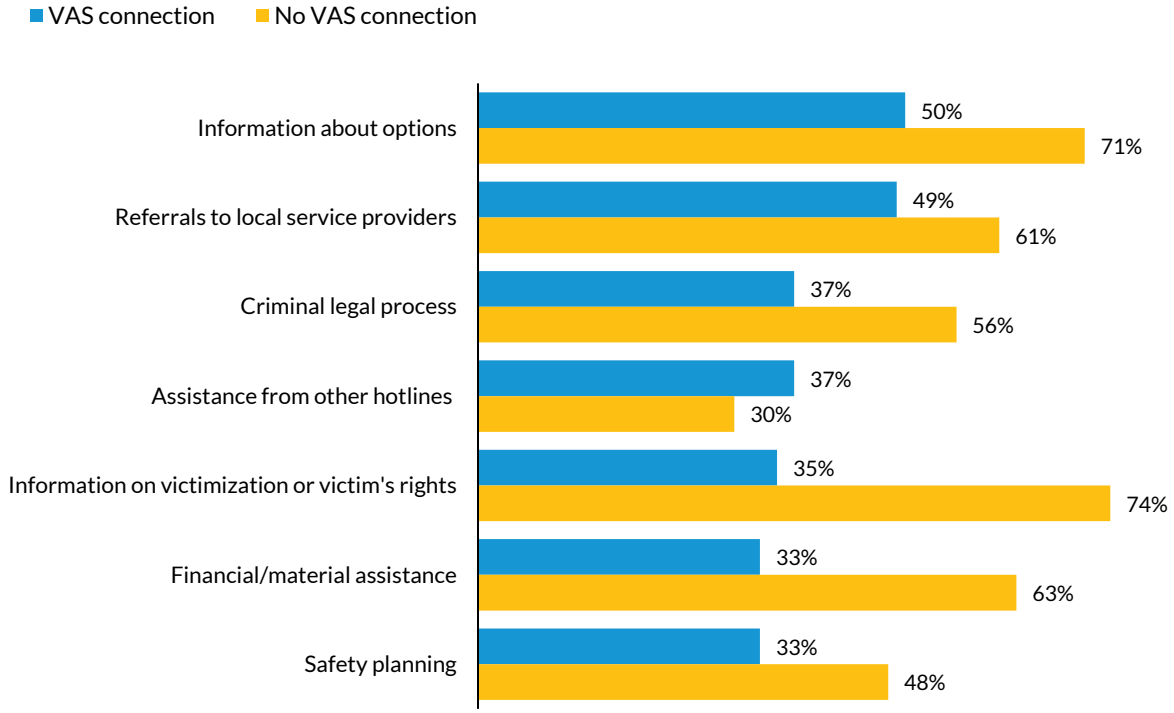
Characteristics	Times discussed 2023	Percentage of 2023 interactions	Times discussed 2024	Percentage of 2024 interactions
Crime reporting	5,514	41%	6,147	39%
Advocacy	5,440	40%	3,704	23%
Civil legal services	3,349	25%	2,778	18%
Safety planning	3,076	23%	2,820	18%
Victim rights referrals	3,300	24%	1,968	12%
Case management	1,919	14%	1,946	12%
Hotlines	1,379	10%	2,431	15%
Crisis counseling	1,271	9%	2,370	15%
Financial assistance	1,596	12%	1,557	10%
Criminal legal services	1,205	9%	1,349	9%
Emergency shelter	861	6%	887	6%
Mental health services	591	4%	1,140	7%
Long-term housing	677	5%	559	4%
Support groups	376	3%	557	4%
General social services	248	2%	576	4%

Source: NCVC performance data shared with the Urban Institute in 2025.

There are some notable similarities and differences in the services reported by visitors surveyed. Overall, more than half of those surveyed said they discussed or searched for information about their options (62 percent) or their rights (56 percent) or got referrals to other services (55 percent). Nearly half of their interactions also focused on financial assistance (49 percent) or the legal process (47 percent). As shown in figure 5, there are some statistically significant differences by whether the visitor connected with VAS. Those who connected with VAS reported fewer topics discussed than what those who did not connect said they were hoping to get information about from VictimConnect. The only topic identified more by those who connected with VAS was assistance from other hotlines.

FIGURE 5

Topics VictimConnect Visitors Sought Information About or Discussed with VAS



URBAN INSTITUTE

Source: Survey of visitors administered by the Urban Institute in 2024 and 2025.

According to NCVC's 2023 and 2024 demographics database, nearly 70 percent of visitors who spoke with VAS received a referral to another provider, compared to 26 percent of interactions in which they deemed no referral was needed and 4 percent in which the visitor declined a referral. This aligns with Urban's confidential observations and VAS surveys, in which referrals and contact information were provided in 74 percent and 72 percent of interactions, respectively.

VAS documented most often providing referrals to victim service programs (made in 48 percent of interactions in 2023 and 2024), followed by other support services (25 percent of interactions) and crime victim compensation programs (7 percent of interactions). In Urban's observations, other than general victim services referred to in 17 percent of interactions, visitors most received contact information for legal assistance (40 percent), crime reporting (24 percent), financial assistance (23 percent), case management (23 percent), and housing or shelters (19 percent).

Of the most common victimizations reported in the staff survey, staff recommended external resources at or above the average rate of 72 percent for visitors experiencing IPV (81 percent), family violence (76 percent), economic crimes (76 percent), stalking (75 percent), and assault (72 percent). VAS offered a referral less often than the average rate for visitors reporting sexual harassment (64 percent), nonsexual harassment (63 percent), and sexual assault (59 percent).

Perceptions of Services

VictimConnect staff, NCVC leadership, and external partners perceive that **VictimConnect fills a critical need as a national information and referral service for victims of all crime types**. They identified that it can successfully fill gaps in communities that do not have a lot of connections for victims. These perspectives were confirmed in Urban's analysis of three data sources: observed interactions, visitor surveys, and VAS surveys following interactions. Foremost, the referrals and resources provided by VictimConnect were perceived as meeting visitors' needs and the services provided were considered helpful. More specifically:

- In 89 percent of observed interactions, Urban staff thought VAS was somewhat to very helpful in the information provided to victims and in connecting them to relevant services.
- Two-thirds (64 percent) of surveyed visitors agreed or strongly agreed their VictimConnect interaction was helpful while only 9 percent said it was unhelpful.
- In 72 percent of VAS-surveyed interactions, VAS thought the session was helpful or very helpful to the visitor whereas 16 percent thought it was neither helpful nor unhelpful.

The staff survey also revealed nuances by modality and type of service provided. Overall, as shown in table 5, VAS thought they were more helpful on calls and less helpful over texts. Specifically, 76 percent of calls, 67 percent of chats, and 55 percent of texts were seen as helpful or very helpful. Regarding specific aspects of their interactions, VAS rated their emotional support as helpful or very helpful in 88 percent of relevant interactions, the referrals they provided as helpful or very helpful in 87 percent of relevant interactions, the information they provided as helpful or very helpful in 85 percent

of relevant interactions, and the problem solving or safety planning they provided as helpful in 78 percent of relevant interactions. VAS also thought they were slightly more helpful over chat for all types of services except for referrals, which they thought were more helpful over phone.

TABLE 5

VAS Perceptions of Helpfulness by Modality

Modality	Helpfulness overall	Helpfulness on calls	Helpfulness on chats	Helpfulness on texts
Session overall	72%	76%	67%	55%
Emotional support	88%	88%	91%	79%
Referrals	87%	89%	84%	83%
Information	85%	84%	89%	79%
Safety planning and problem solving	78%	77%	84%	77%

Source: Survey of VictimConnect victim assistant specialists administered by the Urban Institute in 2024 and 2025.

Half of the interactions that VAS rated as unhelpful in the staff survey were due to technology issues or the visitor not responding. Interactions were also classified as not being helpful when the visitor was too upset to engage with VAS or experiencing mental health challenges, expected more direct or emergency services, or requested help for experiences for which services do not exist, such as gang stalking. Staff further explained in interviews that when visitors are difficult to understand due to their emotional state (e.g., too quiet, aggressive, angry, crying), VAS are consequently unable to clearly identify needs or effectively convey information. Similarly, VAS reported their own and visitors' frustration when visitors had already tried many of the resources VAS suggested or when VAS were unable to find an available referral for a visitors' unique circumstances. VAS also sometimes experience uncertainty understanding how to respond to legal questions when they are not a legal service. Lastly, interviewed and surveyed VAS expressed challenges related to balancing a high volume of interactions and occasionally needing to end a call before the visitor was ready to help other people in the queue.

> **"'Gang stalking' resources are very limited and I always feel bad when I tell them there are limited resources. It's especially difficult to refer them to a mental health hotline because I don't want to come off as invalidating them."**
>
> *—Victim assistant specialist*

Overall, **most visitors who spoke to VAS (80 percent) agreed the referrals met the visitor's needs**. In comparison, half of those surveyed who did not connect with VAS reported finding information on the website to meet their needs (51 percent) and two-thirds thought the information on the website

was clearly explained in a way they understood (65 percent). Similar to VAS perceptions, visitors who called by phone were more likely to report (89 percent) that their needs were met than visitors who connected by chat or text (79 percent). Although only 7 percent of all survey responses, some visitors wished there were more resources and referrals where they live, for their specific situation, or in a specific category (e.g., legal, moving, financial support).

> **"I had no challenges. I understood everything as it was explained in a very easy to understand way and excellent referrals."**
>
> *—VictimConnect visitor*

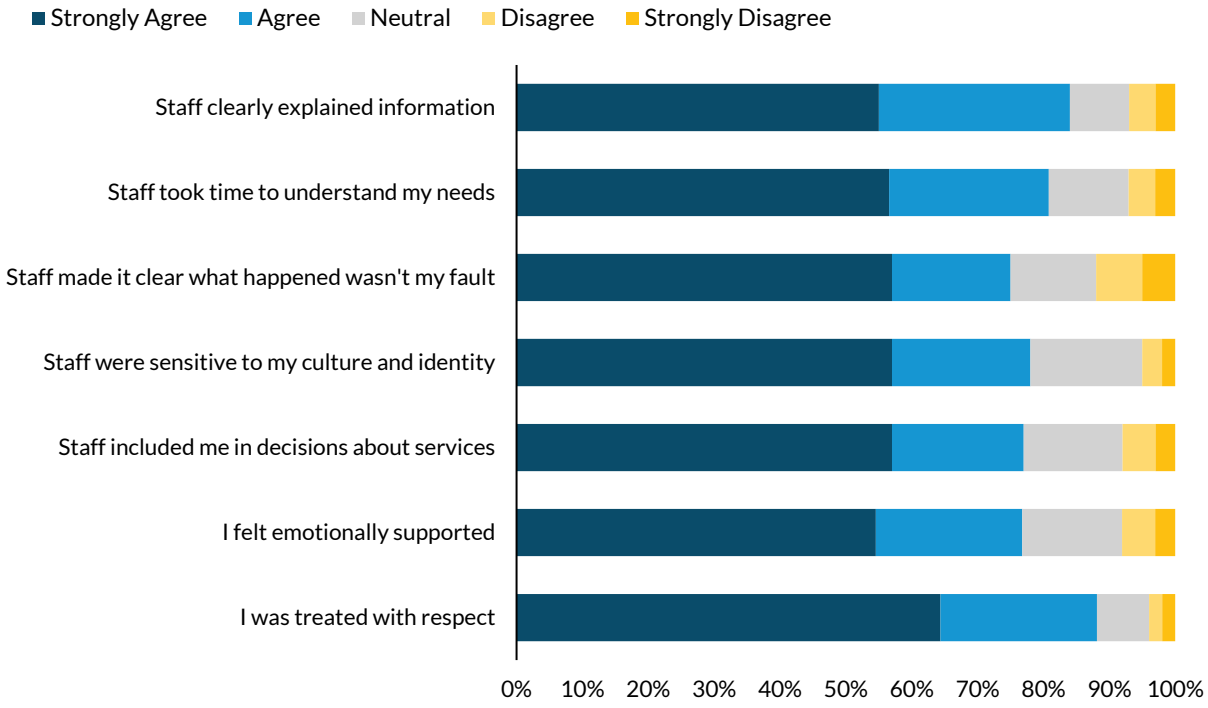
There were some differences in perceptions of helpfulness and referrals meeting visitors' needs by victimization type. From VAS' perspective about the most common victimizations, interactions involving IPV (83 percent), economic crimes (82 percent), sexual harassment (82 percent), and family violence (79 percent) were helpful more often than interactions involving assault (68 percent), stalking (67 percent), nonsexual harassment (67 percent), and sexual assault (59 percent). From visitors' perspective, the type of harm they reported was generally not associated with perceived helpfulness or having their needs met, with a few statistically significant exceptions. Those who experienced stalking were less likely to say the information or referrals matched their needs or was helpful, those who experienced assault were less likely to say the information or referrals matched their needs, and those who experienced economic crimes were less likely to perceive the interaction as helpful.[15]

> **"I really feel it was wonderful and I felt so good speaking with the woman that I spoke to. She was very comforting and she made me feel like we were working together as team in finding resources that could help me."**
>
> *—VictimConnect visitor*

Visitors who connected with VAS reported extremely positive treatment by staff, as shown in figure 6. Eight out of ten visitors agreed or strongly agreed that staff explained information in a way they could understand and took time to understand their needs, with over half strongly agreed. Over half strongly agreed and three-quarters agreed or strongly agreed that staff made it clear what happened was not the visitor's fault, were sensitive to aspects of the visitor's culture or identity that were important to them, included them in decisions about the services they received, and emotionally supported them. Finally, nine in 10 visitors agreed or strongly agreed, with 65 percent strongly agreeing that staff treated them with respect.

FIGURE 6

Visitor Perceptions of VictimConnect Staff Treatment



URBAN INSTITUTE

Source: Survey of visitors administered by the Urban Institute in 2024 and 2025.

Visitors who connected with VAS were asked to rate their satisfaction with the person they talked to, and 79 percent were either very satisfied (59 percent) or somewhat satisfied (20 percent). Visitors who reported positive treatment (e.g., being treated with respect, understanding, emotional support, sensitivity to their culture or identity) were two to three times more likely to express satisfaction with VAS. Strong satisfaction with staff was also associated with perceiving that VictimConnect was easy to use and accessible, the information and referrals they received met their needs, and that VictimConnect was helpful. Mode of connection was not a significant predictor of satisfaction with staff.

Two-thirds of visitors reported overall satisfaction with VictimConnect (66 percent). This was significantly higher for those who connected with VAS (80 percent) compared with those who did not (53 percent). Also, those who reported satisfaction with VictimConnect's technology and staff were significantly and substantially more likely to express overall satisfaction with VictimConnect (88 percent and 92 percent satisfied overall, respectively, compared with 14 percent among those not satisfied with technology and 33 percent among those not satisfied with VAS).

Visitors' feelings of satisfaction with VictimConnect were also related to feeling respected, supported, and understood by VAS, as well as having their needs met and finding services helpful. No statistically significant differences emerged for mode of connection or for experiencing sexual or non-sexual harassment, IPV, assault/attempted homicide, family abuse, childhood abuse, and sexual assault. Visitors reported slightly lower overall satisfaction if they experienced stalking (62 percent compared with 68 percent who did not experience stalking) or economic crimes (54 percent compared with 69 percent who did not experience economic crimes).

> **"I'm pretty sure [my VAS] saved my life."**
>
> *—VictimConnect visitor*

How VictimConnect Prepares Staff to Deliver Services

NCVC seeks to enable staff to deliver high quality and accurate services by providing initial training and ongoing training and support for VAS. They also maintain an internal database of crimes and resources for VAS to reference during interactions. Staff reported in interviews and on surveys about the adequacy and comprehensiveness of these approaches and their levels of preparation and confidence.

VAS Preparation

According to staff interviews, hotline operators are required to participate in 80 hours of formal training. Prospective VAS are mandated to attend 40 hours of training covering VC background, service delivery logistics, different types of victimizations, and vicarious trauma. They spend another 40 hours shadowing more tenured VAS and then being shadowed by supervisors and given feedback on their interactions. The training process and content is the same for full-time staff, on-call VAS, and volunteers. Because VAS work remotely, the trainings are completed virtually with a mix of live sessions, pre-recorded lectures, and supplementary learning material. During this two-week training period, VAS are also given opportunities to discuss lessons and ask questions with supervisors.

VAS generally agreed that the trainings are adequate to prepare them and mostly helpful, particularly for those who do not have a background in victim services. Several also noted that there is only so much the lectures can teach and that opportunities to shadow experienced VAS are most impactful. Some staff commented that future VAS could benefit from modalities that allow more interaction and a longer training period to allow staff to process dense and heavy information, as well as more time to shadow other VAS to become familiar with interaction processes. Current training materials are derived from a variety of sources and VAS expressed a desire for more continually

updated and original training materials. Leadership reported they are already in the process of making these updates. VAS across the board agreed that **interactions with victims of gang stalking were the most difficult to navigate and wanted more training to deal with those situations**.

> **"The best [training] is the opportunity to shadow. People will face situations that are nuanced."**
>
> *—VictimConnect leadership*

Leadership acknowledged that retention can be a challenge, as with most crisis hotlines, and staff identified several ways they try to support staff. Beyond initial training, VASs are provided with ongoing monthly or bimonthly learning on topics and areas of improvement identified by supervisors, such as vicarious trauma and trends in victimization. Staff specifically received vicarious trauma training every two years after their initial training, which aims to help staff stay emotionally healthy while supporting crime victims safely. However, on-call staff who do not work standard operating hours shared that their schedule prevents them from attending potentially helpful meetings with the rest of the team.

Hotline staff have regular one-on-one meetings with supervisors to check on their well-being or discuss areas for improvement and supervisors conduct regular quality assurance checks, whether every other week or month, using a standard rubric. The hotline platform allows supervisors to silently observe interactions without the visitor or VAS aware of their presence. VAS also have start and end of shift operational checklists to follow as well as interaction guidance they can use. Finally, VAS and supervisors use an online internal messaging system during their shifts where VAS can request a supervisor's support during challenging interactions and VAS can share referral recommendations in real time. Collectively, Urban's evaluation finds that **NCVC supports and ongoing training appear to successfully meet the needs of frontline VictimConnect staff**.

Internal Databases

In addition to the resource map available to visitors on the VictimConnect website, hotline staff can search an internal database during interactions for information and referral resources to provide to visitors. Information includes how to interact with victims of mass violence, domestic violence, gang stalking, or difficult or suicidal callers. This internal referral database is more extensive than the external list of resources for VictimConnect web visitors, in part because it often includes direct staff contact numbers that may not be appropriate to share publicly.

Almost all staff think the database is fairly comprehensive, especially national and state services, and that it lists every crime VAS encounter. County and local organizations are harder to maintain because they change a lot more. VictimConnect leadership vets new resources before they are added, but the process could be clearer and it takes effort and time to maintain the database. At one point during the study period, they had been adding two to three resources per week. The former expectation that VAS help update it during their downtime between calls did not work well, so some staff suggested that NCVC assign staff dedicated to ensuring it is kept up to date. VAS also identified two areas to expand: family violence resources beyond those for intimate partners and "gang stalking" resources. Similarly, two of five VAS interviewed said their internal "demographics" database for tracking was inclusive and detailed, but the other three reported that it could do a better job capturing gang stalking.

Of the 232 staff surveys on interactions that included referrals, **VAS were already familiar with the relevant services and resources in half (49 percent) of the interactions**. In another quarter (27 percent) of interactions, they were familiar with some relevant resources but still used the VictimConnect database. Only in 16 percent of interactions were VAS unfamiliar with the resources relevant to visitors' needs and searched online to provide assistance. In 8 percent of interactions they were not familiar with the relevant services and just used the VictimConnect database. There is not a strong correlation between how VAS use the database with their perceptions of the helpfulness of the interaction or their confidence that the resources provided met visitors' needs.

Staff Awareness and Confidence

VAS generally reported feeling very confident about their ability to respond to VictimConnect visitors. **Staff who had previous work experience in victim services and/or operating other hotlines, which were most staff, thought it helped them in their role at VictimConnect**. VAS shared that how they approach a visitor interaction can often depend on a variety of factors, such as the modality of the interaction, the type of victimization the visitor is reaching out about, and whether the visitor is the victim or a family member of the victim.

VAS reported that they were confident or very confident that resources they provided met the visitors' needs 82 percent of the time. Of the most common victimizations that received referrals, VAS reported highest levels of confidence in their recommendations for economic crimes (92 percent of interactions rated confident or very confident), IPV (84 percent), and family violence (82 percent). They reported lower than average confidence for nonsexual harassment (78 percent), stalking (74 percent), and assault or attempted homicide (72 percent). **There was no difference in self-reported helpfulness or confidence by whether VAS was full-time staff or on-call**.

VictimConnect leadership was generally confident in staff's ability to identify appropriate services. They thought VAS' background, their robust training, and the support from supervisors all contributed to VAS' ability to identify resources. Several noted that longer tenured VAS are better able to provide the right referrals than new staff and that all VAS could improve their knowledge of when and to whom to recommend victim compensation programs and prosecution-based victim witness programs.

> **"If there is a service, [victim assistance specialists] will find it."**
>
> *—VictimConnect leadership*

How VictimConnect Supports External Service Delivery

VictimConnect supports external service delivery to crime victims by making accurate referrals to service providers, including through warm transfers. It also facilitates service delivery by convening the National Hotline Consortium (NHC), a group of US victim support and crisis hotlines formed by NCVC.

As described above, roughly 70 percent of VictimConnect's hotline interactions result in a referral, and both visitors and staff agree referrals most frequently match visitors' needs. Although only half of visitors explicitly told VAS they intended to contact the referral (during Urban's observed interactions), 87 percent of surveyed visitors who connected with VAS said they planned to contact the referral.

External providers shared in interviews with Urban a desire to ensure that referrals from and to VictimConnect are appropriate and meaningful. Not having to serve victims that are ineligible or should have been referred elsewhere would help improve efficiency for service providers. It would also improve the care for crime victims by reducing unnecessary steps in their service journey. As a result, stakeholders recommended instituting or increasing opportunities for cross-learning and training between VictimConnect and other providers to continue learning about each other's' services and eligibility requirements, particularly for frontline staff.

> **"An ideal training would be if [hotlines and providers] shared what their organizations are capable of and what an appropriate transfer or referral would be."**
>
> *—External provider*

VictimConnect staff and external providers believe warm transfers reduce the need for victims to reshare traumatic details, increase interaction efficiency, and may reduce call wait times. However, interviews also revealed some challenges in operationalizing warm transfers, including the potential

lack of organizational capacity to take on additional calls or set up proper systems. If structures are not in place to bypass another provider's queue, visitors may be frustrated if VAS offer a warm handoff but cannot reach someone. Although some VAS already make warm transfers to well-known providers, NCVC's goal is to implement warm transfers more uniformly among hotlines. Leadership identified the need for formal agreements and mechanisms to maximize benefits, which requires finding a vendor and securing agreements between providers. For example, one hotline discussed the plan for hotlines to have "their own path code for a priority transfer." VAS also desired training on making warm handoffs.

NCVC is specifically exploring warm transfers through the NHC. Since 2015, the NHC has been the primary way VictimConnect supports collaboration among national hotlines to improve support for victims. NCVC has federal funding to manage the NHC with the goal of facilitating peer learning and advancing best practices. From 2023 to 2025, the NHC has grown from 15 to 23 member hotlines who vary in staff size, reach, victimization focus area, and years of operation. While some hotlines serve a few thousand callers annually with five staff members, others have hundreds of staff and respond to millions of callers annually. Similarly, some have operated hotlines for decades while others are newer.

Hotlines who request or are invited to join the NHC must meet established standards (e.g., be a 501c3, focused on victims or crisis intervention, have updated privacy and record retainment policies), present to the existing group on their mission and operations, and then be voted in as a full member. Members attend quarterly virtual meetings, typically centered around a theme such as warm handoffs or appropriate language during hotline interactions. Members also share information through a listserv. In addition, the NHC has hosted survivor speaker sessions and other listening groups, formed working groups (e.g., financial exploitation, technology), and surveyed members on hotline staff salaries.

NCVC and members reported positive perceptions of and experiences with the NHC. Peer support and learning were the most common motivations for joining that members shared with Urban, including increased knowledge about victimization intersections and policies specific to hotline operations. Benefits of participation included peer support, exposure to new hotline technologies, education on emerging trends and best practices, and an expanded network of service providers for referrals. **Interviewees cited specific impacts of the NHC on their hotline's operations, including identifying vetted vendors, help blocking spam callers, and improving staff wellness**. NCVC staff reported that the compensation survey directly resulted in increased pay for their VAS. The only specific challenge identified was high turnover of staff representing hotlines in the consortium.

> **"I feel really grateful that there's a community that understands. I would do anything for the National Center for Victims of Crime and the Consortium."**

—External provider

Some members requested additional opportunities for collaboration, including a shared, searchable resource directory and more committees (e.g., based on area of focus or how long they have operated). Stakeholders also expressed interest more NHC trainings, such as on technology, communication tools, networking and stakeholder mapping, and how to address mental health challenges that are disclosed alongside the victimization. Other suggestions were for refresher training on safety planning and what it should look like for visitors and for evidence-based and cost-effective strategies for managing hotlines and staying up to date with technology, data management, research, and marketing.

Conclusion and Recommendations

This comprehensive evaluation of VictimConnect synthesized quantitative and qualitative data collected from multiple sources, including visitor surveys, observations of interactions, platform analytics, staff surveys and interviews, and interviews with external providers. Urban's goal was to understand the helpline's operations and the extent to which VictimConnect has been implemented according to NCVC's goals, its policies, and its logic model. Regarding Urban's four overarching research questions,[16] data from visitors, observations, platform analytics, and stakeholders confirm the following:

1. VictimConnect has **increased access** to victim services by offering accessible modes of technology, reaching victims from a range of backgrounds, and referring victims to relevant services. Specifically, VictimConnect fills a critical gap for victims of crime that traditionally have gaps in dedicated services (e.g., stalking, non-sexual harassment, mass violence), polyvictims with multiple needs, and victims who have already tried seeking services elsewhere. Staff surveys and interviews showed VAS to be knowledgeable about victim services and 80 percent of visitors said the referrals they got from VAS met their needs.

2. VictimConnect has **improved delivery** of victim services by operating reliable services as intended through its four technological modalities, including by expanding service availability to 24 hours per day, seven days a week. They achieved 99.9 percent uptime for the hotline and experienced few technology challenges. Visitors and staff perceive the delivery modes to be accessible, easy to use, and appropriate for visitors' needs. Phone, chat, or text were equally accessible but used differently by time of day and certain types of visitors.

3. VictimConnect's platform and VAS behavior are protective of victims' and their loved ones' right to **anonymity and confidentiality**. Staff and visitors nearly all perceived VictimConnect to be private and safe. Policies prioritized privacy protections, such as not collecting data or asking unnecessary questions or not being able to share files over chat/text or reconnect with VAS.

4. VictimConnect has **strengthened the efficiency** of its own services by adequately preparing VAS to successfully interact with visitors and the efficiency of external victim services by managing the NHC partnerships. NCVC is making improvements to their staff training and provide numerous staff supports to improve retention. They also grew the NHC and are exploring mechanisms to implement warm transfers between hotlines. Finally, 70 percent of visitors receive a referral to a wide range of local providers and most intend to follow through.

Fidelity to and Execution of the Logic Model

To achieve the activities and immediate outcomes envisioned, VictimConnect benefited from all identified inputs, including US Office for Victims of Crime funding, technology platform and expertise, leadership support and frontline staffing, training materials, external partners, and available data. NCVC was able to enact most of the proposed activities, including offering four technological modes, converting training to online modules, and partnerships. Some elements like the volunteer program were paused during the transition to 24/7 operations and others like training and technical assistance (TTA) were reenvisioned to focus on the NHC. As a result, NCVC completed or made significant progress toward each output across the five focus areas in the logic model, presented in table 6 below.

TABLE 6

VictimConnect's Progress toward Program Outputs, 2022–25

Outputs	Progress	Summary
Growth in phone, chat, text, and web search interactions	Achieved for hotline; not achieved for website[a]	The average monthly visitors to the hotline increased 125% from 2023 to 2024. The number of website visitors remained at roughly 1,400 per day from the second half of 2023 through the first 9 months of 2024, but visits to the resource map increased.
Growth in range of visitor demographics	Achieved	While the true change in visitor demographics cannot be identified with the given data, VictimConnect maintained a wide range of visitors served in 2023 and 2024 and increased the number of nonnative English speakers served.
Technological platforms have 99.9% uptime	Achieved	The hotline platform averaged 99.9% across 2022 and 2023, and 99.8% across 2024.
Online resources updated	Ongoing	The internal and external resource databases grew over the study period and continue to expand. Leadership is considering changes to ensure they are using the most user-friendly, accessible tools possible and approaches to streamline their maintenance.
Vicarious trauma action plan and performance evaluation measures implemented	Achieved	Vicarious trauma training occurs after hire and every two years. Supervisors regularly check in with staff and encourage them to communicate with supervisors and each other for real-time support with difficult interactions. NCVC implemented regular, standardized quality assurance checks and performance data checks.
Online training modules created for staff	Ongoing	Updated training modules are being developed, though the number of new training modules that have been developed during the study period is unknown.
Implementation of volunteer program	On hold	The volunteer program was on hold for most of the study period as VictimConnect transitioned to 24/7 operations but is currently being reinstated. The first cohort of volunteers is anticipated to start in early 2026.
Number of outreach materials expanded	Achieved and Ongoing	Staff reported increasing outreach opportunities and materials in spring 2023 and they continue to increase their outreach efforts.

Outputs	Progress	Summary
New collaborations established	Achieved and Ongoing	8 new hotlines were added to the NHC in 2023 and 2024. Outreach methods were also developed and conducted with new partners and leadership is open to establishing new collaborations within and outside the NHC.
Publication of TTA guiding principles	Not yet achieved	In 2020, VictimConnect planned to develop a strategy for providing TTA to other service providers. That goal was replaced by a focus on maintaining the National Hotline Consortium. As a result, guiding principles for TTA have not been developed.
Agencies solicit TTA from VictimConnect	Ongoing	VictimConnect does not provide TTA to agencies beyond the NHC, but members receive relevant training and request support and collaboration on hotline operations. They will also respond to requests if possible whether or not from an NHC member.
Evaluation and implementation toolkit created	Achieved and Ongoing	Evaluation toolkit was created through the formative evaluation in 2020; implementation factsheets have been created; additional implementation tools are projected.
New ways to use technology to support victims are tested and implemented	Achieved and Ongoing	Leadership implemented changes to make the hotline platform more user-friendly, reorganized their demographics database to better track and learn from data, and are exploring adding Spanish capabilities to chats and texts.

Source: Urban Institute evaluation of the VictimConnect Resource Center.
Note: NHC = National Hotline Consortium; TTA = training and technical assistance.
[a] Ongoing progress implies that VictimConnect is continuing the output work or task past the end of the grant.

Furthermore, VictimConnect achieved the two core implementation outcomes identified in its logic model. First, **visitors received reliable access to VictimConnect platforms.** Staff and visitors all perceived VictimConnect to be accessible and easy to use for visitors and data show high demand across all three modalities. Second, **visitors received access to up-to-date and high-quality referrals.** Visitors and staff agreed that referrals met visitors' needs and VAS used both the internal resource database and internet searches to make sure the referrals were accurate and relevant.

Recommendations

These findings lead to several important recommendations for how VictimConnect can continue strengthening the response to crime victims nationally. The following recommendations may also inform the work of other hotline operators, researchers, and funders seeking to improve victim services.

- **Expand service and referral options for specific victimization experiences**, particularly stalking, non-sexual harassment, and gang stalking. Interactions with these visitors were often the most challenging for VAS due to the lack of resources available and both staff and stakeholders identified the need to collaboratively explore options to provide better responses.

- **Implement cross-training with other hotlines and frequently referred service providers**. Staff and external partners want each other to have a better understanding of the services they offer and who they serve so that referrals are accurate. More accurate referrals would reduce wasted time for both visitors and staff. Interviewees recommended holding training sessions that bring together frontline staff from both organizations.
- **Continue increasing activities and partnerships to build awareness of VictimConnect**. Staff, external partners, and visitors support NCVC's plans to conduct more outreach for VictimConnect nationally, including more presence at community-based events and targeted awareness building with harder-to-reach populations. They also think additional partnerships with law enforcement, prosecutors, and state-level agencies or offices could increase use. However, participants warn that VictimConnect should only engage in these activities to increase usage if they have the **staffing to support the increased demand**.
- **Maintain the National Hotline Consortium.** Continue providing opportunities for collaboration and mutual learning, while adding new topics and avenues for communication based on the preferences of the group.
- **Implement updated training modules and modalities.** NCVC is reportedly in the process of updating training to be more interactive and uniform, which would meet staff preferences. Staff also suggested incorporating additional training on gang stalking, the criminal justice process and how victim advocacy fits within it, crime victim compensation, and how to conduct a warm transfer. Lastly, training should include more time and opportunities for shadowing.
- **Dedicate staff time to expanding and vetting the internal resource directory for VAS.** A more reliable internal referral resource would help make interactions more efficient but cannot be done in an ad hoc manner, it requires staff to be assigned and given resources to maintain.
- **Integrate data and evaluation activities.** VictimConnect should continue and/or implement ongoing data tracking and assessment for regular performance evaluation. Updated internal demographics database metrics would also lead to more accurate tracking, particularly for subgroups such as gang stalking and gender-based violence victims. An updated logic model that reflects current operations could also support ongoing performance assessment.
- **Increase or sustain funding.** VictimConnect and other hotlines would be more stable and successful with adequate funding from different types of funding sources to support 24/7 operations, sufficient staffing to minimize wait times, community outreach, and the NHC.

The findings from this study also illuminate key takeaways and recommendations for other technology-based helplines and the broader field of victim services. First, **there is clearly a need for 24/7 services** as demonstrated by the sharp increase in visitors as VictimConnect expanded its services. Similarly, programs should prioritize offering **multiple modes of connection** given that phone calls and chat/text options appear to help VictimConnect accommodate preferences by time of day, age, sex, and crime type. There were also few statistical differences in services provided by and perceptions of the

three different modes. These technology-based services must also be **accessible, safe, private, and easy to use** as the most important factors to visitors when choosing VictimConnect and in their overall satisfaction with their service experience.

Services should offer a combination of information available online and from trained staff. Some visitors who found information on the VictimConnect website reported having their needs met, but at a significantly lower rate than those who interacted with VAS directly by phone, chat, or text. Across all measures, visitors who connected with staff had better experiences. Relatedly, staff believe part of VictimConnect's strength is in offering a **simplified service model** that does not ask a lot from victims: they ask for little information, instead focusing on a victim-driven interaction that offers emotional support and resources. Other programs can benefit from their trauma-informed practices. This study also provides victimization-specific data that can inform victimization-specific and specific types of direct service providers about the needs and gaps identified by potential clients. Finally, we recommend programs and funders invest in rigorous evaluation with strong researcher-practitioner partnerships, data tracking and performance assessment, and replication studies that build off this study.

Appendix: Logic Model

VictimConnect Logic Model

GOAL: Ensure that victims of all backgrounds and crime types have access to secure, high-quality resources supportive of recovery and empowerment.

OBJECTIVES –>	INPUTS –>	ACTIVITIES –>	OUTPUTS –>
Visitors • Assemble and make accessible resources and assistance supportive of the recovery and empowerment of victims of all backgrounds and crime types in communities nationwide	**Visitors** • The Office for Victims of Crime funds VictimConnect's services to visitors, i.e. victims and their support networks (family, friends, service providers, etc.)	**Visitors** • VictimConnect uses four modalities to provide resources to visitors: softphones, online chat, text messaging, and web resources	**Visitors** • Number and percent change of softphone, text, chat, and web search interactions with visitors • Percent change in diversity of visitor demographics
Technology • Develop an innovative and reliable VictimConnect technological platform that provides secure access to resources for all crime victims	**Technology** • National Center for Victims of Crime (NCVC) technology team • Web-based phone, text, and chat platforms	**Technology** • Implement an omni-channel, cloud contact center • Codify technology testing protocols • Develop protocols for updating and expanding online resources	**Technology** • Technological platforms have 99.999% uptime during operational hours • Number and percent change of online resources updated
VictimConnect Staff & Volunteers • Maintain a VictimConnect infrastructure of knowledgeable, compassionate, motivated, and vicarious trauma-informed staff and volunteers	**VictimConnect Staff & Volunteers** • VictimConnect leadership team • Victim Assistance Specialists (VAS) • NCVC technology team • Existing VAS training materials	**VictimConnect Staff & Volunteers** • Develop vicarious trauma action plan (e.g., professional development, staff wellness) • Convert training to online modules • Develop volunteer program	**VictimConnect Staff & Volunteers** • Implementation of vicarious trauma action plan and performance evaluation measures • Number of online modules created • Implementation of volunteer program
Outreach & Collaboration • Operate a resource center widely known and accessible to service providers in diverse communities • Conduct outreach efforts and collaborate with other programs	**Outreach & Collaboration** • National Hotline Consortium members • Intra- and inter-agency victim assistance programs/providers • NCVC Marketing team	**Outreach & Collaboration** • Update outreach materials • Partner with intra- and inter-agency programs/providers • Develop a strategy for providing TTA to other service programs/providers	**Outreach & Collaboration** • Number of outreach materials expanded • Number of new collaborations • Publication of TTA guiding principles • Number of agencies that request our TTA
Evaluation & Improvement • Continually evaluate VictimConnect's implementation fidelity and outcomes, making program improvements in response to evaluation findings	**Evaluation & Improvement** • Existing VictimConnect literature and data • Partnership with the Urban Institute	**Evaluation & Improvement** • Develop evaluability, research capacity, and implementation fidelity processes • Use evaluation to explore new ways to best support victims via technology	**Evaluation & Improvement** • Evaluability assessment, evaluation plan, & implementation toolkit created • New ways to use technology to support victims are tested and implemented

OUTCOMES
Visitors • Visitors have reliable access to VictimConnect call, chat, text, and website platforms • Visitors have access up-to-date, high-quality referrals • Visitors are more satisfied with their interactions with VASs • A greater number of visitors access resources that VictimConnect shares • A greater diversity of victims are served, including underserved victims • Visitors have increased knowledge about different victimization experiences and available services • Visitors' needs are addressed in a streamlined and comprehensive manner
Other Service Providers • Other providers have an increased capacity to deliver high-quality services to victims of crime • Other providers turn to VictimConnect as a model for best practices for responsibly and effectively using technology to support crime victims • Other programs are encouraged to integrate research into their practice

Assumptions
- To best support and empower victims, service providers should be victim-centered, trauma-informed, and protective of victims' safety
- In the aftermath of crime, victims need access to helpful information, as well as practical, emotional, and financial support

External Factors
- Crime rates and trends
- Policies or laws that affect the criminal or civil justice processes (e.g., changes to statutes of limitations)
- Government operations (e.g., a government shutdown)
- Funding for victim services generally, including other victim assistance providers
- Victim access to technology (i.e., internet, phone service)

JANUARY 2020

Notes

[1] Additional details about the methodology and the protocols are included in the full evaluation report (Dusenbery and Yahner 2026).

[2] The evaluation also assessed VictimConnect's implementation according to Proctor and colleagues' implementation outcome concepts, which is described in a forthcoming scholarly journal article.

[3] The victimization options available in the survey were adult survivor of childhood abuse, arson, assault/attempted homicide, burglary, elder abuse or neglect, family violence or abuse (family violence), non-sexual harassment, sexual harassment, labor trafficking, sex trafficking, homicide, identity theft/fraud/economic crimes (economic crimes), intimate partner violence (IPV), custodial kidnapping, noncustodial kidnapping, mass event, nonconsensual pornography, robbery, sexual assault, stalking, terrorism, traffic/vehicle related crime (DWI/DUI), traffic/vehicle related crime (other), violation of a court or protective order.

[4] We created a proxy variable to measure experiences of gang stalking among visitor survey respondents as those who self-identified experiences of both stalking and non-sexual harassment.

[5] A mass event was defined in the visitor survey as a "violent act causing injury to a large number of people."

[6] Significant findings of legal assistance needed by victimization type: stalking (54 percent vs 41 percent), non-sexual harassment (57 percent vs 40 percent), gang stalking (58 percent vs 42 percent), IPV (54 percent vs 45 percent), assault (55 percent vs 44 percent), family violence (56 percent vs 44 percent), childhood abuse (54 percent vs 45 percent), economic crimes (59 percent vs 44 percent), and sexual assault (60 percent vs 44 percent).

[7] Significant findings of financial assistance needed by victimization type: IPV (59 percent vs 35 percent who dd not report IPV), family violence (54 percent vs 40 percent), childhood abuse (56 percent vs 39 percent), assault (61 percent vs 35 percent), economic crimes (49 percent vs 42 percent), sexual assault (52 percent vs 41 percent), stalking (38 percent versus 49 percent).

[8] Significant findings of crime reporting needed by victimization type: stalking (55 percent versus 29 percent of visitors who did not report stalking), non-sexual harassment (55 percent versus 32 percent), gang stalking (58 percent versus 33 percent), economic crimes (68 percent vs 33 percent), and IPV (35 percent versus 46 percent).

[9] Significant findings of housing or shelters needed by victimization type: non-sexual harassment (40 percent vs 31 percent), gang stalking (41 percent vs 32 percent), IPV (52 percent vs 26 percent), assault (51 percent vs 28 percent), family violence (50 percent vs 30 percent), childhood abuse (49 percent vs 30 percent), economic crimes (44 percent vs 32 percent), and sexual assault (44 percent vs 32 percent).

[10] Significant findings of mental health counseling needed by victimization type: IPV (43 percent vs 26 percent), assault (41 percent vs 28 percent), family violence (39 percent vs 29 percent), childhood abuse (45 percent vs 27 percent), and sexual assault (43 percent vs 28 percent).

[11] Significant findings of case management needed by victimization type: stalking (33 percent vs 25 percent), non-sexual harassment (34 percent vs 24 percent), gang stalking (35 percent vs 25 percent), IPV (41 percent vs 23 percent), assault (40 percent vs 23 percent), family violence (38 percent vs 25 percent), childhood abuse (43 percent vs 24 percent), economic crimes (42 percent vs 24 percent), and sexual assault (42 percent vs 25 percent).

[12] Significant findings of support groups needed by victimization type: stalking (39 percent vs 27 percent), non-sexual harassment (39 percent vs 29 percent), gang stalking (41 percent vs 29 percent), IPV (41 percent vs 29 percent), assault (40 percent vs 31 percent), family violence (42 percent vs 30 percent), childhood abuse (42 percent vs 31 percent), economic crimes (44 percent vs 30 percent), and sexual assault (42 percent vs 31 percent).

[13] Significant findings of how visitors learned about VictimConnect by victimization type: internet search was more likely for stalking (86 percent vs 73 percent), harassment (84 percent vs 76 percent) or both (85 percent vs 7 percent); law enforcement referrals were less likely for stalking (4 percent vs 9 percent) or family abuse (4 percent vs 8 percent); another national hotline was more for sexual assault (14 percent vs 9 percent).

[14] In January 2026, NCVC transitioned to a new hotline platform that is integrating the demographics database and internal resource database, which will address these two recommendations and increase efficiency.

[15] Significant findings of needs met by victimization type: fewer stalking victims said the information or referrals matched their needs (74 percent, compared to 84 percent among other visitors) or was helpful (60 percent versus 67 percent). Fewer assault victims said the information or referrals matched their needs (72 percent versus 83 percent), and fewer economic crimes victims perceived the interaction as helpful (55 percent versus 66 percent).

[16] See the final research report for further answers to each of the overarching research questions and subquestions (Dusenbery and Yahner 2026).

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