



Illinois Criminal Justice Information Authority (ICJIA)

Statewide Violence Prevention Plan: 2020-2024

Appendix #2

NEEDS ASSESSMENT OF VIOLENCE IN ILLINOIS

Report prepared by: Rachel Garthe, Ph.D., Doug Smith, Ph.D. & Shawn Freeman, M.B.A.
University of Illinois at Urbana-Champaign

CONTENTS

Methodology	4
Key Findings	4
Needs Assessment of Violence in Illinois	12
a. Illinois Population & Geography	14
b. Community Types	15
c. Illinois Economic and Education Indicators	16
d. Child Maltreatment	18
i. Differences in Substantiated Reports by Child Demographics	18
1. <i>Map #1: Child Maltreatment Rates by County</i>	19
e. Youth Violence: Bullying, Cyber-bullying, Dating and Sexual Violence, Physical Fighting, Weapon Carrying	20
i. Comparing State and National Rates of Violence	20
1. Disparities in Rates of Violence by Sexual Identity and Sex of Sexual Contacts	21
ii. Youth Violence in Illinois	22
1. <i>Maps #2-#5 Forms of Youth Violence by County</i>	23
2. Disparities by Race/Ethnicity, Gender, Economic Status, Community Type, Grade	28
3. Impact of Youth Violence: Associations with Depressive Feelings, Suicidal Ideation, and Substance Use	30
4. The Role of Perceived Safety & Caring Relationships at School	32
f. Juvenile Violent Offenses	34
i. Differences by Sex, Race, and Ethnicity	35
1. <i>Map #7: Juvenile Violent Offenses by County</i>	36
g. Juvenile Weapons-Related Offenses	37
h. Adult Violent Offenses	38
i. Differences by Sex and Race	38
1. <i>Map #8: Adult Violence Offenses by County</i>	39
i. Gun Violence	41
i. Differences by Gender, Age, and Race	41
ii. Firearm Death Rates by County	42



- j. Adult Intimate Partner Violence & Sexual Violence** 41
 - i. Domestic Violence and Intimate Partner Violence 41
 - 1. *Maps #9-#10: Domestic Offenses and Sexual Assault Offenses by County* 42
 - ii. Victim Service Utilization: Domestic Violence and Sexual Assault 44
- k. Other Forms of Violence & Populations**
 - i. Abuse among Older Adults and Persons with Disabilities 45
 - 1. *Map #11: Abuse among Older Adults by County* 46
 - ii. Human Trafficking Cases & Arrests 47
 - iii. Incarcerated Women: Victimization Histories 48
 - iv. Physical Abuse & Perceptions of Safety Before, During, and After Pregnancy 49
 - v. Parent/Guardian Perceptions of Violence for their Child (ages 6-17) 50
 - vi. Injury and Violence: Deaths & Costs of Injury Deaths 51
 - vii. Violent Deaths 52
 - viii. Illegal Possession of a Firearm 52
 - ix. Identified Needs among Victims of Violence 53
 - x. Additional Information, Reports, & Violence Prevention Initiatives 54

Additional Data Collection

- a. Violence Prevention and Intervention Staff Survey** 57
 - i. Methodology 57
 - ii. Key Findings 58
- b. Illinois Adult Resident Survey** 64
 - i. Methodology 64
 - ii. Key Findings 66

This needs assessment and plan was supported in an interagency agreement between the Illinois Criminal Justice Information Authority and the University of Illinois at Urbana-Champaign.

Suggested citation:

Garthe, R. C., Smith, D. C., & Freeman, S. (2021). *Illinois Criminal Justice Authority Statewide Violence Prevention Plan 2020-2024: Review of Programs and Strategies, Needs Assessment of Violence in Illinois & Recommendations for Funding: Needs Assessment of Violence in Illinois*. Illinois Criminal Justice Information Authority.

METHODOLOGY

Needs Assessment of Violence

Data were pulled for the comprehensive needs assessment of violence in Illinois. Data came from a variety of sources, including publicly available datasets and reports. Data were also obtained by the research team from various organizations and centers. All data sources are listed here—for links and citations, please see the full section of the data presentation of these sources later in this document.

Type of Violence	Year	Source
Child Maltreatment (Abuse, Neglect)	2018	Publicly Available Data: IL Department of Children & Family Services (Children and Family Research Center at University of Illinois; CFRC) & Children’s Bureau <ul style="list-style-type: none"> Rates by demographic factors was obtained from CFRC
Youth Violence (Bullying, Dating Violence, Physical Fighting, etc.) & psychosocial indicators	2018-2019	Publicly Available Data: Youth Risk Behavior Surveillance (Centers for Disease Control and Prevention; CDC, 2019) 2018 Illinois Youth Survey data obtained from Center for Prevention Research & Development (CPRD) at University of Illinois
Juvenile Justice Detention for Violent Offenses	2018	Data obtained from Illinois Juvenile Justice Commission & CPRD
Adult Violent Crime	2018	Publicly Available Data: Uniform Crime Report Index Offense Explorer (ICJIA). Rates by demographic factors were obtained from ICJIA – Criminal History Record Information data request
Gun Violence	2018	Publicly Available Data: CDC WONDER Online Database
Adult Domestic Violence & Sexual Assault	2010-2012; 2018	Publicly Available Data: ICJIA Research Hub Datasets (2018) & CDC’s National Intimate Partner and Sexual Violence Survey (2010-2012)
	2018	Victim service utilization data obtained from InfoNet (ICJIA)

Data were also collected by the research team in response to gaps identified in the existing data sources. Please see Appendix for details of methodology and findings.

Additional Populations	Timing	Information
Violence Prevention and Intervention Staff	October 2020	Primary data collection of 130 violence prevention and intervention staff
Illinois Adult Residents	November-December	Primary data collection of 712 adult residents



Additional reports were compiled for this needs assessment, obtaining information about additional populations impacted by violence and additional forms of violence.

Variable(s) or Topic(s)	Year	Source
Illinois Population & Geography	2018	Publicly Available Data: U.S. Census American Community Survey
Illinois Economic, Education, and Mental Health Indicators	2018-2020	Publicly Available Data: Kids Count Data Center, Mental Health America, and the U.S. Census
Abuse among Older Adults and Persons with Disabilities	2018-2019 2015	Publicly Available Report: Adult Protective Services of Illinois Publicly Available Data: ICJIA Research Hub Datasets (2018)
Human Trafficking Cases & Arrests	2018	Publicly Available data and reports: Illinois State Police, National Human Trafficking Hotline, Federal Bureau of Investigation
Incarcerated Women: Victimization Histories	2017-2018	Data obtained with permission from a research report
Physical Abuse & Perceptions of Safety Before, During, and After Pregnancy	2018	Publicly Available data: Illinois PRAMS Annual Report
Parent/Guardian Perceptions of Violence for their Child	2017-2018	Publicly Available data: National Survey of Children’s Health
Injury and Violence	2018	Publicly Available report: Illinois Department of Public Health
Violent Deaths	2020	Publicly Available report: ICJIA
Illegal Possession of a Firearm	2018	Publicly Available report: Loyola University Chicago
Identified Needs among Victims of Violence	2017	Publicly Available report: ICJIA

KEY FINDINGS

Rates of violence were assessed across type of violence and by demographic or geographically based groups. Across most types of violence, Illinois had higher rates of violence compared to the rate in the United States.

Violence	% or Rate in Illinois	% or Rate in U.S.
Substantiated Cases of Childhood Maltreatment	10.95 per 1,000 children	9.2 per 1,000 children
Children experienced at least 1 Adverse Childhood Experience (ACE)	22.5%	23.3%
Children experienced 2 or more ACEs	16.7%	18.6%
Youth Violence: Experienced Bullying	19.9% to 29.5% ¹	19.5%
Youth Violence: Experienced Cyber Bullying	16% to 19.2% ¹	15.7%
Youth Violence: Experienced Dating Violence	7.4% to 14.3%	8.2%
Youth Violence: Experienced Sexual Violence or Forced Sexual Intercourse	10.7% to 12%	7.3% to 10.8%
Youth Violence: Physical Fighting	20.2% to 20.7%	21.9%
Youth Violence: Weapon Carrying	10.4% to 13.7%	13.2%
Youth: Suicidal Thoughts	15.5%	18.8%
Juvenile Violent Offenses	1.83 violent admissions per 1,000 youth (ages 10-17)	2.17 violent admissions per 1,000 youth (ages 10-17)
Lifetime: Intimate Partner Violence, Stalking, and Sexual Violence	13.5% to 41.5%	15.8% to 37.3%
Adult Violent Offenses (Arrests)	395.75 violent crimes per 100,000 residents	368.9 violent crimes per 100,000 residents
Firearm Deaths	10.85 per 100,000 residents	12.15 per 100,000 residents

¹ A range is given as there were multiple assessments and sources of data for youth violence rates in Illinois.



Additionally, these rates were examined by demographic characteristics and geographic regions. Several disparities are noted here; please see the appendix for additional information and analyses.

Violence	Group or Groups at Highest Risk in Illinois
Substantiated Cases of Childhood Maltreatment	Children under 3 and between the ages 6-11 Children in rural counties
Youth Violence: Experienced Bullying	LGBTQ Youth, including: Lesbian, Gay, Bisexual (LGB) Youth Transgender and Youth who do not identify as Male, Female, or Transgender Native American/American Indian and Multiracial Youth Youth in Rural and Other Urban/Suburban counties Middle School Youth
Youth Violence: Experienced Cyber Bullying	
Youth Violence: Experienced Dating Violence	
Youth Violence: Experienced Sexual Violence or Forced Sexual Intercourse	
Youth Violence: Physical Fighting	Black/African American, Native American/American Indian, Multiracial Youth Transgender and Gender Expansive Youth Middle School Youth Chicago (Physical Fighting) Rural Counties (Weapon Carrying)
Youth Violence: Weapon Carrying	
Youth: Suicidal Thoughts	Native American/American Indian, Multiracial Youth Transgender and Gender Expansive Youth Rural Youth
Juvenile Violent Offenses	Black/African American Youth Male Youth Youth in Other Urban/Suburban Counties
Adult Violent Offenses	Black/African American Adults Male Adults
Firearm Deaths	Black/African American Adults Male Adults

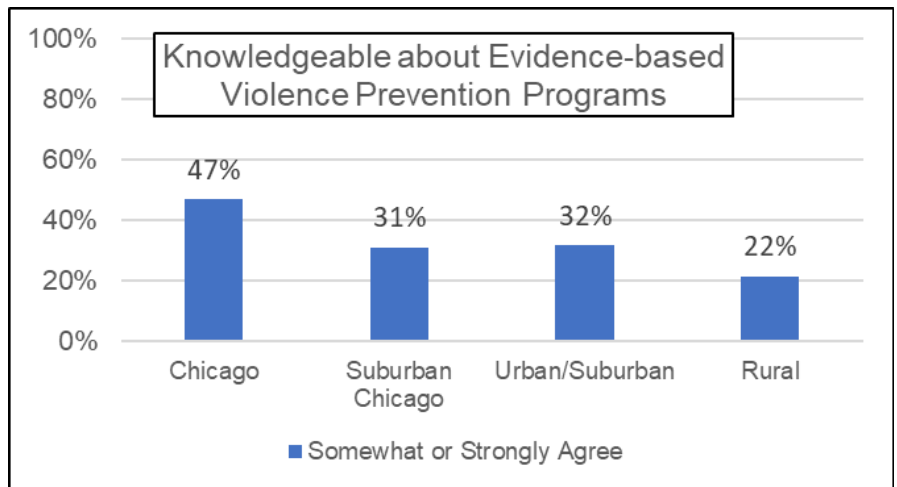
Additional Surveys: Violence Prevention & Intervention Staff and IL Adult Residents

Data from two additional surveys were collected.

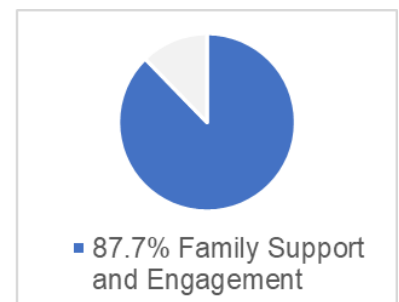
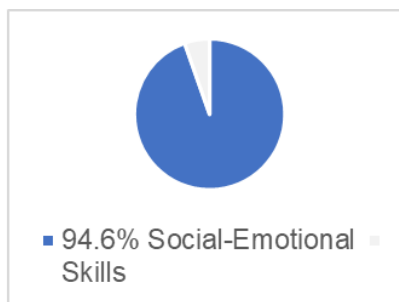
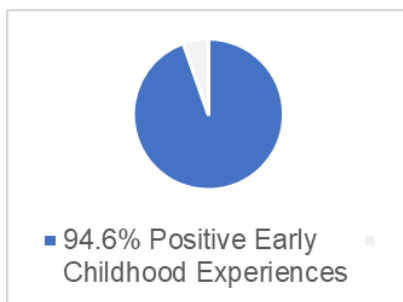
In the first survey, **130 violence prevention and intervention staff** across the state (serving 91% of the counties in Illinois) were asked questions about community collaborations, perceptions on protective factors, and violence prevention strategies.

Some of the key findings include:

- Staff strongly agreed that violence is a concern in their community to families (65%), community residents (64%), community leaders (45%), and community elected officials (33%). Staff serving rural counties perceived that violence is less of a concern across these four entities (e.g., 18% strongly agreed that violence was a concern to elected officials).
- About 30% of staff across the state “somewhat” or “strongly agreed” that community leaders are knowledgeable about evidence-based violence prevention programs. These rates varied by community type, with the lowest rates among staff serving rural counties.
- Staff collaborated with a variety of organizations, groups, and stakeholders. A total of 81% to 93% of staff endorsed “some” or “a lot” of collaboration on violence prevention efforts with the following collaborators: social service agencies, school leadership staff, community-based organizations, community coalitions, healthcare institutions, law enforcement, and city government.



Additionally, staff rated a list of evidence-based protective factors of violence from “not important at all” to “very important.” The top-rated protective factors were at the individual and relational level:



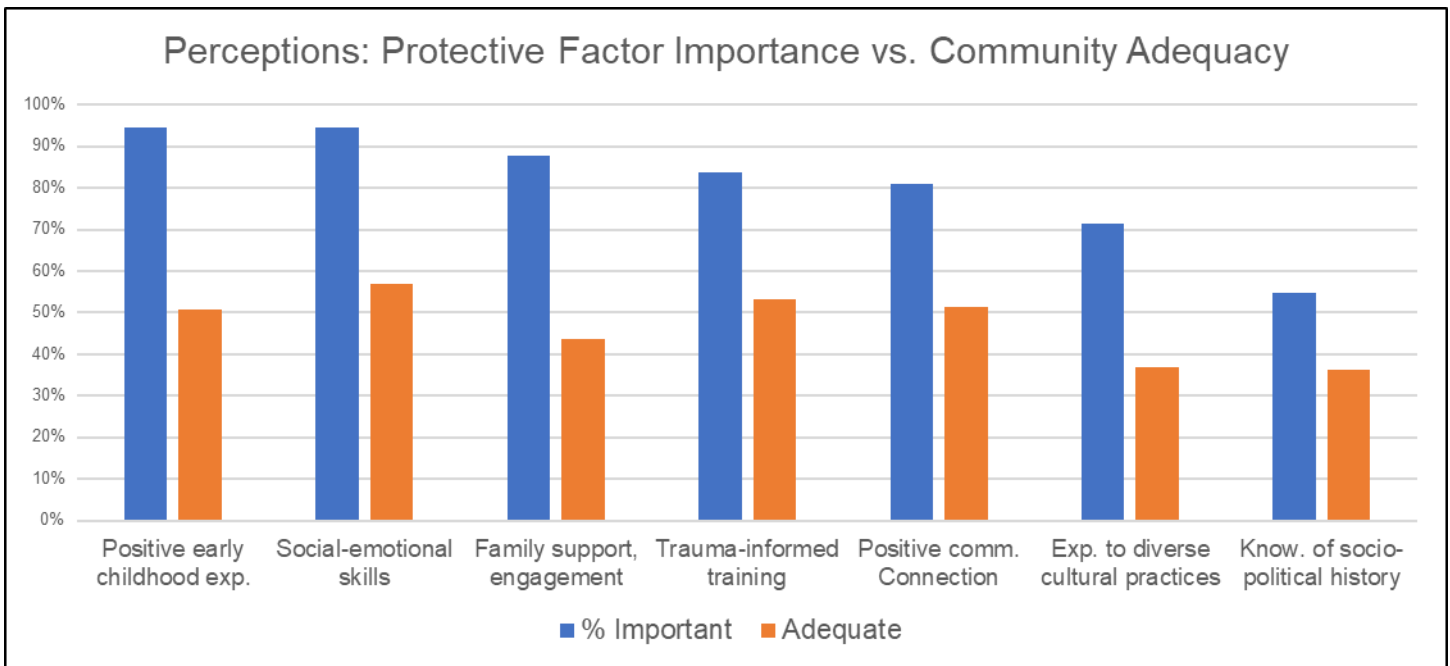


Key findings, continued:

Community and other protective factors were also rated as very important:

- 83.8%- Trauma-informed training and practices
- 80.8%- Positive community connection and engagement
- 72.1%- Job training and workforce development
- 71.5%- Exposure to diverse cultural practices
- 54.6%- Knowledge of community and socio-political history

After rating these protective factors on importance (shown in blue), staff were asked to rate if their community was adequately addressing each factor (shown in orange). There was a gap between perceived importance and adequacy of addressing these factors in communities:



Finally, staff were asked to list solutions that are not considered in their community that could prevent or reduce violence. Many of the solutions were in alignment with the five guiding principles (see page 28), including fostering belonging and social connectedness, advancing equity, promoting safety, supporting health, and engaging state agencies.

Additional solutions included:

- Increasing comprehensive and collaborative initiatives
- Increasing opportunities and access to resources
- Addressing economic and employment inequities
- Increasing knowledge and solutions related to violence prevention
- Others (e.g., using evidence-based practices, strengthening education).

Also detailed in Section IV (pages 100-107), a sample of **712 Illinois adult residents** were surveyed through a Qualtrics Panel. Adults were surveyed on their experiences with adverse childhood experiences (ACEs), mental health and trauma, and sources of protection against violence within relationships and communities.

Some of the key findings include:

Knowledge of Violence Prevention Organizations & Programs

Respondents were asked if they knew of organizations or programs in their community that aimed to prevent different forms of violence. The majority of respondents (81%) indicated that they knew of at least one type of violence prevention organization or program in their community.

Respondents also indicated they were knowledgeable about:

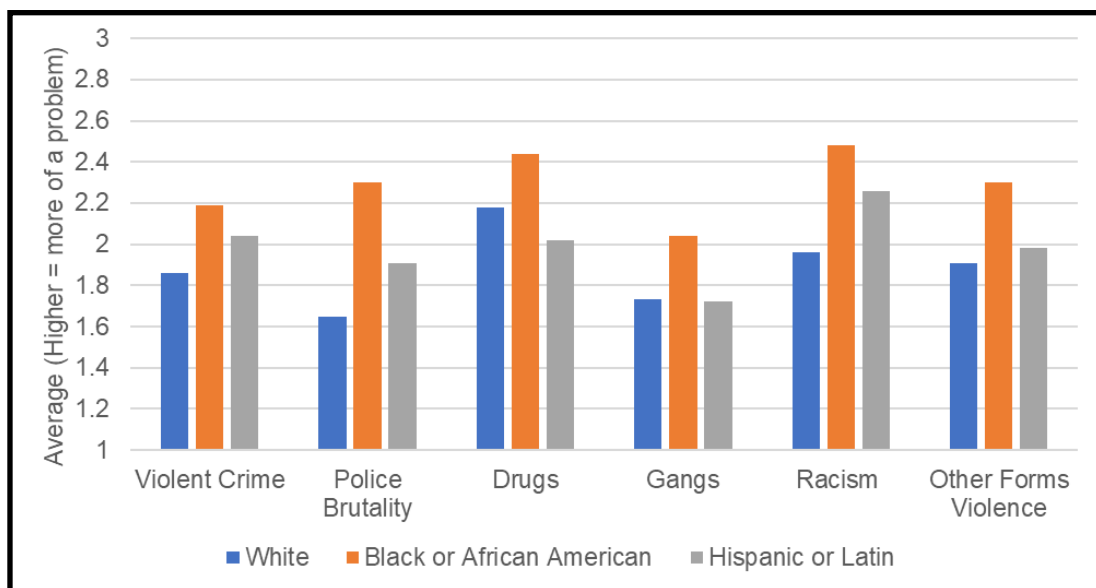
- 41.2%—Organizations or programs in their community or neighborhood that address the needs of individuals who have experienced violence or trauma.
- 28.2%—Organizations or programs in their community or neighborhood that provide support for individuals who are returning from prison or jail, or are serving a probation or parole sentence.
- 29.2%—Organizations or programs in their community or neighborhood that provide support for youth who have been detained for a crime or that aim to prevent youth from entering the juvenile justice system.

Quality of Resources

They also rated the quality of various resources in their neighborhood/community. Resources that were rated as fair or excellent by fewer participants included employment and job training opportunities, family-focused programs, mental health care services, and substance abuse services.

Perceptions of Neighborhood Problems:

- Across types of neighborhood problems, Black or African American adults perceived each of these problems to be more prevalent in their neighborhood/community, compared to Hispanic or Latin and White adults.



Of the 712 adults surveyed in Illinois, about 63% of the sample had experienced at least one Adverse Childhood Experience (ACE), and about 29% had experienced four or more ACEs.

National reports suggest that around 61% of adults experience at least one ACE, and about 17% experienced four or more ACEs. For more information, see: <https://www.cdc.gov/violenceprevention/aces/index.html>

Protective Factors

Among adults with higher levels of ACEs, several factors protected them from experiencing as high of mental health symptoms. These protective factors included:

- Social Support (e.g., can rely on friends or family)
- Family Resilience (e.g., open communication and trust in the family)
- Community Social Cohesion (e.g., connections and trust with one’s neighbors)

Mental Health

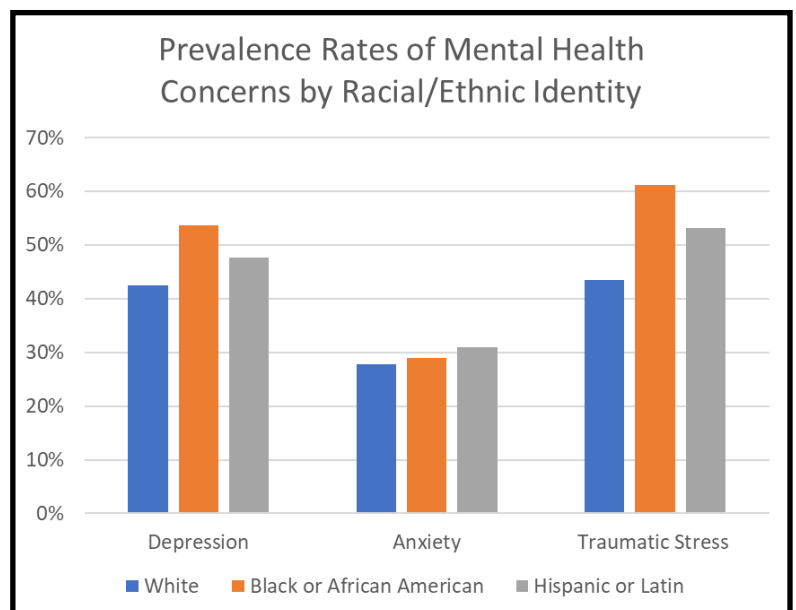
Across three areas of mental health, adults reported heightened or clinically significant symptomology of mental health concerns, including:

- 42.4%-Depression Symptoms
- 45.1%-Traumatic Stress Symptoms
- 27.1%-Moderate or Severe Anxiety Symptoms

Black or African American adults reported the highest rates of depression and traumatic stress.

Hispanic or Latin adults reported slightly higher levels of anxiety compared to White and Black or African American adults.

Adverse Childhood Experience (ACE)	% Experienced
Abuse and Neglect¹	
Emotional Abuse	40.1%
Physical Abuse	31.4%
Emotional Neglect	30.4%
Physical Neglect	14.8%
Household Challenges	
Parental separation or divorce	33.3%
Exposure to intimate partner violence	18.6%
Substance abuse disorder in the household	26.0%
Mental illness in the household	27.6%
Household member involved in criminal justice system	17.4%
Total ACEs	
(note: 1 item on sexual abuse was omitted from the original 10-item ACE measure)	
At least 1 ACE	63.2%
1 to 3 ACEs	34.7%
4 to 9 ACEs	28.5%



NEEDS ASSESSMENT OF VIOLENCE IN ILLINOIS



“Violence prevention has to be intersectional and inclusive.”

- Respondent, Violence Prevention and Intervention Staff Survey

ILLINOIS POPULATION & GEOGRAPHY

In 2018¹, 12,821,497 individuals (51% female) reported residing in Illinois.

Illinois is made up of 102 counties. As shown on the previous page, Illinois is made up of diverse community types, including 61 rural counties.

Age

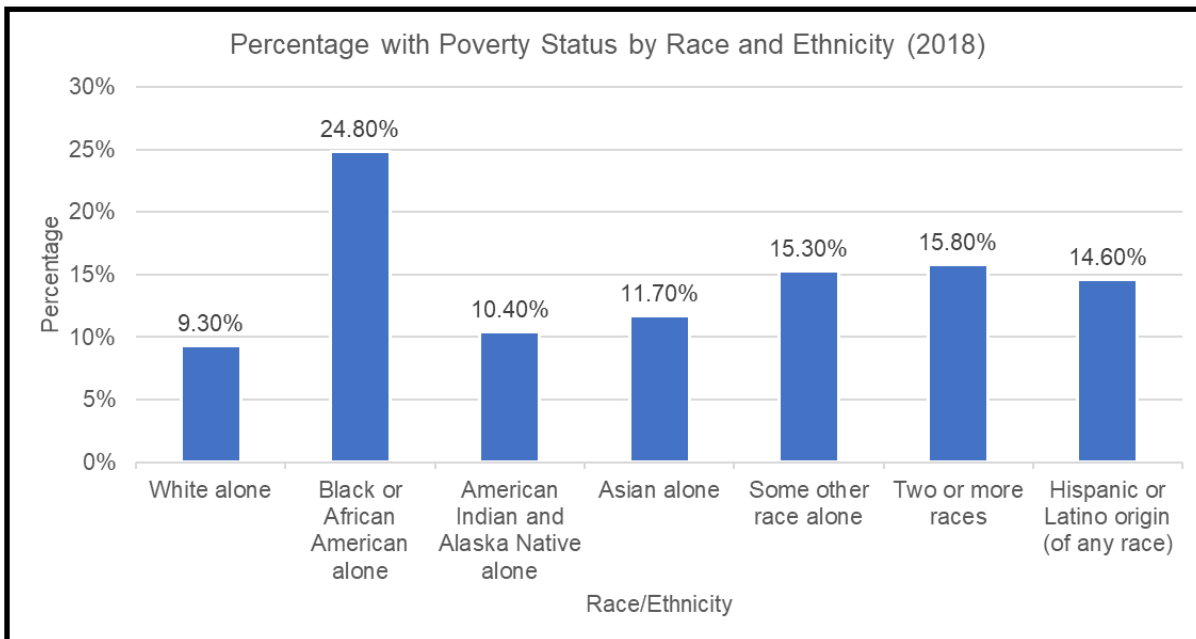
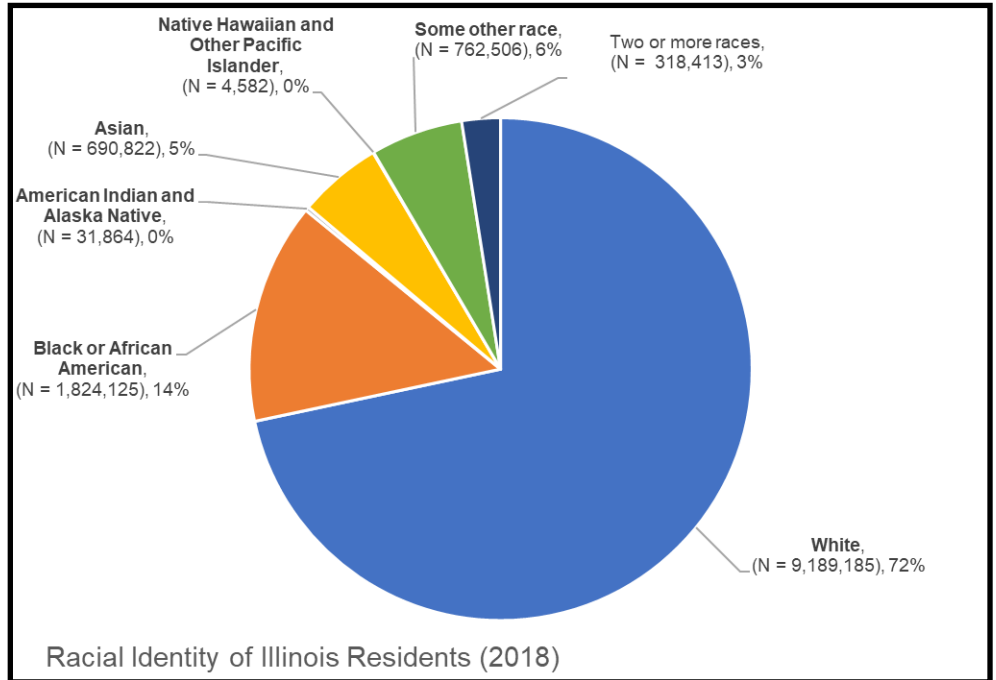
The median age was 37.9 years. Approximately 40% of residents were between the ages of 25 and 54. There are 2,926,561 children (under 18 years old) in Illinois, making up 22.8% of the state population.

Race and Ethnicity

Illinois residents identified as predominately White (72%), followed by Black or African American (14%). Approximately 17% of Illinois residents indicated a Hispanic or Latin Ethnicity of any race (N = 2,174,842).

Poverty

In 2018, about 12% of the state population was considered below poverty level. The proportion of individuals below poverty level was higher among females (13.3%) than males (10.9%), among Black or African American individuals (24.8%), and those who did not graduate high school (22.3%).



¹Most data in this report are from 2018; 2018 Census data was pulled to describe statewide demographics.

ILLINOIS ECONOMIC AND EDUCATION AND INDICATORS

Additional data from Illinois demonstrate the economic well-being of children and families, educational attainment, and mental health of Illinois children and adults.

In this first table, the **economic well-being of children and families** is presented. Illinois had similar rates to the United States on most indicators.

	Illinois ¹	United States
Children (under age 18) who live with families with incomes 200% of the federal poverty level	36.5%	38%
Children in extreme poverty (50% poverty)	7%	7%
Children living in families lacking secure parental employment (without at least one parent employed full time)	25%	27%
Children living in low-income households where no adults work	3%	4%
Female-headed families receiving child support	26%	26%
Youth (ages 16 to 19) not attending school and not working	6%	7%
Persons 18 to 24 in poverty	20%	21%

In this second table, the **educational attainment of youth** is presented. Illinois had similar rates to the United States on most indicators.

	Illinois ¹	United States
Young children not in school (pre-kindergarten programs for 3-4 year old children)	45%	52%
Children under age 6 whose family reads to them less than 4 days a week	42%	43%
Fourth grade reading: below proficiency	65%	66%
Fourth grade math: below proficiency	61%	60%
Fourth grade: chronically absent (3+ days in the past month)	24%	24%
Not graduating high school on time	14%	15%

¹2018 data or 2017-2019 data from the Kids Count Data Center (2020).

Economic well-being and educational attainment factors are indicators of socioeconomic status, which are important to examine in a violence prevention plan. Researchers have found that although violence affects individuals of varying socioeconomic status, individuals with poor economic well-being and have lower education attainment are at an increased risk for violence exposure.

For example, researchers have found that children from lower socioeconomic status households were more likely to have experienced adverse childhood experiences (e.g., abuse, neglect) than their higher SES peers (Child Trends, 2013). Also, individuals who experience greater levels of violence may face reduced educational attainment and reduced income in adulthood (Covey, Menard, & Franzese, 2013).

Therefore, we cannot write a plan about violence without considering the socioeconomic status of families in Illinois. In order to prevent violence, we have to strategize ways to eliminate socioeconomic disparities and inequitable policies.



Illinois Population & Geography Section data were pulled from:

Kids Count Data Center. (2020). Child Trends analysis of data from the U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau, National Survey of Children's Health (NSCH). <https://datacenter.kidscount.org/>

U.S. Census Bureau. (2018). *2018 American Community Survey, Demographic and Housing Estimates*. Retrieved from <https://data.census.gov/cedsci/table?q=0400000US17&d=ACS%205-Year%20Estimates%20Data%20Profiles&tid=ACSDP5Y2018.DP05>

U.S. Census Bureau. (2018). *2018 American Community Survey, Poverty Status in the Past 12 Months*. Retrieved from <https://data.census.gov/cedsci/table?q=Illinois%20poverty%202018&tid=ACSST1Y2018.S1701&hidePreview=false>

CHILD MALTREATMENT

Child Maltreatment Prevalence

During the 2018 fiscal year¹, 32,034 children had at least one substantiated maltreatment report (which includes reports of physical and other abuse, sexual abuse, neglect, and risk of harm; CFRC, 2020). This number equates to a rate of 10.95 substantiated reports per 1,000 children in Illinois. This rate is slightly higher than the national rate, which is 9.2 substantiated reports per 1,000 children in the United States (Children’s Bureau, 2020).

32,034 substantiated cases of child maltreatment
10.95 substantiated reports per 1,000 children



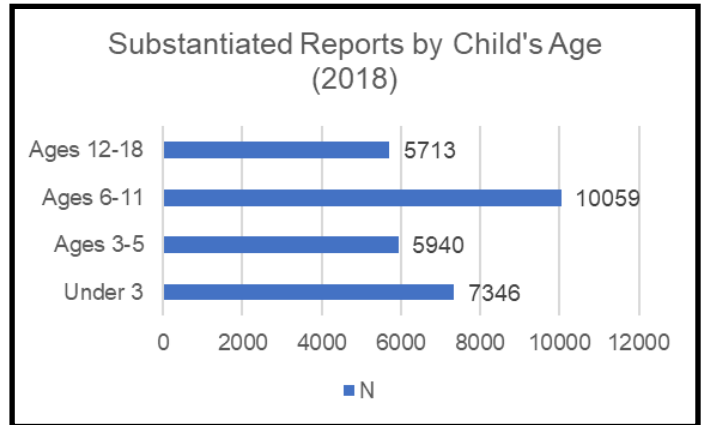
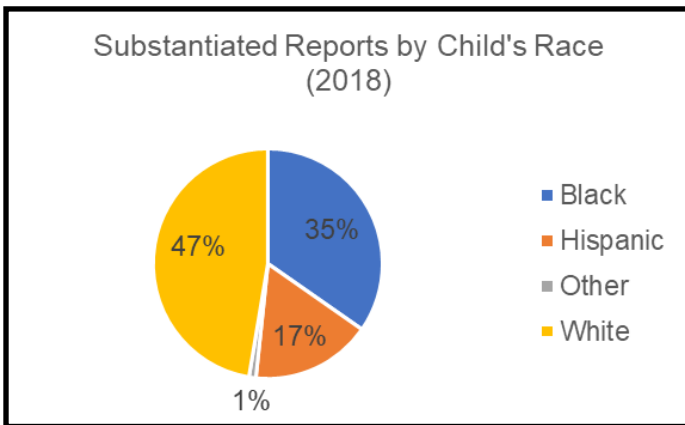
678,000+ substantiated cases of child maltreatment
9.2 substantiated reports per 1,000 children



Additionally, 4,151 children (13% of cases) in Illinois had another substantiated report during the 12-month reporting period.

Differences in Substantiated Reports by Child Demographics

Of the substantiated reports, about half were among White children. Also, 35% of substantiated reports were among children ages 6 to 11 and 25% were among children under the age of 3.



Child Maltreatment Section data were pulled from:

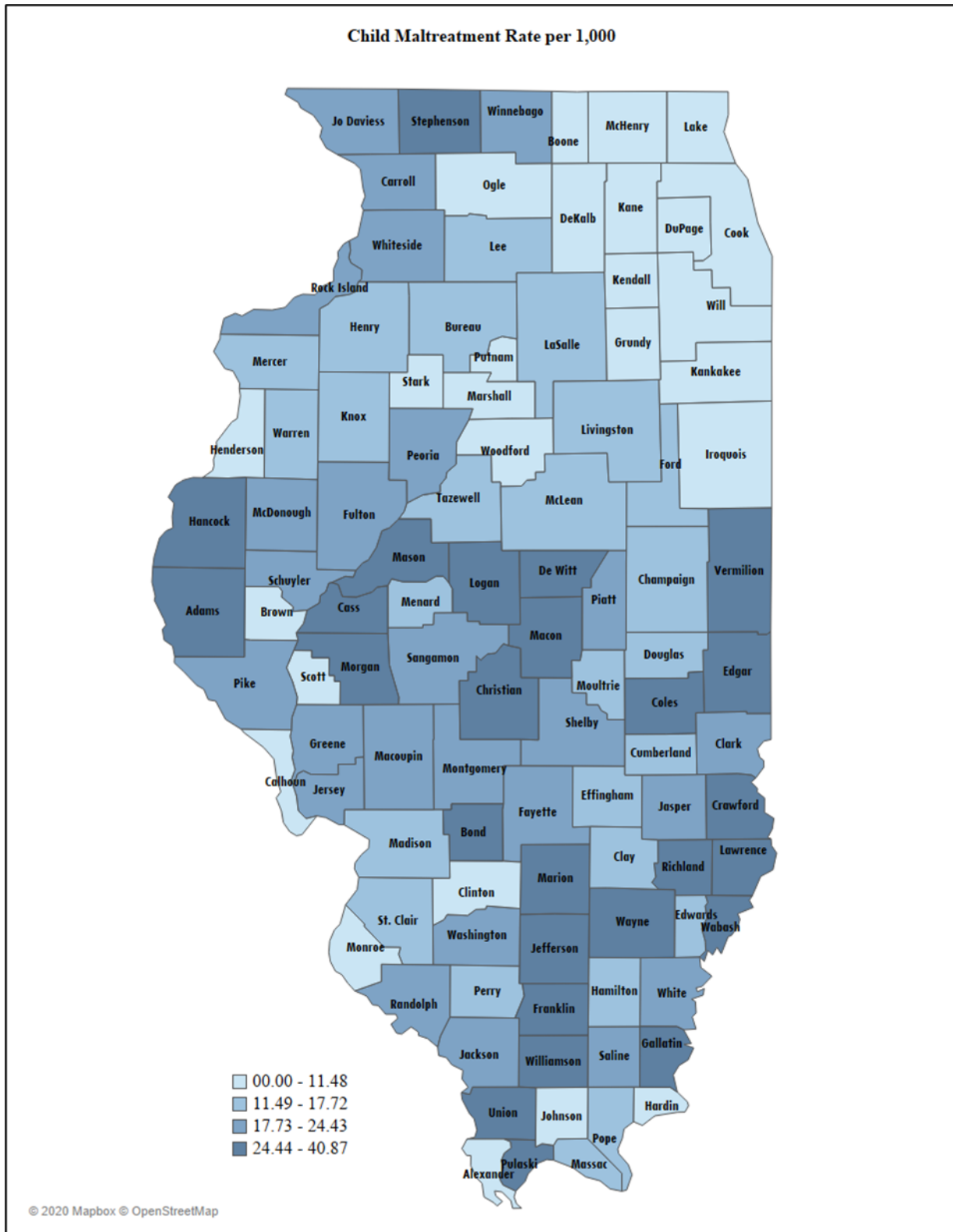
Children and Family Research Center (CFRC, 2020). Outcome Indicator Tables. Retrieved from https://cfrc.illinois.edu/outcome-indicator-tables.php?ind=pct_repeat_subreps

Children’s Bureau (Administration on Children, Youth and Families, Administration for Children and Families) of the U.S. Department of Health and Human Services. (2020). *Child Maltreatment 2018*. Retrieved from <https://www.acf.hhs.gov/sites/default/files/cb/cm2018.pdf>

¹July 1, 2017 to June 30, 2018

MAP #1: CHILD MALTREATMENT RATES BY COUNTY

Across the state, rates of child maltreatment ranged from 3.22 to 40.87 per 1,000 children (CFRC, 2020). Please see Appendix #4 for county-level reports of specific child maltreatment rates, as well as rates by child’s demographic factors.

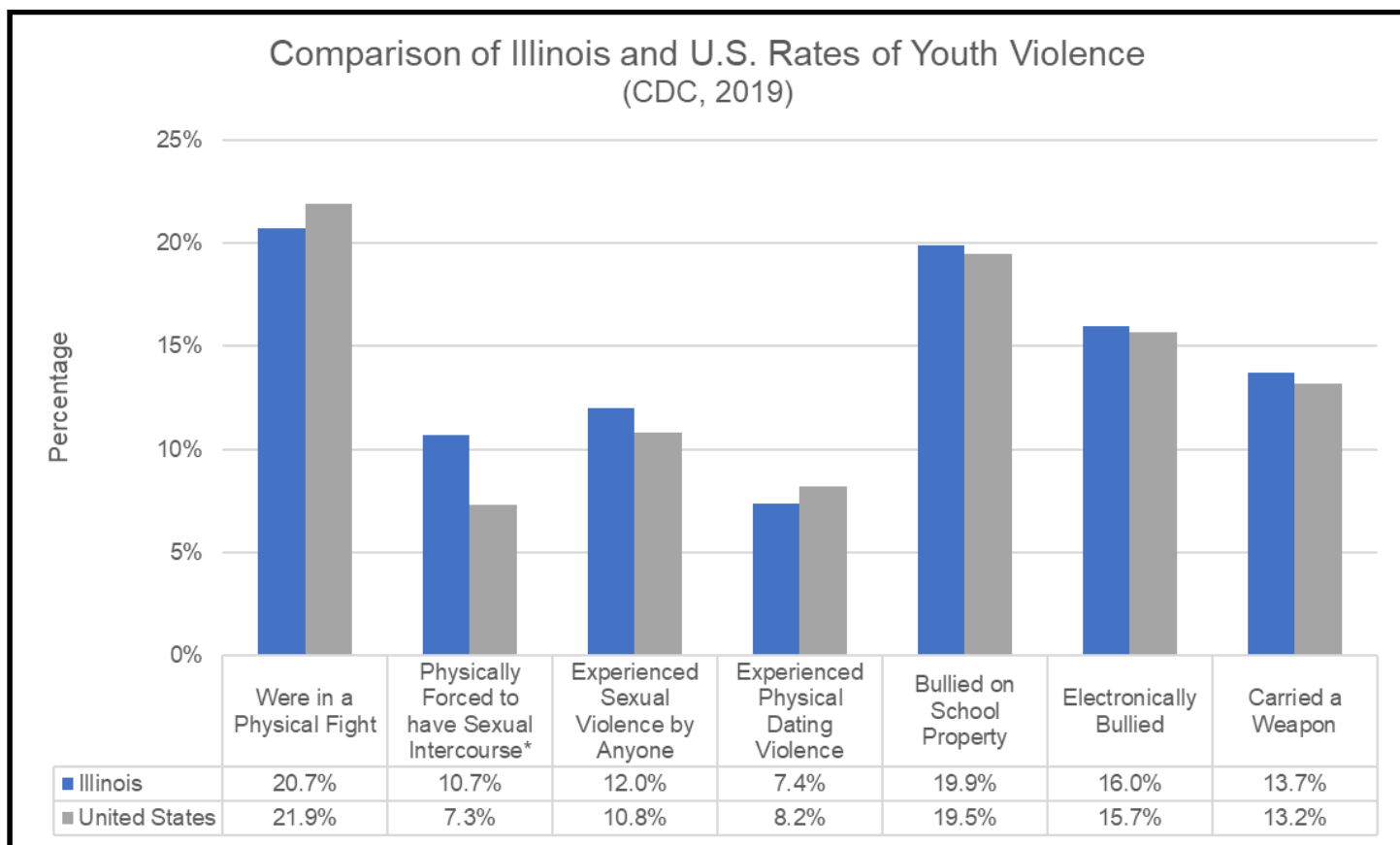


YOUTH VIOLENCE: BULLYING, CYBER-BULLYING, DATING AND SEXUAL VIOLENCE, PHYSICAL FIGHTING, WEAPON CARRYING

Comparing State and National Rates of Violence

Youth violence includes a variety of experiences, including physical fighting, sexual violence and forced sexual intercourse, physical and psychological dating violence, bullying, electronic or cyber bullying, and weapon carrying. For an overview of the YRBS methods and survey, please see: <https://www.cdc.gov/mmwr/volumes/69/su/pdfs/su6901a1-H.pdf>

In 2019, high school students who participated in the Youth Risk Behavior Surveillance Survey reported the following rates of violence. Across the various forms of violence assessed, rates of youth violence in Illinois were slightly higher for violence victimization. The only form of violence that showed a statistically significant difference was for youth reporting being physically forced to have sexual intercourse; this rate was higher in Illinois than in the United States (CDC, 2019).



Note. * Difference statistically significant at $p < .05$.



Disparities in Rates of Youth Violence by Sexual Identity and Sex of Sexual Contacts

Youth who identified as lesbian, gay, or bisexual (LGB) or who were attracted to the same or both sexes, reported higher rates of victimization, compared to heterosexual youth or youth who were attracted to the opposite sex. This disparity was seen at the state and national level (CDC, 2019).

	Experienced Physical Dating Violence		Bullied on School Property		Electronically Bullied	
	Illinois	National	Illinois	National	Illinois	National
Sexual Identity	%	%	%	%	%	%
Heterosexual (straight)	7.4%	7.2%	19.6%	17.1%	15.1%	14.1%
Gay or Lesbian	21.6%	11.0%	35.3%	37.3%	37.5%	28.1%
Bisexual	28.6%	13.6%	32.4%	30.4%	29.9%	26.1%
Gay, Lesbian, or Bisexual	27.1%	13.1%	33.1%	32.0%	31.9%	26.6%
Not Sure	17.7%	16.9%	22.8%	26.9%	20.4%	19.4%
Sex of Sexual Contacts	%	%	%	%	%	%
Opposite sex only	7.1%	8.8%	20.2%	18.9%	18.0%	17.8%
Same sex only	22.9%	13.8%	34.2%	37.0%	29.7%	29.0%
Both sexes	25.0%	22.1%	42.0%	38.2%	25.7%	34.0%
Same sex only or both sexes	24.2%	19.7%	39.1%	37.8%	27.2%	32.4%
No sexual contact	3.2%	3.3%	17.6%	17.0%	11.9%	11.5%

Youth Violence sections: 1) Comparing State and National Rates of Violence & 2) Disparities in Rates of Youth Violence by Sexual Identity data were pulled from:

Centers for Disease Control and Prevention (CDC; 2019). Youth Risk Behavior Surveillance System, Youth Online High School Results. Retrieved from <https://www.cdc.gov/healthyyouth/data/yrbs/results.htm>

Youth Violence in Illinois

During 2018, data from approximately 204,276 youth (grades 6th to 12th) were collected for the Illinois Youth Survey (IYS; CPRD, 2018). The survey targets 8th, 10th, and 12th grade students, but some schools opt for additional grades to be surveyed. Thus, approximately 27% of students were in eighth grade, 30% in 10th grade, and 22% in 12th grade; the remaining students were in sixth and seventh grade (2%), ninth grade (11%) and 11th grade (9%).

IYS Participants

The survey included students who identified as female (50.2%), male (48.0%), and transgender (0.6%), or did not identify as female, male, or transgender (1.2%).

Students self-reported their race/ethnicity: 60.9% White, 9.5% Black or African American, 18.3% Latino/a, 7.4% Asian American, 1.7% Native American/American Indian, 5.5% Multiracial, and 2.9% Another Racial Identity.

About 41.4% of students indicated they were eligible for free or reduced-price lunch and 67.1% indicated they lived with both of their parents most of the time.

IYS 2018 Results

As shown in the table, the survey found that about 1 in 3 students reported a form of bullying in the past 12 months, and about 1 in 5 students had experienced electronic bullying or had been in a physical fight. Additionally, among students who are dating, 14.3% reported experiencing a form of dating violence in the past 12 months.

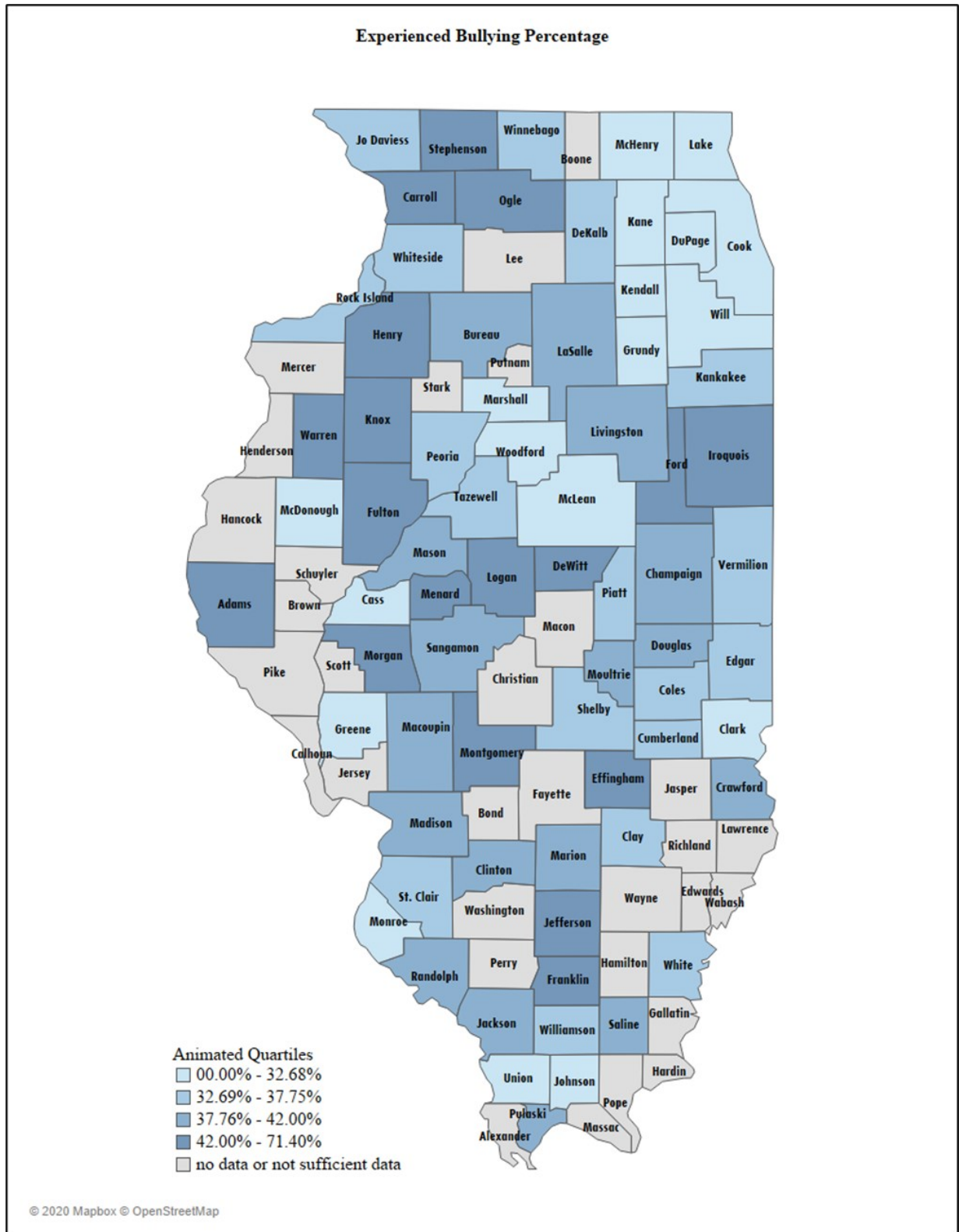
Self-Reported Youth Violence (past 12 months)	%
Experienced any form of bullying	29.5%
Physical victimization	9.0%
Verbal victimization	25.3%
Threats	14.5%
Experienced cyber bullying	19.2%
Experienced any form of dating violence	14.3%
Physical victimization	6.3%
Psychological victimization	15.3%
Engaged in physical fighting	20.2%
Weapon carrying (handgun, knife, club)	10.4%

The next five figures display rates of youth violence by counties in Illinois, including experiencing bullying (physical, verbal, threats), cyber-victimization, dating violence (physical, psychological), or engaging in physical fighting and weapon carrying in the past 12 months. Please see Appendix #3 for county-specific information.



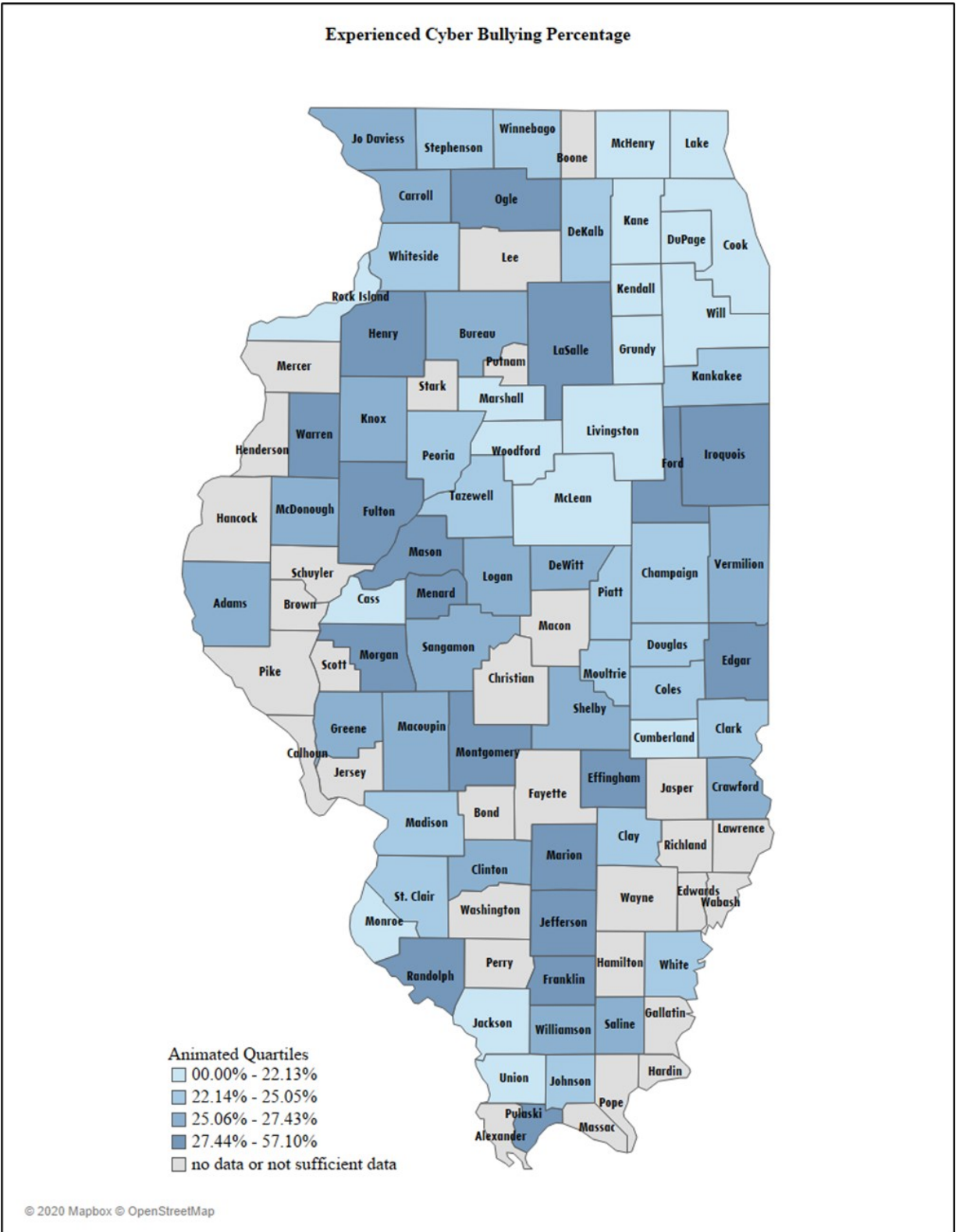
MAP #2: BULLYING RATES BY COUNTY

Percentage of youth who reported experiencing a form of bullying in the past 12 months by county are shown here. Please see Appendix #4 for county-level reports of specific bullying rates.



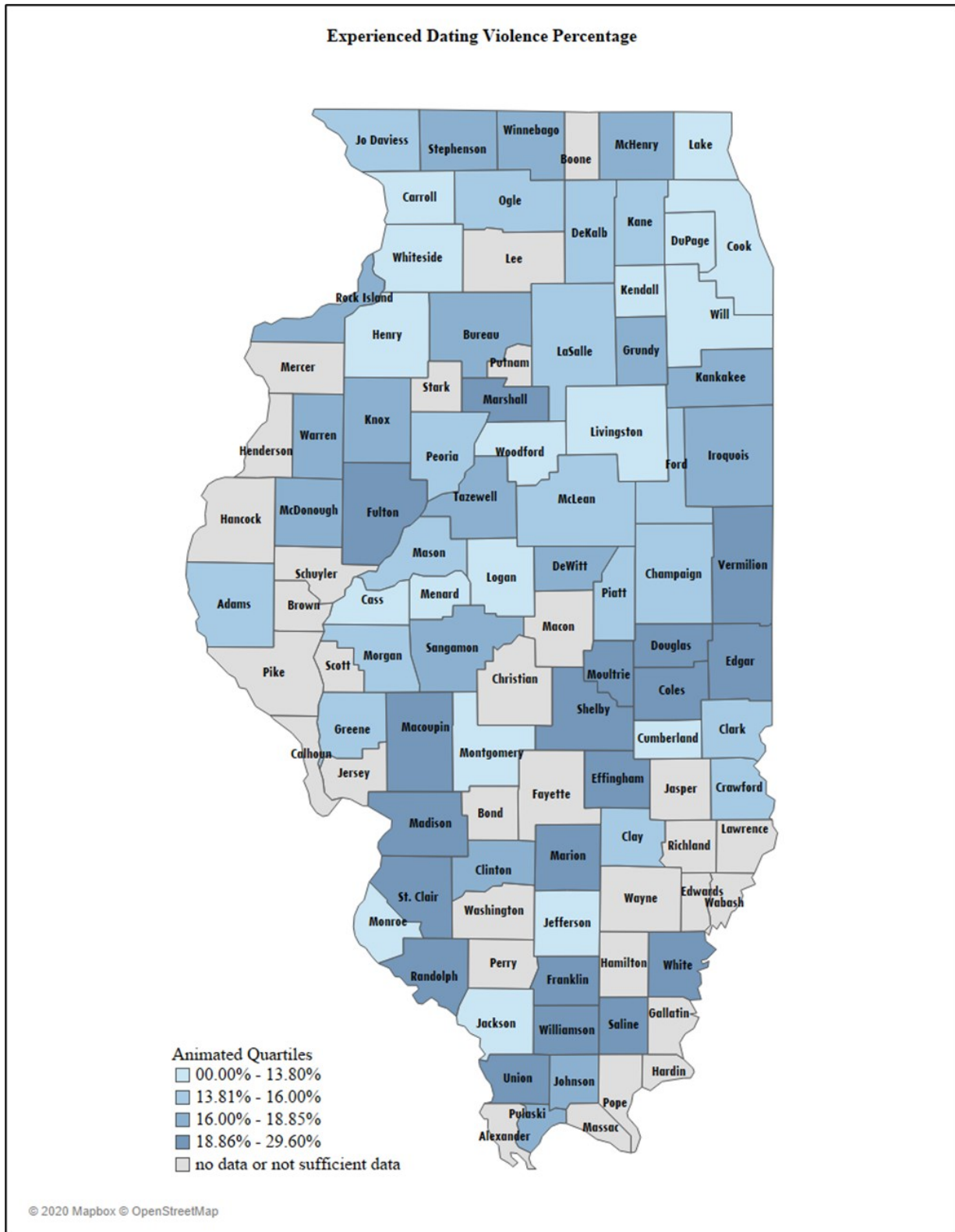
MAP #3: CYBER BULLYING RATES BY COUNTY

Percentage of youth who reported experiencing cyber bullying in the past 12 months by county are shown here. Please see Appendix #4 for county-level reports of specific cyber bullying rates.



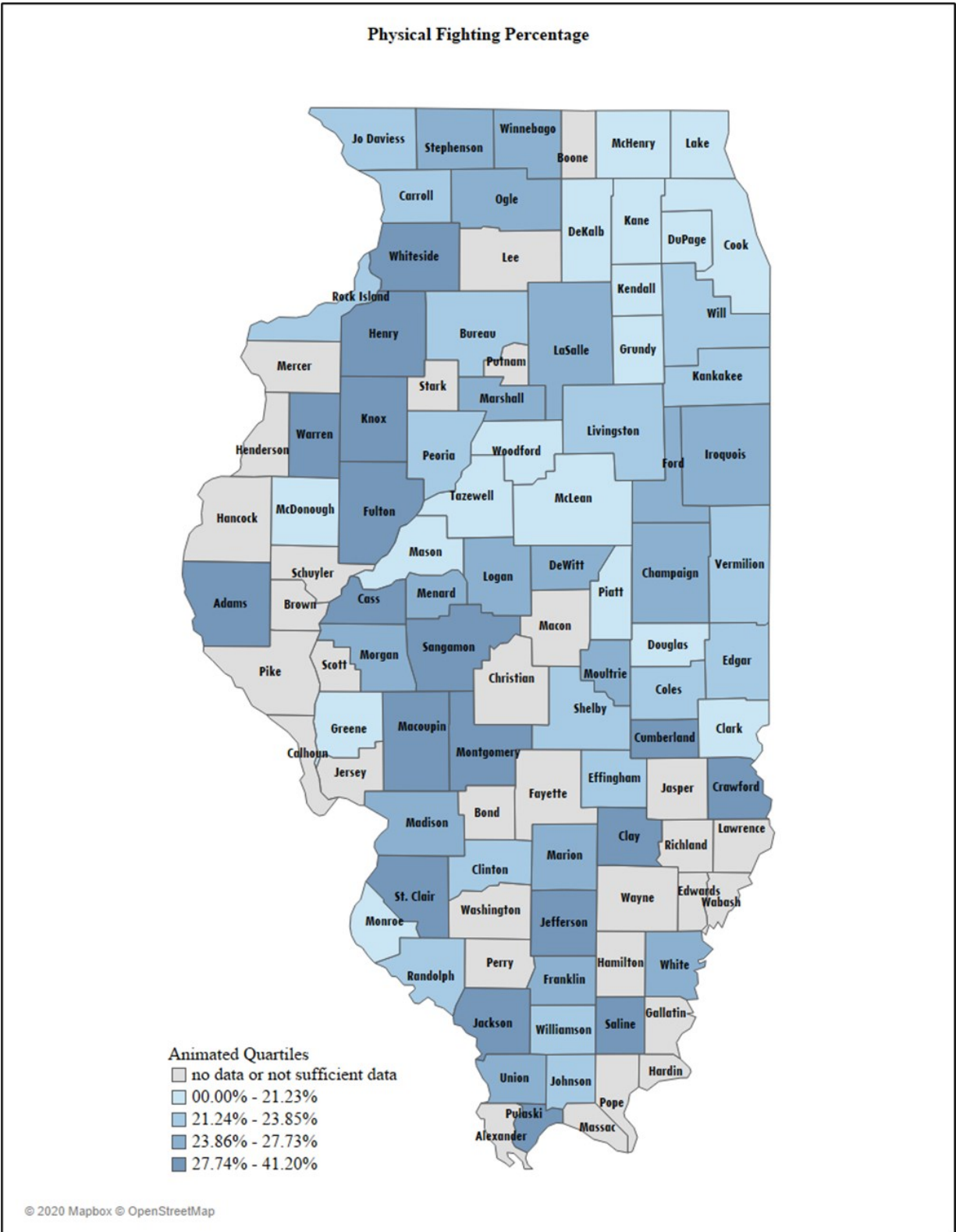
MAP #4: DATING VIOLENCE RATES BY COUNTY

Percentage of youth who reported experiencing a form of dating violence in the past 12 months by county are shown here. Please see Appendix #4 for county-level reports of specific dating violence rates.



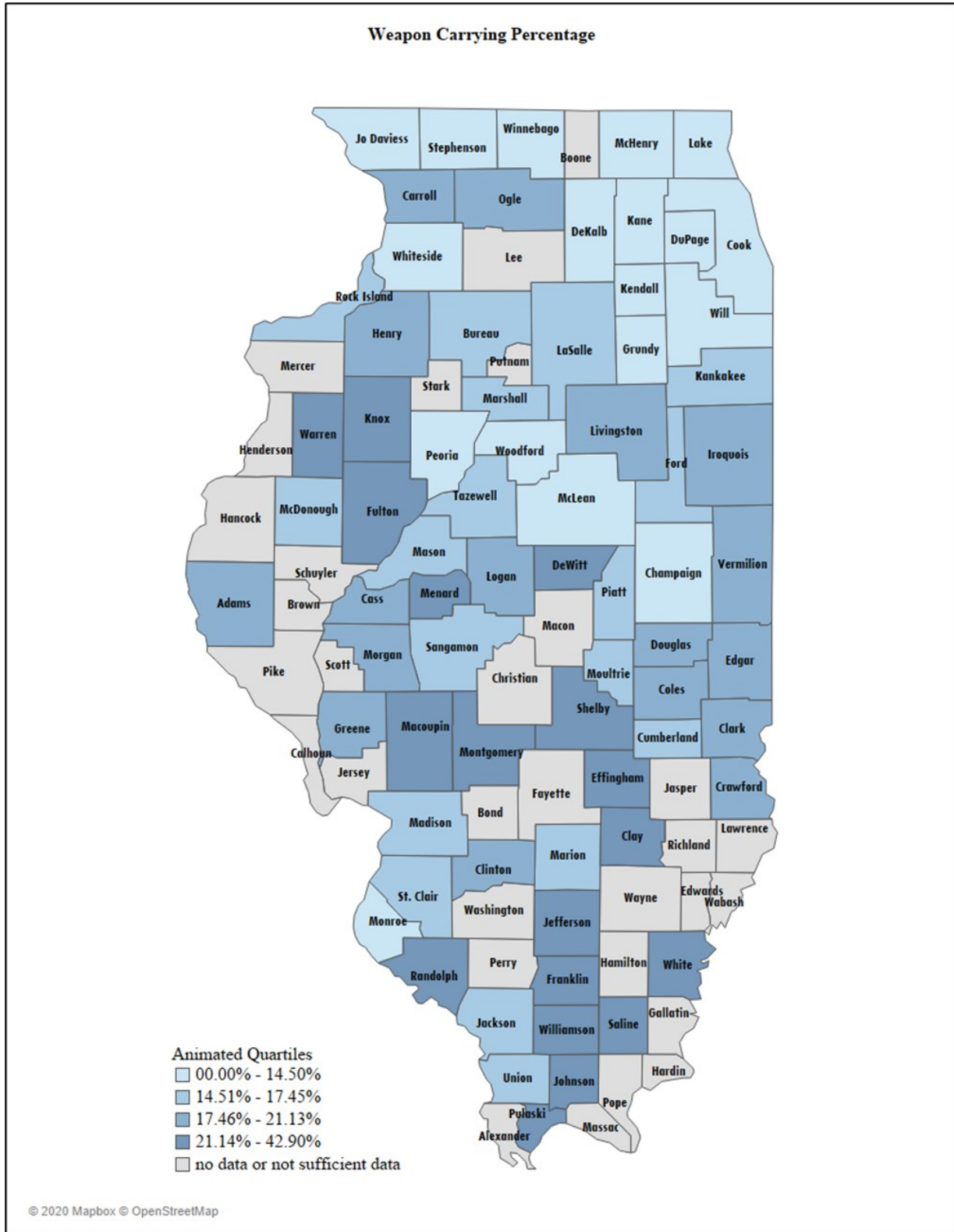
MAP #5: PHYSICAL FIGHTING RATES BY COUNTY

Percentage of youth who reported engaging in a physical fight in the past 12 months by county are shown here. Please see Appendix #4 for county-level reports of specific physical fighting rates.



MAP #6: WEAPON CARRYING RATES BY COUNTY

Percentage of youth who reported carrying a weapon in the past 12 months by county are shown here. Please see Appendix #4 for county-level reports of specific weapon carrying rates.



Disparities by Race/Ethnicity, Gender, Economic Status, Community Type, Grade

Differences by Race/Ethnicity:

For each type of violence or victimization, the racial/ethnic categories with the highest reported rates are in bold text. Across types of violence, Native American/American Indian youth reported high rates of victimization, physical fighting, and weapon carrying.

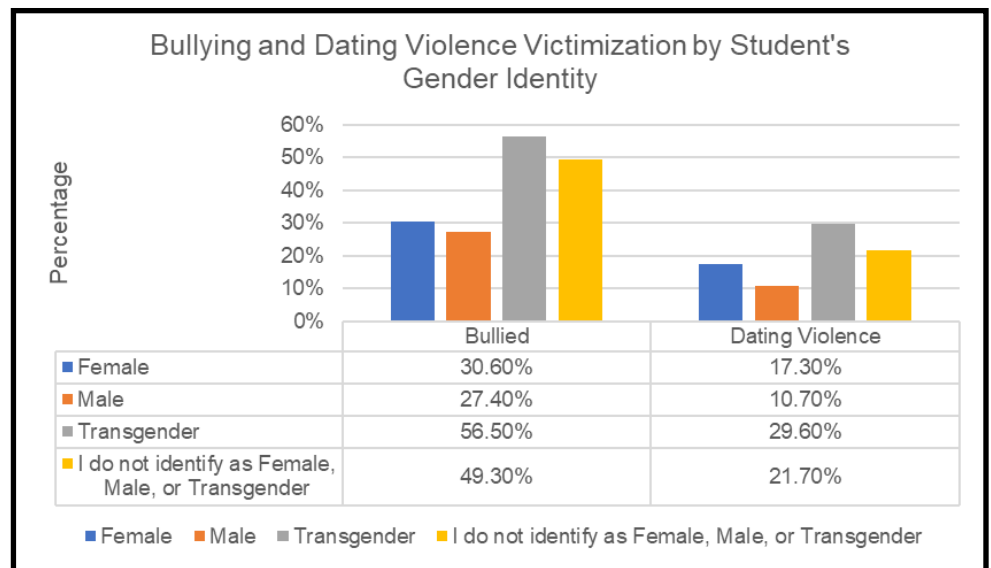
Race/Ethnicity (as listed in IYS survey):	Experienced Bullying	Experienced Cyber Bullying	Experienced Dating Violence	Physical Fighting	Weapon Carrying
White	31%	21%	14%	18%	11%
Black/African American	31%	18%	16%	35%	11%
Latino/Latina	25%	16%	14%	22%	9%
Asian American	24%	13%	10%	12%	5%
Native American/ American Indian	42%	28%	20%	33%	18%
Multiracial	38%	24%	18%	30%	15%
Other	34%	19%	13%	26%	11%

Differences by Gender Identity:

Across types of victimization, transgender youth reported the highest levels, followed by youth who do not identify as female, male, or transgender.

Youth who do not identify as male, female, or transgender reported the highest rates of weapon carrying.

Female youth also reported higher rates of victimization than males; males reported higher rates of physical fighting and weapon carrying than females.



	Experienced Cyber Bullying	Physical Fighting	Weapon Carrying
Female	24.6%	12.8%	5.2%
Male	13.0%	27.6%	15.5%
Transgender	36.1%	31.1%	19.8%
I do not identify as female, male, or transgender	31.4%	33.7%	23.9%



Differences by Economic Status (Eligible for Free or Reduced-Price Lunch Program):

Rates of physical fighting and weapon carrying were higher among youth eligible to receive free or reduced-price lunch. Youth not eligible for free/reduced price lunch reported higher rates of bullying.

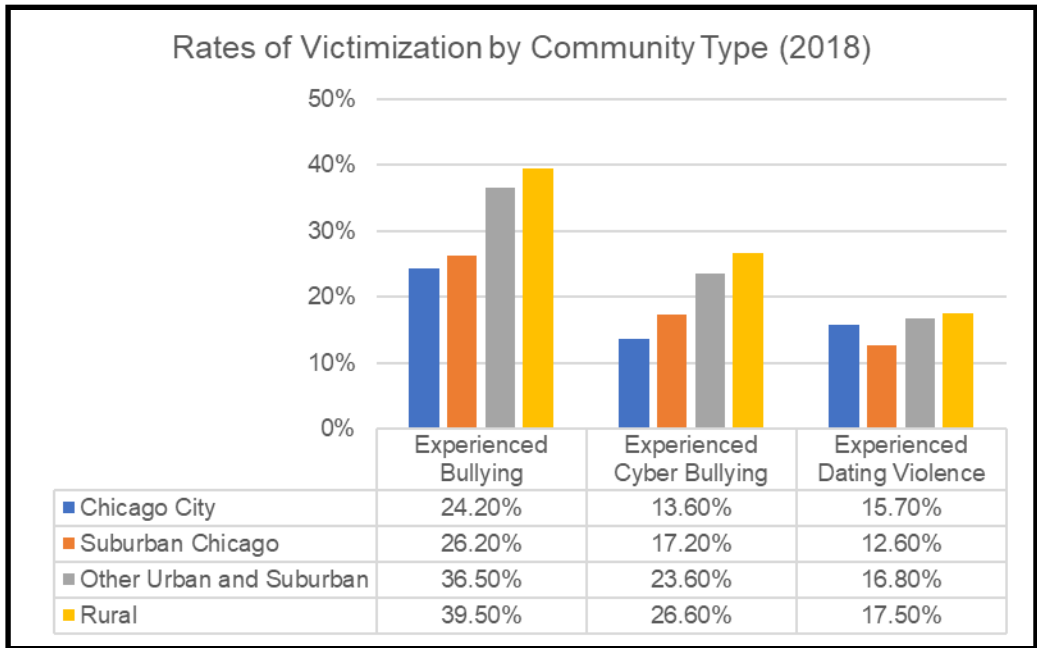
	Experienced Bullying	Experienced Cyber Bullying	Experienced Dating Violence	Physical Fighting	Weapon Carrying
Eligible to Received Free or Reduced-Price Lunch	27.0%	20.8%	15.9%	26.4%	12.1%
Not eligible	33.1%	18.3%	13.1%	16.0%	9.3%

Differences by Community Type:

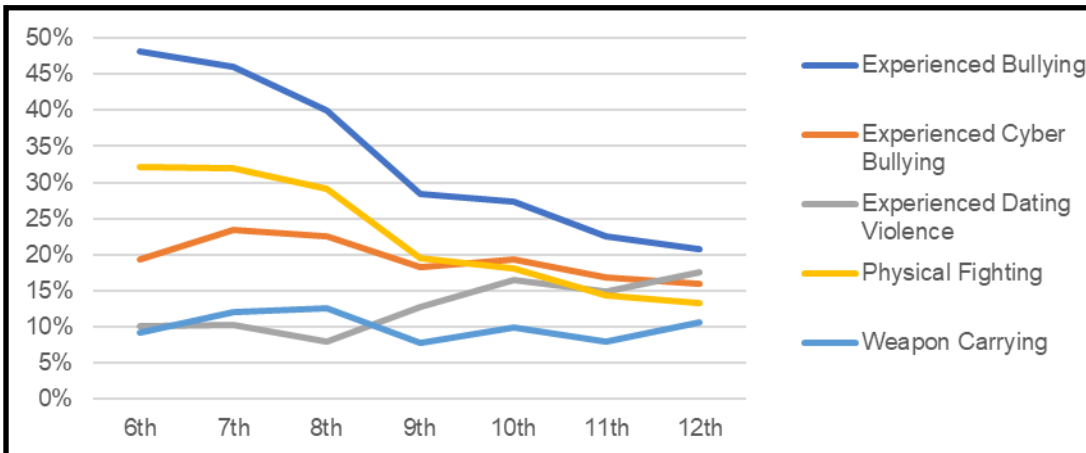
Youth in other urban or suburban counties and rural counties in Illinois reported the highest rates of victimization.

Youth in Chicago City reported the highest rates of physical fighting, followed by youth in rural counties.

The appendix includes more detail about disparities of youth violence within each of these community types.



	Physical Fighting	Weapon Carrying
Chicago City	26.9%	11.2%
Suburban Chicago	17.7%	7.8%
Other Urban and Suburban	23.8%	14.2%
Rural	25.1%	18.8%



Differences by Grade:

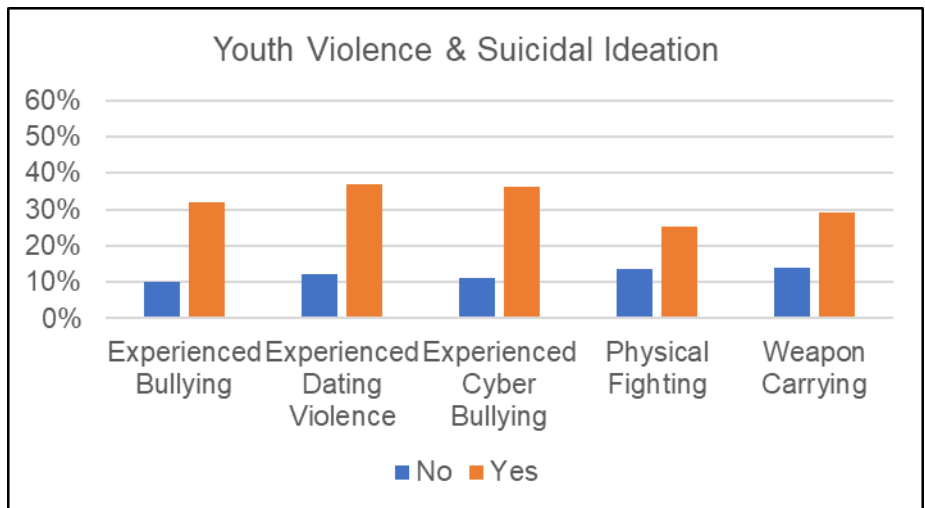
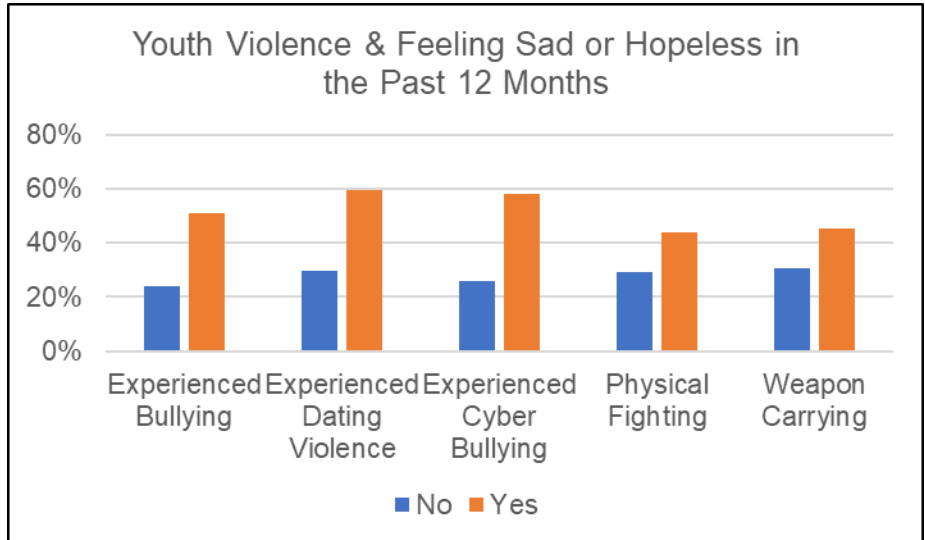
From 6th to 12th grade, students saw a decline in rates of bullying, cyberbullying, and physical fighting. Dating violence increased across grades. The weapon carrying rate stayed low and was at its highest in 8th grade.

Impact of Youth Violence:

Impact of Youth Violence on Mental Health: Depressive Feelings & Suicidal Ideation

A total of 32.3% of youth indicated feeling sad or hopeless in the past 12 months; 15.5% seriously considered attempting suicide.

As shown in these figures, youth who reported experiencing or engaging in the various forms of youth violence had higher rates of also feeling sad or hopeless and suicidal ideation in the past 12 months compared to those who did not report violence.



Results from a logistic regression analysis indicated that each form of youth violence significantly increased the odds of feeling sad or hopeless and suicidal ideation in the past 12 months.

Forms of Youth Violence	Feeling Sad or Hopeless		Suicidal Ideation	
	aOR	p	aOR	p
Experienced Bullying	2.01	<.001	2.19	<.001
Experienced Cyber Bullying	2.15	<.001	2.21	<.001
Experienced Dating Violence	2.46	<.001	2.61	<.001
Physical Fighting	1.24	<.001	1.29	<.001
Weapon Carrying	1.26	<.001	1.67	<.001

Note. aOR = adjusted Odds Ratio.

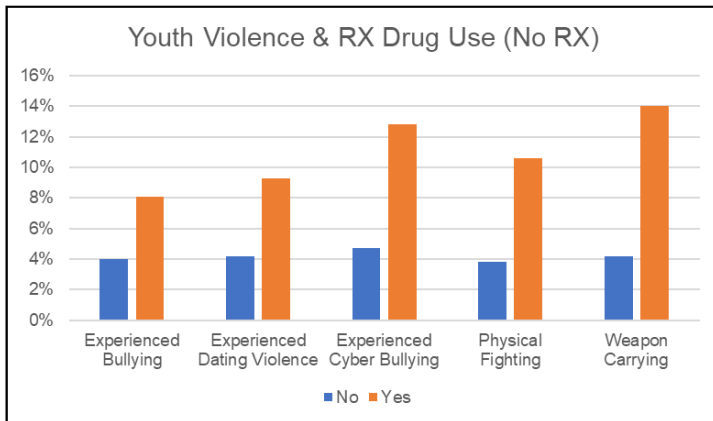
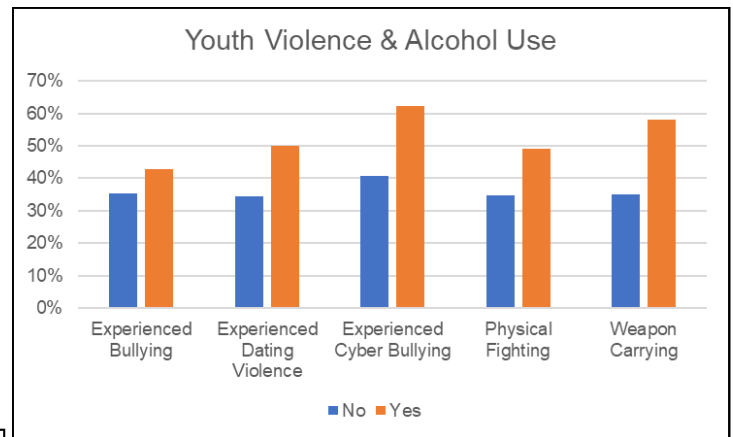


Impact of Youth Violence on Substance Use

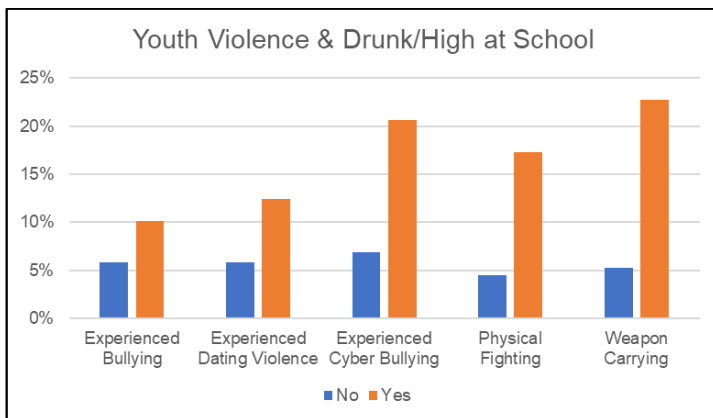
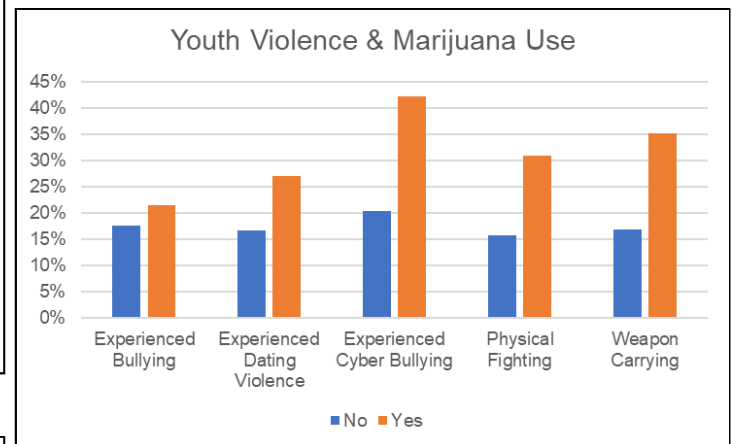
In the past year, youth reported that they:

- Drank beer, wine, or liquor (37.5%)
- Use marijuana (19%)
- Used prescription drugs not prescribed to them (5.3%)
- Were drunk or high at school (7.1%)

Among youth who reported experiencing or engaging in the various forms of youth violence, they had higher rates of also using substances in the past year.



Note: RX Drug Use (No RX) = Prescription Drug Use with no prescription



Results of a logistic regression indicated that most forms of youth violence were associated with a significant increase in the odds of using substances in the past year. However, experiencing bullying was associated with a decrease in the odds of using alcohol or marijuana, as well as being drunk or high at school, in the past year.

	Alcohol Use	Marijuana Use	RX drug Use	Drunk or High at School
Forms of Youth Violence	aOR	aOR	aOR	aOR
Experienced Bullying	0.89	0.76	1.17	0.86
Experienced Cyber Bullying	1.49	1.43	1.36	1.45
Experienced Dating Violence	2.06	2.44	2.17	2.61
Physical Fighting	1.29	1.76	1.90	2.74
Weapon Carrying	1.97	1.82	2.43	2.91

Note. aOR = adjusted Odds Ratio. RX = prescription. All associations were significant at p<.05

Youth Violence: The Role of Perceived Safety & Caring Relationships at School

Perceptions of Safety

Youth rated items about their levels of feeling safe in their neighborhood, at school, or on their way to and from school:

- 7.4% of students felt “sort of unsafe” or “very unsafe” in their neighborhood.
- 12% of students disagreed or strongly disagreed with the statement “I feel safe in my school.”
- 10.6% of students did not go to school in the last month because they felt unsafe at school or on their way to and from school.

Caring Relationships with Teachers and Adults at School

The majority of youth reported that there are caring adults and teachers at school. However, only 61.5% of youth felt that it was *pretty much* or *very much true* that there is a teacher or adult at school who notices if they’re having trouble learning something.

At my school, there is a teacher or some other adult:	% (pretty much true or very)
who really cares about me	70.1
who notices when I'm not there	68.5
who listens to me when I have something to say	73.6
who notices if I have trouble learning something	61.6
who tells me when I do a good job	69.3
who always wants me to do my best	80.0
who believes I will be a success	75.0
who encourages me to work hard in school	76.1

Associations between Youth Violence, Safety, and Caring Relationships

Perceptions of safety in one’s neighborhood and at school were associated with lower odds of youth experiencing or engaging in violence. Also, greater perceptions of caring relationships with teachers and adults at school (i.e., average score across items related to caring teachers or some other adults at school) were associated with lower odds of youth experiencing or engaging in violence.

	Experienced Bullying	Experienced Cyber Bullying	Experienced Dating Violence	Physical Fighting	Weapon Carrying
	aOR	aOR	aOR	aOR	aOR
Perceptions of Neighborhood Safety	0.79	0.82	0.82	0.79	0.78
Perceptions of School Safety (“I feel safe	0.72	0.71	0.78	0.88	0.87
Perceptions of Caring Relationships with	0.97	0.94	0.91	0.83	0.81

Note: aOR = adjusted odds ratio. All statistically significant at $p < .05$.



Youth Violence sections: 1) Youth Violence in Illinois, 2) Disparities: Youth Violence by Race/Ethnicity, Gender, Economic Status, Community Type, and Grade, 3) The Impact of Youth Violence: Associations with Depressive Feelings, Suicidal Ideation, and Substance Use, and 4) Youth Violence: The Role of Perceived Safety & Caring Relationships at School **data were provided by:**

Center for Prevention Research and Development (CPRD; 2018). *Illinois Youth Survey, 2018*. Center for Prevention Research and Development, University of Illinois at Urbana-Champaign School of Social Work.

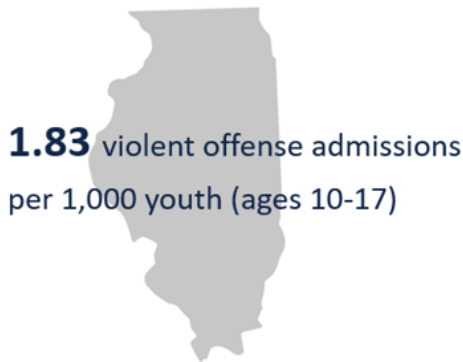
For more information on the IYS: <https://iys.cprd.illinois.edu/>



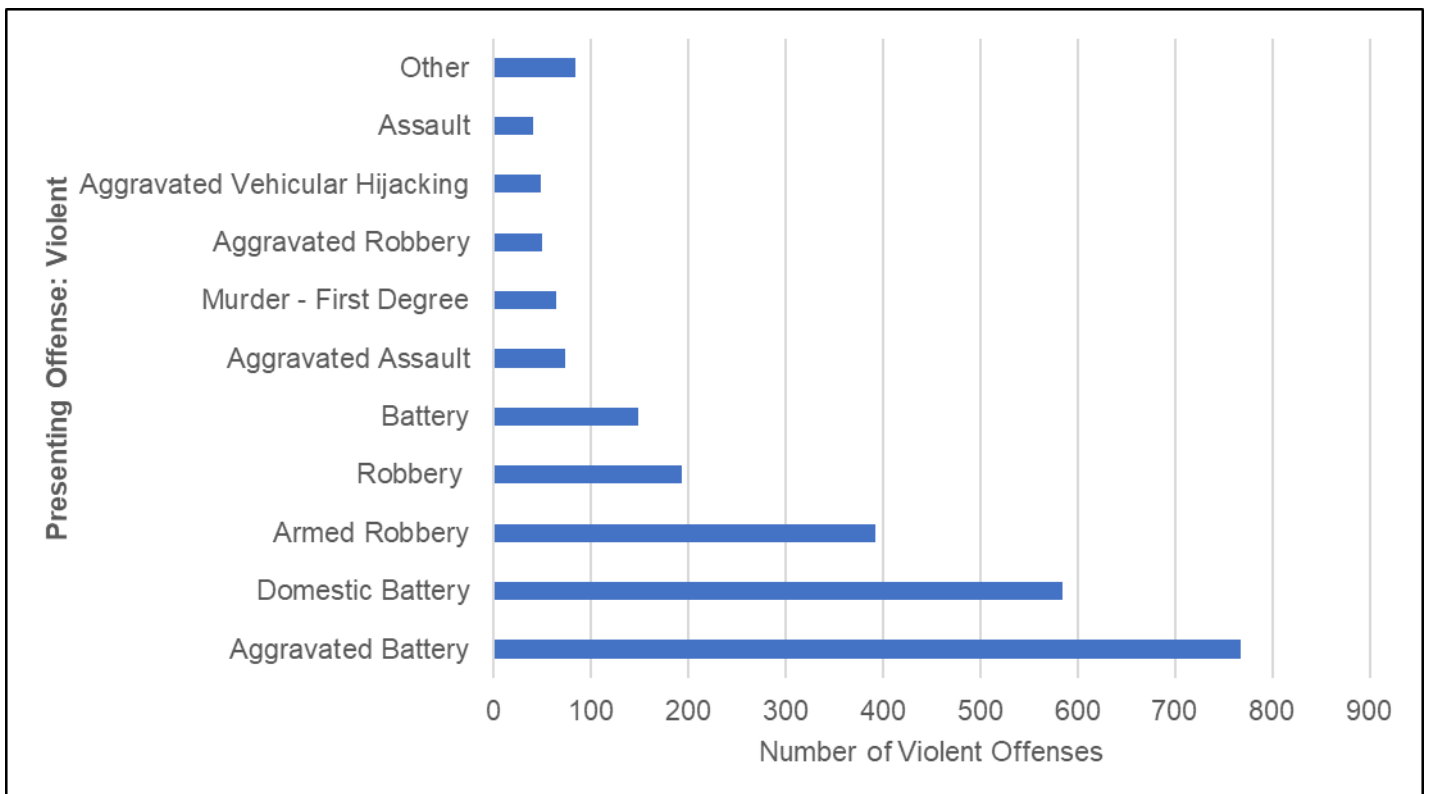
JUVENILE DETENTION FOR VIOLENT OFFENSES

In 2018, there were 9,014 juveniles were admitted to detention in short-term, locked facilities in Illinois (administered by the Chief Circuit Judge; these facilities are the equivalent of county jails). The median number of admissions per county was 14; seven counties had 0 admissions in 2018.

A total of 27.24% of detention admissions were for a violent offense (N = 2,455). For the state of Illinois in 2018, this translates to a rate of 1.83 violent offense admissions per 1,000 youth (ages 10-17). This is lower than the national rate (National Center for Juvenile Justice, 2020).



In Illinois, male youth accounted for about 77% of the violent offense admissions. As shown in the table below, most of the violent offenses were for aggravated battery and domestic battery.





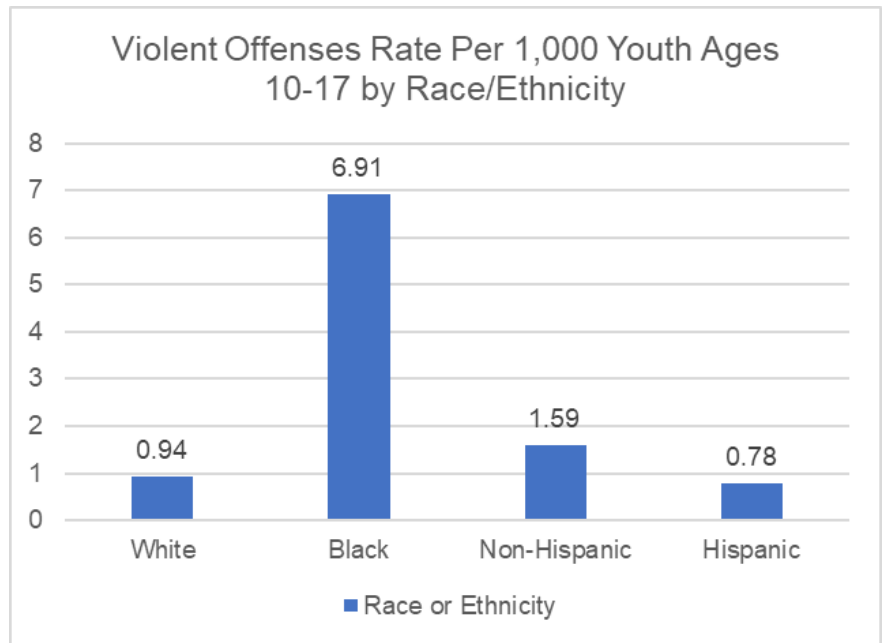
Differences by Sex, Race, and Ethnicity

Violent offenses by a male were at a rate of 2.19 per 1,000 male youth ages 10-17.
Violent offenses by a female were at a rate of 0.85 per 1,000 female youth ages 10-17.

Black youth had a higher rate of violent offense admissions compared to White, Non-Hispanic, and Hispanic youth.

These disparities were also seen at the national level during 2018. Black youth had higher rates of violent offense admissions (5.43 per 1,000 youth ages 10-17), compared to White youth (1.02 per 1,000 youth ages 10-17) and Hispanic youth (1.83 per 1,000 youth ages 10-17; National Center for Juvenile Justice, 2020).

The next page displays rates of violent offenses (per 1,000 youth ages 10-17) by juveniles in 2018 by county in Illinois. County specific rates can be found in [Appendix #3](#).



Juvenile Violent Offenses & Differences by Sex, Race, and Ethnicity sections data were pulled from:

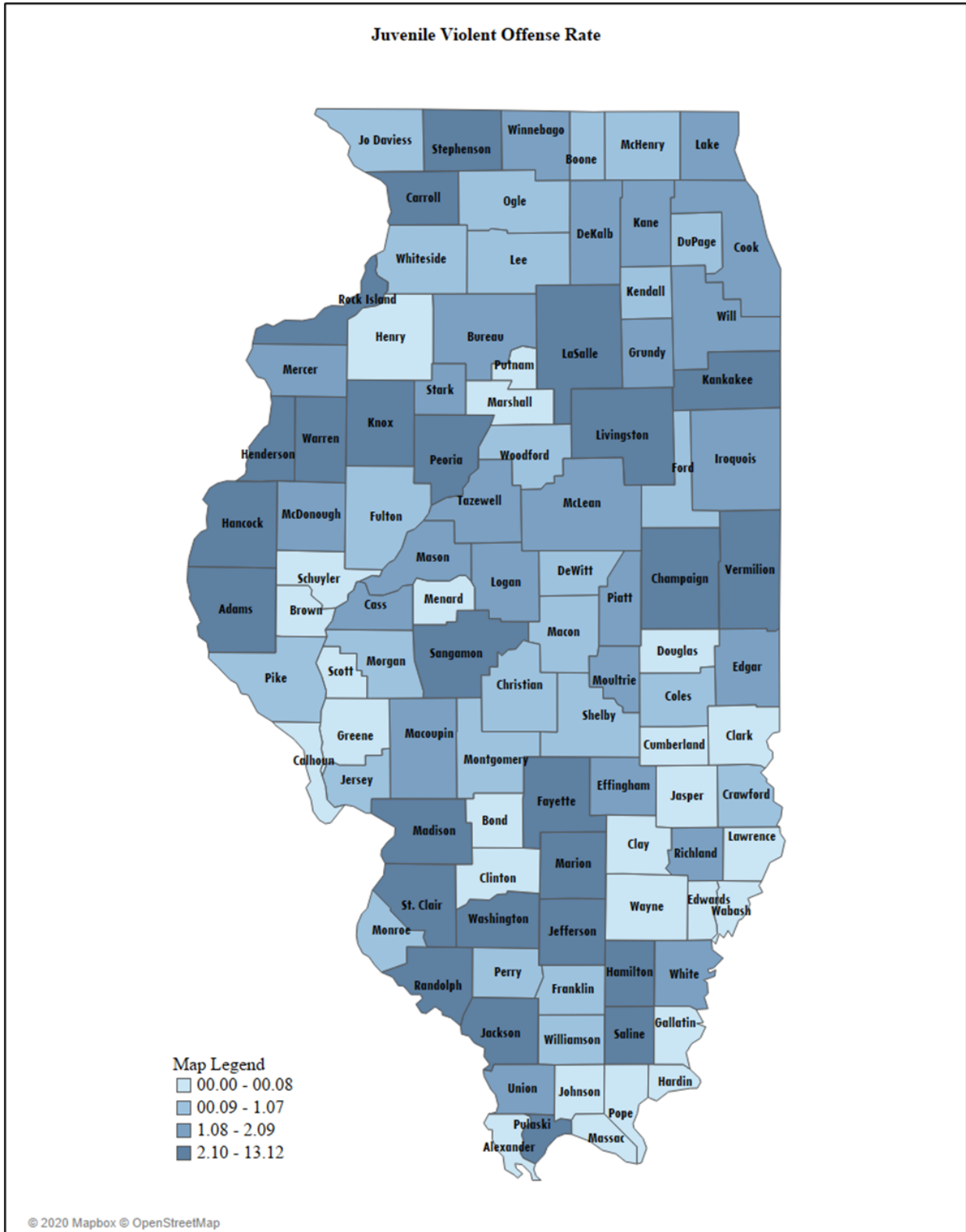
Illinois data provided by the Center for Prevention Research and Development, which manages data for the Illinois Juvenile Justice Commission. More information: <https://cprd.illinois.edu/expertise/juvenile-justice-reform-and-prevention/>

Illinois Juvenile Justice Commission & University of Illinois Center for Prevention Research & Development (2020). Illinois Juvenile Detention Data Report, Calendar Year 2018. Retrieved from <http://ijjc.illinois.gov/sites/ijjc.illinois.gov/files/assets/IJJC%20CY%202018%20Annual%20Illinois%20Juvenile%20Detention%20Data%20Report%20Final.pdf>

National Center for Juvenile Justice. (2020). *National Juvenile Court Data Archive: Juvenile court case records 1985-2018* [machine-readable data files]. Pittsburgh, PA: NCJJ [producer].

MAP #7: JUVENILE VIOLENT OFFENSES BY COUNTY

Rates of violent offenses (per 1,000 youth ages 10-17) by juveniles in 2018 by county in Illinois. Please see Appendix #4 for county-level reports of specific juvenile violent offense rates.





JUVENILE WEAPON-RELATED OFFENSES

Juvenile weapon-related offenses include:

1. Aggravated Discharge of a Firearm
2. Reckless Discharge of a Firearm
3. Unauthorized Possession or Storage of Weapons
4. Unlawful Possession of Firearms and Firearm Ammunition
5. Unlawful Sale or Delivery of Firearm at School
6. Unlawful Sale or Purchase of Firearms
7. Unlawful Use of a Weapon
8. Unlawful Use or Possession of a Weapon
9. Defacing Identification Mark of Firearm

In 2018, 38 counties in Illinois had admissions for a weapons-related offense, with a rate of 0.26 per 1,000 Illinois youth admitted for a weapon-related offense.

Most of the weapon-related offenses took place in Cook County. The top 15 counties with weapon-related offenses are listed in the table.

County	Weapon-Related Offense	Detention Rate per 1,000 youth
Cook	728	1.45
Will	32	0.37
Winnebago	30	0.99
Kane	25	0.38
St. Clair	22	0.79
Vermilion	20	2.46
Sangamon	17	0.83
Macon	15	1.45
Madison	15	0.57
Peoria	15	0.81
Kendall	13	0.74
Lake	13	0.16
Champaign	11	0.64
Rock Island	11	0.78
DuPage	10	0.10
<i>23 Counties had fewer than 10 admissions per county in 2018</i>		
<i>65 Counties had 0 admissions in 2018</i>		

This rate differed by demographic factors:

Race/Ethnicity:

- Black youth: 0.91 per 1,000 youth (ages 10-17)
- White youth: 0.12 per 1,000 youth (ages 10-17)
- Non-Hispanic youth: 0.27 per 1,000 youth (ages 10-17)
- Hispanic youth: 0.10 per 1,000 youth (ages 10-17)

Sex:

This rate also differed for male (0.48 per 1,000 youth) and female (0.03 per 1,000 youth).

Juvenile Weapons-Related Offenses data were pulled from:

Illinois data provided by the Center for Prevention Research and Development, which manages data for the Illinois Juvenile Justice Commission. More information: <https://cprd.illinois.edu/expertise/juvenile-justice-reform-and-prevention/>

ADULT VIOLENT OFFENSES

In 2018, reports totaled 395.75 violent crimes per 100,000 residents in Illinois. Violent crimes include any person offenses, including murder, sexual assault, robbery, and aggravated assault (Illinois Criminal Justice Information Authority, 2020). The rate in Illinois was higher than the national rate in 2018 (Federal Bureau of Investigation, 2018).



Differences by Race & Sex

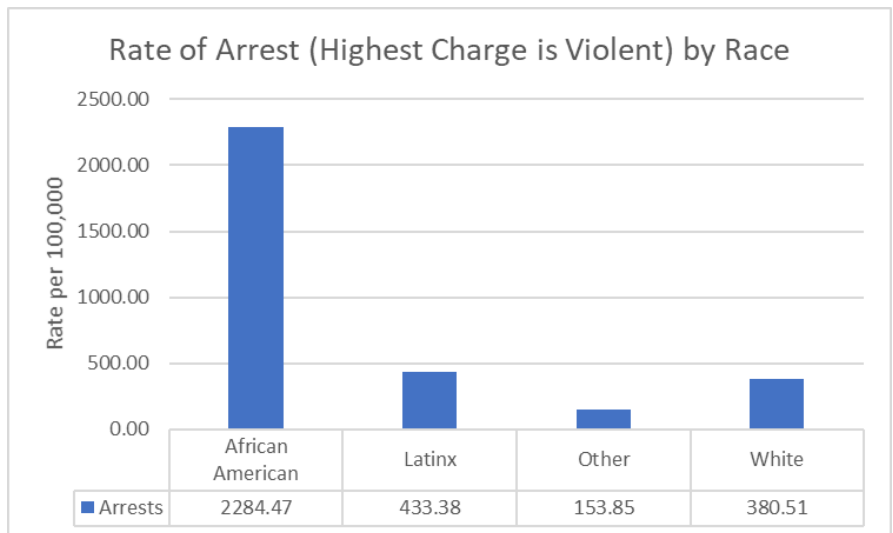
Where the highest charge was violent, African American adults experienced the highest rate of arrest.

For example, there were 2,284.47 arrests per 100,000 African American adults, while there were 380.51 arrests per 100,000 White adults.

Conviction rates showed similar disparities. There were 304.33 convictions per 100,000 African American adults, while there were 74.38 convictions per 100,000 White adults. Latinx (41.37 per 100,000) and Other races (19.32 per 100,000) also showed lower rates of conviction than African American adults.

Male adults had a higher rate of arrest (1,011.01 per 100,000) and conviction (168.20 per 100,000) for violent offenses compared to female adult arrests (283.15 per 100,000) and convictions (31.45 per 100,000).

Rates of violent crimes in Illinois by county are shown on the next page. The table at right lists the 10 counties with the highest rates (rate of violent crime per 100,000 residents in Illinois).



County	Rate per 100,000
1. Vermilion	933.52
2. Winnebago	839.55
3. Jefferson	764.15
4. Sangamon	624.01
5. Cook	614.94
6. Peoria	565.27
7. Marion	552.90
8. Cass	513.87
9. Champaign	453.85
10. Adams	429.28

Adult Violent Offenses data were pulled from:

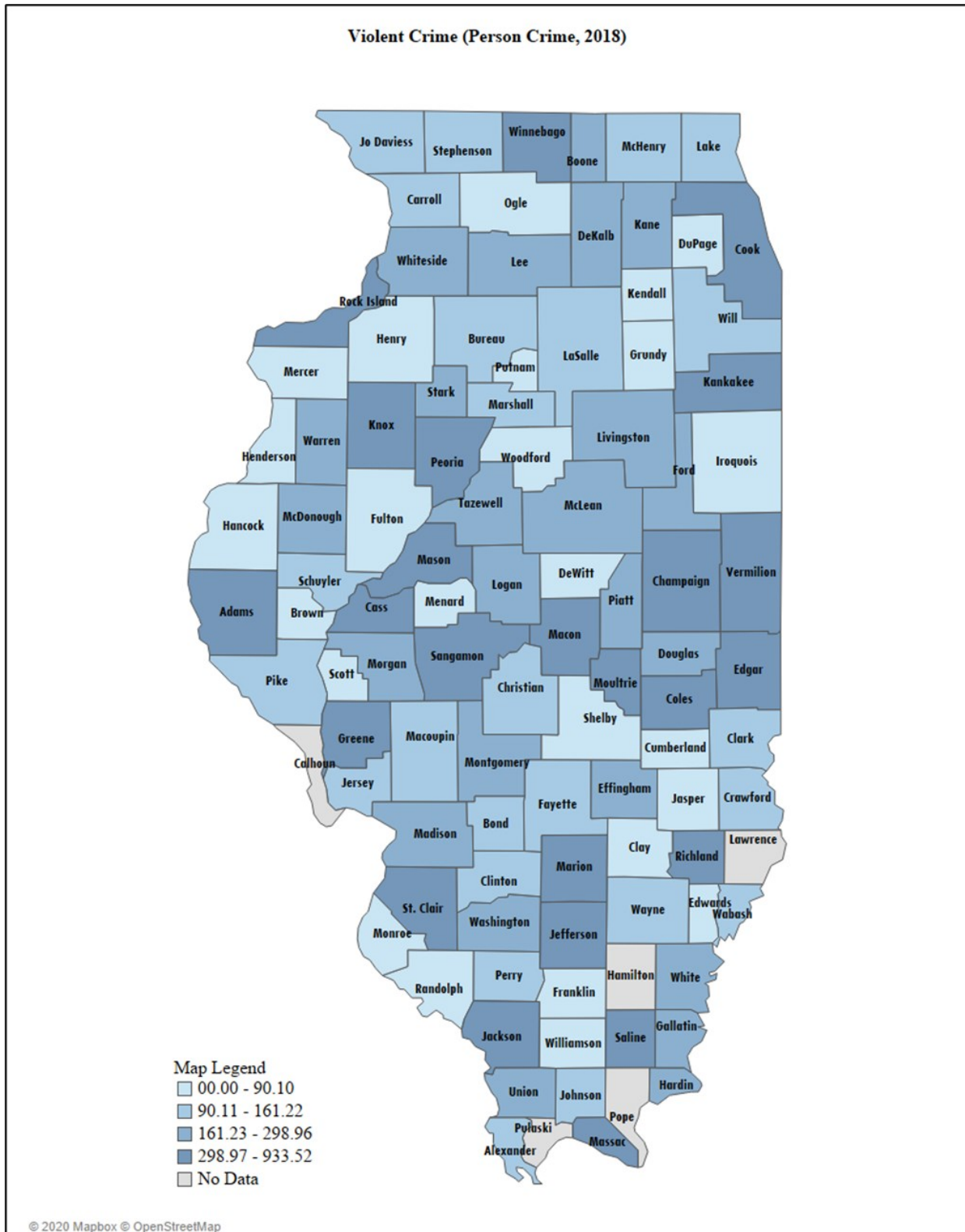
Illinois Criminal Justice Information Authority. (2020). *Uniform Crime Report Index Offense Explorer*. <https://app.icjia.cloud/app/ucr-index-offense-explorer>

Federal Bureau of Investigation. (2018). *2018 Crime in the United States*. <https://ucr.fbi.gov/crime-in-the-u.s/2018/crime-in-the-u.s.-2018/topic-pages/violent-crime>

Data on race and sex were provided by the Illinois Criminal Justice Information Authority.

MAP #8: ADULT VIOLENT OFFENSES BY COUNTY

Rates of violent offenses (per 100,000 residents) in 2018 by county in Illinois. Please see Appendix #4 for county-level reports of specific adult violent offense rates.

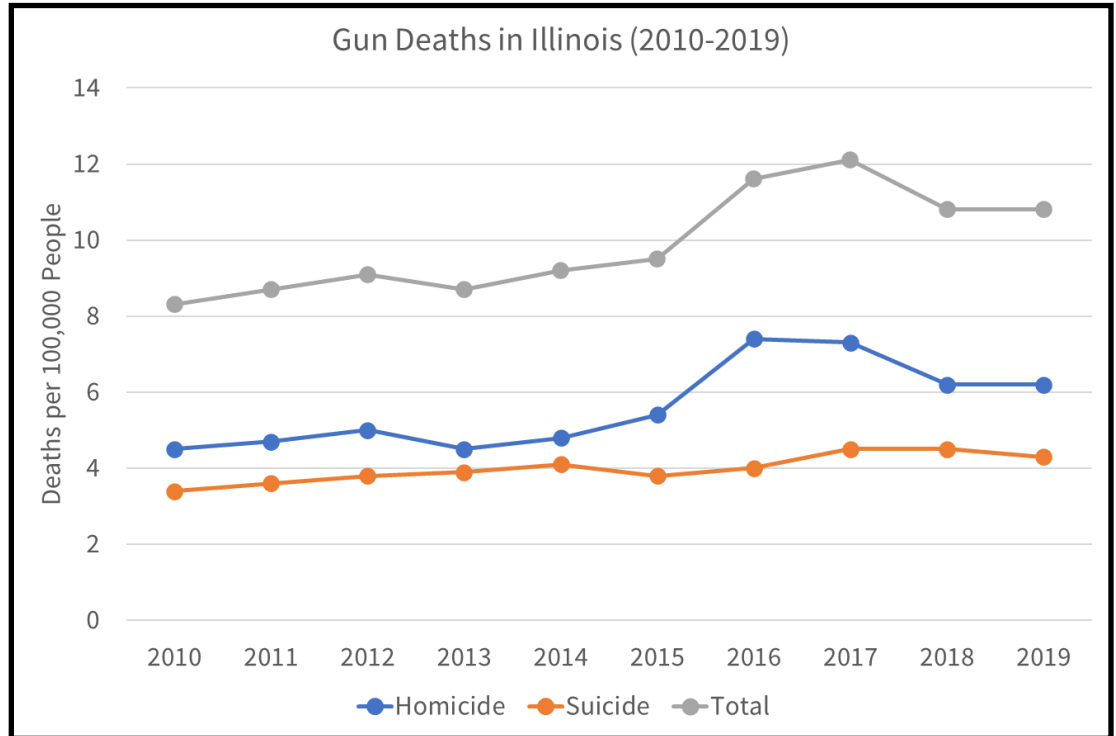


GUN VIOLENCE

In 2018, there were **1,382 deaths involving a firearm** (56.7% of these deaths were a homicide, 41.5% were a suicide, and 1.8% Other) in Illinois. This totals 10.85 deaths by a firearm per 100,000 residents in Illinois. This is lower than the national rate of 12.15 per 100,000 residents (Centers for Disease Control and Prevention, 2020).

- About 79% of all homicides involved a firearm
- About 39% of all suicides involved a firearm

From 2010 to 2019, there has been an increase in the rate of gun deaths.



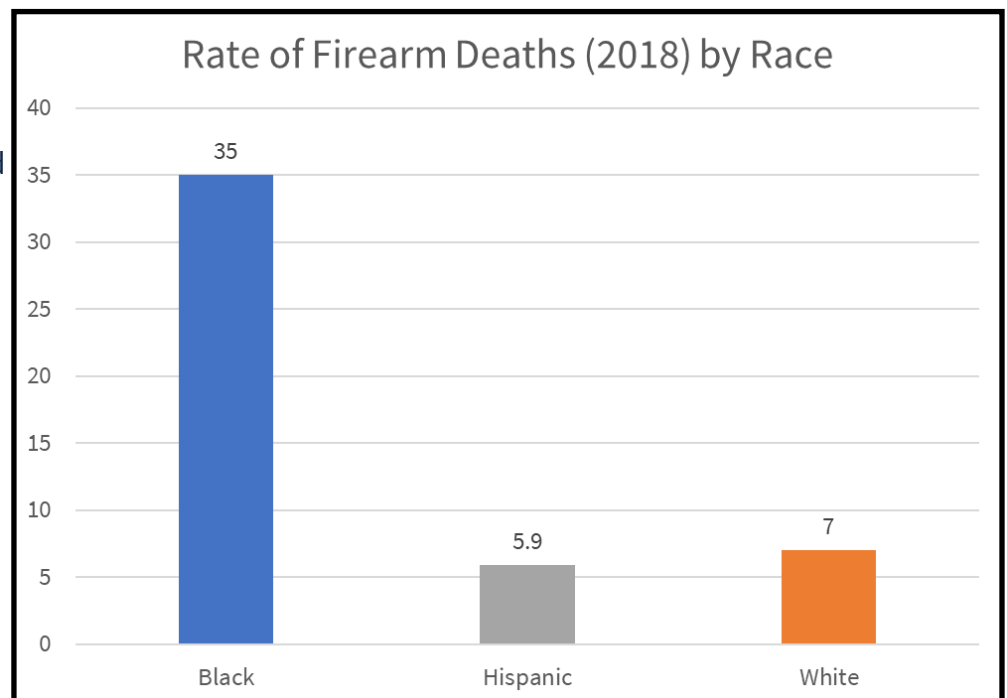
Disparities in Rates by Gender, Age, and Race

More males were victims of gun violence (88%) than females.

Most victims of gun violence were between the ages of 15 and 24 (25%), 25 to 34 (26%), and 35 to 44 (15%).

In 2018, there were 108 victims of gun violence who were 18 years of age or younger.

Black people experience disproportionately higher rates of firearm deaths than White and Hispanic people.



Firearm Death Rates by County

Across Illinois, counties with the highest rates of firearm deaths in 2018 included Vermilion County, St. Clair County, and Winnebago County.

Counties with the highest rates of homicides by a firearm included St. Clair County, Cook County¹, and Winnebago County.

Note: Some cells do not include rates when data are suppressed or considered unreliable in this dataset.

	Homicide Rate by Firearm (per 100,000)	Suicide Rate by Firearm (per 100,000)	Total: Death Rate by Firearm (per 100,000)
State of Illinois	6.2	4.5	10.8
Cook County	10.9	3.2	14.2
DuPage County	-	2.9	4.2
Kane County	-	-	5.2
Lake County	-	3.4	5.7
Madison County	-	-	11.7
Peoria County	-	-	14.4
St. Clair County	12.6	8.0	21.5
Sangamon County	-	-	10.2
Vermilion County	-	-	27.3
Will County	-	3.2	5.9
Winnebago County	8.8	7.7	16.9

Gun Violence data were pulled from:
 Centers for Disease Control and Prevention (2020). National Center for Health Statistics: Underlying Cause of Death 1999-2019 on CDC WONDER Online Database, released in 2020. Data are from the Multiple Cause of Death Files, 1999-2019, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Accessed at <http://wonder.cdc.gov/ucd-icd10.html>

¹ The City of Chicago publishes violent crime statistics by district. Rates of gun violence and violent crime are higher in specific parts of the city. For more information please see: <https://home.chicagopolice.org/wp-content/uploads/2019/07/2018AnnualReport-05July19.pdf>

“We have to put more money towards violence prevention. Organizations have to fight for grant funding to do this very necessary work. We have volunteers carrying huge emotional loads. We could get more people to do the work if they could be compensated.”

- Respondent, Violence Prevention and Intervention Staff Survey

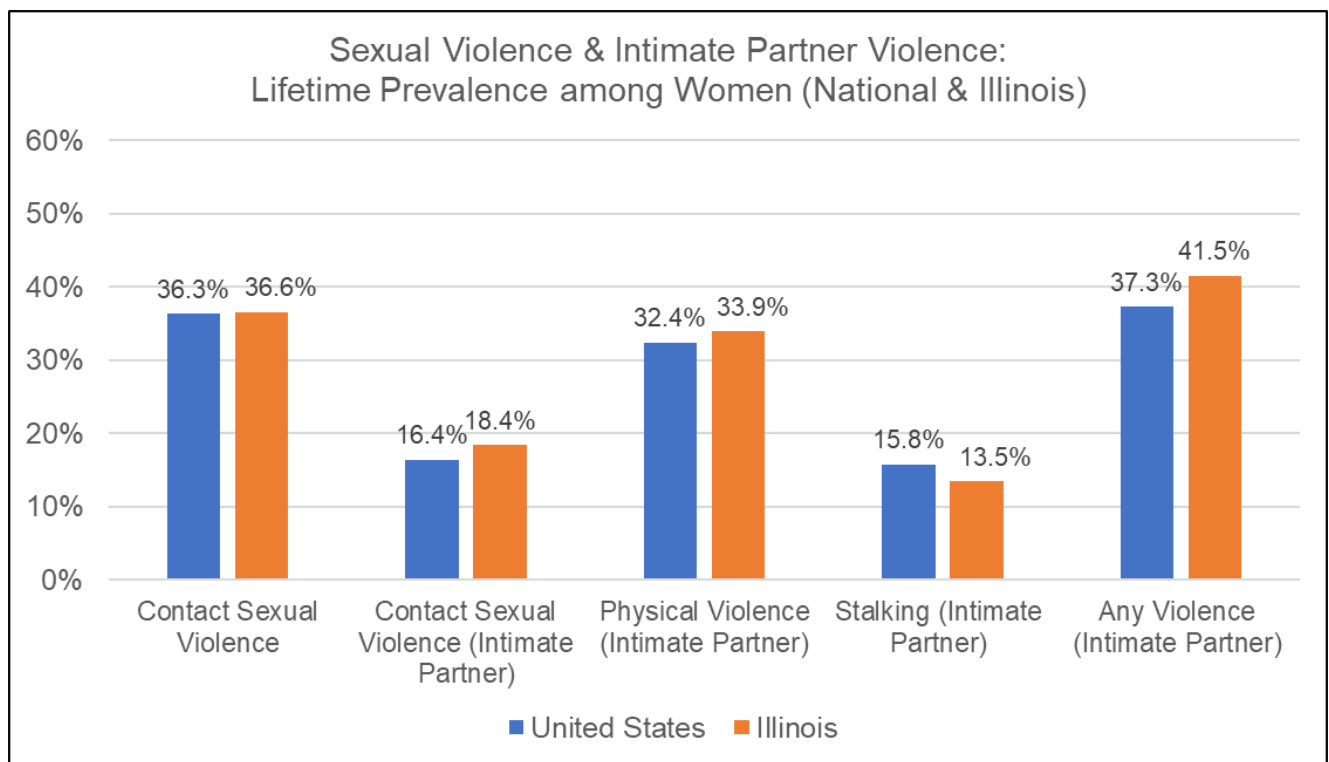


ADULT INTIMATE PARTNER VIOLENCE & SEXUAL VIOLENCE

The National Intimate Partner and Sexual Violence Survey (NISVS 2010-2012; Smith et al., 2017) released a report at the state level, which included lifetime and 12-month prevalence estimates.

This report estimated that about 443,000 women will experience physical or sexual domestic violence annually in Illinois, and about 703,000 women will experience psychological abuse within a relationship annually in Illinois.

This report indicated that women in Illinois had similar lifetime rates of sexual violence and intimate partner violence to national rates. However, these rates also indicated that about 1 in 3 women will experience contact sexual violence, physical intimate partner violence, or any violent victimization by an intimate partner in their lifetime.



Note: Contact sexual violence includes rape, being made to penetrate someone else, sexual coercion, or unwanted sexual contact (NISVS, 2010-2012).

Adult Intimate Partner Violence & Sexual Violence data:

Smith, S. G., Chen, J., Basile, K. C., Gilbert, L. K., Merrick, M. T., Patel, N., Walling, M., & Jain, A. (2017). The National Intimate Partner and Sexual Violence Survey (NISVS): 2010-2012 State Report. Atlanta, GA: Centers for Disease Control and Prevention.

<https://www.cdc.gov/violenceprevention/pdf/NISVS-StateReportBook.pdf>

Adult Domestic Violence Offense data

Data retrieved from Illinois Criminal Justice Information Authority Research Hub Datasets:

Illinois Uniform Crime Reports (UCR) Domestic Crime Offense (2018).

<https://icjia.illinois.gov/researchhub/datasets/illinois-uniform-crime-reports-ucr-domestic-crime-offense>

Adult Sexual Assault Offense data

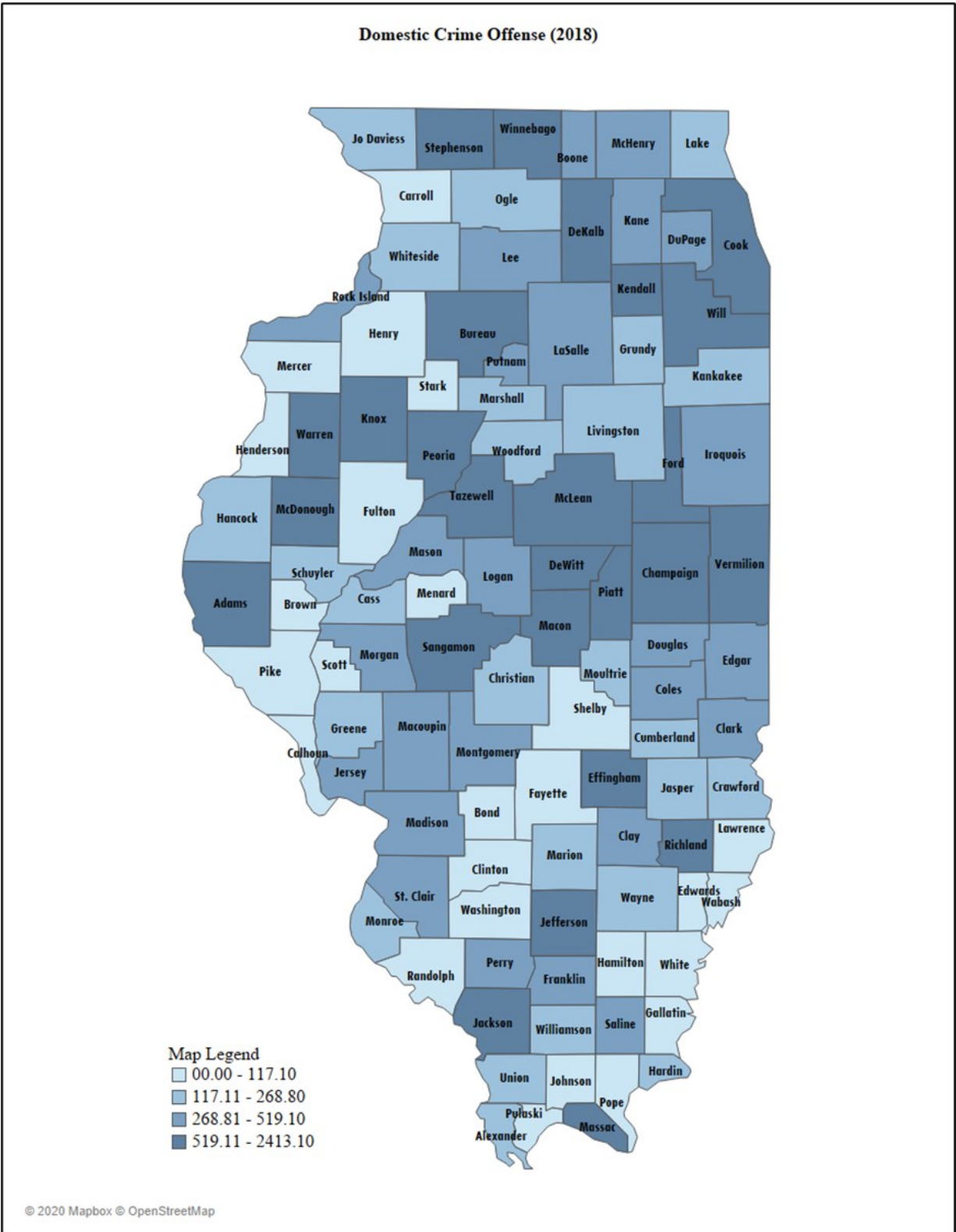
Data retrieved from Illinois Criminal Justice Information Authority Research Hub Datasets:

Illinois Uniform Crime Reports (UCR) Index Crime Offense (2018).

<https://icjia.illinois.gov/researchhub/datasets/illinois-uniform-crime-reports-ucr-index-crime-offense>

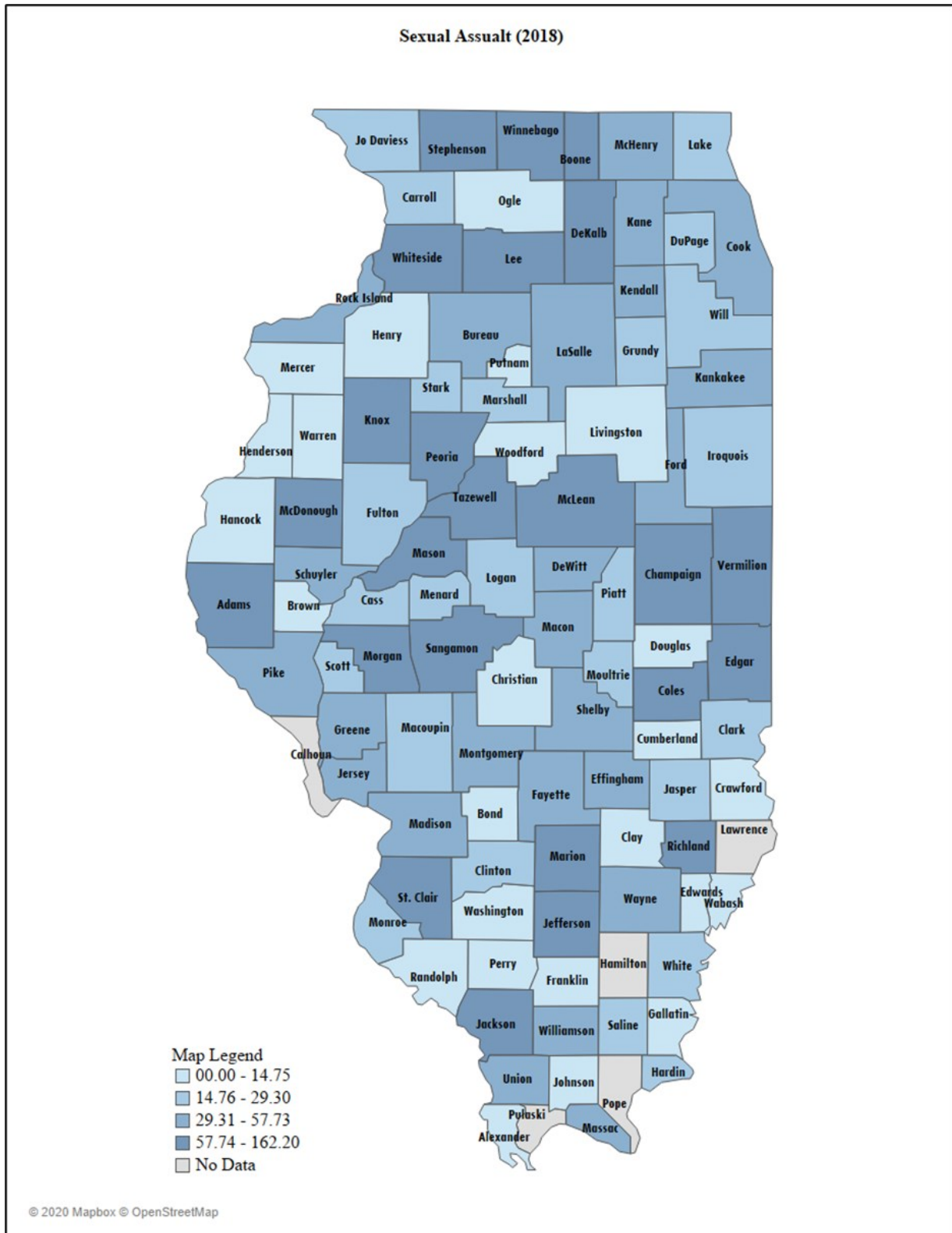
MAP #9: DOMESTIC CRIME OFFENSES BY COUNTY

Rates of domestic crime offenses (per 100,000 residents) in 2018 by county in Illinois. Please see Appendix #4 for county-level reports of specific domestic crime offense rates.



MAP #10: SEXUAL ASSAULT OFFENSES BY COUNTY

Rates of sexual assault offenses (per 100,000 residents) in 2018 by county in Illinois. Please see Appendix #4 for county-level reports of specific sexual assault offense rates.



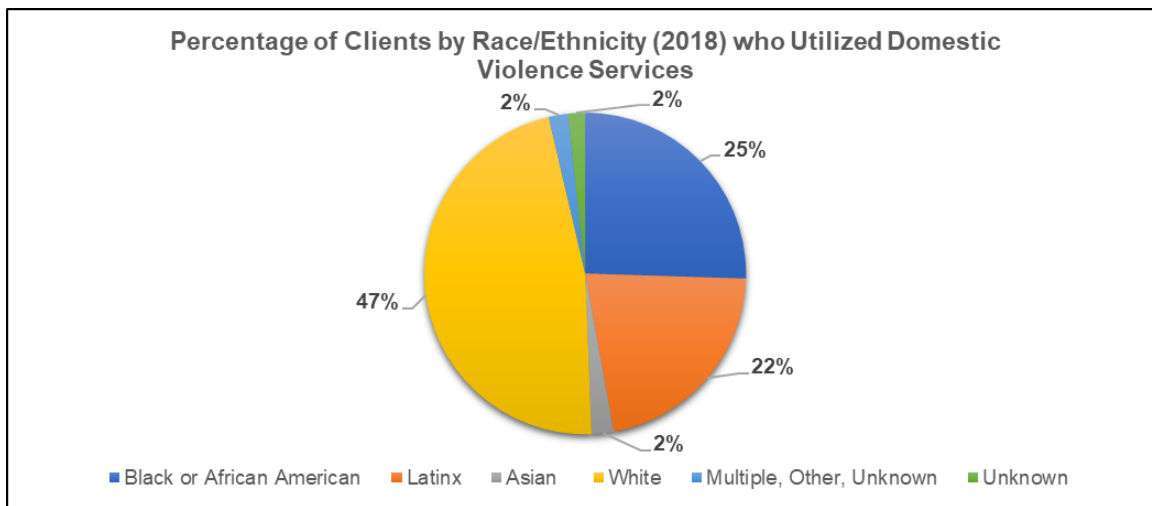
Victim Services Utilization: Domestic Violence & Sexual Assault

Domestic violence and sexual violence remain under-reported. In 2018, 55,648 individuals accessed a domestic violence or sexual violence victim service in Illinois. These services included a 24-hour crisis hotline, information and referrals, counseling, legal and medical advocacy, transportation, outreach, and community education.

In Illinois, most domestic violence service agencies use InfoNet, an online case management system through the Illinois Criminal Justice Information Authority. InfoNet contains data about victims of domestic violence who receive services, including demographic information and service information (e.g., duration and type of service). Between 2001 and 2018, nearly 800,000 adults and children were served by Illinois Domestic Violence Agencies (on average, this is about 57,684 clients a year; Houston-Kolnik et al., 2019). The majority (86%) clients served at domestic violence agencies indicated that they experienced violence from an intimate partner, while the rest included abuse from children or grandchildren, parents, or other family and household members.

	Count – 2018
Sexual Assault	10,707
Domestic Violence	44,941
Total	55,648

In 2018, over 90% of domestic violence and sexual assault services were utilized by female-identifying clients, and 47% of clients were White.



Victim Services in Illinois

For information on Illinois Department of Human Services Offices and Service Providers for Domestic Violence Victim Services and for Rape Crisis Centers, please visit: <https://www.dhs.state.il.us/page.aspx?module=12&officetype=17&county=>

References:

Houston-Kolnik, J. D., Kirkner, A., Guharay, R., & Hiselman, J. (2019). Domestic violence trends in Illinois: Victimization characteristics, help-seeking, and service utilization. Chicago, IL: Illinois Criminal Justice Information Authority.

Data for Victim Services Utilization—Domestic Violence & Sexual Assault section provided by InfoNet, Illinois Criminal Justice Information Authority.

OTHER FORMS OF VIOLENCE & POPULATIONS

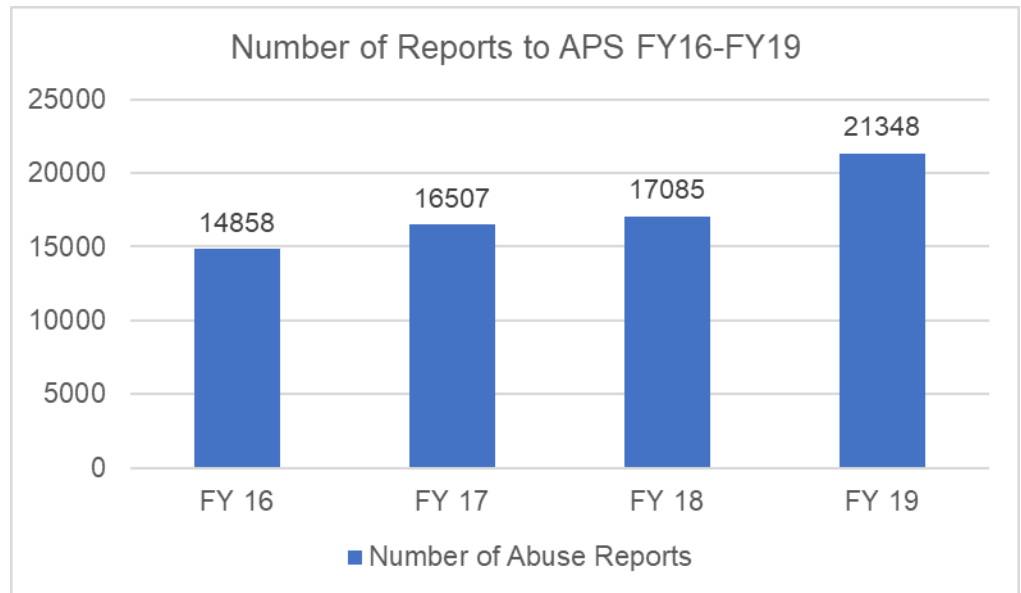
Abuse Among Older Adults and Persons with Disabilities

In a 2019 report released by the Illinois Department on Aging’s Adult Protective Services (APS) Program, which serves older adults (residents of Illinois who are age 60 or older) and persons with disabilities (residents of Illinois between the ages of 18-59). This report covers data from July 1, 2018 to June 30, 2019.

These reports include abuse (i.e., emotional abuse, physical abuse, sexual abuse), neglect (i.e., passive neglect, self-neglect), financial exploitation, willful deprivation, and confinement.

For definitions of these forms of abuse, neglect, and exploitation, please see the Illinois Department of Aging FY 2019 Annual Report.

Although victims may experience multiple forms of abuse, 40% of reports include financial exploitation. This document also includes distributions of reports by age, race, living arrangements, gender, and other characteristics of victims and abusers.



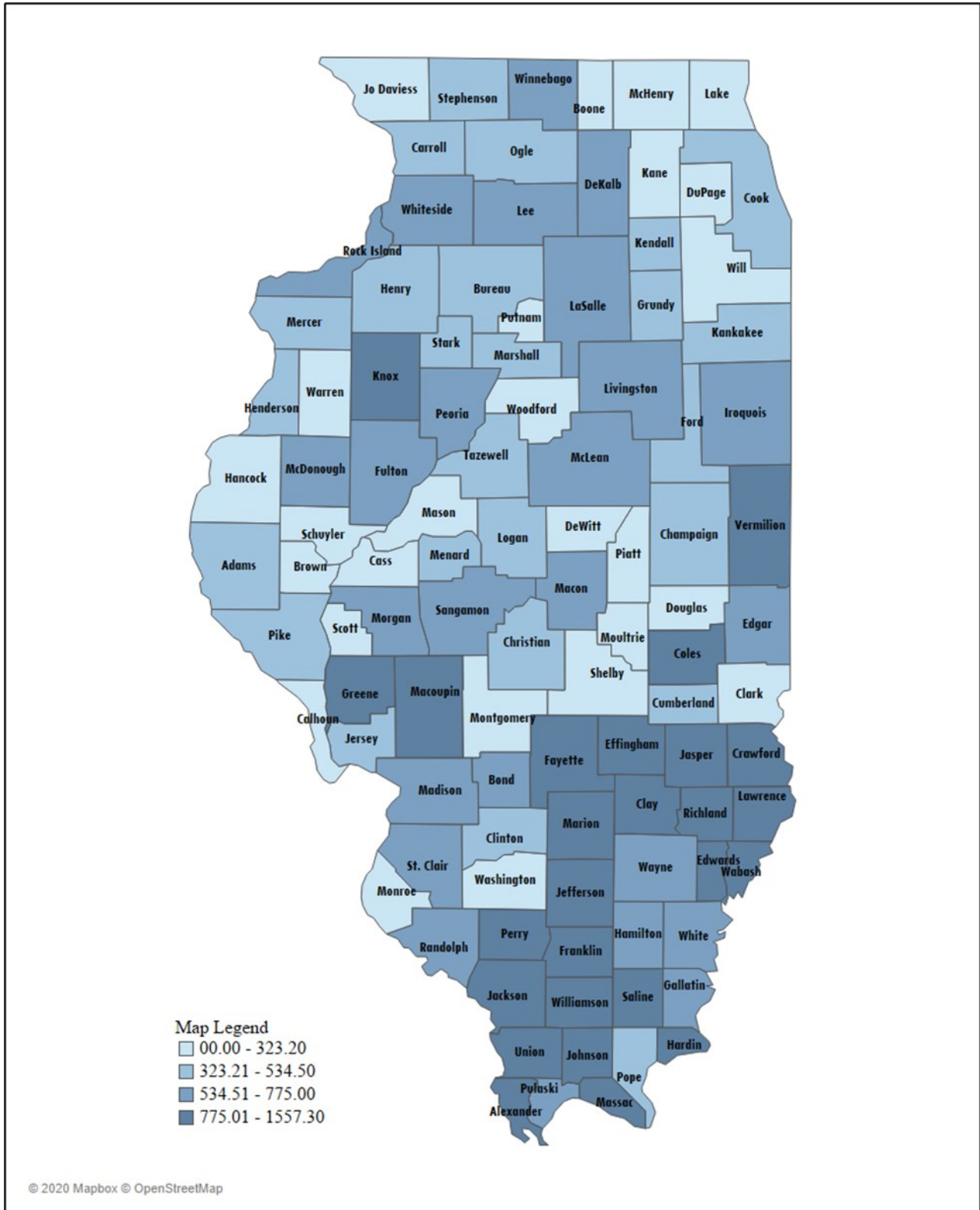
The next page includes rates of abuse among older adults (per 100,000) during 2015 by county.

References:

Adult Protective Services of Illinois (2019). Adult Protective Services of Illinois Annual Report 2019. Retrieved from https://www2.illinois.gov/aging/Resources/NewsAndPublications/Publications/Documents/FY19_APS_Report.pdf
 2015 data (Map #11) retrieved from Illinois Criminal Justice Information Authority Research Hub Datasets:
 Illinois Department on Aging (2015). <https://icjia.illinois.gov/researchhub/datasets/elder-abuse>

MAP #11: ABUSE AMONG OLDER ADULTS BY COUNTY

Rates of abuse among older adults (per 100,000) in 2015 by county in Illinois. Please see Appendix #4 for county-level reports of specific older adult abuse rates.





Human Trafficking Cases & Arrests

Human trafficking includes sex and labor trafficking and are included in the Uniform Crime Reporting (UCR) program:

- *Commercial sex act*: “inducing a person by force, fraud, or coercion to participate in commercial sex acts, or in which a person is induced to perform such act(s) has not attained 18 years of age.” (FBI, Human Trafficking).
- *Involuntary servitude*: “the obtaining of a person(s) through recruitment, harboring, transportation, or provision, and subjecting such persons by force, fraud, or coercion into involuntary servitude, peonage, debt bondage, or slavery (not to include commercial sex acts).” (FBI, Human Trafficking).

County	Commercial Sex Act	Involuntary Servitude
Cook	3	5
Champaign	0	3
Macon	0	2
Knox	2	0
St. Clair	1	0

In 2018, 876 contacts and 295 human trafficking cases (that referenced Illinois) were reported to the National Human Trafficking Hotline (NHTH). Most cases were for sex trafficking (n = 225).

In 2018, human trafficking arrests took place in five counties in Illinois (Illinois Uniform Crime Reports, 2019), as listed in the table.

Note: Human trafficking is under-reported to law enforcement so these numbers likely do not reflect the full reality (Farrell & Reichert, 2017).

Human Trafficking data retrieved from:

Illinois Uniform Crime Reports (UCR) Human Trafficking Arrest (2019). Illinois State Police. Retrieved from <https://icjia.illinois.gov/researchhub/datasets/illinois-uniform-crime-reports-ucr-human-trafficking-arrest>

National Human Trafficking Hotline. (2020). Illinois: 2018. Retrieved from <https://humantraffickinghotline.org/state/illinois>

References:

Farrell, A., & Reichert, J. (2018). Using U.S. law-enforcement data: Promise and limits in measuring human trafficking. *Journal of Human Trafficking*, 3, 39-60.

Federal Bureau of Investigation (n.d.). Human trafficking in Uniform Crime Reporting (UCR) Program. Retrieved from <https://ucr.fbi.gov/human-trafficking>

Incarcerated Women: Victimization Histories

During 2017-2018, 832 incarcerated women at Logan Correctional Center in Illinois participated in a survey about adversity, mental health, and experiences before and during incarceration (Fedock, 2019). These women ranged in age from 18 to 85, and about half identified as White or Caucasian (49.6%), 35% as Black or African American, and 15.4% as another race. About half of these women were serving time for nonviolent offenses.

In examination of victimization histories, women reported extensive histories experiencing violence:

Type of Victimization	% Experienced
Adverse Childhood Experience: Physical Abuse	48.1%
Adverse Childhood Experience: Psychological Abuse	53.8%
Adverse Childhood Experience: Sexual Abuse	49.0%
Adverse Childhood Experience: all three forms of abuse	35.9%
Adverse Childhood Experience: Neglect	51.2%
Lifetime Intimate Partner Violence Victimization	69.9%
Lifetime Victimization by Another Adult (by a non-intimate partner)	46.8%
Experienced both Adult and Intimate Partner Violence Victimization	39.9%

Additionally, 35.5% reported they have perpetrated a form of intimate partner violence, and 28.7% perpetrated violence towards another adult (non-intimate partner).

The full report details more information about these victimization and violence histories, the report also includes information about mental health needs and service utilization and programmatic preferences.

Of note, 64.5% of women screened positive for Post-Traumatic Stress Disorder (PTSD), and over half (54.8%) reported receiving mental health services at Logan. 23.6% of women screened positive for PTSD, Depression, and Anxiety.

In addition, other reports have been published examining victimization among female prisoners in Illinois. In a report of 163 women from three Illinois facilities, almost all of the women (99%) experienced a form of abuse in their lifetime. Abuse was associated with more symptoms of post-traumatic stress disorder (Reichert & Bostwick, 2010). Despite a great need, there remains a lack of treatment and services for incarcerated women.

References:

Reichert, J., & Bostwick, L. (2010). Post-traumatic stress disorder and victimization among female prisoners in Illinois. Illinois Criminal Justice Information Authority.

Fedock, G. (2019). *Findings from a Survey of Incarcerated Women at Logan Correctional Facility*. Report prepared for Illinois Department of Corrections.

Please contact Dr. Fedock for additional information about this research: gfedock@uchicago.edu



Physical Abuse & Perceptions of Safety Before, During, and After Pregnancy

The Pregnancy Risk Assessment Monitoring System (PRAMS; CDC, 2018) collects state data about maternal and child health, aiming to reduce infant morbidity and mortality. In 2018, 1,306 women who resided in Illinois and who had live births responded to the PRAMS survey.

Recent mothers in Illinois reported physical abuse before (2.9%) and during (2.6%) their most recent pregnancy, which included abuse from a husband or partner, ex-husband or ex-partner, another family member, or someone else. Also, 2.2% of recent mothers also reported threats and feeling unsafe since their new baby was born (2018 Illinois PRAMS Annual Report).

Mothers also responded about their perceptions of safety in their neighborhood in the past 12 months before their baby was born; 8.5% of mothers felt unsafe.



Physical Abuse and Perceptions of Safety Before, During, and After Pregnancy data retrieved from:

For all data tables, please see: <https://dph.illinois.gov/data-statistics/prams/datatables-2018>

For more information about PRAMS: <https://www.cdc.gov/prams/index.htm>

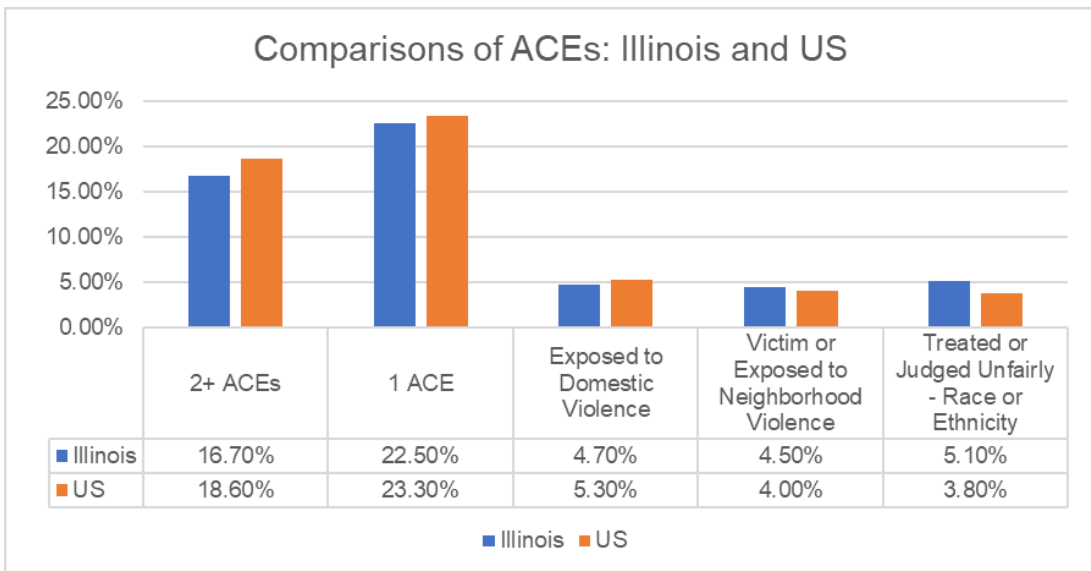
2018 Illinois PRAMS Annual Report, Division of Health Data and Policy, Illinois Department of Public Health, 2020.

Parent/Guardian Perceptions of Violence for their Child (ages 6-17)

The Data Resource Center for Child & Adolescent Health includes 2016-2018 data assessing child and family health measures. Researchers pulled Illinois data from its Data Query page.

Adverse Childhood Experiences (2017-2018):

In total, 16.7% of children ages 6-17 in Illinois reported having two or more of nine adverse childhood experiences (ACEs¹); 22.5% reported experiencing one ACE.



Perceptions of Safety and Support (2017-2018):

- 6.2% of children (ages 6-17) reported they do not always feel safe at school. 4.9% of children (ages 6-17) reported they do not always feel safe in their neighborhood.²
- 38.4% of parents/guardians reported they do not believe that their child lives in a supportive neighborhood.

Perceptions of Bullying and Being Bullied (2016-2017):

- 5% of parents/guardians indicated that their child (ages 6-17) bullies others, picks on them, or excludes them.
- 21.2% of parents/guardians indicated that their child (ages 6-17) has been bullied, picked on, or excluded by other children.

Data on Parent/Guardian Perceptions retrieved from:

Child and Adolescent Health Measurement Initiative. 2016-2017 National Survey of Children’s Health (NSCH) data query. Data Resource Center for Child and Adolescent Health supported by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB). Retrieved from [www.childhealthdata.org].

Child and Adolescent Health Measurement Initiative. 2017-2018 National Survey of Children’s Health (NSCH) data query. Data Resource Center for Child and Adolescent Health supported by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB). Retrieved from [www.childhealthdata.org].

Please find the full data and information about the survey here: <https://www.childhealthdata.org/browse/survey>

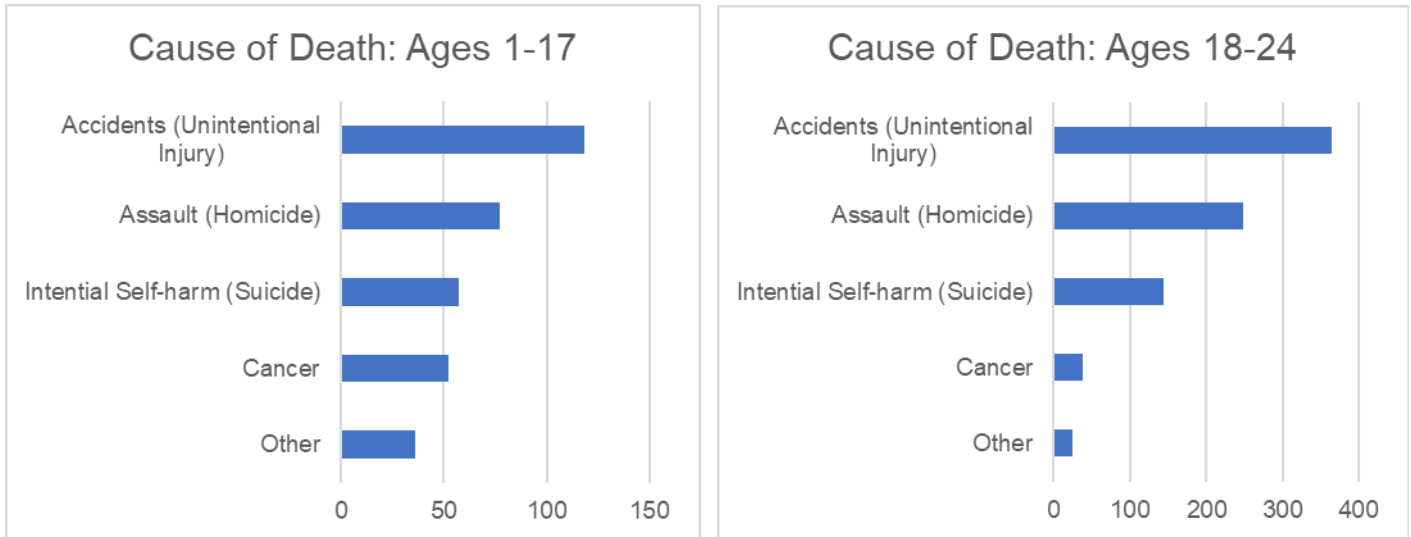
¹The nine ACEs included: 1) Parent/guardian divorced or separated; 2) parent/guardian died; 3) parent/guardian served time in jail; 4) witnessed DV; 5) victim or witness of neighborhood violence; 6) lived with anyone who was mentally ill, suicidal, or severely depressed; 7) lived with anyone with a problem with drugs or alcohol; 8) treated or judged unfairly because of his/her race or ethnic group, and 9) hard to cover basics, like food or housing, on family’s income.

²Answered *Somewhat* or *Definitely Disagree* to 1) “Is this child safe at school?” 2) “Does this child live in a safe neighborhood?”



Injury and Violence – Deaths & Costs of Injury Deaths

In 2018, the top three causes of death for all ages of Illinois residents included heart diseases, cancer, and unintentional injuries (Illinois Department of Public Health, 2018). Specifically, for children (ages 1-17) and young adults (ages 18-24), unintentional injury becomes the top cause of death, followed by assault (homicide) and intentional self-harm (suicide).



Injury deaths, including poisonings, traumatic brain injury, suicide, deaths by firearm, deaths involving a motor vehicle, falls, homicides, fires and burns, and drowning. The costs associated with injury deaths include medical costs and work loss costs. In 2014, there were 6,109 injury deaths in Illinois, resulting in a combined medical and work loss cost estimated to be 6.7 billion dollars.

Please see the full report to examine injury deaths by demographic groups: <https://www.dph.illinois.gov/sites/default/files/Leading%20causes%20by%20age%202018.pdf>

References

Illinois Department of Public Health. (February 2018). Making Illinois Safer: Injury, Violence, and Suicide Prevention Data Book: The Burden of Injury, Violence, and Suicide in Illinois, 2010-2015. Retrieved from <https://www.dph.illinois.gov/sites/default/files/Leading%20causes%20by%20age%202018.pdf>

Violent Deaths

In a 2020 report published by the Illinois Criminal Justice Information Authority, rates of violent deaths, including homicide and suicide, were examined in relation to victims' criminal history involvement (Watkins & Westley, 2020). This report utilized 2015-2016 data from the Illinois Violent Death Reporting System (IVDRS) and the Illinois State Police Criminal History Record Information (CHRI) System. In 2016, total of 16 counties in Illinois (out of 102) reported data to the IVDRS.

Most victims of homicide had at least one prior arrest (77%), including arrests for domestic violence and stalking, violent felonies, and weapons-related arrests. These victims were largely male (65%), unmarried (66%), and a racial or ethnic minority (76%); their deaths also often involved a firearm (68%).

An estimated 90% of individuals who died from suicide were White and the majority of suicides (67%) were caused by firearms and asphyxiation (e.g., hanging, strangulation, suffocation). Forty percent of suicide victims had a prior history of arrest.

Please see the full report for additional statistics, including rates by victim characteristics and additional criminal history variables. <http://www.icjia.state.il.us/assets/articles/Violent%20Death%20FINAL%20PDF%20to%20Post-200810T22415305.pdf>

Illegal Possession of a Firearm

In a report by the Loyola University Center for Criminal Justice Research, Policy, and Practice, researchers highlighted that in 2018, more than 780 individuals in Illinois were killed with a gun, and 573 individuals committed suicide with a firearm. Additional violent crimes, such as robberies, aggravated assaults, and sexual assaults can also include the use of a firearm.

This report highlights the additional crimes involving a gun or firearm where violent action was not taken towards a victim. For example, an individual can be arrested or charged with “unlawful use of a weapon” or “aggravated unlawful use of a weapon,” for the illegal possession of a firearm. The majority of these arrests were among Black individuals, males, and young adults (under the age of 25), and slightly over half of all arrests occurred in Chicago or Cook County. Also, around 80% of these arrests for illegal possession of a gun have no prior convictions for a violent crime (Olson et al., 2020).

For the full report: [https://www.luc.edu/media/lucedu/ccj/pdfs/IllinoisGunPossessionArrestBulletinjuly202\[9718\].pdf](https://www.luc.edu/media/lucedu/ccj/pdfs/IllinoisGunPossessionArrestBulletinjuly202[9718].pdf)

References

Olson, D. E., Stemen, D., Michalak, H., Juarez, S., Ward, A., & Jacobs, L. (2020). *Arrests in Illinois for illegal possession of a firearm*. Center for Criminal Justice Research, Policy, and Practice, Loyola University Chicago.

Watkins W., & Westley, C. (2020). *Prior criminal justice involvement of persons experiencing violent deaths in Illinois*. Illinois Criminal Justice Information Authority. <http://www.icjia.state.il.us/assets/articles/Violent%20Death%20FINAL%20PDF%20to%20Post-200810T22415305.pdf>

Identified Needs among Victims of Violence

In a 2017 report, the Illinois Criminal Justice Information Authority (ICJIA) Ad Hoc Victim Services Committee and ICJIA researchers conducted a variety of activities to understand crime victim needs, as well as service gaps and the capacity of service providers in Illinois (Houston-Kolnik et al., 2017). A 2016 needs assessment was also conducted on victim needs (Aeffect, Inc, 2017).

Underserved Groups

Providers and researchers identified groups of people who may be unwilling to seek, access, or receive services. Some of these groups included: second language learners, elderly individuals, people who experience homelessness, LGBTQ populations, people with disabilities, people of color, males, victims on college campuses, victims with undocumented immigration status, and dually involved individuals. The researchers discuss case characteristics, stereotypes, and social norms that may impact the likelihood of these populations accessing and receiving services.

Types of Violence: Needs and Service Gaps

Across forms of violence, the researchers presented needs of victims and gaps of existing services in Illinois. Some of these findings are listed here, though please access the full report for all needs and gaps.

- **Community violence:** early intervention points such as hospitals and interactions with police are often the first places or people to interact with victims of community violence. However, these entities lack advocacy or initial support services for victims. Schools also could be an intervention point for children exposed to community violence.
- **Homicide:** long-term counseling, compensation funds, and resources to ease additional stressors are needed.
- **Domestic Violence and Sexual Assault:** Limited resources for emergency shelter and long wait times are barriers to accessing services. There is a need for more counseling for victims of violence, as well as children exposed to domestic violence. The number of Sexual Assault Nurse Examiners is limited across the state and more responders are needed. Additionally, some parts of the state experience longer travel distances to access services.
- **Human Trafficking:** limited options for provider referrals; need for greater coordination and collaboration across systems. Reporting and data collection needs to be enhanced for service providers to better serve victims of human trafficking.
- **Child Abuse:** More trauma-informed services are needed, especially for those who experience sexual abuse, as well as services for the entire family. More resources are also needed for the southernmost part of the state, as well as counties with higher rates.
- **Abuse among Older Adults:** Transportation and in-home services are gaps for service delivery; there is a low number of providers in rural areas of the state.

Victim Service Providers: Capacity

Barriers were identified among providers, including experiencing burn out and being overextended, experiencing long waitlists, funding uncertainties and strains, and being over-burdened with funder reporting requirements.

For the full report, please see: http://www.icjia.state.il.us/assets/articles/ICJIA_FINAL_AdHocReport_VictimServices_012717.pdf

References:

Houston-Kolnik, J., Vasquez, A., Alderden, M., & Hiselman, J. (2017). *Ad hoc victim services committee research report*. Chicago, IL: Illinois Criminal Justice Information Authority.

Aeffect, Inc. (2017). 2016 victim needs assessment. Chicago, IL: Illinois Criminal Justice Information Authority. https://icjia.illinois.gov/researchhub/files/2016_ICJIA_Victim_Needs_Assessment_Summary_Report-191011T20092564.pdf

ADDITIONAL INFORMATION, REPORTS & INITIATIVES

Finally, the planning group submitted reports and information of other violence prevention initiatives. Here is a list of these initiatives happening around the state of Illinois, all aiming to prevent violence. This list is not exhaustive, but includes plans or resources that were sent to the group during the planning period.

Action Research and Collaboration (ARC) & Illinois Department of Public Health

ARC (led by Dr. Nicole Allen at the University of Illinois at Urbana-Champaign) is partnering with the Illinois Department of Public Health (IDPH) and the Illinois Coalition Against Sexual Assault (ICASA) to evaluate Illinois's sexual violence prevention efforts. Through this collaborative evaluation project, they are examining efforts under the Rape Prevention & Education program (RPE), which is funded by the Centers for Disease Control and Prevention.

<https://actionresearch.web.illinois.edu/>

Between Friends Chicago

Between Friends is a Chicago-based nonprofit agency dedicated to breaking the cycle of domestic violence and building a community free of abuse. To break the cycle of domestic violence, the agency offers crisis intervention and support services for survivors and their children that include a 24-hour crisis line, court advocacy, and counseling. To build a community free of abuse, Between Friends provides comprehensive prevention and education programs for youth and adults. Their Relationship Education: A Choice for Hope (REACH) program engages middle and high-school aged young people in examining issues including empathy, consent, boundaries, and conflict resolution in all kinds of relationships, as well as how to make positive differences in their communities. Email: info@betweenfriendschicago.org

<https://www.betweenfriendschicago.org/>

Champaign County Community Coalition

The Coalition “provides a network of organizations and stakeholders that improve the lives of youth and their families resulting in youth who are empowered and safe, to promote effective law enforcement and positive police-community relations, and to support greater knowledge/use of the resources available.”

<https://www.champaigncommunitycoalition.org/>

Chicago Center for Youth Violence Prevention

Researchers at the Chicago Center for Youth Violence Prevention (University of Chicago School of Social Service Administration, led by Dr. Deborah Gorman-Smith), as well as their lead community partner (Bright Star Community Outreach, led by Pastor Chris Harris), are leading the implementing and evaluation of the Communities That Care (CTC) prevention model. The CTC structure engages the community as partners to define the problem and identify and implement evidence-based solutions that reduce violence and promote healthy development for children, youth, and families. You can find their Community Action Plan here: https://cpb-us-w2.wpmucdn.com/voices.uchicago.edu/dist/6/954/files/2019/10/Community-Action-Plan-Working-Document_July2019.pdf

Health & Medicine Policy Research Group

The Illinois ACEs Response Collaborative studies the impact of trauma and adverse childhood experiences (ACEs) among children, families, and communities in Illinois.

<http://www.hmprg.org/programs/illinois-aces-response-collaborative/>

Illinois Children's Healthcare Foundation

<https://ilchf.org/executive-summary-community-mental-health-initiative-project-findings/>

<https://ilchf.org/mental-health/>

Illinois Criminal Justice Information Authority Research Hub

This hub includes datasets, research publications, and resources.

<https://icjia.illinois.gov/researchhub/>

Illinois Department of Public Health

Report examining injury, violence, and suicide-related areas in hospital community health needs assessments.

<https://www.dph.illinois.gov/sites/default/files/publications/scan-ivp-related-priority-areas-hospitalspdf-1132020.pdf>

Illinois Juvenile Justice Councils (JJC)

<https://www.dhs.state.il.us/page.aspx?item=93097>

Illinois State Commission on Criminal Justice and Sentencing Reform (2016)

<http://www.icjia.org/cjreform2015/index.html>

National Alliance on Mental Health (NAMI) - Illinois

<https://namiillinois.org/>

Smart Decarceration Project

The Smart Decarceration Project at the University of Chicago’s School of Social Service Administration (led by Dr. Matt Epperson) is bridging research and practice to reduce the over reliance on incarceration while addressing the racial and behavioral health disparities in the criminal justice system.

<https://voices.uchicago.edu/smartdecar/>

Southern Illinois University Edwardsville & Teens Against Killing Everywhere (TAKE)

<https://www.siu.edu/news/2020/07/>

[SIUESuccessfulCommunitiesCollaboratetoCurbYouthViolenceinEastSt.Louis.shtml](https://www.siu.edu/news/2020/07/SIUESuccessfulCommunitiesCollaboratetoCurbYouthViolenceinEastSt.Louis.shtml)

Strengthening Chicago’s Youth (SCY; Ann & Robert H., Lurie Children’s Hospital of Chicago)

Juvenile Justice Collaborative:

<https://scy-chicago.org/projects/juvenile-justice-collaborative/>

The Network Advocating against Domestic Violence

<https://the-network.org/knowledge-center/>

<https://the-network.org/wp-content/uploads/2020/07/Data-Report-State-of-Domestic-Violence-in-Illinois.pdf>

Note: If you know of additional needs assessments, reports, or initiatives aiming to prevent violence in Illinois, please email Dr. Garthe at rcgarthe@illinois.edu or Reshma Desai at reshma.desai@illinois.gov



ADDITIONAL DATA COLLECTION

**1. Violence Prevention & Intervention
Staff**

2. Adult Residents

VIOLENCE PREVENTION & INTERVENTION STAFF SURVEY

Methodology

During October 2020, online survey invitations were distributed to a list of currently funded ICJIA grantees who provided violence prevention or intervention services. They could complete the survey if they led violence prevention or intervention programs or they could forward the survey to others in their organization or networks. A total of 130 surveys were completed. The survey was administered through Qualtrics, an online secure survey platform.

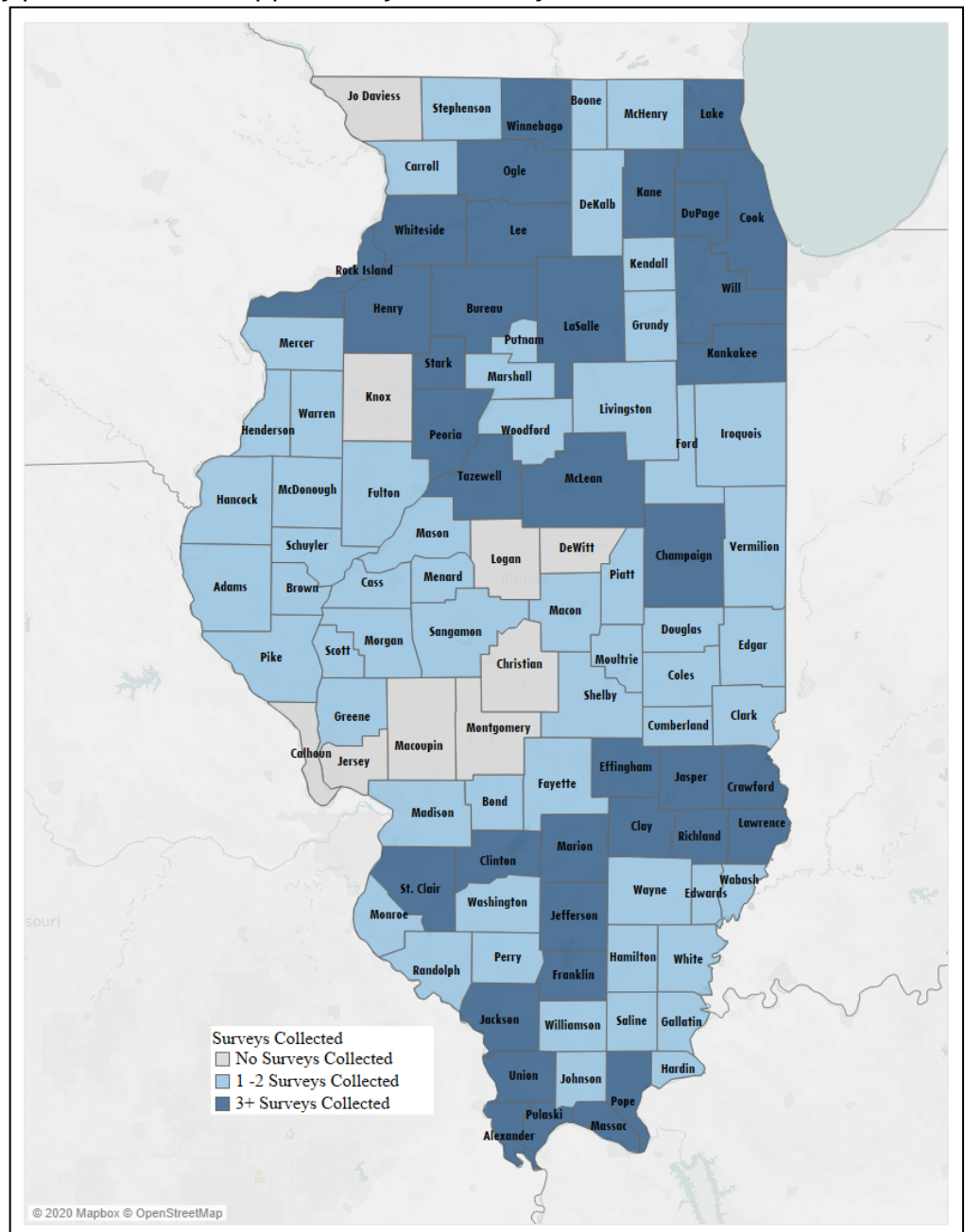
The survey asked staff which counties were served by their organization. Together, staff served 93 counties in Illinois (91% of the state). Also, 6 organizations led statewide services.

The survey took approximately 25 minutes to complete and participants received a \$20 Amazon e-code upon completion. If participants received ICJIA funding, they were directed to complete the survey outside of work hours. All study procedures were approved by a university Institutional Review Board.

Through this survey, we were able to answer questions that the planning group identified. For example:

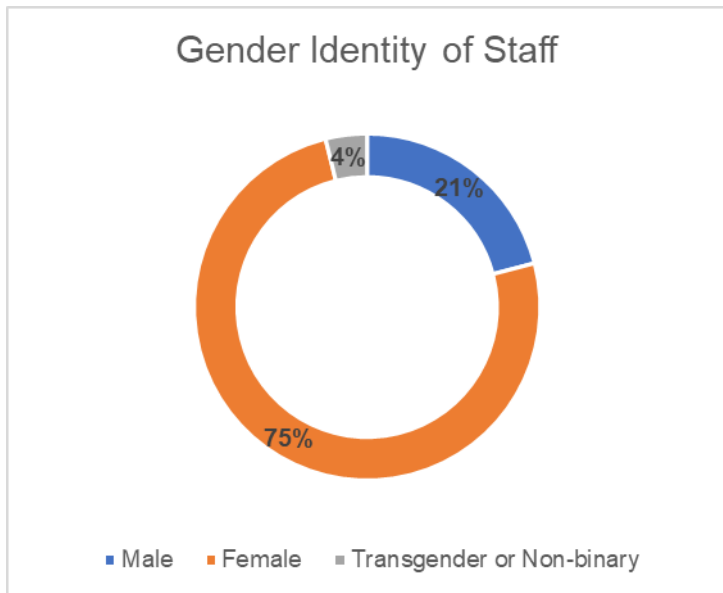
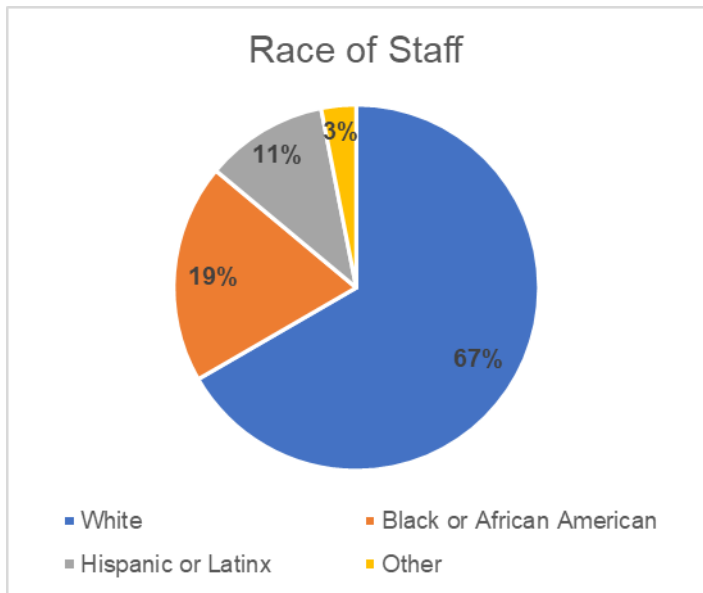
- 1) What do collaboration efforts look like around violence prevention and intervention in your community?
- 2) What are important protective factors and is your community able to address these factors adequately?

The survey included topics around community leadership, collaboration, decision making and opportunities; preventing violence through protective processes; social networks; organizational details and demographics; and qualitative responses to questions about violence prevention strategies. All analyses took place in SPSS version 26.

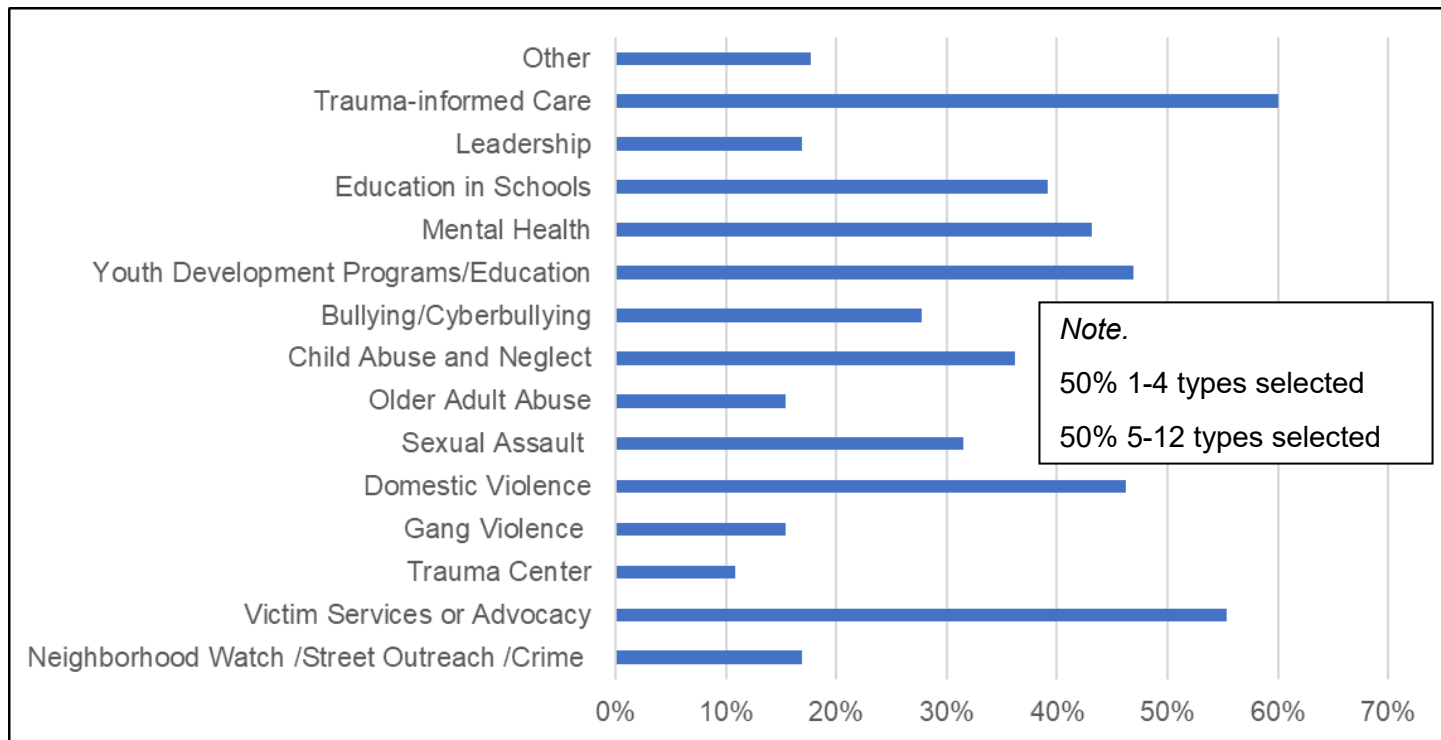


Respondent Characteristics: Violence Prevention and Intervention Staff (N = 130)

- Between the ages of 23 and 83 (Mean = 44.46, SD = 12.83).
- 68.2% lived in the communities they served.
- 45.4% worked with their organizations for 7+ years.



Violence prevention and intervention staff engaged in a variety of violence prevention work, with most selecting more than one type of violence prevention. More than half of the staff engaged in victim services or advocacy work, as well as trauma-informed care.

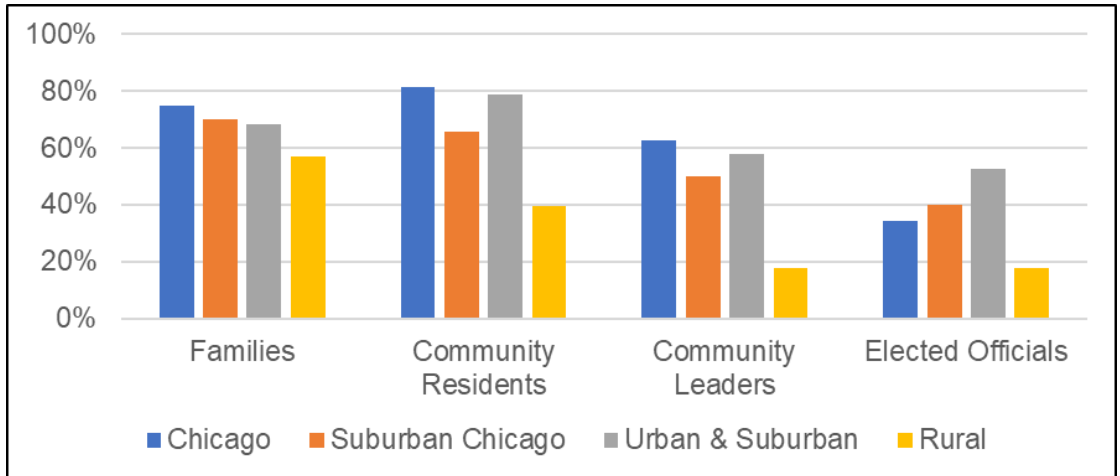




Key Findings

Staff strongly agreed that violence is a concern in their community to families (65%), community residents (64%), community leaders (45%), and community elected officials (33%).

Staff serving rural counties perceived that violence is less of a concern across these four entities (e.g., 18% strongly agreed that violence was a concern to elected officials).



Collaborations

Staff collaborated with a variety of organizations, groups, and stakeholders.

Between 81% and 93% of staff endorsed “some” or “a lot” of collaboration on violence prevention efforts with the following collaborators: social service agencies, school leadership staff, community-based organizations, community coalitions, healthcare institutions, law enforcement, and city government.

	A lot	Some	Not at all
Social Service Agencies	54.6%	38.5%	6.9%
School Leadership Staff	49.2%	39.2%	11.5%
Community-based Organizations	47.7%	43.8%	8.5%
Community Coalitions	40.0%	47.7%	12.3%
Law Enforcement	38.8%	45.0%	16.3%
City Government	33.8%	47.7%	18.5%
Healthcare Institutions	27.7%	57.7%	14.6%
County Government	26.2%	43.8%	30.0%
Juvenile Justice Systems	26.2%	43.1%	30.8%
State Government	22.3%	53.8%	23.8%
Universities or Colleges	20.0%	44.6%	35.4%
Faith-based Organizations	19.2%	54.6%	26.2%
Community Colleges	15.4%	44.6%	40.0%
News/Media	13.2%	54.3%	32.6%
Parent Teacher Associations/ Councils	7.7%	35.4%	56.9%
Federal Government	6.2%	48.5%	45.4%
Local Businesses	5.4%	62.3%	32.3%

Community Decision Making, Commitment, and Opportunities

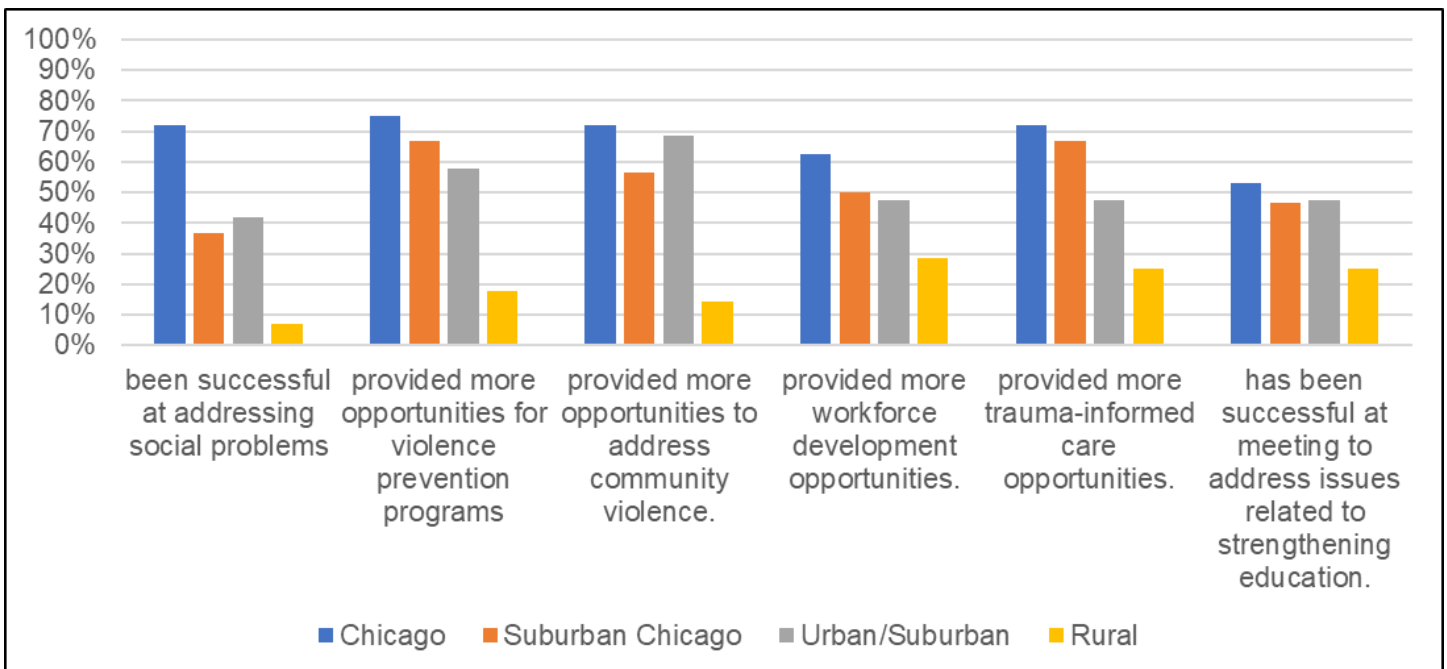
Staff responded to items about community decision-making and community leaders’ commitment to addressing violence prevention. First, staff strongly agreed that:

- Community problems overwhelm community groups (53.8%).
- Much conflict exists between groups in this community (43%).
- Residents provide little input for community decisions (37.7%).
- The community has systems in place to help people get involved in the community decision-making process (34.9%).

Additionally, while 61% to 64% of staff reported community leaders are committed to reducing community violence and providing and/or strengthening opportunities and resources, fewer staff said their community leaders were committed to providing trauma-informed care opportunities and housing resources.

Community leaders are committed to...	% Somewhat or Strongly Agree
...reducing community violence.	63.8%
...promoting positive youth development.	73.8%
...providing opportunities to engage and support families.	73%
...providing workforce development opportunities.	60.7%
...strengthening educational resources.	63.9%
...providing trauma-informed care opportunities for residents and community stakeholders.	46.9%
...providing housing resources for residents.	43.9%

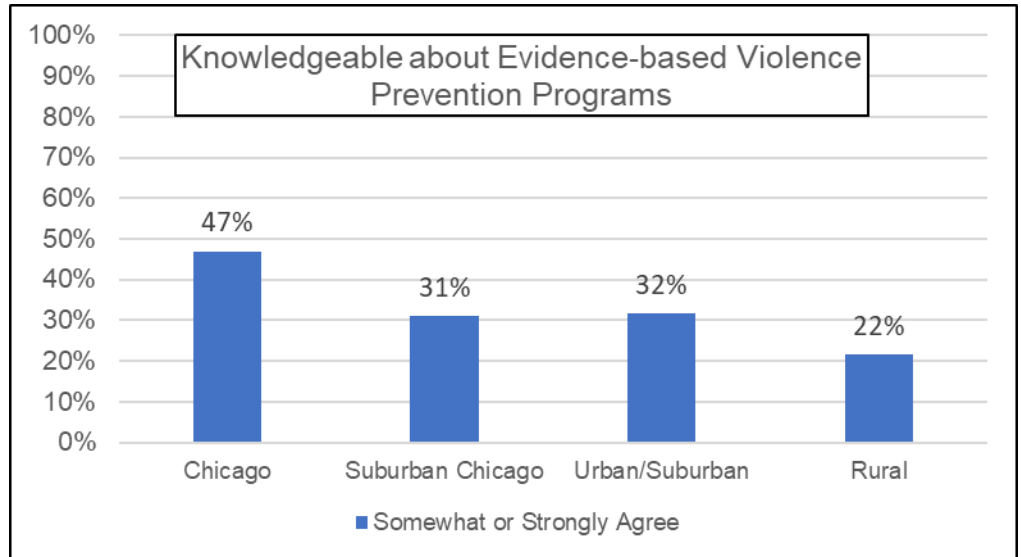
Staff also were asked about their communities’ ability to address social problems and provide more opportunities in those areas. Staff serving rural counties reported their communities had provided fewer programs and opportunities to address those issues.





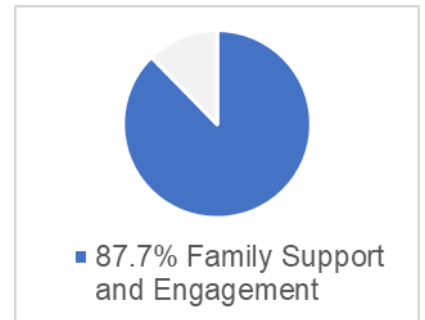
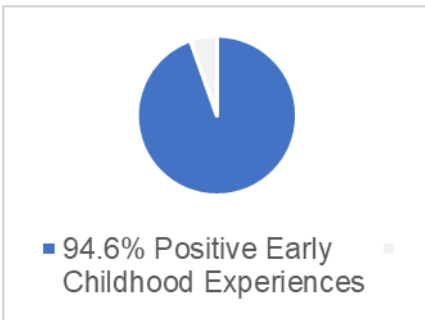
About 30% of staff across the state “somewhat” or “strongly agreed” that community leaders are knowledgeable about evidence-based violence prevention programs.

Rates varied by community type, with the lowest rates among staff serving rural counties.



Importance of Protective Factors & Adequacy of Addressing these Factors

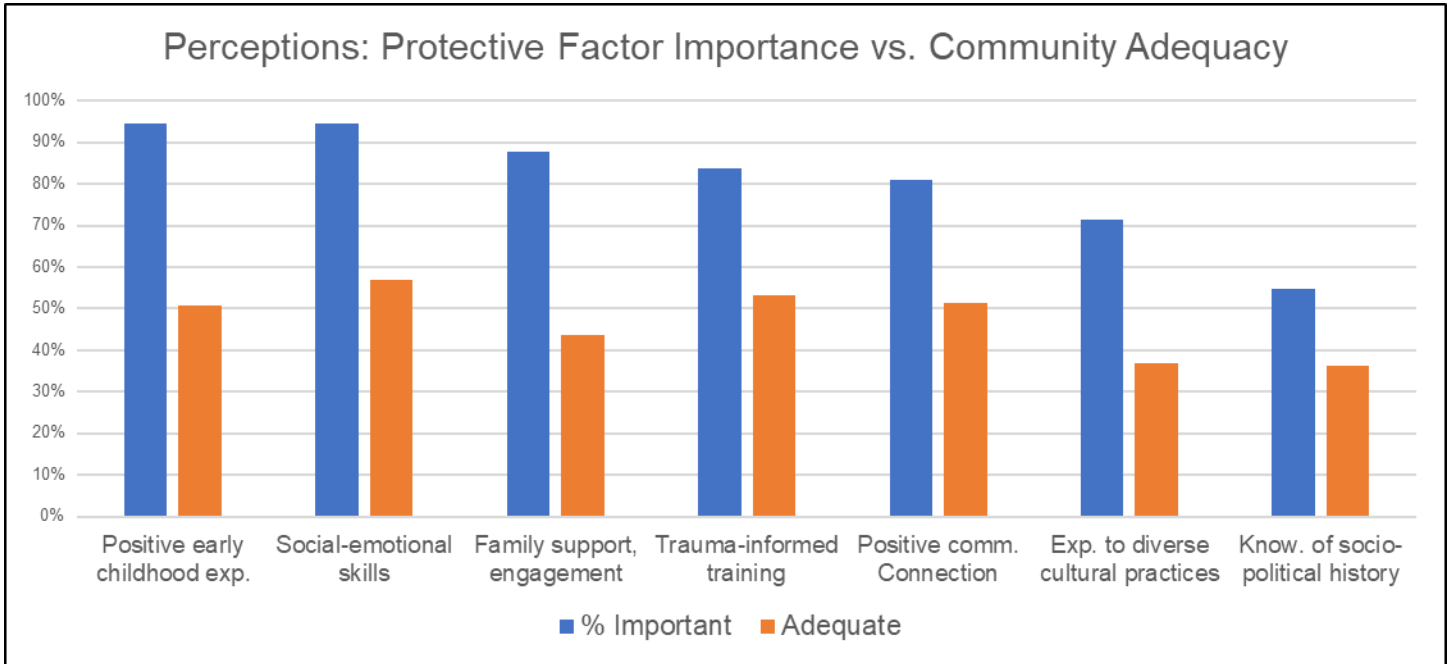
Staff rated a list of evidence-based protective factors of violence from “not important at all” to “very important.” The top-rated protective factors were at the individual and relational level:



The following community and other protective factors were also rated as very important:

- 83.8%-Trauma-informed training and practices
- 80.8%-Positive community connection and engagement
- 72.1%-Job training and workforce development
- 71.5%-Exposure to diverse cultural practices
- 54.6%-Knowledge of community and socio-political history

After rating these protective factors on importance (shown in blue), staff were asked to rate how their communities were adequately addressing each factor (shown in orange). Responses indicated a gap between perceived importance and adequacy of addressing these factors in communities:



Violence Prevention: Solutions and Actions

Finally, staff were asked to list solutions that were not considered in their communities that could prevent or reduce violence. Many of the solutions were in alignment with the five guiding principles of this plan (see page 28):

Foster Belonging & Social Connectedness

- Restorative justice practices, mentoring
- "Inclusion of grandparents and older adults"

Advance Equity

- "Need for conversations and actions toward racial equity and restorative justice practices"

Promote Safety

- "We need better and more honest communication with law enforcement. This has to be done in non-judgmental ways."

Support Health

- Trauma centers, mental health services, healthcare

Engage State Agencies

- "Partnering with city, county, and state level elected officials to train them on ACEs, community engagement, cultural bias, and just overall cycles of risk."



Violence Prevention: Solutions and Actions, continued

Additional solutions listed by staff include:

Comprehensive and Collaborative Initiatives

- “A centralized location for social services in which services are coordinated.”

Opportunities and Access

- Access to childcare, affordable housing, and transportation options
- “Inadequate ongoing resources to take solutions to scale.”

Address Economic and Employment Inequities

- Financial Assistance, Universal Basic Income, Workforce development programs

Increase Knowledge and Solutions

- Townhall meetings, Alliance meetings, Education on violence, MH, trauma

Others

- Strengthen education, increase programs, use Evidence-based practices

Staff were also asked, “If money were no object, what would be your first line of action to reduce violence?”

About 40% of respondents discussed opportunities and access to resources.

Responses included the following:

- Community centers
- Affordable housing, quality housing
- Mental health treatment and services
- Early childhood programs & quality education
- Job opportunities and equity in jobs
- Transportation
- Amount of violence prevention programs
- Access to services



ILLINOIS ADULT RESIDENT SURVEY

Methodology

A Qualtrics Panel was conducted to obtain a sample of Illinois adult residents. Quota sampling constraints included race and ethnicity, sex, household income, age group, and community type to ensure a representative sample of adults. For more information on Qualtrics Panels, please see: <https://www.qualtrics.com/experience-management/research/research-panels-samples/>

Adults were asked about their experiences with adverse childhood experiences (ACEs), mental health and trauma, and sources of protection against violence within relationships and communities. A total of **712 Illinois adult residents** completed the survey.

Respondents

Counties & Community Types

Respondents represented 76 counties in Illinois (75% of counties). Community types were represented:

- 19%-Chicago
- 41%-Suburban Chicago Counties
- 25%-Other Urban & Suburban Counties
- 15%-Rural Counties

Age

On average participants were 36 years old. As shown in the table, the majority of respondents were 40 or younger (about 60% of the sample).

Gender

- 57.7%—Cisgender¹ female
- 40.7%—Cisgender male
- 1.0%—Transgender² male
- 0.3%—Transgender female
- 0.3%—Gender expansive / Gender non-binary³

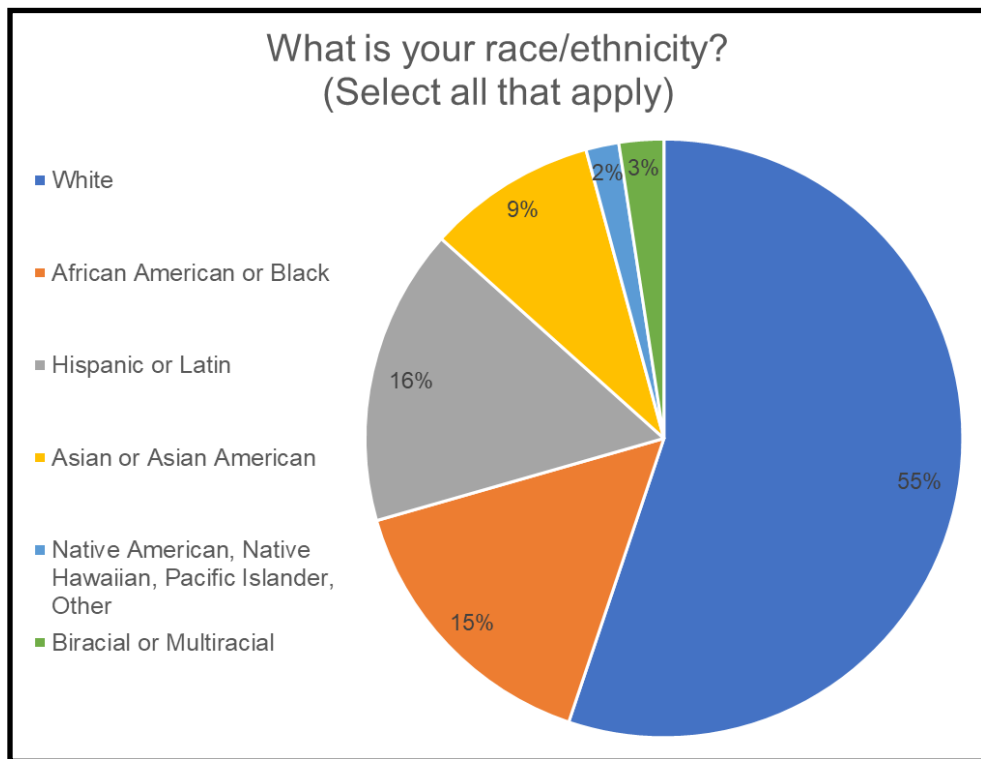
Race & Ethnicity

In terms of race and ethnicity, the sample of respondents was largely representative of the state of Illinois (see figure to the right).

Sexual Orientation

Approximately 81% of the sample identified as heterosexual. The rest identified as gay, lesbian, or bisexual (10%), another sexual orientation (5%), or did not wish to respond (4%).

Age Categories	N	%
18 to 24	219	30.8%
25 to 40	204	28.7%
41 to 60	127	17.8%
61 and older	162	22.8%



¹Cisgender: one’s gender identity is in alignment with the gender culturally associated with the sex assigned at birth.

²Transgender: one’s gender identity does not match the gender culturally associated with the sex assigned at birth.

Education, Work, & Income

Respondents were asked about their highest completed level of education. The bar chart shows the range of educational attainment in this sample.

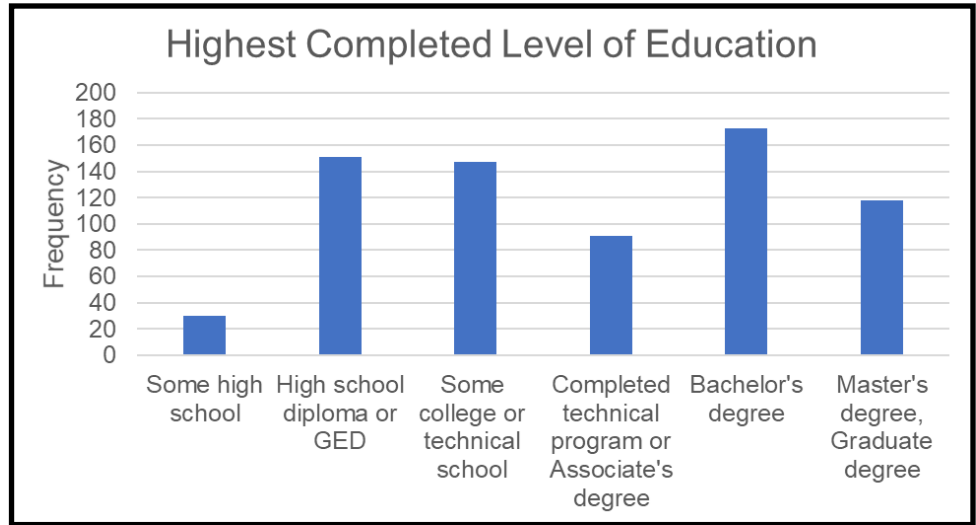
About 41% of respondents were working full-time and 15% were working part-time.

Other work statuses included:

- 15%-Retired
- 12%-Student
- 6%-Unemployed/laid off
- 4%-Keeping house or raising children
- 4%-Looking for work
- 3%-Unable to work/on disability

These work statuses changed slightly from before the COVID-19 pandemic. Previously, about 46% had been employed full-time.

Respondents also reported their annual household income in 2019 (before taxes). Please see table to the right for the distribution.



Range	N	%
Less than \$10,000	75	11%
\$10,000-\$29,999	131	18%
\$30,000-\$54,999	159	22%
\$55,000-\$99,999	203	29%
More than \$100,000	144	20%

Housing & Household

The majority of respondents reported living in a home owned by themselves or by family members (65%), or were renting a home or apartment by themselves or with family members (27%). Other housing situations included:

- 3%-Live at a friend or romantic partner's home
- 2%-Homeless shelter, on the streets, or living in a group home
- 3%-Another housing situation (e.g., dorm, hotel)

Slightly over half of the respondents were married or living with someone who they are in a relationship with (53%).

51% of respondents have children; of these respondents, 63% of these parents currently had a child under the age of 18.

Diagnoses

Finally, respondents indicated if they had any diagnoses, including mobility impairments, learning disabilities, a mental health disorder or illness, or another disability or impairment. The table to the right shows the number and percentage of people who indicated various diagnoses.

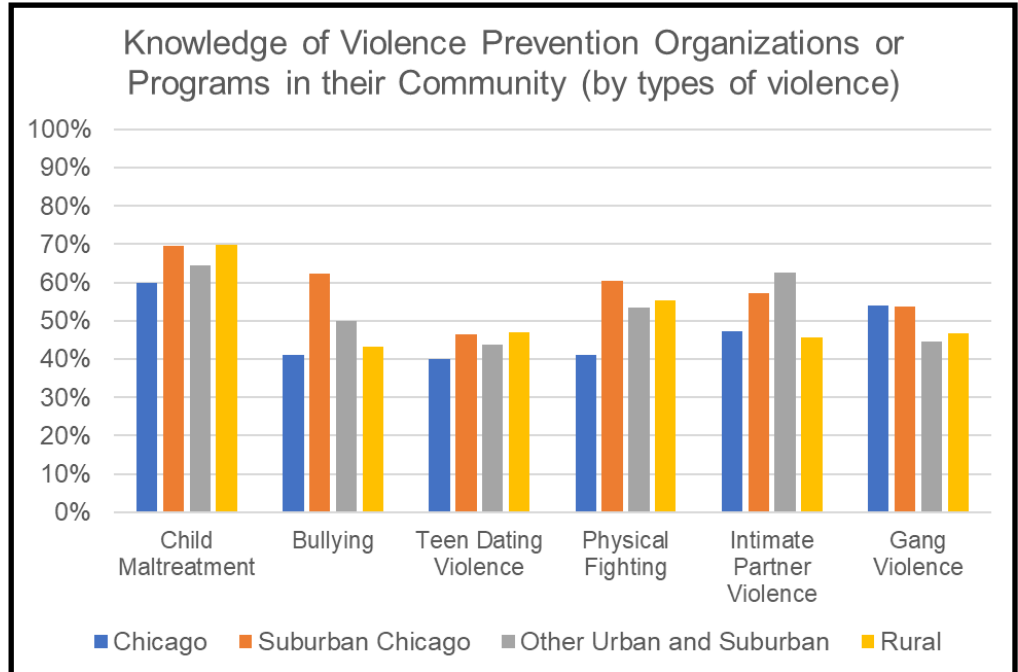
Diagnosis	N	%
Mobility impairment	45	6.3%
Learning disability (e.g., ADHD, dyslexia)	53	7.4%
Mental health disorder or illness	132	18.5%
Another disability or impairment	45	6.3%

Key Findings

Knowledge of Violence Prevention Organizations & Programs

Respondents were asked if they knew of organizations or programs in their community that aimed to prevent different forms of violence. The majority of respondents (81%) indicated that they knew of at least one type of violence prevention organization or program in their community.

Across community types, 66% of respondents were knowledgeable about child maltreatment violence prevention programs or organizations in their community. Variations are shown to the right by community type.



Respondents also indicated:

- 41.2%—Organizations or programs in their community or neighborhood that address the needs of individuals who have experienced violence or trauma.
- 28.2%—Organizations or programs in their community or neighborhood that provide support for individuals who are returning from prison or jail, or are serving a probation or parole sentence.
- 29.2%—Organizations or programs in their community or neighborhood that provide support for youth who have been detained for a crime or that aim to prevent youth from entering the juvenile justice system.

Parent-report: Violence and Safety among their Children

51% of respondents have children; of these respondents, 63% of these parents currently have a child under the age of 18. Parents reported:

- 36.4%—Their child did not go to school because they did not feel safe at school in the past 12 months prior to the COVID-19 pandemic.
- 33.7%—Their child did not go to school because they did not feel safe on their way to or from school in the past 12 months prior to the COVID-19 pandemic.
- 34.7%—Their child has ever been bullied at school
- 16.9%—Their child has ever been bullied on social media, other websites, or through texting
- 16.7%—Their child has ever been physically injured due to bullying or fighting at school

About 30% of parents endorsed that they have talked to their child or children about specific acts of violence that occurred in the neighborhood that they witnessed or were affected by.



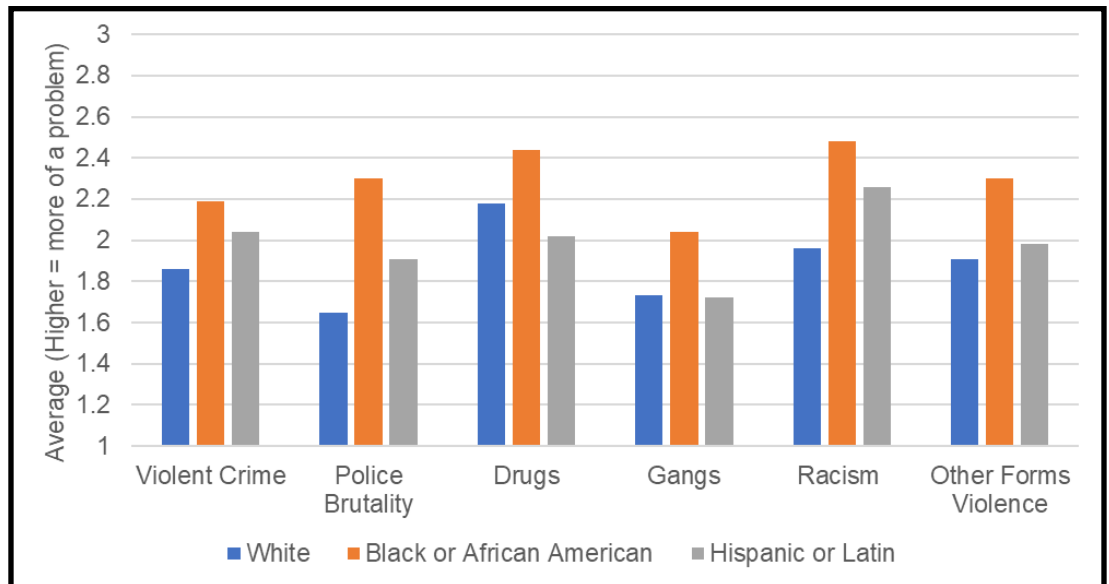
Quality of Resources

They also rated the quality of various resources in their neighborhood/community.

<i>Rated the quality of these resources as <u>fair or excellent</u>:</i>	Chicago	Suburban Chicago	Other Urban and Suburban	Rural
Preschool programs	68.6%	79.6%	69.1%	77.7%
Employment or Job Training programs	62.8%	64.6%	57.3%	68.9%
Schools	73.0%	85.4%	72.5%	81.6%
Summer or After school programs for youth	67.9%	71.4%	61.2%	69.9%
Family-focused programs	58.4%	61.9%	53.4%	67.0%
Grocery stores	90.5%	89.5%	80.9%	82.5%
Entertainment venues (e.g., movie theaters)	69.3%	73.1%	64.6%	65.0%
Parks and athletic spaces	81.0%	87.8%	78.1%	88.3%
Places to attend religious or spiritual services	82.5%	81.3%	82.6%	85.4%
Mental health care services	59.1%	55.4%	54.5%	66.0%
Substance abuse services (e.g., AA or NA)	48.9%	46.6%	41.6%	54.4%
Health clinics (e.g., urgent care, primary care)	73.7%	84.4%	80.9%	73.8%
Elderly care facilities and services	67.9%	67.0%	62.4%	73.8%
Library, arts, and music programs	77.4%	80.3%	71.9%	76.7%

Perceptions of Neighborhood Problems:

- Across types of neighborhood problems, Black or African American adults perceived each of these problems to be more prevalent in their neighborhood/community, compared to Hispanic or Latin and White adults.



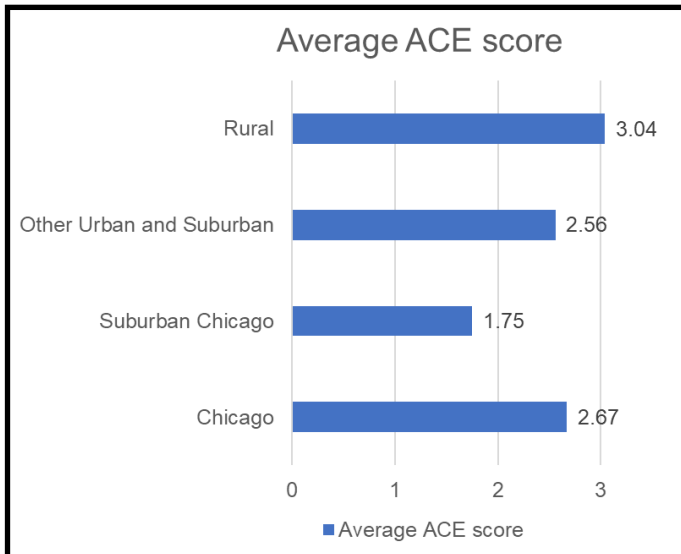
Adverse Childhood Experiences

Respondents were asked about experiences with adverse childhood experiences (ACEs; i.e., before the age of 18).

ACEs are linked with numerous negative ramifications, including mental health challenges, chronic disease, risky behaviors, and traumatic injuries. For more detail on the ACEs, please see: <https://www.cdc.gov/violenceprevention/aces/about.html>

Of the 712 adults surveyed in Illinois, about 63% of the sample had experienced at least one ACE, and about 29% had experienced four or more ACEs.

In examination of ACE scores by community type, residents in rural counties reported the highest average of ACEs (Mean = 3.04), and the lowest average was in suburban Chicago counties (Mean = 1.75).



Adverse Childhood Experience (ACE)	% Experienced
Abuse and Neglect¹	
Emotional Abuse	40.1%
Physical Abuse	31.4%
Emotional Neglect	30.4%
Physical Neglect	14.8%
Household Challenges	
Parental separation or divorce	33.3%
Exposure to intimate partner violence	18.6%
Substance abuse in the household	26.0%
Mental illness in the household	27.6%
Household member involved in criminal justice system	17.4%
Total ACEs	
(note: 1 item on sexual abuse was omitted from the original 10-item ACE measure)	
At least 1 ACE	63.2%
1 to 3 ACEs	34.7%
4 to 9 ACEs	28.5%
Additional Adverse Childhood Experiences	
Exposure to community violence	48.0%
Experienced racial or ethnic discrimination	42.8%
Experienced bullying at school	65.4%
Experienced dating violence	28.5%
In foster care	14.2%

Adverse Childhood Experiences : Disparities

Averages of ACEs were highest among particular groups of individuals:

- Transgender and gender expansive adults (Mean = 5.27) compared to female (Mean = 2.28) and male (Mean = 2.25) adults.
- Lesbian, gay, and bisexual adults (Mean = 4.19) and other sexual orientations (Mean = 3.16) compared to heterosexual orientation (Mean = 2.00).
- Black or African American (Mean = 3.19) and Hispanic or Latin (Mean = 2.79) compared to White (Mean = 2.27) and Asian (Mean = 1.36) adults.

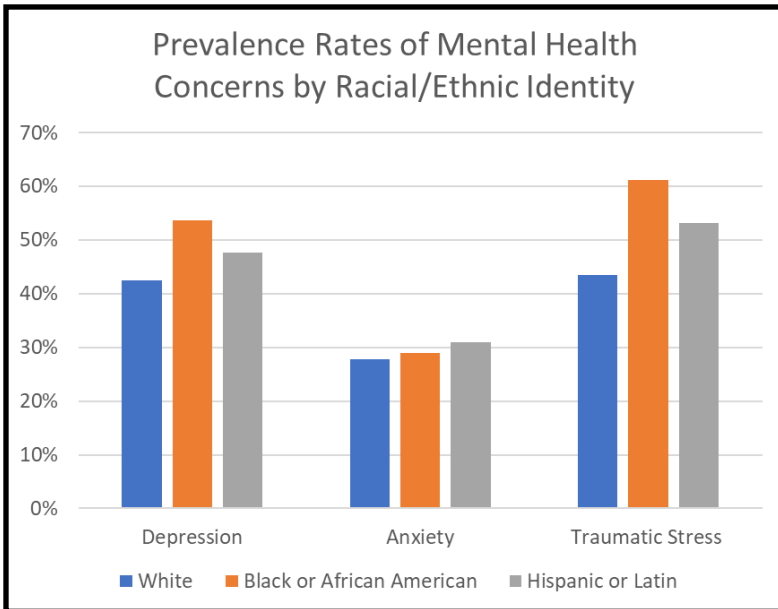
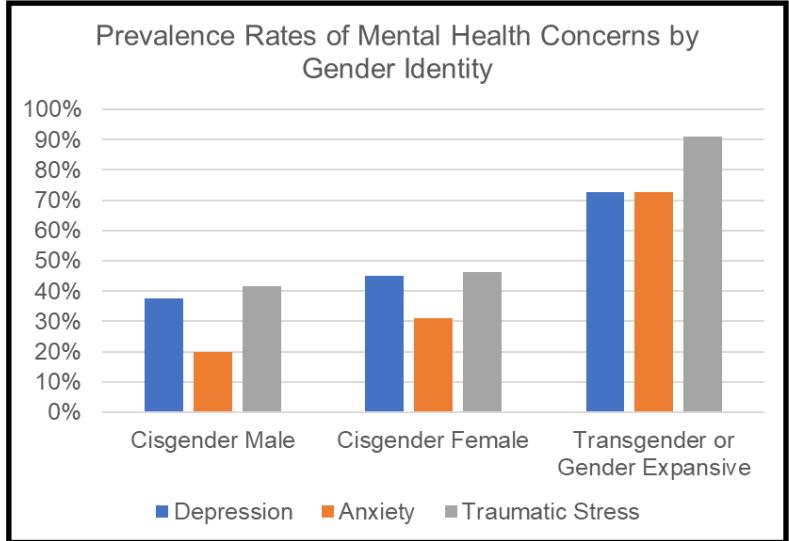


Mental Health & Mental Health Disparities

Across three areas of mental health, adults reported heightened or clinically significant symptomology of mental health concerns, including:

- 42.4%-Depression Symptoms
- 45.1%-Traumatic Stress Symptoms
- 27.1%-Moderate or Severe Anxiety Symptoms

Mental health symptoms were highest among transgender and gender expansive adults (compared to cisgender male and female adults).



Black or African American adults reported the highest rates of depression and traumatic stress.

Hispanic or Latin adults reported slightly higher levels of anxiety compared to White and Black or African American adults.

Adverse childhood experiences increased the odds of adults reported clinical levels of depression, anxiety, and traumatic stress symptoms.

	Depression		Anxiety		Traumatic Stress	
	OR	p	OR	p	OR	p
Total ACE score	1.36	<.001	1.33	<.001	1.52	<.001

Note. OR = Odds Ratio.

Sources of Protection

Respondents also were asked questions about processes that promote positive development, relationships, and outcomes. These processes were at a variety of levels of influence:

Individual Level

- Self Internal Control (e.g., My life is determined by my own actions)
- Ethnic Identity (e.g., I have a strong sense of belonging to my ethnic group)

Relational Level

- Social Support (e.g., Can rely on family, friends, etc.)
- Family Resilience (e.g., Open communication and trust within a family)

Community Level

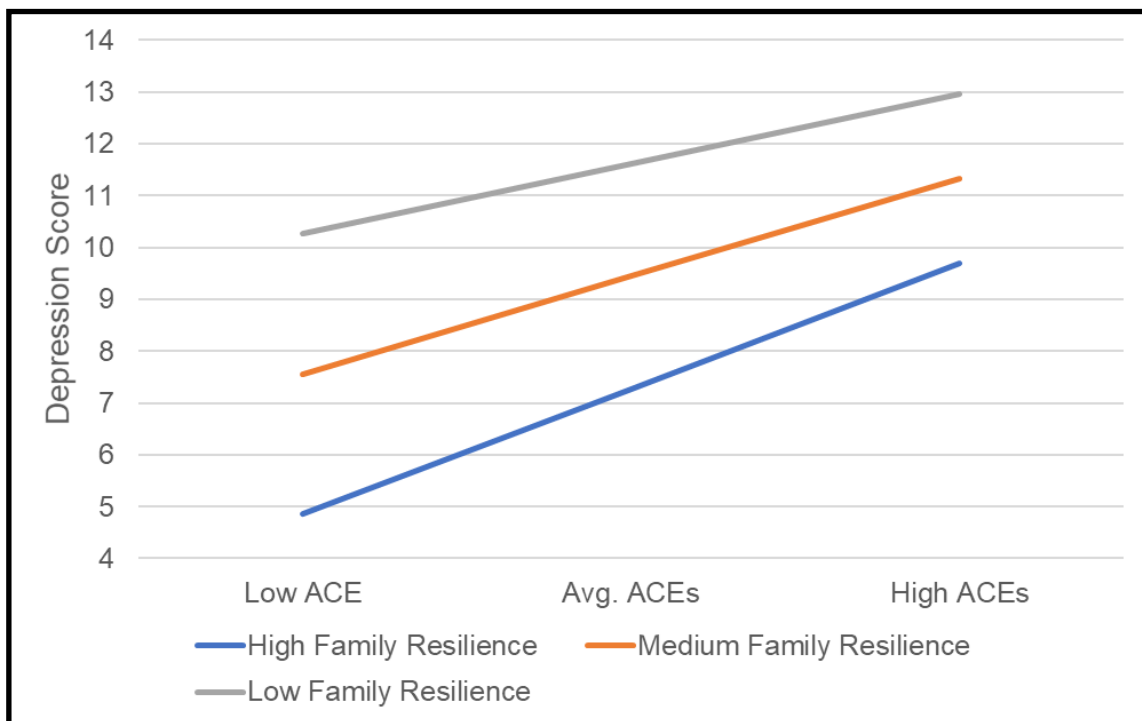
- Informal social control (e.g., Neighbors trusted to intervene if some is committing a crime)
- Social cohesion (e.g., Connected and trusting of your neighbors)
- Community Resilience (e.g., Neighborhood safety)

Among adults with higher levels of ACEs, several factors protected them from experiencing as high of mental health symptoms. These protective factors included:

- Social Support
- Family Resilience
- Community Social Cohesion

For example, as adults experienced more ACEs, there was an associated increase in mental health symptoms. However, among adults who also had high levels of social support, family resilience, and community social cohesion, they had fewer mental health symptoms compared to those with low levels of these variables.

This relationship is illustrated in the figure below. This shows the relationship between ACEs and depression, as moderated by levels of family resilience. The blue line shows how depression symptoms are lowest among those who have high resilience, even as these adults experience more ACEs.







UNIVERSITY OF
ILLINOIS
URBANA-CHAMPAIGN