

# U.S. Department of Justice Office on Violence Against Women

## **Semi-Annual Performance Report for the Legal Assistance for Victims Grant Program**

### **Brief Instructions**

This reporting tool details the Semi-Annual Performance Report questions for the Legal Assistance for Victims Grant Program (LAV Program). A report must be completed for each grant received. Grant partners may complete sections relevant to their portion of the grant. Grant administrators and coordinators are responsible for compiling and submitting a single report that reflects all information collected from grant partners.

All grantees must complete the required sections. Required questions are marked with an asterisk (\*). For all other sections, grantees must answer an initial question about whether they used LAV Program funds to support certain activities during the current reporting period. If the response is yes, then the grantee must complete that section. If the response is no, the rest of that section is skipped.

The activities of volunteers or interns should be reported if they were coordinated or supervised by LAV Program-funded staff or if LAV Program funds substantially supported their activities.

For further information on filling out this report, refer to the separate instructions, which contain detailed definitions and examples.

### **Public Reporting Burden**

Paperwork Reduction Act Notice. Under the Paperwork Reduction Act, a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. The estimated average time to complete and file this form is 60 minutes per form. If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you can write to the Office on Violence Against Women, U.S. Department of Justice, 145 N Street NE, Washington, DC 20530.

## **General Information**

*All grantees must complete the General Information section.*

**1. Date of report**

**2. Current reporting period**

**3. Grantee name**

**4. Grant number**

*The federal grant number assigned to your LAV Program grant.*

**5. Type of performance report**

- Final
- Regular

**6. Point of contact**

*Provide information for the person responsible for the day-to-day coordination of the grant.*

- First name
- Last name
- Agency/organization name
- Address
- City
- State
- Zip code
- Telephone
- Email

**7. Is this a faith-based organization?**

- Yes
- No

**8. Is this a culturally-specific community-based organization?**

- Yes
- No

**9. Does this grant specifically address and focus on tribal populations?**

- Yes
  - If yes, which tribes/nations?
- No

**10. Does your grant support the creation of products in languages other than English or provide services in languages other than English?**

- Yes
  - If yes, what languages?
- No

**11. What percentage of your LAV Program grant was directed to each of these areas?**

*Estimate the approximate percentage of funds (or resources) used to address each area with your LAV Program grant during the current reporting period. The grantee may choose how to make the determination of how to calculate this. Grantees should consider training, staff time, victims services, etc. when making this determination.*

*Throughout this form, the term **sexual assault** means any nonconsensual sexual act proscribed by Federal, tribal, or State law, including when the victim lacks the capacity to consent. The term **domestic violence/dating violence** applies to any pattern of abusive behavior that is used by one person to gain power and control over a current or former intimate partner or dating partner. **Stalking** is defined as engaging in a course of conduct directed at a specific person that would cause a reasonable person to fear for his or her safety, or the safety of others, or suffer substantial emotional distress. See separate instructions for additional victimizations and more complete definitions.*

	Percentage of grant funds
Sexual assault	
Domestic violence/dating violence	
Stalking	
<b>Total (must equal 100%)</b>	

## Staff Information

**1. Were LAV Program grant funds used to fund staff time (at your agency, at a partner agency, contractors, or stipends) during the current reporting period?**

- Yes
- No

**2. Staff**

*Report the total number of full-time equivalent (FTE) staff funded by the LAV Program grant during the current reporting period.*

- *Reporting 1.00 FTEs means a staff person worked full-time and was 100% funded by the grant for the entire reporting period. Typically, one FTE is equal to 1,040 hours (40 hours per week multiplied by 26 weeks).*
- *FTEs should be prorated to reflect when a staff person did not work-full time and/or when was not 100% funded by the LAV Program grant for the entire reporting period.*
- *Report staff by the function(s) they performed, not by title.*
- *Round and report FTEs to the second decimal place. For example, if you calculate an FTE to be 0.66667, then rounding to the second decimal would mean this FTE would be reported as 0.67 FTE.*

Staff Function	FTE(s)
Administrator	
Attorney (does not include prosecutor)	
Counselor	
Information technology staff	
Legal advocate (does not include attorney or paralegal)	
Outreach worker	
Paralegal	
Program coordinator	
Support staff	
Translator/interpreter	
Victim advocate (non-governmental)	
Other (specify):	
<b>Total</b>	

## Technical Assistance

1. **Were LAV Program funds used to provide technical assistance during the current reporting period?**

*Select yes if LAV Program-funded staff provided technical assistance or if LAV Program funds directly supported the provision of technical assistance.*

2. **Discuss the technical assistance activities funded or supported by LAV Program funds, including the topics of the technical assistance activities. Provide any additional information you would like to share about your technical assistance activities.**

## Coordinated Community Response

### 1. Coordinated community response activities

*This question is required. Select all agencies/organizations that you provided referrals to/received referrals from, met with, or engaged in consultation with during the current reporting period. Also indicate if the agency/organization is an MOU partner. If LAV Program-funded staff participated in a task force or work group, check all attendees.*

Agency/organization	Provided referrals to/received referrals from, met with, or engaged in consultation with	MOU Partner
Advocacy organization		
Abuser intervention program		
Corrections ( <i>probation, parole, and correctional facility staff</i> )		
Court		
Domestic violence organization		
Educational institutions/organizations		
Faith-based organization		
Governmental agency		
Health/mental health organization		
Law enforcement		
Legal organization		
Prosecutor's office		
Sex offender management/sex offender treatment provider		
Sexual assault organization		
Social service organization ( <i>non-governmental</i> )		
Tribal government/Tribal governmental agency		
Other (specify): _____		

2. Discuss the effectiveness of CCR activities funded or supported by your LAV Program grant and provide any additional information you would like to share about your CCR activities.

SAMPLE

## Products

1. **Were LAV Program funds used to develop or substantially revise products during the current reporting period?**

*Select yes if LAV Program-funded staff developed or revised products or if LAV Program funds directly supported the development or revision of products.*

- Yes
- No

2. **Describe the products developed or substantially revised with LAV Program funds during the current reporting period.**

*Describe what type of product it was, the title/topic of the product, as well as its intended audience. Also provide information on if the product was translated into a language other than English (including Braille).*



## **Data Collection & Communication Systems**

**1. Were LAV Program funds used to develop, install, or expand data collection and/or communication systems during the current reporting period?**

*Select yes if LAV Program funds or LAV Program-funded staff were used to develop, install, or expand data collection and/or communication systems.*

- Yes
- No

**2. Indicate the use of LAV Program funds for data collection and/or communication systems:**

- Develop new data collection/communication systems
- Install data collection/communication systems
- Expand existing data collection/communication systems
- Link existing data collection/communication systems
- Share information with other community partners
- Manage data collection and communication
- Purchase computers and other equipment

**3. Describe the purpose of the LAV Program funded data collection and/or communication systems.**

## Victim Services

**1. Were LAV Program funds used to provide victim services (including legal services provided by an attorney or paralegal) during the current reporting period?**

*Select yes if LAV Program funds were used to support victim services during the current reporting period. Report all victims served and victim services provided with LAV Program funds, whether by a victim services agency or victim services within law enforcement, prosecution, or the court system in this section. If the grantee is funding a victim assistant or victim-witness coordinator within law enforcement, prosecution, or the court system, they should complete the victim services section to capture that staff's grant-funded work.*

- Yes
- No

**2. Number of victims/survivors who were fully served, partially served, and not served**

*Report the following, to the best of your ability, as an unduplicated count for each category during the current reporting period. This means that each victim/survivor who requested or accepted LAV Program-funded services during the current reporting period should be counted only once in that reporting period. If the victim/survivor experienced more than one victimization, that person should be counted only once under the presenting victimization. Do not report secondary victims here.*

**Served:** A victim/survivor should be reported as served if they requested and/or accepted grant-funded services and the program was able to provide all of those services.

**Partially Served:** A victim/survivor should be reported as partially served if they accepted and/or requested grant-funded services and the program was able to provide some, but not all, of those services.

**Not Served:** A victim/survivor should be reported as not served if the program could not provide any of the grant-funded services that the victim accepted and/or requested.

	<b>Sexual assault</b>	<b>Domestic violence/ dating violence</b>	<b>Stalking</b>	<b>Total</b>
Served				
Partially served				
<b>Total Served &amp; Partially Served</b>				
Not served				

**3. Number of victims/survivors who received LAV Program-funded services for multiple victimizations**

*Report an unduplicated count of victims/survivors reported in the previous question who received LAV Program-funded support for more than one victimization.*

**4. Select all the additional victimizations types, including specific forms of abuse, for which these victims/survivors received LAV Program-funded services:**

- ☐ Sexual assault
- ☐ Domestic/dating violence
- ☐ Stalking
- ☐ Female genital mutilation/cutting
- ☐ Adult survivor of child sexual abuse
- ☐ Sex trafficking
- ☐ Labor trafficking
- ☐ Economic abuse
- ☐ Technological abuse
- ☐ Forced marriage

**5. Describe how LAV Program funds were used to serve victims/survivors who received grant-funded services for multiple victimizations.**

**6. Select all of the reasons primary victims/survivors who requested LAV Program-funded services were partially or not served:**

- ☐ Conflict of interest
- ☐ Did not meet statutory requirements
- ☐ Hours of operation
- ☐ Insufficient or lack of culturally appropriate services
- ☐ Insufficient or lack of agency capacity to provide language access (including sign language or assistive communication devices)
- ☐ Insufficient or lack of services for people with disabilities
- ☐ Insufficient or lack of services for people who are D/deaf or hard of hearing
- ☐ Lack of childcare
- ☐ Program reached capacity
- ☐ Program rules not acceptable to victim/survivor
- ☐ Program unable to provide service due to limited resources/priority-setting
- ☐ Services inappropriate or inadequate for victims/survivors with mental health issues
- ☐ Services inappropriate or inadequate for victims/survivors with substance abuse issues
- ☐ Services otherwise not appropriate for victim/survivor
- ☐ Transportation
- ☐ Other (specify)

7. **Describe why grant-funded services were not provided, including barriers/challenges your agency faced when providing LAV Program-funded services, and how those barriers impacted victims/survivors.**

8. **Race/ethnicity**

*Report the demographic information for the victims/survivors reported as served and partially served with LAV Program funds. Do not report demographics for secondary victims.*

*Report victims/survivors in each category they identify as. At least one race/ethnicity must be reported for each victim/survivor reported as fully served and partially served. Those victims for whom the race/ethnicity is not known should be reported in the “unknown” category.*

Race/ethnicity	Number of victims/survivors
American Indian or Alaska Native	
Asian	
Black or African American	
Hispanic, Latino, or Spanish origin	
Middle Eastern or North African	
Native Hawaiian or other Pacific Islander	
White	
People of a race or origin not listed (specify):	
Unknown	
<b>Total</b>	

9. **Sex**

*Report victims/survivors in each category that applies.*

*Due to Presidential [Executive Order 14168](#) and accompanying guidance from the Office on Management and Budget, OVW amended demographic questions as follows. The term “gender” was changed to “sex,” and the available responsive categories were limited to “male” and “female.” Grantees should report the data that is relevant to those categories in those categories. Grantees should not report data for victims for whom sex is unknown. The total number of victims reported in this section must be less than or equal to the total number of victims served and partially served. As always, victims do not have to share their demographic information to obtain services. Please direct any questions to [OVW.Research@usdoj.gov](mailto:OVW.Research@usdoj.gov).*

Sex	Number of victims/survivors
Female	
Male	
<b>Total</b>	

## 10. Age

Report the age of each victim/survivor reported as fully and partially served. Exactly one age must be reported for each victim/survivor reported as fully and partially served. Those victims for whom the age is not known should be reported in the “unknown” category.

Age	Number of victims/survivors
11-17	
18-24	
25-59	
60+	
Unknown	
<b>Total</b>	

## 11. Additional demographics

Report the number of victims/survivors who were served and partially served who identify with these additional demographics if they were willingly disclosed/identified by the victims/survivors. These additional demographics are not required.

Additional demographics	Number of victims/survivors
People with disabilities	
People whose primary language is not English	
People who are D/deaf or hard of hearing	
People who are immigrants/refugees/asylum seekers	
People who live in rural areas	

## 12. Victim services

Report the LAV Program-funded services provided to the victims/survivors reported fully and partially served. Do not capture legal assistance provided by grant-funded attorneys or paralegals in this question, as that information will be asked for in future questions. Refer to the separate instructions document for service definitions.

The first column “Number of victims/survivors served” is an unduplicated count of the number of victims/survivors who received each type of grant-funded service. No individual service category should have a number of victims served greater than the total number of victims served and partially served.

The second column “Number of times service was provided” is a total of the number of times each victim in the first column received that services type during the 6-month reporting period.

Type of Service	Number of victims/survivors served	Number of times service was provided
Civil legal advocacy/court accompaniment		
Counseling/support group		
Criminal justice advocacy/court accompaniment		
Crisis intervention		
Language services		
Victim/survivor advocacy		
Other (specify):		

**13. Discuss the effectiveness of victim services and legal services supported by your LAV Program grant and provide any additional information you would like to share.**

## Legal Services

1. **Were LAV Program funds used to provide legal services to victims/survivors during the current reporting period?**

*Select yes if LAV Program-funded staff (i.e., attorneys or paralegals) provided these services or LAV Program funds were used to support these services during the current reporting period. If you select yes, be sure you also fill out the Victim Services section.*

- Yes
- No

2. **Number of victims/survivors who received assistance with legal issues**

*Report an unduplicated count of victims/survivors who received assistance with at least one legal issue.*

3. **Number of victims who received assistance with multiple legal issues**

*Of the victims/survivors who received assistance with legal issues, report the number of victims/survivors who received assistance with more than one type of legal issue during the current reporting period.*

4. **Legal issues**

*Under "Number of victims/survivors receiving legal assistance," report the number of primary victims/survivors who received legal assistance from LAV-funded attorneys or paralegals during the current reporting period. Count a victim/survivor once in each legal issue category for which they received assistance with LAV Program grant funds.*

*Under "Number of cases closed or issues resolved," report each case that was closed and each legal issue that was resolved during the current reporting period for which services were provided by LAV Program-funded attorneys or paralegals. Do not include cases that are pending or were not yet closed during the reporting period. It is okay if "Number of cases closed or issues resolved" is less than "Number of victims/survivors receiving legal assistance."*

Legal Issues	Number of victims/survivors receiving legal assistance	Number of cases closed or issues resolved
Protection orders		
Divorce		
Custody/visitation		
Establishment of paternity		
Child/spousal support		

<b>Legal Issues</b>	<b>Number of victims/survivors receiving legal assistance</b>	<b>Number of cases closed or issues resolved</b>
Other family law matters		
Consumer/finance		
Employment		
Income maintenance		
Housing		
VAWA self-petition		
Cancellation of removal		
U visa		
T visa		
Other immigration matters		
Criminal issues		
Educational issues		
Other (specify):		



## Narrative

- 1. Report on the status of your LAV Program grant goals and objectives as of the end of the current reporting period.**

*This question is required. Report on the status of the goals and objectives as they were identified in your grant proposal or as they have been added or revised.*

- 2. What do you see as the most significant areas of remaining need, with regard to improving services to victims/survivors, increasing victims/survivors' safety, and enhancing community response?**

*This question is required for the January-June reporting period. Consider geographic regions, underserved populations, service delivery systems, types of victimization, and challenges and barriers unique to your jurisdiction.*

- 3. What has LAV Program funding allowed you to do that you could not do prior to receiving this funding?**

*This question is required for the January-June reporting period.*

- 4. Provide additional information regarding the effectiveness of your grant-funded program.**

*If you have any other data or information that you have not already reported that demonstrate the effectiveness of your LAV Program grant, please provide it below.*

- 5. Provide additional information to explain the data submitted on this form.**

*If you have any information that could be helpful in understanding the data you have submitted in this report, please answer this question. For example, if you submitted two different performance reports for the same reporting period, you may explain how the data was apportioned to each report; if you reported staff but did not report any corresponding activities, you may explain why; or if you did not use LAV Program funds to support either staff or activities during the reporting period, please explain how program funds were used.*