

A close-up photograph of a branch with numerous small, light pink cherry blossoms. The branch enters from the top left and extends diagonally across the frame. The background is a solid, muted purple color.

SURVIVOR ADVOCACY IN VIRGINIA

2025

A REPORT ON DATA FROM
VIRGINIA'S FRONTLINE
SEXUAL AND DOMESTIC
VIOLENCE AGENCIES

Prepared Summer 2026



**VIRGINIA SEXUAL &
DOMESTIC VIOLENCE
ACTION ALLIANCE**

DATA SOURCE FOR THIS REPORT

More than 70 Sexual and Domestic Violence Agencies (direct service providers) across Virginia use VAdata, a secure, web-based data collection system that is maintained by the Virginia Sexual & Domestic Violence Action Alliance. The system documents survivor experiences, services provided by sexual and domestic violence advocates, and primary prevention programming implemented in a variety of settings.

As the Commonwealth's primary repository of information on the experiences of survivors and the services they receive, VAdata plays a critical role in shaping our understanding of the impacts of sexual and domestic violence in Virginia. This report features information collected in VAdata between January 1, 2020, and December 31, 2025. Data in the tables were extracted from VAdata on or around April 15, 2026, covering the period from January 1, 2025, through December 31, 2025. No data reviewed included personally or individually identifying information.

More data reports, including quarterly data, can be accessed at <https://vsdvalliance.org/statistics-and-data/>. Find out more about VAdata at www.vadata.org.

FUNDING ACKNOWLEDGMENT

Support for the operation of the VAdata system, as well as staff time dedicated to training and technical assistance, data analysis, and reporting, is provided by a contract from the Virginia Department of Social Services Office of Family Violence (#FAM-24-099) and a grant from the Office on Violence Against Women (#15JOVW-25-GG-00200-MUMU).

The opinions expressed in this report, as well as decisions about data to highlight, are exclusively those of the Action Alliance and do not represent the opinions of VDSS-OFV or OVW.



ABOUT THE VIRGINIA SEXUAL & DOMESTIC VIOLENCE ACTION ALLIANCE

The Virginia Sexual & Domestic Violence Action Alliance (Action Alliance) has been Virginia's leading voice on sexual and intimate partner violence for 45 years. We are a non-profit network of survivors, Sexual and Domestic Violence Agencies, and allies working to strengthen how communities across Virginia respond to and prevent sexual and intimate partner violence.

- As an advocacy organization, we provide the expertise needed to ensure an effective response.
- As a service provider, we offer people resources for making informed choices about their safety and well-being.
- As a membership organization, we build diverse and meaningful alliances across the Commonwealth.

We have a compelling vision for a world where all of us thrive. Violence is all around us, but it doesn't have to be that way. A better world is within reach.

GET IN TOUCH

VIRGINIA SEXUAL & DOMESTIC VIOLENCE ACTION ALLIANCE

P.O. BOX 4342 RICHMOND, VA 23220

[VSDVALLIANCE.ORG](https://vsdvalliance.org) | INFO@VSDVALLIANCE.ORG

EXECUTIVE SUMMARY

Every day in the Commonwealth, professionals in Virginia's 70+ Sexual and Domestic Violence Agencies (SDVAs) work on the front lines, supporting survivors at their most desperate hours and doing the long work of interrupting violence by changing cultural norms.

Advocates answer hotline calls in the middle of the night, provide support and safety planning, and meet survivors at all hours in emergency rooms. They help survivors and their families navigate complex legal systems, create safety plans, connect to counseling, find safe housing, and access other resources needed to rebuild their lives after experiencing violence. They work in tandem with preventionists, who, alongside community partners, identify and create conditions that stop violence before it occurs by working with young people, families, schools, and workplaces to strengthen healthy relationships and challenge pervasive, harmful norms.

Prevention and advocacy represent a continuum of support and change, and those who specialize in these fields work at all points of that support spectrum, helping survivors heal today while also working to create a tomorrow without violence. Their work is deeply personal, highly specialized, often lifesaving, and critical to public health. And they continue this work while that very continuum of care is under massive financial strain.

Catastrophic declines in federal funding have increased financial pressure on Virginia's SDVAs, even as survivors continue to seek their services and expertise. But against these odds, committed specialists continue to show up every day to ensure survivors receive the support and care they desperately need.

Sexual and domestic violence do not occur at random. On the contrary, they follow recognizable patterns that are rooted in power, control, and coercion. Survivors are most often harmed in their own home and by people they know and trust. Understanding how these patterns work is crucial to improving responses and strengthening accountability, and, ultimately, to dismantling the systems that uphold violence and to preventing violence before it occurs. And that's exactly what advocates and preventionists do.

This framework is unsustainable without meaningful investment from the public and private sectors. Virginia's work to address and prevent sexual and domestic violence deserves the fervent backing of strong public policy, stable funding, and continued community support. The safety, health, and well-being of the Commonwealth's communities depend on ensuring the professionals who specialize in this work have the resources they need to stand with survivors today while building a tomorrow without violence for everyone.

Behind every hotline call answered, counseling session provided, court accompaniment completed, shelter stay arranged, and prevention program delivered is an advocate or preventionist who stepped up to create safety and a future free from violence. Their capability, compassion, and persistence strengthen communities across Virginia every day.

This report captures the collective work of these advocates and preventionists and is offered in service of ensuring that their work is seen, celebrated, and continues to engender support from communities across the Commonwealth.

SURVIVOR SERVICES 2025

FACE-TO-FACE CRISIS RESPONSE AND ADVOCACY SERVICES



309,922
TOTAL HOURS OF
CRISIS RESPONSE
& ADVOCACY



27,898
TOTAL ADULTS &
CHILDREN SERVED

In 2025, Virginia's 70+ local Sexual and Domestic Violence Agencies provided 309,922 hours of crisis response and advocacy services to 27,898 adults and children across Virginia, including hospital and court accompaniment, safety planning, counseling, resource and housing navigation, and more.



AVERAGE 11 HOURS
IN-PERSON ADVOCACY
PROVIDED PER PERSON

Advocates provided an average 11 hours of in-person advocacy services to survivors, ranging from 9 to 13 hours per person, depending on age of survivor and type of violence.

FIVE-YEAR TRENDS 2021-2025



ADULTS
SERVED



CHILDREN
SERVED



TOTAL
SERVED



TOTAL
HOURS

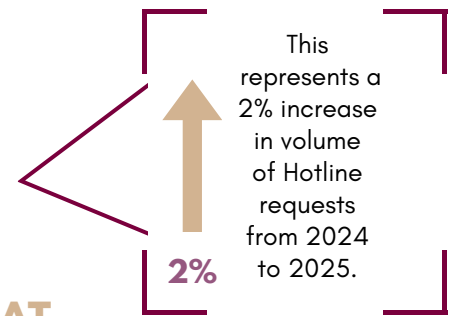
	ADULTS SERVED	CHILDREN SERVED	TOTAL SERVED	TOTAL HOURS
2021	25,930	6,328	32,258	313,141
2022	25,312	6,949	32,261	305,843
2023	24,779	6,217	30,996	312,102
2024	24,051	5,206	29,257	329,998
2025	22,560	5,338	27,898	309,922

SURVIVOR SERVICES 2025

HOTLINE CALLS, TEXTS, AND CHATS



70,136
TOTAL REQUESTS
FOR HELP VIA
CALLS, TEXTS, CHAT



In 2025, crisis response advocates worked 24/7/365 to answer 70,136 requests for help and resources from survivors, family members and loved ones of survivors, community members, and allied professionals.

2025

TOP 3 REASONS FOR CONTACTING A HOTLINE



**SAFETY PLANNING
AND LEGAL
PROTECTIONS**



**COUNSELING AND
SUPPORT, INCLUDING
CRISIS INTERVENTION**



**INFORMATION AND
REFERRALS TO PROVIDERS
IN THE COMMUNITY**



**TOTAL
HOTLINE
CALLS**



**PERCENT
CHANGE**

2021

77,529

+ 10.30%

2022

78,966

+ 1.90%

2023

72,985

-7.60%

2024

68,680

-5.90%

2025

70,136

+ 2.20%



We saw a spike in contacts during the pandemic, with a return to pre-pandemic levels in 2023.

**HOTLINE
FIVE-YEAR
TRENDS
2021-2025**

SURVIVOR SERVICES 2025

EMERGENCY SHELTER AND TRANSITIONAL HOUSING SERVICES¹

DRASTIC INCREASE IN DENIALS OF SHELTER DUE TO LIMITED BEDS



664 REQUESTS
FOR EMERGENCY SHELTER
WERE UNMET DUE TO
CAPACITY IN 2025



63% INCREASE
DENIAL OF EMERGENCY
SHELTER SINCE 2021
DUE TO CAPACITY

664 requests for emergency shelter
or housing were unmet due to capacity.
Since 2021, the number of requests for emergency shelter
that were denied due to capacity has risen by 63%.

EMERGENCY SHELTER



229,020
TOTAL NIGHTS OF
EMERGENCY SHELTER

PROVIDED TO



5,342
ADULTS AND CHILDREN
ACROSS VIRGINIA



43 NIGHTS
AVERAGE LENGTH
OF STAY PER FAMILY

TRANSITIONAL HOUSING



93,312
TOTAL NIGHTS OF
TRANSITIONAL HOUSING²

PROVIDED
TO



276
ADULTS
AND CHILDREN
ACROSS VIRGINIA



ADULTS AND
CHILDREN
SHELTERED



TOTAL
SHELTER
NIGHTS



UNMET
SHELTER
REQUESTS

2021

6,388

243,058

407

2022

6,303

239,441

708

2023

5,720

233,705

593

2024

5,552

232,988

727

2025

5,342

229,020

664

**SHELTER
FIVE-YEAR
TRENDS
2021-2025**

¹ VAdata does not calculate emergency shelter information for survivors receiving only sexual violence services in the statewide report.

² Transitional housing provides temporary, supportive housing for survivors who need a safe place to live while working toward long-term stability. Programs typically offer housing assistance, advocacy, case management, and connections to resources such as employment, education, childcare, and permanent housing.

CRITICAL FUNDING LOSSES

For decades, Virginia's Sexual and Domestic Violence Agencies relied on federal funding to sustain the essential services survivors depend on.

This funding structure enabled the Commonwealth to benefit from this work without having to fund it directly. That is no longer the case. Since State Fiscal Year 2020 (July 2019 to June 2020), Virginia has lost more than half of its Victims of Crime Act (VOCA) funding, **a whopping 54% decline that has transformed a longstanding funding challenge into a full-blown crisis for victim services.**

And yet, Virginia's sexual and domestic violence victim advocates continue to show up.

Across the Commonwealth, agencies have absorbed staff reductions, consolidated positions, managed ever-growing waiting lists, and scrambled to patch funding gaps, all while continuing to provide a high volume of lifesaving, essential services to survivors who had nowhere else to turn. The strain is real and unevenly distributed; some agencies are running on fumes while others face identifiable and growing gaps between community need and agency capacity. What is consistent across the Commonwealth is that when agencies can no longer absorb funding cuts, it is not those who hold the power of the purse who suffer the consequences; it's survivors who ultimately pay the price.

Robust and sustainable funding solutions are not only possible, but necessary for the future of public safety and public health across the Commonwealth.

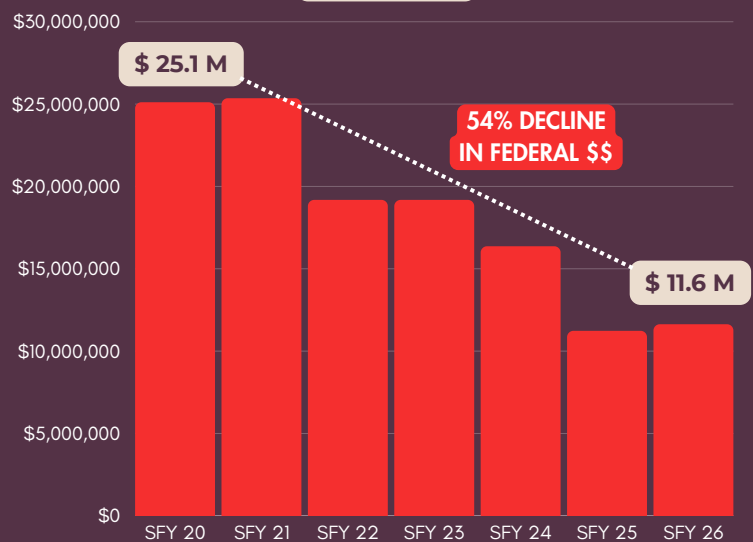
PROVIDING ESSENTIAL PUBLIC SAFETY AND CRISIS RESPONSE SERVICES IN THE FACE OF DEVASTATING FUNDING LOSSES



Virginia Sexual and Domestic Violence
ACTION ALLIANCE

VIRGINIA'S SHARE OF FEDERAL VOCA FUNDS

SFY20-26



Virginia's share of federal Victim Opportunity Grants (VOCA) funds declined drastically from \$25.1 million in fiscal year 2020 to \$11.6 million in fiscal year 2026.

Over the last 5 years, face-to-face advocacy services have decreased by 13%, hotline contacts by 9%, and the number of people receiving emergency shelter services by 16%.

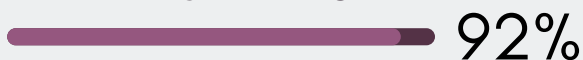
This trend in the number of survivors served reflects drastic—and in some localities what can only be described as catastrophic—shifts in the funding landscape for victim services.

WHAT SURVIVORS TELL US ABOUT THE IMPACT OF OUR SERVICES

Advocates working in Virginia's Sexual and Domestic Violence Agencies continue to answer calls at all hours, sit beside survivors in court and hospital rooms, help families find a safe place to sleep, and facilitate connections with life-saving resources like TANF, child care, and housing subsidies in the community. The numbers and narratives here are a record of what advocates are doing to create safety and thriving in their communities, in spite of ongoing funding challenges at the state and federal levels.



MEETING BASIC FINANCIAL NEEDS



"I would have stayed."

IN 2025, SURVIVORS WHO CONTACTED VIRGINIA'S SEXUAL AND DOMESTIC VIOLENCE AGENCIES REPORTED GETTING HELP WITH...



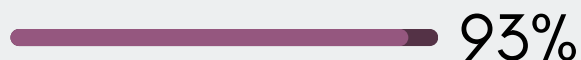
THE IMPACT OF VIOLENCE ON RELATIONSHIPS WITH FAMILY & FRIENDS



"I'd keep going back [to my abuser] and not know the difference between love and control...these services are keeping me alive."



THE LEGAL SYSTEM AND LEGAL ISSUES



"I would have crumbled when I got in front of the judge and probably would be homeless in a vehicle with my kids."



NAVIGATING IMMIGRATION CONCERNS

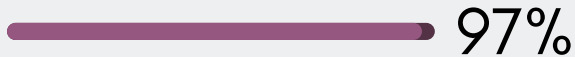


"I would have been living in constant fear."

SURVIVORS WHO CONTACTED VIRGINIA'S SEXUAL AND DOMESTIC VIOLENCE AGENCIES REPORTED GETTING HELP WITH...



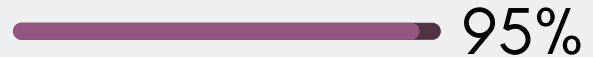
ADDRESSING EMOTIONAL NEEDS AND NAVIGATING TRAUMA



"I honestly don't think I would still be living due to the stress and anxiety from this [sexual abuse]."



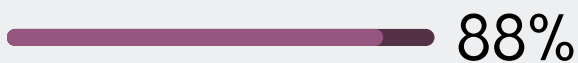
ACCESSING HEALTHCARE SERVICES



"[Advocate] helped in every way, [including] helping with the kids during medical appointments, support, and setting up counseling."



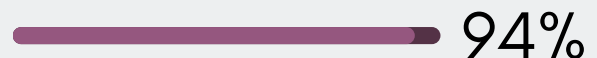
FINDING SAFE AND AFFORDABLE HOUSING



"I would have had my children and I on [friends'] couches and floors and in my car for sleeping. Thank you for all you do for families like us."



TRANSPORTATION



"[Advocate] helped with transportation to court and explained everything to me and my partner. I could not have made it to court without her."

**"WHAT WOULD
YOU HAVE
DONE IF THESE
SERVICES
DID NOT EXIST?"**

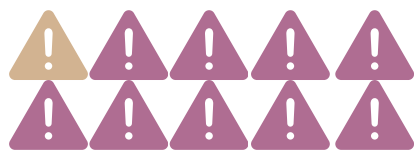
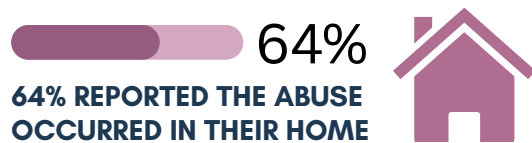
**"I would have
been
homeless,
dead,
or in the
hospital."**

**"I wouldn't have considered
reporting or taking any legal
action for my safety...
the information and support
I've received made it feel
manageable to file a police
report and to file for
a protective order."**

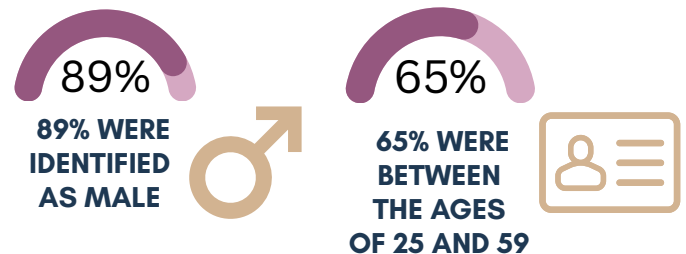
WHAT WE KNOW ABOUT THE PERPETRATION OF VIOLENCE

Sexual and domestic violence are not random, arbitrary acts. They follow patterns. Perpetrators are overwhelmingly known to their victims, operate primarily in the home, and use a predictable set of tactics, including physical violence, threats, control of resources, and firearms to establish and maintain control over survivors. The data Virginia's Sexual and Domestic Violence Agencies collect reveal trends of who is causing this harm and how. Naming that clearly is not just a matter of accuracy but of accountability.

SEXUAL VIOLENCE: NOTABLE ELEMENTS



SEXUAL VIOLENCE PERPETRATORS

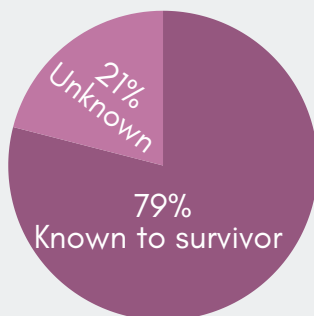


MOST SURVIVORS KNEW THE PERSON WHO HARMED THEM

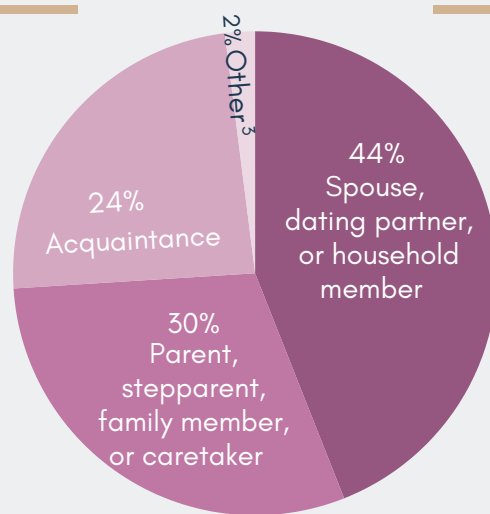
Of those known to the survivor, nearly 44% were intimate partners or household members, and 30% were family members or caretakers, meaning nearly three in four (73.75%) known perpetrators had a close domestic relationship with the survivor.



79% OF SURVIVORS KNEW THE PERSON WHO HARMED THEM

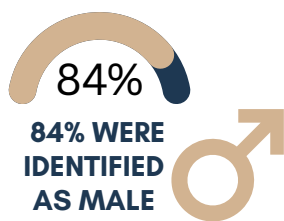


³ "Other" is a VAdata category for perpetrator relationships that do not fit the other defined options and was retained here for data integrity.

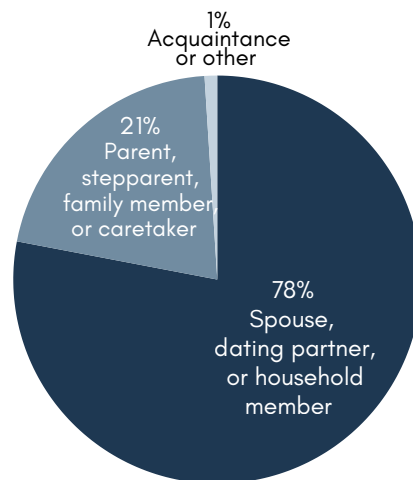
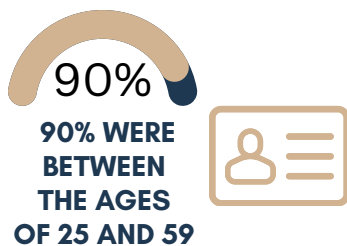


Relationship of survivor to the person who harmed them

DOMESTIC VIOLENCE PERPETRATORS



84% of survivors identified the person who harmed them as male, and 90% said the person was between 25 and 59 years old.



RELATIONSHIP TO VICTIM

78% of survivors described their relationship with the person who harmed them as being an intimate partner or household member, while 21% described them as someone in a parental or caretaking role.

DOMESTIC VIOLENCE: NOTABLE ELEMENTS



NEARLY 1 IN 5 (19%) PERPETRATORS THREATENED TO COMMIT SUICIDE AND/OR HOMICIDE.



NEARLY 1 IN 5 (18%) PERPETRATORS DESTROYED OR THREATENED TO DESTROY PROPERTY



NEARLY 1 IN 5 (16%) PERPETRATORS STRANGLED OR OBSTRUCTED THE VICTIM'S BREATHING.

FIREARMS AND VIOLENCE: A LETHAL COMBINATION



A firearm makes it five times more likely that a victim will be killed by their abuser.⁴

In Virginia, nearly two-thirds (65.5%) of all intimate partner violence homicide victims are killed with a firearm, and 83% of those homicides occur in the home.

Abusers also use firearms to threaten and intimidate, not just to harm, exploiting their presence as a means to enforce compliance and silence survivors long before ever firing a shot.

Among survivors whose advocates were asked about weapon use, nearly 1 in 3 sexual violence survivors (32%) and nearly half of domestic violence survivors (44%) said the person who harmed them used or threatened to use a weapon or firearm against them.

4 J.C. Campbell, et al., "Risk Factors for Femicide in Abusive Relationships: Results from a Multisite Case Control Study," American Journal of Public Health 93, no.7 (2003): 1089-1097

PREVENTING SEXUAL & DOMESTIC VIOLENCE: ADDRESSING THE ROOT CAUSES

WHAT THE DATA TELLS US ABOUT WHEN VIOLENCE BEGINS

The perpetration data in this report not only shows us who is causing harm and how, but also when the conditions for that harm begin to form. The attitudes, norms, and behaviors that enable perpetration don't appear out of nowhere in adulthood. They develop early, go unchallenged, and can escalate over time.

Patterns of coercion, control, entitlement, and violence in the home by someone the survivor knows and should be able to trust are not inevitable. These attitudes, norms, and behaviors can be challenged with intentional, connected, and continuous prevention programming that starts very early in life and continues well through adulthood.

PREVENTION IN VIRGINIA: 2025 SNAPSHOT

In 2025, **20** Sexual and Domestic Violence Agencies in Virginia implemented **536** prevention strategies across the Commonwealth in a variety of settings and with various groups of people. Most prevention strategies took place in schools or community-based agencies.

536  **PREVENTION STRATEGIES IMPLEMENTED IN 2025**



NEARLY 4 IN 5 PREVENTION STRATEGIES OCCURRED IN SCHOOLS OR COMMUNITY-BASED AGENCIES.

PREVENTION REACHES PEOPLE BEFORE HARMFUL ATTITUDES TAKE ROOT

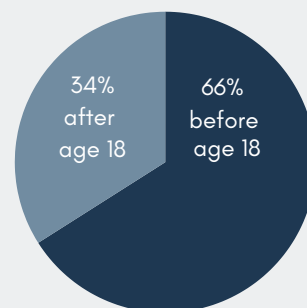
Primary prevention works to preclude harmful conditions before they materialize, building healthy relationship skills, shifting attitudes and norms about gender and power, creating protective environments where violence is not tolerated, and establishing laws that promote equity.

Of the 70,136 people who contacted Virginia's hotlines in 2025, 66% reported that their earliest experience of violence occurred before the age of 18.

It's imperative we reach people before harmful attitudes and norms take root; it's how we begin to change the culture that makes violence possible in the first place.

AGE OF FIRST VICTIMIZATION

66% of hotline callers say their first victimization happened before the age of 18.



PREVENTING SEXUAL & DOMESTIC VIOLENCE

ADDRESSING THE ROOT CAUSES

PREVENTION STRATEGIES DON'T ALL LOOK THE SAME

The public health framework guiding prevention work recognizes that violence occurs across multiple levels of society. Effective prevention requires working on all of them. In 2025, **88% of Virginia's prevention strategies operated at the individual and relationship level.**

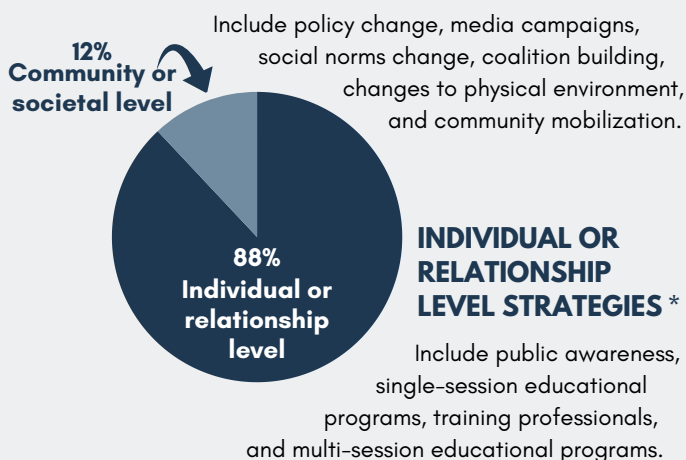
The remaining **12% operated at the community and societal levels.** The imbalance between these two levels reflects real constraints in funding and capacity, not a lack of understanding about what comprehensive prevention requires.

Changing culture means changing systems, norms, and environments, and as resources and reporting infrastructure grow, so will Virginia's ability to expand and document this work.

TYPES OF PREVENTION STRATEGIES

88% of prevention strategies implemented in 2025 were at the individual/relationship level of the social ecology, while 12% of strategies were at the community or societal level.

COMMUNITY/SOCIETAL LEVEL STRATEGIES *

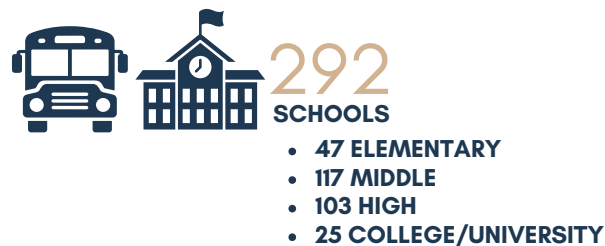


* Number reflects a percentage of all strategies

5 Agencies may select more than one setting per strategy; therefore, this list reflects 591 total settings across 536 strategies.

WHERE PREVENTION IS HAPPENING⁵

Nearly 4 in 5 prevention strategies (79.9%) occurred in schools or community-based agencies. These are the places where young people are, as well as the places the data tells us prevention efforts need to be.



PREVENTING SEXUAL & DOMESTIC VIOLENCE

ADDRESSING THE ROOT CAUSES

RISK AND PROTECTIVE FACTORS

Research has identified risk factors that make violence more likely to occur and protective factors that help prevent it. The perpetration data in this report show some of those risk factors playing out: coercion, rigid beliefs about power and gender, and community norms that treat violence as a private matter rather than a public health issue. Prevention efforts work to strengthen protective factors and address those underlying conditions that allow risk factors to turn into violence.

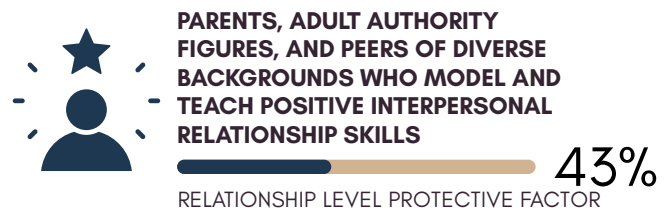
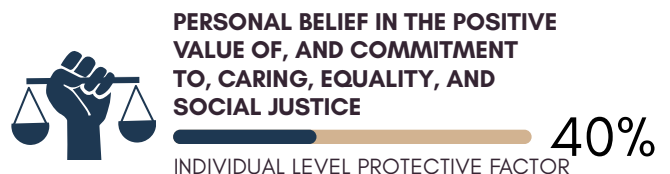
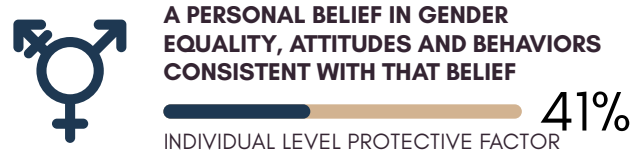
The following represent a selection of risk and protective factors addressed by Virginia's Sexual and Domestic Violence Agencies in 2025.



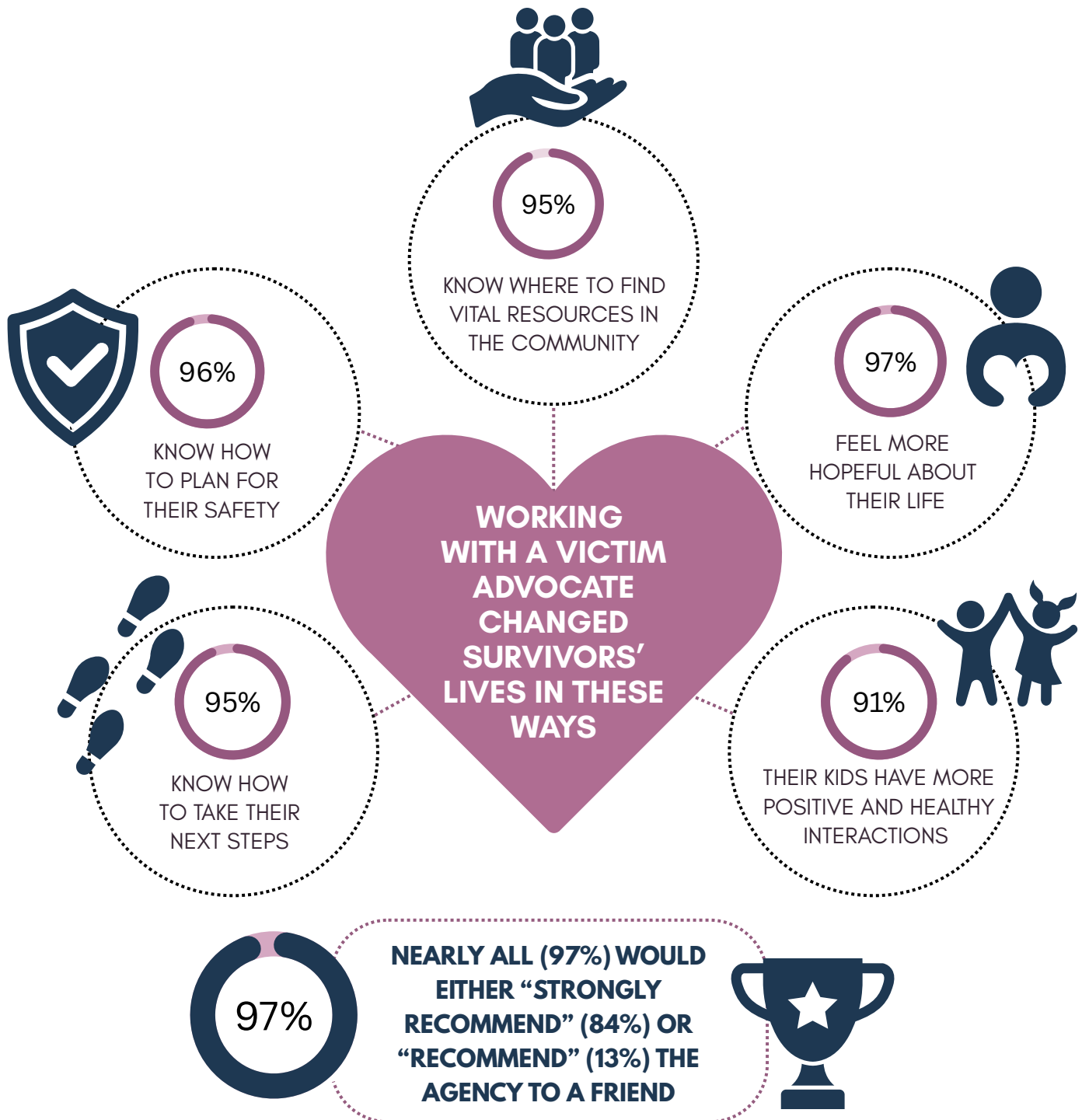
RISK FACTORS



PROTECTIVE FACTORS



SURVIVOR ADVOCATES CHANGE LIVES FOR THE BETTER



**VIRGINIA'S SEXUAL AND DOMESTIC VIOLENCE AGENCIES
SAVE LIVES AND TRANSFORM COMMUNITIES**



**JOIN AS A
MEMBER**



**SUPPORT
OUR WORK**



**RECEIVE
UPDATES**



VIRGINIA SEXUAL & DOMESTIC VIOLENCE ACTION ALLIANCE
P.O. BOX 4342 RICHMOND, VA 23220
VSDVALLIANCE.ORG | INFO@VSDVALLIANCE.ORG