

ADDRESSING THE RIGHT TO VOTE: ADDRESS CONFIDENTIALITY
PROGRAMS IN THE UNITED STATES

by

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ABSTRACT

When a survivor of intimate partner violence (IPV) flees abuse but wishes to engage in a new community safely, what can states do to ensure their ability to do so? Since 1991, 41 states have implemented Address Confidentiality Programs (ACPs), programs that seek to provide safe mechanisms for survivors of IPV to vote and participate in civil society by anonymizing survivors' addresses in public records so that abusers may not find them. In the first robust policy analysis of state ACPs, this work presents a theoretical framework for deciphering which ACP characteristics lead program enrollment numbers to best align with estimated IPV needs. By examining the eligibility criteria, application process, and participation outcomes of state ACPs, this thesis seeks to establish whether the perceived high administrative burdens of ACPs lead to lower take-up rates of the programs across states and may be responsible for the low number of Americans, just 42,059 of the estimated 10 million women and men who are abused by an intimate partner in the United States annually, who utilize them. I find that administrative burdens negatively impact the take-up rates of ACPs and offer suggestions for avenues for reform.

THE PROBLEM OF INTIMATE PARTNER VIOLENCE

Intimate Partner Violence (IPV), sometimes called “domestic violence,” is a global dilemma affecting hundreds of millions. Data collected in the United States indicate that approximately 24.4% of women and 10.6% of men have experienced stalking, sexual, and/or physical violence by an intimate partner in their lifetime (Smith et al., 2017). Leading explanations of IPV are rooted in an intersectional understanding of the problem. While IPV affects people of all genders, socioeconomic statuses, and races—structural racism, sexism, and classism, along with other barriers, may expose some individuals to a heightened risk of violence (Messing et al., 2022).

Reports of IPV are regrettably on the rise. Notably, there has been an observed increase in IPV rates that correlates with the onset of the COVID-19 pandemic (Kaukinen, 2020). The pandemic compounded IPV due to various factors: abusers’ increased stress and decreased stability and survivors’ isolation from support systems such as social services (McNeil et al., 2022). According to the National Coalition Against Domestic Violence, an average of twenty Americans are physically abused by an intimate partner every minute, culminating in some ten million victims of such violence per year (n.d.).

IPV remains a major stratifying force across the United States. The Centers for Disease Control and Prevention (2022) notes that IPV is linked to several chronic health consequences and poor economic outcomes, which may be compounded depending on victims’ intersecting identities and vulnerabilities. The lifetime economic cost associated with IPV incurred via medical services for injuries, lost productivity at work, criminal justice intervention, and other services is estimated at \$3.6 trillion. Clearly, IPV is a tragic facet of life for many Americans and carries devastating societal consequences.

These numbers and outcomes, though staggering, are likely a conservative estimate of IPV's true scope as scholars have hypothesized that because of the hidden and stigmatized nature of IPV, there remain fewer reports of incidents than actual incidents. Thus, IPV is largely a hidden crime. In turn, abusers can be shielded from accountability by their victims' inability to escape and fears of reporting. When survivors are able to escape their abusers, they often remain in the proverbial shadows of civil society. Additionally troubling: many do not register to vote or create other public records out of fear of their new, safe home address becoming publicly accessible to their abusers.

Since 1991, 41 states have implemented Address Confidentiality Programs (ACPs). ACPs attempt to provide a safe mechanism for survivors of IPV to vote and participate in civil society by anonymizing survivors' addresses in public records. Like most IPV policies and programs, ACP effectiveness varies widely across states depending on funding, accessibility of information, administrative burdens, and a myriad of other issues. Yet, ACPs have the potential to uniquely empower survivors both by protecting their anonymity and increasing rates of IPV survivor representation in the voting pool.

My thesis evaluates Address Confidentiality Programs and how these programs actually attain their goals. I ask: *What program characteristics lead a state's Address Confidentiality Program to have an increased number of active participants?* With limited public knowledge and academic inquiry into ACPs, a nationwide examination of successful ACP characteristics may better equip ACP offices, IPV survivors, and academics to decipher how best to employ IPV-centered programs.

A SHIFT IN THE APPROACH TO ADDRESSING IPV

A collective governmental and societal underappreciation for the prevalence of IPV has historically perpetuated inadequate governmental response (Livings et al., 2022). By blaming individuals or certain circumstances where IPV occurs on morality or intangible sources, legislators historically have been able to characterize the issue as less prevalent and pervasive. This, again, is despite the fact that IPV carries largely preventable public health and economic costs which permeate all of society. Current legislation, thus, is only beginning to recognize the necessity for policies and services that address the complex familial, communal, relational, and societal factors that perpetuate the transmission of violence (Mitchell & Vanya, 2009). Moreover, in the US, governmental policies that seek to prevent, intervene, and support survivors of IPV are often at the state or local level, compounding the difficulty of survivors seeking resources and the availability of resources to survivors.

A prominent historical and psychological barrier to society's and government's intervention in IPV stems from the false perception that IPV is inherently personal, an issue between persons and beyond the reach of government policy. While NGOs shoulder much of the work in supporting survivors of IPV, "rigid legislation assumes IPV is an individual and pathological problem" (Fay & Polischuk, 2022, p. 430). Scholars have viewed this belief as being supported by two pervasive biases: Americans, in particular, tend to view both aggression and families as private entities. In this way, aggression within a family unit is a taboo phenomenon that must be dealt with behind proverbial closed doors (Kelly, 2011). In turn, deeming IPV a private problem places the onus on those entrapped by it to escape it alone, a harmful outcome of this victim-blaming mentality. As a result, only in relatively recent

governmental history has a tangible policy and moral attention been placed on supporting survivors of IPV.

Federal legislation has been passed in an attempt to both curb IPV prevalence and support survivors. Most notable of such legislation is the thrice-passed Violence Against Women Act (VAWA). Initially passed in 1994, this landmark act was the first piece of federal legislation to acknowledge domestic violence and sexual assault as crimes. This legislation provides funding specifically for IPV-related community programs and prosecuting perpetrators of IPV. The National Network to End Domestic Violence (2022) notes that the VAWA has since expanded to provide survivors with gender-inclusive and culturally informed legal assistance programs, rape crisis centers, housing protections, and other resources.

Since the VAWA was introduced, IPV rates have nevertheless risen. However, because the VAWA marked a cultural shift towards recognizing IPV as a public rather than a private issue, this increase may be tied more to “greater awareness and subsequent reporting, arrests, and prosecutions” rather than a sheer failure of the VAWA (Gover et al., 2021). Other IPV-centered federal programs and policies followed the VAWA, including the Family Violence Prevention and Services Act (FVPSA) and Domestic Violence Prevention Enhancement and Leadership Through Alliances (DELTA). The FVPSA seeks to protect children impacted by IPV and instituted the National Domestic Violence Hotline. DELTA attempts to narrow the impact of the VAWA to target state and local agencies supporting IPV survivors (Richie et al., 2021).

Despite targeting different aspects of IPV, a common theme among modern IPV legislation is that they deal with a perplexing policy topic. First, these services target a population that, until recently, did not have any framework for obtaining related government assistance. Following the women’s movement in the late twentieth century, voters and legislators

alike have begun to claim an interest in reducing IPV and empowering those who do survive it. Yet, effective IPV prevention policies inherently require a multifaceted approach, which includes policies with less consensus: gun ownership and accessibility, public services budgeting, law enforcement violence, and more (Goodyear et. al., 2020). When these coexisting conversations are not had, legislative outcomes designed to meet IPV survivors' needs often fail because they do not target many of the real forces behind IPV.

To consider how existing programs meet the needs of survivors, I turn next to the challenges of reaching IPV survivors and the concept of administrative burdens.

CHALLENGES OF REACHING IPV SURVIVORS

Two important considerations to any program's success concern the access and use of the program by its intended participants, which academics discuss in terms of administrative burdens and take-up rates. Notably, administrative burdens and take-up rates exist for any public service but have a unique function in IPV services. Administrative burdens concern the interaction between an individual and the state when the individual's experience of policy implementation is perceived as onerous (Burden et al., 2012). Take-up rates reflect the actual number of people who enroll and utilize a public service despite any administrative burdens that the individual may have encountered.

When legislators design and pass policies, administrative burdens can arise within a public service intentionally and unintentionally. Thus, these burdens then vary in significance, with "burdens designed into formal policies, programs, or procedures at one extreme and burdens caused by organizational coping mechanisms and informal practices at the other extreme" (Peeters, 2020, p. 572). When these administrative burdens exist within a given public service, they may be understood as having a learning, psychological, or compliance cost to the

individual—each impacting their willingness or ability to utilize government services (Moynihan et al., 2015).

A learning cost may manifest in low accessibility of information about a service. An individual encountering a learning cost must make strides to educate themselves on the functionality of a program or its applicability to their situation, a prevalent cost amongst federal loans and student aid, for example. Psychological costs of administrative burdens are often obtained through the stigmatization of participation, common amongst welfare programs, or a sense of lost autonomy through participation, such as witness protection programs. Compliance costs relate to the energy individuals must expend to navigate convoluted application processes, obtain proof of eligibility, and ensure they are in good standing within a program (Brodkin et al., 2010).

Administrative burdens are typically viewed as a form of barrier to individuals' entry into government programs. Once a program is created, its impact depends on who utilizes its services, in other words, the take-up of the program. Programs or services with heightened administrative burdens tend to have lower take-up rates, a logical consequence of the difficulty in applying to or being approved for them. The inverse also holds true. Programs or services with lowered administrative burdens tend to have higher take-up rates. Herd and colleagues (2013) argue that Medicaid has, for example, had significantly lower take-up rates than Social Security due to the former's confusing application and approval process and the latter's easily navigable one. Thus, increased Medicaid administrative burdens stifle its take-up rate despite it having arguably beneficial and desirable outcomes for participants similar to Social Security. Regardless of the specifics of a program's outcomes, administrative burdens pose a threat to accessibility.

It remains true that even with low administrative burdens, vulnerable groups are more likely to either not apply or drop out of government services. This explains the observed phenomena across the US of “low general participation in programs targeted at socially disadvantaged people” (Bhargava & Manoli, 2015, p. 3492). Survivors of IPV generally fall into this group of individuals who fail to take up programs that are designed to assist them. This is a troubling reality as non-take-up has long-term consequences of decreasing the likelihood of further services being “supplied” by the government and decreasing social mobility in many cases (Barnes & Henly, 2018).

ADDRESS CONFIDENTIALITY PROGRAMS

An important intersection of administrative burdens and low program take-up rates occurs in the realm of IPV programs. Despite widespread public knowledge of some government services, such as the National Domestic Violence Hotline, many lesser-known programs remain. An often overlooked aspect of IPV policies relates to survivor suffrage. Because registering to vote requires that one’s address becomes public record, those who have escaped their abuser and sought refuge in a new and safe location are often valid in their hesitation to participate in civil society (Even, 1995). When survivors refrain from voting due to the fear of being found by an abuser, there is a negative and significant relationship between lowered survivor turnout and rates of IPV victimization. In short, the issue of IPV and civic disengagement perpetuates itself. (Xie et al., 2012). Further, even those survivors who have lived experiences of being found by their former abusers due to voting documented being shamed for their decision to refrain from registering to vote despite wanting to exercise the right to vote (Andrew, 2020).

One category of programs that seeks to support IPV survivors’ right to vote while also protecting their safety is Address Confidentiality Programs (ACPs), which are also called Safe at

Home programs in some states. Since 1991, ACPs have been established in all but 11 states. ACPs seek to provide a relatively simple solution to a complex problem: survivors of IPV are less likely to exercise their right to suffrage than the general public. Beginning with Washington, most states have adopted similar programs, with states like Utah and Massachusetts passing ACP legislation within the past year.

ACP characteristics vary across the 41 states with programs. Still, these programs generally operate by anonymizing survivors' addresses in public records, thereby balancing the requirements of government transparency with the needs of IPV survivors. ACPs typically assign each participant a substitute mail forwarding address, such as a P.O. box, whereby only the ACP is privy to a participant's "true" address and assumes the mediatory role between the government and survivors. In states that have ACPs, potential participants must apply to receive a mail forwarding address.

Depending on state legislation and ACP policies, survivors of domestic violence, stalking, sexual assault, and human or sexual trafficking may be eligible to participate. Participation, at a minimum, allows these individuals to exercise their right to vote with diminished fear of re-victimization. Many states also allow participants in ACPs to register at the DMV, register for schools, purchase property, obtain a marriage license, and navigate other bureaucratic institutions using their fictitious addresses.

ACPs, like many IPV-centered services, fulfill their role at the state level and have no equivalent legislative footing at the federal level. Though their scope and ability to equitably support and empower survivors regardless of their location may be limited by this reality, the relatively recent rise and spread of ACPs is promising. Thus, effective ACPs, though not nearly a comprehensive solution to IPV, serve an important role "not to lessen the occurrence of domestic

violence, but to aid those whose lives are endangered because of it” because “battered women are only as safe as their location” (Yauch, 2008). With limited public knowledge or academic discourse about ACPs, there remains a need for exploration into what factors promote program effectiveness, as unknown or overlooked administrative burdens may be limiting take-up and participation in ACPs.

THEORETICAL FRAMEWORK OF ACP ADMINISTRATIVE BURDENS:

In assessing ACP administrative burdens, I categorize three sequential pillars of programs: eligibility, application, and participation outcomes.

Eligibility criteria limit who can participate in an ACP. While some states allow anyone with a safety need to enroll in their ACP, many states limit who is eligible for ACP participation to those who are a survivor of specific crimes. Minnesota’s ACP, for example, qualifies “anyone with a safety need” as eligible for ACPs, while in Florida, for example, only survivors of DV are eligible. This limiting eligibility may be a product of the reality that ACPs initially emerged solely to focus on survivors of domestic violence. Still, over the years, states have added survivors of other crimes, such as stalking, sexual assault, human trafficking, or harassment, to their eligible participants. Administrative burdens increase in this arena if eligibility is narrowed to include fewer populations of survivors. On the other hand, administrative burdens are decreased when programs expand eligibility.

Another component of this eligibility pillar concerns who, besides the primary applicant, is covered by program participation. That is, who else in the household beyond the immediate survivor may also be listed and protected in the program. In some states, administrative burdens are lowered in this area as anyone living in the household qualifies. In other states, only spouses or dependents are included in ACP coverage. For example, Florida, Indiana, and North Carolina

fall into the latter group. Both of these eligibility-related administrative burdens carry learning costs, meaning potential applicants must research whether their specific situation aligns with the ACP in their state and may ultimately deter certain groups of survivors, like those staying with friends, roommates, or a significant other, from applying to ACPs. Thus, states with more stringent restrictions on who may enroll in their ACP are predicted to have lower enrollment numbers.

The second category of ACP administrative burdens centers on the application process. This includes if and how the program is publicized, what application materials are composed of, and if those materials are readily available. Most unique to ACPs, administrative burdens fluctuate depending on whether a state requires an application assistant to apply. To the first point, an ACP with a well-functioning and easily navigable website or advertisement across government branches may have lower administrative burdens in the form of learning costs. Mississippi, for example, has no dedicated ACP website, only a two-page brochure as a PDF with little information.

For every ACP, there is some form of application process whereby an applicant fills out certain forms and submits them to the ACP office for consideration for admission. The fewer actions an applicant must take before filling out a successful application and getting approved, the lower the administrative burdens. In some states, individuals must show they have interacted with law enforcement (via court orders, reporting of a crime, etc.), provide specific evidence of their victimization such as character references or proof of stay at a shelter, and/or prove they have moved within a specified time frame to the address they are applying for program coverage. Ideally to minimize administrative burdens, applications require only the participant's signature to affirm that they are a victim of any or several qualifying crimes. When applications and the

information needed to complete them are not available online, administrative burdens increase as this lack of publication requires potential applicants to add a step to the process.

Additionally, some states require that applicants work with an application assistant. Application assistants are typically third-party personnel who work with applicants on their applications and must sign off on them before an ACP office considers approving participants. Important to note is that assistance may decrease administrative burdens if not required, as applicants have an easy mechanism for answering their questions, as is the case in Connecticut and New York. But, administrative burdens increase when this help is required, and compliance costs are incurred. West Virginia, for example, requires applicants to apply with an approved assistant yet does not publicize a list of those assistants. Further, some states require this step but do not provide application assistants in every county or only provide them in domestic violence shelters, potentially limiting access to victims of other crimes. Others work with religious organizations, which may be off-putting to applicants that subscribe to different faiths or no religion.

Administrative burdens related to ACP applications—where they are posted, what evidence they require, and who, aside from the applicant, must provide input for it—manifest in compliance costs for applicants. When these processes are overly complex, timely, or require survivors to connect themselves to resources, the practicality and feasibility of enrolling in an ACP may be outweighed by application burdens. Further, those programs that do require application assistants, character references, or legal proof of victimization may create psychological costs for potential applicants. These administrative burdens may implicitly compound the stigmatization around IPV by communicating that survivors alone are incompetent or untrustworthy, isolating potential applicants.

The third pillar where ACP administrative burdens may be clustered occurs during program participation. The duration of program participation, the usability of one's fictitious address, and the accessibility of participant information by law enforcement all affect administrative burdens in this context. Program durations span from two years to five years across states, and the renewal processes vary in complexity. The longer the programs and the easier the renewal process, the lower the administrative burdens and visa versa.

While ACPs were initially devised solely as a mechanism for IPV survivors to register to vote anonymously, they've since been expanded to allow survivors to use their fictitious address on other public records, such as marriage licenses, driver's licenses, school registration forms, and even property titles. The more uses a fictitious address has, the lower administrative burdens are because participation in the program has a broader positive impact. Administrative burdens increase when usability is limited to only voter registration, as is the case in Kentucky and Rhode Island.

Once a participant enrolls in the program, it is crucial that their address remain confidential, as inappropriate disclosure defeats the purpose of ACPs. Further, because rates of IPV perpetration are abnormally high amongst law enforcement officers, disclosure of ACP addresses to law enforcement offices without a legitimate reason is uniquely concerning (Mennicke & Ropes, 2016). In some states, such as Nevada and Idaho, law enforcement officers need only ask to receive this confidential information. Ideally, administrative burdens are decreased when law enforcement must present a court order to obtain any otherwise confidential information so that the information is viewable only by a select number of screened personnel. Otherwise, participation may be obsolete for survivors whose abusers have connections to or work in law enforcement.

Program participation becomes less appealing and more burdensome when outcomes are unpredictable, short-term, or only marginally beneficial. In other words, ACPs that restrict enrollment periods and uses of fictitious addresses while simultaneously broadening the potential number of personnel who can obtain participant data create compliance and learning costs for survivors in the program. These administrative burdens create undue stress for participants who must learn the intricacies of how to use their fictitious addresses, when and how to re-apply, and cope with the uncertainty of not knowing if their true locations are genuinely confidential. In turn, states with poor management of program participation may drive away increased numbers of applicants. Put most simply, states without ACPs or with high administrative burdens within their ACPs passively ask survivors in their territories to choose between their constitutional right to vote and their human right to safety.

HYPOTHESIS

As with any public service, the culmination and intersection of these pillars and subcategories of ACP administrative burdens impact the policy outcome: program enrollment numbers. Because of the inherently confidential nature of these programs, we have little insight into the lived experiences of ACP participants. Though only one metric for evaluating ACP policy effectiveness, participation numbers provide context for the impact of various administrative burdens on program take-up. By evaluating the severity of administrative burdens and comparing it to program enrollment numbers by state, we may better understand what ACP best practices lead to increased engagement between vulnerable populations and state services in the context of IPV.

Hypothesis: When a state's ACP has fewer administrative burdens, it is more likely that its enrollment numbers are closely proportional to the estimated rate of IPV victimization per capita in that state.

RESEARCH DESIGN

To assess the role of administrative burdens in ACPs in the United States, I will compare program enrollment numbers from 2021 with the estimated need of IPV survivors by state that same year using an OLS Regression with one-tailed predictions and controlling for three variables.

Program enrollment numbers were obtained through various routes as some ACP offices publish reports while others provided data via telephone or email communication. Some ACP offices required a formal request for information. A total of five ACP offices did not respond to any of these modes of outreach on behalf of the researcher over a four-month period: Iowa, Nebraska, New Mexico, North Carolina, and Pennsylvania. Texas would only disclose the number of households in the program, not the participants. Further, two states have only very recently enacted ACP legislation, Michigan and Utah, and thus, do not have data available yet. In turn, while 41 states technically have ACPs, only 33 will be evaluated in this study.

Using ordinary least squares (OLS), I estimate the relationship between ACP enrollment numbers from 2021 with the estimated need of IPV survivors by state that same year while accounting for various forms of administrative burdens unique to each state's program and the duration of the program's existence. Thus, the ACP enrollment numbers are the dependent variable in this analysis, while administrative burdens are the independent variable.

Three controls are used in this OLS. First, I account for how long a program has been established in a given state. The year a program began was obtained by referencing legislative

records and ACP websites by state. Controlling for this variable helps account for states with newer programs, which may have low enrollment numbers due to their recent establishment but may also have decreased administrative burdens. Thus, factoring in the number of years that a program has been established safeguards against newer ACPs skewing the results of this OLS.

Next, I control for state population based on data from the United States Census Bureau website (United States Census Bureau, 2021). At the time of writing, the Census Bureau had only published data for state populations from 2020 and not 2021. Thus, this control variable differs in scope from the 2021 ACP enrollment numbers also used in the OLS. However, population data tend not to vary so drastically within one year, typically changing at rates lower than one percent, that generating a valid OLS remains possible (United States Census Bureau, 2022). In fact, a slightly deflated population total from 2020, when compared to the slightly inflated ACP enrollment numbers from 2021, could be more apt to disprove rather than prove my hypothesis.

Last, I control for the estimated need for ACPs per state. This need may be more broadly understood as the rate of IPV victimization per state. However, state-specific survey data and estimations from different institutions vary drastically in scope and wording, yielding data too difficult to compare, thus limiting our ability to analyze variance in states' levels of IPV. Thus a standardized calculation comparing the national rate of IPV victimization for women, 23.2%, with states' population of women over 16 is the ideal way to provide a consistent account of this control (Breiding, 2014). The number of women over 16 in each state in 2020 was also obtained through the United States Census Bureau website (United States Census Bureau, 2023).

In accounting for the dependent variable, ACP enrollment numbers are the only quantitative and accessible data that provides some insight into each state's ACP take-up rates.

While a more fruitful investigation of administrative burdens in this context would evaluate which types of participants are gaining access to the service, i.e., gender, race, location, and form of victimization, that data is either confidential or untracked. Again, because it is impossible to determine how applicants and participants navigate ACPs, evaluating perceived administrative burdens is the most viable way to isolate this independent variable. Estimates of perceived IPV-resource need by state and the duration of a state's ACP are held constant when comparing program enrollment and estimated need.

To decipher a given program's degree of administrative burdens for the independent variable, I rank 8 forms of administrative burdens for each program (see Appendix I). The criteria for ranking and the ability to denote a state's score are based on information obtained from reviewing the state's statute or discussions with the state's ACP office. The categories of perceived administrative burdens are the quantitative representation of the qualitative pillars of ACP administrative burdens explained in the above section. For each state's ACP, a rank between 0-2 was assigned for each category.

For (*eligibility*) breadth of eligibility for participants: a rank of 2 represents that the program is only offered for DV survivors, 1 that survivors of other IPV or violent crimes are eligible, and 0 that anyone with a safety need may apply.

For (*contact*) prevalence of mediums for contacting ACP offices (email, phone numbers, websites): a rank of 1 was given if the program had two or fewer modes of communication and 0 if the program had all three.

For (*published application materials*) whether application materials were published: a program that does not publish applications online was assigned 1, while those that do were assigned 0.

For (*required evidence*) requirements for evidence of victimization within applications: programs that require an applicant to interact with law enforcement before applying (court orders, police reports, etc.) were ranked as 2. ACPs received a 1 in this category if they require some form of corroboration for applicants' victimization, such as an independent character reference. States that require only a participant's signature as evidence of that participant's eligibility received a 0.

For (*application assistants*) role of application assistants in the application process: states that require application assistants received a 2, while those that do not require assistance received a 1. States that offer but do not require assistance with applications were ranked as 0.

For (*duration*) the duration of the program once applicants are accepted: programs with durations of 3 years or less, where someone would need to re-assert their eligibility to vote confidentially every four years, were ranked using a 1. States with an ACP duration of four or more years received a 0.

For (*breadth of use*) breadth of use for an assigned fictitious address: ACPs limiting address use to voting purposes only received a 1, while states allowing participants to use the address for several civil society institutions received a 0.

Last, for (*law enforcement access*) whether law enforcement has to pursue legal channels with cause to obtain participant information: states that allow officers to simply request and receive data received a 1, while states with legal channels and/or notification requirements received a 0.

To assign each state a single variable to represent the degree of administrative burdens within its ACP, the total scores from the 8 rankings were calculated so that the lower the sum, the lower the perceived administrative burdens and vice versa.

FINDINGS

To most effectively interpret the findings of the OLS, it is important first to understand the results of deciphering and ranking perceived ACP administrative burdens by state, especially relative to enrollment numbers anecdotally. The range of sums and areas of frequency for specific administrative burdens reveal common issues among ACPs that may be blockading certain populations from utilizing ACPs.

Generally, there is no partisan predictor that dictates which states have ACPs or which states have thriving ACPs. However, in states with smaller populations and less robust public services in general (e.g. Louisiana, Kentucky, Rhode Island, Mississippi), programs tend to be newer, have fewer participants, and appear to have heightened administrative burdens. On the other hand, states with larger populations and often those states with more robust public services tend to have higher take-up rates (e.g., New York, California, Illinois).

Theoretically, any state with an ACP could have received a summarized score between 0 and 11. A rank of 0 would denote an ACP having no formal administrative burdens, while a score of 11 would signify a state with every administrative burden tracked in this study. No state received a total score of 0 or 11. The extremes in this representation of the independent variable were Rhode Island, with a score of 8, and New York, with a score of 2 (See Appendix II). The median score was 5, with 11 states falling under this ranking.

Arizona was one such state that scored a 5 for perceived administrative burdens. As an example, this number was tabulated because Arizona's ACP permits more than just DV survivors to apply. Still, not all types of IPV or violence are recognized (1). Arizona does not publish its application online (1). The Arizona ACP asks participants for non-legal evidence not specified in its state law (1). Arizona also requires participants to utilize application assistants (2). These

administrative burdens are balanced in part by Arizona's having adequate contact information (0), a longer program duration of five years (0), channels for safe disclosure to law enforcement (0), and multiple uses for fictitious addresses (0).

To put the more extreme rankings in context, it is helpful to consider the enrollment numbers of these states' ACPs (See Appendix III). In 2021, New York's ACP had 3,189 enrollees with a population of just over 29 million and nearly 2 million potential candidates for the program. That same year, Rhode Island's population was roughly one million and there were about 100,000 potential candidates for the state's ACP. In 2021, Rhode Island, a state with high levels of administrative burdens, reported that it had only 16 enrollees.

Yet, there are other states with shockingly low enrollment numbers, which, when contextualized alongside the staggering rate of IPV in the United States, indicate a serious issue with the accessibility of ACPs. Of the 33 state ACPs evaluated, six had fewer than 100 participants, with Kentucky's 15 enrollees being the lowest. 19 states had fewer than 1,000 enrollees. The state with the highest reported number of participants was California, with 5,660 participants. California scored a 3, yet the total state population in 2021 was nearly 40 million, with an estimated 3 million potentially eligible for ACP participation. Clearly, the take-up rates of ACPs are stifled across the board, even in those states with relatively high enrollment numbers.

The administrative burdens that were most common amongst states, both with relatively high and relatively low scores, were burdens of *eligibility*, *published application materials*, and *application assistants*. For *eligibility*, 30 states gained one point because their eligibility was at least partially restricted, meaning that more than just domestic violence survivors are eligible for the ACP, but not all victims of IPV. Two of the states with the highest administrative burdens,

Rhode Island (8) and Florida (6), restrict eligibility to only survivors of domestic violence. Minnesota and Maryland are the only states that did not gain at least one point for this category, as its ACP is available to anyone with a safety need.

Additionally, for *published application materials*, 24 states gained one point for not publishing their ACP application materials online for potential applicants to view, download, or fill out. New York (2), California (3), Idaho (3), Illinois (3), West Virginia (4), and Wisconsin (4), Montana (5), Kentucky (6), Rhode Island (8) are the only states in this study that publish their ACP applications. Of those 9 states that do publish application materials publicly, 7 rank at or below the median for total administrative burdens. Thus, a lack of transparency and limited accessibility of application materials may exclude many states from achieving decreased administration burdens.

For *application assistants*, 25 states gained 2 points as they require application assistants. It is possible that so many states have this specific administrative burden in part due to the fact that early programs did, and thus the policy spread: Washington (1991), New Jersey (1998), and Vermont (1999), for example. Five other states gained one point for not offering application assistants. New York (2), Idaho (3), and Kentucky (6) were the only states that did not gain at least one point in this category, as they offer but do not require application assistants.

Within the initial data, there are several perplexing states: Kentucky (6), Florida (6), and Rhode Island (8), for example. Kentucky and Rhode Island have distinctively limited functionality for ACP addresses, where participants may only use their fictitious address to vote and are not able to have other government communications forwarded via mail. Even more interesting is that states like Kentucky, Florida, and Rhode Island share a common phenomenon:

they perform poorly compared to other states but tend to gain points in categories that other states do not.

In other words, their areas of frequency tend to vary from the group. Where most states gain points for top-down legislative issues like requiring administrative assistants or third-party application evidence, these states gain points for non-legislative issues. For example, these ACPs may be poorly marketed or fail to publish means of communication. In summary, there is at least a handful of states that could drastically decrease their administrative burdens without legislative intervention.

To demonstrate how these administrative burden sums impact take-up rates, the OLS Table uses enrollment as the dependent variable and the independent variables of Administrative Burden, Years Law Active, Estimated Need, and a log of State Population. Based on the OLS Regression using one-tailed predictions, Table 1 shows that for every increase in administrative burden, we can expect enrollment to drop by 267. This is a statistically significant finding with a p-value of 0.071.

Table 1: Determinants of Enrollment Confidentiality Programs

| | Enrollment |
|------------------------|------------------------|
| Administrative Burden | -267.3* (177.1) |
| Years Law Active | 47.84* (37.46) |
| Estimated Need | 0.000381 (0.000576) |
| State Population (log) | 552.5* (432.1) |
| Constant | -6,995 (6,645) |
| Observations | 33 |
| R-squared | 0.433 |

Standard errors in parentheses – OLS Regression – One-tailed testing
 *** p<0.01, ** p<0.05, * p<0.1

This table also indicates that for every year an ACP is active in a given state, the number of people enrolled increases as anticipated and is also statistically significant. Estimated need, on the other hand, was not statistically significant, but it is positive. Thus, the more estimated need there is in a given state for ACPs, the more likely it is that people will be enrolled. Finally, the state population is also positive and significant, meaning that the larger the state's population, the more people will be enrolled.

Figure 1: Determinants of Enrollment Confidentiality Programs

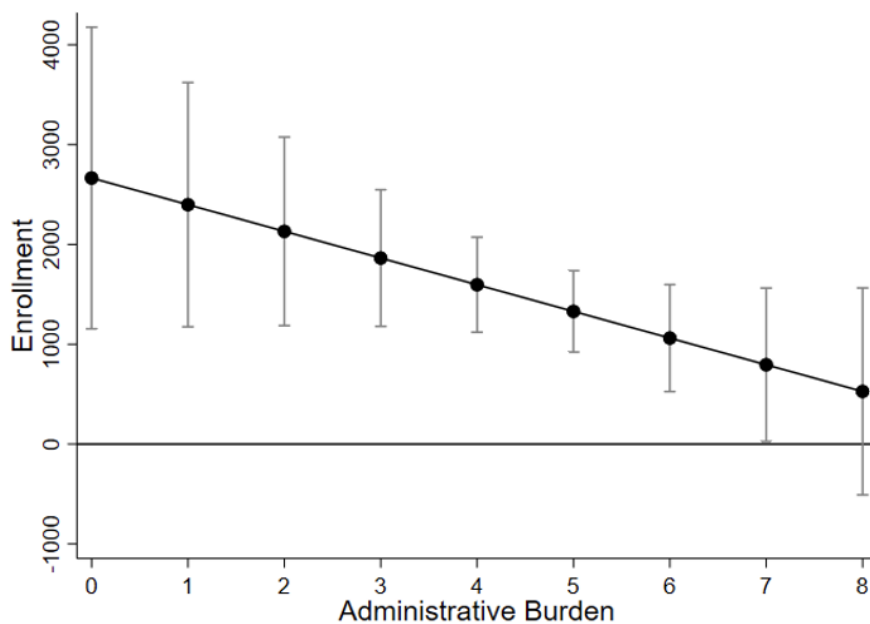


Figure 1 provides a graphical model that demonstrates the negative impact of administrative burdens on the take-up rates of ACPs. When administrative burdens are at zero, we predict that thousands of people would be signed up for state ACPs with controls. For every increase in burdens, the number of people enrolled drops significantly. Taken together, while controlling for estimated need, length of time the law has been active, and state population, the

degree of administrative burdens in ACPs matters and has a negative influence on how many people are enrolled in these programs.

The results of this study support the hypothesis. When a state's ACP has fewer administrative burdens, it is more likely that its enrollment numbers are closely proportional to the estimated rate of IPV victimization per capita in that state. More accurately, it is true that when ACP administrative burdens are lower, the number of enrollees will be higher. This higher number tends to correlate with the number of people estimated to need an ACP based on the metric of women over 16 in each state compared to the national rate of IPV.

PROJECT SIGNIFICANCE

These results confirm the hypothesis but also add weight to assumptions about the hindered effectiveness of ACPs as a resource for IPV survivors. First, of the administrative burdens evaluated, most have relatively simple administrative or legislative solutions. It is arguably not a difficult task for states to make more information available on their websites about contact information and the application. Programs could also be revised to secure data from unfettered law enforcement access or to believe victims of IPV rather than force them to produce evidence of their hardships. These simple changes would, as the results indicate, lead to more survivors gaining access to resources that increase both their safety and quality of life.

In other words, the supposed poor policy outcomes of ACPs triggered by low take-up rates may be reconciled without the need for abolishing the current framework, extensive overhauls, budget increases, or political contention. This fact is enlightening when considering the simultaneous reality, confirmed by the results, that undue administrative burdens have such tangible negative impacts on ACP enrollment regardless of state size, the duration of a program's history, or the estimated need of IPV survivors in a given state.

This work illustrates the importance of considering administrative burdens in public policy programs. ACPs have been designed and replicated in a way that makes their utility limited for the unfortunately high numbers of IPV survivors across the nation, despite those same survivors deserving better governmental support and access to suffrage.

The findings generated from this inquiry into ACP administrative burdens and take-up rates will, at a minimum, provide an additional academically derived example of policies in the United States that may be inefficient and underutilized as a result of heightened barriers to entry and participation. Thus, this paper will likely bolster existing works concerning take-up rates, administrative burdens, voting rights, and IPV. Unlike this new work, these fields tend to focus on the stagnancy of IPV programs and administrative burdens in government programs as isolated variables rather than coexisting, cyclical phenomena. As the results confirm that undue administrative burdens uniquely stall take-up rates for IPV programs, including ACPs, this work adds important nuance to the theoretical complexity of legislating IPV.

By introducing a program-specific framework for calculating and evaluating administrative burdens, this work will elaborate on prior conceptions of the real-world psychological and logistical impact of administrative burdens. Important to note is that this paper serves as the first robust policy analysis of nearly every ACP in the United States. Thus, this work will function as an extension of prior single-state or single-issue ACP inquiries. This research may hopefully serve as a tool not just for future academics exploring ACPs but also for legislators, ACP offices, and advocacy groups seeking to improve existing programs or create new, more effective ones.

BIBLIOGRAPHY

- Andrew, S. (2020, October 27). For abuse victims, registering to vote brings a dangerous tradeoff. CNN.
<https://www.cnn.com/2020/10/27/us/domestic-violence-voting-election-privacy-trnd/index.html>
- Barnes, C. Y., & Henly, J. R. (2018). “They are underpaid and understaffed”: How clients interpret encounters with street-level bureaucrats. *Journal of Public Administration Research and Theory*, 28(2), 165-181.
- Bhargava, S., & Manoli, D. (2015). Psychological frictions and the incomplete take-up of social benefits: Evidence from an IRS field experiment. *American Economic Review*, 105(11), 3489-3529.
- Breiding, M. J. (2014). Prevalence and characteristics of sexual violence, stalking, and intimate partner violence victimization—National Intimate Partner and Sexual Violence Survey, United States, 2011. *Morbidity and mortality weekly report. Surveillance summaries (Washington, DC: 2002)*, 63(8), 1.
- Brodkin, E. Z., & Majmundar, M. (2010). Administrative exclusion: Organizations and the hidden costs of welfare claiming. *Journal of Public Administration Research and Theory*, 20(4), 827-848.
- Burden, B. C., Canon, D. T., Mayer, K. R., & Moynihan, D. P. (2012). The effect of administrative burden on bureaucratic perception of policies: Evidence from election administration. *Public Administration Review*, 72(5), 741-751.
- Centers for Disease Control and Prevention. (2022, October 11). *Fast Facts: Preventing Intimate Partner Violence*. Centers for Disease Control and Prevention.

[https://www.cdc.gov/violenceprevention/intimatepartnerviolence/fastfact.html#:~:text=Injury%2C%20posttraumatic%20stress%20disorder%20\(PTSD,intimate%20partner%20in%20their%20lifetime.](https://www.cdc.gov/violenceprevention/intimatepartnerviolence/fastfact.html#:~:text=Injury%2C%20posttraumatic%20stress%20disorder%20(PTSD,intimate%20partner%20in%20their%20lifetime.)

Even, J. T. (1995). Washington's address confidentiality program: Relocation assistance for victims of domestic violence. *Gonz. L. Rev.*, *31*, 523.

Fay, D. L., & Polischuk, L. (2022). Diffusion of Complex Governance Arrangements: State Approaches to Addressing Intimate Partner Violence. *Public Administration Review*, *82*(3), 420-432.

Goodyear, A., Rodriguez, M., & Glik, D. (2020). The role of firearms in intimate partner violence: policy and research considerations. *Journal of public health policy*, *41*, 185-195.

Gover, A. R., & Moore, A. M. (2021). The 1994 Violence Against Women Act: a historic response to gender violence. *Violence Against Women*, *27*(1), 8-29.

Herd, P., DeLeire, T., Harvey, H., & Moynihan, D. P. (2013). Shifting administrative burden to the state: The case of medicaid take-up. *Public Administration Review*, *73*(s1), S69-S81.

Kaukinen, C. (2020). When stay-at-home orders leave victims unsafe at home: Exploring the risk and consequences of intimate partner violence during the COVID-19 pandemic. *American Journal of Criminal Justice*, *45*, 668-679.

Kelly, U. A. (2011). Theories of intimate partner violence: From blaming the victim to acting against injustice: Intersectionality as an analytic framework. *Advances in Nursing Science*, *34*(3), E29-E51.

Livingston, M. S., Hsiao, V., & Withers, M. (2022). Breaking the cycle of family violence: a critique of family violence interventions. *Trauma, Violence, & Abuse*, 15248380221098049.

- McNeil, A., Hicks, L., Yalcinoz-Ucan, B., & Browne, D. T. (2022). Prevalence & Correlates of Intimate Partner Violence During COVID-19: A Rapid Review. *Journal of Family Violence*, 1-21.
- Mennicke, A. M., & Ropes, K. (2016). Estimating the rate of domestic violence perpetrated by law enforcement officers: A review of methods and estimates. *Aggression and violent behavior*, 31, 157-164.
- Messing, J. T., AbiNader, M., Bent-Goodley, T., & Campbell, J. (2022). Preventing intimate partner homicide: the long road ahead. *Homicide Studies*, 26(1), 91-105.
- Mitchell, C., & Vanya, M. (2009). Explanatory frameworks of intimate partner violence. *Intimate partner violence: A health-based perspective*, 39-52.
- Moynihan, D., Herd, P., & Harvey, H. (2015). Administrative burden: Learning, psychological, and compliance costs in citizen-state interactions. *Journal of Public Administration Research and Theory*, 25(1), 43-69.
- National Coalition Against Domestic Violence. (n.d.) *Statistics*. National Coalition Against Domestic Violence. <https://ncadv.org/statistics>
- Peeters, R. (2020). The political economy of administrative burdens: A theoretical framework for analyzing the organizational origins of administrative burdens. *Administration & Society*, 52(4), 566-592.
- Richie, B. E., Kanuha, V. K., & Martensen, K. M. (2021). Colluding with and resisting the state: Organizing against gender violence in the US. *Feminist Criminology*, 16(3), 247-265.
- Smith, S. G., Basile, K. C., Gilbert, L. K., Merrick, M. T., Patel, N., Walling, M., & Jain, A. (2017). National intimate partner and sexual violence survey (NISVS): 2010-2012 state report.

The National Network to End Domestic Violence. (2022). *Violence Against Women Act*. The National Network to End Domestic Violence: Policy Center.

<https://nnedv.org/content/violence-against-women-act/>

United States Census Bureau (2022). *Growth in U.S. Population Shows Early Indication of Recovery Amid COVID-19 Pandemic*. United States Census Bureau.

<https://www.census.gov/newsroom/press-releases/2022/2022-population-estimates.html>

United States Census Bureau (2023). *State Population by Characteristics: 2020-2022*. United States Census Bureau.

<https://www.census.gov/data/datasets/time-series/demo/popest/2020s-state-detail.html>.

United States Census Bureau (2021). *2020 Population and Housing State Data*. United States Census Bureau.

<https://www.census.gov/library/visualizations/interactive/2020-population-and-housing-state-data.html>.

Xie, M., Heimer, K., & Lauritsen, J. L. (2012). Violence against women in US metropolitan areas: Changes in women's status and risk, 1980–2004. *Criminology*, 50(1), 105-143.

Yauch, J. (2008). When Home is Where the Hurt Is: Minnesota's Address Confidentiality Program Keeps Battered Women Safer. *Dartmouth LJ*, 6, 217.

Appendix I: Pivot Tables for Administrative Burdens

(A) breadth of eligibility for participants:

| | Frequency | % |
|--|-----------|--------|
| 2: only DV survivors are eligible | 2 | 6.06% |
| 1: more than just DV survivor eligible, not all victims of IPV | 30 | 90.90% |
| 0: anyone eligible | 1 | 3.03% |
| Total | 33 | |

(B) prevalence of mediums for contacting ACP offices (email, phone numbers, websites):

| | Frequency | % |
|--|-----------|--------|
| 1: two or fewer ways of contacting office (website, email, phone) | 9 | 27.27% |
| 0: 3 or more easy to find means of reaching office (website, email, phone) | 24 | 72.72% |
| Total | 33 | |

(C) whether application materials are published:

| | Frequency | % |
|----------------------------------|-----------|--------|
| 1: application not posted online | 24 | 72.72% |
| 0: application posted online | 9 | 27.27% |
| Total | 33 | |

(D) requirements for evidence of victimization within applications:

| | Frequency | % |
|--|-----------|--------|
| 2: requires action with law enforcement/courts | 6 | 18.18% |
| 1: requires specific non-legal evidence | 9 | 27.27% |
| 0: requires just affirmation | 18 | 54.54% |
| Total | 33 | |

(E) role of application assistants in the application process:

| | Frequency | % |
|--|-----------|--------|
| 2: application assistant required | 25 | 75.75% |
| 1: application assistant not required | 5 | 15.15% |
| 0: application assistance not required but available | 3 | 9.09% |
| Total | 33 | |

(F) the duration of the program once applicants are accepted:

| | Frequency | % |
|-------------------------|-----------|--------|
| 1: three or fewer years | 3 | 9.09% |
| 0: four or more years | 30 | 90.90% |
| Total | 33 | |

(G) breadth of use for an assigned fictitious address:

| | Frequency | % |
|---------------------|-----------|--------|
| 1: just voting | 2 | 6.06% |
| 0: more than voting | 31 | 93.93% |
| Total | 33 | |

(H) whether law enforcement has to pursue legal channels with cause to obtain participant information:

| | Frequency | % |
|--|-----------|--------|
| 1: accessible to law enforcement with no legal oversight | 15 | 45.45% |
| 0: accessible to law enforcement with legal cause | 18 | 54.54% |
| Total | 33 | |

Appendix II: Sum of Administrative Burdens by State

| State | Sum of Administrative Burdens “a-h” (range 0-11) |
|---------------|---|
| New York | 2 |
| California | 3 |
| Idaho | 3 |
| Illinois | 3 |
| Minnesota | 3 |
| Maine | 4 |
| Ohio | 4 |
| Oklahoma | 4 |
| Virginia | 4 |
| Washington | 4 |
| West Virginia | 4 |
| Wisconsin | 4 |
| Arizona | 5 |
| Colorado | 5 |
| Connecticut | 5 |
| Indiana | 5 |
| Kansas | 5 |
| Louisiana | 5 |
| Missouri | 5 |
| Montana | 5 |
| New Hampshire | 5 |
| Oregon | 5 |
| Tennessee | 5 |
| Florida | 6 |
| Kentucky | 6 |
| Maryland | 6 |
| New Jersey | 6 |
| Vermont | 6 |
| Delaware | 7 |
| Massachusetts | 7 |
| Mississippi | 7 |
| Nevada | 7 |
| Rhode Island | 8 |

Appendix III: 2021 ACP Enrollment by State

| State | 2021 ACP Enrollment |
|---------------|----------------------------|
| Kentucky | 15 |
| Rhode Island | 16 |
| Mississippi | 23 |
| Delaware | 38 |
| Louisiana | 44 |
| West Virginia | 92 |
| Idaho | 102 |
| Maine | 120 |
| New Hampshire | 131 |
| Montana | 136 |
| Kansas | 200 |
| Vermont | 213 |
| Massachusetts | 421 |
| Illinois | 470 |
| Tennessee | 500 |
| Indiana | 511 |
| Virginia | 520 |
| Connecticut | 550 |
| Florida | 919 |
| Oregon | 1069 |
| New Jersey | 1114 |
| Maryland | 1490 |
| Wisconsin | 1522 |
| Nevada | 1546 |
| Ohio | 1,743 |
| Oklahoma | 1978 |
| Arizona | 2072 |
| Missouri | 2975 |
| Minnesota | 3000 |
| New York | 3189 |
| Colorado | 4500 |
| Washington | 5180 |
| California | 5,660 |