

# Strengthening Partnerships and Service Integration in an Enhanced Local Response to Family Violence



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## Research at a Glance

The Northern Crisis Advocacy Response Service (NCARS) was established to provide a 24 hour face-to-face crisis response to women experiencing family violence. NCARS developed in the context of statewide reform in Victoria and the implementation of the Integrated Family Violence System (IFVS). It provides an innovative example of successful collaboration across agencies that builds on and extends the local and sub-regional IFVS' service delivery mechanisms. Its particular mode of intervention has provided better engagement with women at the time of crisis and enhanced communication between services (particularly police, family violence workers located in the participating agencies and the statewide Women's Domestic Violence Crisis Service). It has also involved access to the NCARS Unit, a comfortable space in which women can explore their options for dealing with the effects of family violence, make decisions with the support of the on-call NCARS worker and which provides a safe, 'time out' place for women's children.

Analysis of the 168 cases that were referred to NCARS in the 6 month evaluation period in 2008 highlighted issues of risk assessment and risk management. In particular, data from the Common Risk Assessment Framework undertaken by WDVCS on CARS clients and perpetrators indicates that nearly half of the 168 clients were assessed as living in circumstances of extreme danger where 7 or more perpetrator risk factors were present. Another issue of concern is that six in ten of the 168 women had children in their care, however, there was little evidence of referral to children's services. This raises a number of questions for further exploration, which are noted at the end of this summary.

## Research Objectives

NCARS was developed by a network of service providers in the Northern region to enhance the integration of the family violence service system and to provide better counselling, information, support and advocacy services. Referred to as the NCARS Partnership (in the Service Protocol and Memorandum of Understanding), organisations participating in the pilot include: Victoria Police, the Women's Domestic Violence Crisis Service (WDVCS), and the Northern Integrated Family Violence Service System incorporating:

- Women's Health in the North (WHIN);
- Berry Street, Northern Family & Domestic Violence Service (NFDVS);
- Georgina Collective (incorporating Martina and Georgina Women's Refuges); and
- Mary Anderson Family Violence Service, Salvation Army / Crossroads Youth and Family Services Network (MAFVS).

The aims of the research were, firstly, to document changes in multi-agency working relationships in an integrated crisis response service and gain service providers evaluation of this change. Secondly, the research aimed to identify some of the outcomes for women as a result of the service reorientation. The researchers involved were Marion Frere, Stuart Ross, Lucy Healey, Cathy Humphreys and Kristin Diemer.

## **Methodology**

A number of sources of information were used to inform this research. These included an examination of relevant program documents, qualitative data collected from semi-structured interviews involving participants from all participating agencies and quantitative data collected through the NCARS Intake and Referral Form. This summary report on lessons for multi-agency working draws primarily from document analysis and qualitative interview data.

## **Findings in detail on the NCARS Model**

- NCARS developed in the context of statewide reform in Victoria and the implementation of the Integrated Family Violence System (IFVS). It provides an innovative example of collaboration across agencies that builds on and extends the local and sub-regional IFVS service delivery mechanisms.
- The strengths of the model are:
  - Better engagement with women at time of crisis
  - Access to the NCARS Unit provides a comfortable space for decision-making (for women) and 'time out' (for children)
  - More flexibility of response to women
  - Immediate response satisfies all members of the NCARS Partnership
  - Increased awareness of services available by members of the NCARS Partnership
  - Enhanced communication and cooperation
  - Better integration of services involved in crisis response
  - Sharing of resources benefits agencies (especially small ones)
  - Improved contact with police
  - More follow through, including court action
  - Improved service for culturally and linguistically diverse (CALD) women.

## **Resources**

- It is apparent that changes will need to be made to the resources available to support and sustain NCARS as it presently operates and certainly if it is to expand its reach. All the costs of running NCARS are met from within the existing budgets of participating agencies. This situation was unanimously described as unsustainable by interviewees, particularly as participating agencies are not equally affected.
- Neither VicPol nor WDVCS are negatively impacted by their current participation in NCARS as far as allocating resources. The other participating agencies, regardless of size, face significant challenges as far as harnessing the human, financial, material/infrastructural resources to run NCARS.

## **Attitudinal and cultural shifts**

- All interviewees commented favourably on the attitudinal and cultural shifts that have occurred in thinking about – and developing – an integrated crisis response, at least as far as this has occurred at the local and sub-regional levels.
- The development of the Service Protocol and Memorandum of Understanding and the implementation of a shared vision for crisis response in the north has overcome old barriers and taken existing and new relationships between agencies in the region in new and positive directions.
- New, cooperative relationships have developed between the family violence services (WDVCS and NCARS agencies) and police. VicPol Family Violence Advisors and Liaison Officers continue to inform and educate members about NCARS and encourage NCARS workers to introduce themselves when attending women at police stations.

### **Systems**

- Developing adequate systems that will sustain NCARS involves the attainment and management of resources that will build and sustain alliances and networks both horizontally and vertically.
- To date, the most concerted effort in building systems has related to cross-agency partnerships and the development of protocols and MoUs for NCARS operations for the current participating agencies at the local level. The regular NCARS forums and fortnightly pilot review meetings have been instrumental in enabling staff from the participating agencies to meet face-to-face, problem-solve (through discussion of Exception Reports and NCARS Feedback/Evaluation Forms) <sup>1</sup> and resolve misunderstandings and miscommunication in operational matters. Also critical has been a sustained focus on data collection and effective information sharing. This has led to the development of a significant body of evidence on referral pathways and outcomes. Nonetheless, significant improvements in data collection would be beneficial, including improved worker compliance in data entry and improved monitoring of usage of the NCARS Unit.
- Further 'horizontal' relationships may need to be developed that can provide secondary consultation and further pathways into the NCARS system. Priority areas include Child FIRST, disability, Indigenous and CALD services, health services, courts and Men's Behaviour Change Programs. Strengthening 'vertical' relationships and promoting the learnings from the NCARS pilot would also be highly desirable. Ideal forums in which to do this would include the North and West Metropolitan Region Integrated Family Violence Service Steering Committee, the Family Violence Statewide Advisory Committee, the Family Violence Interdepartmental Committee and the Family Violence Round Table.
- Issues of risk assessment and risk management have been highlighted (see additional research summary)

### **Findings in detail on NCARS referrals and outcomes**

- A total of 168 cases were analysed for the 6 month evaluation period.

#### **Referrals**

- Six in ten referrals were made by Police, and a further one-quarter were self-referrals.
- The victims who were referred to CARS ranged in age from 11 years to 81 years, with a mean age of 33.<sup>2</sup> Just over half (91 cases or 54%) gave their country of birth as Australia, with the remainder from 28 different countries. In about two-thirds of cases the language spoken at home was English, but in 26 cases (15% of referrals) an interpreter was required to assist in the referral and assessment process. Five cases identified themselves as Aboriginal or Torres Strait Islander.
- Six in ten of the women had children in their care. The number of children ranged from one to nine, with a mean of 2.2 children. There were 23 cases (14%) where the victim was either pregnant or had recently given birth.

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<sup>1</sup> Where a breach of security or of protocol occurs, the on-call NCARS worker is responsible for completing a pro forma incident report and providing a copy of it to their team leader as soon as possible. These incident reports were initially called 'exception reports'. As the pilot developed, an additional pro forma was developed, identified as the NCARS Feedback/Evaluation form.

<sup>2</sup> Victim age was recorded in 68 cases out of the total number of 168 cases.

- Around four in ten of the women referred had previously been in contact with a family violence service. Twenty six had prior contact with police, 25 with WDVCS and 19 with a regional family violence service.

### **Perpetrators**

- In over 60% of cases the perpetrator was identified as the woman's partner (104 referrals) with a further one-quarter where the perpetrator was an ex-partner. In 17% of cases a weapon had been used in the most recent event, and around one-quarter of perpetrators had access to weapons.

### **Risk factors**

- Data from the Common Risk Assessment Framework undertaken by WDVCS on CARS clients and perpetrators indicates that nearly half of the 168 clients were assessed as living in circumstances of extreme danger given that 7 or more perpetrator risk factors were present. In the UK, the presence of 6 factors would initiate an intense multi-agency, serious case review (or MARACS).<sup>3</sup>

### **Intervention Orders**

- In thirty percent of referrals (50 cases) an outcome relating to an Intervention Order was recorded. Of these, two-thirds were cases where an Intervention Order was already in place. There were also 22 women who received a referral to legal aid or court support, usually in conjunction with an Intervention Order. We were unable to ascertain from the available data whether these Intervention Orders related to new or existing ones.
- We cannot draw on pre-CARS 'hard data' with which to compare these figures, however, police and CARS workers' perceptions were that the information provided by CARS workers to women led to a greater preparedness on the women's part to follow through in seeking an Intervention Order.

### **Accommodation**

- Of the 168 cases referred to CARS:
  - 123 women returned home (including 45 where no further action was recorded)
  - 26 stayed with family or friends
  - 16 were referred to a housing service
  - 19 were referred to a crisis accommodation service and a further five who were referred directly to a refuge.<sup>4</sup>
- The likelihood that a woman would be referred to an accommodation service was related to whether there was an existing Intervention Orders, and especially if the Order included a sole occupancy condition.<sup>5</sup> Half of the women who returned home with no further action had an existing Intervention Order (IO), although there were four and five women respectively who had an IO but required referral to a refuge or crisis accommodation. There were no referrals to refuges or other housing services where women already had an Intervention Order with a sole occupancy condition and only one referral to crisis accommodation.

### **Youth and children**

- Despite the high proportion of women with children using CARS, there was little evidence of referral to children's services. There was one recorded referral to youth or children's services, and no Child FIRST referrals.

<sup>3</sup> See Robinson (2003, 2004).

<sup>4</sup> Numbers add up to more than the total number of women because there was more than one outcome for some women.

<sup>5</sup> A sole occupancy order means that the offender is restricted from attendance at the victim's home. This condition allows women to return to their homes with the assistance of CARS changing locks on the doors and ensuring a level of security appropriate in the circumstances.

## **Publications and Knowledge Sharing**

Frere, M, Ross, S. Healey, L. Humphreys, C. and Diemer, K, *Northern Crisis Advocacy and Response Service Evaluation* October 2008.

Articles under preparation:

- National Clearing House on Domestic Violence Newsletter
- DVIRC Newsletter
- Strengthening partnerships and service integration in An enhanced local response to family violence: Northern Crisis Advocacy Response Service, *Australian Journal of Public Administration*

## **Implications for Policy, Planning and Research**

- Ensuring that the service is adequately resourced, including through the provision of Government funding, for the purposes of: investment in new technology for mobile NCARS workers; salary support; NCARS Unit support; and brokerage funds.
- Expanding NCARS services by building cooperative relationships, opportunities for secondary consultation and further pathways into the NCARS system. This will involve facilitating attitudinal shifts and developing systems within and between services, such as Child FIRST, disability services, health services, courts, Men's Behaviour Change Programs, Indigenous services and CALD services.
- Strengthening data collection processes, in particular: usage of the NCARS Unit (including a review in six months' time); and the identification of women and children with disability (including service implications).
- Improving 'vertical' relationships throughout the family violence integrated response system; for example, with the North and West Metropolitan Region Integrated Family Violence Service Steering Committee, the Family Violence Statewide Advisory Committee, the Family Violence Interdepartmental Committee, and the Family Violence Round Table.
- Informing research development.

## **Further questions raised by research**

- What is the level of unmet demand and how can it be met?
- How can the service respond better to the needs of children?
- How can the service respond better to women from key population groups?
- What are the best ways to progress improvements in collaboration with services for men who use violence?
- In what ways could the service strengthen its linkage with health services?
- How transferable is the model?
- What are there implications for the development of risk assessment and risk management?