CHURCHILL FELLOWSHIP REPORT

How multi-agency responses to family/domestic violence can generate positive systemic change

Executive Summary

Catherine Plunkett 2017
About the Author

I am the Manager of the Practice Development Unit at Domestic Violence Victoria (DV Vic), the peak body family violence services for women and children in Victoria. The Practice Development Unit works to strengthen and extend specialist family violence practice, as well as responses to family violence in the broader service system.

The Unit coordinates the state-wide operation of the Risk Assessment and Management Panels (RAMPS) for high risk family violence, the Personal Safety Initiative that enables women and their children to remain in their homes through the use of technology and justice system responses. It also coordinates the Family Violence Advisor Capacity Building Program that seeks to build the capacity of the mental health and alcohol and other drugs sectors to respond to family violence, and to develop collaborative case models between those sectors and the family violence services sector.

In 2016 I gave evidence to the Royal Commission into Family Violence in Victoria and today I represent DV Vic on a number of advisory committees to oversee the implementation of its recommendations. The Practice Development Unit is working with the family violence service sector in developing survivor-centred practice frameworks to apply to a reformed family violence response system.

Catherine Plunkett 2017

Contents

About the Author
Introduction
Methodology
Key Findings
Recommendations
Implementation
Introduction

In 2016, the Royal Commission into Family Violence in Victoria made 227 recommendations for reform of the response to family violence. Many of these recommendations concerned the development of greater collaboration between agencies and service sectors, and the establishment of multi-agency and multi-disciplinary responses and programs. This is consistent with a trend in Australia and internationally over the last twenty years towards collaborative and inter-agency responses to family/domestic violence.

Such programs are commonly referred to as community coordinated, integrated, collaborative, interagency, multi-agency and inter-disciplinary responses to family/domestic violence. There is not a consistently applied definition of each of these terms and they are often used interchangeably to describe programs with a range of different features.

Multi-agency and multi-disciplinary programs hold information about the experience of individuals traversing a number of intersecting services that can shine a light on institutional practices and other systemic issues that affect victims/survivors beyond the reach of the program.

Early examples of multi-agency programs (e.g. Community Coordinated Responses) were designed to use this information to review and improve whole system responses to family/domestic violence. The trend in inter-agency work for many years now has been away from systems monitoring and analysis, to models that are concerned with case processing and streamlining the multi-agency response. Similarly, the influence of family/domestic violence services on the operation and objectives of multi-agency programs has also gradually diminished over recent years, as governments and statutory agencies establish and lead many of them.

These changes, and the lack of robust strategic governance structures to enable the reporting, analysis and addressing of systemic issues at different levels of government, have resulted in an explosion in the number of multi-agency and multi-disciplinary programs but far fewer programs enabled to capitalize on their multi-dimensional perspective to inform continuous systemic improvement.

This report is an exploration of what is required to activate the under-utilised potential of multi-agency programs to improve responses, not just to their service users, but to all victims/survivors.

Methodology

I travelled to the USA and the UK to visit a selection of different types of multi-agency and multi-disciplinary programs, encompassing a range of approaches and partnerships. As well as well-known and large criminal justice focused programs, I included examples of practitioners from different agencies and with different roles being located together to provide a service response to family/domestic violence, and health and housing programs that have established a family/domestic violence-specific response thereby creating a multidisciplinary team.

I made contact with multi-agency program managers and auspice agencies, and representatives of partner organisations including community services, police, District Attorneys and prosecutors, government officials and staff, policy advisors, national non-profit organisations, and coalition or peak body organisations.

For the purposes of simplicity in this report, I have brought the programs I considered into three broad groupings:

- Multi-agency programs: these typically include partners from the criminal justice system as well community agencies.
- Multi-disciplinary capacity building programs: these programs involve partnerships between family/domestic violence services and organisations whose core business is not family/domestic violence (universal services) or the establishment of specialist family/domestic violence roles and responses within these universal services. These include programs based in housing and health services, services for children and other universal services.
- Coordinating systems entities: these are programs or multi-agency coordinating structures that sit above the level of service delivery, whose role is to provide strategic oversight and, in some cases, to facilitate monitoring and improvement of the system response to family/domestic violence. Most coordinating entities do not directly deliver services however they are comprised of representatives of key government and non-government service delivery organisations
Key Findings

- The potential benefits of multi-agency working to collect comprehensive and multi-faceted information and apply it to system enhancement are largely overlooked today. This means that programs with the most information about the system are not positioned to generate continuous improvement of the system.

- There are a small number of programs that have an explicit goal of identifying systemic issues to generate system improvement. These programs are led or largely influenced by family/domestic violence services or have local area or regional coordinating and governance structures that are strategically linked to multi-agency programs and designed to generate systems improvements.

- Few multi-agency or multi-disciplinary programs have mechanisms or processes for system monitoring and continuous system improvement. Of the programs I identified through this research, this was a feature only of programs which are led by family/domestic violence agencies, or where family/domestic violence services have a recognised structural advocacy role and the program is designed and governed to enable this role.

Multi-agency programs

- The principal purposes of multi-agency approaches to family/domestic violence today are generally understood to be:
  - the streamlining of inter-agency processes,
  - information sharing that can provide a more comprehensive assessment of risk and need,
  - making multiple services more accessible for victims/survivors, and
  - making perpetrators accountable for their behaviour.

- A strength of government-led programs (i.e. local, state or federal government or statutory agencies such as police, courts, prosecutions / Office of the District Attorney) is that they have the authority and influence to potentially generate structural changes that improve system responses beyond the scope of the program. However, most do not have formal processes for identifying and analysing issues discovered at the direct service delivery level in a systematic way. If there is not an inter-disciplinary process for the exploration of issues that involve the partner agencies, government loses the intrinsic advantage of a multi-dimensional perspective and there is less incentive for program partners to identify and raise issues.

- If the governance and funding structure do not authorise an intersectional gendered framework the program and system response will not meet the needs of victims/survivors. If it is not embedded in a program's design, objectives, practice approaches and partnership arrangements, an intersectional gendered approach may only prevail due to the efforts of individuals and thus be vulnerable to change. Many successful programs have developed through the work and relationships built by individuals in both community and statutory agencies, however the programs that have sustained success in being responsive to the needs of victims/survivors and generating improvements to the broader system are ones that have embedded policies and processes supporting this approach.

- Funding arrangements and approaches to service planning can lead to a domination of service responses from large providers, including multi-agency programs. This can lead to a gradual homogenization of the service system and a suppression of the influence of advocacy organisations.

- The individual and structural advocacy functions of family/domestic violence services should be recognised in the structure and processes of the program to ensure that it is survivor-centered and enabled to contribute to continuous improvement of the systemic response.

Multi-disciplinary capacity building programs

- Because most capacity building programs are concerned with one sector's response to family/domestic violence, the mechanisms for systemic change sit largely with government oversight of the sector and with the organisations involved. Individual family/domestic violence practitioners in workplaces where family/domestic violence is not the core business will increase the capacity of some staff to some extent to respond to family/domestic violence. But, as their focus is not on the broader structural and cultural issues within the organization, they generally won't be able to effect significant practice or cultural change.

- The initial capture of information about systemic issues and possible enhancements is largely dependent on the capacity of individuals in roles with responsibility for the family/domestic violence response.

- There is a risk that the advocate/practitioner specialising family/domestic violence practice framework or approach will be diluted over time due to the overwhelming influence of the host organisation's approach to practice. The family/domestic violence practitioner must retain their professional identity and practice expertise in order to build capacity for a family/domestic violence response in the other service sector.

The role of family/domestic violence services

- Family/domestic violence services are the only agencies whose objectives are concerned solely with meeting the specific needs of, and seeking outcomes for, victims/survivors of family/domestic violence. Their role is unique and central to the effectiveness of any collaborative response.

- There is abundant evidence to show that best practice in family/domestic violence services is an intersectional gendered framework with a trauma informed practice approach and victim/survivor-defined advocacy. This approach to practice can create tensions with program partners from other sectors or disciplines.

- The role of family/domestic violence services includes individual and structural advocacy to improve system responses and outcomes for victims/survivors. This role needs to be recognised in the structure and processes of multi-agency programs in order for the programs to be survivor-centred and enabled to contribute to continuous improvement of the systemic response.

- In order to operate effectively in multi-agency and multi-disciplinary programs, family/domestic violence services must be self-reflexive, innovative and...
accountable for their practice, and have the capacity and capability for effective structural advocacy including technical skills and knowledge.

Recommendations

Multi-agency programs

- Make ongoing systemic review and continuous improvement of the system a goal of the multi-agency program in recognition of its capacity to produce multi-dimensional information about the experience of victims/survivors across the systems.
- Establish structures, mechanisms and processes to identify systemic issues and analyse issues from a multi-agency perspective, address issues, and elevate issues when necessary.
- Establish strategic relationships between program partners that enable advocacy and influence beyond the program and to the broader organisational, institutional or sector responses that dictate local practice.
- Ensure that structures and processes for program partner forums are designed with adequate representation of marginalised communities to ensure their full participation, and to address power imbalances between partners.
- Ensure that the structures and processes authorise and support all program partners to participate fully in identifying issues and examining them in a multi-agency forum.
- Embed an intersectional gendered approach to service delivery to victims/survivors, and recognise the role of advocates for victims/survivors, through the program’s design, partnership arrangements and practice approaches.

Multi-disciplinary capacity building programs

(To achieve sustainable capacity building in an organisation or sector):

- Ensure that key individuals and entities at a senior leadership level of the host organisation or sector actively support and authorise the work.
- Ensure that capacity building initiatives are operationally embedded through the development of policies and processes to support new practice.
- Provide structural support for individuals in a family/domestic violence role in a mainstream organisation to ensure that they retain their professional identity and expertise in order to build capacity for a family/domestic violence response in the other service sector.
- Provide external coordination of multiple similar capacity building roles in like organisations in order to generate improvements to the response. The coordination role has three functions:
  1. To capture themes, trends and issues and seek to explore and address them at a local or regional level within the host sector, and in consultation with other key partners in the system response.
  2. To facilitate the sector’s meaningful engagement in a system-wide response including through strategic governance entities.
  3. To ensure that a specialist family/domestic violence practice approach is maintained by the advocate/practitioner by facilitating reflective practice, practice development, analysis and problem solving.

Coordination and strategic governance

- A comprehensive coordination and governance structure is required to provide strategic oversight and to enable continuous systemic improvement. This will involve multi-agency representation not only at the program level, but also at a local area, regional and national (government) level with effective reporting processes that allow multi-agency programs to elevate systemic issues that cannot be resolved locally.
- Authorise a specific role or coordination function at a local area or regional level to provide real-time feedback and build a more robust system. These roles ensure that operational responses are aligned with shared strategic goals across the response system, and collate and elevate systemic issues as required on behalf of programs and partnerships.
- Governance and partnership structures and arrangements can only be truly representative if they reflect an understanding of structural inequality. Ensure that advocacy organisations are adequately represented to prevent them from being marginalised in coordination or decision-making groups.

Funding and Governance

- Recognise and authorise individual and structural advocacy as essential functions of a family/domestic violence service.

Family/Domestic Violence Services

- Advocate for survivor centered approaches to family/domestic violence.
- Advocate for continuous improvement of the systemic response.
- Ensure that our services, programs and workforce are enabled to deliver survivor centered advocacy services and to actively contribute to structural advocacy work.
- Foster individual and structural advocacy skills in our workforce including the capability to track and monitor systemic responses from the perspective of victims/survivors.
- Ensure that our services work constructively, are self-reflexive, innovative and accountable, and prepared to review and revise our practice and processes while maintaining our specialist practice frameworks.
- Develop partnerships with tertiary institutions to undertake research and produce evidence to guide practice and program development, and to inform structural advocacy positions.
- Consider developing consortiums with other program providers to ensure diversity of service types and access to services for all victims/survivors, particularly those from marginalised communities.
Mechanisms for identifying systemic and structural issues through multi-agency and multi-disciplinary programs to generate continuous improvement (partner agencies should be consulted in designing these processes):

- a performance framework for the program including the wider governance and coordination structures that enable issues to be elevated beyond the program and its partners;
- real time intelligence from family/domestic violence service partners;
- service user intelligence/‘negative capture’ (e.g. surveys and interviews conducted with survivors by family/domestic violence services multi-agency, and other programs);
- data audit and analysis processes that are designed to uncover systemic issues that impact on the safety and well-being of all survivors, and not just service users; and
- formal mechanisms for reflection and feedback by program partners, including structured questioning, documenting issues, plans to progress them and outcomes reporting. A multi-disciplinary analysis of issues is essential to gaining a full understanding of their nature and impact.

**Dissemination / Implementation**

Victoria is undertaking unprecedented policy and practice reform following the Victorian Government’s commitment to implementing the recommendations of the Royal Commission into Family Violence (2016). Every aspect of the response to family violence is subject to reform, creating tremendous opportunities for systemic enhancement.

This report will be disseminated to the Victorian government, peak bodies throughout Australia for victims/survivors of family violence and for services for perpetrators of family violence.

Within Victoria, it will be distributed to partner agencies and their peak bodies including statutory agencies, the membership of Domestic Violence Victoria, and the Chairs of the Family Violence Regional Integration Committees. I hope it will be useful in informing the development of new programs, consideration of coordination and governance structures, and of the role of specialist family violence services in Victoria and throughout Australia.

I will also deliver presentations outlining my findings and generating discussion about the implications for Victoria to meetings of the members of Domestic Violence Victoria and the Family Violence Regional Integration Coordinators.

Family violence services in Victoria must take a lead role in the development and operation of the reformed system. Increased collaboration between agencies, the establishment of new multi-agency programs and new information sharing provisions will all dramatically impact on practice within family violence services and in our work with other agencies and sectors.

The Practice Development Unit at Domestic Violence Victoria, along with the policy team, is working now with the family violence service sector to ensure that the reforms meet the needs of victims/survivors of family violence. These findings will inform all aspects of that work, including the review of practice approaches and guidelines.

The work that Domestic Violence is undertaking with the specialist family violence sector in relation to their role in multi-agency responses is particularly relevant in relation to these findings. This involves building the capacity and confidence of the specialist family violence workforce to work productively with partner agencies and non-specialist services to improve system responses, and to use their role as advocates to ensure that the system is always responsive to the needs of victims/survivors.

If you would like more information, please contact Catherine Plunkett catherineplunkett@dvvic.org.au
or go to the DV Vic website www.dvvic.org.au