

Evaluation of the Integrated Domestic and Family Violence Services program

Snapshot

- Domestic and family violence is a major health, welfare and economic issue in Australia. The Integrated Domestic and Family Violence Services (IDFVS) program is a multi-agency program that provides victim-survivors and their children with ongoing, tailored and practical wrap-around supports to help them leave and recover from violence and abuse and improve their outcomes.
- From October 2016 to November 2018, an evaluation was undertaken of IDFVS, using mixed methods including analysis of administrative data from June 2015 – July 2017. The aim was to understand whether the program is working, who the program is working for, the cost of the program and to understand the strengths and limitations of the program.
- The evaluation suggests that the IDFVS program delivers benefits for clients experiencing domestic and family violence (DFV) including:
 - filling a major gap in the service system by providing services to women still living with violence, building capacity for safety over time
 - substantial improvements in client wellbeing and high levels of client satisfaction
 - flexible service delivery driven by local context working to meet client need.
- The report includes recommendations for program improvement related to systems and data, building workforce capacity and strengthening community education activities.

Introduction

Domestic and family violence (DFV) is a major health, welfare and economic issue in Australia. Whilst DFV can affect anyone in our community, women and children are the most affected.¹ The 2016 Personal Safety Survey found that 1 in 4 women had experienced violence by an intimate partner and women were nearly three times more likely to have experienced partner violence than men.² Aboriginal women, women with a disability, women who have left their partners and women who have experienced socio-economic disadvantage are at the greatest risk.¹ The costs of DFV to women, their children, our community and the economy are significant. DFV is a leading cause of homelessness for women and children¹ and the burden of disease due to DFV for women aged 25-44 is greater than any other risk factor.³ In 2015-16, the financial cost of DFV was estimated at \$22 billion.⁴

The IDFVS program is a multi-agency response to prevent the escalation of DFV among high-risk target groups and in targeted communities. It is a collaboration between the NSW Department of Communities and Justice, NSW Police and non-government support agencies. IDFVS provides victim-survivors and children with emotional and practical support to leave and recover from violence and abuse. Further, it empowers them to keep themselves and their families safe.

This Evidence to Action Note outlines key findings from an evaluation of the IDFVS, undertaken by researchers from the University of New South Wales, Sydney (UNSW). The purpose of the evaluation, which was conducted over a period of two years, was to understand whether the IDFVS program is working; who the program is working for; the cost of the program; and to understand the strengths and limitations of the service model. The data discussed in this note is reported in detail in the [final evaluation report](#).

Why is coordinated support important?

Historically, service provision to address DFV has been crisis driven and ad hoc with agencies and service providers working independently to provide services such as crisis housing, counselling and criminal justice responses. In contrast, wrap-around service delivery has been increasingly adopted as a preferred service delivery model in mental health services, child welfare and disability services.

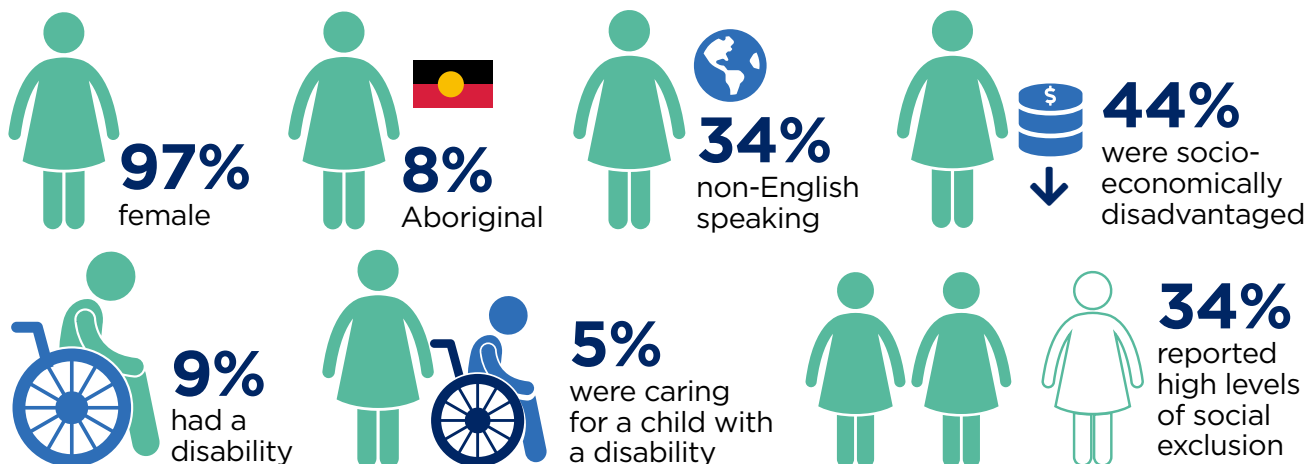
Wrap-around support places the client at the centre of service decision making, is co-ordinated, holistic and proactive. The 2015 Senate Inquiry report into domestic violence in Australia recognised wrap-around service delivery as an effective model providing coordinated and ongoing support and stability to victim-survivors and their families with the added benefit of reducing long term costs to governments.⁵ In NSW, IDFVS services deliver a coordinated support program for victim-survivors of DFV and their children. The program provides ongoing, tailored, and practical integrated case management including coordinated referrals that is intended to seamlessly meet the client’s needs.

Who are the clients of the IDFVS service?

IDFVS provides shared and separate services to different family members including children and, in some cases, the perpetrator. Over the two year study period (June 2015 – July 2017), the IDFVS program supported 4,907 adult clients and 6,806 children. The adult clients were mostly female (96.6%), with 43.5% experiencing socio-economic disadvantage and 34% experiencing high levels of social exclusion. A third of adult clients were from a non-English speaking background (34.2%) and 8.4% identified as Aboriginal. A further 9% of clients had a disability and 5% were caregivers of a child with a disability.

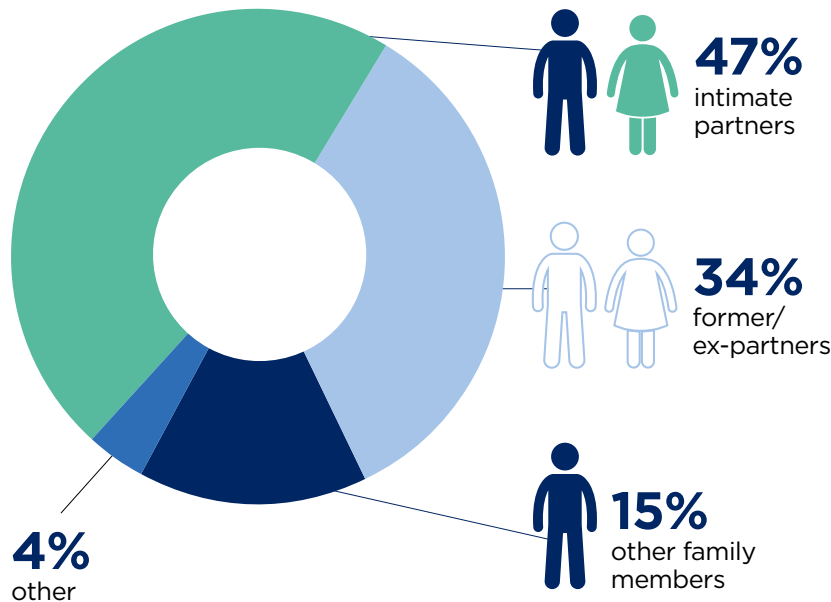
“We work with women who are still in the relationship, and talking about safety planning, and empowering the women, as well as working with their children” (Service provider)

Breakdown of the 4907 adults clients of the IDFVS



A service strength for IDFVS is that it provides support for women who are still living in a violent relationship. This is unlike the majority of DFV services which work almost exclusively with women who have already left the relationship. The IDFVS program is able to support women to overcome barriers to leaving an abusive relationship and achieve safety. The program fills a significant gap in service provision in NSW. The study found that, where relationship status was recorded, around half of the clients (46.5%, n=507) were still in relationships with perpetrators.

Relationship between perpetrators and clients



How is the IDFVS program delivered?

IDFVS is a unique program that coordinates a range of client driven services. The importance of local context was stressed by all study participants as being critical to the integration of service provision. Support and referral pathways are delivered through partnerships with local service providers and tailored to the needs of clients. Information sharing and risk assessment between service providers is a key benefit of the IDFVS program.

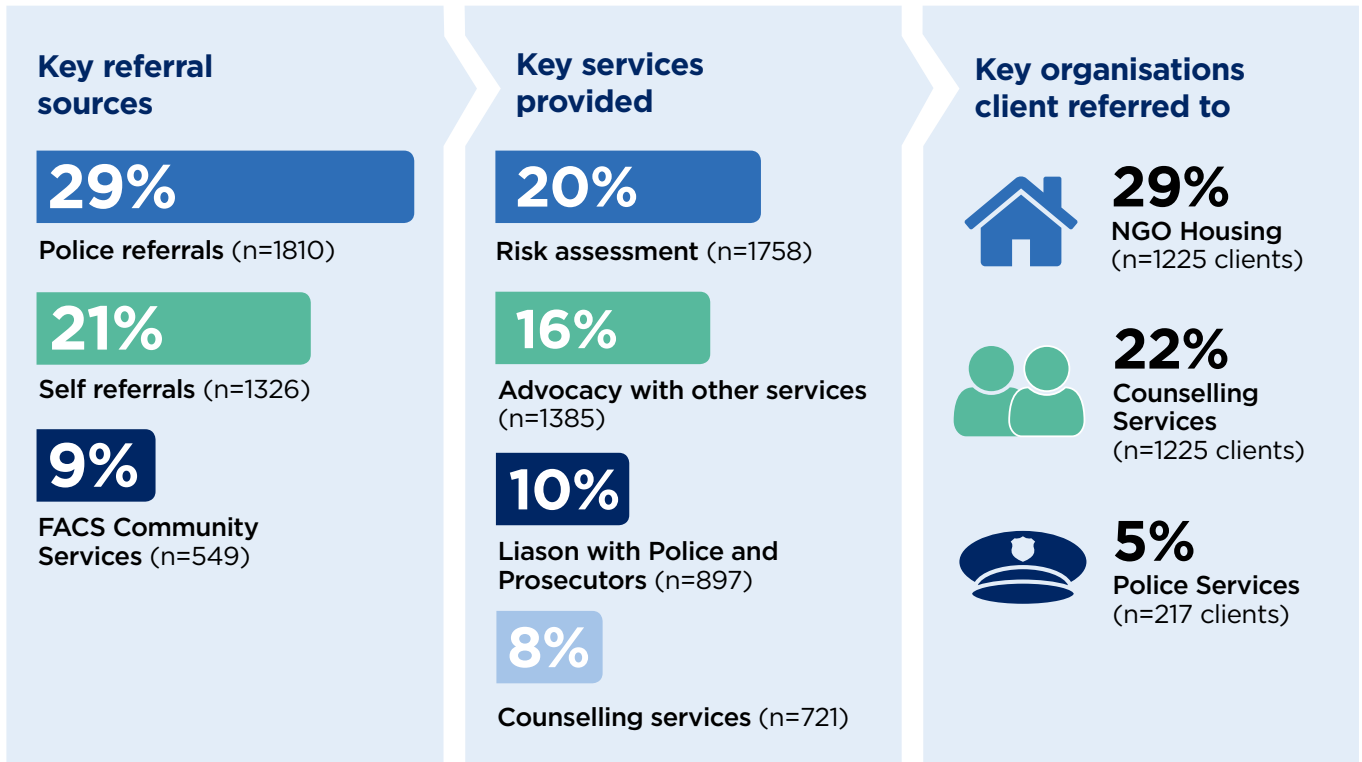
IDFVS provides flexible services that are not time limited. Support can be more or less intensive depending on clients' needs which can be helpful if there is ongoing violence and legal matters. The program provides a responsive pathway through various referral sources with predominantly short periods between referral, assessment and entry including higher priority cases being supported immediately,

“It’s the collaboration. One service cannot do it on their own. You need the specific key players, who the women choose to work within their lives, key players to do it together” (Service provider)

Overview of program delivery (June 2015 – July 2017):

- Clients were referred to the program from a range of agencies and services including the Police and Family and Community Services (FACS — now known as the Department of Communities and Justice).
- Clients, on average, accessed the program for five months.
- The majority of adult clients received case management (66.8%); receiving multiple wrap-around supports including coordinated referrals and services through multiple partner agencies. Housing was a predominant concern for IDFVS clients. In line with this, over half of all clients were referred for community housing and counselling services.
- Brokerage funding was available but not consistently used in all locations.

How is the IDFVS program delivered?



What is the impact on client satisfaction and outcomes?

The evaluation found that IDFVS workers' expertise and knowledge of DFV meant that client's needs were better understood; clients felt listened to and understood; and clients were appropriately connected with local services. Clients appreciated the flexibility, kindness and consideration of service providers. Clients were helped to make the first steps with trusted, local providers to overcome the difficulties leaving a relationship with DFV.

Client satisfaction

These findings should be interpreted with caution due to low response rate.

- 98.0% of clients were happy with the service
- 94.9% reported they had access to case workers
- 93.1% felt they were safer
- 78.0% felt that their children were safer, (with only 1.2% saying that the service did not make their children safer)
- 96.5% reported they were treated with respect.

"I guess the main help is developing my sort of confidence and ability to deal with a very domineering and aggressive ex-partner, and really the strategies how to support my kids and help all of us through that, and for me to get myself to a safe place" (Client)

A suggested area for improvement was access to culturally appropriate support, especially from the Police. A smaller number did not find the referral processes helpful and this was likely due to high caseloads of some of the IDFVS services or the service provided by the referred organisation.

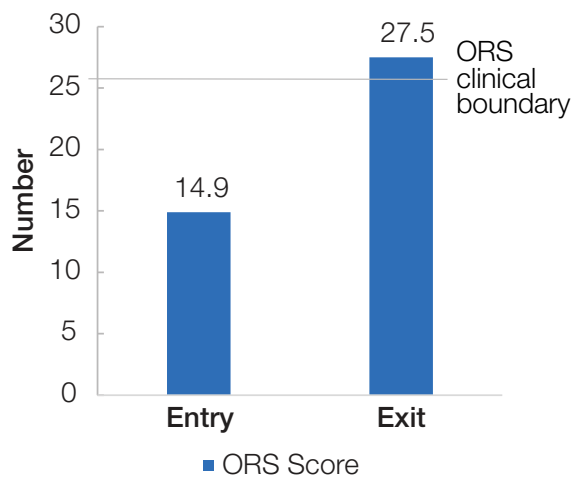
Client safety and functioning at program exit were compared to program entry.

Client safety: The proportion of clients **seriously at threat** reduced over the program (32.6% to 25.9%) but there was little to no change in the proportion of women that were **no longer at threat** when exiting the program (14.2% to 13.4%). However, given just under half of clients were still in an intimate relationship with the perpetrator, it is perhaps not surprising that women remained at risk of further violence.

“They’ve been really good with talking to me about things and also not having to repeat myself to other places like Centrelink. Yeah, they’ll write a letter, or they’ll speak to them on my behalf. I’m not having to constantly talk about all the bad stuff” (Client)

Client functioning: For the limited number of clients that were assessed with the Outcome Rating Scale (n=86), those exiting the program had significantly higher functioning scores than those entering the program (see figure 1). The Outcome Rating Scale assesses areas of life known to change as a result of a therapeutic intervention, including symptom distress, interpersonal wellbeing, social inclusion, and overall wellbeing. Qualitative interviews indicated a strong association between involvement in the program and clients’ increased wellbeing.

Figure 1: Average client Outcome Rating Scale (ORS) score at entry and exit of IDFVS program



Source: FACS IDFVS datasets 2015-16 and 2016-17

Where to from here?

The evaluation of IDFVS made 10 recommendations for program improvement related to systems and data, building workforce capacity and strengthening community education activities.

The Department of Communities and Justice is currently reviewing these recommendations to assess options for potential implementation, noting that some implementation options may be impacted by funding constraints. Consultation will be undertaken with IDFVS service providers and other stakeholders on implementation options.

More information about the Integrated Domestic and Family Violence Services program can be found [here](#).

About the Evaluation of the Integrated Domestic and Family Violence Services program

The evaluation of the IDFVS program was conducted by The Social Policy Research Centre and Gendered Violence Research Network, UNSW Sydney. The evaluation used a mixed-methods approach combining service monitoring data, validated scales, qualitative interviews and focus groups. The quantitative component was a retrospective data analysis based on program service delivery (portal) data for 24 months from July 2015 to June 2017 covering two complete financial years.

UNSW commenced the evaluation in October 2016 and the final report was delivered on November 2018. The full report of the evaluation can be found [here](#).

Endnotes

- ¹ Australian Institute of Health and Welfare 2018, *Family and domestic violence in Australia*, AIHW, Canberra.
- ² Australian Bureau of Statistics 2017, *Personal safety survey, Australia, 2016*, ABS, Canberra.
- ³ Ayre et al., cited in Australian Institute of Health and Welfare 2018.
- ⁴ KPMG 2016, *The cost of violence against women and their children in Australia: final detailed report May 2016*, Department of Social Services, Canberra, viewed 18 February 2019, www.dss.gov.au.
- ⁵ Senate Finance and Public Administration References Committee 2015, *Domestic violence in Australia*, Commonwealth of Australia, Canberra, viewed 18 February 2019, www.aph.gov.au/Parliamentary_Business/Committees/Senate/Finance_and_Public_Administration/Domestic_Violence

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