



# Review of the Women's Domestic Violence Court Advocacy Service implementation of actions 1.3 & 2.2 of the Domestic Violence Justice Strategy

## **EXECUTIVE SUMMARY**

January 2017

Executive summary based upon the research undertaken by:  
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The University of Sydney, June 2016.

**Legal Aid**  
NEW SOUTH WALES



**Women's Domestic Violence**  
Court Advocacy Service NSW Inc



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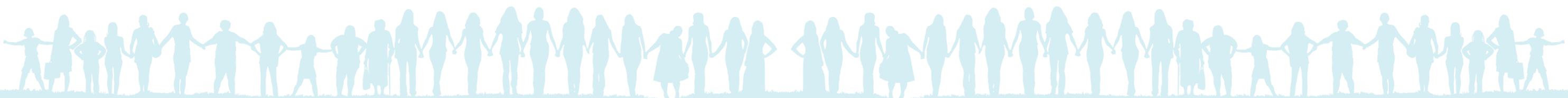
## Executive Summary

This report presents the findings of research undertaken by WDVCAS NSW Inc in consultation with The University of Sydney, Faculty of Education and Social Work.

The aims of the research were to:

- explore the experience of Women's Domestic Violence Court Advocacy Services (WDVCASs) in their implementation of aspects of the Domestic Violence Justice Strategy (DVJS);
- explore the experiences of women receiving proactive support from WDVCASs under the DVJS;
- identify any difficulties encountered by WDVCASs in implementing aspects of the DVJS;
- propose recommendations for improving the implementation of aspects of the DVJS.

The research design employed a mixed methodological approach, involving the collection of quantitative and qualitative data from multiple sources. These sources included the Women's Domestic Violence Court Advocacy Program (WDVCAP) database, the Central Referral Point (CRP) database, a research data tool, and in-depth interviews with WDVCAS Coordinators, specialist Aboriginal and Multicultural staff and women clients of WDVCASs.



## WDVCAS outcomes identified by the research project

The research provides evidence of the outcomes that WDVCASs are achieving. More women are receiving support – fewer victims are falling through gaps. WDVCAS workers commented on the increased community awareness of domestic violence.

“We get to access so many more women. We get to advocate for women who would have easily fallen through the gaps before. That we get to refer women to services they weren't aware of because they weren't referred. That we get to explain to more women what happens at court before they get to court, because we have their details... I think the collaborative partnerships that developed even more from the CRP system is a definite bonus for clients as well because services are aware of what you're doing and how important it is to engage with that client and take that referral. I think women have far more access to support than they did before. (Worker A2.)

“We get more women ringing up now ... so I think that it is a positive thing that they are becoming aware and also getting us to call. Just getting the confidence to call, like whether it is going to Court or not, it's just a matter of actually being able to speak to us. I think it is improving, even refuges are ringing up for information, and neighbours or friends are ringing up to get information. (Worker C1.)

There is increased awareness of domestic violence in communities which may not always engage with or have access to a range of supports and services, for example multicultural communities or new arrivals to Australia. Women are receiving advice on how to improve their safety much sooner after an incident.

“We're now speaking to clients real time after the incident's happened, and been able to try and implement any kind of safety measures that we've got access to straight away, so it's limited what we've got access to. But even being able to safety plan with clients about things they can do themselves in their own homes, or getting the AVO varied so he can't attend their house, or getting them off to a refuge. Absolutely aware of increasing the safety – we're giving every woman the ability to increase her own safety. (Worker A5.)

## Limitations of the study

### • Interviews with women

The women who participated in this research freely elected to engage with the research project. Due to the small sample size, the results of these interviews cannot be generalised across WDVCAS clients.

### • CRP database

Due to limitations of the CRP database at the time the research was undertaken, the only data that could be extracted was the number of referrals from NSW police to the WDVCASs and LCPs.

### • WDVCAP database

Data from the WDVCAP database underestimates the workload during the research period, as it does not include the data for clients referred to a LCP who do not receive a service from the associated WDVCAS. Nor does it include work pertaining to unsuccessful efforts to contact women, or clients who did not consent to receiving a service after initial contact. It does not include activities such as accessing and printing information from the CRP database; accessing WDVCAS client files to check if the woman referred was previously a client of WDVCAS; or contacting NSW Police to clarify contact details.

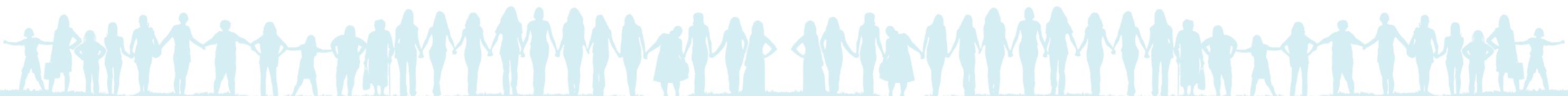
## Background: Policy and service delivery context

### The Women's Domestic Violence Court Advocacy Services (WDVCASs)

WDVCASs were established in 1996. There are 28 WDVCASs state-wide. Legal Aid NSW administers state government funding for the WDVCASs through the WDVCAP.

WDVCASs work co-operatively with the NSW Police, Magistrates, Local Court staff, legal practitioners and local support services to assist women and their children who have experienced domestic and family violence (DFV). They support women to seek legal protection by obtaining Apprehended Domestic Violence Orders (ADVOs). WDVCASs also provide information and referrals for women in relation to their ongoing legal and social/welfare needs.

WDVCASs play a key role in the implementation of the NSW Government's *It Stops Here* reforms, including the DVJS.



## It Stops Here Reform Framework

In 2014, the NSW Government launched its Domestic and Family Violence Reform Framework – *It Stops Here: Standing together to end domestic and family violence in NSW*.<sup>1</sup> The reforms recognise the need for an integrated approach to addressing DFV in NSW, and comprise five elements:

1. A strategic approach to prevention and early intervention;
2. Streamlined referral pathways to secure victims' safety and recovery (under the Safer Pathway reforms);
3. Accessible, flexible, person-centred service responses that make the best use of resources;
4. A strong, skilled and capable workforce; and;
5. A strengthened criminal justice response (DVJS).

## The Domestic Violence Justice Strategy (DVJS)

The DVJS was launched by the NSW Government in 2013 with the aim of strengthening the criminal justice system's response to DFV. The DVJS provides an operational framework, outlining the standards that justice agencies must meet in order to improve systemic responses to DFV in NSW. The DVJS identifies the desired outcomes for victims and perpetrators of DFV as:

1. Victims' safety is secured immediately and the risk of further violence is reduced;
2. Victims have confidence in the justice system and are empowered to participate;
3. Victims have the support they need;
4. The court process for domestic violence matters is efficient, fair and accessible;
5. Abusive behaviour is stopped and perpetrators are held to account; and
6. Perpetrators change their behaviour and re-offending is reduced or eliminated.<sup>2</sup>

WDVCASs are responsible for several elements of the strategy, including:

- **Strategy 1.3**  
Immediate Referral to Victim Services
- **Strategy 2.2**  
Court support and advocacy for victims
- **Strategy 2.5**  
Victim support at hearings

## Role of WDVCASs under the DVJS

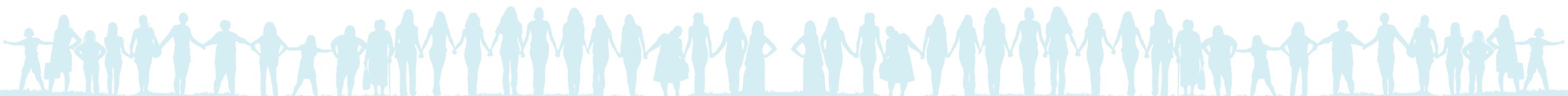
From 1 July 2015, all 28 WDVCASs received referrals from NSW Police through the CRP. WDVCASs are required to attempt to contact all victims within one business day. If they are unable to contact the client on the first attempt, the service is required to proactively attempt contact three times within the first five business days. This new role under the DVJS is in addition to WDVCASs' existing roles in court advocacy for victims in ADVO matters, (DVJS strategy 2.2) and in hearings involving criminal charges (Strategy 2.5).

## Safer Pathway

A key component of the *It Stops Here* reforms is the service delivery model *Safer Pathway*, being led by the Department of Justice.

Currently, 17 of the 28 WDVCASs are funded to host a *Local Coordination Point* (LCP) under the *Safer Pathway* initiative. While all WDVCASs provide the same initial response to all women referred from the CRP (proactive contact, initial risk and safety assessment, case coordination, information and referral), WDVCASs hosting an LCP also coordinate Safety Action Meetings (SAMs) for clients assessed as being 'at serious threat' of violence, based on an assessment using the Domestic Violence Safety Assessment Tool. A further nine LCP sites will be rolled out in March 2017.

SAMs are chaired by a Senior Police Officer and organised by the SAM Coordinator based in the LCP. SAMs are attended by representatives from the Department of Corrections, Department of Education, Department of Family and Community Services (both child protection and housing) and NSW Health. Local non-government organisations attend as required. The aim of SAMs is to develop a Safety Action Plan for domestic violence victims and their children, based on information shared by SAM members.



## Findings of the research

### Increase in WDVCSs workload

The study found that the WDVCS workload increased significantly in the first six months of the implementation of the CRP referral system:

- WDVCSs provided services to 88% more clients in the first six months of the CRP referral system compared to the same period in the previous year.
- This increased volume of work, with the requirement that women be contacted within one business day following an incident involving police, resulted in a shift in the way that WDVCSs provide services to women. This is seen in a 192% increase in the provision of pre-court support.
- The number of service events provided by WDVCS staff also increased dramatically from 2014 to 2015. Over the period July to December in 2014, WDVCS provided 49,690 service events to clients. In the same period in 2015, 69,500 services were provided, an increase of 40%.
- Referrals made by WDVCSs to other services increased by 60% in the period July to December 2015 in comparison to the same period in 2014.

### Progress in contacting women within one business day

WDVCSs attempt to contact all women referred to them within one business day. Information from 410 responses to the research data tool indicated that 48% of women referred through the CRP were able to be contacted within one business day, with the majority of these contacts being made on the same day. 73% of clients were successfully contacted within five business days. Reasons stated for not making contact with a woman referred to a WDVCS included: 'no answer' (70%); phone disconnected (6%); wrong number recorded on CRP (5%); phone engaged (4%); perpetrator's number provided (1%) and limited time/resources (1%).

### A shift in the type of work with clients

The implementation of the new referral system has resulted in a shift in the nature of WDVCS service delivery. Prior to July 2015, the core element of WDVCSs' work involved supporting and advocating on behalf of women through attendances at Court proceedings (strategy 2.5 under the DVJS). Since July 2015, the majority of work involves the provision of information including ADVO information, pre-court information and general advice and information over the phone soon after Police involvement.

## Service provider perspectives

### The role of WDVCSs following the reforms

The interviews with WDVCS personnel found that they were supportive of the new referral system, which they perceived to be proactively offering support to women who have experienced DFV. Despite the significantly increased workload, WDVCSs worked flexibly to develop systems for prioritising risk and responding within the required time-frame to women referred from Police. They recognise the advantages in a system that increases women's timely access to information, support, safety planning and referrals.

### Adapting the WDVCS practice framework in response to the reforms

WDVCS workers developed streamlined workplace procedures to ensure referrals were attended to within the one business day timeframe and to triage referrals according to risk level. Each WDVCS developed their own triaging procedures that were often dictated by the availability of staff on any given day. The WDVCS workers adapted previous work processes, took on additional duties and diversified roles to ensure that the referrals were appropriately attended to.

## Challenges encountered by the WDVCSs in the implementation of the strategy

### Funding of WDVCS services

During the first six months following the implementation of the DVJS, the six WDVCSs hosting a LCP received additional funding for the LCP role. All WDVCSs took on extra referrals without additional resources. This lack of resources placed strain on the capacity of WDVCS services to meet the demands of the greatly increased number of clients. In December 2015, all WDVCSs received an increase in funding to assist them to manage the additional referrals.

The June 2016 NSW budget announcement saw the commitment of the NSW government to the four year recurrent funding of WDVCSs and the continued roll-out of Safer Pathway. This commitment to funding WDVCSs and the roll-out of Safer Pathway enabled WDVCSs to employ more staff to meet the increased demands placed upon the services, and to plan for the future of their services and staff with greater certainty.



## Potential gaps in referral options for women

WDVCAS workers identified that the reforms had led to greater collaboration between their services and other specialist and generalist services. However, WDVCAS workers noted that there were increasing gaps in the ability of other specialist services to meet the needs of the high number of clients in their areas. WDVCAS staff commented that the gaps appear to be most prominent with respect to crisis accommodation, case management services and counselling services.

“...you know you refer and their books are closed and yeah, it makes it very difficult when you've got the woman in crisis now and she can't wait that 2–3 weeks, or you know however long the wait is to get access to a service. (Worker A2.)

Living in a regional or rural area, being from a multicultural background or having specific needs can further exacerbate these difficulties.

“I mean sometimes we get women in, depending on what her need is, hunting around to find appropriate services and it is really difficult if someone's got special needs. I've found particularly vulnerable women, women with mental health, or older women, we've really struggled. (Worker C7.)

It was consistently noted by the WDVCAS workers that the specialist services women require are often stretched to capacity,

and have long waiting lists. Specialist workers felt that the capacity of services for multicultural and Aboriginal or Torres Strait Islander (ATSI) communities were more limited than generalist services. This limited capacity can lead to women at risk from DFV waiting for extended periods to access ongoing supports.

## Technical and administrative difficulties encountered

Workers universally mentioned that the initial shortcomings and extensive limitations of the CRP system had resulted in delays in completing tasks and contacting women referred to their services. The time spent waiting for information from the CRP system to load or to seek information from Police that had not been provided in the CRP referral added to the strain upon workers, and the capacity of services to meet the prescribed timeframes for contacting women referred to them. Worker frustration centred on the initial low speed of the CRP system and frequent system outages. In order to access data more easily, staff often attended work outside normal business hours (e.g. early morning or weekends) to use the database when it was more functional.

Since the initial research period, Victims Services has completed a number of upgrades that have significantly increased the CRPs' speed and capacity.

## Inadequate information provided regarding cultural identity and language preference

WDVCAS workers raised concerns that they were not always receiving information relating to a woman's cultural identity, language spoken or need for an interpreter on CRP referrals. Workers suggested that this lack of information may result from Police not asking cultural or language identification questions when speaking to women, or not recording this information when completing the CRP referral. Another factor is that some women may not be comfortable speaking to Police.

If this information is not available, it may impede WDVCAS workers' ability to offer and provide culturally specific support to women referred to their service. It may also impact upon workers' ability to successfully communicate with women for whom English is not their first language:

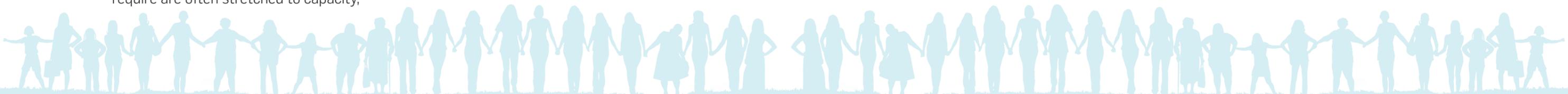
“...we are not necessarily being notified when an interpreter is needed. Boxes are not being ticked. So, it is tricky for us, so if we are sending out a letter or an SMS...we sent a woman a letter and she turns up to Court and she had no, she couldn't speak English. (Worker C5.)

Appropriate cultural and language identification is vital to ensuring that women get the specialised service and support that they require.

## A change in the type of client being referred to the WDVCAS

Workers described the initial challenges in responding to both intimate partner and family violence. Prior to the implementation of the reforms, women were primarily referred to WDVCAS when they were subject to an ADVO application related to intimate partner violence. Following the implementation of the CRP referral system, there was a marked increase in the number of referrals to WDVCASs for people experiencing violence from a sibling, parent, child or other householder.

WDVCAS workers identified that alternate referral pathways were often required to best support women experiencing non-intimate partner violence. As a result they have strengthened their referral pathways with specialised and universal support services that can provide additional or ongoing supports to women experiencing non-intimate partner violence.



## Reduced capacity to provide support to women at hearings for some WDVCSs

Some WDVCSs commented that due to the increase in referral numbers to their services, their ability to provide support to women at hearings was diminished. While some WDVCSs were able to maintain support for clients at hearings; others were no longer able to provide this service for all clients.

A number of additional initiatives have been put in place by WDVCS workers and others to support women prior to hearings. Police Prosecutor Clinics are being implemented state-wide to prepare victims of DFV for their hearing. NSW Police and WDVCSs work in partnership to provide these clinics. In locations where Police Prosecutor clinics are not yet established or when women are not able to attend a clinic, WDVCSs provide information, support and resources to women prior to their attendance at a hearing.

## Successes of the WDVCSs in implementing the new referral system

Notwithstanding the challenges that came from an increased workload, administrative problems and overstretched DFV services, WDVCS workers were heartened that more women had access to domestic violence services. Despite the challenges, workers believe that these reforms are an important foundation for building awareness and more effective interventions for women experiencing DFV.

“It increases their feeling of having someone that believes their story, who knows their story and that listens to them. The system itself may not completely make her feel satisfied but knowing that there is a service that she can go to in the future or whenever she feels she needs that. I think having that consistency state-wide is a huge bonus when you've got that same level of service provision in every area. (Worker C2.)

## Support to multicultural and ATSI women

There was a significant increase in the number of multicultural women accessing the services of WDVCSs. Between 1 July and 31 December 2015, WDVCSs provided service to 4,202 multicultural clients, an increase of 47% from the same period in 2014.<sup>3</sup>

There was also an increase in the number of ATSI clients accessing WDVCS services. Between 1 July and 31 December 2015, WDVCSs provided service to 2,511 ATSI clients, compared to 1,660 ATSI clients in the same period the previous year.

## Client experiences of the new system

Women who participated in the study expressed appreciation for the assistance offered by the WDVCSs. They recognised the value of receiving support, information, referral and court advocacy from the WDVCSs.

### Responses to proactive contact from WDVCS

The clients interviewed responded that they were not aware of the WDVCS when they received the initial call from them. All of the clients had been contacted by phone. When canvassed about alternative forms of communication, all responded that they would have also been happy to receive an SMS as initial contact.

Some of the women interviewed mentioned that at the time they were contacted by a WDVCS they were experiencing high levels of anxiety, uncertainty and fear for their safety and the safety of their children. In these circumstances, the contact from WDVCS was reported to be most welcome. It was a friendly, accessible service that could provide needed support:



“I think there was a lot of stuff going on my head at that time and I couldn't think straight – clearly – and (WDVCAS Worker) was just amazing. We talked, and I went to go see her, and she was like my rock. You know [inaudible] traumatic time and you don't know who to trust, or who are these people that are – who are calling you, you know a very daunting time, and you don't know which step to take first or which direction or which services are available for you. Because you, not many people have been in these situations before so they don't know. (Client 6).

### Facilitating access to information and awareness

It has been identified that a lack of information about available services can hinder a woman's efforts to gain greater safety. Those clients who were interviewed valued being made aware of the support services available to them, many of which they had never heard of, or did not know how to access:

“I just think we need more of them. Like, no seriously, I don't even know how many around in the area, I just think, the community needs to be more aware of who these people are and what they do and who they can offer their services. I think in time, because I could have bypassed a whole heap of BS and gone to them. It would have made my life so much easier and less traumatic you know. And they've linked

me up to such a good service where I'm at now, and you know, I'm slowly getting my feet back on the ground even though I've got all this stuff going on. (Client 9).

### Valuing court advocacy and support

The court advocacy role of the WDVCAS was highly valued by the women interviewed. A number of the women noted that they had no other source of support, and many relied heavily on WDVCASs for information regarding the court process, the ADVO application and for emotional support. This is consistent with Australian research on women's experiences of seeking an ADVO in NSW, where the support and advocacy offered by WDVCASs was the most universally positive aspect of the justice system from the perspective of women participating in the system.<sup>4</sup>

“It was good at the time, because it was nice to have somebody there – no other family could be there at the time. And they were able to go out and find out what was going on. Because I felt very isolated just being in the safe room not knowing what the hell was happening. (Client 2).

“Yeah I think really, really, I think it's really important for women to know there's somebody on their side and it's a really daunting process the court process. (Client 12).

### Confidence in and ability to participate in the justice system

The clients interviewed were divided as to whether their contact with WDVCAS had improved their confidence in the justice system. Many of the women interviewed had no previous interactions with the justice system. They advised that the Police, WDVCAS and other specialist services which they accessed or were referred to, provided an important point of contact and support. In the majority of cases, the women felt that they had been provided with a responsive avenue of intervention and support.

However, this initial relief was followed by a strong sense of frustration as they became engaged in a process of navigating ADVO applications and in some cases Family Law proceedings. The women found themselves involved in what they viewed as a complicated and unresponsive legal system. One woman interviewed doubted the effectiveness of the ADVO in offering protection:

“A piece of paper at the end of the day. If you want to come kick my door [inaudible] you probably will. I don't think it really deters him. (Client 12).

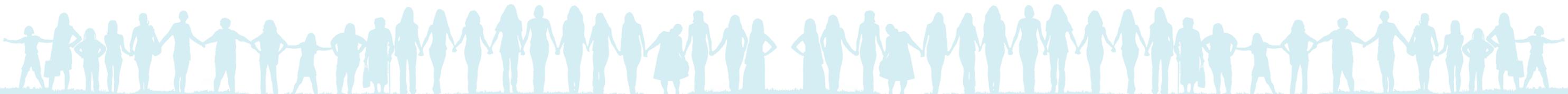
Another woman interviewed felt that perpetrators of DFV were not always held to account for their actions.

“One of the big ones is, many of the perpetrators stand back in court ..., and they go to the bail hearings and their stories aren't checked out. The

Magistrate either believes them or he doesn't on the day, and a lot of them are feeding him a total line ... But these magistrates need to have very, very strict guidelines on domestic violence because my ex was already on district court matters for home invasion or to stabbing to, to 10 break and enters ... and he was already on bail through the district court, and yet he got bail twice after that in the local court. (Client 11).

Some of the women commented on new initiatives which were rolled out in conjunction with the DVJS, such as the Police taking video statements (Domestic Violence Evidence in Chief). DVEC is used by Police to collect contemporaneous evidence. However, some women raised concerns that they did not recall what they said in their DVEC statement due to the impacts of trauma. They commented that they were not shown the DVEC statement following the incident; some only saw the DVEC statement when it was used in court proceedings.

“At the time I was giving the statement I was still coming down from the adrenaline rush or whatever it is, because it had only just happened. They did the video interview with me which I agreed to. But I wasn't allowed to look back over what I said, and I have no idea actually what I told them, it went for an hour or so, I was just babbling on because I was in a state of shock I think. It would have been good to just check what exactly I've said for no other purpose than just to feel more prepared [for court] but I didn't get the chance to do that. (Client 1).



## Conclusion and recommendations

### Recommendation 1

This research project identified the limited capacity of other services to meet the increase in demand for support from women who, following initial assistance and assessment from a WDV CAS, required further specialist domestic violence case management or support. Clients requiring case management were often required to wait for extended periods until an external agency had the capacity to accept referral for the client, and offer them the case management support that they required. Given the WDV CAS position as a state-wide specialist domestic violence service successfully implementing aspects of the DVJS and Safer Pathway reforms:

***It is recommended that additional resourcing to enable WDV CASs to provide in-house specialist domestic violence case management to women be considered further. The aim of the additional resourcing would be to increase the safety of women and their children. Such an arrangement would ensure women experiencing domestic violence do not have to re-tell their story to multiple support agencies, and receive the urgent support they require in a timely manner.***

### Recommendation 2

WDV CAS services which host an LCP are better resourced to effectively manage the higher workload and coordinate an interagency response to DFV under the DVJS and Safer Pathway reforms:

***The current expedited roll-out of Safer Pathway sites is commended, and it is recommended that this expedited roll-out continue until all NSW Police Local Area Commands have a dedicated LCP located in a WDV CAS service.***

### Recommendation 3

This research highlighted the 61% increase in WDV CAS referrals to other domestic violence specialist and universal services, and the experience of WDV CAS workers that these other services are frequently at capacity, and hence unable to accept new clients. Although the intervention provided by WDV CASs after Police involvement was identified by clients as being immensely beneficial, the limited capacity of services which can offer medium to long term support for women experiencing DFV was identified as a serious concern. Particular needs identified by this research are for increased capacity/availability of crisis accommodation, domestic violence specialist case management, counselling, and multicultural and ATSI specialist domestic violence services:

***It is recommended that future consideration be given to providing greater funding to domestic violence specialist services (including multicultural and ATSI services and crisis accommodation). This will help ensure that victims of DFV engaged through proactive outreach are able to access ongoing services and support.***

### Recommendation 4

This research identified the concern that vital information regarding the client was at times not made available to WDV CAS workers through CRP referrals. Such information included: whether an interpreter was required to communicate with the client and the client's preferred language; the cultural identity of the client; the relationship type between the defendant and the client and the contact details of the client. It is acknowledged that a number of factors may impact information collection and recording, including that women may not wish to provide information to Police:

***It is recommended that WDV CAS staff and NSW Police Domestic Violence Liaison Officers continue to work together to ensure that client information is as detailed and accurate as possible, and that Police have adequate training on the importance of the accuracy of this information.***



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**Women's Domestic Violence**  
Court Advocacy Service NSW Inc

**Review of the Women's Domestic Violence Court Advocacy Service  
implementation of actions 1.3 & 2.2 of the Domestic Violence Justice  
Strategy**

**EXECUTIVE SUMMARY**

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