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National mapping and meta-evaluation outlining key features of effective "safe at home" programs that enhance safety and prevent homelessness for women and their children who have experienced domestic and family violence: *Final report*



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Acknowledgement of Country

ANROWS acknowledges the traditional owners of the land across Australia on which we work and live. We pay our respects to Aboriginal and Torres Strait Islander elders past, present and future; and we value Aboriginal and Torres Strait Islander history, culture and knowledge.

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National mapping and meta-evaluation outlining key features of effective “safe at home” programs that enhance safety and prevent homelessness for women and their children who have experienced domestic and family violence: *Final report.*

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This report addresses work covered in ANROWS research project 3.1 “National mapping and meta-evaluation outlining key features of effective “safe at home” programs that enhance safety and prevent homelessness for women and their children who have experienced domestic and family violence”. Please consult the ANROWS website for more information on this project. In addition to this paper, an ANROWS Compass is also available as part of this project.

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Contents

Executive summary	3
Conclusions.....	4
Introduction	5
Meta-evaluation aims and scope.....	5
Meta-evaluation structure.....	5
Methodology	6
Stage A - Framework development.....	7
Stage B - Evaluation identification.....	7
Stage C - Inclusion criteria.....	8
Stage D - Content and quality assessment.....	9
Stage E - Reporting the findings.....	10
Synthesis of the meta-evaluation findings: Evaluation processes and quality	11
Independence.....	11
Properly specified evaluation goals.....	12
Data collection transparent and data properly analysed.....	13
Conclusions supported by data analysis.....	14
Conclusions directly address “safe at home” program/strategy.....	14
Synthesis of the meta-evaluation findings: Key features of “safe at home” responses	15
What is “safe at home”?.....	16
Key features in relation to the four pillars.....	17
Maximising women’s safety.....	17
Integrated response.....	20
Homelessness prevention.....	21
Women’s economic security.....	21
Diversity and inclusion.....	22
Conclusions and future directions	23
Considerations for future evaluations.....	23
Considerations for future “safe at home” policy and practice.....	24
Appendix A: Analytic process framework	26
Appendix B: Key stakeholder online survey	28
Appendix C: Excluded evaluations	34
Australian Capital Territory.....	34
New South Wales.....	35
Northern Territory.....	37
Queensland.....	38
South Australia.....	38
Tasmania.....	40
Victoria.....	41
Western Australia.....	42

Appendix D: Included evaluations	43
Australian Capital Territory.....	43
New South Wales.....	47
Queensland.....	89
South Australia.....	91
Tasmania.....	98
Victoria.....	102
Western Australia.....	114
Appendix E: International evaluations	117
References	119

Executive summary

This research project has been designed to provide a national mapping and meta-evaluation of the key features of “safe at home” programs that enhance safety and prevent homelessness for women and their children who have experienced domestic and family violence. The project was undertaken in two phases. The first phase involved the preparation of a state of knowledge paper providing a comprehensive review of the literature and a national mapping of current “safe at home” programs by jurisdiction, including details of legislation underpinning “safe at home” programs in each jurisdiction. In the second phase, the authors undertook a meta-evaluation of select evidence about Australian “safe at home” programs and practices. This report presents the results of the meta-evaluation. It concludes with recommendations for future “safe at home” evaluations, as well as key considerations for “safe at home” responses in terms of core program elements, contexts and circumstances.

A total of 52 Australian evaluations were identified for potential inclusion in the meta-evaluation. This number was reduced to 20 after applying the agreed inclusion criteria, after which a comprehensive summary of each evaluation was completed using a meta-evaluation matrix. These detailed summaries have been included in the appendices for stakeholders interested in individual evaluations, whereas the main body of this report focuses on the aggregated findings.

In relation to the quality of the evaluations, the majority of those included in the meta-evaluation applied their chosen methodology via a robust and considered process. Although the analytic methods used were not always described in detail, most evaluations did not make claims beyond what the data or their methodology allowed. The majority also collected data from multiple sources and included primary data analysis, as well as secondary data analysis (e.g. monitoring data, case files and program documentation). All of the evaluations collected qualitative data via interviews or focus groups with workers, clients and key stakeholders. In many cases, this provided rich descriptions of interventions, as well as perceptions of why responses were helpful.

However, most of the included evaluations relied on qualitative and/or monitoring data with only a few implementing outcome scales and measures. The lack of outcome measures limits what is known about changes in women’s wellbeing or the achievement of program goals over time. In addition, commentary on program effectiveness is necessarily limited by the lack of randomised control trials in these evaluations.

With regard to the key features of “safe at home” responses, the four pillars and common program elements identified during the literature review and jurisdictional mapping also emerged in the synthesis of evaluations included in the meta-evaluation. Maximising women’s safety and homelessness prevention were universally noted in the included evaluations and one or the other was reflected as the predominant pillar. All of the evaluations also indicated that an integrated response is important, either at the sector or local agency level, because women’s needs after leaving a violent relationship frequently require a coordinated approach. Enhancing women’s economic security so that they are able to mitigate post-separation poverty was identified in some evaluations as an emerging area of research and practice. Overall, one or more pillars were identified across the “safe at home” evaluations, but the emphasis varied by program and at different points during the response provided.

From a definitional perspective, the meta-evaluation showed that there is no shared cross-jurisdictional agreement of what constitutes a “safe at home” program or initiative. Very few of the evaluations attempted to define the meaning of “safe at home”, and the purpose and aims of the evaluations differed across and even within some jurisdictions. This means that identifying what is “good practice” from the included “safe at home” evaluations was not straightforward and can be highly contested.

In addition, the following program-related issues emerged from our synthesis of the evaluations:

- The lead agency in each state or territory appears to determine how “safe at home” is rolled out and whether it is focused on housing (“stay at home”) or criminal justice (“safe at home”). “Stay at home” responses are mostly offered over a longer period of time, compared with many first-response services involving specialist homelessness services. A longer period of service provision allows for ongoing and dynamic assessment of risk and for women’s changing needs to be met at different points of time.
- It is still unclear whether independent strategies which could be used in any domestic violence-related intervention (e.g. risk assessment, brokerage, safety alarms and specialised police response) should be considered “safe at home” responses in their own right; or whether these strategies are most useful and of greater impact when embedded in a more comprehensive program which aims to support women to remain at home or in the home of their choice, and offers case management beyond the initial crisis period.
- Monitoring data indicates that Aboriginal and Torres Strait Islander and culturally and linguistically diverse (CALD) women are accessing “safe at home” responses, but little is known of the usefulness of such interventions for these groups. For example, some of the evaluations noted barriers to service provision in rural and remote areas which may disproportionately affect Aboriginal and Torres Strait Islander communities.

Conclusions

As emphasised in all of the Australian evaluations included in this meta-evaluation, “safe at home” is not intended to be the only response for women leaving a violent relationship. Further, the provision of “safe at home” interventions does not suggest a reduced need for existing specialist domestic violence homelessness services such as refuges. However, given the shortage of readily available refuge accommodation and the number of women who are not able to access specialist homelessness services, “safe at home” has developed as a complementary offering that allows more women to leave a violent relationship. “Safe at home” options are also intended to be a socially just response for some women in certain circumstances to have the important choice to not uproot their lives and those of their children by fleeing their family home.

This Report provides key messages for policy-makers, practitioners and researchers, as well as suggestions for further areas of inquiry. Moreover, it is anticipated that this meta-evaluation will become a “living document” whereby evidence produced from “safe at home” evaluations continues to be collected and translated back into evidence-based responses and program development.

Introduction

Meta-evaluation aims and scope

A meta-evaluation is described in the research literature as a systematic assessment or overarching evaluation of the quality of program evaluations, evaluation systems or of specific evaluation tools (Olsen & O'Reilly, 2011, p. 2). According to Scriven (2009), a meta-evaluation is primarily implemented for two reasons: to consider the rigour of ongoing evaluations (formative meta-evaluation) or to report on the quality, or strengths and weaknesses of evaluations already undertaken (summative meta-evaluation). This “safe at home” meta-evaluation is an example of the latter.

From a practice perspective, meta-evaluations can be used to ensure that the evidence produced by the evaluations under review is sufficiently credible for consideration when planning program improvements, as well as to enhance the quality of future evaluations (Fitzpatrick et al., 2004). In addition, this particular meta-evaluation has reviewed and analysed the data to identify key program elements or learnings related to “safe at home” responses in Australia.

It is important to note that although all jurisdictions other than the Northern Territory¹ fund a range of “safe at home” programs and/or strategies, not all initiatives have been included in this meta-evaluation. Evaluations may not have been conducted or released at the time of writing. For Australian “safe at home” program evaluations that were identified for this project, the rationale for their inclusion or exclusion can be found in the Methodology section on page 6 and Appendices C and D.

Meta-evaluation structure

This report is structured as follows:

- the methodology used for this meta-evaluation, including a description of the analytic process;
- synthesis of the findings related to the quality of “safe at home” program evaluations and some of their limitations;
- synthesis of the findings related to key program elements and their relationship with the four pillars of “safe at home” responses as detailed in the preceding state of knowledge paper; and
- conclusions and recommendations for future “safe at home” evaluations and responses.

¹ In March 2015, the Northern Territory announced funding for a Safe at Home Program to be established.

Methodology

Comparing evaluations of programs and strategies can be complicated as there is no single or agreed analytic framework for synthesising different forms of evidence (Ring et al., 2011). Difficulties often emerge when trying to compare evaluations as they frequently rely on various and different combinations of qualitative data, monitoring data and only sometimes, outcome measures. Moreover, even when responses may appear to be similar, variations in legislation, policy, eligibility criteria and the intervention content can mean they are not easily or directly comparable.

To offset these challenges, this meta-evaluation has adopted an analytic process called “thematic synthesis” which is considered helpful for analysing qualitative data alongside quantitative data synthesis (Mays et al., 2005). Thematic synthesis of “safe at home” data required analysis at different levels – first, an analysis of individual evaluations; then a further analysis of evaluations at the jurisdictional level; and finally, a synthesis across jurisdictions at the meta-evaluation level. These multiple layers of analysis ensured that key program elements and learnings of the “safe at home” meta-evaluation are reflective of individual and shared evaluation findings. This strategy also allows the meta-evaluation to become “a live document and continue to evolve” (ALNAP Review of Humanitarian Action, 2003, p. 135).

Using thematic synthesis, this meta-evaluation addresses the following questions:

- How robust are the current evaluations of Australian “safe at home” programs – can and do their findings demonstrate the effectiveness of these programs?
- What are the key program elements of all current Australian “safe at home” programs?
- What practice approaches have been shown to be effective in enhancing women’s safety and allowing them to remain in a home of their choice?
- What evidence exists that current Australian “safe at home” programs are effective for diverse population groups and diverse geographic locations?
- What does the existing evidence suggest are the relevant policy and legislative contexts to effectively implement “safe at home” programs across jurisdictions?
- Does the evidence indicate that there are specific conditions under which “safe at home” is not going to be a viable and safe response for some women and children?

- What is required to improve “safe at home” programs in the future either through increased population reach and/or program elements?
- What evidence is currently not available about “safe at home” programs and would be valuable knowledge to inform future policy and programming?
- Do the evaluations suggest areas where the evaluation could do better or didn’t work well? Were there recommendations for future evaluation?

The authors devised a five-stage analytic process as outlined below to ensure a rigorous and systematic approach.

Stage A - Framework development

In order to assess the quality of evidence, meta-evaluations require the consistent application of agreed evaluation standards to each individual evaluation. These standards can range from predetermined and structured checklists to unstructured and emergent criteria, including both narrative reviews and/or simple audits (Cooksy & Caracelli, 2009).

During Stage A, the authors referred to the dominant conceptual themes and issues identified in the state of knowledge paper. These informed the development of an *Analytic Process Framework* (see Appendix A) which address the meta-evaluation questions listed above.

Stage B - Evaluation identification

The national mapping of “safe at home” programs by jurisdiction during the state of knowledge review allowed the authors to identify “safe at home” programs and strategies which may have been evaluated. However, this was necessarily an iterative process because not all “safe at home” programs or intervention strategies had been evaluated or subjected to a rigorous formal review, and some of the evaluations referenced by others are no longer available. In addition, a few of the evaluation reports identified as critical to the meta-evaluation were under embargo, requiring direct intervention to secure their release by government for this project.

Evaluations for possible inclusion in the meta-evaluation were initially identified by the following means:

- listed by ANROWS as part of the project outline (ANROWS, 2014b, p. 2) (n=8); and
- through the state of knowledge review which included an extensive search of databases and grey literature (n=22).

To increase the likelihood that the authors would identify the maximum number of evaluations, an online survey (see Appendix B) was sent to:

- key stakeholders from all jurisdictions identified by the authors as potentially having knowledge of “safe at home” strategies and possible evaluations;
- members of the project’s Advisory Group; and
- key stakeholders identified by snowball recruitment from these groups of participants.

These activities led to the identification of additional evaluations (n=22).

It was important to utilise diverse data collection strategies such as this in order to locate any evaluations of programs and responses used to address different sub-population groups (e.g. Aboriginal and Torres Strait Islander women, young people, culturally and linguistically diverse women, and women with a disability).

Total number of evaluations identified for potential inclusion:
n=52

Stage C - Inclusion criteria

In this meta-evaluation, “evaluation” is defined as the systematic collection of information about the activities, elements, and outcomes of programs enabling judgments to be made about an intervention, which may contribute to improving program effectiveness, and/or underpin decisions about future program development (Patton, 2008). An evaluation report is primarily distinguished from other empirical research in that evaluations specifically seek to better understand a program or program strategy and how it may meet the needs of the sector and service users, as well as its relevance, effectiveness and sustainability. Evaluations of “safe at home” programs for inclusion in the meta-evaluation may be informal, formal and implement quantitative, qualitative or mixed methodologies.

Building on ANROWS’s initial definitions (ANROWS, 2014b, p. 1), a “stay at home” program/strategy evaluation must:

- self-identify as an evaluation of a program or strategy – i.e. not just conceptual research; and
- receive specific funding for the evaluation and not be simply internal quality assurance or monitoring only.

In terms of specific inclusion criteria, it was agreed that “stay at home” programs/initiatives must be funded as a separate initiative and have a designated DV focus – i.e. not a generic program which may also incidentally be accessed by women leaving a violent relationship. An example of the latter would be a homelessness initiative which may be utilised by any women facing housing difficulties, some of whom may be leaving a violent relationship.

In addition to the mandatory program/initiative focus of DV, the programs must have a stated intention to maintain women safely in their own home or home of their choice. Specifically:

- the program must be focused on preventing women who have left a violent relationship from entering specialist homelessness services/supported accommodation such as specialist domestic violence refuges. This means that the program/strategy is intended to assist women who have experienced DV to remain in independent housing options including private rental, continuing their mortgage or social housing; and/or
- the program/initiative must have a criminal justice focus on women’s safety, and aim to support the safety of women to remain safely in independent accommodation of their choice at the time of accessing this service regardless of whether women accessing the program/initiative have ever used supported accommodation in the past.

After applying the inclusion criteria:

Number of evaluations included: n=20²

Number of evaluations excluded: n=32

² Note that Appendix D only contains detailed summaries for 18 evaluations because the remaining 2 evaluations were interim findings and therefore were rolled into the summaries for the corresponding final reports.

List of 20 included evaluations:

Australian Capital Territory

1. Watson, J. (2014). *Staying home after domestic violence*. ACT Domestic Violence Prevention Council, Submission to the Finance and Public Administration References Committee inquiry into domestic violence (p.11; note 12).

New South Wales

2. Breckenridge, J., Hamer, J., Newton, B.J., & valentine, k. (2013). *NSW Homelessness Action Plan extended evaluation: Final evaluation report for long-term accommodation and support for women and children experiencing domestic and family violence*. Sydney: Centre for Gender Related Violence Studies, University of New South Wales.
3. Breckenridge, J., Hamer, J., Newton, B.J., & valentine, k. (2013a). *NSW Homelessness Action Plan extended evaluation: Final evaluation report for long-term accommodation and support for women and children experiencing domestic and family violence*. Sydney: Centre for Gender Related Violence Studies, University of New South Wales.
4. Breckenridge, J., Hamer, J., Newton, B.J., & valentine, k. (2013c). *NSW Homelessness Action Plan extended evaluation: Hunter integrated response to homelessness and domestic violence for women*. Sydney: Centre for Gender Related Violence Studies, University of New South Wales.
5. Breckenridge, J., Hamer, J., Newton, B.J., & valentine, k. (2013d). *New South Wales homelessness action plan extended evaluation: Illawarra HAP domestic violence project, final report* (HAP project 3.13a). Sydney: Centre for Gender-Related Violence Studies, University of New South Wales.
6. Breckenridge, J., Walden, I., & Flax, G. (2014). *Staying home leaving violence evaluation: Final report*. Sydney: Gendered Violence Research Network, University of New South Wales.
7. Griffiths, A., Zmudzki, F., & valentine, k. (2014). *Evaluation of start safely private rental subsidy: Final report for FACS-Housing NSW* (Unpublished report). Sydney: Social Policy Research Centre, Centre for Gender Related Violence Studies, University of New South Wales.
8. Purple Kangaroo Consultants. (2007). *Final report of the SHLV project evaluation*. Bega Women’s Refuge, Bega: New South Wales.
9. RPR Consulting. (2007). *Final report of the SHLV Eastern Sydney pilot project evaluation*.

Queensland

1. Queensland. Department of Communities (2012). *Initiative review: Domestic and family violence safety upgrades*. Queensland Government, Australia

South Australia

1. Cibich, G. (2001). *Port Lincoln crime prevention program: Domestic violence rapid response program interim report, September 1998–June 2000*. Adelaide: Port Lincoln Crime Prevention Program.

- Marshall, J., Ziersch, E., & Hudson, N. (2008). *Family safety framework: Final evaluation report*. Adelaide: Office of Crime Statistics and Research, Government of South Australia.

Tasmania

- Urbis. (2008). *Review of the Family Violence Act 2004 (Tas)*. Department of Justice, Tasmania, Australia.

Victoria

- Nicholson, D. (2012). *Bsafe from family violence: Business case and 2012 evaluation findings*. Wangaratta: Women's Health Goulburn North East.
- Safe Futures (2015) *Improving Safety in the Home response – 12 month pilot – Evaluation report 05.11.2013 – 05.11.2014*. Ringwood, Victoria.
- Taylor, E. (2010). *Bsafe pilot project 2007–2010: Interim evaluation report*. Women's Health Goulburn North East, Wangarratta.
- Taylor, E. and Mackay, R. (2011). *Bsafe pilot project 2007–2010: Final report*. Victoria Police and Women's Health Goulburn North East.
- Thomson Goodall Associates (2010). *Final report to Victoria Police: Family violence safety notices evaluation steering committee*. East Brighton, Victoria.
- Thomson Goodall Associates (2011). *Family violence safety notice evaluation executive summary: Family violence roundtable 2010*. East Brighton, Victoria.

Western Australia

- Cant, R., Meddin, B. & Penter, C. (2013). National partnership agreement on homelessness, evaluation of Western Australian Programs: Final report. Social Systems and Evaluation, Western Australia, Australia.

While 20 separate evaluations were analysed for this meta-evaluation, these involved only 12 different “safe at home” responses. This is partly because the authors included evaluations for both the pilot and the more established response, as well as evaluations of the same response implemented in different geographic areas. Of these 12 responses, six were assessed by the authors as “safe at home” programs, four of the evaluations were of “safe at home” policy/legislative frameworks and the remaining two response strategies no longer receive funding. The fact that these last two responses are no longer offered does not mean that their evaluation results are not useful to an examination of “safe at home” program elements. Interviews with key stakeholders confirmed that each response (both were safety alarm response options offered to clients at high risk of further violence) was highly regarded by practitioners and clients.

Appendices C and E contain lists of excluded Australian and international evaluations, respectively, with corresponding rationale.

Stage D - Content and quality assessment

The purpose of ensuring rigour and consistent review for the “safe at home” meta-evaluation is to give confidence to policy-makers and service providers to act on its findings. Stufflebeam (2001, p. 6) argues that good meta-evaluations rarely rely on simply reading the evaluation report. Therefore, the authors applied an in-depth, multi-layered approach to the assessment of the included evaluations, as outlined below.

Meta-evaluation matrix

Once an evaluation was assessed by the authors as meeting the inclusion criteria, a comprehensive summary of the evaluation was completed using a meta-evaluation matrix (see Appendix A), which includes:

- program/strategy background;
- inclusion rationale;
- key information about the evaluation; and
- assessment of the evaluation quality.

This matrix was also completed for two international “safe at home” program evaluations (see Appendix E) although these have not been included in the synthesised findings due the meta-evaluation's focus on Australia.

Consistent with good meta-evaluation practice, the authors discussed the meta-evaluation process on a weekly basis and reviewed the evaluation findings after each researcher had completed the meta-evaluation matrices for their designated evaluations.³ This ensured that all evaluations were considered by the whole research team.

The “safe at home” project team complemented the review of evaluations with key stakeholder survey data as well as select interviews with “safe at home” experts and jurisdictional representatives. This data has been integrated throughout the synthesised findings about evaluation quality and the key features of “safe at home” programs.

CASP checklist

The authors also assessed the quality and relevance of available evaluations using criteria adapted from the Critical Appraisal Skills Programme (CASP) checklist. CASP is a systematic process by which evidence is identified and appraised for trustworthiness and relevance to the research questions. The advantage of CASP is that it is designed to assist practitioners and policy-makers to make sense of evidence and assess its worth with the explicit aim of enhancing interventions and policy development in their given area.

This “meta-process” is particularly important to the emerging area of “safe at home” programs because where programs have been individually evaluated, the evidence is currently only available as a series of evaluation case studies across jurisdictions. The CASP process of comparison using common indicators enables evidence to be consolidated in order to view across individual programs what is commonly known to be valuable or a challenge in delivering effective “safe at home” programs.

³ Where a member of the project team had been involved in conducting a particular evaluation, the Analytic Process Framework and matrix were completed by other members of the team.

For this meta-evaluation, the CASP checklist was adapted to include the following analytic considerations:

1. Is the study valid?
 - Is the goal of the research relevant to this evaluation/review?
 - Was there a clear statement of research/evaluation aims?
 - Was the methodology appropriate to address the research goal?
 - Is it clear how the research participants were selected?
2. What are the results?
 - Was there consideration of how the research methodology may have impacted on findings?
 - Were ethical issues taken into consideration?
 - Was the data analysis sufficiently rigorous?
3. Are the results useful?
 - Were the findings and conclusions supported by the data?
 - Do the findings address or make comment on specific population groups and different geographic locations?

In addition, each evaluation was ranked according to the following five criteria and then graded using a Likert scale of 1-5 [1 – Poor; 2 – Fair; 3 – Good; 4 – Very good; 5 – Excellent] (Vagias, 2006):

1. Independence
Is the evaluation independent of the service/program undertaken by independent evaluators? Is it funded?
2. Properly specified evaluation goals
Did the evaluation specify goals/aims that adequately reflect the “safe at home” program/strategy being evaluated?
3. Data collected transparent and data properly analysed
Was original data collected (other than monitoring data)? Was the analysis well-explained in the report and did the data collected allow the research questions to be addressed?
4. Conclusions supported by data analysis
Were the conclusions drawn by the evaluators supported by the data analysis?
5. Conclusions directly address “safe at home” program/strategy
Do the conclusions directly contribute to our knowledge of “safe at home” strategies? Or, do you think they speak more to integrated services?

The state of evaluations of “safe at home” responses in Australia is in its infancy due to the relative newness and small scale of the majority of initiatives. As is the case with many human service programs in Australia, resources for evaluations have been rather scarce which has limited the amount and nature of the evidence. Therefore, rankings can relate more to the funding provided for and external management of evaluations, which in turn affects the quality of available evaluations. Consequently, it should be noted that there was no attempt to assess and compare the quality of evaluations or quantitative and qualitative evidence. Each evaluation was assessed against its own stated aims. In addition, the authors did not report on individual evaluations or by jurisdiction, but aggregated the rankings to provide overarching discussion of the quality of evidence. These were deliberate choices taken by the authors.

Stage E - Reporting the findings

The authors reviewed the findings of the meta-evaluation and considered the implications for good practice. Findings have been produced in the form of a narrative assessment of evaluations following the review and ranking against each primary evaluation design criteria. Narrative assessment was used because it includes the strengths and limitations of “safe at home” programs and strategies, according to the assessment criteria. Evaluations have been clustered and themed, with a focus on different types of program elements or the relationship to the “four pillars” which contribute to program effectiveness as identified in the state of knowledge paper.

Synthesis of the meta-evaluation findings: Evaluation processes and quality

The fundamental question underpinning the assessment of the quality of “safe at home” evaluation is:

- How robust are the current evaluations of Australian “safe at home” programs – can and do their findings demonstrate the effectiveness of these programs?

This question informs the first of the CASP analytic considerations – *is the study valid?* The following discussion provides a synthesis of the authors’ analysis of the quality of the Australian “safe at home” evaluations.

Independence

Is the evaluation independent of the service/program undertaken by independent evaluators? Is it funded?

Within the evaluation literature there is concern that evaluations undertaken within an organisation are not independent of the program’s interests. Scriven (1991, p. 228) describes self-evaluation as “notoriously unreliable” suggesting it is always desirable to use an independent evaluator where adequate funding is available. Having independent evaluators external to the organisation contributes to the rigour of the evaluation and is more likely to be undertaken by researchers/consultants with specific skills in evaluation. It is also assumed that an independent process will ensure that evaluation is not undertaken primarily for “political purposes” whereby the evaluation is used as a business case for extended funding or service provision.

Although not always the case, commissioning external evaluations can demonstrate commitment by “safe at home” response funders to the evaluation process. It also often allows evaluations to be undertaken over a longer period of time and – dependent on the evaluation results – may be used to attract increased funding and/or an extension of the program. Often internal reviews are conducted as “snapshots” funded by a small percentage of the total money allocated from the budget of the program. Interview and survey data collected from key stakeholders during this meta-evaluation indicate that evaluation is valued but not consistently funded in all jurisdictions, which may suggest that “safe at home” services are inadvertently forced to rely on internal review as the primary means of enhancing their practice in “safe at home” contexts. Indeed, of the 20 evaluations included in this meta-evaluation, seven were undertaken internally by the organisation. The remaining 13 were undertaken externally by consultants (n=6), evaluation units in government departments (n=2) and university researchers (n=5).

One means of scrutinising an evaluation or evaluation methodology – whether internally or externally conducted – is to undertake a peer review. In most cases, the evaluations in the “safe at home” meta-evaluation did not specify whether there was a peer review of the methodology or evaluation process. Therefore, it was difficult to ascertain whether the evaluation strategy had been subjected to external scrutiny and review prior to commencement, or monitored during the evaluation. Only four identified that the draft evaluation report was peer reviewed prior to public release. This is not to suggest that peer

reviews did not occur in other evaluations, but it may be that the evaluators did not include this information in their final reports. A further 12 evaluations did refer to an external or inter-agency stakeholder advisory committee. Although not considered to be peer-review, this is additional scrutiny which arguably contributed to the quality of the evaluation process.

Evaluation undertaken by university evaluators and those funded by government departments are more likely to be subject to peer assessment via ethics review committees constituted in accordance with National Health and Medical Research Council (NHMRC) guidelines. Seeking ethical approval ensures that the methodology of the evaluation project has been assessed as robust and ethically rigorous. Out of the 20 evaluations, 9 specified that an application had been approved by an ethics review board. This means that just under one-half of the evaluations have been reviewed by expert researchers and therefore their evaluation process must be considered robust. Once again, it is important to acknowledge that the remaining 11 evaluations may well have undertaken an internal ethics review process, but did not specify this in the evaluation report.

Properly specified evaluation goals

Did the evaluation specify goals/aims that adequately reflect the “safe at home” program/strategy being evaluated?

Conducting “safe at home” program and strategy evaluations allows funders and the organisations themselves to examine whether they are meeting the needs of women who wish to remain safely in their own home or home of their choice and ascertain whether the organisation is achieving their overall goals. To ensure that the relevant information is collected, an evaluation must specify appropriate evaluation goals which match the purpose of the program/strategy and allows the evaluation to examine the extent to which the program/strategy achieves their intended outcomes. To properly establish evaluation goals it is important to define the purpose of the program and strategy – in this case, what is meant by “safe at home”. The type of evaluation needs to be considered and usually human services evaluations are either process and/or outcome evaluations. The type of evaluation chosen directly influences the construction of the evaluation goals.

Only 5 evaluations assessed by the authors defined what was meant by “safe at home”. Of the remaining 15 evaluations, 12 relied on program/strategy descriptions to provide definitional clarity and 3 made no attempt to define what was meant by “safe at home” at all. From this level of variation, the authors concluded that there is no singly agreed definition of “safe at home” across jurisdictions. However, possibly because the definition of “safe at home” used in the evaluations relied heavily on program descriptions, the conceptual slippage in definition did not appear to overly effect the specification of evaluation goals.

Of the 20 evaluations, 12 were ranked by the authors as having “very good” (n= 4) or “excellent” (n= 8) evaluation goals. This assessment suggests that most evaluations included in the meta-evaluation demonstrated evidence of properly specified evaluation goals. Of interest, “safe at home” evaluation goals were generally dissimilar or not shared across jurisdictions. In particular, not all evaluations specified women maintaining their housing as an explicit outcome, although this could be implied from the goal of managing perpetrator risk and reducing ongoing violence.

The development of evaluation goals is shaped by a range of factors including the amount of funding available, the needs of the funding body and the purpose of undertaking an evaluation of the program/strategy. Evaluation advisory committees or steering groups may be primarily responsible for determining the evaluation questions and specified goals. These may end up reflecting the interests of the funding body and not always match the identified aims and objectives of the “safe at home” response. An independent evaluation team may be better positioned to contribute to evaluation goals that are more likely to reflect intended program and client outcomes.

Data collection transparent and data properly analysed

Was original data collected (other than monitoring data)? Was the analysis well-explained in the report and did data collected allow the research questions to be addressed?

Evaluations such as those included in this meta-evaluation involve a systematic process of obtaining information (data) to be used to assess and improve a program. Understanding how and what data was collected and then how the data was analysed is a crucial consideration when assessing the robustness of the current evaluations of Australian “safe at home” programs/strategies. Data collection in evaluation is dependent on the available funding which in turn directly affects the time available for data collection and the nature of the data collected. Where funding and timeframes are short term, data collection by necessity relies on “snapshots” provided by combinations of monitoring data, qualitative methods such as interviews and focus groups and program documentation/case file analysis. Without wanting to diminish their potential usefulness, relying solely on such data collection methods means that it is impossible to ascertain changes from commencement to service completion, or to ascertain the sustainability of outcomes post-service completion.

In this meta-evaluation, 14 out of the 20 evaluations were assessed as “very good” (n= 7) or “excellent” (n= 7) in relation to the transparency of data collection methods. The remaining six evaluations provided less detail regarding factors such as study design, data collection and participant sampling, and less clear connections between the collected data and conclusions. In the case of these six evaluations, the analysis of data often remained at a descriptive level and did not extend into critical inquiry. The “safe at home” evaluations featured data collected from multiple sources including primary data, as well as secondary analysis of monitoring data, case files and program documentation. Almost all (19 of the 20 evaluations included in the meta-evaluation) evaluations collected qualitative data via interviews and focus groups involving clients, workers/managers and key stakeholders, while the remaining report presented narrative descriptions of several cases. Qualitative data collection such as this can provide a rich description of interventions and capture perceptions about why an intervention is experienced as helpful. Surveys were implemented in 12 evaluations; however, the analysis of both quantitative and qualitative studies was not always well detailed. Only two evaluations specified the use of outcome scales and measures and provided a detailed explanation of their analysis and outcome data.

A frequent question asked by funders is whether a program or response is “effective”. Hence, it is important that this meta-evaluation comments on how evidence of “effectiveness” is understood from a research perspective. Researching

“effectiveness” requires a particular methodological approach to ensure that the intervention – in this case the “safe at home” response – can be identified as responsible for any change in a client’s presenting issue/situation. In research, the term “effectiveness” is commonly measured by a range of quantitative methods, including randomised control trials (RCTs) and systematic review. The relevance of understanding the research definition of effectiveness for this meta-evaluation is that “safe at home” responses do not lend themselves to RCTs for a range of reasons not limited to, but including the following:

- Establishing “effectiveness” from a research perspective requires the inclusion of a control group who do not receive the treatment under study. Denying some women a “safe at home” response which may be potentially helpful, is a clear ethical concern.
- The ethical and implementation difficulties involved in RCTs in this area of research make it difficult to establish whether outcomes following the receipt of a “safe at home” response can be directly associated with the intervention, or with changed life circumstances or a combination of both.
- Ongoing perpetrator violence and harassment is unable to be predicted or controlled for and can affect client outcomes.
- RCTs and systematic reviews are costly and need to be conducted over longer periods of time which would preclude their implementation in most evaluation processes.

It is important to provide one last comment on taxonomies of evidence created by institutions such as the Cochrane and Campbell Collaborations⁴ and how they privilege particular types of methodologies and research designs as being more “scientific” and therefore having greater credibility. An unintended consequence of this methodological preference is that fewer studies can be considered to contribute to the evidence base (Breckenridge and Hamer, 2013). While such taxonomies are increasingly challenged to allow definitions of evidence to become more inclusive, a singular focus on “effectiveness” is unlikely to encompass the lived experience of women accessing the service and the service provider’s experience of providing “safe at home” responses. The lack of these “voices” can mean that assessments of a particular response’s helpfulness and its potential to produce beneficial “real world” outcomes for clients, is excluded from research and the evidence base.

Perhaps because of these stated difficulties, effectiveness is rarely investigated in evaluations and in this meta-evaluation, none of the included evaluations implemented methodologies that allow for comment on the effectiveness of the “safe at home” response.

4 See www.cochrane.org/cochrane-reviews

Conclusions supported by data analysis

Were the conclusions drawn by the evaluators supported by the data analysis?

Both the validity and credibility of any study are dependent on the conclusions of the evaluation being supported by the data analysis. Given that the purpose of doing this type of evaluation is to ensure that programs are responding to client needs to the best possible extent, it is important that the analysis of evaluation data supports the conclusions drawn by the evaluator. The conclusions of any study must match the chosen methodology. For example, it is impossible to comment on the measurement or relationship between particular phenomena unless a quantitative methodology using inferential statistics is implemented. Conversely, it is impossible to draw conclusions about individual experience or perceptions of clients, workers and stakeholders unless qualitative data collection methods are utilised.

The authors examined the data analysis of each evaluation and while the analytic methods were not always described in detail, most evaluations did not make claims beyond what the data allowed. For the support provided by the data analysis to the conclusions of the study, the authors assessed 17 out of the 20 evaluations as “very good” (n= 3) or “excellent” (n= 14). This is a further indication that the majority of evaluations in this meta-evaluation can be considered robust.

Conclusions directly address “safe at home” program/strategy

Do the conclusions directly contribute to our knowledge of “safe at home” strategies? Or, do you think they speak more to integrated services?

The usefulness of conclusions for the specified practice context must be considered an overarching aim of all program evaluations. The critical issues of women’s risk and safety underpin all practice in “safe at home” contexts; therefore conclusions drawn from the evaluations should carefully consider these issues in recommendations made for future practice.

In this meta-evaluation, 17 of the 20 evaluations were assessed as “very good” (n= 2) or “excellent” (n= 15) in relation to the conclusions directly addressing outcomes and learnings to enhance current practice in “safe at home” responses. However, it is worth noting that while most evaluations have drawn conclusions directly addressing outcomes and learnings to enhance current practice, it is equally the case that we have not been able to compare “like with like”. This is because responses vary across jurisdictions in how they are organised, what is offered, the organisations participating and the policy and legislative contexts in which they operate. These differences can negate clear conclusions about the results and evidence being drawn. In Australia to date, no evaluation has been comprehensive enough to provide definitive evidence of which outcomes and program elements work best. Nevertheless, there are early indications from our analysis of the evaluations that “safe at home” provides an important option to some women and children and may prevent them from becoming homeless and/or living in continuing housing crisis.

Synthesis of the meta-evaluation findings: Key features of “safe at home” responses

The evaluation questions underpinning the identification of the key features of “safe at home” responses are:

- What are the key program elements of all current Australian “safe at home” programs?
- What practice approaches have been shown to be effective in enhancing women’s safety and allowing them to remain in a home of their choice?
- What evidence exists that current Australian “safe at home” programs are effective for diverse population groups and diverse geographic locations?
- What does the existing evidence suggest are the relevant policy and legislative contexts to effectively implement “safe at home” programs across jurisdictions?

These questions inform the second and third of the CASP analytic considerations – *What are the results and are the results useful?*

- Does the evidence indicate that there are specific conditions under which “safe at home” is not going to be a viable and safe response for some women and children?
- What evidence is currently not available about “safe at home” programs and would be valuable knowledge to inform future policy and programming? Were there important areas not covered by the evaluations under review?
- What is required to improve “safe at home” programs in the future either through increased population reach and/or program elements?

Not all of the evaluation questions will be separately addressed but may instead form part of the overarching meta-evaluation discussion which is structured around the four pillars detailed in the state of knowledge paper. These pillars were developed inductively from the “safe at home” literature and can be summarised as:

- a focus on **maximising women’s safety** using a combination of criminal justice responses – such as legal provisions to exclude the perpetrator from the home and protect victims from post-separation violence, proactive policing, safety alarms and home security upgrades;
- a coordinated or **integrated response** involving partnerships between local services;
- “safe at home” as a **homelessness prevention** strategy – which includes ensuring women are informed about their housing options before the time of crisis and at separation, and provides support for women to maintain their housing afterwards; and
- recognition of the importance of enhancing **women’s economic security**.

What is “safe at home”?

The 20 included evaluations indicate that “safe at home” responses are currently offered as a suite of initiatives and/or programs that can be implemented individually or in various combinations to address women’s differing needs post-separation. It should be noted that while 20 evaluations were included, they only covered 12 separate “safe at home” responses.

Common elements of “safe at home” responses identified from the evaluations include:

- An explicit or implicit goal of assisting women to remain in independent accommodation – 14 evaluations explicitly listed homelessness prevention as a program goal; 12 evaluations listed it as an evaluation goal; and an additional five evaluations noted that women may be able to maintain their housing if the perpetrator is removed.
- Safety planning and risk assessment in conjunction with the woman and other agencies – 12 evaluations noted the use of common risk assessment tools for women; only two evaluations noted the program’s use of a risk assessment tool for the perpetrator; and 18 evaluations recommended the use of dynamic/on-going assessments of risk
- The use of protection orders and ouster/exclusion provisions – only six evaluated programs required an exclusion or ouster order for program entry; and another three specifically noted in their evaluation report that this inclusion criteria had to be dropped because of the difficulties of obtaining these orders.
- Brokerage funds that provide security upgrades such as alarms, security doors and window grilles: 11 evaluations noted brokerage as a feature of the “safe at home” response; six evaluations noted the use of safety alarms; and 10 evaluations noted the use of safety upgrades to properties.
- Strategies to enhance the economic security of women to enable them to stay in their own home and remain financially independent of their ex-partner – four evaluations noted the importance of focusing on women’s financial security either by accessing subsidies or promoting women’s employment or return to the workforce.
- Support and advocacy on behalf of clients – 18 out of 20 evaluations specifically noted the response involved the provision of support and/or advocacy with agencies involved in integrated service provision.
- Capacity building of local interagency partners to facilitate a coordinated response – all evaluations noted that “safe at home” responses were offered within an integrated framework; nine evaluations noted integrated service provision as an evaluation or program goal; and eight identified the importance of capacity building of local partners.

The analysis of “safe at home” responses and their evaluations across Australia have highlighted the diverse approaches and

strategies that have been implemented. In summary, while we are able to identify key elements, there is no single model of “safe at home” that operates across jurisdictions. These definitional and operational differences create methodological challenges for the meta-evaluation process because the lack of agreed understanding of Australian “safe at home” responses means we are not comparing “like with like”.

The ubiquity of the descriptor “safe at home” assumes self-evident agreement and that the term is well understood in both policy and practice. However, most of the evaluations did not define what was meant by “safe at home” apart from within the program description and why their program/strategy should be considered as such. In addition, the evaluations indicated limited cross-jurisdictional agreement on the definition of what constitutes a “safe at home” response.

From the authors’ analysis, it became apparent that jurisdictions broadly conceptualised and offered “safe at home” responses in one of two ways. The first is integrated criminal justice strategies focusing on safety by managing perpetrator risk via protection orders and ouster/exclusion provisions. Maintaining independent housing may or may not be an explicit goal in this type of “safe at home” response. Rather, women’s safety is the primary focus and is addressed by managing perpetrator risk and potentially excluding the perpetrator from the home by using criminal justice strategies (mainly protection orders and ouster/exclusion provisions). These “safe at home” strategies may be understood as contributing to crime prevention and ensuring perpetrator accountability. Other identified integrated criminal justice strategies which may be implemented alongside managing risk and intervention provisions include safety alarms and security upgrades. However, not all of these strategies are exclusively “safe at home” and may be used by any woman leaving domestic and family violence, or any person who is at risk of violence perpetrated by another person.

The second conceptualisation is of “safe at home” programs focusing explicitly on women staying in independent accommodation (their own home or a home of their choice) with or without protection orders and ouster/exclusion provisions to address safety concerns. These programs focus on women and their children, and usually provide case-management to assess risk, manage safety planning and consider women’s needs over a longer period of time. There is a tendency for these to be called “stay at home” schemes which reflects the primary aim of women and their children remaining in independent accommodation – for example, the Staying Home Leaving Violence Program in NSW. These programs are housing-focused, but do not necessarily have a narrow definition of housing needs.

These two different conceptualisations of “safe at home” responses broadly align with the legislative and policy context of the

jurisdiction within which they are offered. As all “safe at home” responses are embedded within integrated service frameworks, it is not surprising that the lead agency in the integrated intervention response may dominate in the development and focus of the “safe at home” response in their jurisdiction. It is therefore useful to make a distinction between: “stay at home” programs which provide clients with a cohesive range of strategies intended for women to remain independently in their home or one of their choosing; as opposed to the support of individual strategies such as criminal justice responses to the perpetrator, safety alarms and brokerage which can be provided by a range of agencies to assist women to stay in independent accommodation of their choice.

In summary, the meta-evaluation showed that there is no shared agreement of what constitutes a “safe at home” program or initiative. Very few of the evaluations attempted to define the meaning of “safe at home”, and the purpose/aims of the evaluations differed across jurisdictions. This means that identifying what is “good practice” from the included “safe at home” evaluations was not straightforward and can be highly contested.

Key features in relation to the four pillars

As described in the previous section, the 20 evaluations had diverse aims and methods, and what they were evaluating as “safe at home” responses differed considerably across jurisdictions. Hence, the four pillars – maximising women’s safety, integrated response, homelessness prevention and women’s economic security – were used to organise and cluster evaluation findings across jurisdictions. The evaluations reflected each of the four pillars either individually or in various combinations as underpinning program elements. The **nine** evaluations of “safe at home” programs offering client case management were more likely to encompass all four pillars; whereas evaluations of “safe at home” strategies tended to focus on one pillar. This latter point is demonstrated in the following example, enhancing women’s economic security is the focus of the Start Safely Rental Subsidy for women who have left a violent relationship and seek assistance with their rental payments to maintain independent housing.

“Safe at home” program elements and their usefulness, as identified through the evaluations will now be discussed in relation to each of the four pillars.

Maximising women’s safety

All the evaluations noted the importance of maximising women’s safety as part of any “safe at home” response. Moreover, “safe at home” was specifically noted in some evaluations to be a more socially just option for those women where the known risk posed by the perpetrator did not preclude them from staying in their home. Only five of the 20 evaluations explicitly commented that “safe at home” responses may not be viable for every woman, although arguably, this point may have been implied in a majority of the remaining reports via the identification of barriers to women remaining in the home. The more general barriers identified included restrictive legislative and policy provisions, economic abuse and financial insecurity, difficulties with timely intervention from police and the reluctance of some magistrates to grant exclusion orders. Some evaluations identified factors specific to individual safety which may mean “safe at home” is unsuitable – for example, when the perpetrator knows the location of the home and where it is also assessed that the perpetrator may not be deterred by safety alarms or other provisions such as protection orders; or where an exclusion order is not in place.

Risk assessment

Women’s safety and the assessment of risk are fundamental elements of all “safe at home” responses. However, the evaluations did not always contain detailed comments on the use of risk assessment tools, or even if tools and protocols were used. It can be hypothesised that safety planning is routinely undertaken

as part of all “safe at home” responses, but was not specified as a focus for evaluation. Indeed, the absence of risk assessment discussion in an evaluation report does not mean it did not feature in the program in question.

Nevertheless, when risk assessment was identified, the implementation and tools/protocol varied. Twelve of the 20 evaluations noted the use of risk assessment tools in the respective “safe at home” responses. These tools were sometimes named: the Comprehensive Risk Assessment Tool or CRAF was mentioned in five evaluations, all of which were in Victoria; and the Domestic Violence Safety Assessment tool DVSAT was also mentioned. The remaining evaluations referred more generally to assessment protocols developed by program workers, but these protocols may or may not have been shared by organisations across the same program or jurisdiction. It was not always evident from the evaluation findings exactly how practitioners identified women to be at an acceptable or unacceptable level of risk to remain in independent housing and how their level of risk may or may not have informed safety planning.

The evidence from the included evaluations strongly suggests that a dynamic risk assessment process (i.e. which captures changes to women’s circumstances) should be implemented. Eighteen evaluations identified the importance of risk assessments being conducted as dynamic assessments undertaken at multiple points in time, thereby allowing practitioners to respond more specifically to women’s changing safety and risk circumstances. Five evaluations, all of which were from NSW, called for the introduction of common risk assessment tools in their jurisdiction. While 15 evaluations did not recommend the development of risk assessment tools (many noted that tools had already been developed in their jurisdictions or within their individual programs), three evaluations in NSW and Victoria recommended that ongoing training in specialised domestic violence risk assessment should be delivered across the sector, and in particular to the police. However, given that older evaluations may not reflect current policy and procedures, it is possible that recommendations made in these evaluations had already been achieved or superseded.

Some of the evaluations noted that perpetrator risk and the potential for ongoing violence was an alternative to focusing only on engaging women in an assessment of their safety. Two evaluations identified the need to better monitor perpetrator violence via more proactive policing. While few evaluations specifically recommended more proactive policing, three other evaluations noted that further domestic violence training for the police was needed. Five evaluations recommended the development of perpetrator programs (that hold the perpetrator accountable for their violence) as a support for “safe at home” responses. Two evaluations in WA and Queensland noted that

perpetrator programs were already in place in their jurisdictions. Only two evaluations reported their programs utilised a separate risk assessment of the perpetrator. Select evaluations commented that in jurisdictions where a common risk assessment framework is used, it is critical that the assessed risk for “safe at home” clients is able to be shared across agencies, particularly where other agencies have information about the risk of the perpetrator.

Intervention/protection orders

A selection of the evaluations noted that men being made to leave the family home by the use of exclusion/ouster provisions via intervention orders are one means by which the perpetrator can be held accountable for their violence. The *Review of the Family Violence Act 2004 (Tas)* undertaken by Urbis (2008) describes an exemplar of legislation designed to both manage perpetrator risk and hold them accountable for their violence. All evaluations noted that civil law protection orders were a key component of implementing “safe at home” responses. In some jurisdictions, there was an assumption that “safe at home” service provision was contingent upon women having intervention/protection orders; and all **six** of the Victorian evaluations required women to have both a protection order and an exclusion order to access the programs. One NSW evaluation (Staying Home Leaving Violence final evaluation) noted that the exclusion order requirement, while originally included as a service entry criteria for the program, was later removed. This is because magistrates were often unwilling to grant these orders, inadvertently blocking some women from accessing the service. An evaluation from Queensland (Safety Upgrades) noted the program had relaxed its original criteria to accept clients who did not have an ouster order, “but require(d) similar assistance to remain safely in their homes where exclusion from the service would cause undue hardship” (p. 19). The authors of the evaluation recommended that this so-called “hardship clause” be clarified.

The examples just cited demonstrate the significant influence of legislation and magisterial discretionary decision-making on whether women and their children are able to even consider remaining in their home following domestic violence. Most evaluations were reliant on monitoring data to provide the number of clients with protection orders in place, including the required exclusion or ouster conditions. Twelve of the 20 included evaluations noted that the respective programs had recorded case information on protection orders, with two of these evaluations also keeping highly detailed data on breaches of protection orders. One evaluation noted that protection order data was not always available or recorded for all clients, while some other reports merely mentioned the recording of data and did not give a detailed analysis.

Furthermore, the experiences of women in private rental properties were affected by their respective Residential Tenancies Acts. Some jurisdictions allow for the name on the lease to be changed where an exclusion order is in place; whereas in other jurisdictions this is not the case, so women face not being able to exclude the perpetrator. Women with exclusion or ouster orders and living independently in the family home or a home of their choice, rely heavily on police and courts to effectively respond to breaches of orders to maintain the home. While this is not unique to “safe at home” clients, it is particularly critical for them when the perpetrator knows the location of their home.

Safety alarms and proactive policing

For most women, the police response is critical to their escaping a violent partner and being able to remain safely in their home. The examination of Family Violence Safety Notices in Victoria by Thomson and Goodall (2010) demonstrates legislative and policy innovation designed to improve the adequacy and consistency of police risk assessment and the management of immediate perpetrator risk.

The findings of the evaluations did not always quantify the numbers of women who had sought police assistance for domestic violence. However, data gathered from worker interviews reported in evaluations indicates the importance of close collaboration with the police, as well as ensuring that the police do not only consider the option of removing the women and children to a refuge and leaving the perpetrator in the family home. Proactive policing was reported as critical to enhanced safety for women, with two evaluations specifically calling for more proactive police responses and five evaluations recommending domestic violence-specific risk assessment training for the police. Qualitative data presented in most of the evaluations indicated that women did not always feel supported by the police response.

Of the 12 “safe at home” responses evaluated in the 20 included evaluations, six included the use of some form of victim safety alarm. The more recent evaluations – such as the reports on Staying Home Leaving Violence (NSW), Improving Safety in the Home Response (Queensland) and Safe at Home (Western Australia) – noted priority police response accompanied the use of the alarm. The most recent evaluation of the SOS alarm used by Staying Home Leaving Violence (SHLV) clients in NSW demonstrated an increase in hopefulness and decrease in fear by women at service completion via the use of outcome measures. However, it is not possible to attribute these changes solely to the alarm given that the women were also receiving the SHLV service concurrently. In general, the lack of a control group means that it is not possible to comment on the effectiveness of an individual component of the overall response.

Evaluations of safety alarms and proactive policing suggest that these additional program elements can further enhance women’s safety and increase their self-efficacy and confidence. Nevertheless, greater understanding is needed of how safety alarms can be implemented to best support women who are at high risk of violence or potential lethality.

Brokerage funds

The evaluations of five programs which identified brokerage as a core program element suggest that the availability of brokerage funds for “safe at home” responses is critical to practically supporting women to live safely in independent accommodation. The criteria for the use of brokerage funds varied across jurisdictions, ranging from the narrow interpretation of being used only for security upgrades on a property (as is the case for Staying Home Leaving Violence in NSW) through to longer-term support such as increasing the sustainability of women’s future living arrangements (e.g. DV Homelessness Action Plan program in NSW, Safe at Home program in WA). Moreover, the amounts available for brokerage are not consistent across programs. The evidence suggests that a wider range of criteria for the use of brokerage funds enables “safe at home” responses to be tailored more towards individual needs and enables consideration of longer-term goals. The flexible use of brokerage funds (i.e. in addition to safety upgrades to properties) can have long-term benefits in sustaining a tenancy and/or a safe return to employment.

More wide-ranging use of brokerage funds identified in the evaluations included:

- Payment for emergency accommodation for perpetrators so they could be removed from the home (Family Safety Upgrades in Queensland).
- Repairing damage to the home caused by the perpetrator, which had the benefit of sometimes sustaining tenancies and ended women re-living experiences of violence by having to live with the damage on daily basis (NSW DV Homelessness Action Plan Evaluation).
- Payment of study fees to enable a woman to complete a course whereby she would then be more employable (NPAH WA Programs).
- Payment of a driver’s licence that had expired so the woman could drive to seek employment and attend to housing and shopping for her family (NPAH WA Programs).

As reflected in the qualitative data, where home security upgrades were implemented, they were very highly valued by women. However, the provision of upgrades has not always been straightforward. Some private landlords did not approve of the upgrades, and in another situation the strata rules of a housing complex made it difficult for a full range of upgrades to be installed. The evidence suggests that situations such as

these create ongoing difficulties for “safe at home” programs offering upgrades to home security.

Continuing support and case management

A notable strength of some “safe at home” programs was the capacity to offer longer-term wrap-around support, case management and ongoing safety planning with women. To date, the majority of responses to women leaving violent relationships have focused on crisis intervention. The longer-term intention and approach of “safe at home” stands out against other domestic violence interventions. The evaluation findings suggest that some women require wrap-around support over a longer period of time to best support them remaining safely in their accommodation of choice. Ongoing perpetrator violence prompted by triggers such as long-term Family Court matters or other life circumstances mean that women may not be free from violence and harassment for longer periods of time than most interventions allow for.

In addition, the recent NSW Staying Home Leaving Violence and the WA National Partnerships Against Homelessness evaluations identified case management as allowing women to collaboratively consider a flexible suite of “safe at home” strategies to assist their situation. In these particular programs, service provision is aligned with individually tailored case plans that are formed as part of the partnership between the woman and her worker. While there has not been a study of the relationship between sustaining accommodation and length of intervention, the evaluations indicated that there is a likely relationship – particularly given the complex nature of women’s experiences.

Eight of the 20 evaluations explicitly noted that some clients had moved out of the family home into a home of their choice. However, it is important to note that this “choice” may be less than voluntary and may require support beyond the crisis period. As has been noted in the state of knowledge paper, women may not remain in the family property or other accommodation as it might be too expensive on a single income. Alternatively, women may experience living in the home as re-traumatising and therefore wish to move. The availability of a program that is beyond the crisis period and is oriented to strengthening women’s economic and housing position over a longer period of time is important for women’s and children’s outcomes. These evaluations suggest that in order to promote sustainable independent housing, safety and economic security, it is critical that “safe at home” responses are offered in conjunction with longer-term case management and support.

Integrated response

Government and professional recognition of the complexity of providing a “safe at home” response has led to each jurisdiction

specifying that integrated responses, as well as the coordination of a range of government and non-government organisations, are policy goals. An overall review of the evaluation findings makes it clear that providing a “safe at home” response that is useful for women requires knowledge of more than one area of practice expertise. Skills and knowledge about housing subsidies, risk assessment and referral that meet women’s changing needs over time are enhanced by working closely with other agencies. All 20 “safe at home” evaluations identified an integrated response as pivotal to ensuring that all parts of the service system work collaboratively and in partnership to deliver holistic support to women who choose to remain in their own home, with nine evaluations referring to integrated responses in the goals of either the program or the evaluation itself.

However, the way in which the evaluations defined an “integrated response” or “integrated framework” differed according to the jurisdiction and the particular policy and legislative arrangements in place. Three evaluations noted the heavy responsibility placed on workers to secure collaboration at the local level and recommended formal partnership agreements to cement organisational relationships. The evaluations of several “safe at home” responses (e.g. the NSW Homelessness Action Plan services and Staying Home Leaving Violence) indicated that workers from the services had a role in educating other organisations/sectors about the needs of women in “safe at home” programs, in addition to working with clients. The most recent NSW Staying Home Leaving Violence evaluation noted that due to high staff turnover in the sector, formal MOUs are important to the ongoing development of partnerships.

Sustaining partnerships with key agencies at the sector level is fundamental to the “safe at home” approach. One important benefit of being part of an integrated response framework is the capacity to share information at the sector and local levels so that risk and safety can be assessed over time according to women’s changing circumstances. The sharing of information about the risk posed by the perpetrator can enable a much more accurate assessment of the dangerousness of the situation for the victim(s). The evaluation of the Family Safety Framework in South Australia (Marshall et al., 2008) is an example of the use of collaboration between organisations via case conferencing – “Family Safety Meetings” (FSMs). These FSMs involve meetings between a range of agencies which assess cases of domestic and family violence to be at imminent high risk using a common risk assessment tool. Integrated responses can also offer important networks for “safe at home” staff to share information that promotes the longer-term safety and support of women and children escaping domestic violence.

None of the evaluations were able to establish that an integrated framework contributed to the success or otherwise of the “safe at

home” response except through qualitative comment collected in interviews and focus groups with workers, clients and key stakeholders. It is reasonable to hypothesise that the difficulties of evaluating the effectiveness of an integrated response framework contribute to this lack of available evidence to date.

Homelessness prevention

The state of knowledge literature review demonstrated that domestic violence is one of the main reasons women seek assistance from specialist homelessness services. All of the 20 included evaluations recognised that leaving a violent relationship places women at risk of homelessness and financial insecurity. A correlative theme across the evaluations was that where women struggled to maintain independent accommodation, they were more likely to return to the perpetrator. The qualitative data documents significant disruptions to the support networks and ordinary lives of women and children escaping violence when they are forced to flee the family home at short notice. This was a finding across all the evaluations. The most recent Staying Home Leaving Violence (NSW) evaluation report notes that the conceptual shift to a home of the woman’s choice marks a greater recognition that “safe at home” programs allow women to remain housed without always having to enter specialist homelessness services at the time of leaving or longer term (Breckenridge et al., 2014, p. 26).

The provision of crisis accommodation such as refuges and other specialist homelessness services is recognised by the evaluations as remaining a necessary part of service responses to domestic and family violence. However, the reports note that many women desire to remain with their children in their home and connected to social networks, employment, extended family, and children’s schooling and friends. A planned move can mean less disruption in the lives of women and children over time. Nevertheless, it is important to note that the evaluations did not explore in detail what actually assists women to remain safely in the home. Enhanced safety may have been stated or implied as a crucial contributing context within the evaluations or the responses themselves, but exploration of the factors that empower women to remain safely in their home or the home of their choice was not a focus of the Australian evaluations included in the meta-evaluation.

Some general comments can be made regarding housing outcomes for “safe at home” clients, but not all evaluations specifically remarked on housing outcomes. While 14 of the 20 evaluations noted the program being reviewed did explicitly aim to support women in maintaining or securing safe and independent housing, only 12 of these same reports intended to evaluate housing outcomes and their sustainability. The evaluations that explored housing outcomes tended to be those that delivered a “safe at home” response as part of a program

and in the context of ongoing case support for women (e.g. Homelessness Action Plan Domestic Violence evaluations [NSW]; Staying Home Leaving Violence [NSW]; Domestic Violence Crisis Service [ACT]; Safe at Home [WA]). The evaluations that did not analyse housing outcomes either as an aim of the program or the evaluation (n=6) tended to be the “safe at home” responses that adopted a criminal justice approach (e.g. the Family Safety Framework evaluation [SA]; Family Violence Safety Notices [VIC]; Bsafe [VIC]; Safety Upgrades [QLD]). The strategies represented in these latter evaluations focus mostly, but not always solely, on the exclusion of the perpetrator from the home. It can be argued that exclusion of the perpetrator implies facilitating women to remain in the family home; however, perpetrator exclusion alone does not guarantee positive housing outcomes for women.

Not all evaluations were able to provide longer-term monitoring data indicating whether women were able to remain in their home, but eight program evaluations did provide outcome data demonstrating that while not all women were able to remain in the home of their choice, a substantial number were able to do so. These evaluations showed that some women moved to another home – although, still one of their choice. The monitoring data does not always allow comment as to why women may or may not have been able to stay; however, qualitative data often indicated that this was because they could not afford rent or mortgage repayments on a single income. The evaluations revealed that there are many more contextual and personal factors that contribute to women’s housing outcomes than simply the removal of the perpetrator from the home. These include but are not limited to financial insecurity, ongoing perpetrator harassment and violence, lengthy and costly family court matters and lack of family and other support. The benefits of understanding both individual factors and the constellation of factors which might contribute to women maintaining their independent housing should be taken into account when examining the impact of “safe at home” responses in future research and evaluations.

Women’s economic security

Promoting economic security for women leaving a violent partner is acknowledged in the literature as being a crucial factor in ensuring women maintain their housing and where possible, avoid poverty associated with homelessness and economic abuse perpetrated during the relationship. Interviews with clients reported in a few of the evaluations did identify economic abuse as contributing to financial insecurity, and in women’s own narratives this did affect their confidence to manage their financial circumstances including their capacity to maintain housing.

However, the evaluations mostly did not specify evaluation questions or goals pertinent to better understanding women's economic security, with only three of the 20 evaluations mentioning women's economic security in either the program or evaluation goals. Twelve evaluations broadly discussed economic security, linking it with women's capacity to remain in employment or to seek further skills in order to re-enter the workforce. Eleven of the evaluations noted the use of financial brokerage in the related programs. Arguably, the lack of attention paid to this issue in the evaluations reflects the relatively recent recognition of economic abuse as a distinct and equally serious form of domestic violence. Given the evidence from the literature combined with findings from the included evaluations, it is recommended that safety planning and longer-term case management for "safe at home" clients go beyond housing needs by taking into account the material realities of women's lives and incorporating financial safety strategies.

Diversity and inclusion

Many, but not all of the evaluations, explicitly considered the needs of diverse client groups when assessing "safe at home" responses. None of the **20** evaluations reviewed noted that diversity was included in the aims of the respective programs, while only **two** evaluations had diversity-related evaluation goals. **Fifteen** of the evaluation reports included monitoring data documenting the numbers of clients accessing programs who identified as Aboriginal and Torres Strait Islander; with only **two** of these evaluations exploring the effectiveness of "safe at home" for this group via in-depth case studies or discussion of qualitative data. **Fourteen** evaluations noted the number of culturally and linguistically diverse (CALD) clients accessing each program, with only **three** of these reports including comments on the experience of the "safe at home" response for this group of clients.

The number of clients reporting a disability was recorded in the monitoring data collected for **13** of the evaluations, but there were only **two** programs which specifically explored the effectiveness of "safe at home" programs for this group. It is possible, however, that some clients did not disclose their disability or cultural background. While **14** evaluations provided monitoring data for rural and/or remote clients, none of the evaluations discussed the effectiveness of "safe at home" for this specific group of clients. Nevertheless, **15** evaluations discussed the needs of rural/remote clients and barriers to accessing "safe at home" responses. Many reports noted that women in rural and remote locations were not always eligible for "safe at home" programs due to the lack of ability to offer a prompt police response in geographically remote areas.

Overall, the available evidence demonstrates that there is currently a reliance on program monitoring data which records diverse identifiers, but rarely links these with specific client outcomes. It is therefore difficult to draw conclusions regarding the usefulness of "safe at home" responses for women from these different cohorts. Flexibility of service provision was named in **eight** evaluations as a key strength in work with Aboriginal and Torres Strait Islander and CALD communities in particular. **Twelve** evaluations recommended that future "safe at home" programs be more tailored to cultural needs in particular.

Conclusions and future directions

Considerations for future evaluations

This meta-evaluation has demonstrated from the “safe at home” interventions under review that they may share conceptual goals at different points in time. However, the definition of what constitutes a “safe at home” response is not standard or even agreed across jurisdictions. A complicating aspect of all “safe at home” research evidence is that programs vary in how they are organised, what is offered, the organisations participating (e.g. the extent to which they are an integrated response), and the policy and legislative context in which they operate.

Therefore, in reviewing evaluations of “safe at home” responses, the authors have not been able to compare “like with like” which is one factor negating clear conclusions about evidence being drawn. This means identifying what is “good practice” from “safe at home” evaluations is neither straightforward nor simple, and can be highly contested. Lamont (2000, p. 2) makes the point that without shared knowledge of research, there is unlikely to be any meaningful translation at either the jurisdictional or direct practice level. The authors therefore recommend that COAG/ANROWS lead a national conversation engaging jurisdictions and key stakeholders focusing on developing a shared cross-jurisdictional understanding and definition of “safe at home” as a response to DFV.

While most of the evaluations included in this meta-evaluation provide rich, detailed data, there remain a number of gaps in our understanding of how best to provide “safe at home” responses. It may also be that excellent programs are not represented to best effect if their evaluations were not well-designed and rigorously executed. Additionally, evaluation design may not focus on questions other than those of immediate interest to the funding body, thereby limiting the inclusion of other areas relevant to “safe at home” service provision. It is therefore important to plan for the most robust evaluation process possible, by ensuring that “safe at home” evaluations are adequately funded and resourced, externally evaluated where feasible, and subject to some form of peer or ethical review process during the development of the evaluation strategy.

The authors are also aware from the mapping of “safe at home” initiatives and programs that there are “safe at home” responses which have not been evaluated yet. This means that the findings of the meta-evaluation are not informed by all currently funded “safe at home” responses. These limitations are worth noting and provide a context from which to fully consider the evidence presented in this report. As a first response, each jurisdiction

could encourage a “culture of evaluation” at both the sector and organisational levels to ensure that evaluation is a priority for all “safe at home” programs and intervention strategies.

Any future evaluation of “safe at home” responses needs to recognise that effectiveness studies are difficult to implement in DFV practice contexts. At the same time, it should be acknowledged that evaluations which implement methodologies other than RCTs may still be robust and provide meaningful results which are also clinically useful. Another specific limitation affecting all DFV program evaluations is the extent to which outcomes can be meaningfully measured given the potential for ongoing perpetrator harassment and violence to affect outcomes for women. For example, a woman’s capacity to maintain a rental tenancy can be compromised by a perpetrator damaging the property and/or harassing her in the workplace which could affect her employment and potentially her capacity to pay rent and remain financially independent. Identifying what constitutes a successful outcome is also a vexed issue. For example, an increase in breaches of a protection order can be interpreted to mean that a woman is less safe in independent accommodation; or alternatively that she has increased self-efficacy and is more able to contact police, and that the police are more responsive in ensuring her ongoing safety.

A fundamental question that remains unanswered by the evaluations is: when is “safe at home” not safe and what factors or circumstances suggest that it may or may not be a viable option for some women? The evaluations do clearly acknowledge that “safe at home” responses are not appropriate for all women leaving a violent partner. However, the caveat that a woman can remain in her own home where it is safe to do so, while correct, does not necessarily provide any more specific information about how this should be assessed and why some women feel determined to achieve this goal regardless of ongoing perpetrator abuse. Future “safe at home” evaluations should aim to further explore the contextual and personal factors that contribute to women remaining safely in their home or the home of their choice. Similarly, it is equally important to understand what is contributing to women’s safety to enable women to remain in their home independently and over time. The lack of longitudinal studies in this area means that our knowledge of client outcomes over the longer term is limited.

It is important that the findings of this meta-evaluation are shared and disseminated for optimal translation to policy

and practice. There needs to be a strategic process established whereby evidence produced from “safe at home” evaluations is collected and translated back into program development. Professional development activities (including supervision, external consultation, conferences, and peer support) should be supported by organisations and funding bodies to assist in cultivating a “culture of inquiry”. These should include discussion of “practice-informed research” to better inform “safe at home” workers and managers about how to take advantage of existing research and consider priority areas for future research.

Considerations for future “safe at home” policy and practice

The four pillars of “safe at home” responses identified in the synthesis of the literature – maximising women’s safety, integrated response, homelessness prevention and women’s economic security – were evident across the 20 included evaluations. However, emphasis on one or more pillars varied among the evaluations, and the interventions focused on different pillars at different times. The included evaluations indicated that a fundamental underpinning of all “safe at home” responses is an integrated service framework either at the sector or local agency level as women’s needs after leaving a violent relationship frequently require a coordinated approach. Maximising women’s safety and homelessness prevention were also universally noted, and it became apparent that either one or the other of these two pillars was reflected as the predominant pillar in the evaluated “safe at home” responses, as follows:

- *Integrated criminal justice strategies focusing on safety by managing perpetrator risk via protection orders and ouster/exclusion provisions.* Maintaining independent housing may or may not be an explicit goal in this type of “safe at home” response. Rather, women’s safety is the primary focus and is addressed by managing perpetrator risk and potentially excluding the perpetrator from the home by using criminal justice strategies – primarily protection orders and ouster/exclusion provisions. These “safe at home” strategies may be understood as contributing to crime prevention and ensuring perpetrator accountability. Other identified integrated criminal justice strategies include safety alarms and security upgrades. However, not all of these strategies are exclusively “safe at home” and may be used by any woman leaving domestic and family violence, or any person who is at risk of violence perpetrated by another person.
- *“Safe at home” programs focusing explicitly on women staying in accommodation with or without protection orders and ouster/exclusion provisions to address safety concerns.* These programs focus on women and their children and usually provide case-management to assess risk, manage safety planning and consider women’s needs over time. There is a tendency for these to be called “stay at home” schemes which reflects the primary and explicit aim of remaining in independent accommodation. These programs are housing-focused, but do not necessarily have a narrow definition of housing needs.

Related to this emergent difference in service provision, the lead agency in each state or territory appears to determine how

“safe at home” responses are rolled out and whether they are housing or criminal justice focused. Two strategies emerged as critical to criminal justice “safe at home” responses. First, these evaluations demonstrate that women’s safety will be enhanced if exclusion clauses or ouster orders are consistently granted by magistrates and that these orders are pro-actively policed. Second, the importance of risk assessment was identified as key to establishing women’s safety. Where appropriate, the implementation of a dynamic risk assessment process (i.e. which captures changes to women’s circumstances) is recommended so that additional routes to safety can be offered if risk is heightened. In addition, in jurisdictions where a common risk assessment framework is used, it is pivotal to integrated service provision that information detailing the assessed risk for “safe at home” clients is able to be shared across sectors, particularly where other agencies have separate information about the risk of the perpetrator.

In contrast, “stay at home” housing responses are mostly offered over a longer period of time, and frequently provide case management and wrap-around services as maintaining independent housing is not achieved within a short time frame. Select evaluations note the benefits of longer-term responses particularly where women are involved in Family Court disputes. Moreover, to further promote sustainable safety and economic security, it is critical that “safe at home” responses are offered in conjunction with longer-term case management and support.

One very specific issue emerged as critical to sustaining tenancies. Residential tenancy laws across all jurisdictions should **permit locks to be changed and for a victim of DV to** more easily become the sole name on ongoing tenancy agreements where they were previously an occupant and the perpetrator is a tenant. Presently, both a protection order and an application to the equivalent state tribunal are required which can be a lengthy and onerous process for women to pursue.

Some of the more recent evaluations suggest that safety planning and case management for “safe at home” clients go beyond housing needs by taking into account the material realities of women’s lives and incorporating financial safety strategies. Enhancing women’s economic security to help women mitigate post-separation poverty is an emerging area of research and practice responses that need to be further developed. These evaluations noted strategies aimed at increasing economic security including brokerage, up-skilling women’s educational status, and assistance to maintain or enter employment or sustain a tenancy. As a key strategy of “safe at home” responses, brokerage should be strengthened by allowing for more flexible use of funds. This would enable tailored and targeted practical support for victims, which – alongside safety upgrades to properties – can have long-term benefits in sustaining a tenancy and/or a safe return to employment.

From the evaluations assessed, the authors identified an unresolved emergent issue for consideration which can be largely linked back to the variation in “safe at home” definition and program conceptualisation. This issue is whether the independent strategies which can be utilised in any DV-related intervention

(risk assessment, brokerage, various safety alarms and specialised police response) can or should be termed as “safe at home” responses in their own right. Future research should investigate whether these strategies are most useful and of greater impact when embedded in a “safe at home” program that explicitly aims to support women to remain at home or in the home of their choice, and which offers case management beyond the initial crisis period.

The evaluations noted that “safe at home” should not be understood as a universal response, but could be considered a viable alternative for women who leave a violent partner. It does not and is not intended to replace the need for refuge and specialist homelessness services. Instead, it is one of a suite of interventions that women may choose according to their circumstances. The authors recommend that further research is required to ascertain why some women consider that there are more advantages to remaining in their own home even in circumstances where police are not able to ensure their safety.

It remains uncertain whether select program elements identified in this report are useful for different population groups – particularly where communal living and extended family arrangements affect housing options. The issue of the current implementation of “safe at home” responses and what they mean to Aboriginal and Torres Strait Islander women is a vexed and unresolved issue. Monitoring data indicates that Aboriginal and Torres Strait Islander and culturally and linguistically diverse (CALD) women are accessing “safe at home” responses, but little is known of the usefulness of “safe at home” for these groups. For example, barriers to service provision in rural and remote areas identified in the evaluations of “safe at home” responses may disproportionately affect remote Aboriginal and Torres Strait Islander communities.

The current state of evaluations of “safe at home” programs in Australia is in its relative infancy, given the newness and small scale of many Australian programs. No evaluation has been comprehensive enough to provide definitive evidence of client outcomes or effectiveness. However, there are early indications that “safe at home” responses offer an alternative option for some women and children and can contribute to them staying in independent housing in their own home or a home of their choice. Given the dearth of evidence from program evaluation, a shared “safe at home” evaluation framework or strategy should be developed to ensure that evaluations collect standard data and address core questions, thereby building a national evidence base. One means of facilitating the translation of existing and future evidence would be for a national organisation such as ANROWS to maintain this meta-evaluation as a living document which can continue to evolve as evaluation of “safe at home” responses are implemented (ALNAP Review of Humanitarian Action, 2003, p. 135).

Appendix A: Analytic process framework

Step 1 - Assess for inclusion or exclusion according to the agreed criteria:

Evaluations of programs for inclusion in the meta-evaluation may be informal, formal, quantitative, qualitative or mixed methods.

Building on the definitions in the tender brief (ANROWS, 2014b, p. 1) “stay at home” programs/initiatives must:

- be evaluated by a publication that self-identifies as an evaluation/review of a program or strategy – not just conceptual research;
- receive specific funding for the evaluation/review and is not simply internal quality assurance or monitoring only; and
- specify a designated DV focus – i.e. not a generic program which may also incidentally be accessed by women leaving a violent relationship. An example of the latter category would be a homelessness initiative which may be utilised by any women facing housing difficulties, some of whom may be leaving a violent relationship.

In addition to the mandatory program/initiative focus of DV, the program must be focused on one or both of the following areas:

- aim to prevent women who have left a violent relationship from entering specialist homelessness services/supported accommodation such as specialist domestic violence refuges. This means that the program/strategy **must be intended to assist women who have experienced DV to remain in independent housing options** including private rental, continuing their mortgage or social housing; **and/or**,
- specify a criminal justice focus on women’s safety, and **must aim to support the safety of women to remain safely in independent accommodation of their choice at the time of accessing this service** regardless of whether women accessing the program/initiative have ever used supported accommodation in the past.

If the evaluation/review fits the above criteria then proceed to Step 2. If it doesn’t comply with the criteria then please outline why it doesn’t comply and in what ways – (around 250 words).

Step 2 - For each evaluation, provide a 1,000-2,000 word summary including the following:

- Description of the service/initiative.
- Key information, including funder, length of evaluation, evaluation governance, stated purpose of the evaluation.
- Evaluation questions and stated aims.
- Methodology of evaluation.

Step 3 - Complete the matrix (Appendix D)

Step 4 - Assess the quality of the evaluation results and methodology:

There are three main analytic phases in the CASP checklist:

1. *Is the study valid?*

Decide on the methodological quality of each component of the evaluation as well as the overall evaluation. Each evaluation will be classified within a scale of levels of evidence and degrees of recommendations from the matrix.

2. *What are the results?*

Are the evaluation’s results clinically⁵ important and is there is any uncertainty about the results?

3. *Are the results useful?*

Are the results able to be applied to the research questions in an explicit, transparent way?

Please comment on the following analytic considerations:

- Is the goal of the research relevant to this evaluation/review?
- Was there a clear statement of research/evaluation aims?
- Was the methodology appropriate to address the research goal?
- Is it clear how the research participants were selected?
- Was there consideration of how the research methodology may have impacted on findings?
- Were ethical issues taken into consideration?
- Was the data analysis sufficiently rigorous?
- Were the findings and conclusions supported by the data?
- Do the findings address or make comment on specific population groups and different geographic locations?

⁵ The term “clinically” is used very broadly here to include direct practice and programming. The use of the term reflects the history of the methodology so has been used to be consistent.

Step 5 - Address overarching meta-evaluation questions from the “safe at home” meta-evaluation methodology paper

The following review questions have been developed for the “safe at home” meta-evaluation; please **address them specifically in relation to each evaluation reviewed**:

- How robust are the current evaluations of Australian “safe at home” programs – can and do their findings demonstrate the effectiveness of these programs?
- What are the key program elements of all current Australian “safe at home” programs? **What are the key program elements specified in this particular evaluation?**
- What practice approaches have been shown to be effective in enhancing women’s safety and allowing them to remain in a home of their choice? **Does the evaluation identify or demonstrate any practice approaches to effectively enhance women’s safety and allow them to remain in a home of their choice?**
- What evidence exists that current Australian “safe at home” programs are effective for diverse population groups and diverse geographic locations? **Does the specific evaluation reviewed provide evidence that current Australian “safe at home” programs are effective for diverse population groups and diverse geographic locations?**
- What does the existing evidence suggest are the relevant policy and legislative contexts to effectively implement “safe at home” programs across jurisdictions? **What does the existing evaluation identify as the relevant policy and legislative context to effectively (or not) implement the “safe at home” program/initiative?**
- Does the evidence indicate that there are specific conditions under which “safe at home” is not going to be a viable and safe response for some women and children? **Does the evaluation indicate that there are specific conditions under which “safe at home” was not going to be a viable and safe response for some women and children?**
- What is required to improve “safe at home” programs in the future either through increased population reach and/or program elements?
- What evidence is currently not available about “safe at home” programs and would be valuable knowledge to inform future policy and programming? **Were there important areas not covered by the evaluation under review?**

Appendix B: Key stakeholder online survey

Evaluations of Safe at Home Programs and/or Integrated Services

UNSW Australia is undertaking a research project, or meta-evaluation, funded by Australia's National Research Organisation for Women's Safety (ANROWS), to review evaluations of Safe at Home programs for women and their children who have experienced domestic and family violence and/or integrated service responses to domestic and family violence and sexual assault. You may offer both Safe at Home programs and integrated services, or your Safe at Home program may be an integrated service. We would like to hear about your programs/services, and your experiences of evaluation.

What is the name of your organisation?

.....
.....
.....
.....

In which jurisdiction(s) does your organisation operate?

- Queensland
- New South Wales
- Australian Capital Territory
- Victoria
- Tasmania
- South Australia
- Northern Territory
- Western Australia
- Commonwealth

Further Comments (optional)

.....

Please provide your organisational contact details below.

Name:

Organisation:

Address 1:

Address 2:

Suburb:

State:

Post Code:

Email Address:

Phone Number (incl. area code):

Please tell us about the Safe at Home program(s) and/or integrated services your organisation offers.

	Safe at Home program	Integrated service	Both Safe at Home program and Integrated service	Program/service evaluated or reviewed?
Program/service 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Program/service 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Program/service 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Program/service 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Program/service 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you offer more than one Safe at Home program and/or integrated service, may we email you to find out more about your other programs/services?

Yes

No

We only offer one relevant program/service

Further Comments (optional)

.....

Please provide a brief description of your Safe at Home program and/or integrated service. (If you offer more than one of these programs/services, please identify your main program/service)

.....

.....

.....

.....

How long has your program/service been running?

Less than 1 year

1 - 3 years

3 - 5 years

More than 5 years

Further Comments (optional)

.....

Is your program/service currently active?

Yes

No

Further Comments (optional)

.....

Is your program/service run in partnership with other agencies or service providers?

Yes

No

Further Comments (optional)

.....

Which other major partners do you work with?

.....

.....

.....

.....

Is your organisation the lead agency for your program/service?

Yes

No

Name of Lead Agency

.....

How often is your program/service evaluated?

Every 2 years

Every year

Every 6 months

More often than every 6 months

We have not evaluated our program/service

Further Comments (optional)

.....

Is your organisation and/or the organisations you work with resourced to evaluate your program/service?

Yes

No

N/A

Further Comments (optional)

.....

Has your organisation, or one of the agencies/service providers you work with, enlisted external assistance in conducting a formal program/service evaluation?

Yes

No

Further Comments (optional)

.....

Please provide a brief description of how the formal evaluation of your program/service was undertaken?

.....

.....

.....

.....

How was this formal evaluation funded?

.....

.....

.....

.....

Please provide a brief description of the key findings of your formal evaluation.

.....

.....

.....

.....

Is a report of your formal/external program evaluation available?

Yes

No

Further Comments (optional)

.....

Does your organisation and/or the agencies/service providers you work with use internal and/or informal processes to evaluate your program/service?

Yes

No

Further Comments (optional)

.....

Please provide a brief description of the internal and/or informal processes your organisation and/or the agencies/service providers you work with use to evaluate your program/service.

.....

.....

.....

.....

Please provide a brief description of the key findings of your internal/informal evaluation(s).

.....
.....
.....
.....

Is a report of your internal and/or informal evaluation(s) of your program/service available?

Yes

No

Further Comments (optional)

.....

Please indicate your willingness to participate in a follow-up interview and/or further questions about your program/service(s).

Agree to follow-up interview and/or further questions

Do not agree to follow-up interview or further questions

Further Comments (optional)

.....

Appendix C: Excluded evaluations

All information in this appendix has been directly derived from the evaluation report concerned unless otherwise stated.

Australian Capital Territory

Cussen, T., & Lyneham, M. (2012). *ACT Family violence intervention program review* (Technical and Background Paper 52). Canberra: Australian Institute of Criminology.

Exclusion rationale: The Family Violence Intervention Program (FVIP) is an integrated response to family violence incidents, focused on criminal justice. The objectives of the FVIP are cooperative working partnerships between agencies to maximise the safety of victims of family violence, as well as offender accountability and continual improvement. While the safety and protection of family violence victims is central to the FVIP, it does not include the explicit stated aim of supporting women and their children to remain in safe, independent accommodation of their choice. Housing assistance may be implicit in the overarching aim of safety and protection for victims, but it is not made explicit in the FVIP objectives, or in the Cussen & Lyneham evaluation. In this evaluation, Cussen & Lyneham's specific tasks were an examination of criminal justice interventions under the FVIP. The researchers did find that stakeholders identified the need to include non-criminal justice organisations in the coordinated response, indicating the "need for more supported accommodation and long term housing options through the Department of Disability, Housing and Community Services" (p. 100). However, as provision of housing assistance is not an explicit aim of the FVIP, and an examination of any associated service provision is not core to the tasks of this evaluation, it does not meet the inclusion criteria for this meta-evaluation.

Holder, R. (2007). *Police and domestic violence: An analysis of domestic violence incidents attended by police in the ACT and subsequent actions*. Sydney: Australian Domestic and Family Violence Clearinghouse, University of New South Wales.

Exclusion rationale: The Holder (2007) report by the Australian Domestic and Family Violence Clearinghouse does not identify itself as an evaluation or review but does provide an analysis of police responses to domestic violence incidents in the ACT. Holder (2007, p. 9) states that this study builds on Queensland research (CMC, 2005),⁶ which asked police officers to indicate the factors influencing their decision to proceed with criminal charges at a domestic violence incident. This research report provides statistical correlation of these variables such as

⁶ Crime and Misconduct Commission. (2005). *Policing domestic violence in Queensland: Meeting the challenges*. Brisbane: CMC.

injury, criminal offence and weapons against the outcome of being charged for the incident. This is in the context of the Family Violence Intervention Program (FVIP), which “is a coordinated community and criminal justice response to family and domestic violence in the ACT” (Holder, 2007, p. 31). From 2001–2004, the Australian Federal Police attended 9600 incidents of family violence in the ACT (Holder, 2007, p. 1). Each year the ACT police attend an average of 3500 family violence incidents and nearly 42% are spouse/ex-spouse domestic violence (n=1344) (Holder, 2007, p. 9). This report provides an important background to the Cussen & Lyneham (2012), *ACT Family Violence Intervention Program Review* published by the Australian Institute of Criminology. However, the research presented in this report aimed to examine factors that influence a police decision to arrest a suspect at a domestic violence incident (p. 1). It did not specifically focus (explicitly or implicitly) on supporting the safety of women to remain safely in independent accommodation of their choice.

New South Wales

Bega Women’s Refuge (2007). *Bega Staying Home Leaving Violence: Pilot executive summary 2004-2007*. Bega: Bega Women’s Refuge.

Exclusion rationale: This report identifies as an executive summary of the final Bega Pilot Evaluation report (Purple Kangaroo Consultants, 2007). While some outcomes from the pilot evaluation are summarised, this information is drawn directly from the aforementioned report. This report details the broader context of the Bega pilot, describing its establishment and development, and is more of a conceptual document as opposed to an evaluation.

Edwards, R. (2004). *Staying home leaving violence: Promoting choices for women leaving abusive partners*. Sydney: Australian Domestic and Family Violence Clearinghouse, University of New South Wales.

Exclusion rationale: ANROWS Project 3.1 is primarily concerned with an analysis of evaluations of existing “safe at home” programs or initiatives. Edwards’ research study was the first exploratory conceptual study that is “based on the principle of providing choices to women when they are leaving domestic violence, including the choice of remaining in their own home” (p. 8). The report focuses on the original “Staying Home Leaving Violence” research (ADFVC), presenting the development of a conceptual response model based on the qualitative findings of 29 women participating in in-depth interviews between October 2002 and December 2003 who shared their experiences of leaving a violent relationship. The report is not an evaluation; rather, it is “the report of a research study” (p. 4), and it does not address a specific program or initiative designed to support women to remain in their own home or find independent accommodation. Broadly, this study finds for the adoption of a framework to support women and their children to remain in their homes (p. 7) and in fact the framework proposed underpinned the pilots of “Staying Home Leaving Violence” programs in Bega, South-East Sydney and Mt Druitt. Therefore this study does not meet the inclusion criteria.

Edwards, R. (2011). *Staying home leaving violence: Listening to women’s experiences*. Sydney: Social Policy Research Centre, University of New South Wales.

Exclusion rationale: ANROWS Project 3.1 is primarily concerned with an analysis of evaluations of existing “safe at home” programs or initiatives. Edwards’ small qualitative study is intended to foreground women’s experiences of leaving a violent situation, but is explicit in stating it does not constitute an evaluation of the Staying Home Leaving Violence program that it refers to. The author notes that had the study been intended as an

evaluation, a different methodological approach would have been taken. The study is concerned with building the evidence base for SHLV and inform, aiming “to examine:

- women and children’s safety if they remained in their own home;
- whether the ex-partner has returned to the home and caused further violence and abuse;
- benefits and advantages for women and children who remained in their own home, along with any disadvantages; and
- the role of SHLV services in enhancing women’s safety and stabilising their housing” (p. 10).

The latter aspect of this list constitutes only part of the overarching concerns of the study. Given the focus and intent of this research study, this study does not meet the inclusion criteria.

Laing, L. (2005). *Evaluation of the Green Valley domestic violence service (GVDVS): Final report*. Sydney: School of Social Work and Policy Studies, University of Sydney.

Exclusion rationale: The GVDVS works on an interagency model, referring clients to a range of support services. The main services most often offered by GVDVS are provision of information, crisis and ongoing counselling, and advocacy (p. 44), with accommodation assistance part of these services. Housing was the main issue arising in contact made with GVDVS (p. 45), and it was here that the interagency network including the NSW Department of Community Services (DoCS), Health, Police, accommodation, legal services and other non-government organisations facilitated referrals for clients requiring specific services (p. 45). As such, any provision of advice or assistance with regard to accommodation services constitutes part of a larger remit for the GVDVS interagency network, and is not a specific focus of GVDVS as a service/program. Further, Laing’s evaluation does not address accommodation support as a key area of inquiry, nor are these services explicitly noted in the aims of GVDVS. Rather, the aims of the evaluation were particularly focused on interagency cooperation, including strategies for adoption, resources and service provision in agency partnerships (pp. 13-14). For this reason, this evaluation does not meet the inclusion criteria.

Lorimer, L. (2004). *Evaluation of the domestic violence proactive support service*. Sydney: The Woman’s Centre, Canterbury Domestic Violence Liaison Committee.

Exclusion rationale: DVPASS works on an interagency model, with referral to other services key to its operation. However, the DVPASS program is not focused on assisting women who have experienced DV with independent housing (see stated aims

of DVPASS listed above). The program performance indicators listed in the evaluation (pp. 8-9) do not include specific reference to housing services for clients, though one interview response refers to advice provided by the Domestic Violence Support Worker (DVSW) regarding housing applications. However, this is the only explicit mention of housing support in the evaluation, and no references to relevant housing services are made in the descriptions of DVPASS services. Further, providing support for women to remain in independent accommodation is not one of the stated aims of DVPASS. As such, any provision of advice or assistance with regard to accommodation services constitutes part of a larger remit for the DVSW, and is not a specific focus of DVPASS. For this reason, this evaluation does not meet the inclusion criteria.

Purple Kangaroo Consultants. (2009). *Final report of the SHLV Mt Druitt pilot project evaluation*. Bega, NSW: Bega Women’s Refuge.

Exclusion rationale: The authors were unable to locate this report despite several web searches, requested assistance from ANROWS and a search of the Australian Domestic and Family Violence Clearinghouse archives.

Northern Territory

Lloyd, J. (2009). *Proposed preferred models for safe accommodation services for women and children from the APY Lands: "More than bricks and mortar"*. Northern Territory: Ngaanyatjarra Pitjantjatjara Yankunytjatjara Women's Council (Aboriginal Corporation).

Exclusion rationale: The Lloyd (2009) report commissioned by Ngaanyatjarra Pitjantjatjara Yankunytjatjara Women's Council (Aboriginal Corporation) explored different models for the safe accommodation for women and children escaping violence and for carers and children in instances of suspect abuse in the APY lands. It did not self-identify as a review or evaluation and was primarily a conceptual report. It outlined safety issues in the APY lands, drawing on literature, the perspectives of NPYWC directors and staff and workers in different safe accommodation services in Alice Springs and remote communities. It recommended a safe accommodation place that specialised in women's and children health care in Alice Springs (p.15). It did not aim to support the safety of women to remain safely in independent accommodation of their choice.

Northern Territory Government. (2013). *Family safety framework: A snapshot*. Darwin: Northern Territory Government.

Northern Territory Government (2013c). *Integrated response project summary: Alice Springs integrated response to family and domestic violence*. Darwin: Northern Territory Government.

Exclusion rationale: None of the documents found about responses to DFV in the NT are evaluations but they can assist to provide a policy context for service responses to DFV in the NT. The two references below (2013 and 2013c) are government brochures/factsheets that promoted the new initiative: Integrated Responses to Domestic and Family Violence (2012-2014) in Alice Springs. Similar to other states, this policy initiative (trialled in Alice Springs) aimed to increase the safety of women and children, the accountability of men who use violence and to provide an integrated service response to people experiencing family or domestic violence who are at high risk of injury or death. Along with the Family Safety Framework (FSF), there are projects to address respectful relationships in schools, victims support, perpetrator behaviour change programs and community engagement. The key elements of the FSF identified are: a common risk assessment, protocol for sharing information, family safety meetings, ongoing monitoring and evaluation. The integrated policy context that was introduced in Alice Springs in 2012 is similar to the South Australian FSF but the references are not evaluation documents.

Northern Territory Government (2013b). *Family safety framework: Alice Springs pilot – practice manual*. Darwin: Northern Territory Government.

Exclusion rationale: This practice manual (2013b) refers to the South Australian Family Safety Framework evaluation (Jayne Marshall, Emma Ziersch and Nina Hudson, Office of Crime Statistics and Research, South Australian Attorney General's Department, The Family Safety Framework Final Evaluation Report, November 2008) as the context for implementing the Family Safety Framework in Alice Springs. They note (p. 5) the major strengths and weakness of the Family Safety Framework in South Australia. The strengths included: the police taking a lead role, clarification of information sharing processes, bringing a wide range of agencies together, a consistent risk assessment tool that forms the basis of consistent responses by different agencies, enhancing agency accountability, understanding of agency roles and responsibilities and professional networks, to coordinate quicker and more relevant responses to victims of domestic violence. This SA evaluation was seen to be a learning tool for implementing the Family Safety Framework in Alice Springs.

Northern Territory Government. (n.d.). *Safety is everyone's right: Domestic violence strategy*. Darwin: Northern Territory Government.

Exclusion rationale: This document is a one-page information brochure by the NT Government. The DV strategy of the NT government has an integrated services delivery response at the centre and is directly aligned with the "Framing the Future" strategy of the NT government and the *National Plan to Reduce Violence Against Women and their Children 2010-2022* (Australia. Department of Social Services, 2014). This one page model below notes that five key areas of action are: prevention, early intervention, protection and safety for victims, rebuilding the lives of victims and their children and accountability and positive change for perpetrators. Key components of the strategy include: that the Domestic Violence Directorate of the NT government will lead the strategy, a centralised referral system (SupportLink) that identifies victims and intervenes early, the Family Safety Framework to respond to high risk cases, specialised support services for victims and their children, a prevention framework, Indigenous Men's Leadership Grants, increasing capacity of front line workers, ensuring all NT funded perpetrator programs comply with National Standards including being evidence based and a review of all domestic and family violence legislation.

Department of the Attorney-General and Justice. (2014). *Expression of interest – Background paper, safe at home program 2014-2016*. Darwin: Northern Territory Government.

Exclusion rationale: This is an expression of interest and not an evaluation.

Queensland

Caboolture Regional Domestic Violence Service. (2015). *Keeping safe at home: Domestic and family violence safety upgrades*. Brisbane: Brisbane North Services.

Exclusion rationale: This report could not be located.

Meyer, S. (2014). Victims' experiences of short-term and long-term safety and wellbeing: Findings from an examination of an integrated response to domestic violence. *Trends & Issues in Crime and Criminal Justice*, 478. Canberra: Australian Institute of Criminology.

Exclusion rationale: Primarily an intensive case management response for six weeks for women identified as high risk. The option of remaining in the home is only highlighted for one woman and no others. The possible best use of this research is in the state of knowledge report that supports the importance of perpetrators being held accountable. Not an evaluation per se but rather pre and post surveying of women and some in-depth interviews with women.

South Australia

Migliore, C., Marshall, J., Millstead, M., Aird, E., & Smith, E. (2013). *Intervention Orders and Intervention Response Model evaluation report 1 (process evaluation)*. Adelaide: Office of Crime Statistics and Research, Attorney-General's Department.

Migliore, C., Ziersch, E., Marshall, J. & Aird, E., (2013). *Intervention Orders and Intervention Response Model evaluation report 2 (process evaluation)*. Adelaide: Office of Crime Statistics and Research, Attorney-General's Department.

and

Migliore, C., Ziersch, E., Marshall, J., & Aird, E. (2014). *Intervention Orders and Intervention Response Model evaluation report 3 (statistical overview and outcome evaluation)*. Adelaide: Office of Crime Statistics and Research, Attorney-General's Department.

Exclusion rationale: The Intervention Response Model (IRM), underpinned by the *Intervention Orders (Prevention of Abuse) Act 2009* (SA), works on an integrated service model to meet its core aim of enhancing safety for victims of domestic abuse. The IRM aims to achieve this through ongoing risk assessment and management. This publication, comprising a statistical overview, process and outcome evaluations, notes components of the IRM including the Domestic Violence Prevention Program (DVPP) for suitable high risk male defendants, and the Women's Safety Contact Program. The latter facilitates contact between a Women's Safety Contact Officer (WSCO), who assists protected persons with collation of financial and tenancy information, assistance with intervention orders, ongoing risk assessments and appropriate referrals. While enhancing women's safety is of core importance here, with service provision including some housing assistance, supporting women to remain safely in their own homes or in independent accommodation is not one of the stated foci of the IRM, nor is associated housing service provision the focus of the evaluation. The stated inclusion criteria for this meta-evaluation require an evaluated program/strategy to deal specifically and explicitly with independent accommodation assistance, rather than such assistance comprising one part or a by-product of a larger service. Due to this incompatibility of core service focus, we have excluded this evaluation from our review.

Victim Support Service, Inc. (2011). *Staying home staying safe*. Adelaide: Victim Support Service.

and

Victim Support Service Inc. South Australia (2014). *Annual report 2013-14*. Adelaide: Victim Support Service.

Exclusion rationale: In South Australia, there is one separately funded "safe at home" program, which is run by the Victim Support Service (VSS) and is called: "Staying Home Staying

Safe”. It commenced in March 2011 and is funded through the State-Commonwealth National Partnership Agreement on Homelessness (NPAH, COAG 2009) for two more years (until 2017). It has not yet been formally evaluated but the VSS Annual Report (2013-2014) indicates that there has been a 40 percent increase in referrals to the program (from 475 in 2011-12 to 667 in 2013-14, p. 24). As well, VSS administered 468 Family Safety Framework meetings in 2013-2014 (Victim Support Service 2014, p. 8). Discussions with key staff in the VSS program on 16 July 2015 found that there has been a further increase in demand for these services in the 2014-2015 period (not yet released) to over 1000. This is a large service provided by VSS and they do conduct internal reviews of the program but in their service agreement, the state based funding body (DCSI) will take charge of formal evaluations. There are limitations and barriers to evaluating services that respond to crises and trauma, due to the ethical issues involved in asking clients to evaluate the service when they are in crisis and prioritising other aspects in their lives. Important to such an evaluation would be the women’s feelings of increased perceptions of safety because the home has been made safer but the program cannot be evaluated for the prevention of violence as this is beyond their control (Personal communication, VSS, 16th July 2015).

Office for Women. (2013). *Family safety framework practice manual*. Adelaide: Government of South Australia.

Exclusion rationale: This is a practice manual and not an evaluation.

Department for Communities and Social Inclusion. (2013). *Evaluation of South Australian Homelessness Reforms*. Adelaide: South Australia Department for Communities and Social Inclusion.

Exclusion rationale: The *Staying Home Staying Safe* VSS-implemented “safe at home” project in South Australia is funded by the State-Commonwealth National Partnership Agreement on Homelessness (NPAH, COAG 2009). In the context of the national homelessness policy reform under the previous Commonwealth Labor Government and the release of The White Paper on Homelessness, *The Road Home* (Commonwealth of Australia, 2008), the South Australian homelessness sector was also reformed by the state government. The SA government strategy “*Homeless to Home: South Australia’s Homelessness Strategy 2009-2013*” was evaluated by the Department for Communities and Social Inclusion (DCSI) with consultants from the University of Adelaide, the Australian Centre for Child Protection and University of South Australia (Department for Communities and Social Inclusion, 2013).

This evaluation was considered for inclusion. The evaluation

framework included achieving sustainable housing outcomes (which tended to focus on supportive housing packages and case management), reducing Aboriginal homelessness and building interagency sector capacity regionally (such as between homelessness and domestic and family violence sectors) and to respond to children (Department for Communities and Social Inclusion, 2013, p. 4). The evaluation mentioned output-process outcomes such as data collection, responding to children, appropriate services for people from CALD and Indigenous backgrounds; immediate outcomes (such as fewer families becoming homeless, meeting housing and case-management goals, not exiting services into homelessness and building client “capacity to achieve sustainable housing outcomes...more women and children are able to stay in the family home and be safe” (Department for Communities and Social Inclusion, 2013, p. 36); intermediate outcomes, which also included that women and children are safe from violence, people maintaining connections with family and community, and long term outcomes, which included indicators such as “people are safe and securely housed and participating in the economic and social life of Australia” - but there was no long term data available to address the long term aims (Department for Communities and Social Inclusion, 2013, p. 57).

This evaluation stated that there was a “significant new investment in support services and accommodation for women experiencing domestic violence; and the establishment of Domestic Violence Safety Packages and the Statewide CALD Domestic Violence Service” (Department for Communities and Social Inclusion, 2013, p. 9). The evaluation included “a special focus on services for women from CALD backgrounds fleeing domestic violence, in order to assess the new service model developed in the reforms” (Department for Communities and Social Inclusion, 2013, p. 26). It stated that “CALD clients were more likely to have been provided assistance for domestic violence than other clients (23% to 17%) and were more likely to present with domestic and family violence as their main issue (40% to 30%)” (Department for Communities and Social Inclusion, 2013, p. 25). The evaluation found that there was a “high commitment to provide culturally sensitive services to CALD women, but services are faced with many challenges, including language barriers, Visa related issues, and cultural beliefs and customs that inhibit or prevent women seeking assistance and/or leaving violent relationships. This often meant that a much more intensive, ‘hands on’ approach is required from service providers” (Department for Communities and Social Inclusion, 2013, p. 27). Despite the small amount of data, the evaluation stated: “most women reported they were currently living in a safe environment and very few were concerned for their own and their children’s safety, in terms of being found by the

perpetrator, which implied some positive gains” (Department for Communities and Social Inclusion, 2013, p. 56).

The evaluation noted that there were now “75 homelessness services and programs, delivered through 97 service outlets across South Australia. . . . to target specific priority population groups”: adults and families who are homeless or at risk; Aboriginal and Torres Strait Islander people; women and children escaping domestic/Aboriginal family violence and youth (Department for Communities and Social Inclusion, 2013, p. 9). Three state-wide gateway services: the Homelessness Gateway, Youth Gateway and Domestic/Aboriginal Family Violence Gateway were “established to provide information, intake assessment and supported referrals to crisis accommodation and specialist and mainstream services” (Department for Communities and Social Inclusion, 2013, p. 9). Whilst it was not the main aim of the evaluation, there was mention of keeping women safer at home and the evaluation did aim to prevent homelessness for women and their children affected by domestic violence. However, the evaluation focused primarily on the homelessness strategy, rather than domestic and family violence, so it was excluded.

While this evaluation did not fit the meta-evaluation project brief as it did not focus exclusively on domestic violence, the homeless reforms and this evaluation was perceived to be very important by key staff at VSS (personal communication, 16 July 2015). The VSS “Staying Home Staying Safe” program’s main aim is reducing, preventing and shortening episodes of homelessness, along with increasing security for women for longer periods, to give emergency services time to respond. The homelessness reforms in SA have implemented a shared database system (H2H database system) and one aspect of the evaluation was to examine if the “Homeless2Home (H2H) case management and data collection system is implemented and working well” (Department for Communities and Social Inclusion, 2013, p. 16). The VSS coordinator noted that this system is now functioning well and a very efficient way to receive referrals from other non-government organisations such as DV services.

Tasmania

Department of Justice and Industrial Relations. (2003). *Safe at home: A criminal justice framework for responding to family violence in Tasmania, options paper*. Hobart: Tasmanian Government.

Exclusion rationale: This options paper was developed by the Office of the Secretary of the Department of Justice and Industrial Relations (DJIR) in response to the announcement by the Attorney-General in September 2002, of the establishment of separate family violence restraint order legislation to be introduced into Parliament in 2003. It is not an evaluation report.

Success Works. (2009). *Review of the integrated response to family violence: Final report*. Hobart: Department of Justice, Tasmania.

Exclusion rationale: Safe at Home is the Tasmanian Government’s integrated whole-of-Government response to family violence. Safe at Home comprises “16 separate funded initiatives across four government departments (Departments of Justice, Police and Public Safety, Health and Human Services and Premier and Cabinet) as well as the reforms contained within the Family Violence Act 2004” (Success Works, 2009, p. 3). Although the scheme is called Safe at Home it is not centred on enabling and empowering women to remain in their own home. Family Violence Safety Notice provisions in the Family Violence Act 2004 do have a “stay at home” focus and are evaluated in a separate report which is included in this study.

Tasmanian Government. (2013). *Safe at home: Annual report 2012-2013*. Hobart: Tasmanian Government.

Exclusion rationale: Safe at Home is the “Tasmanian Government’s integrated criminal justice response to family violence, underpinned by the *Family Violence Act 2004*. It is operated in partnership by the departments of Police and Emergency Management, Justice, Health and Human Services, Education, and Premier and Cabinet, it aims to:

- improve the safety and security for adult and child victims of family violence in the short and long term;
- ensure that offenders are held accountable for family violence as a public crime [and change their offending behaviour];
- reduce the incidence and severity of family violence in the longer term; and
- minimise the negative impacts of contact with the criminal justice system on adult and child victims”.

(Tasmanian Government, 2013, p. 4).

This report is not an evaluation and does not concern homelessness prevention “safe at home” schemes.

Tasmanian Government. (2014). *Safe at home internal performance review 2014*. Accessed February 2, 2015 from [http://www.safeathome.tas.gov.au/safe at home” internal performance review 2014](http://www.safeathome.tas.gov.au/safe%20at%20home%20internal%20performance%20review%202014)

Exclusion rationale: This is an internal performance review of Safe at Home from 2014. As with the Success Works report exclusion detailed above; Safe at Home is the Tasmanian Government's integrated whole-of-Government response to family violence. Safe At Home "comprises 16 separate funded initiatives across four government departments (Departments of Justice, Police and Public Safety, Health and Human Services and Premier and Cabinet) as well as the reforms contained within the Family Violence Act 2004" (Success Works, 2009, p. 3). Although the scheme is called Safe at Home it is not centred on enabling and empowering women to remain in their own home. As such this report is not suitable for inclusion in this study.

Victoria

Crinall, K., Hurley, J. & Healy, L. (2012). *"Safe at home" programs in the context of the Victorian integrated family violence service system reforms: A review of the literature*. Melbourne: Victorian Family Violence Reforms Research Program.

Exclusion rationale: This report is not of an evaluation of a specific project, but rather is a literature review regarding Safe at Home programs in the context of the Integrated Family Violence service system reforms in Victoria. It includes a useful four page summary of elements for successful Safe at Home program implementation which have been gleaned from the literature review.

Diemer, K., Humphreys, C., & Crinall, K. (2014: *in press*). *Safe at home? Where women live when leaving a violent relationship and the role of civil protection orders*. Under review for publication.

Exclusion rationale: This is an as yet unpublished journal article about the role of civil protection orders in decisions concerning where a woman should live when leaving a violent relationship. Although the article concerns "stay at home" initiatives it is not an evaluation of a specific project and has therefore been excluded.

Frere, M., Ross, S., Healey, L., Humphreys, C., & Diemer, K. (2008). *Northern crisis and advocacy response service (CARS): Evaluation October 2008*. Melbourne: The University of Melbourne

Exclusion rationale: The CARS evaluation was focused on partnership collaboration concerning crisis responses to women reporting domestic and family violence. In reading the report the orientation was towards ensuring that services worked closely and consistently together to promote the safety of women and children which included a number of aspects such as use of a common risk assessment measure. Because it is a crisis orientation a number of pathways could be followed, one of which was remaining/returning to the family home when there is an intervention order with an exclusion requirement for the perpetrator. However, CARS as a crisis orientation does not have as its goals and approach women's living independent and free of violence over the longer term. Whereas "safe at home" programs have various component parts which are oriented to this specific aim.

Thomson Goodall Associates. (2004). *The evaluation of Victorian Homelessness Strategy Pilot: Housing options for women experiencing family violence and private rental brokerage - pilot report*. Melbourne: Victorian Homelessness Strategy.

Exclusion rationale: This report could not be located.

Thomson Goodall Associates. (2007). *Intensive case management data collection and analysis project: Final report*. Melbourne: Department of Human Services.

Exclusion rationale: This report concerns intensive case management. It examines the level and complexity of need for clients supported through the 2007 Victorian Department of Human Services (DHS)-funded family violence program and was commissioned by the DHS. It is not suitable for this project because it does not concern “safe at home” programs.

Thomson Goodall Associates. (2007b). *Summary analysis and report: Intensive case management for women experiencing family violence*. Melbourne: Department of Human Services.

Exclusion rationale: As above.

Western Australia

Ruah Women’s Services. (2015). *Ruah + You*. Accessed February 2, 2015 from <http://www.ruah.com.au/services/womens-services/#fadvcrs>

Exclusion rationale: This report could not be located.

Appendix D: Included evaluations

This appendix only contains detailed summaries for 18 evaluations because the remaining two evaluations were interim findings and therefore were rolled into the summaries for the corresponding final reports.

All information in this appendix has been directly derived from the evaluation report concerned unless otherwise stated.

Australian Capital Territory

Program/strategy background	
Jurisdiction	ACT
Program/strategy	Domestic Violence Crisis Service (DVCS)
Evaluation	Watson, J. (2014). <i>Staying home after domestic violence</i> . ACT Domestic Violence Crisis Service, Australia.
Description of program/strategy	The Domestic Violence Crisis Service (DVCS) supports all people affected by domestic violence, crisis intervention and telephone support; “[i]nformation and referrals for women, men and young people; [f]acilitation of access to safe accommodation i.e. refugees, motels; education in schools and in the community; court support for those who have been subjected to violence; support for family and friends of those affected by domestic violence; [and] works cooperatively with other agencies to reduce the incidence of domestic violence in the community” (ACT Government Health Directorate, 2015). DVCS is funded to provide 24/7 telephone and outreach supports to all people affected by DV in crisis, but the longest period of outreach is 3 months. Clients are supported to obtain Domestic Violence Orders (DVOs) through the Court Advocacy Program (CAP).
Definition of "safe at home" within program/strategy	“Safe at home” is defined in relation to the “Staying Home after Domestic Violence” program. The report notes that the intention of “safe at home” initiatives in the ACT and other jurisdictions is that “more women and their children will be able to remain safely in their homes and have the person using the violence removed” (p. 8).
Lead agency/department	Domestic Violence Crisis Service (DVCS).
Collaborating agencies	Office for Women ACT; Concordia University.
Inclusion rationale	This evaluation sought to address a perceived gap in evidence regarding holistic support for women who remain in their homes after leaving a violent partner, via exploration of DVCS stakeholder and client experiences. The evaluation received funding from the Office for Women and specified a focus on domestic violence. The program being reviewed aimed to assist women who had experienced DV to remain in independent housing options and also explored the ongoing support needs of this group of women.

Evaluation summary	
Key information: funder; length of evaluation; evaluation governance; and stated purpose of evaluation	DVCS undertook this 1 year project with a grant from ACT Office for Women Audrey Fagan Grant, conducted in 2013. A Project Steering Committee governed the project and monitored ethical compliance. The aim of the report was to research the anecdotal gap in support services able to respond to women who remained at home after the crisis period ended, and identify areas for further collaboration between services. The goals of the research report were: to further understand ongoing support women need to remain in their homes post DV; identify best practice services and supports; identify available supports in ACT; identify gaps in continuum of care, and; provide recommendations.
Methodology	<p>The methodology was undertaken with the assistance of Dr Merrelyn Emery (Dept of Applied Human Sciences, Concordia University). The research design proceeded in two phases, comprising the following:</p> <p>Initial phase:</p> <ul style="list-style-type: none"> • Analysis of DVCS client files to inform the ongoing support needs of women who remain in their homes post DV. 35 DVCS case studies were used for qualitative data, with all identifiable information removed to preserve client anonymity. • Comparative case studies analysed from Women's Legal Centre and Toora Womens Inc Aleta Outreach Program. <p>Second Phase (to map support services available to target group in ACT):</p> <ul style="list-style-type: none"> • Service provider questionnaire developed based on outcomes from initial phase research and DVCS worker experiences (questionnaire tested on a sample of nine service providers with feedback integrated into final version). • Fifty services personally invited to participate, as well as public invitations through DVCS website, email newsletters and related networks. • Twenty-two full survey responses were collected, with responses scaled and analysed with SPSS.
Key program elements	The report recommended a Staying at Home program in ACT for women staying home post violence, where separation has occurred within the last 12 months. The key elements would include: the need to recognise the complexity of needs of ATSI, CALD and women living with physical, mental health problems and disabilities; an assessment based on safety, children, economic hardship and risk of future homelessness; be a program with multiple entry points; provide outreach case management support for 12 months (similar to NSW & WA, VIC has 6-12 months); have a lead agency responsible for case management, outreach and advocacy; the lead agency to be decided by family and resources; involve multiple key agencies (including CALD, ATSI, criminal justice and DVCS); develop a memorandum of understandings between services; hold regular case coordination meetings and a governance structure to provide accountability and review of processes.
Program/strategy practice approaches	The program being reviewed, and the report itself, were holistically focused on safety planning, risk of homelessness, financial hardship, employment, study, property damage, children's issues (parenting, child protection, child care, child friendly organisations), health, physical disability, alcohol and other drugs, social isolation, transport, language barriers, living skills, family law, and emotional impacts on women.
Specific conditions under which "safe at home" was not going to be viable/safe	While the report did not specifically explore conditions under which "safe at home" initiatives may not be viable or safe for women, it did extensively analyse current barriers in the service system for clients/potential clients of "safe at home". These barriers included (but were not limited to): the small number of funded outreach support places available; long waiting lists; gap in services available generally to all women impacted by domestic violence and more specifically to middle class women; lack of appropriate services that accept referrals for CALD women and women with a mental illness; lack of long-term comprehensive supports for women experiencing mental health issues, physical disability, parenting problems, financial hardship, cultural barriers, ongoing risks to safety, ongoing family law matters, childcare issues and transport issues (pp. 28-31).
Diverse population groups and geographical locations	The majority of the sample from DVCS was Anglo Australian and smaller number identified as being of CALD or Aboriginal background. The analysis found that there was a correlation between women from CALD and ATSI backgrounds with higher numbers of referrals and services involved, reflecting complexity of support needs, related to child protection involvement, parenting, increased safety risk (breaches of DVO and bail conditions), financial hardship and women "feeling overwhelmed", family law issues and problems with transport. However, CALD women were more likely to be in paid

	employment, studying and less likely to be socially isolated. These women needed greater outreach support over longer periods.
Relevant policy and legislative context	The report emphasised the importance of: the ACT Family Violence Intervention Program (FVIP) continuing; domestic violence orders (Domestic Violence and Protection Orders Act 2008); and pro-charge, pro-arrest and presumption against bail (see FVIP Review, 2009). As well, family law matters involving property settlement and children's matters were areas women reported abuse continued and was a high safety risk and the lack of access to affordable legal representation. However, they argue that it is not sufficient to only have legal supports in place as women need ongoing support.
Key findings	ACT Domestic Violence Crisis Service (DVCS) data indicates that the majority of women remain in their homes post-crisis and there is limited support for women leaving their homes and becoming homeless. The most significant finding was that the majority of both homeowners and families living in private rental lost their homes within 12 months of separation. As well, for the 37.5% of the women who identified as CALD, "language and a lack of understanding of Australian culture and processes were major barriers to recovery and independence" (Watson, 2014, p. 5). In 2013, a total of 1053 women were assisted by DVCS on crisis visits and only eight entered a refuge. However, the majority of the women, both homeowners (54.6%) and those in private rental (62.5%) lost their homes 12 months after separation, due to constant harassment, post separation violence, property damage and financial hardship. It was noted that public and community housing were a protective factor for the prevention of homelessness.
Conclusions and recommendations based on the findings (incl. how to improve "safe at home" programs in the future)	Recommendations linked to purpose of report and areas examined. Recommended features of a "safe at home" response included: safety assessments and risk of homelessness; multiple entry points; outreach case management offered for up to 12 months (similar to NSW and WA, whereas Victoria has 6-12 months depending on circumstances); the lead agency will be decided by the family and will be responsible for case-management; outreach and advocacy; an MOU be implemented between key agencies; and, regular meetings held (Watson, 2014, p. 33). A significant finding of the Watson (2014) report was that the majority of both homeowners and families living in private rental lost their homes within 12 months of separation. This supported the conclusion about increasing safe at home interventions in the ACT.
How the findings are useful for wider program development/practice	The report was central to concerns about improving safe at home responses, advocating for a specific Safe at Home program in ACT to complement the Family Violence Intervention Program.
Evaluation quality	
Conducted by a person(s) independent of the service	No - the Watson (2012) report stated that DVCS undertook this 1 year (2013) project with a grant from ACT Office for Women. The evaluator, Jo Watson (2014) was under the supervision of Mirjana Wilson, Executive Director, DVCS and Dr Merrelyn Emery, Department of Applied Human Sciences, Concordia University. The report was not independent of the service involved.
External ethics review	No - however, the following was mentioned (p. 10): "A Project Steering Committee was established to provide guidance and ensure that research processes were conducted in an ethical manner consistent with the 'Australian code for the responsible conduct of research' (NHMRC, 2007) and World Health Organization Recommendations for 'Research on Domestic Violence against Women' (WHO, 2001)."
Accessible in a form other than grey literature	No - the report was accessible only within the grey literature.
Peer-reviewed	It was unclear from the report as to whether a peer-review process was undertaken.
Appropriateness of the aims/questions for the evaluation	Yes - the purpose of the report was to further understand ongoing support women need to remain in their homes post DV, identify best practice services and supports, identify available supports in ACT, identify gaps in continuum of care and provide recommendations. This was achieved through the study design.
Clearly outlined methodology/study design	Yes - the study design was clearly outlined.

Appropriate/rigorous methodology for the evaluation aims and timeframe	Yes - The report utilised a range of qualitative and quantitative methods and methods of analysis. The methodology was appropriate for the 1 year timeframe.
Primary data collected and appropriate for meeting research aims	Yes - data collection included different methods: <ul style="list-style-type: none"> • statistics from DVCS 2013 (1st Jan to 31st Dec 2013); • survey of workers in services (n=22 full survey responses out of 50); • case files from DVCS (n=35 female clients); and • case studies (older women and homelessness from Women's Legal Service data).
Process measures used	Yes - mapping support services in ACT for women, to compare support needs with supports available.
Outcome measures used which match the research questions	Yes - causal path analysis two clusters: renting/home ownership and "identified distance from mainstream Anglo-Australian culture" (p.12).
Any important areas not covered by the evaluation	The report did not explore any limitations with the methodology or with evaluation as a whole. Outcome data for Aboriginal and Torres Strait Islander clients and clients with disabilities would have been useful.
Overall assessment of evaluation quality	It must be noted that this was not officially an "evaluation" of a specific "safe at home" service but an examination of data in a service that does support women to remain safe at home for a short period. The report made some useful points about key elements of safe at home programs and gaps in service responses in the ACT. As many women who remained at home lost their homes 12 months post-DV, this report identified problems with the current service system and lack of supports for women in the long term, post-crisis. A future "safe at home" program in ACT to complement FVIP framework was recommended.

New South Wales

Program/strategy background	
Jurisdiction	NSW
Program/strategy	Greater Western Sydney HAP DV Project ("GWS")
Evaluation	Breckenridge, J., Hamer, J., Newton, B.J., & valentine, k. (2013). <i>NSW Homelessness Action Plan extended evaluation: Greater Western Sydney HAP domestic violence project final report</i> . HAP Project 3.12. Centre for Gender-Related Violence Studies (CGRVS) and Social Policy Research Centre (SPRC). Sydney: University of New South Wales.
Description of program/strategy	Report on the Greater Western Sydney (GWS) Homelessness Action Plan Domestic Violence Project (HAP DV). "HAP DV projects provide eligible women and children with appropriate housing (through either Start Safely or social housing) alongside an integrated support package which includes case management and highly flexible brokerage funding. HAP DV packages are income tested and dependent on an initial assessment of the complexity of women's housing and support needs by Housing NSW. SHLV clients are not eligible for a HAP DV package as they are already deemed to be accessing an appropriate service. Women with personal assets such as a mortgage are also screened out of the program due to failing the assets test," (pp. 10-11 final report). Key program elements in HAP are the provision of appropriate housing alongside an integrated support package. The package includes intensive, flexible case management with the ability to "buy in" to specialised services, so case management is hosted within the most suitable organisation. Flexible brokerage funding beyond material housing-related needs is another key program element. Local control of service provision, enabling the primary organisation to provide individualised case plans and to designate flexible brokerage funds, was identified as a key practice approach. Transparent governance of brokerage allocation was also seen to be important, as well as shared accountability for outcomes between the homelessness and DV sectors. Centralised and skilled coordination by the auspice agency was seen to "ensure a fast, consistent and well-managed response to clients" (p. 5).
Definition of "safe at home" within program/strategy	While the term "safe at home" was not specifically referred to within this evaluation, the language describing the program (Homelessness Action Plan: Long-term accommodation and support for women and children experiencing domestic and family violence) is aligned with the overarching philosophy of "safe at home" The program's objectives include: to improve women and children's safety; to reduce the length of time families who have experienced domestic violence spend in crisis accommodation services; and to increase housing options for women and children who have experienced domestic violence by providing integrated support services to improve their ability to access both the private rental market and maintain their tenancies in both private and social housing. This dual safety and housing focus is seen as key to enabling women and children escaping domestic violence to remain in the home of their choice.
Lead agency/department	An integrated client case plan, supported referral option for clients who do not require case management, as well as the employment of a HAP DV coordinator were key features of the GWS service model.
Collaborating agencies	Wimlah Women's and Children Refuge.
Inclusion rationale	This report self-identifies as a formal evaluation of the Housing NSW Program: "Long-term accommodation and support for women and children experiencing domestic violence" (HAP DV). The evaluation was funded by Housing NSW and undertaken by researchers external to the program. The HAP DV program specifically targets women and children leaving violence for support in maintaining appropriate independent housing, and also aims to support the safety of women to remain safely in the independent accommodation of their choice.
Evaluation summary	
Key information: funder; length of evaluation; evaluation governance; purpose of the evaluation	The evaluation was undertaken by the Centre for Gender Related Violence Studies (CGRVS) in partnership with the Social Policy Research Centre (SPRC), within the University of New South Wales. The evaluation was funded by Housing NSW (Department of Family and Community Services), with data collected between September and December 2012. The HAP evaluation strategy was developed in consultation with government agencies and the NGO sector, and involves three inter-related components: self-evaluations; extended evaluations (involving 15

	<p>selected projects and service approaches to addressing homelessness) and including support for women and children escaping domestic violence; and meta-analysis, to synthesise aggregated findings from self-evaluations, extended evaluations and any other available evaluations regarding HAP activities. While there are no explicit research questions stated, the overall aim of the broader evaluation is to “provide an overview of the general service model and brief comment on implementation differences between the three HAP DV projects where relevant, as well as drawing together the similarities in relation to the HAP DV projects’ service model as a whole” (p. 8, final report).</p>
Methodology	<p>The GWS evaluation had a mixed-methods approach, comprised of service monitoring data as well as 16 qualitative interviews with clients, agency staff and other key stakeholders. A systematic review and thematic analysis of data was applied, including reference against the literature. The primary sources of data included: self-evaluation reports, administrative and financial documentation, client monitoring data, interviews with clients and staff of the project and interviews with key stakeholders. The project also commissioned a substantial research report, <i>I’m safe, I’m home: Domestic Violence Support, Western Sydney Service – A Process Evaluation</i> (Cohen, 2012) which was referred to extensively in the report (pp. 2-3).</p>
Key program elements	<p>The key service delivery component for the GWS project was the development and implementation of an integrated client case plan. The case plan “delivers goal-directed, client-focused support and accompanying brokerage funding in order to: provide services and support; facilitate transition to independent living; enable training and education; and assist in building community connections. Specifically the project combines the following program elements:</p> <ul style="list-style-type: none"> • Access to social housing, or suitable private rental accommodation through the provision of the Start Safely Private Rental Subsidy. • Integrated case management support services. • Flexible brokerage funding. • Supported referral option for clients who don’t require case management from the project. • Regional Homelessness Committees (RHCs) overseeing collaborative responses to HAP DV initiatives and other housing programs on offer. • Employment of a HAP DV coordinator for the GWS project. Model included a requirement for the auspice agency to convene local Coordination Groups (CGs) comprising of Specialist Homelessness Services, mainstream services and partner government agencies in the local government area. In GWS these coordination groups concentrated on networking and information sharing across the service sector. • Evaluation methodology.” (p. 2). <p>GWS was the only site of the three HAP DV projects to have developed supported referral as part of its suite of services. “Supported referral provided one-off brokerage without additional or ongoing case management for low-needs Start Safely clients, who chose to opt out of participating in the wrap around support, but who still required some financial assistance following leaving a domestic violence situation. In December 2011 the decision was taken to leave the option of case management open for clients receiving supported referral in recognition that circumstances could change and because a larger number of requests for one-off brokerage were being received that did not specify if DV was involved or how brokerage would assist the client. In some cases supported referral is offered because clients are already receiving support, including a case plan, from Staying Home Leaving Violence” (p.22).</p>
Program/strategy practice approaches	<p>The Greater Western Sydney HAP DV Project (GWS), serviced the local government areas of Auburn, Bankstown, Blacktown, Camden, Campbelltown, Fairfield, Holroyd, Liverpool, Parramatta and Penrith. The GWS HAP DV project was auspiced by Wimlah Women’s and Children’s Refuge.</p> <p>The GWS project “is one of three regional HAP DV projects providing women and children who have experienced or are escaping from domestic and family violence with appropriate, affordable housing, alongside an integrated support package that includes case management and brokerage monies” (p. 1).</p> <p>GWS was the only site of the three HAP DV projects to have developed supported referral as part of its suite of services. “Supported referral provided one-off brokerage without additional or ongoing case management for low-needs Start Safely clients, who chose to opt out of participating in the wrap around support, but who still required some financial assistance following leaving a domestic violence situation. In December 2011 the decision was taken to leave the option of case management open for clients receiving supported referral in recognition that circumstances could change and because a larger number of requests for one-off brokerage were being received that did not specify if DV was</p>

	involved or how brokerage would assist the client. In some cases supported referral is offered because clients are already receiving support, including a case plan, from Staying Home Leaving Violence” (p.22)
Specific conditions under which "safe at home" was not going to be viable/safe	This report does not indicate specific conditions under which "safe at home" was not a viable and safe response for some women and children.
Diverse population groups and geographical locations	<p>The percentage of HAP DV clients who identified as Indigenous ranged from 5.25% to 9.9% (5.2% in the general population in that region, from the 2006 census) in Greater Western Sydney. However, the report does not make specific comments regarding the effectiveness of the program for Indigenous women and their children, although it does make comment on this group. “The data demonstrate that by the end of 2011-12, 5.25% of clients in the project (17 out of 324) identified as Aboriginal or Torres Strait Islander”, which closely matched 2006 Census data for those experiencing homelessness who also identified as Indigenous. “These figures suggest the project is reaching these communities in relatively appropriate numbers. However, efforts to interview local Aboriginal workers were unsuccessful and the absence of more detailed qualitative data invites some caution in the interpretation of these figures. . .</p> <p>The GWS Draft Service Mapping report notes the ongoing need for Aboriginal-specific workers in the region, and Aboriginal women may require different screening and assessment processes” (pp. 38-39).</p> <p>There is no information in this report regarding women with disabilities, older women and CALD populations and their engagement with the HAP DV program. The report noted the importance for agencies to have the ability to purchase services from small, local providers in order to tailor packages for women in isolated and rural locations. The flexibility of HAP DV was seen as a significant strength for supporting rural and remote populations.</p>
Relevant policy and legislative context	The report directly references the 2009 NSW Homelessness Action Plan 2009-2014 (HAP), which effectively created the HAP DV program. Other influential NSW policies include the Going Home Staying Home Reform Plan (FACS, 2014).
Key findings	<p>“From January 2010 to June 2012, the project supported 324 clients and 422 accompanying children. The majority of families were at imminent risk of homelessness and some were living in crisis accommodation. Every one of these clients was housed in long-term accommodation and by far the majority had continued to sustain their tenancy on exit. In the 2011/12 financial year over 88% of clients who were assisted through the project had remained stable in their housing” (p. 3). Overall GWS clients reported feeling a significant improvement in their general wellbeing.</p> <p>The evaluation found ten key success factors for the model:</p> <ol style="list-style-type: none"> 1. A combination of program elements that mutually enhance one another. 2. Ongoing, flexible case management with a shared DV/Housing focus. 3. Brokerage aligned to the case plan. 4. A housing focus but not housing constrained. 5. Eligibility screening within Housing NSW. 6. Inter-agency influence, education and knowledge exchange. 7. Local adaptation of the overall program model. 8. Strong management, coordination skills and practice expertise in the auspice agency. 9. Additional resources for local service providers. 10. Case management focused on client empowerment and learning to use the service system (p. 4). <p>Key lessons learnt:</p> <ol style="list-style-type: none"> 1. Flexible brokerage funding is a critical component of a sufficient and effective service response to meet the needs of women and children who are at risk of homelessness due to domestic or family violence. 2. Local control to enable flexible application of project resources is the most effective means of meeting client needs. 3. Access to the project would be greatly improved by the development of up to date DV screening tools and staff training in Housing NSW, to increase the speed and accuracy of initial approvals. 4. Meeting children’s needs is a significant issue within women’s capacity to sustain tenancies. 5. Financial and other administrative procedures between the auspice agency and service providers need to be streamlined as possible to minimise onerous additional work.

	<ol style="list-style-type: none"> 6. The coordinator role can support a fast, consistent and well-managed response to clients if key conditions are met. 7. Eligibility criteria for HAP DV exclude some women who need access to the project and the specific criteria for high and low needs packages do not appropriately reflect complexity of need. A review of these at program level is therefore appropriate. Integration and collaborative practice happen most effectively when equally underpinned by two elements: <ol style="list-style-type: none"> a. Shared accountability for outcomes. b. Financial resources managed at the local level (p. 5).
<p>Conclusions and recommendations based on the findings (incl. how to improve "safe at home" programs in the future)</p>	<p>There were concerns that women who had historically experienced domestic violence but were not in immediate danger were excluded from the HAP DV project. A longer-term approach and acknowledgement of the long-term (and often accumulating) effects of domestic violence on women and children was recommended in the report. The evaluation also found that many women, due to joint ownership of assets or income with their violent partner, or who inherit debt from their partner with an appearance of being asset-rich, do not pass the income test for access to Start Safely or social housing but remain in need of support to leave the violent home.</p> <p>The evaluation also reported concerns from stakeholders that Housing NSW and Access and Demand teams may not have sufficient expertise and/or adequate screening procedures to identify domestic violence, and many not recognise the appropriate level of complexity and need.</p> <p>Further training for Housing NSW staff in domestic violence and appropriate screening tools were urgent recommendations. Related to this, the report recommended this and similar projects would be strengthened if questions of specific eligibility and criteria were resolved consistently.</p> <p>The report found that case support was experienced as too short, or ending abruptly rather than tapering, for some clients – hence a longer, flexible period of support was recommended. Increased acknowledgement of children and their needs was also recommended for future program adaptation.</p> <p>The report recommended that future projects with similar models would benefit from more comprehensive planning around likely expenditures, as allocations for initial packages turned out to be unrealistic. The report recommended that future projects with similar models would benefit from more comprehensive planning around likely expenditures, as allocations for initial packages turned out to be unrealistic. The authors make recommendations that are clearly related to the findings. The conclusions were well supported by the data analysis.</p>
<p>How the findings are useful for wider program development/practice</p>	<p>The holistic service model of HAP – in particular the ongoing, intensive and flexible support in the form of case management, in addition to assistance in the provision of a safe, appropriate and independent physical home – is transferable to other jurisdictions. In particular, the evidence of flexible brokerage funding and the option to access case support for up to 12 months, and the powerful combination of these factors, is important evidence that is internationally influential. These findings are highly important and inform ongoing clinical work. The multiple data sources across various agencies and roles, extensive documentation of client feedback and previous reviews, as well as the consistency across stakeholder comments and statistical information contribute to the rigour of the findings. This holds true despite the evaluation's limitations, which include: reliance on self-reported information, a small client sample, inability to contact clients who had dropped out of the project, and the lack of data relating to long-term outcomes. The finding that provision of flexible brokerage dollars, not constrained by a narrow definition of housing purposes, is a useful finding that informs practice and program development. Similarly other findings, such as: the need for a longer, more flexible model of case support; the need for greater acknowledgement of children and their needs; the need for updated domestic violence training and screening tools for Housing NSW staff and the need for specific eligibility criteria to be clarified and consistently applied greatly inform the broader practice field. The goal of the research is highly relevant to the SAHME project. The HAP evaluation directly explores the effectiveness of programs that enhance safety and prevent homelessness for women and children who have experienced domestic violence, as per the ANROWS project brief. The conclusions directly contribute to our knowledge of SAH strategies, including the effectiveness, limitations and service specifications of SAH programs.</p>

Evaluation quality	
Conducted by a person(s) independent of the service	Yes - independent researchers – Centre for Gender Related Violence Studies and the Social Policy Research Centre, UNSW. The evaluation was undertaken independently of the HAP DV programs and was funded by FACS.
External ethics review	Yes - UNSW Human Research and Ethics Committee. Ethical issues are not detailed in this report.
Accessible in a form other than grey literature	No - but available online and prepared for FACS NSW.
Peer-reviewed	Not a strict peer-review, but the report was both internally and externally reviewed by FACS and feedback was provided to the evaluation team.
Appropriateness of the aims/questions for the evaluation	<p>While there is no explicit statement of the research questions/aims, the evaluation assesses the effectiveness of the HAP DV program. The outcome measure used is the establishment and maintenance of appropriate independent housing for women and children who have experienced domestic violence. One stated aim of the evaluation is to “provide an overview of the general service model and brief comment on implementation differences between the three HAP DV projects where relevant, as well as drawing together the similarities in relation to the HAP DV projects’ service model as a whole” (p. 8, final report). While there were no explicit research questions in this report, the stated aim of the overall HAP DV evaluation was “to provide an overview of the general service model and brief(ly) comment on implementation differences between the three HAP DV projects where relevant, as well as drawing together the similarities in relation to the HAP DV projects’ service model as a whole” (Final Report, p. 8). While the evaluation goals were not always explicit, the HAP DV programs, including the data reviewed and conclusions drawn in the evaluation, clearly reflect a Safe at Home strategy.</p> <p>While there was no explicit statement of the research/evaluation aims in this report, the evaluation assesses the effectiveness of the HAP DV program. The outcome measures applied were the establishment and maintenance of appropriate independent housing for women and children who have experienced domestic violence, as well as the wellbeing of women who have engaged with the project.</p>
Clearly outlined methodology/study design	Yes - the methodology was clearly outlined.
Appropriate/rigorous methodology for the evaluation aims and timeframe	<p>Yes - mixed-method inquiry combining a synthesis of service monitoring data (self-evaluation reports, administrative and financial documentation, client monitoring data) with qualitative interviews. A systematic review and thematic analysis of the data was applied, including reference against the current literature. A substantial research report commissioned by the project, entitled: I’m safe, I’m home: Domestic Violence Support, Western Sydney Service – A Process Evaluation (Cohen, 2012) also informed the evaluation. The report analyses the limitations of the research methodology, including its reliance on self-reporting data, the lack of longer-term outcome data, and the small number of client interviews collected. However the use of longer-term reporting data from administrative records as well as access to a previous program evaluation, which included extensive written feedback from clients, went a long way towards addressing these methodological issues. The themes drawn from multiple data sources are consistent and strong. The complexities of work with this client group, as well as local program differences, are considered. The report notes that there were some issues with data quality and apparent inconsistencies with the way the data were collected when it came to project-reported data. Original data was collected in the form of qualitative interviews, although the report notes that a greater amount of primary client data would have added to the rigour of the findings.</p> <p>Data analysis was well explained.</p>
Primary data collected and appropriate for meeting research aims	Yes – 16 in-depth qualitative interviews with a range of stakeholders including clients, agency staff and other key actors. For clients – “clients were invited to take part in the evaluation via an email or phone call from participating agencies” (p. 16). Professionals assisted with the identification and recruitment of service providers and individual clients. The professional recruitment strategy was not detailed. The sampling strategy for clients involved invitations via phone or email from participating agencies. The professional recruitment strategy was not detailed in this report. The strategy was appropriate for the evaluation approach, with the authors acknowledging that client participation was low with only six client interviews undertaken in the GWS cohort.

	<p>The interview sample and other data sources were appropriate given the project's scope and aims. Limitations included reliance on self-reported information, as well as a small sample of only six clients interviewed. Inability to measure longer-term housing outcomes was also a limitation. However, extensive documentation of prior reviews and the project's research report, including extensive client feedback, as well as interviews with a range of stakeholders from diverse roles throughout the service structure strengthened the findings.</p> <p>Yes - the methodology was appropriate to address the research goal. Multiple data sources were utilised, including internal reporting data, client feedback, previous evaluations of projects and a large number of qualitative interviews with various key stakeholders. The combination in the overall evaluation with the two other NSW HAP DV projects also increased the strength of the findings.</p> <p>The results speak directly to the aim of the evaluation, which is to assess the outcomes for women and children escaping violence engaged in the GWS HAP DV project as well as to evaluate how the project is functioning.</p>
Process measures used	<p>Yes - client engagement with the service, demographic data.</p> <p>A process evaluation was part of Cohen's (2012) study on the GWS project, and included measures on program logic, articulation of conceptual framework.</p>
Outcome measures used which match the research questions	<p>Yes - outcome measures included the establishment and maintenance of safe, ongoing tenancies for vulnerable women and their children as well as the number of clients supported. Other measures included: client-reported wellbeing, ability to manage finances and provide for children. However, validated outcome measures were not administered to clients from the commencement of service at regular intervals over time.</p> <p>Short and medium-term client outcomes were reported in monitoring data and included in the evaluation; however long-term client outcomes were unavailable.</p> <p>Service system and delivery outcome measures included: enhanced worker skill, knowledge and confidence in domestic violence, housing and/or case management practice as a result of engagement with the project; ability of existing services to increase client load through becoming registered service providers for the DVS WSS project; the creation and enhancement of collaborative working relationships; and the filling of service system gaps via increased collaboration and access to brokerage funding.</p>
Any important areas not covered by the evaluation	<p>Longitudinal accounts of client housing outcomes were not included in the evaluation. More information on the experiences of Indigenous, CALD and disabled women's experiences would be useful.</p>
Overall assessment of evaluation quality	<p>The report represents a rigorous evaluation with synthesis of multiple data sources, including primary data, client feedback, information from previous research reports, qualitative interviews with multiple stakeholders and reference to existing literature. This evaluation demonstrates that where holistic, medium-to-long-term support is provided, and where brokerage funds are not constrained to a narrow definition of housing needs, HAP DV has proven to be highly effective at supporting women to establish and maintain independent and appropriate housing. The combination of the above elements emerged as key in the evaluation; the provision of a safe place, or case support, or access to flexible brokerage support on their own will not provide the same level of holistic support and positive medium-term outcomes for women. The evaluation is very robust with a strong mixed-methods design, encompassing detailed service data, program self-reports and independent evaluations of two of the three regions' programs, as well as a high number of qualitative interviews with key stakeholders. The evaluation was independently conducted, and also included a meta-analysis which synthesised the findings and existing literature.</p>

Program/strategy background	
Jurisdiction	NSW
Program/strategy	Hunter Integrated Response to Homeless and Domestic Violence for Women project (HIR Project), administered under the Homelessness Action Plan Domestic Violence Project (HAP DV).
Evaluation	Breckenridge, J., Hamer, J., Newton, B.J., & valentine, k. (2013). <i>NSW Homelessness Action Plan Extended Evaluation: Hunter HAP Domestic Violence Project Final Report</i> . HAP Project 3.13b. Centre for Gender-Related Violence Studies (CGRVS) and Social Policy Research Centre (SPRC). Sydney: University of New South Wales.
Description of program/strategy	<p>The Hunter Integrated Response to Homeless and Domestic Violence for Women project (HIR Project) was administered under the Homelessness Action Plan Domestic Violence Project (HAP DV). The Hunter HAP DV project encompasses the local government areas of Newcastle, Lake Macquarie, Port Stephens, Dungog, Maitland, Cessnock, Muswellbrook, Singleton and Upper Hunter and is auspiced by NOVA Women's Accommodation and Support Inc.</p> <p>"HAP DV projects provide eligible women and children with appropriate housing (through either Start Safely or social housing) alongside an integrated support package which includes case management and highly flexible brokerage funding. HAP DV packages are income tested and dependent on an initial assessment of the complexity of women's housing and support needs by Housing NSW. SHLV clients are not eligible for a HAP DV package as they are already deemed to be accessing an appropriate service. Women with personal assets such as a mortgage are also screened out of the program due to failing the assets test." (pp. 10-11 final report)</p>
Definition of "safe at home" within program/strategy	While the term "safe at home" was not specifically referred to within this evaluation, the language describing the program (Homelessness Action Plan: Long-term accommodation and support for women and children experiencing domestic and family violence) is aligned with the overarching philosophy of "safe at home". The program's objectives include: to improve women and children's safety; to reduce the length of time families who have experienced domestic violence spend in crisis accommodation services; and to increase housing options for women and children who have experienced domestic violence by providing integrated support services to improve their ability to access both the private rental market and maintain their tenancies in both private and social housing. This dual safety and housing focus is seen as key to enabling women and children escaping domestic violence to remain in the home of their choice.
Lead agency/department	Housing NSW (Department of Family and Community Services).
Collaborating agencies	Nova Women's Accommodation and Support Inc.
Inclusion rationale	This report self-identifies as a formal evaluation of the Housing NSW Program: "Long-term accommodation and support for women and children experiencing domestic violence" (HAP DV). The evaluation was funded by Housing NSW and undertaken by researchers external to the program. The HAP DV program specifically targets women and children leaving violence for support in maintaining appropriate independent housing, and also aims to support the safety of women to remain safely in the independent accommodation of their choice.
Evaluation summary	
Key information: funder; length of evaluation; evaluation governance; purpose of evaluation	<p>The evaluation was undertaken by the Centre for Gender Related Violence Studies (CGRVS) in partnership with the Social Policy Research Centre (SPRC), within the University of New South Wales. The evaluation was funded by Housing NSW (Department of Family and Community Services), with data collected between September and December 2012.</p> <p>The HAP evaluation strategy was developed in consultation with government agencies and the NGO sector, and involves three inter-related components: self-evaluations; extended evaluations (involving 15 selected projects and service approaches to addressing homelessness) and including support for women and children escaping domestic violence; and meta-analysis, to synthesise aggregated findings from self-evaluations, extended evaluations and any other available evaluations regarding HAP activities.</p> <p>While there are no explicit research questions stated, the overall aim of the broader evaluation is to "provide an overview of the general service model and brief comment on implementation differences between the three HAP DV projects where relevant, as well as drawing together the similarities in relation to the HAP DV projects' service model as a whole" (p. 8, final report).</p>

Methodology	<p>The HIR evaluation had a mixed-methods approach, comprised of service monitoring data as well as 19 qualitative interviews with clients, agency staff and other key stakeholders. A systematic review and thematic analysis of data was applied, including reference against the literature.</p> <p>The primary sources of data included: self-evaluation reports, administrative data (including client numbers and outcomes, budgets, process records, promotional materials, client case plans, service provider contracts etc.), interviews with clients, interviews with agency staff and interviews with key stakeholders (including client service providers, Community Service lead agency staff and Regional Homelessness Committee members). The project also commissioned a research report, Hunter Integrated Response to Homelessness and Domestic Violence for Women Local Evaluation (NOVA, 2013), which the authors drew upon for the report.</p>
Key program elements	<p>Key program elements in HAP are the provision of appropriate housing alongside an integrated support package. The package includes intensive, flexible case management with the ability to "buy in" to specialised services, so case management is hosted within the most suitable organisation. Flexible brokerage funding beyond material housing-related needs is another key program element. The key service delivery component for the HIR project was the development and implementation of an integrated client case plan. The case plan "delivers goal-directed, client-focused support and accompanying brokerage funding in order to: provide services and support; facilitate transition to independent living; enable training and education; and assist in building community connections. Specifically the HIR project combines the following program elements:</p> <ul style="list-style-type: none"> • Access to social housing, or suitable private rental accommodation through the provision of the Start Safely Private Rental Subsidy. • Integrated case management support services. • Flexible brokerage funding" (p. 2).
Program/strategy practice approaches	<p>A HAP DV coordinator was employed by NOVA Women's Accommodation and Support Inc. to manage project implementation. The service providers are the direct client support and case management workers from a range of local organisations, who access the HAP DV support packages on their clients' behalf. The model also had a local Assessment Group, which concentrated on decision making concerning case management brokerage packages for clients, reviewing and developing case management plans in partnership with relevant services, and periodically reviewing the progress of case management plans (p. 2). The project evolved from the original service specifications, based on the identification of local needs and experience of implementation:</p> <ul style="list-style-type: none"> • Target numbers were exceeded, but the number of social housing tenancies was lower than anticipated due to the availability of properties. • The initial budget for support packages was higher than needed, and was revised. • Due to a lack of service capacity and support in one of the areas, two workers were employed by the HIR to do outreach work specifically for the project (p. 19). <p>Local control of service provision, enabling the primary organisation to provide individualised case plans and to designate flexible brokerage funds, was identified as a key practice approach. Transparent governance of brokerage allocation was also seen to be important, as well as shared accountability for outcomes between the homelessness and DV sectors. Centralised and skilled coordination by the auspice agency was seen to "ensure a fast, consistent and well-managed response to clients" (p. 5).</p>
Specific conditions under which "safe at home" was not going to be viable/safe	<p>This report does not indicate specific conditions under which "safe at home" was not a viable and safe response for some women and children.</p>
Diverse population groups and geographical locations	<p>Although data on Indigenous clients was recorded, there was limited qualitative data to provide evidence of program effectiveness for Indigenous clients or other diverse population groups. Indigenous populations: "The Hunter Independent Evaluation report refers to the NSW Counting the Homeless Report 2006 which states that Indigenous people make up 9.7% (or 192 of 1981) of homeless people in the Hunter region (cited in NOVA, 2013: 9). The June 2012 data portal report indicates that the HIR project engaged a total of 11 Indigenous women (from 117), making up 9.4% of the HIR project client population. This suggests the project is reaching these communities in relatively appropriate numbers. However, efforts to interview local Aboriginal workers were unsuccessful and the absence of more detailed qualitative data invites some caution in the interpretation of these figures" (p. 36).</p>

	<p>CALD populations: Established agencies across the different sectors included those with strengths in providing support for women from CALD backgrounds (p. 35). The report contains no specific information on CALD clients.</p> <p>Women with disabilities, older women: No specific information in this report.</p> <p>The report noted the importance for agencies to have the ability to purchase services from small local providers in order to tailor packages for women in isolated and rural locations. There was a particular shortage of housing in the Hunter region which made local control and flexible brokerage arrangements all the more important.</p>
<p>Relevant policy and legislative context</p>	<p>The report directly references the 2009 <i>NSW Homelessness Action Plan 2009-2014 (HAP)</i>, which effectively created the HAP DV program. Other influential NSW policies include the <i>Going Home Staying Home Reform Plan (FACS, 2014)</i>.</p>
<p>Key findings</p>	<p>From the time the project started in October 2010 to June 2012, a total of 120 women and 236 children were assisted by the project. A total of 117 clients were supported at some time in the 2011/12 financial year. In the 2011/12 financial year over 95% of clients who were assisted through the project had remained stable in their housing (pp. 2-3). Clients reported a significant improvement in their general wellbeing as a result of their engagement with the project and a greater confidence in their ability to live independently, including in managing their own finances and providing for their children.</p> <p>The evaluation found ten key success factors for the model:</p> <ol style="list-style-type: none"> 1. A combination of program elements that mutually enhance one another. 2. Ongoing, flexible case management with a shared DV/Housing focus. 3. Brokerage aligned to the case plan. 4. A housing focus but not housing constrained. 5. Eligibility screening within Housing NSW. 6. Inter-agency influence, education and knowledge exchange. 7. Local adaptation of the overall program model. 8. Strong management, coordination skills and practice expertise in the auspice agency. 9. Additional resources for local service providers. 10. Case management focused on client empowerment and learning to use the service system (pp. 4-5). <p>“The homelessness service system has been enhanced by the work of the project in four key aspects: workforce skill development; increase in overall case-load capacity; closer collaboration and integration; and closing gaps in the provision of appropriate, timely support to prevent negative housing incomes” (p. 4).</p> <p>Key lessons learnt:</p> <ol style="list-style-type: none"> 1. Flexible brokerage funding is a critical component of a sufficient and effective service response to meet the needs of women and children who are at risk of homelessness due to domestic or family violence. 2. Local control to enable flexible application of project resources is the most effective means of meeting client needs. 3. Access to the project would be greatly improved by the development of up-to-date DV screening tools and staff training in Housing NSW, to increase the speed and accuracy of initial approvals. 4. Meeting children’s needs is a significant issue within women’s capacity to sustain tenancies. 5. Financial and other administrative procedures between the auspice agency and service providers need to be as streamlined as possible to minimise onerous additional work. 6. The coordinator role can support a fast, consistent and well-managed response to clients if key conditions are met. 7. The eligibility criteria for HIR exclude some women who need access to the project and the specific criteria for high and low need packages do not appropriately reflect complexity of need. A review of these at the program level is therefore appropriate. 8. Integration and collaborative practice happen most effectively when equally underpinned by two elements: <ol style="list-style-type: none"> a. Shared accountability for outcomes. b. Financial resources managed at the local level (pp. 5-6).

	<p>The following findings were specific to HIR:</p> <ul style="list-style-type: none"> • Case management and brokerage supported women to make connections with community – access to brokerage funding was a crucial factor in establishing and maintaining tenancy. • Brokerage assisted in maintaining tenancies – in some instances brokerage funding enabled the bond and the first few rent payments to be covered, while in others it enabled women to continue to pay their rent even where they had a competing bill or urgent expense. • Case management provided ongoing support – human services workers were alerted to the housing crisis and the many challenges faced by clients in maintaining their tenancies. • Financial counselling and NILS – Facilitation of access to financial counselling and No Interest Loan Schemes (NILS) were important in enabling women to develop skills in maintaining a tenancy, including budgeting, managing existing debts and avoiding new unsustainable debts (pp. 30-31). <p>Key findings in relation to brokerage use:</p> <ol style="list-style-type: none"> 1. That flexible brokerage is effectively used to cover one-off costs for household items or daily living materials to establish adequate living conditions. 2. That flexible brokerage is effectively used to increase the capacity for clients to access critical services to identify and prevent escalation of health and wellbeing problems. 3. That flexible brokerage is effectively used to enable clients access to training and employment to develop financial independence, thus contributing to a long-term capacity to remain safe and stable. 4. That flexible brokerage is effectively used as a mechanism and resource to increase self-efficacy. 5. That a high degree over the control of brokerage funds is located at the level of client case managers and this increases its positive effect (pp. 48-49). <p>“In terms of non-housing outcomes, clients reported a significant improvement in their general wellbeing as a result of their engagement with the project and greater confidence in their ability to live independently. Women particularly felt more confident to manage their financial responsibilities and provide for their children. The project enabled their engagement in various formal and informal support networks and systems and this helped to reduce their sense of social isolation and begin to address issues of trauma, mental illness, and low self-esteem. A reignited sense of independence and optimistic outlook on life resulted in many women setting goals and embarking upon steps to achieve short, medium and long-term aspirations for their career and overall future” (p. 4).</p> <p>“The criteria of social housing eligibility were common across the three HAP projects evaluated: however it was thought to be a specific restriction on the HIR that only clients who had secured a tenancy could receive the support packages (not those who were looking for housing). This was reported as an important constraint on the project’s capacity to assist women who were otherwise eligible” (p. 23).</p>
<p>Conclusions and recommendations based on the findings (incl. how to improve "safe at home" programs in the future)</p>	<p>Yes - there were concerns that women who had historically experienced domestic violence but were not in immediate danger were excluded from the HAP DV project. A longer-term approach and acknowledgement of the long-term (and often accumulating) effects of domestic violence on women and children was recommended in the report. The evaluation also found that many women, due to joint ownership of assets or income with their violent partner, or who inherit debt from their partner with an appearance of being asset-rich, do not pass the income test for access to Start Safely or social housing but remain in need of support to leave the violent home.</p> <p>The evaluation also reported concerns from stakeholders that Housing NSW and Access and Demand teams may not have sufficient expertise and/or adequate screening procedures to identify domestic violence, and many not recognise the appropriate level of complexity and need.</p> <p>Further training for Housing NSW staff in domestic violence and appropriate screening tools were urgent recommendations. Related to this, the report recommended this and similar projects would be strengthened if questions of specific eligibility and criteria were resolved consistently.</p> <p>The report recommended that future projects with similar models would benefit from more comprehensive planning around likely expenditures, as allocations for initial packages turned out to be unrealistic.</p> <p>The authors make recommendations that are clearly related to the findings. The conclusions were well supported by the data analysis.</p>

<p>How the findings are useful for wider program development/practice</p>	<p>The holistic service model of HAP – in particular the ongoing, intensive and flexible support in the form of case management, in addition to assistance in the provision of a safe, appropriate and independent physical home – is transferable to other jurisdictions. In particular, the evidence of flexible brokerage funding and the option to access case support for up to 12 months, and the powerful combination of these factors, is important evidence that is internationally influential. These findings are highly important and inform ongoing clinical work. The multiple data sources across various agencies and roles, extensive documentation of client feedback and previous reviews, as well as the consistency across stakeholder comments and statistical information contribute to the rigour of the findings. This holds true despite the evaluation's limitations, which include: reliance on self-reported information, a small client sample, inability to contact clients who had dropped out of the project, and the lack of data relating to long-term outcomes. The finding that provision of flexible brokerage dollars, not constrained by a narrow definition of housing purposes, is a useful finding that informs practice and program development. Similarly other findings, such as: the need for greater acknowledgement of children and their needs; the need for updated domestic violence training and screening tools for Housing NSW staff; and the need for specific eligibility criteria to be clarified and consistently applied greatly inform the broader practice field. The goal of the research is highly relevant to the SAHME project. The HAP evaluation directly explores the effectiveness of programs that enhance safety and prevent homelessness for women and children who have experienced domestic violence, as per ANROWS Project brief. Yes, the conclusions directly contribute to our knowledge of SAH strategies, including the effectiveness, limitations and service specifications of SAH programs.</p>
<p>Evaluation quality</p>	
<p>Conducted by a person(s) independent of the service</p>	<p>Yes - independent researchers – Centre for Gender Related Violence Studies and the Social Policy Research Centre, UNSW. The evaluation was undertaken independently of the HAP DV programs and was funded by FACS.</p>
<p>External ethics review</p>	<p>Yes – UNSW Human Research and Ethics Committee. Ethical issues are not detailed in this report.</p>
<p>Accessible in a form other than grey literature</p>	<p>No - report was not available in a form other than the grey literature.</p>
<p>Peer reviewed</p>	<p>Not a strict peer review, but the report was both internally and externally reviewed by FACS and feedback was provided to the evaluation team.</p>
<p>Appropriateness of the aims / questions for the evaluation</p>	<p>While there is no explicit statement of the research questions/aims, the evaluation assesses the effectiveness of the HAP DV program. The outcome measures applied were the establishment and maintenance of appropriate independent housing for women and children who have experienced domestic violence, as well as the wellbeing of women who have engaged with the project.</p> <p>One stated aim of the evaluation is to “provide an overview of the general service model and brief comment on implementation differences between the three HAP DV projects where relevant, as well as drawing together the similarities in relation to the HAP DV projects’ service model as a whole” (p. 8, final report).</p> <p>While there were no explicit research questions in this report, the stated aim of the overall HAP DV evaluation was “to provide an overview of the general service model and brief(ly) comment on implementation differences between the three HAP DV projects where relevant, as well as drawing together the similarities in relation to the HAP DV projects’ service model as a whole” (Final Report, p. 8). While the evaluation goals were not always explicit, the HAP DV programs, including the data reviewed and conclusions drawn in the evaluation clearly reflect a SAH strategy.</p> <p>The aims are both realistic and appropriate to the evaluation.</p>
<p>Clearly outlined methodology/study design</p>	<p>Yes - the methodology and study outline were clearly outlined.</p>
<p>Appropriate/rigorous methodology for the evaluation aims and timeframe</p>	<p>Yes - the methodology was appropriate to address the research goal. Multiple data sources were utilised, including internal reporting data, client feedback, previous evaluations of projects and a large number of qualitative interviews with various key stakeholders. Mixed-method inquiry combining a synthesis of service monitoring data (self-evaluation reports, administrative and financial documentation, client monitoring data) with qualitative interviews. A systematic review and thematic analysis of the data was applied, including reference against the current literature. The project also commissioned</p>

	<p>a research report, Hunter Integrated Response to Homelessness and Domestic Violence for Women Local Evaluation (NOVA, 2013), which the authors drew upon for the report. The sampling strategy for clients involved an invitation via an email or phone call from participating agencies. 19 in-depth qualitative interviews were held with clients, project staff and key stakeholders. Professional participants were “directly recruited” to the Hunter project evaluation (p. 15).</p> <p>The interview sample and other data sources were appropriate given the project’s scope and aims. Limitations included reliance on self-reported information, as well as a small sample of only four (4) clients interviewed. Inability to measure longer-term housing outcomes was also a limitation. However, two years’ worth of collated written client feedback was also taken into account to address this limitation.</p> <p>Extensive documentation of prior reviews and the project’s research report, as well as interviews with a range of stakeholders from diverse roles throughout the service structure strengthened the findings. The combination in the overall evaluation with the two other NSW HAP DV projects also increased the strength of the findings.</p> <p>The report analyses the limitations of the research methodology, including its reliance on self-reporting data, the lack of longer-term outcome data, and the small number of client interviews collected. However the use of longer-term reporting data from administrative records as well as access to a previous program evaluation, which included extensive written feedback from clients, went a long way towards addressing these methodological issues.</p> <p>The themes drawn from multiple data sources are consistent and strong. The complexities of work with this client group, as well as local program differences, are considered. The report notes that there were some issues with data quality and apparent inconsistencies with the way the data were collected when it came to project-reported data. Original data was collected in the form of qualitative interviews, although the report notes that a greater amount of primary client data would have added to the rigour of the findings. Data analysis was well explained.</p>
Primary data collected and appropriate for meeting research aims	<p>Yes – 19 in-depth qualitative interviews with a range of stakeholders including clients, agency staff and other key actors. For clients – “clients were invited to take part in the evaluation via an email or phone call from participating agencies” (p. 16). Professionals assisted with the identification and recruitment of service providers and individual clients. The professional recruitment strategy was not detailed. The results speak directly to the overall aims of the evaluation, although there are no explicit research questions in this report.</p>
Process measures used	<p>Yes - client engagement with the service, demographic data.</p>
Outcome measures used which match the research questions	<p>Yes - outcome measures included the establishment and maintenance of safe, ongoing tenancies for vulnerable women and their children as well as the number of clients supported. Other measures included: client-reported wellbeing, ability to manage finances and provide for children. However, validated outcome measures were not administered to clients from the commencement of service at regular intervals over time.</p> <p>Short and medium-term client outcomes were reported in monitoring data and included in the evaluation; however long-term client outcomes were unavailable.</p> <p>Service system and delivery outcome measures included: enhanced worker skill, knowledge and confidence in domestic violence, housing and/or case management practice as a result of engagement with the project; ability of existing services to increase client load through becoming registered service providers for the DVS WSS project; the creation and enhancement of collaborative working relationships; and the filling of service system gaps via increased collaboration and access to brokerage funding.</p>
Any important areas not covered by the evaluation	<p>“Identification of the long-term outcomes of the HAP DV service model is not possible without a longitudinal study that includes wellbeing, self-efficacy and housing measures for women and their children. An extensive, comparative study of this nature would be a significant contribution to the literature and support the continuing development of the model.</p> <p>In addition, case management skills and practices for working specifically within the DV/Housing nexus are not known. Workforce development programs could be developed from an examination of the most appropriate and effective case management skills and knowledge for this work.” (p. 6)</p>

<p>Overall assessment of evaluation quality</p>	<p>The report represents a rigorous evaluation with synthesis of multiple data sources, including primary data, client feedback, information from previous research reports, qualitative interviews with multiple stakeholders and reference to existing literature. This evaluation demonstrates that where holistic, medium-to-long-term support is provided, and where brokerage funds are not constrained to a narrow definition of housing needs, HAP DV has proven to be highly effective at supporting women to establish and maintain independent and appropriate housing. The combination of the above elements emerged as key in the evaluation; the provision of a safe place, or case support, or access to flexible brokerage support on their own will not provide the same level of holistic support and positive medium-term outcomes for women. The evaluation is very robust with a strong mixed-methods design, encompassing detailed service data, program self-reports and independent evaluations of two of the three region's programs, as well as a high number of qualitative interviews with key stakeholders. The evaluation was independently conducted, and also included a meta-analysis which synthesised the findings and existing literature.</p>
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Program/strategy background	
Jurisdiction	NSW
Program/strategy	Illawarra HAP DV project administered under the Homelessness Action Plan Domestic Violence Project (HAP DV)
Evaluation	Breckenridge, J., Hamer, J., Newton, B.J., & valentine, k. (2013). <i>NSW Homelessness Action Plan Extended Evaluation: Illawarra HAP Domestic Violence Project Final Report</i> . HAP Project 3.13a. Centre for Gender-Related Violence Studies (CGRVS) and Social Policy Research Centre (SPRC). Sydney: University of New South Wales.
Description of program/strategy	<p>The Illawarra HAP DV project is administered under the Homelessness Action Plan Domestic Violence Project (HAP DV). The Illawarra project encompasses the local government areas of Wollongong, Shellharbour, Kiama and Shoalhaven and is auspiced by Wollongong Women's Refuge (WWR).</p> <p>"HAP DV projects provide eligible women and children with appropriate housing (through either Start Safely or social housing) alongside an integrated support package which includes case management and highly flexible brokerage funding. HAP DV packages are income tested and dependent on an initial assessment of the complexity of women's housing and support needs by Housing NSW. SHLV clients are not eligible for a HAP DV package as they are already deemed to be accessing an appropriate service. Women with personal assets such as a mortgage are also screened out of the program due to failing the assets test." (pp. 10-11 final report)</p>
Definition of "safe at home" within program/strategy	While the term "safe at home" was not specifically referred to within this evaluation, the language describing the program (Homelessness Action Plan: Long-term accommodation and support for women and children experiencing domestic and family violence) is aligned with the overarching philosophy of "safe at home". The program's objectives include: to improve women and children's safety; to reduce the length of time families who have experienced domestic violence spend in crisis accommodation services; and to increase housing options for women and children who have experienced domestic violence by providing integrated support services to improve their ability to access both the private rental market and maintain their tenancies in both private and social housing. This dual safety and housing focus is seen as key to enabling women and children escaping domestic violence to remain in the home of their choice.
Lead agency/department	Housing NSW (Department of Family and Community Services) (other government agency partners include the Office for Women's Policy and NSW Health).
Collaborating agencies	Wollongong Women's Refuge (WWR).
Inclusion rationale	This report self-identifies as a formal evaluation of the Housing NSW Program: "Long-term accommodation and support for women and children experiencing domestic violence" (HAP DV). The evaluation was funded by Housing NSW and undertaken by researchers external to the program. The HAP DV program specifically targets women and children leaving violence for support in maintaining appropriate independent housing, and also aims to support the safety of women to remain safely in the independent accommodation of their choice.
Evaluation Summary	
Key information: funder; length of evaluation; evaluation governance; purpose of the evaluation	<p>The evaluation was undertaken by the Centre for Gender Related Violence Studies (CGRVS) in partnership with the Social Policy Research Centre (SPRC), within the University of New South Wales. The evaluation was funded by Housing NSW (Department of Family and Community Services), with data collected between September and December 2012.</p> <p>The overall HAP evaluation strategy was developed in consultation with government agencies and the NGO sector, and involves three inter-related components: self-evaluations; extended evaluations (involving 15 selected projects and service approaches to addressing homelessness) and including support for women and children escaping domestic violence; and meta-analysis, to synthesise aggregated findings from self-evaluations, extended evaluations and any other available evaluations regarding HAP activities.</p> <p>While there are no explicit research questions stated, the overall aim of the broader evaluation is to "provide an overview of the general service model and brief comment on implementation differences between the three HAP DV projects where relevant, as well as drawing together the similarities in relation to the HAP DV projects' service model as a whole" (p. 8, final report).</p>

	<p>The Illawarra project had a number of objectives, which were designed to achieve the HAP program aims. These included (but were not limited to): the improvement of women and children's safety; a reduction in the length of time families who had experienced domestic violence spent in crisis accommodation services; increase housing options for women and children who had experienced domestic violence by providing integrated support services; and increase collaborative service delivery (pp. 24-25).</p>
Methodology	<p>The Illawarra evaluation had a mixed-methods approach, comprised of service monitoring data as well as 23 in-depth qualitative interviews with clients, agency staff and other key stakeholders. A systematic review and thematic analysis of data was applied, including reference against the literature. The primary sources of data included: self-evaluation reports, administrative data (including client numbers and outcomes, budgets, process records, promotional materials, client case plans, service provider contracts etc.), interviews with clients, interviews with agency staff and interviews with key stakeholders (including managers of the HAP DV regional contract within Community Services, members of the Regional Homelessness Committee, Housing NSW lead agency staff and the auspice agency staff). Extensive written client feedback and annual service reviews conducted by the project internally were also included as primary data sources.</p>
Key program elements	<p>The Illawarra project combines the following elements:</p> <ul style="list-style-type: none"> • Access to social housing, or suitable private rental accommodation through the provision of the Start Safely Private Rental Subsidy. • Integrated case management support services. • Flexible brokerage funding. <p>The key service delivery component for the Illawarra project was the development and implementation of an integrated client case plan. The case plan delivers goal-directed, client-focused support and accompanying brokerage funding in order to: provide services and support; facilitate transition to independent living; enable training and education; and assist in building community connections. In the 2012 self-evaluation report, the Illawarra project nominated the following activities as central elements of the service:</p> <ol style="list-style-type: none"> 1. "Information and advice (... education programs, ... promoting community awareness of homelessness, domestic violence resources to people at risk of homelessness). 2. Referral – providing assistance via telephone including assessment, referral and support. 3. Assessment and case planning – ... [to] identify client strengths, risks and needs; [to] plan and coordinate a mix of services to meet the client's needs; [and to] monitor and evaluate the effectiveness of the services being delivered to the client. 4. Client-focused case work – provide activities to implement the case plans of individual clients, including: information and advice; support, advocacy and counselling; mediation including re-establishing of family links where appropriate; referrals to relevant agencies or specialist services; skills development to help clients achieve outcomes; and use of brokerage to purchase goods and/or services. 5. Access to training and / or day programs – this may include living skills, financial management/ budgeting, resume writing, applying for jobs and interview techniques. 6. Transition to independent living – providing support for people moving towards independent living in private rental accommodation to enable them to maintain their tenancies once the Start Safely Subsidy ceases or in social housing. 7. Linkages to access services and skills development – developing partnerships with private housing sector (real estate agents and private landlords) providers to increase pathways into private accommodation. Integrating the client into the community by providing assistance to access: employment, education and training, health services (including mental health), disability and rehabilitation services, children's support services, income support and accommodation. 8. Service system development: [d]evelop collaborative relationships with other services and participate in relevant networks (e.g. interagency, Joint Guarantee of Service, Housing Forums). Participate in community development strategies to address issues impacting on homeless people. Provide policy advice to funding bodies on service development. Provide mentoring and support to other agencies". (pp. 23-24) <p>Key program elements in HAP are the provision of appropriate housing alongside an integrated support package. The package includes intensive, flexible case management with the ability to "buy in" to specialised services, so case management is hosted within the most suitable organisation. Flexible brokerage funding beyond material housing-related needs is another key program element.</p>

<p>Program/strategy practice approaches</p>	<p>In the Illawarra, a HAP DV coordinator is employed within the WWR to manage project implementation. The service providers are the direct client support and case management workers from a range of local organisations, who access the HAP DV support packages on their clients' behalf. In the Illawarra the Coordination Groups concentrate on workforce capacity-building and regional training as opposed to client case planning and review (p. 4).</p> <p>As a result of changes to the role of the coordination groups, the auspice agency holds greater responsibility for assessment decisions, oversight of case plans and brokerage expenditure than it appears in the original model envisaged. This essentially means that Wollongong Women's Refuge may exercise closer control of the project resources than is the case in other HAP DV projects, and a high degree of responsibility is vested in the Project Coordinator position. The shift appears to have been supported by the majority of stakeholders in the interests of enabling a more efficient process to hasten the project's response to referred clients (pp. 31-32).</p> <p>Flexible case management, including support up to 12 months and flexible use of brokerage funds, as well as financial literacy and access to financial management courses and No Interest Loans, were all seen as key approaches to supporting clients to maintain tenancies in the Illawarra project.</p> <p>As a result of changes to the role of the coordination groups, the auspice agency (Wollongong Women's Refuge) held greater responsibility for assessment decisions, oversight of case plans and brokerage expenditure than it appears in the original model envisaged. This also meant a high degree of responsibility was vested in the Project Coordinator position. The following staff skills were highlighted as critical to successful operations:</p> <ol style="list-style-type: none"> 1. Strong coordination, supervision, case management, inter-agency liaison and negotiation and budget management skills within the auspice agency – the project coordinator had sole management of intake, assessment and review processes, including approval of case plans and brokerage expenditure. This meant the coordinator needed to be capable of a broad range of professional activities including domestic violence support, case management, budgeting, professional supervision and project management. It appears to have been successfully implemented and this points to the considerable skills of the incumbent. As such the role requires appropriate classification at a senior level. 2. Case management and budgeting skills and domestic violence knowledge within the service provider group – knowledge of domestic violence was essential to ensuring effective case plans in the context of ongoing effects and risks associated with DV. 3. Domestic violence identification, screening and front line response skills – it is essential that Housing NSW Access and Demand teams have good screening and assessment skills and helpful tools to enable appropriate identification of eligible clients. The report strongly recommended that training as well as design and implementation of appropriate screening tools should occur in order to support good practice (pp. 43-44).
<p>Specific conditions under which "safe at home" was not going to be viable/safe</p>	<p>This report does not indicate specific conditions under which "safe at home" was not a viable and safe response for some women and children.</p>
<p>Diverse population groups and geographical locations</p>	<p>Although data on Indigenous clients was recorded, there was limited qualitative data to provide evidence of program effectiveness for Indigenous clients or other diverse population groups.</p> <p>The report noted the importance for agencies to have the ability to purchase services from small, local providers in order to tailor packages for women in isolated and rural locations. There was a particular shortage of housing in the Hunter region which made local control and flexible brokerage arrangements all the more important.</p> <p>Indigenous populations: "By the end of 2011-12, almost 10% of clients in the project (8 out of 81) identified as Aboriginal or Torres Strait Islander. The ABS 2011 census reports that Aboriginal and Torres Strait Islander people make up 2.3% of the Illawarra population. In addition, of the homeless people counted in the Illawarra for the 2006 census, 129 out of 1338 (9.6%) were Aboriginal and this suggests the project is reaching these communities in relatively appropriate numbers... Aboriginal women may require different screening and assessment processes and whilst the sustained, flexible and intensive case management approach of the service model has potential to offer a suitable response, considerations of special needs do not appear to have been addressed explicitly by the Illawarra project" (pp. 39-40).</p> <p>CALD populations: No specific information on CALD clients in this report. "Members of the Regional</p>

	<p>Homeless Committee and the two HAP DV coordinating groups included representatives from a range of services with established experience of working with diverse client groups. The structure enhanced promotion of the project to specific populations and offered the potential for supported pathways to the project” (p. 39). Women with disabilities, older women: No specific information in this report.</p>
Relevant policy and legislative context	<p>The report directly references the 2009 <i>NSW Homelessness Action Plan 2009-2014</i> (HAP), which effectively created the HAP DV program. Other influential NSW policies include the <i>Going Home Staying Home Reform Plan</i> (FACS, 2014).</p>
Key findings	<p>Within each financial year from January 2010 to June 2012, the project supported 7, 38 and 81 clients respectively (30 month period in total including the establishment and promotion phase before effective referrals were in place. Some clients were engaged with the project across more than one financial year). Although the monitoring data does not require numbers of children to be reported, it is also known by WWR that in each year the project assisted 19, 102 and 160 children who were living with the registered clients. Every one of the clients was housed in long-term accommodation and by far the majority had continued to sustain their tenancy on exit. In the 2011/12 financial year over 83% of clients who had exited the project had remained stable in their housing (pp. 4-5). The fact that all clients accepts into the project who also commenced implementation of a supported case plan were successfully housed in long-term private or social housing tenancies suggests that the project model is overwhelmingly successful in supporting vulnerable people to find and establish a home. Despite some clients who exited the program forfeiting their tenancies for various reasons, client interviews demonstrated that for many women the pressure to return to the perpetrator due to lack of affordable housing and/or minimal personal or practical resources to manage complex and overwhelming stress, was significantly ameliorated by the provision of the project’s close support and timely brokerage (pp. 34-35).</p> <p>The following elements of the Illawarra project were especially critical to ensuring the establishment and sustainability of tenancies:</p> <ul style="list-style-type: none"> • Brokerage assisted in maintaining tenancies through debt reduction and setting up a new home – brokerage funding was described as critical and assisted with: paying off outstanding debt/rental arrears from a previous property; covering bond and the first few rental payments; and/or for furniture or whitegoods purchases. • Case management and brokerage combined to support women to make connections with community. • Flexible case management and brokerage provided ongoing support, focused on housing goals – the provision of flexible support for up to a 12 month period, which varied in the intensity of support and covered a broad range of issues while maintaining a focus around housing goals was highly significant, breaking down barriers to integrated service delivery for clients. • Financial literacy and management – Access to professional financial counselling and No Interest Loan Schemes (NILS) as well as support to manage brokerage funds through case management were seen as important in enabling women to develop skills in maintaining a tenancy (pp. 34-36). <p>The overall evaluation found ten key success factors for the model:</p> <ol style="list-style-type: none"> 1. A combination of program elements that mutually enhance one another. 2. Ongoing, flexible case management with a shared DV/Housing focus. 3. Brokerage aligned to the case plan. 4. A housing focus but not housing constrained. 5. Eligibility screening within Housing NSW. 6. Inter-agency influence, education and knowledge exchange. 7. Local adaptation of the overall program model. 8. Strong management, coordination skills and practice expertise in the auspice agency. 9. Additional resources for local service providers. 10. Case management focused on client empowerment and learning to use the service system (pp. 4-5). <p>There were five key findings in relation to brokerage use:</p> <ol style="list-style-type: none"> 1. That flexible brokerage is effectively used to cover one-off costs for household items or daily living materials to establish adequate living conditions. 2. That flexible brokerage is effectively used to increase the capacity for clients to access critical services to identify and prevent escalation of health and wellbeing problems.

	<ol style="list-style-type: none"> 3. That flexible brokerage is effectively used to enable clients to access training and employment to develop financial independence, thus contributing to their long-term capacity to remain safe and stable. 4. That flexible brokerage is effectively used as a mechanism and resource to increase self-efficacy. Engaging with the planning and prioritisation of brokerage expenditure supports clients' confidence and sense of competence for future independence. 5. That a high degree of control over the use of brokerage funds is located at the level of service providers and this increases its positive effect (p. 52). <p>The top five categories of brokerage expenditure in 2011-2012 were: home establishment packs, safety and security items, removalist services, education/vocational goods and children's items (p. 53).</p> <p>Analysis of the evaluation data suggests the necessary cross-sector negotiation, liaison and governance built into the project forged closer working relationships between a range of services, including particular integration within Housing NSW... The evaluation data suggest that the project has not yet achieved its desired level of integration and knowledge exchange with Housing NSW during the first few years of operation, but the structure has generated significant progress towards this in the long-term (pp. 29 - 30). In addition to evolving partnerships between organisations/agencies, some of the individual HAP DV service providers reported increased knowledge about domestic violence and greater confidence in case management practice due to the structured support of the auspice agency.</p>
<p>Conclusions and recommendations based on the findings (incl. how to improve "safe at home" programs in the future)</p>	<p>Yes - the authors make recommendations that are clearly related to the findings. There were concerns that women who had historically experienced domestic violence but were not in immediate danger were excluded from the HAP DV project. A longer-term approach and acknowledgement of the long-term (and often accumulating) effects of domestic violence on women and children was recommended in the report.</p> <p>The evaluation also found that many women, due to joint ownership of assets or income with their violent partner, or who inherit debt from their partner with an appearance of being asset-rich, do not pass the income test for access to Start Safely or social housing but remain in need of support to leave the violent home.</p> <p>The evaluation also reported concerns from stakeholders that Housing NSW and Access and Demand teams may not have sufficient expertise and/or adequate screening procedures to identify domestic violence, and many not recognise the appropriate level of complexity and need.</p> <p>Further training for Housing NSW staff in domestic violence and appropriate screening tools were urgent recommendations. Related to this, the report recommended this and similar projects would be strengthened if questions of specific eligibility and criteria were resolved consistently.</p> <p>The report recommended that future projects with similar models would benefit from more comprehensive planning around likely expenditures, as allocations for initial packages turned out to be unrealistic. - Yes, the conclusions were well supported by the data analysis.</p>
<p>How the findings are useful for wider program development/practice</p>	<p>The finding that provision of flexible brokerage dollars, not constrained by a narrow definition of housing purposes, is a useful finding. As with the other HAP evaluations, flexible and extended case support was also seen as key to the model's success. The emphasis in this project on financial management resources for clients, and clients' reported experience of its usefulness, can also inform future program development. These findings are highly important and inform ongoing clinical work. The multiple data sources across various agencies and roles, extensive documentation of client feedback and previous reviews, as well as the consistency across stakeholder comments and statistical information contribute to the rigour of the findings. This holds true despite the evaluation's limitations, which include: reliance on self-reported information, a small client sample, inability to contact clients who had dropped out of the project, and the lack of data relating to long-term outcomes. The holistic service model of HAP – in particular the ongoing, intensive and flexible support in the form of case management, in addition to assistance in the provision of a safe, appropriate and independent physical home – is transferable to other jurisdictions. In particular, the evidence of flexible brokerage funding and the option to access case support for up to 12 months, and the powerful combination of these factors, is important evidence that is internationally influential. The goal of the research is highly relevant to the SAHME project.</p> <p>The HAP evaluation directly explores the effectiveness of programs that enhance safety and prevent homelessness for women and children who have experienced domestic violence, as per the ANROWS Project brief. The conclusions directly contribute to our knowledge of SAH strategies, including the effectiveness, limitations and service specifications of SAH programs.</p>

Evaluation quality	
Conducted by a person(s) independent of the service	Yes, independent researchers – Centre for Gender Related Violence Studies and the Social Policy Research Centre, UNSW - The evaluation was undertaken independently of the HAP DV programs and was funded by FACS.
External ethics review	Yes – UNSW Human Research and Ethics Committee. Ethical issues are not detailed in this report.
Accessible in a form other than grey literature	No - the report was not accessible in a form other than grey literature.
Peer-reviewed	Not a strict peer-review, but the report was both internally and externally reviewed by FACS and feedback was provided to the evaluation team.
Appropriateness of the aims/questions for the evaluation	<p>While there is no explicit statement of the research questions/aims, the evaluation assesses the effectiveness of the HAP DV program. The outcome measures applied were the establishment and maintenance of appropriate independent housing for women and children who have experienced domestic violence, as well as the wellbeing of women who have engaged with the project.</p> <p>One stated aim of the evaluation is to “provide an overview of the general service model and brief comment on implementation differences between the three HAP DV projects where relevant, as well as drawing together the similarities in relation to the HAP DV projects’ service model as a whole” (p. 8, final report). While there were no explicit research questions in this report, the stated aim of the overall HAP DV evaluation was “to provide an overview of the general service model and brief(ly) comment on implementation differences between the three HAP DV projects where relevant, as well as drawing together the similarities in relation to the HAP DV projects’ service model as a whole” (Final Report, p. 8). While the evaluation goals were not always explicit, the HAP DV programs, including the data reviewed and conclusions drawn in the evaluation clearly reflect a SAH strategy. Aims were both realistic and appropriate to the evaluation.</p>
Clearly outlined methodology/study design	Yes - the methodology and study design were clearly outlined.
Appropriate / rigorous methodology for the evaluation aims and timeframe	<p>Yes -the methodology was appropriate to address the research goal. Multiple data sources were utilised, including internal reporting data, client feedback, previous evaluations of projects and a large number of qualitative interviews with various key stakeholders. Mixed-methods inquiry combining a synthesis of service monitoring data (self-evaluation reports, administrative and financial documentation, client monitoring data) with qualitative interviews. A systematic review and thematic analysis of the data was applied, including reference against the current literature.</p> <p>The sampling strategy for clients involved an invitation via an email or phone call from participating agencies. 23 in-depth qualitative interviews were held with clients, project staff and key stakeholders. Professional participants were “directly recruited”.</p> <p>The interview sample and other data sources were appropriate given the project’s scope and aims. Limitations included reliance on self-reported information, as well as a small sample of only seven clients interviewed. Inability to measure longer-term housing outcomes was also a limitation. However, 2 years’ worth of collated written client feedback was also taken into account to address this limitation. Extensive documentation of prior reviews and the project’s research report, as well as interviews with a range of stakeholders from diverse roles throughout the service structure strengthened the findings. The combination in the overall evaluation with the two other NSW HAP DV projects also increased the strength of the findings.</p> <p>The report analyses the limitations of the research methodology, including its reliance on self-reporting data, the lack of longer-term outcome data, and the small number of client interviews collected. However the use of longer-term reporting data from administrative records as well as access to a previous program evaluation, which included extensive written feedback from clients, results in considerable reliability in the findings. The themes drawn from multiple data sources are consistent and strong.</p> <p>The complexities of work with this client group, as well as local program differences, are considered. The report notes that there were some issues with data quality and apparent inconsistencies with the way the data were collected when it came to project-reported data. Original data was collected in the form of qualitative interviews, although the report notes that a greater amount of primary client data would have added to the rigour of the findings. Data analysis was well explained.</p>

Primary data collected and appropriate for meeting research aims	<p>Yes – 23 in-depth qualitative interviews with a range of stakeholders including clients, agency staff and other key actors. Clients were invited to take part in the evaluation via an email or phone call from participating agencies. Professionals assisted with the identification and recruitment of service providers and individual clients. The professional recruitment strategy was not detailed. The results speak directly to the overall aims of the evaluation, although there are no explicit research questions in this report.</p>
Process measures used	<p>Yes - client engagement with the service, demographic data.</p>
Outcome measures used which match the research questions	<p>Yes - outcome measures included the establishment and maintenance of safe, ongoing tenancies for vulnerable women and their children as well as the number of clients supported. Other measures included: client-reported wellbeing, ability to manage finances and provide for children. However, validated outcome measures were not administered to clients from the commencement of service at regular intervals over time.</p> <p>Short and medium-term client outcomes were reported in monitoring data and included in the evaluation; however long-term client outcomes were unavailable.</p> <p>Service system and delivery outcome measures included: enhanced worker skill, knowledge and confidence in domestic violence, housing and/or case management practice as a result of engagement with the project; ability of existing services to increase client load through becoming registered service providers for the DVS WSS project; the creation and enhancement of collaborative working relationships; and the filling of service system gaps via increased collaboration and access to brokerage funding.</p>
Any important areas not covered by the evaluation	<p>Identification of the long-term outcomes of the HAP DV service model is not possible without a longitudinal study that includes wellbeing, self-efficacy and housing measures for women and their children. An extensive, comparative study of this nature would be a significant contribution to the literature and support the continuing development of the model.</p> <p>In addition, case management skills and practices for working specifically within the DV/Housing nexus are not known. Workforce development programs could be developed from an examination of the most appropriate and effective case management skills and knowledge for this work.</p>
Overall assessment of evaluation quality	<p>The report represents a rigorous evaluation with synthesis of multiple data sources, including primary data, client feedback, information from previous research reports, qualitative interviews with multiple stakeholders and reference to existing literature. This evaluation demonstrates that where holistic, medium-to-long-term support is provided, and where brokerage funds are not constrained to a narrow definition of housing needs, HAP DV has proven to be highly effective at supporting women to establish and maintain independent and appropriate housing. The combination of the above elements emerged as key in the evaluation; the provision of a safe place, or case support, or access to flexible brokerage support on their own will not provide the same level of holistic support and positive medium-term outcomes for women. The evaluation is very robust with a strong mixed-methods design, encompassing detailed service data, program self-reports and independent evaluations of two of the three region's programs, as well as a high number of qualitative interviews with key stakeholders. The evaluation was independently conducted, and also included a meta-analysis which synthesised the findings and existing literature.</p>

Program/strategy background	
Jurisdiction	NSW
Program/strategy	HAP DV Project (HAP DV)
Evaluation	Final / Main report: Breckenridge, J., Hamer, J., Newton, B.J., and valentine, k. (2013). <i>NSW Homelessness Action Plan (HAP) Extended Evaluation: Final evaluation report for long-term accommodation and support for women and children experiencing domestic and family violence</i> . Centre for Gender Related Violence Studies (CGRVS) and Social Policy Research Centre (SPRC). Sydney: University of New South Wales. Other reports: Hunter, Illawarra and Greater Western Sydney reports
Description of program/strategy	“HAP DV projects provide eligible women and children with appropriate housing (through either Start Safely or social housing) alongside an integrated support package which includes case management and highly flexible brokerage funding. HAP DV packages are income tested and dependent on an initial assessment of the complexity of women’s housing and support needs by Housing NSW. SHLV clients are not eligible for a HAP DV package as they are already deemed to be accessing an appropriate service. Women with personal assets such as a mortgage are also screened out of the program due to failing the assets test.” [pp. 10-11]
Definition of "safe at home" within program/strategy	While the term "safe at home" was not specifically referred to within this evaluation, the language describing the program (Homelessness Action Plan: Long-term accommodation and support for women and children experiencing domestic and family violence) is aligned with the overarching philosophy of "safe at home" The program’s objectives include: to improve women and children’s safety; to reduce the length of time families who have experienced domestic violence spend in crisis accommodation services; and to increase housing options for women and children who have experienced domestic violence by providing integrated support services to improve their ability to access both the private rental market and maintain their tenancies in both private and social housing. This dual safety and housing focus is seen as key to enabling women and children escaping domestic violence to remain in the home of their choice.
Lead agency/department	Housing NSW (Department of Family and Community Services).
Collaborating agencies	Wimlah Women’s and Children Refuge; NOVA Women’s Accommodation and Support Service; Wollongong Women’s Refuge.
Inclusion rationale	This report self-identifies as a formal evaluation of the Housing NSW Program: "Long-term accommodation and support for women and children experiencing domestic violence" (HAP DV). The evaluation was funded by Housing NSW and undertaken by researchers external to the program. The HAP DV program specifically targets women and children leaving violence for support in maintaining appropriate independent housing, and also aims to support the safety of women to remain safely in the independent accommodation of their choice.
Evaluation Summary	
Key information: funder; length of evaluation; evaluation governance; purpose of evaluation	The evaluation was undertaken by the Centre for Gender Related Violence Studies (CGRVS) in partnership with the Social Policy Research Centre (SPRC), within the University of New South Wales. The evaluation was funded by Housing NSW (Department of Family and Community Services), with data collected between September and December 2012. The HAP evaluation strategy was developed in consultation with government agencies and the NGO sector, and involves three inter-related components: self-evaluations; extended evaluations (involving 15 selected projects and service approaches to addressing homelessness), including support for women and children escaping domestic violence; and meta-analysis, to synthesise aggregated findings from self-evaluations, extended evaluations and any other available evaluations regarding HAP activities. The evaluation strategy is aligned with the HAP strategic directions, which projects align with one of three directions: <ul style="list-style-type: none"> • “Preventing homelessness: to ensure that people never become homeless • Responding effectively to homelessness: to ensure that people who are homeless receive effective responses so that they do not become entrenched in the system • Breaking the cycle: to ensure that people who have been homeless do not become homeless again” (p. 7-8).

	<p>The aim of this report is to evaluate the effectiveness of the HAP DV service model, which takes a different form across its regional projects; hence the three additional project-specific reports. While there are no explicit research questions stated, the overall aim of the report is to “provide an overview of the general service model and brief comment on implementation differences between the three HAP DV projects where relevant, as well as drawing together the similarities in relation to the HAP DV projects’ service model as a whole” (p. 8).</p>
Methodology	<p>The evaluation had a mixed-method approach, comprised of service monitoring data as well as 58 qualitative interviews with clients, service providers, auspice agency staff and other key stakeholders (including contract managers, Private Rental Brokerage Specialist staff and Housing NSW staff). A systematic review and thematic analysis of data applied, including reference against the literature.</p> <p>The primary sources of data included:</p> <ul style="list-style-type: none"> • Formal self-evaluation reports as required by Housing NSW. • Administrative data including: client numbers and outcomes, budgets, process records, promotional materials, client case plans and service provider contracts. • Interviews with clients, auspice agency staff, service providers and other key stakeholders (58 in-depth, qualitative interviews). • Extensive written client feedback. • Annual service reviews conducted by the projects internally. • Independent project evaluations undertaken in Greater Western Sydney and the Hunter HAP DV projects.
Key program elements	<p>Key program elements in HAP are the provision of appropriate housing <i>alongside</i> an integrated support package. The package includes intensive, flexible case management with the ability to “buy in” to specialised services, so case management is hosted within the most suitable organisation. Flexible brokerage funding beyond material housing-related needs is another key program element.</p>
Program/strategy practice approaches	<p>The project consists of three pilot projects, all of which come under the HAP DV projects: the first in Greater Western Sydney, implemented by Wimlah Women’s and Children’s Refuge; the second in the Hunter Region, implemented by NOVA Women’s Accommodation and Support Service; and the third in the Illawarra Region, implemented by Wollongong Women’s Refuge. “The unique components of HAP DV within this context are its capacity to provide more intensive, flexible and targeted support than any other program currently in place. It achieves this through its capacity to “buy in” specialised services; to provide variable financial and material support; and to host case management within the most appropriate organisation.” (p. 12). HAP DV is “a holistic, housing-focused response that engages with women who may be dealing with the longer-term impact of domestic violence.” (p. 12) Local control of service provision, enabling the primary organisation to provide individualised case plans and to designate flexible brokerage funds, was identified as a key practice approach. Transparent governance of brokerage allocation was also seen to be important, as well as shared accountability for outcomes between the homelessness and DV sectors. Centralised and skilled coordination by the auspice agency was seen to “ensure a fast, consistent and well-managed response to clients” (p. 5).</p>
Specific conditions under which “safe at home” was not going to be viable/safe	<p>This report does not indicate specific conditions under which “safe at home” was not a viable and safe response for some women and children.</p>
Diverse population groups and geographical locations	<p>Indigenous populations: The data demonstrate that the projects successfully reached a proportion of Indigenous Australian communities. “All of the regions reported working with Aboriginal organisations to engage clients and this has been the main access strategy. Client numbers from the 2011-12 year in each project approximated the available Indigenous homeless figures from the 2006 census (although)... Indigenous homelessness is generally considered to be underestimated. Furthermore, extensive engagement in the evaluation by the Aboriginal service sector did not occur and the absence of more detailed qualitative data invites some caution in the interpretation of these figures.” (p. 49-50)</p> <p>The percentage of HAP DV clients who identified as Indigenous ranged from 5.25% (5.2% in the 2006 census) in Greater Western Sydney, to 9.4% (9.7% in the 2006 census) in the Hunter Region, and 9.9% (9.6% in the 2006 census) in the Illawarra. The report does not comment on whether tailored service models were applied to Indigenous women in the HAP DV projects (tailored service models are indicated as useful for Indigenous women in the literature).</p>

	<p>for each project. The number of CALD clients was obscured due to the only relevant demographic category being labelled as 'born overseas – non-English speaking': a woman may be born in Australia but identify strongly with a non-English language, culture, religion and/or ethnicity. Aside from this the 2011/12 data indicate that women born overseas (non-English speaking) make up 5% (Greater Western Sydney), 6% (Illawarra) and 5% (Hunter) of total clients. "The three projects' particular use of brokerage funding also indicates a response to the specific needs of non-English speaking clients (such as through language classes or support to attend cultural activities)" (p. 51).</p> <p>Women with disabilities, older women: No specific information in this report.</p> <p>The report noted the importance for agencies to have the ability to purchase services from small, local providers in order to tailor packages for women in isolated and rural locations. The flexibility of HAP DV was seen as a significant strength for supporting rural and remote populations.</p>
<p>Relevant policy and legislative context</p>	<p>The report directly references the 2009 <i>NSW Homelessness Action Plan 2009-2014</i> (HAP), which effectively created the HAP DV program. Other influential NSW policies include the <i>Going Home Staying Home Reform Plan</i> (FACS, 2014). Influential federal policies noted in the report include: <i>The Road Home Report</i> (Australian Government, 2008); <i>The National Partnership Agreement on Homelessness</i> (NPAH); and the <i>Going Home Staying Home Reform Plan</i> (FACS, 2013).</p>
<p>Key findings</p>	<p>The evaluation found that critical to the success of the program was the combination of, and relationship between; flexible brokerage funding aligned with a coordinated and individually tailored case plan; the option of 12 months of intensive assistance; and the co-existence of access to safe and affordable housing (provided either via Start Safely or social housing in the NSW context). The overall evaluation found ten (10) key success factors for the model:</p> <ol style="list-style-type: none"> 1. A combination of program elements that mutually enhance one another. 2. Ongoing, flexible case management with a shared DV/Housing focus. 3. Brokerage aligned to the case plan. 4. A housing focus but not housing constrained. 5. Eligibility screening within Housing NSW. 6. Inter-agency influence, education and knowledge exchange. 7. Local adaptation of the overall program model. 8. Strong management, coordination skills and practice expertise in the auspice agency. 9. Additional resources for local service providers. 10. Case management focused on client empowerment and learning to use the service system. <p>Key lessons learnt (in relation to the overall service model):</p> <ol style="list-style-type: none"> 1. Flexible brokerage funding is a critical component of a sufficient and effective service response to meet the needs of women and children who are at risk of homelessness due to domestic or family violence. It should be housing focused but not housing constrained. 2. Local control to enable flexible application of project resources is a highly effective means of meeting client needs. Sustainable housing for the target group is supported by addressing a holistic range of client needs, and homelessness programs must therefore be able to: select the best match of service provider to the client; spend money on non-housing items or support services; and not be confined to rigid cut-off times. 3. Strong and transparent governance of brokerage allocation and expenditure is important to retain a DV and homelessness focus. 4. Although both case planning and brokerage are well established means of supporting women leaving violence, there was little specific evidence guiding the financial allocations for initial support packages and the amounts turned out to be unrealistic. This led to significant administrative challenges in managing and carrying forward unspent funds. Future projects with similar models would benefit from a more comprehensive planning process around likely expenditures. 5. Access to the project could be greatly improved by the review and development of up-to-date screening tools and staff training in Housing NSW, to increase the speed and accuracy of initial approvals. 6. Financial and other administrative procedures between the auspice agency and service providers need to be as streamlined as possible to minimise onerous paperwork and delays in client access to support.

7. Centralised, skilled coordination of the project by the auspice agency supports a fast, consistent and well managed response to clients in need.
8. The eligibility criteria for accessing HAP DV support exclude some women in need and the specific criteria for high and low need packages do not appropriately reflect the complexity of real life circumstances. In addition, interpretations of the eligibility criteria have been varied. A review of these at the program level is therefore necessary to increase appropriateness and consistency of application.
9. Integration and collaborative practice happen most effectively when equally underpinned by two elements:
 1. Shared accountability for outcomes – Both the Homelessness and DV sectors share accountability for HAP DV outcomes. In addition, local structures for the formal participation of other stakeholders ties them to project success.
 2. Financial resources managed at the local level – as indicated in point 2 above.
10. A key strength of the model is its flexibility, especially in responding to women's changing needs over time. Although the regions anticipated that needs would become less intense as case plans progressed, there was also capacity to increase intensity where needed. However, the time limits on support meant that women with ongoing needs which last longer than 12 months could be denied essential support to enable them to maintain their tenancy and stay safe. Alignment with the Start Safely timeframes would be appropriate to address this issue. It is also worth noting that for engagement of Indigenous clients a longer timeframe is often required. Therefore Indigenous women may effectively receive a shorter period of support than other clients within a 12 month period (pp. 67-68).

Key findings in relation to brokerage use:

1. That flexible brokerage is effectively used to cover one-off costs for household items or daily living materials to establish adequate living conditions.
2. That flexible brokerage is effectively used to increase the capacity for clients to access critical services to identify and prevent escalation of health and wellbeing problems.
3. That flexible brokerage is effectively used to enable clients access to training and employment to develop financial independence, thus contributing to a long-term capacity to remain safe and stable.
4. That flexible brokerage is effectively used as a mechanism and resource to increase self-efficacy.
5. That a high degree over the control of brokerage funds is located at the level of client case managers and this increases its positive effect.

While a number of key individual factors were found to contribute to the success of the service model, it is the powerful combination of program elements and their relationship to one another that appeared to optimise housing outcomes. Key elements included: co-existence of access to safe and affordable housing (through Start Safely or social housing); flexible support, underpinned by an individually tailored and coordinated case plan; the possibility of intensive assistance for up to 12 months; and brokerage dollars to fund further goods and services not constrained to a narrow definition of housing purposes.

Three factors were seen to be critical to effectively assisting women to maintain their tenancies. The availability of goal-directed support for up to 12 months, with the capacity to increase or decrease the intensity of support, as well as the provision of support being influenced by a dual knowledge base of DV and housing needs were all key to success.

Ten factors were found to be critical to the success of HAP DV:

1. Housing focused but not housing constrained: The capacity to address non-housing issues that underpin the client's capacity to sustain a tenancy.
2. Brokerage: The availability of flexible funding to respond to client needs in addition to case work support, in a timely manner.
3. Brokerage aligned to a case plan: The linkage of brokerage expenditure to case plans that address both housing and related DV needs.
4. Goal-directed support with a shared DV/housing focus, that is ongoing, intensive and flexible: The ability to provide support that is ongoing for up to 12 months and can increase or decrease in intensity in response to critical issues.

	<ol style="list-style-type: none"> 5. Eligibility screening and assessment placed within Housing NSW: Systems that require an exchange between Housing and DV services. 6. Sector-development: Capacity-building across the service system: Project resources that can be allocated to a range of local services for client work, collaboration and coordinated planning. 7. Sector development: Inter-agency influence, education and knowledge exchange: Structures that support client-focused collaborative learning. 8. Local adaptation of the overall service model: The ability to respond to local needs and issues in implementation and optimise use of the particular service system. 9. Case management focused on client capacity-building, learning to use the service system and the creation of community belonging: A focus on skills and independence for clients. 10. Strong management, coordination skills and practice expertise in auspice agencies: Centralised, effective coordination and oversight at the local level. (pp. 2-3) <p>Additionally, local control of the program with strong and transparent governance of brokerage allocation was found to be important. The report suggested that access to HAP DV services could be improved by reviewing eligibility criteria for the program, as well as through the development of up-to-date screening tools and training in domestic violence for Housing NSW staff who are gatekeepers into the HAP DV program. Complexity of needs did not have an indexed relationship to housing status, which made ongoing case support for a period of up to 12 months even more important.</p> <p>Sustainable housing outcomes were achieved in each of the projects. Two of the projects (the Hunter and Greater Western Sydney) successfully housed or maintained the existing "at risk" tenancies of 100% of their clients in the snapshot year of 2011/12. A small number of tenancies in the Illawarra (6) were ultimately relinquished where clients decided to seek other living arrangements (p. 63). 81 clients were supported by the HAP DV project in the Illawarra, 218 in Greater Western Sydney, and 117 in the Hunter in 2011-12. While conclusions about cost effectiveness cannot be drawn in the absence of robust, long-term outcomes data, the available data indicates well-targeted expenditure and a positive "value for money" assessment (p. 4).</p>
<p>Conclusions and recommendations based on the findings (incl. how to improve "safe at home" programs in the future)</p>	<p>Yes - the authors make recommendations that are clearly related to the findings. Review of eligibility criteria for entry to the HAP DV program was advised in the evaluation, as at the time they were assessed as too strict. Training and support for Housing NSW staff on the effects of domestic violence was recommended to address this, as was the application of consistent criteria and clear communication of the criteria to all stakeholders. As well as ongoing specialist training in domestic violence, supervision and the development of adequate screening tools were also recommended as urgent priorities.</p> <p>The sharp division between high needs (linked in the original program to social housing) and low needs clients (linked in the original program to the Start Safely private rental subsidy) was assessed as ineffective and counter to the overall HAP DV philosophy. All HAP DV projects were flexible in their implementation of support packages, and this flexibility was seen to support better client outcomes. The finding that the need for resources and intensive case management is not necessarily linked to housing product eligibility is important. Complex need is not confined to social housing tenants, thus using the housing product as an indicator of need is unhelpful.</p> <p>The report recommended that future projects should comprehensively plan for likely expenditures, as well as investigate ways to simplify financial and administrative processes. Transparent and collaborative decision-making structures between various agencies were encouraged.</p> <p>While the flexible and individualised use of case management hours and financial resources seem to have responded well to the needs of children, the report recommended that the needs of this group be considered as a key part of any future programs. Inclusion of children's needs in program planning would include consideration of resource allocation in budgets and performance measures, with recognition of the ongoing need for flexibility in case management hours.</p> <p>The report recommended that pre-tenancy support to assist women to secure housing would be useful, either as a separate service or as part of the HAP DV package. Pre-tenancy support would include "assistance with attending open inspections, support to be removed from 'bad tenant' lists, and guidance on how to complete rental assistance and tenancy applications" (p. 49). The conclusions drawn were supported by the data analysis.</p>

<p>How the findings are useful for wider program development/practice</p>	<p>The findings directly inform broader practice and program development. The finding that women's capacity to establish and maintain independent housing is related to the level of personal support received, medium-term financial and material assistance, the ability to attend to the immediate needs of their children, and ongoing development of skills and confidence, is highly significant. The existence of a safe place is insufficient without the provision of ongoing support and financial assistance. The flexible nature of this support and, in particular, the possibility of intensive assistance for up to 12 months, is a significant finding that informs ongoing practice. The provision of flexible brokerage dollars, not constrained by a narrow definition of housing purposes, is also a useful finding that informs practice and program development. This was achieved in the project by using brokerage funding for specialist services and/or by placing client support / case management hours within non-housing agencies.</p> <p>These findings are highly important and inform ongoing clinical work. The multiple data sources across various agencies and roles, extensive documentation of client feedback and previous reviews, as well as the consistency across stakeholder comments and statistical information contribute to the rigour of the findings. This holds true despite the evaluation's limitations, which include: reliance on self-reported information, a small client sample, inability to contact clients who had dropped out of the project, and the lack of data on long-term outcomes. The holistic service model of HAP – in particular the ongoing, intensive and flexible support in the form of case management, in addition to assistance in the provision of a safe, appropriate and independent physical home – is transferable to other jurisdictions. In particular, the evidence of flexible brokerage funding and the option to access case support for up to 12 months, and the powerful combination of these factors, is important evidence that is internationally influential. The goal of the research is highly relevant to the SAHME project. The HAP evaluation directly explores the effectiveness of programs that enhance safety and prevent homelessness for women and children who have experienced domestic violence, as per the ANROWS Project brief. The conclusions directly address the effectiveness, limitations and service specifications of "safe at home" strategies.</p>
<p>Evaluation quality</p>	
<p>Conducted by a person(s) independent of the service</p>	<p>Yes, independent researchers – Centre for Gender Related Violence Studies and the Social Policy Research Centre, UNSW. This was an independent evaluation that had funding from FACS.</p>
<p>External ethics review</p>	<p>Yes – UNSW Human Research and Ethics Committee. Ethical issues are not detailed in this report.</p>
<p>Accessible in a form other than grey literature</p>	<p>No - the report was not accessible in a form other than grey literature.</p>
<p>Peer-reviewed</p>	<p>Not a strict peer-review, but the report was both internally and externally reviewed by FACS and feedback was provided to the evaluation team.</p>
<p>Appropriateness of the aims/questions for the evaluation</p>	<p>While there is no explicit statement of the research questions/aims, the evaluation assesses the effectiveness of the HAP DV program. The outcome measure used is the establishment and maintenance of appropriate independent housing for women and children who have experienced domestic violence. One stated aim of the report is to “provide an overview of the general service model and brief comment on implementation differences between the three HAP DV projects where relevant, as well as drawing together the similarities in relation to the HAP DV projects’ service model as a whole” (p. 8). While there were no explicit research questions, the stated aim of the report was to “provide an overview of the general service model and brief(ly) comment on implementation differences between the three HAP DV projects where relevant, as well as drawing together the similarities in relation to the HAP DV projects’ service model as a whole” (p. 8). While the evaluation goals were not always explicit, the HAP DV programs, including the data reviewed and conclusions drawn in the evaluation, clearly reflect a SAH strategy.</p> <p>The aims were both realistic and appropriate to the evaluation.</p>
<p>Clearly outlined methodology/study design</p>	<p>Yes - the methodology and study design were clearly outlined.</p>

<p>Appropriate/rigorous methodology for the evaluation aims and timeframe</p>	<p>The methodology was appropriate to address the research goal. Multiple data sources were utilised, including internal reporting data, client feedback, previous evaluations of projects and a large number of qualitative interviews with various key stakeholders. Systematic review as well as reference against current literature. Report also included data from internal service evaluations as well as independent project evaluations from two of the three HAP DV projects. These internal reviews also included client perspectives through interview/written feedback on individual projects.</p> <p>The sampling strategy was not detailed in this report. However across the three projects, 17 clients were interviewed, along with 25 staff from the participating agencies and 16 other stakeholders (Private Rental Brokerage Specialist staff, contract managers, Housing NSW staff). Administrative data, self-evaluation reports, annual service reviews, extensive written client feedback and independent project evaluations (undertaken for two of the three projects) were other sources of data.</p> <p>The interview sample and other data sources were highly appropriate and comprehensive given the project's scope and aims. The themes drawn from multiple data sources seem consistent and strong. The complexities of work with this client group, as well as local program differences, are considered. The report notes that there were some issues with data quality and apparent inconsistencies with the way the data were collected when it came to project-reported data. The report analyses the limitations of the research methodology, including its reliance on self-reporting data, the lack of longer-term outcome data, and the fact that more client interviews were not collected. However the use of longer-term reporting data from administrative records as well as access to independent program evaluations for two of the three regions, which includes extensive written feedback from clients, goes a long way towards addressing these methodological issues.</p>
<p>Primary data collected and appropriate for meeting research aims</p>	<p>Yes – 58 qualitative interviews with a range of stakeholders including clients, service providers, agency staff and other key actors. This was combined with several sources of primary data, including: administrative data; self-evaluation reports; annual service reviews; extensive written client feedback, and; independent project evaluations (undertaken for two of the three projects). This is not detailed in the final report. The results speak to the overall aim of the evaluation, which is to assess the outcomes for women and children escaping violence engaged in HAP DV projects, although research questions are not explicit. Original data was collected in the form of 58 in-depth qualitative interviews from various key stakeholders, although the report notes that a greater amount of primary client data would have been useful. The analysis was well-explained and rigorous.</p>
<p>Process measures used</p>	<p>Yes - number of clients engaged with the service, demographic data.</p>
<p>Outcome measures used which match the research questions</p>	<p>Yes - outcome measures included the establishment and maintenance of safe, ongoing tenancies for vulnerable women and their children. However, validated outcome measures were not administered to clients from the commencement of service at regular intervals over time.</p> <p>Short and medium-term client outcomes were reported in monitoring data and included in the evaluation; however long-term client outcomes were unavailable.</p>
<p>Any important areas not covered by the evaluation</p>	<p>Longitudinal accounts of client housing outcomes were not included in the evaluation. More information on the experiences of Indigenous, CALD and disabled women's experiences would be useful.</p>
<p>Overall assessment of evaluation quality</p>	<p>The report represents a rigorous evaluation with synthesis of multiple data sources, including primary data, client feedback, information from previous research reports, qualitative interviews with multiple stakeholders and reference to existing literature. It is valid despite some limitations, including: lack of longitudinal data; reliance on self-report measures; inability to contact clients that exited the service for comparison; and the small number of in-depth qualitative interviews with clients from each individual project evaluation. This evaluation demonstrates that where holistic, medium-to-long-term support is provided, and where brokerage funds are not constrained to a narrow definition of housing needs, HAP DV has proven to be highly effective at supporting women to establish and maintain independent and appropriate housing. The combination of the above elements emerged as key in the evaluation; the provision of a safe place, or case support, or access to flexible brokerage support on their own will not provide the same level of holistic support and positive medium-term outcomes for women. The evaluation is very robust with a strong mixed-methods design, encompassing detailed service data, program self-reports and independent evaluations of two of the three region's programs, as well as a high number of qualitative interviews with key stakeholders. The evaluation was independently conducted, and also included a meta-analysis which synthesised the findings and existing literature.</p>

Program/strategy background	
Jurisdiction	NSW
Program/strategy	Staying Home Leaving Violence Program
Evaluation	Breckenridge, J., Walden, I. & Flax, G. (2014). <i>Staying home leaving violence: Evaluation final report</i> . Gendered Violence Research Network, UNSW: Sydney.
Description of program/strategy	Staying Home Leaving Violence (SHLV) is a specialised domestic and family violence program designed to assist women and their children to stay safely in their own home or a home of their choice after leaving a violent relationship. SHLV is administered and funded by NSW Department of Family and Community Services (FACS) and implemented via a range of local service providers. SHLV Program was offered through 18 service providers across 22 separate locations, nine of the SHLV projects are in metropolitan locations and 12 are in regional and rural locations. Housing NSW and NSW Police auspice one SHLV project each.
Definition of "safe at home" within program/strategy	The SHLV is a needs based model with the key aims of keeping women safe from further acts of violence from the perpetrator and in stable accommodation. Its key elements include: <ul style="list-style-type: none"> • Service flexibility, which may vary in intensity and duration according to clients' individual circumstances. • A basis in early intervention and prevention principles. • An innovative response to preventing homelessness. • Focus on legal protection and home security to enable women and children to remain in their own home where it is safe to do so. • Local partnership with other key agencies such as police, housing, income support, courts, schools and counselling. • SOS Duress Response System Alarm to improve DFV victims' sense of safety. The SOS Duress Response System uses a device that is a combination of a duress alarm and mobile phone with GPS tracking.
Lead agency/department	SHLV is led and funded by FACS, and it contracts service providers in a range of non-government organisations to undertake the program. While Housing NSW and NSW Police auspice one SHLV project each.
Collaborating agencies	Housing NSW, NSW Police Force, Women's Domestic Violence Court Advocacy Service (WDVCAS).
Inclusion rationale	SHLV is a case management specific DFV program which aims to have women live independently from abusive ex-partner. It is an early intervention and prevention approach to homelessness, combined with a strong partnership with police for working on enforcement of exclusion of the perpetrator from the victim's property whether it is the family home or new accommodation. The longer term access to case management which provides emotional and practical support aims to work towards a longer term outcome of recovery from trauma, housing and financial security.
Evaluation summary	
Key information: funder; length of evaluation; evaluation governance; purpose of the evaluation	Funder: The NSW Department of Family and Community Services (FACS). Time Frame: Evaluation Period 1 was October 2012 to September 2013 which involved analysis of administrative data. Stage 2 of the evaluation was conducted between January 2014 to August 31 2014 involving qualitative Fieldwork and SOS Duress Response System data. Ethics approval for the research was granted by UNSW Human Research Ethics Committee (HC13365). FACS contracted the Gendered Violence Research Network at the University of New South Wales to carry out a formal evaluation of the Staying Home Leaving Violence (SHLV) programs in New South Wales. The overarching research question guiding the evaluation was: Does the SHLV enable women and children to remain free from domestic and family violence in a home of their choice, over time? The evaluation specific questions were: Does the SHLV program: <ol style="list-style-type: none"> 1. assist clients to maintain safe and stable accommodation of their choice? 2. assist clients to maintain control of their finances? 3. increase client's capacity to make choices which enhance their safety and wellbeing? 4. increase the wellbeing of women and their children who use the program? 5. facilitate an integrated and effective partnership response to intervention? 6. ensure open access to all families (including agreed client sub-groups)? Two additional evaluations questions were added later by FACS and project partners: Staying Home Leaving Violence Evaluation Final Report 6. 7. Do women issued with an SOS Response System alarm (who are also in the SHLV program) report feeling safer after the issue of the device?

	8. Do police report the SOS Response System acts as a deterrent to repeat breaches and further incidents of serious harm to clients?
Methodology	This evaluation used a mixed-method approach, combining service monitoring data, validated scales and measures, and qualitative interviews and focus groups with both workers and women who used SHLV.
Key program elements	The SHLV service is evidence based, providing a case-management model which is needs based, non-time limited and integrated with key professional partnerships to ensure that a flexible range of effective services are delivered to clients. SHLV provides referral services prior to and during client engagement with the service, case coordination for clients who enter the SHLV program with an existing case-manager and more intense, longer term case management. Limited brokerage is available to all SHLV clients specifically targeting client safety by upgrading home security provisions.
Program/strategy practice approaches	Aimed at preventing homelessness and making women and children safer through a flexible response that is needs based, support for women to apply for a ADVO. SHLV has dedicated workers that are based in specialised DV services. Referrals are made to other relevant services to ensure ongoing appropriate support for the woman and their children. Brokerage funds can be used for safety upgrades. SHLV services work closely with the police to minimise risk for the woman and hold the perpetrator accountable. Access to safety alarms for suitably assessed high risk individuals. Unlike many DFV interventions SHLV offers longer term service to women.
Specific conditions under which "safe at home"s was not going to be viable/safe	In some cases SHLV clients were simply not able to remain in the family home because of economic abuse during the relationship and financial insecurity after leaving their violent partner which meant that they could not afford mortgage repayments or rent as a single person. The conceptual shift to "a home of their choice" marks a greater recognition that "Stay at Home" programs allow women to remain housed without having to enter specialist homelessness services at the time of leaving or longer term. It is without doubt that SHLV provides an important additional option, supporting victims of violence to remain in the family home or a home of their choice, while the perpetrator is excluded. However enabling this option is almost always dependent upon the successful intervention of police and the judiciary granting either an interim or permanent exclusion order as part of protection orders.
Diverse population groups and geographical locations	Analysis of data from the study enabled the evaluation team to measure the level of reach and participation into Aboriginal and Torres Strait Islander and CALD communities, women living with disabilities and SHLV clients who are carers of children with disabilities, as well as clients from remote and disadvantaged communities. The total number of Aboriginal and Torres Strait Islander clients (both case managed and case coordinated) was 171 during the study period. These clients were responsible for the care of 345 children, an average of 2 children per client- a slightly higher figure than for SHLV clients overall. CALD women: 20.8% of clients. In addition, 18% of the total case- managed SHLV clients in the study period spoke a language other than English at home. Languages most frequently spoken (other than English) were: Arabic 24 (14.9%), Spanish 17 (10.6%) and Hindi 13 (8.1%). All other languages were small numbers and generally single cases.
Relevant policy and legislative context	Residential Tenancies Act.
Key findings	<p>From Oct 2012 to Sep 2013 - 1,324 clients were assisted by the SHLV program across all project locations. This consisted of 880 case-managed clients, 444 case-coordinated clients. An additional 863 people received "referral only" service (typically information or further referral). Case loads were on average 60 well above contracted requirements of 30. 1,532 women were referred in to SHLV services across NSW during the study period of whom, 669 were taken on as new SHLV clients, either for case management or case coordination. Three top Referrals came from Police (22.2%), Women's Domestic Violence Advocacy Service (20.3%), and self-referrals (16.4%).</p> <p>93.3% of clients were living in safe long-term accommodation at the time of exit from the program. 52.5% of clients had remained living in the same home.</p> <p>Of those no longer living in the same home, 84.7% said it had been their choice to move.</p> <p>87% of clients reported an improvement in their feeling of safety at home by the time they exited the SHLV program.</p> <p>83% of clients believed their children were safer as a result of SHLV.</p> <p>Qualitative data: Clients reported a great improvement in feelings of safety in their home as a direct result of their time with the SHLV service, and most indicated they felt their children were also safer as a result of SHLV (83%). SHLV assisted those women who decided to stay as well as those who re-located to improve safety. Of those clients for whom it was a stated goal, 94% felt more able to find</p>

	or keep a job because of the service and for whom it was a stated goal, 98% felt more able to start or keep studying because of the service. The average length of service received by all SHLV clients (case managed and case coordinated) was 7 months. Case managed clients remained with the SHLV program for an average of 8 months, compared to 5 months for case coordinated clients.
Conclusions and recommendations based on the findings (incl. how to improve "safe at home" programs in the future)	Maintain SHLV as a comprehensive program where a flexible suite of services can be individually tailored to meet clients' needs at different points of time, recognising that SHLV program elements do not necessarily work, or work as well, when offered separately. Greater consideration of provision to children in the program. Brokerage funding widen criteria to use for sustaining future efforts e.g. study and do not narrow. Women felt safer with security upgrades. Clients reported a great improvement in feelings of safety in their home as a direct result of their time with the SHLV service, and most indicated they felt their children were also safer as a result of SHLV (83%). SHLV assisted those women who decided to stay as well as those who re-located to improve safety. Of those clients for whom it was a stated goal, 94% felt more able to find or keep a job because of the service and for whom it was a stated goal, 98% felt more able to start or keep studying because of the service.
How the findings are useful for wider program development/practice	Development of models of practice for future SAH programs. Need to have specialised services with flexibility. Successful model of homelessness prevention and supports planned approach rather than crisis response. Pays attention to role of social support and social capital e.g. school, friends etc. Highlights importance in outcomes that comes from longer term support to continue to combine a dual focus on housing and client safety, supported by the criminal justice sector as well as effective partnerships with other integral agencies. Critical role of magistrates in granting exclusions and ouster orders as SHLV is often dependent for success on this. Evaluation shows the importance of having good admin data to build picture of work being undertaken and its strengths.
Evaluation quality	
Conducted by a person(s) independent of the service	Yes - the evaluation was conducted by an external research team from the Gendered Violence Research Network at the University of New South Wales.
External ethics review	Yes - University of New South Wales Human Research Ethics Review.
Accessible in a form other than grey literature	No - this report is not accessible in a form other than grey literature.
Peer reviewed	No - the report did not give any detail around a peer-review process.
Appropriateness of the aims / questions for the evaluation	Yes - the research questions were clearly outlined and responded to in the evaluation (see above). Aims were realistic and relevant about what knowledge needed to be gathered about SHLV.
Clearly outlined methodology/study design	Yes - the evaluation had a strong evaluation design, attempt to measure differences due to accessing SHLV which has not been done by any/many evaluators. Mixed-methods design a strength. Good analytical use of admin data provided by NSW agencies. Economic analysis was more detailed than many others in the sector in attempting to determine and compare cost of services.
Appropriate / rigorous methodology for the evaluation aims and timeframe	Yes - as noted above. Also highly transparent in methods and data presentation.
Primary data collected and appropriate for meeting research aims	Yes - the evaluation had appropriate data collection methods. Data collected from women, service providers and other SP stakeholders.
Process measures used	Yes - process measures were used.
Outcome measures used which match the research questions	Yes - outcome measures were used that matched the research questions.
Any important areas not covered by the evaluation	Possibly what happened to the perpetrator - an evaluation which tracks his responses to exclusion would be useful.
Overall assessment of evaluation quality	Very strong evaluation approach with highly focused aims and research questions which were then subsequently answered clearly and with data to support all assertions.

Program/strategy background	
Jurisdiction	NSW
Program/strategy	Staying Home Leaving Violence (SHLV)
Evaluation	RPR Consulting (2007). <i>Evaluation of Staying Home Leaving Violence Eastern Sydney Pilot: Final Report</i> . Department of Housing: New South Wales.
Description of program/strategy	The primary aim of SHLV is to “prevent [women and children’s] homelessness by enabling women who have experienced domestic violence to remain safely in their own homes without the violent partner” (Housing NSW, 2008, p. 17). The Eastern Sydney pilot provided: risk assessment and safety planning; security upgrades to the victim’s home (using brokerage funding); court support and advocacy in relation to applications for exclusion orders; liaison and advocacy with the police; case work to address financial, tenancy and other issues; referrals to legal advice, counselling, and other support services; and support and resourcing of clients at family court proceedings. The service is available to victims of domestic violence, regardless of whether they are in private rental, social housing or own their own home (pp. 4-5). The Eastern Sydney model involved the development of a coordinated service framework with key agencies that provided support to victims and/or perpetrators of domestic violence in the Eastern Sydney area. The support provided to clients was entirely flexible and responsive to client needs, and was not time limited.
Definition of "safe at home" within program/strategy	While the term "safe at home" was not used explicitly in this report, SHLV explicitly aims to "prevent [women and children’s] homelessness by enabling women who have experienced domestic violence to remain safely in their own homes without the violent partner" (Housing NSW, 2008, p. 17). This aim is directly in line with the definition of "safe at home" utilised in the current project.
Lead agency/department	NSW Department of Housing Homelessness Unit (governance); NSW Department of Community Services (pilot funder)
Collaborating agencies	Junction Neighbourhood Centre, Maroubra
Inclusion rationale	This report is an evaluation of the Staying Home Leaving Violence (SHLV) pilot as it operated in Eastern Sydney between May 2005 and June 2007. The report self-identifies as an evaluation, and has some original data although there is a strong reliance on secondary / program monitoring data. Funding for the evaluation was provided by the NSW Department of Housing. The SHLV program has a specific focus on domestic violence and aims to prevent women and children leaving a violent relationship to maintain independent housing.
Evaluation summary	
Key information: funder; length of evaluation; evaluation governance; purpose of the evaluation	The Staying Home Leaving Violence (SHLV) pilot was developed based on the Australian Domestic Violence Clearinghouse research project, Staying Home Leaving Violence. The Eastern Sydney pilot commenced operation in late 2005. The project originally received funding for a period of 12 months from May 2005; funding for the project was then extended to June 2007. At the time of writing, a further two years’ funding had been granted (from July 2007 to June 2009) by the NSW Government to extend all three existing SHLV pilots, with the plan to further expand the model to new sites across the state. There were two other SHLV pilot sites originally funded, in Bega and in Western Sydney. The evaluation was undertaken by RPR consulting, and funded by the NSW Department of Housing. The evaluation period ran from September 2005 until May 2007. The report did not specify any research questions. The evaluation focused on three key areas: 1) client characteristics and outcomes; 2) the operation of SHLV within the local service system; and 3) governance and systemic issues. Although broad, these aims were appropriate for the evaluation.
Methodology	The methodology included: site visits with project staff; interviews with staff including those directly on the project, others from the Homelessness Unit as well as Police and Court Magistrates; examination of project documentation; analysis of available client data including a client file review by SHLV workers; development of client case studies; and a workshop with key service providers who had collaborated with the project.
Key program elements	Key program elements included: an MOU with the local Police, who handed out SHLV information cards to potential clients; a two-step intake process, which allowed women time to reflect on whether SHLV was suitable for them; support provided to clients was totally flexible, responsive to client needs and not time limited.

<p>Program/strategy practice approaches</p>	<p>The evaluation identified a number of good practice approaches that contributed to effective engagement of clients and positive client outcomes, including: 1) proactive and timely outreach; 2) provision of holistic support, which addressed the range of issues impacting on the client and her children; 3) being responsive to client needs and goals; 4) increasing flexibility in relation to duration and intensity of support; 5) working in a way which is appropriate to the cultural background of the client; and 6) working in a collaborative and coordinated way with other service providers (p. 9).</p>
<p>Specific conditions under which "safe at home" was not going to be viable/safe</p>	<p>While the specific conditions under which "safe at home" was not a viable response were not explicitly discussed, a number of systemic barriers were identified, including legislative and policy inconsistencies. Several women in the pilot returned to abusive partners, many due to financial difficulties or, for one woman, issues with residency. One woman who wished to return to the service after disengaging for a time was referred elsewhere, as the perpetrator knew the SHLV location which posed a safety risk to workers.</p>
<p>Diverse population groups and geographical locations</p>	<p>Aboriginal and Torres Strait Islander communities: Approximately 8% (3) clients identified as Aboriginal or Torres Strait Islander. This number was considered non-representative, considering evidence of prevalence of domestic and family violence in Aboriginal and Torres Strait Islander communities. The evaluation suggested that a different approach may be needed in working with Aboriginal communities. CALD clients: Over one third of clients (36.1% or 13) were from culturally and linguistically diverse backgrounds. Women and children with disabilities: Six (6) of the case managed clients had a disability, as did two children of clients. Thus approximately 22% of clients had specific needs arising from disability. Older women: 11.1% (4) clients case managed in the pilot were aged over 50 years. Employment: Half of all case managed clients (50% or 18) were employed part-time or full-time at the time of support. Housing tenure: 44.4% of clients (16) were living in public housing at the time of assessment; 27.7% (10) were living in privately owned or mortgaged homes; and 27.7% were housed in the private rental market.</p>
<p>Relevant policy and legislative context</p>	<p>The evaluation noted significant systemic issues relating to: 1) incongruities between legislative pieces concerning AVOs and tenancy law; 2) immigration policy and extensive barriers for women where immigration status is dependent on her partner; 3) the Family Law system, with victims of domestic violence subject to repeated and lengthy processes in the Family Court, with proceedings used to further harass and abuse women; 4) Centrelink policies: denial of income support due to immigration status and the halving of income upon separation from a violent partner had a direct effect on clients returning to violent partners in the project. Also assets in the woman's name may lead to ineligibility for income support payments, regardless of whether the violent partner was controlling the assets or not; and 5) financial stress: many women, particularly those caring for children, suffered from financial stress. Financial stress was also experienced by women with assets, as these were frequently controlled by the perpetrator of abuse and often meant women were effectively ineligible for Centrelink benefits or Legal Aid.</p>
<p>Key findings</p>	<p>The program was shown to be effective with women across all socio-economic groups and with those in various forms of housing tenure, and also seemed effective in reaching women that had not previously engaged with other welfare services. Client data showed that close to two-thirds of the SHLV clients (64% of 22 case managed clients) were able to remain living in their own home with the perpetrator of violence excluded. Five clients (14%) reconciled with their partner. Six clients (17%) relocated by choice; while this was often done to improve their safety, instead of fleeing during a crisis they were able to make a planned move; meaning they did not require crisis accommodation and were better able to manage transitions between jobs, childcare, schools and support services with minimal impact. Clients reported a greatly increased sense of safety as a result of the support provided by SHLV. A large majority of women who were employed at the time of referral were able to maintain their employment. The majority of children maintained stability in education and childcare arrangements. Other positive benefits identified by clients included maintenance of support and cultural networks, enhanced sense of self-worth, confidence and control over their own lives. 69% of clients experienced some form of abuse after separation, with the most common form reported as financial abuse (41% of clients).</p>

<p>Conclusions and recommendations based on the findings (incl. how to improve "safe at home" programs in the future)</p>	<p>The evaluation identified three areas for future enhancement of the practice approach: 1) strengthening support for women in the Family Court process; 2) developing strategies to help women not only maintain but extend their social support networks; and 3) strengthening support to children to overcome and heal from the trauma of domestic violence. The evaluation also recommended: 1) formal protocols to be drawn up between SHLV staff, and Department of Housing and DoCS staff; 2) priority should be given to addressing access barriers for Aboriginal women; 3) that the management of the SHLV Eastern Sydney program should continue to be held by a government agency, with the Department of Housing recommended due to its ability to influence DOH policy and systems relating to clients who have experienced domestic violence; 4) that a standardised training package for implementation with new SHLV workers, covering specialised areas of risk assessment and safety planning, be designed and implemented; 5) that a minimum of two full-time positions be established for the SHLV model to operate effectively, with the staff having a high degree of experience and skill in casework with clients with complex needs, advocacy and community education; 6) that regular, external clinical supervision continue to be provided for SHLV workers and funded in the project budget; 7) that SHLV workers be provided with a duress alarm linked to the Police; 8) that SHLV workers be given delegated authority to make routine decisions around allocation of brokerage funds; 9) that a realistic geographic catchment area is designated at the outset of any other SHLV projects; and 10) that the establishment of an advisory committee is critical to the local implementation of the model.</p>
<p>How the findings are useful for wider program development/practice</p>	<p>Although this evaluation took place very early in the implementation of "safe at home" approaches, the findings have influenced program development and practice. The significance of flexible case support including access to flexible brokerage, and the many implementation-specific recommendations are highly informative.</p>
<p>Evaluation quality</p>	
<p>Conducted by a person(s) independent of the service</p>	<p>Yes - RPR Consulting.</p>
<p>External ethics review</p>	<p>Not detailed in this report.</p>
<p>Accessible in a form other than grey literature</p>	<p>No - the report was only accessible via historical access to the Australian Domestic and Family Violence (ADFVC) database.</p>
<p>Peer-reviewed</p>	<p>No - the evaluation did not undergo peer review.</p>
<p>Appropriateness of the aims / questions for the evaluation</p>	<p>The report did not specify any research questions. The evaluation focused on three key areas: 1) client characteristics and outcomes; 2) the operation of SHLV within the local service system; and 3) governance and systemic issues. Although broad, these aims were appropriate for the evaluation. The aims were both realistic and appropriate to the evaluation.</p>
<p>Clearly outlined methodology/study design</p>	<p>The data sources were listed, but little other information on the study design was detailed in the report. However the authors did consider the limitations of the methodology and explain some of the ways in which they addressed this (e.g. lack of direct client data was addressed by having SHLV workers do a case file audit and via the development of case studies for inclusion in the evaluation report).</p>
<p>Appropriate / rigorous methodology for the evaluation aims and timeframe</p>	<p>Yes – although the lack of client data was fairly significant given the aim to report on client characteristics and outcomes. The report acknowledged resourcing issues within the evaluation. Although the lack of primary data from clients was a significant limitation, steps were made to address this within the budget and time constraints.</p>
<p>Primary data collected and appropriate for meeting research aims</p>	<p>Yes - primary data was collected via workshops with workers from service providers, as well as site visits and interviews with project staff, court staff and Police representatives. However no primary data was collected from clients directly, with a case audit by workers being the main form of client-related data included in the report. Although the lack of primary data from clients was a significant limitation.</p>
<p>Process measures used</p>	<p>Client demographics (including housing tenure, employment status, cultural background).</p>
<p>Outcome measures used which match the research questions</p>	<p>Children's education, women's employment outcomes, maintenance of tenure in the home of choice. Yes, these outcome measures did adhere with the aims of the evaluation.</p>

<p>Any important areas not covered by the evaluation</p>	<p>The evaluation did not include direct feedback from service users due to resourcing issues, although case files were reviewed by SHLV workers and case studies prepared for the purposes of the evaluation. Individual interviews with service providers from key agencies would have added another layer of reliability to the evaluation. Baseline comparative data from courts and Police were also missing from the report. Longitudinal data on outcomes for the women and children engaged in "safe at home" projects is needed.</p>
<p>Overall assessment of evaluation quality</p>	<p>While methodological limitations were explored by the authors, the absence of any direct client data was a significant limitation given the aim of assessing client outcomes. Secondary monitoring data dominated, with original data emanating from a single workshop and some individual interviews. The report does not give much detail around how the data was analysed. The report was not peer reviewed and was only accessible in the grey literature. Despite its limitations, the evaluation was conducted independently of the service and did provide valid data on project outcomes directly related to the "safe at home" approach.</p>

Program/strategy background	
Jurisdiction	NSW
Program/strategy	Staying Home Leaving Violence (SHLV)
Evaluation	Purple Kangaroo Consultants (2007). <i>Final report of the Staying Home Leaving Violence (SHLV) Project auspiced by Bega Women's Refuge</i> . New South Wales: Bega.
Description of program/strategy	<p>The SHLV pilot was based upon the Australian Domestic Violence Clearinghouse research project of the same name. The Bega pilot began in October 2004 and was auspiced by Bega Women's Refuge. The project provided support and assistance to women and accompanying children who had experienced domestic and family violence and who wished to remain in their homes in the Bega Valley region.</p> <p>The SHLV pilot had two staff positions: that of case manager, and community development worker. Overall the project was focused on keeping women safely in their homes through the provision of personal safety packages (providing locks, alarms, telephones and security doors etc.). As well as this, the case manager was able to provide crisis counselling and emotional support, court assistance and referral to other agencies (p.3).</p>
Definition of "safe at home" within program/strategy	While the report does not directly refer to the term "safe at home", it underpinned by referrals to women and children being supported to live "safely at home" The project is underpinned by a "safe at home" philosophy, with the aims of the project including the improvement of responses to women and children leaving a violent perpetrator and providing case work and advocacy specifically to women and children choosing to remain in or return to their home following domestic violence (p. 1).
Lead agency/department	Bega Women's Refuge (BWR).
Collaborating agencies	Not listed in this report, but local Police (Southern Far Coast LAC) and the Magistrate's Court are mentioned as key agencies.
Inclusion rationale	<p>This report is an evaluation of the Staying Home Leaving Violence (SHLV) pilot program as it operated in Bega between May 2005 and March 2007. The report self-identifies as an evaluation and was undertaken externally by Purple Kangaroo Consultants. Funding for the evaluation appears to have been provided by the NSW Department of Housing, although this was not clear in the report.</p> <p>The program had a dual focus on domestic violence and safety, and was aimed at both preventing women from entering specialist homelessness services as well as supporting the safety of women to remain in the independent accommodation of their choice.</p>
Evaluation summary	
Key information: funder; length of evaluation; evaluation governance; purpose of the evaluation	Funding for the evaluation appears to have been provided by the NSW Department of Housing. The report synthesises three stages of evaluation from data captured between May 2005 and March 2007. Evaluation governance was not discussed in this report. The aims of the evaluation were: 1) to evaluate the success of the Bega SHLV pilot in meeting its aims; 2) to analyse pilot data and information collected between May 2005 and March 2007; and 3) to examine the systemic issues that affected the Bega pilot (p. 1).
Methodology	<p>This evaluation had a mixed-methods approach and synthesised information from: 1) the previous three evaluation reports; 2) policy documents and publications relating to the SHLV pilot; 3) the use of primary documents; 4) the use of secondary documents; and 5) analysis provided by the Community Development worker and Case Manager employed in the pilot. Police and Court data was accessed at the start of the project, but not comparative figures were available at the time of the evaluation.</p> <p>Quantitative data was collected by SHLV project workers and agencies involved in partnership agreements. Qualitative information was gathered from interviews and focus groups conducted by the researchers. The researchers also interviewed sixteen (16) clients of the pilot.</p>
Key program elements	Key program elements included: the ability to provide personal safety packages (safety upgrades to the home as well as access to a telephone emergency alarm system); the provision of flexible, ongoing support and financial brokerage; and the employment of both a Case Manager to work with clients, and a Community Worker to liaise with agencies and develop policies and community awareness of the pilot.

Program/strategy practice approaches	The evaluation identified the flexibility of support as a key strength of the program. A strengths-based approach to work with clients was also seen as vital. Most significantly, the evaluation identified that a strong, coordinated and consistent approach from agencies, particularly from Police and the Court system, communicating the message that women and children could remain safely in their home after leaving a violent relationship and that their safety would be prioritised by said agencies, was vital to supporting clients to remain in the home of their choice. While the evaluation cited a lack of consistency in this way of working within the pilot, this strong and coordinated approach was recommended as vital to any future programs.
Specific conditions under which "safe at home" was not going to be viable/safe	While the specific conditions under which "safe at home" was not a viable response were not explicitly discussed, the report mentioned several cases of women who originally engaged with the pilot but ended up returning to their violent partner. It was proposed that perhaps these women did not have the "personal strength" or access to resources needed to leave the violent partner or to exclude him from the home. While domestic violence is a pervasive and complex issue within itself, where this co-occurred with other issues including substance abuse and mental health issues clients seemed to have a less positive experience within the SHLV pilot.
Diverse population groups and geographical locations	The flexibility of the program, and the ability of support packages to be individually tailored for clients, meant that diverse needs could be catered for. However, data was not presented around effectiveness for population groups. The report noted that ten (10) of the 44 clients engaged with the pilot in the survey period were Indigenous or Maori, or had Indigenous partners. Given the high rate of domestic violence in Indigenous communities, the report noted that the number of Indigenous women and children reached by the Bega pilot could increase. The report also noted that several women were excluded from accessing SHLV due to their remote locations, and the inability to guarantee a prompt police response to their place of residence: a key factor for eligibility in the pilot.
Relevant policy and legislative context	The evaluation noted that "the legislative and policy framework that currently exists in a number of other States and Territories clearly promotes a more coordinated approach to domestic and family violence than in New South Wales" (pp. 21-22). The report recommended a more organised approach to supporting women escaping violent relationships to remain in their own home or the home of their choice, including amendments to the Crimes Act. The legal provisions for ouster or exclusion orders were seen as essential in promoting a SHLV model of intervention. The report also insisted that a shift was required in "policies and institutions such as the Police, the Courts, housing and child protection organisations" (p. 4). The evaluation found there were very low rates of ADVO breaches that were followed by criminal charges, as well as a small number of ADVO orders granted in the year preceding the release of the final report. The authors noted that the philosophy of supporting women to remain in their homes following domestic violence had not successfully filtered through to local institutions.
Key findings	The evaluation found that clients of the SHLV project were more likely to own their own home, be older, have children and be employed than women living in the Bega Women's Refuge. The pilot appears to have reached some women who may not have otherwise sought help from a refuge. 60% of pilot clients experienced positive outcomes. The personal safety packages were the most valued service provided with 30 provided over the life of the pilot. While all sixteen (16) clients interviewed reported feeling safer after becoming involved with the SHLV pilot, many also reported their involvement with Police as unresponsive. The situations of women who experienced negative outcomes appear much more complex than those of the women with positive outcomes. Some negative outcomes resulted from inadequate or unresponsive responses from Police and the Court, while in other cases the women who applied for SHLV were not yet ready to leave their violent relationships. The flexibility of service provision was cited as one of the main strengths of the pilot.
Conclusions and recommendations based on the findings (incl. how to improve "safe at home" programs in the future)	Conclusions and recommendations were based on the findings. The report noted that the lack of a state-wide domestic violence outreach system in NSW significantly affected the pilot. The authors stated that it was "essential that the SHLV program maintains a focus on domestic violence prevention rather than developing policy under a housing focus" (p. 20). The report recommended an adjustment of the Bega intake procedure to reflect a two-step process, with women first interviewed for an intake assessment then given time to reflect on their situation and re-evaluated as ongoing clients, in consideration of women who may not have the resources to leave the violent relationship at the time of engagement with SHLV. The report stated that the "essential lesson" of the Bega pilot was the need for "strong, clear and formal MOUs or agreements between SHLV and other agencies that create an organisational relationship rather than relying on relationships between individual workers" to

	ensure continuity of service provision (p. 13). The evaluation suggested that the provision of separate perpetrator programs and support may assist and support the SHLV approach, as would a stronger monitoring system for perpetrators who were partners of the women involved in SHLV.
How the findings are useful for wider program development/practice	The significance of flexible case support, provided within a strengths-based framework, and the usefulness of these combined factors is influential for wider practice. The emphasis on security upgrades for the home, in conjunction with broader agency and system support, were also seen as key factors for the success of the pilot that broadly inform the wider practice area.
Evaluation quality	
Conducted by a person(s) independent of the service	Yes - Purple Kangaroo Consultants
External ethics review	Not detailed in this report.
Accessible in a form other than grey literature	No - this is an unpublished report that could only be located via historical access to the Australian Domestic and Family Violence (ADFVC) database.
Peer reviewed	No - the report was not peer reviewed.
Appropriateness of the aims / questions for the evaluation	The aims of the evaluation were: 1) to evaluate the success of the Bega SHLV pilot in meeting its aims; 2) to analyse pilot data and information collected between May 2005 and March 2007; and 3) to examine the systemic issues that affected the Bega pilot (p. 1).
Realistic and appropriate aims for the evaluation	While the methodology was briefly described and the data sources named, it was often unclear which data applied to specific statements or conclusions. However this may have reflected the nature of the document, which synthesised material from several sources including previous evaluation reports as well as data collected over a long period of time. Aims were both realistic and appropriate to the evaluation.
Appropriate / rigorous methodology for the evaluation aims and timeframe	The methodology was appropriate, though it is difficult to judge the rigour of the methodology as it was not explored in detail in this report.
Primary data collected and appropriate for meeting research aims	Yes - primary data was collected and data was appropriate for meeting the aims of the evaluation.
Process measures used	Client demographics, number of clients accessing the program.
Outcome measures used which match the research questions	Client feelings of safety, client reported experiences with the program (positive or negative).
Any important areas not covered by the evaluation	More longitudinal data on client outcomes, including complementary data sets on ADVOs and police responses to domestic violence would have been useful to include in the evaluation. There was also no information about service provision to women with disabilities or older women.
Overall assessment of evaluation quality	The evaluation adopted a holistic approach to evaluating the pilot, with aims to explore the success of the Bega SHLV pilot in meeting its own objectives as well as analysis of systemic issues affecting the pilot. While primary and secondary data was collected from many sources over a long period of time, it was often unclear which data source was being drawn upon when statements or conclusions were reached. The methodology and analysis of data was not explained in detail within the report. The evaluation was independently conducted, however consideration of ethical issues were not explored. The report was accessible only within the very grey literature and was not peer-reviewed. Despite its limitations, the evaluation provided significant insight into the Bega SHLV pilot and reflected upon site-specific features and constraints.

Program/strategy background	
Jurisdiction	NSW
Program/strategy	Start Safely Private Rental Subsidy
Evaluation	Griffiths, A., Zmudzki, F., & valentine, k. (2014). <i>Evaluation of Start Safely private rental subsidy: For FACS-Housing NSW – Final report</i> . Social Policy Research Centre, University of New South Wales: Sydney.
Description of program/strategy	<p>“The purpose of Start Safely [SS] is to provide time-limited financial assistance to eligible clients escaping domestic or family violence to assist them to access appropriate, affordable and safe housing in the private rental market. Start Safely provides financial relief to the client for a period after leaving violence until their situation is stabilised. Where needed, Start Safely applicants will be referred to support services, including domestic violence services (NSW FACS, 2013, p. 1).</p> <p>“Start Safely aims to achieve the following client outcomes:</p> <ul style="list-style-type: none"> • reduce the number of clients and their children who are forced into homelessness because of domestic and family violence; • reduce the number of clients who return to dangerous home environments from crisis accommodation; • reduce time spent in temporary accommodation which is often inappropriate for clients with children escaping violence; • reduce time in crisis accommodation by assisting transition into safe, secure accommodation; and • provide a long-term housing option in the private rental market with short to medium-term government assistance.” (NSW FACS, 2013, p. 1)
Definition of "safe at home" within program/strategy	As outlined in the SS Guidelines, the purpose of Start Safely is “to provide time-limited financial assistance to eligible clients escaping domestic or family violence to assist them to access appropriate, affordable and safe housing in the private rental market” (NSW FACS, 2009, p. 1).
Lead agency/department	FACS-Housing NSW.
Collaborating agencies	Local service providers.
Inclusion rationale	The SS evaluation addresses a program that has as its aim the provision of independent accommodation for those who have experienced domestic violence. Further, the report self-identifies as an evaluation of the Start Safely program. As such, it meets the criteria set for the SAHME meta-evaluation.
Evaluation summary	
Key information: funder; length of evaluation; evaluation governance; and purpose of evaluation	<p>Funded by FACS-Housing NSW. Administrative program data analysis over three complete financial years (2010/11; 2011/12; 2012/13). Qualitative data collection (interviews) conducted in Sep, Oct and Nov 2013. Evaluation completed by the Social Policy Research Centre (SPRC) at UNSW and Epoque Consulting. Both organisations commissioned by FACS-Housing NSW. Purpose relates directly to 16 questions explicitly set out in the FACS-Housing NSW specification, grouped into four key areas:</p> <p>Outcomes</p> <ol style="list-style-type: none"> 1. What impact has participating in the Start Safely program had for clients housing and safety outcomes? Has the subsidy contributed to other non-housing outcomes? 2. Are there significant variations in access and outcomes for Start Safely for different client populations (such as culturally and linguistically diverse and Aboriginal people and families)? 3. What are the housing outcomes/options for households who are assessed as eligible for the subsidy but are unable to take it up? What are barriers and enablers to participation for those eligible for the subsidy? 4. What factors are facilitating or inhibiting sustainable housing outcomes for Start Safely clients? What proportion of recipients seek further housing assistance (extended subsidy, social housing wait list, priority housing, etc.) and key factors associated with the need for further assistance? <p>Implementation</p> <ol style="list-style-type: none"> 5. Are clients provided with an appropriate service that recognises the difficulties of their situation, need for urgent assistance, importance of confidentiality etc.?

	<ol style="list-style-type: none"> 6. Is the client assessment process working well to identify appropriate clients for assistance and put in place steps that enable clients to transition to paying market rent? How could the client assessment process be improved to optimise outcomes? 7. How well are Start Safely clients linked to the support services they require (such as Staying Home Leaving Violence)? Is there a difference in the outcomes achieved for clients who had a support plan to those who only received the subsidy? What part does a support plan play in access to services? 8. Is the program being implemented as intended and are established processes (such as the quarterly review) occurring effectively? Are there potential changes that could improve effectiveness and efficiency of the program? 9. What are most effective models of program delivery? Does the availability of Private Rental Brokerage Service (PRBS) resources impact on the effective delivery of Start Safely? 10. Are the current policy settings and processes effective for achieving the intent and purpose of the Start Safely subsidy? 11. How well are the current policy settings and processes working? <p>Value and cost effectiveness</p> <ol style="list-style-type: none"> 12. What are the costs (average per client and overall) of delivering Start Safely and achieving sustainable housing outcomes? 13. How has the extension of the subsidy to a maximum of 24 months impacted on the overall operating costs? Has the extension contributed significantly to improved client outcomes? 14. Are there opportunities to improve the cost effectiveness of the program while continuing to support client outcomes (such as tapering of the subsidy amount towards the end of the subsidy period, better assessment and management of the length of assistance required)? 15. What are the estimated savings to government of Start Safely compared to other forms of housing assistance for clients escaping violence? For example, is there any evidence that expenditure on Start Safely has prevented greater expenditure on other programs such as homelessness responses? <p>Policy review</p> <ol style="list-style-type: none"> 16. Do the program policy and guidelines need to be revised to ensure that the program is consistent with current reform directions in housing and human service delivery? If so, how?
Methodology	<p>The evaluation included:</p> <ul style="list-style-type: none"> • A review of program data. • Additional data sources for comparative cost of housing programs. • Qualitative data collection from FACS-Housing NSW staff and other stakeholders (19 FACS staff interviewed). • Qualitative data collection from service providers (8 service providers interviewed). • Qualitative data collection from Start Safely clients (9 clients from two districts). • A review of literature and policy.
Key program elements	<p>Start Safely Program Guidelines (NSW FACS, 2009) describe the program's purpose as:</p> <ul style="list-style-type: none"> • “[providing] time-limited financial assistance to eligible clients escaping domestic or family violence to assist them to access appropriate, affordable and safe housing in the private rental market” (2009, p. 7). • Clients must meet eligibility criteria (citizenship and residency requirements; income and assets test) (p. 8); demonstrate an ability to service rental payments after the subsidy periods ends (calculated with income and affordability tests), and; be willing to accept support where necessary. Monitoring emerges as a key program feature, with clients subject to quarterly reviews. • Interagency service collaboration/networks emerge as essential to SAH programs, and SS is no exception (multiple government departments, service providers). • the SS program does not make provision for support for women and their children wishing to remain in the family home once the perpetrator has been removed.
Program/strategy practice approaches	<p>Interagency relationships emerged strongly as a need in the homelessness support field, with a need for “Start Safely to be one component of a responsive, resourced support system for women who have experienced domestic violence” (Evaluation report, p. 3). Integrated service delivery was also presented as a key success of SS: the coordination between FACS NSW-Housing and service providers is shown to provide support to address the needs of women and their children (p. 3). FACS NSW-Housing and service providers were positive about the benefits of service integration to ensure clients receive the most comprehensive support (p. 4).</p>

Specific conditions under which "safe at home" was not going to be viable/safe	This is not included in the report, though the report does say the SS program may not work for everyone (p. 3), and needs to be supplemented by mental health or other support services.
Diverse population groups and geographical locations	<p>The report does not specifically look at whether SAH programs are effective for different populations, but does identify specific population needs and make evidence-based practice recommendations.</p> <p>Aboriginal women and children (p. 34-35)</p> <p>The evaluation identified that Aboriginal clients faced specific barriers such as:</p> <ul style="list-style-type: none"> • cultural barriers to receiving support; • more complex needs (including poor tenancy histories); • family and community pressure not to report family violence; • reluctance to engage with services; and • racism and discrimination. <p>The report found that not all tenancy requirements could be reliably met for Aboriginal clients, such as ensuring dwellings with an extra bedroom for visiting family and friends.</p> <p>Report affirmed that Aboriginal clients require close case-management, which requires a significant time commitment from service providers.</p> <p>Clients from CALD backgrounds (p. 35-36)</p> <p>Barriers for clients include:</p> <ul style="list-style-type: none"> • cultural or religious restrictions; • reluctance to report domestic violence for fear of repercussions (such as alienation from family/ community); and • lack of understanding of what is acceptable in relationships. <p>The researchers underline that culturally specific support services are critical. Additionally, information and materials in community languages with improved distribution would be beneficial.</p> <p>The other two specific populations mentioned are clients exiting and re-entering the program (p. 36) and men (p. 37).</p>
Relevant policy and legislative context	<p>The report notes SS aligns with the aims of current reforms in housing in NSW (p. 9-10). It identifies key policies as:</p> <ul style="list-style-type: none"> • Community and Private Market Housing Branch, Department of Family and Community Services – <i>Private Rental Assistance Strategic Framework</i>. • Women NSW. (2014). <i>It Stops Here: Standing together to end domestic and family violence in NSW</i>. The NSW Government's Domestic and Family Violence Framework for Reform Women NSW, Sydney. • NSW Family and Community Services. (2013). <i>Going Home Staying Home Reform Plan</i>. NSW Family and Community Services, Sydney.
Key findings	<p>Factors facilitating sustainable outcomes:</p> <ul style="list-style-type: none"> • Start Safely (SS) provides stable living environment, schooling, childcare, financial needs associated with children. • SS offers more than housing outcomes – fosters independence and confidence, facilitates improved education and employment opportunities. • <i>Recommendation:</i> “Critical component of support provided in conjunction with the Start Safely subsidy should be the continued provision of ongoing financial, legal and social support to mitigate these long-term effects of domestic violence and ensure that women can sustain their tenancies” (p.2). <p>Factors inhibiting sustainable outcomes:</p> <ul style="list-style-type: none"> • Housing affordability – shortage of affordable properties may result in lower program uptake in some areas. • Servicing debt places significant burdens – SS should include provision of specific comprehensive legal and financial advice. • SS not suitable for all clients – needs to be one part of a responsive, resourced support system for women experiencing DV – should include mental health and other support services to complement SS. • Strength of SS – links between FACS-Housing NSW and support services addressing a range of needs, though not all clients receiving support.

	<ul style="list-style-type: none"> • Private Rental Specialists (PRS) need to receive further support and training to connect with the local services network, which needs to be sufficiently resourced. <p>Implementation:</p> <ul style="list-style-type: none"> • Delivered by PRS from FACS-Housing NSW, but implemented in different ways across offices and Districts – sometimes due to local responsiveness, other times due to poor communication/lack of training. • Generally, process of identifying clients and providing support works well. • Program would be further improved by ensuring that all staff who may undertake initial screening of clients participate in available training – also, ongoing opportunities for training and debriefing should be offered. • Recommends the approach to resourcing the program and distributing the resources should be reviewed to achieve an appropriate distribution of resources to support program delivery. <p>Policy Settings:</p> <ul style="list-style-type: none"> • Affordability guidelines reported as a point of confusion. • Communication and implementation could be improved – current means of communicating updates and guidelines to Housing Pathways staff may need to be supplemented by additional training and support. • Quarterly review process flagged as important but with room for improvement, particularly regarding the time taken for reviews and the differing emphases of reviews between offices. <p>Integration:</p> <ul style="list-style-type: none"> • Impact of SS on service integration described positively; improved relationships between FACS-Housing NSW and NGOs; better outcomes for clients in accessing needed support. <p>Costs:</p> <ul style="list-style-type: none"> • Opportunity to improve management reporting and enquiry capability through further enhancement of the HOIMES client systems – enabling ongoing monitoring and evaluation of client outcomes for subsidy period. • SS is a significantly lower cost program to other DV housing assistance programs, though cost increases over time in line with longer subsidy durations – thus, SS delivers social benefits at a lower cost. • Opportunity to improve cost effectiveness of SS through tapering of the level of subsidy during second year (or appropriate time).
<p>Conclusions and recommendations based on the findings (incl. how to improve "safe at home" programs in the future)</p>	<p>The evaluation identifies a number of actions and recommendations for consideration:</p> <ul style="list-style-type: none"> • Clarification of program guidelines. • Improved resource planning and allocation through consideration of the appropriate distribution of resources to support program delivery. • Improved training and support for staff involved in delivering the program. • Ensuring Start Safely is linked to a strong support network. • Examination of alternative approaches to ensuring that clients such as Aboriginal people access appropriate assistance. • Reviewing any amendments to processes arising from the extension of the service to men. • Improved management reporting and evidence based enquiry capability through improved data collection and enhancement to the HOMES client system. • Improved monitoring and ongoing evaluation of the Program (Evaluation report, p. 6).
<p>How the findings are useful for wider program development/practice</p>	<p>Interagency networks and the benefits of integrated service provision emerges strongly in the evaluation, along with:</p> <ul style="list-style-type: none"> • appropriate resourcing; • clear program guidelines; and • monitoring and ongoing evaluation (p. 6).
<p>Evaluation Quality</p>	
<p>Conducted by a person(s) independent of the service</p>	<p>Yes - The Social Policy Research Centre (SPRC) at UNSW and Epoque Consulting were commissioned by FACS-Housing NSW as external researchers for this project.</p>
<p>External ethics review</p>	<p>Yes - ethics was sought from, and granted by, the UNSW HREC. Further detail on ethical considerations was not detailed in the report.</p>

Accessible in a form other than grey literature	No - the report was only accessible in the grey literature.
Peer reviewed	It was unclear in the report as to whether the evaluation was peer-reviewed. Peer review may have occurred within the respective government department/s.
Appropriateness of aims / questions for the evaluation	There was no explicit statement of evaluation aims: however, it was made explicit that the evaluation directly addressed the requisite 16 research questions detailed in the FACS NSW-Housing evaluation specification.
Clearly outlined methodology/study design	Yes - the methodology was clear and rigorous, matched to prescribed research questions. See detailed outline of methodology above.
Appropriate / rigorous methodology for the evaluation aims and timeframe	This evaluation used a mixed-methods approach, with qualitative data collection from all three cohorts (FACS NSW-Housing staff; service providers; clients). The sampling strategy was appropriate, and was described explicitly. Recruitment was undertaken using a referral/snowballing approach. This strategy enabled data that represented different stakeholders and cohorts in assessing program effectiveness. The data review was thorough and additional data sources were sought and included to support the review. This enabled the most complete picture of the program's processes, outcomes and effectiveness. However, as the researchers note, the client sample was small (9 interviewees), and it was not possible to contact clients who were eligible for the subsidy but did not receive it (p. 19).
Primary data collected and data is appropriate for meeting research aims	Yes, primary data was collected from agency representatives and victims, as well as activity/administrative data. The data collected was appropriate for meeting the aims of the research.
Process measures used	Yes - specific attention is given to implementation, prescribed as one of the key areas in the FACS-Housing NSW specification, with corresponding evaluation questions that are addressed. Process is also assessed through the review of administrative data.
Outcome measures used which match the research questions	Yes - Specific attention is given to outcomes, prescribed as one of the key areas in the FACS-Housing NSW specification, with corresponding evaluation questions that are addressed. Outcomes are also assessed in the key areas of policy review and value and cost effectiveness, as well as through the review of administrative data. Again, the prescription of FACS-Housing NSW in its specification detailing 16 specific questions in four key areas ensures an appropriate match between outcome measures and research questions.
Any important areas not covered by the evaluation	Not specified.
Overall assessment of evaluation quality	This evaluation reviewed a new program, which limits its generalisability to other SAH programs. This evaluation used a mixed-methods approach, with qualitative data collection from all three cohorts (FACS NSW-Housing staff; service providers; clients) supports the following SS contribution to housing and non-housing outcomes by: <ul style="list-style-type: none"> • providing timely access to safe housing; • reducing barrier to private rentals; • providing access to support services, including financial counselling; and • providing support for education, training, and independent living skills (p. 26). While the researchers note methodological complexities in estimating cost-effectiveness of homelessness support services (p. 61), their comprehensive data review found that SS represents a substantial saving to the government (\$40,000 per client) compared with social housing over the 24 month period of the subsidy, and a comparable saved as compared with accommodating clients in refuges (p. 71). Importantly, what is demonstrated in the findings is that "effectiveness of client outcomes are also seen in terms of increasing individualised support models coordinated across multiple interagency government and NGO service providers" (p. 61).

Queensland

Program/strategy background	
Jurisdiction	QLD
Program/strategy	Safety Upgrades
Evaluation	Queensland. Department of Communities. (2012). <i>Initiative review: Domestic and family violence safety upgrades</i> . Queensland Government: Australia.
Description of program/strategy	Department of Communities, Child Safety and Disability Services funds seven local DV services to provide safety upgrades. Women are assisted with developing and implementing personalised safety plans, and there are brokerage funds included. There is no expectation or requirement that women will have any form of civil law protection or exclusion orders in place although a rigorous risk assessment process is conducted prior to arranging safety upgrades to ensure this is a safe option.
Definition of “safe at home” within program/strategy	“Safety Upgrades” can be defined as a “safe at home” strategy, as it is not part of a wrap-around program. “Safety Upgrades” provides existing domestic violence services with the opportunity to offer women where assessed as suitable to have safety upgrades, and brokerage funds for perpetrator emergency housing or related safety concerns for the woman in her accommodation.
Lead agency/department	Department of Communities, Child Safety and Disability Services. Located within a preventing homelessness context.
Collaborating agencies	Local DV Services funded by DCCS&DS for safety upgrades - all have integrated local responses
Inclusion rationale	This is the only funded program in this jurisdiction that specifically has a focus on supporting women to remain in their accommodation and for the perpetrator to leave the home. The report self-identifies as a review of the “Safety Upgrades” initiative and meets the inclusion criteria for this meta-evaluation.
Evaluation summary	
Key information: funder; length of evaluation; evaluation governance; purpose of evaluation	The length of the evaluation was not stated, but the report was published in 2012. The evaluation was funded by the Queensland Department of Communities as an internal review. Review objectives: reporting on and reviewing progress of the trial initiative; identifying strengths and weaknesses of trial model; id strengths and weaknesses of differing implementation of model at trial sites; id potential areas for program development and opps for service improvements; and providing information to support decision making regarding extension and/or expansion of trial.
Methodology	A program logic framework was utilised. Methods were: literature review, departmental records analysis, monthly tele links with program staff, quarterly status report, client case studies prepared by sites, and interviews with stakeholders and workers.
Key program elements	Essentially the strategy provides funding for some nested strategies within existing integrated domestic violence responses. Components funded included: funds for safety upgrades and some repairs and brokerage funds directly related to the woman remaining and/or partner leaving. Assumed trial sites had risk assessment and safety planning in place to wrap around etc.
Program/strategy practice approaches	Nested strategy within existing domestic violence responses. Safety upgrades and brokerage funds were utilised.
Specific conditions under which “safe at home” was not going to be viable/safe	While the report did not refer specifically to conditions under which “safe at home” was not viable or safe, the eligibility criteria for “Safety Upgrades” was detailed. “Safety Upgrades” initially required the victim to have a DVO with ouster conditions, however this was not practical so it lapsed. Second was “undue hardship” where exclusion from their home would cause such hardship. Secondary client: if hardship criteria was met, the perpetrator could have couple of nights of accommodation paid through brokerage.
Diverse population groups and geographical locations	Not counted re diversity aspects. The evaluation noted that staff reported they were accessible to CALD and Aboriginal and Torres Strait Islander clients. One site (Gold Coast) employed a part time CALD worker to specifically target women from this group.
Relevant policy and legislative context	<ul style="list-style-type: none"> • <i>For our sons and daughters: Strategy to reduce domestic and family violence 2009–2014.</i> • 2015 Taskforce Report: <i>Not Now, Not Ever: Putting an End to Domestic and Family Violence in Queensland.</i> • <i>Domestic Violence and Family Protection Act 2012 (QLD)</i>

Key findings	Criterion for clients to have VRO and ouster conditions could not be met so had to be dropped - at magistrates' discretion on this. Across sites there was variation in how implemented, particularly brokerage funds which were used to support women more broadly in some sites and narrowly in other sites pertaining to being safer at home. Stakeholders inc. the workers mentioned that women were able to retain social and other supports and children remain in schools and women in employment. This was not quantified. Having embedded strategies within an overall DV response was viewed positively. Safety upgrade costs varied across sites as some sites where large amount of public housing costs could be picked by DoH and SU funding unlike in private rental or own properties. There were 110 upgrades of properties across 3 sites in just over 12 months.
Conclusions and recommendations based on the findings (incl. how to improve "safe at home" programs in the future)	Appropriate to have as nested/embedded strategy. Narrowing and clarity about how brokerage funds can be used as variation in what it was used for and amounts across sites. Importance of having DVO with ouster order - greater use of legislation being applied.
How the findings are useful for wider program development/practice	Highlights some of the issues with "Safety Upgrades" in relation to private rental where upgrades may be completed and then lease is terminated. Contributes to the debates within "safe at home" approaches about whether they should be stand alone programs or embedded strategies.
Evaluation quality	
Conducted by a person(s) independent of the service	No - the evaluation was conducted internal to the Department of Communities.
External ethics review	No - there was no external ethics review.
Accessible in a form other than grey literature	No - the report is not accessible in a form other than the grey literature.
Peer reviewed	No - the evaluation was not peer reviewed.
Appropriateness of the stated aims or questions	Aims were ambitious for the methodology used. For example little quantitative data that was not just descriptive.
Clearly outlined methodology/study design	The methodology was not explored in detail and methods for data analysis were unclear.
Appropriate / rigorous methodology for the evaluation aims and timeframe	<p>The methodology utilised was appropriate some degree: however there was no direct data from clients, which limits the evaluations' rigour and knowledge of the program's impact and benefits. Data was largely descriptive so conclusions cannot be drawn strongly. There was an absence of detailed quantitative data.</p> <p>The methodology was not particularly rigorous. However, it is difficult to evaluate the strategy's impact or process as it was embedded within existing DV responses; for example risk assessment and safety planning varied as this was implemented differently at different sites. The most useful data was that reported by workers and stakeholders. Quantitative data pertained to number of upgrades completed and costs at each site.</p>
Primary data collected and appropriate for meeting research aims	<p><u>Primary data was collected:</u></p> <ul style="list-style-type: none"> • qualitative data via teleconference from workers; • worker-prepared case studies; and, • admin data showed number of upgrades and costs per site. <p>Data sources were limited and more information was needed quantitatively and about outcomes or impact.</p>
Process measures used	No - process measures were not used in this evaluation.
Outcome measures used which match the research questions	No outcome measures were utilised in this evaluation - only the number of upgrades counted as noted above.
Any important areas not covered by the evaluation	Outcomes - number of clients remaining in their home and over what period of time, reasons for not remaining detailed. Some of this is noted from qualitative data.
Overall assessment of evaluation quality	Review quality is quite poor as it relies heavily on qualitative reporting back, does not include client perspectives and does not have useful quantitative data included.

South Australia

Program/strategy background	
Jurisdiction	SA
Program/strategy	Family Safety Framework (FSF)
Evaluation	Marshall, J., Ziersch, E., & Hudson, N. (2008) <i>Family Safety Framework. Final evaluation</i> . Government of South Australia. Department of Justice: South Australia.
Description of program/strategy	The South Australian Family Safety Framework (FSF) is an integrated and coordinated response to DFV, under the Women's Safety Strategy and Keeping them Safe - Child Protection Agenda, which aims to enhance the safety of victims, reduce victimisation and hold offenders accountable for their violence. FSF is an agreement across government departments and agencies that provides a consistent understanding and approach to DFV in South Australia. It focuses on the safety of women and children and the accountability of offenders (p. i). A key element of the FSF is the multiagency Family Safety Meeting (FSM) that assesses cases of DFV as high risk using a common risk assessment tool. The "purpose of the meeting is to share information under the auspice of a specially developed Information Sharing Protocol and to implement a Positive Action Plan for each referral" (p.i). FSF was trialled in two metropolitan and one non-metropolitan areas: the "Holden Hill Local Service area in August 2007; the South Coast Local Service area (predominantly Noarlunga) in September 2007; and in the Far North Local Service Area (Port Augusta) in January 2008" (p. i).
Definition of "safe at home" within program/strategy	The evaluation did not specify a "safe at home" definition but was concerned with how FSF made a difference to the safety of women and children in high risk DV situations. One victim did report having the confidence to stay at home because of FSF responses: "I'm standing my ground this time and not running" (p.26).
Lead agency/department	Office of Crime Statistics and Research, South Australian Attorney General's Department and Office for Women.
Collaborating agencies	<ul style="list-style-type: none"> • Office for Women (SA). • South Australian Police (SAPOL). • Department for Families and Communities (DFC) – now the Department for Communities and Social Inclusion (DCSI). • Attorney-General's Department . • Department of Health. • Department of Correctional Services (DCS). • Department of Education and Children's Services (DECS). • Non-government women's domestic violence services (p.i).
Inclusion rationale	This is an evaluation of the trial of the South Australian Family Safety Framework which explicitly aims to enhance the safety of victims, reduce victimisation and hold offenders accountable for their violence. Coupled with the introduction of other legislative and policy changes in South Australia such as the Intervention Orders (Prevention of Abuse) Act 2009, FSF intended to assist women who have experienced DV to remain safer in their own homes.
Evaluation summary	
Key information: funder; length of evaluation; evaluation governance; and evaluation purpose	<p>Funded and governance by SA Government; length was for one year (August 2007-September 2008). The <u>stated aims of the evaluation</u> were:</p> <ul style="list-style-type: none"> • Determine the extent to which the FSF was implemented and operated as intended. • Identify the strengths and weaknesses of the model in relation to providing better responses to women, children and young people. • Assess the extent to which the FSF is achieving its goal and intended outcomes; including whether the FSF makes a difference to the safety of women and children in high risk domestic violence situations. • Identify any issues that need to be addressed if an eventual state-wide rollout of the FSF is to be considered" (p. ii).

Methodology	The evaluation examined the outcomes of 45 Family Safety Meetings (FSM) involving 67 referrals and gathered the perspectives of 50 interviews of stakeholders in metropolitan sites and Port Augusta and five victims involved in FSMs. The five victims interviewed reported that under the FSF there were no further incidents of DV and the support and responses to DV were improved because of restraining orders, being able to access safe shelter accommodation, being provided with a duress alarm and knowing their case is highlighted and will be responded to immediately (p.iv). The 50 “stakeholders were generally satisfied with the implementation and operation of the Family Safety Framework, with 47 of 50 respondents supporting the continuation and roll out of the Initiative” (p.iv).
Key program elements	<ul style="list-style-type: none"> • The Family Safety Agreement (FSA), which outlines the processes, procedures and policies that enable state-wide agencies coordinating their approach, such as each department Chief Executive identifying an individual within their department to undertake the responsibility for implementation the agreement, such as attending FSMs. • The Family Safety Meeting (FSM), to share information and implement a positive action plan. • The “use of a common risk assessment tool by agencies (to assess high risk of serious injury or death); a protocol for information sharing; [and] ongoing monitoring and evaluation” (p. 3).
Program/strategy practice approaches	The evaluation found that the major strengths of the FSM program related to: developing a common understanding of information sharing processes; an integrated response to domestic violence involving all agencies “at the table”; having a consistent risk assessment tool: and ensuring the accountability of agencies to respond. As an outcome of the FSF, a wide range of agencies meet to discuss women’s safety which builds service networks to benefit clients and thus, responses to DV are more coordinated with improved understanding of different agency responsibilities and raising awareness of DV (p.v). A significant barrier was the resourcing of the initiative, such as additional administrative support to organise and document FSMs for SAPOL as the coordinating agency and “for some agencies, the lack of funding for high level representatives to attend meetings” (p.v).
Specific conditions under which "safe at home" was not going to be viable/safe	The specific conditions under which safe at home was not viable was in extremely high risk situations.
Diverse population groups and geographical locations	A total of seven referrals (out of 67) involved an Aboriginal person were made to the FSMs between August 2007 and September 2008 (including two where the perpetrator only was Aboriginal). Two women and two perpetrators (four separate referrals) were Aboriginal at Holden Hill and two at Noarlunga and one at Port Augusta. Additionally, “four referrals were from a CALD background (Jordon and Romania at Holden Hill and Thailand and Africa at Noarlunga). It was reported by DV services involved with the Holden Hill referrals that these women were particularly apprehensive regarding cooperation with SAPOL” (p.11). These numbers are not large enough to comment on. However, “Aboriginal Cultural Consultants were made available to each of the three trial sites, to provide advice on the best way to implement agreed actions in a sensitive manner for Aboriginal referrals” (p.6).
Relevant policy and legislative context	As noted in the State of knowledge paper, women’s safety in SA is led by the Office for Women’s <i>Integrated Family Safety Framework (FSF)</i> , which is under the <i>Women’s Safety Strategy</i> (Office for Women, 2011) and <i>Keeping them Safe—Child Protection Agenda</i> (Government of South Australia, 2004).
Key findings	“The FSF ... was found to have achieved improved responses to victims and their children and enhanced victim safety and reduced re-victimisation” (ALRC, 2010 , p. 1356). Family Safety Meetings (FSM) involving a range of agencies for cases of domestic and family violence that are assessed as imminent high risk and a common risk assessment tool have been well received. “Between August 2007 and September 2008, a total of 45 Family Safety Meetings involving 67 referrals were held at the trial sites of Holden Hill, Noarlunga and Port Augusta” (p. ii). There were differences in the referral patterns to the FSMs at each site. One-third of all referrals (34%) to FSMs were from DV services and SAPOL was responsible for just under one-third (28%). All referrals in Port Augusta were made by SAPOL. “Health services accounted for 16% of referrals overall, but all of these were at the Noarlunga site. At Holden Hill, most referrals were received from the Central Domestic Violence Service (12), followed by SAPOL (8) and Correctional Services (6). In contrast, Health and Southern Domestic Violence Services each accounted for one-third of all Noarlunga referrals (11 each), followed by SAPOL (6) and Families SA (3). Conversely, there were no Health referrals at Holden Hill, and only one referral from Correctional Services at Noarlunga” (p.iii). In regards to risk reduction, women were assessed as lower risk as a result of the actions of the FSM and the majority “who remained in South Australia had no SAPOL record of re victimisation at least three months after the incident” (p. vii).

<p>Conclusions and recommendations based on the findings (incl. how to improve "safe at home" programs in the future)</p>	<p>The intended outcomes of FSF were: "To provide coordinated, appropriate and consistent responses aimed at enhancing victim safety, reducing re-victimisation and increasing perpetrator accountability" (p. 48). The evaluation found that actions plans were developed in family safety meetings and participation included a wide range of government and non-government agencies; that the FSF enhanced victim safety and reduced re-victimisation by "the coordination of alternative accommodation, the development of safety plans, the provision of security devices, and the provision of information regarding perpetrator movements" (p.48-49). However, FSF actions did not improve legislation and services responses to men who use violence. The recommendation of this evaluation was that the Family Safety Framework be continued and expanded across South Australia. Since this evaluation, Intervention Orders (Prevention of Abuse) Act 2009 was implemented in South Australia. The Marshall et al. (2008) evaluation found that the major strengths of the FSM program related to developing a common understanding of information sharing processes, an integrated response to domestic violence involving all agencies "at the table"; having a consistent risk assessment tool and ensuring the accountability of agencies to respond. As an outcome of the FSF a wide range of agencies meet to discuss women's safety which builds service networks to benefit clients and thus, responses to DV are more coordinated with improved understanding of different agency responsibilities and raising awareness of DV (Marshall et al., 2008, p.v). A significant barrier was the resourcing of the initiative, such as additional administrative support to organise and document FSMs for SAPOL as the coordinating agency and for some agencies, the lack of funding for high level representatives to attend meetings (Marshall et al., 2008, p.v). The recommendation of this evaluation was that the Family Safety Framework be continued and expanded across South Australia. The conclusions were supported by data analysis.</p>
<p>How the findings are useful for wider program development/practice</p>	<p>This evaluation has been referred to ANROWS Research Priority 4.2 "<i>Meta-evaluation of existing interagency partnerships, collaboration, coordination and/or integrated interventions and service responses to violence against women</i>", as this is examining national integrated responses to Violence Against Women (VAW). The Marshall et al. (2008) FSF evaluation focused primarily on the safety of women (and children) through integrated responses to domestic and family violence (Marshall et al., 2008).</p>
<p>Evaluation quality</p>	
<p>Conducted by a person(s) independent of the service</p>	<p>No - the pilot initiative of the FSF was managed by the Office for Women and evaluated led by Office of Crime Statistics and Research, South Australian Attorney General's Department. The collaborating agencies were Office for Women (SA), South Australian Police (SAPOL), Department for Families and Communities (DFC) –now the Department for Communities and Social Inclusion (DCSI), Attorney-General's Department, Department of Health, Department of Correctional Services (DCS), Department of Education and Children's Services (DECS) and Non-government women's domestic violence services (Marshall et al. 2008, p.i). However the evaluation is still by the SA government, which makes it not independent of the government services.</p>
<p>External ethics review</p>	<p>Yes - "ethics approval for the project was obtained from the Department for Families and Communities Human Research Ethics Committee and the Aboriginal Health Research Ethics Committee" (p. 8).</p>
<p>Accessible in a form other than grey literature</p>	<p>No - the report was not accessible in any form apart from the grey literature.</p>
<p>Peer reviewed</p>	<p>Unsure - possibly within the respective government department/s, but this was not detailed in the report.</p>
<p>Appropriateness of the stated aims / research questions</p>	<p>Yes - the evaluation found that actions plans were developed in family safety meetings and participation included a wide range of government and non-government agencies; that the FSF enhanced victim safety and reduced re-victimisation, through "the coordination of alternative accommodation, the development of safety plans, the provision of security devices, and the provision of information regarding perpetrator movements" (p.48-49). However, FSM actions did not improve responses to men who use violence and "...were generally not aimed at increasing perpetrator accountability. This was due in part to difficulties in locating perpetrators, but was also linked to constraints within existing systems such as a lack of a legislative base to enforce accountability and attendance at programs, coupled with a lack of programs to deal with men who use violence (p. 48). Therefore, the aim to enhance the safety of victims and reduce victimisation for the purposes of this meta-evaluation was addressed –but it was found that the aim to hold offenders accountable for their violence (Marshall et al., 2008) was not. Since this evaluation, Intervention Orders (Prevention of Abuse) Act 2009 was also implemented in South Australia and evaluated. The aims of the evaluation were appropriate and realistic.</p>

Clearly outlined methodology/study design	Yes - an analysis of 45 Family Safety Meetings (FSM) involving 67 referrals; 50 interviews of stakeholders in metropolitan sites and Port Augusta and five victims involved in FSMs was presented. A small number of victims and no perpetrators interviewed. The strengths, positive outcomes and future challenges of FSF were clearly outlined.
Appropriate / rigorous methodology for the evaluation aims and timeframe	Yes - the analysis and limitations were well explained and the methodology was appropriate for the aims and timeframe.
Primary data collected and appropriate for meeting research aims	Yes - primary data was collected from agency representatives and victims, as well as activity/administrative data. The data collected was appropriate for meeting the aims of the research.
Process measures used	Yes - Family Safety Meeting demographics, actions and referral statistics, feedback from victims and service representatives.
Outcome measures used which match the research questions	Yes - Risk and safety outcomes, such as assessment of cases, re-referral and re-victimisation.
Any important areas not covered by the evaluation	All areas pertinent to this particular evaluation were touched on in the report.
Overall assessment of evaluation quality	<p>This evaluation clearly articulated the findings in relation to the intended aims or elements of the FSF. The intended outcomes of FSF were: "To provide coordinated, appropriate and consistent responses aimed at enhancing victim safety, reducing re-victimisation and increasing perpetrator accountability" (p. 48).</p> <p>The evaluation found that actions plans were developed in family safety meetings and participation included a wide range of government and non-government agencies; and the FSF enhanced victim safety and reduced re-victimisation, through "the coordination of alternative accommodation, the development of safety plans, the provision of security devices, and the provision of information regarding perpetrator movements" (p.48-49). However, FSM actions did not improve responses to men who use violence and "were generally not aimed at increasing perpetrator accountability. This was due in part to difficulties in locating perpetrators, but was also linked to constraints within existing systems such as a lack of a legislative base to enforce accountability and attendance at programs, coupled with a lack of programs to deal with men who use violence" (p. 48). The recommendation of this evaluation was that the Family Safety Framework be continued and expanded across South Australia. Since this evaluation, <i>Intervention Orders (Prevention of Abuse) Act 2009</i> was also implemented in South Australia and evaluated.</p>

Program/strategy background	
Jurisdiction	SA
Program/strategy	Port Lincoln Rapid Response Program
Evaluation	Cibich, G. (2002). <i>Port Lincoln rapid response program, 1991-2001</i> . Port Lincoln Crime Prevention Committee, South Australia.
Description of program/strategy	“Personal alarms (similar to medic alerts) free of charge for up to 12 weeks, to aid in the safety of women choosing to remain living in their own homes, or to set up independent housing (Yarredi Services Inc., n.d.)”. The Crime Prevention Coordinator worked collaboratively with the Eyre Peninsula Women’s and Children’s Support Service (now Yarredi Services) to manage the program during the 3 year trial period. Yarredi Services was founded in 1979 as safe accommodation for women and children escaping domestic violence. They offer services for women and children affected by, or at risk from, domestic and family violence, and to adult victims of crime.
Definition of "safe at home" within program/strategy	While the evaluation did not specifically attempt to define “safe at home” responses, the report noted that the Rapid Response program was based on the UK Merseyside Demonstration Project, which “aimed at breaking the recidivist cycle of domestic violence by installing monitored alarm systems into the homes of women who had left violent relationships” (p. 1).
Lead agency/department	Port Lincoln Crime Prevention Committee and Eyre Peninsula Women’s and Children’s Support Service (now Yarredi Services).
Collaborating agencies	The monitored alarm systems for women who left DV were initiated by the Port Lincoln Crime Prevention Committee as part of their work plan (1989-1999) with the Port Lincoln Domestic Violence Action Group (DVAG) and Eyre Peninsula Women’s and Children’s Support Service (now Yarredi Services).
Inclusion rationale	The Cibich (2002) report was a description of the program statistics and an evaluation using data from the perspective of women who used the program and service providers. It was completed by the Port Lincoln Crime Prevention Officer in collaboration with the Eyre Peninsula Women’s and Children’s Support Service (now Yarredi Services) and the Port Lincoln Domestic Violence Action Group. It was a designed grassroots “safe at home” initiative to assist women to remain safety in their local homes and communities. This program received a National Violence Prevention Award in 2000. This Rapid Response Program in Pt Lincoln is no longer funded and the last alarm was installed in 2012. In South Australia, the state-wide "Staying Home Staying Safe" is run by Victim Support Services (VSS) and does outreach to rural communities. It started in March 2011 but has not been evaluated.
Evaluation summary	
Key information: funder; length of evaluation; evaluation governance; and stated purpose of evaluation	The evaluator’s title was "Port Lincoln Crime Prevention Officer" and Rapid Response was an initiative of Port Lincoln Crime Prevention Committee, who were part funders of the program. Statistics from relevant agencies were collected over three years. There was an overarching DVAG RR Working Party. The aim of the DVAG RR program working party was to prevent re-victimisation of women by responding quickly to incidences of domestic violence using all locally appropriate means. The report focused on the aims of the Rapid Response project, which were to reduce likelihood of repeated DV victimisation in the first 12 weeks after initial DV report to police or DV worker and to increase feelings of safety for women and children who have left violent situations.
Methodology	Qualitative, written and verbal feedback from clients, police, agency workers; client (n=8/40 responded) and agency (n= 14/16 responded) questionnaires; number of clients over 3 year period (N=40 from September 1998 to December 2001); number of alarms activated; police response time; average length of time women stayed in emergency shelter, number of police call outs after alarm system installed, length of time women needed intensive support from agencies, average length of time women need RR alarms, number of re-victimisation incidents, cost of program compared to emergency accommodation.
Key program elements	The key program elements were the monitored alarm system in the context of case management.
Program/strategy practice approaches	The implementation process of RR was: self-referral or agency referral to trained RR worker, who quickly (within 24 hours) determines eligibility, installs bracelet panic alarm system (which worked only in and around their home) for initial period 12 weeks (can be extended), ongoing support by DV workers, individual safety plans, interagency collaboration (such as with police who were advised of women who needed rapid response), case management, regular client reviews and at end of 12 week period, to ascertain need for extension.

Specific conditions under which "safe at home" was not going to be viable/safe	This was a "grassroots" initiative, to reduce DV recidivism and crime in the local area. The monitored alarm systems for women who left DV were initiated by the Port Lincoln Crime Prevention Committee as part of their work plan (1989-1999) with the Port Lincoln Domestic Violence Action Group (DVAG) and Eyre Peninsula Women's and Children's Support Service (now Yarredi Services).
Diverse population groups and geographical locations	The report makes the point that special localised interventions are needed for rural women. Port Lincoln is an isolated rural city on the Eyre Peninsula, South Australia, with a population currently around 14,000 people. Women escaping violence have to leave the district to maintain their anonymity, so other safety measures were needed. The questionnaires did not ask for the cultural background of respondents.
Relevant policy and legislative context	Prevention of crime (and victims of crime) policies, anti-crime legislation and a rapid police response were central to the success and funding of the program.
Key findings	According to the analysis of the case files audit, a total of 25/40 women in the program were able to stay in their own homes and did not need emergency shelter accommodation. The bracelet panic alarm system worked only in and around women's home, there was a need for mobile phones, GPS or satellite within a wider geographical range. There would be newer and better alarm systems now.
Conclusions and recommendations based on the findings (incl. how to improve "safe at home" programs in the future)	The report concluded that overall the program "successfully enabled women to either remain in their own homes, and/or be re-located into independent housing, after leaving violent relationships because they felt safer knowing that help was only a few minutes away. It also meant that the length of stay in the emergency shelter accommodation was significantly reduced because women felt more confident about returning into independent housing and the community. This in turn meant there were more bed nights available to meet the increasing demand for emergency accommodation by women and their children escaping family violence situations" (p. 9).
How the findings are useful for wider program development/practice	The evaluation found that all eight women who responded to the RRP evaluation said it enabled women to feel safer and more confident living independently in the community, decreased the need or length of stay in an emergency shelter and at a lower cost. The conclusions were supported by the data, but no recommendations were stated.
How the findings are useful for wider program development/practice	The report contributed directly to how to improve safe at home outcomes and programs. Historically, it had significance as it was one of the first "safe at home" programs developed due to the isolation of women in a rural location.
Evaluation quality	
Conducted by a person(s) independent of the service	No - the Port Lincoln Crime Prevention Officer, South Australia conducted the evaluation. The monitored alarm systems for women who left DV had been initiated by the Port Lincoln Crime Prevention Committee as part of their work plan (1989-1999) with the Port Lincoln Domestic Violence Action Group (DVAG) and Eyre Peninsula Women's and Children's Support Service (now Yarredi Services). Therefore, the evaluation was not entirely independent.
External ethics review	The report does not specify whether or not the evaluation underwent an ethics review.
Accessible in a form other than grey literature	No - the report was not accessible in a form other than the grey literature.
Peer reviewed	No - the evaluation was not peer reviewed.
Appropriateness of the aims / questions for the evaluation	Yes - evaluation aims reflected the aims of the Rapid Response Program: to reduce repeated DV victimisation in the first 12 weeks after initial DV and to increase feelings of safety for women. Therefore, the aims did reflect the program being evaluated.
Clearly outlined methodology/study design	Yes - the methodology and study design were clearly outlined in the report.
Appropriate / rigorous methodology for the evaluation aims and timeframe	Yes - the methodology was both rigorous and appropriate for the evaluation aims and timeframe.

Primary data collected and appropriate for meeting research aims	Yes - the evaluation collected administrative data over the 3 year trial from services (such as police, DV service, other agencies), and distributed a client and agency questionnaire. However, there was only a small sample from the questionnaires (8/40 ex-client responses-20% response rate and 14/16 agency responses-87% response rate). The analysis was mainly descriptive but limitation of low response rate was explained.
Process measures used	Yes - review of client program data.
Outcome measures used which match the research questions	Yes: <ul style="list-style-type: none"> • costs of program • length of time women needed alarms ranged from 8-36 months • 25/40 women were able to stay in their own home and did not need emergency shelter
Any important areas not covered by the evaluation	Further information regarding usefulness for diverse population groups and longitudinal data on client outcomes would have been useful.
Overall assessment of evaluation quality	This is a small qualitative study with only a 20% return rate of survey responses by the 40 women involved in the program. The aims of the study were not clearly stated but implied as being to examine the effectiveness of the program. However, this is a clinically important "grassroots" initiative which did help women to feel safer in their own homes but with some technological limitations, such as the reach of alarm systems beyond the home. This is addressed in more recent initiatives in different states, with more updated alarm related technology.

Tasmania

Program/strategy background	
Jurisdiction	Tasmania
Program/strategy	Family Violence Act 2004 (Tas)
Evaluation	Urbis (2008). <i>Review of the Family Violence Act 2004 (Tas)</i> . Department of Justice, Tasmania: Hobart.
Description of program/strategy	<p>The “safe at home” strategy evaluated here is the <i>Family Violence Act 2004 (Tas)</i> (“the Act”), which has as its stated object: “In the administration of this Act, the safety, psychological wellbeing and interests of people affected by family violence are the paramount considerations” (s.3) (p. 1). The Act specifies the “objectives of the ‘safe at home’ framework as follows:</p> <ul style="list-style-type: none"> • Reduce the level of family violence in the medium to long-term • Improve safety for adult and child victims • Change the offending behaviour of those responsible for the violence” (p. 1).
Definition of ‘safe at home’ within program/strategy	<p>The report notes the Safe at Home principles upon which the Act is based, which include the points that “family violence is a crime and arrest and prosecution will occur wherever sufficient evidence of an offence exists” (p. 7), as well as that “wherever possible, victims should be able to choose to remain in or return (as soon as possible) to their homes” (p. 7). The report describes the “safe at home” strategy as one that seeks “to firmly establish that family violence is criminal in exactly the same way as violence in any other context” (p. 1). The cornerstones of Tasmania’s Safe at Home framework are “managing the risk that an offender might repeat or escalate their violence, and identifying and implementing strategies to enhance the safety of victims” (p. 7). The Act “reinforces the criminal nature of family violence and mandates the management of both risk and safety through an integrated response” (p. 7).</p>
Lead agency/department	Tasmanian Department of Justice.
Collaborating agencies	Justice, Police, Health and Human Services.
Inclusion rationale	<p>This report self-identifies as a formal evaluation of the <i>Family Violence Act 2004 (Tas)</i>, which was implemented as a key part of the State’s overall ‘safe at home’ strategy. The evaluation was funded by the Tasmanian Department of Justice and was conducted by Urbis consultants. The Act has a targeted focus on domestic and family violence, and its provisions aim to support the safety of women to remain in independent accommodation. The Act also represents a criminal justice response to domestic violence, with a stated object to change the offending behaviour of those responsible for the violence.</p>
Evaluation summary	
Key information: funder; length of evaluation; evaluation governance; purpose of evaluation	<p>The evaluation was funded by the Tasmanian Department of Justice and took place two-and-a-half years after the Act had been passed into law. The Act had been in formal operation for two-and-a-half years prior to the review, which the authors noted was an adequate time for study participants to offer informed perspectives on its operation. The report notes that a “number of weeks” was given to Urbis consultants to complete the evaluation. This report evaluates the effectiveness of the legislative mechanisms and does not focus on broader “safe at home” efforts in operation within Tasmania.</p> <p>The terms of reference for the evaluation were set within the Act itself, and described “an investigation of the effectiveness of its mechanisms” within three years of its commencement (s. 43 of the Act). The evaluation “provided the opportunity to consider the extent to which aspirations and concerns engendered in the Act have come to fruition” (p. 1). The report noted that the scope of the evaluation was limited to the legislation and did not focus on the number of other systems, efforts and responses surrounding the Act and representing the broader Safe at Home framework. The report noted that there would be a subsequent review regarding the integrated response system for Safe at Home.</p>

Methodology	<p>The methodology consisted of <u>three components</u>:</p> <ul style="list-style-type: none"> • “inception, advertising the review and development of a question guide; • in-depth consultations with key stakeholders, via a field visit of up to four days, up to 20 telephone interviews, and a call for written submissions; and • analysis and preparation of the draft and final reports” (p. 9). Over 60 stakeholders were consulted including members of “Government departments, Members of Parliament, Magistrates, Members of the Tasmanian Law Society, Tasmanian Legal Aid, specialist academics, Court Registrars, Tasmania Police, various NGOs, support services and interest groups. A total of 28 written submissions were received from a broad range of stakeholders” (p. 9).
Key program elements	<p>Key elements in the Act included:</p> <ol style="list-style-type: none"> a. Violent offender participation in behaviour change programs b. Police empowered to make Orders lasting up to 12 months that exclude the violent offender from the home.
Program/strategy practice approaches	<p>See above. Also Tasmania has pro-arrest and pro-assumption of bail policies in family violence matters.</p>
Specific conditions under which ‘safe at home’ was not going to be viable/safe	<p>Not considered in this report.</p>
Diverse population groups and geographical locations	<p>Not considered in this report.</p>
Relevant policy and legislative context	<p>The <i>Family Violence Act 2004</i> (Tas), which was the subject of the evaluation. This Act was implemented in the context of a strong State-level commitment to reducing family violence in Tasmania. The report mentioned the State Plan, <i>Tasmania Together 2020</i> (2001) as a key document in the development of Tasmania’s Safe at Home approach.</p>
Key findings	<p><u>Key findings include:</u></p> <ul style="list-style-type: none"> • perceived increase in effectiveness regarding the safety of adult (predominately female) victims of family violence; • perceived lack of evidence by stakeholders to determine whether the integrated response has been effective in changing offending behaviour; • perceived limitation that property damage is not included in the definition of family violence under the Act; • police powers were overall perceived to be aligned with the s.3 Objects of the Act; • systemic issues related to supporting children’s safety have rendered the provisions in s. 13(a) ineffective: the provision does not appear to be increasing the safety of children who have witnessed or been affected by violence; • “the provisions dealing with bail are effective in promoting the immediate safety of those affected by violence, and have been identified along with the pro-arrest policy as bringing about the most significant change -- the better in family violence in Tasmania” (p.4); however, “the presumption against bail was seen by some as too high a price before allegations are investigated and tested in Court” (p. 4); • “Court ordered Family Violence Orders (FVOs) are generally viewed as being well tailored, in contrast to Police FVOs” (p. 4); • there were reported issues with the “blanket” nature of Police FVOs (PFVOs), particularly in relation to contact between a defendant and their child/ren - various examples were given where PFVOs required variation. Although this was partly due to some Police IT issues, complainants changing their mind on the level of protection required or being pressured by the defendant to change the PFVO, or the Police prohibiting contact in the first instance with the victims later wishing to continue the relationship, there were still concerns around the number of applications to vary Orders; • concerns that FVOs do not adequately consider children in applications, and • recommended removal of the provision for mandatory reporting to apply for adults and children where “family violence involving the use of a weapon, sexual or physical violence, or where a child is affected, has occurred or is likely to occur” (pp. 5-6).

<p>Conclusions and recommendations based on the findings (incl. how to improve "safe at home" programs in the future)</p>	<p>Conclusions and recommendations appeared to be based on findings - while the authors noted dissenting opinions around several points, they seemed to make recommendations based on consensus, although how they came to their conclusions was not always transparent.</p> <p>The recommendations were:</p> <ol style="list-style-type: none"> 1. "Reaffirm the stated commitment to the philosophy of Safe at Home and subsequent relevance of the provisions. 2. Police be empowered to both detain and search a person located at an incident. 3. Police be empowered to vary a PFVO to increase the protection afforded to the victim where the offender has contravened the PFVO without the consent of that person against whom the Order is made. 4. Amend s. 12(1) to enable police of suitable seniority to bail a defendant following a breach of a PFVO or FVO where there is insufficient grounds to oppose bail. 5. The extent to which children are supported by the integrated response, including the management of cross jurisdictional matters, be a central consideration of phase 2 [of the evaluation]. 6. IDC continue to track changes made to various parts of the system in response to legislation. Where changes are supportive of the philosophy of Safe at Home such strategies may have broader application. Where strategies do not contribute or detract, remedial action can be taken." (p. 20) 7. "If an expansion to the definition of family relationship is to be considered by the Department, the implications of a criminal justice response will need to be tested with stakeholders as part of the process. 8. Act to be amended to achieve consistency in the use of language within the Act removing the need to cross reference. 9. The Department consider the alignment between the intent to improve the safety of children affected by family violence, and the effect of the provisions pertaining to children, including the administrative systems supporting the provisions. 10. The adequacy of the integrated response in promoting the safety of children be included in the phase 2 review of Safe at Home." (p. 13) 11. The possibility of removing the provision s.38 which relates to mandatory reporting of adult risk of harm to Police under certain conditions.
<p>How the findings are useful for wider program development/practice</p>	<p>The findings inform other jurisdictions regarding criminal justice provisions to support "safe at home" approaches. While the findings are relevant to "safe at home" strategies, the evaluation was limited to the administration of the Act, which was specific to the Tasmanian jurisdiction.</p>
<p>Evaluation quality</p>	
<p>Conducted by a person(s) independent of the service</p>	<p>While independent consultants conducted the evaluation, the terms of reference for the evaluation were already set by the Department of Justice - hence not an entirely independent evaluation.</p>
<p>External ethics review</p>	<p>Not detailed in this report, but it doesn't appear likely.</p>
<p>Accessible in a form other than grey literature</p>	<p>No - the report was not accessible in any form apart from the grey literature.</p>
<p>Peer reviewed</p>	<p>Details regarding peer review were not included in the report, however the evaluation may have undergone a review process.</p>
<p>Appropriateness of the stated aims or questions</p>	<p>The terms of reference for the evaluation were set by the Department of Justice, who was also the funder of the evaluation. The terms of reference referred to specific points within the evaluation, however the broader aim of the evaluation was stated as "provide(ing) the opportunity to consider the extent to which aspirations and concerns engendered in the Act have come to fruition" (p. 1).</p> <p>The aims were qualitative in parameter. The terms of reference were appropriate, particularly given the qualitative nature of the study.</p>
<p>Clearly outlined methodology/study design</p>	<p>Yes - the authors give a very brief outline of their methodology and sampling strategy.</p>

Appropriate / rigorous methodology for the evaluation aims and timeframe	<p>Given the terms of reference set by the Department of Justice for the evaluation, the methodology was appropriate, but more data sources could have been included. While the report noted some official figures regarding Court and Police family violence statistics, these were not directly linked to outcome measures. The authors note that time in which the review was undertaken was limited to a number of weeks. The time of year was also reported to be problematic by some stakeholders, as they were less available to participate in the evaluation.</p> <p>The report notes the difficulty in measuring the hoped-for reduction in repeat offending, given the lack of baseline data; however initial trends were indicating positive results at the time. Much of the data relating to the Act's objective to change offending behaviour was anecdotal. A much larger longitudinal study was noted as required in order to determine if and to what extent family violence was decreasing.</p>
Primary data collected and appropriate for meeting research aims	<p>60 qualitative accounts in-person or via telephone and 28 written submissions from various stakeholders were gathered. It is not stated whether victims of violence were represented in this data.</p> <p>The report notes that "measuring the degree to which the Act has contributed to the Safe at Home objectives is a complex undertaking" (p. 6). The authors stated that before a more accurate assessment can be made, current data needs to be "aligned" and care must be taken to track progress against the objectives given (p. 6). While the data collected did make a reasonable attempt to evaluate the effectiveness of the Act, this was very difficult to measure (see above comment on "rigorous methodology"). However the qualitative nature of the research aims in this report were achieved by gathering opinions and experiences of stakeholders.</p>
Process measures used	Yes - number of spousal murders and co-occurrence with domestic and family violence.
Outcome measures used which match the research questions	Not specified - outcomes were explored qualitatively in interviews with stakeholders, as well as via written submissions.
Any important areas not covered by the evaluation	None - everything covered in the evaluation was relevant to the Act itself, and the points considered were well-explored.
Overall assessment of evaluation quality	<p>There was a lack of data regarding the three key points of exploration in the evaluation: the reduction of family violence, perpetrator accountability and the improvement of safety for victims of violence. The lack of data is somewhat understandable given that the Act had been operating for a relatively short period of time, and that each of the points for assessment are complex and difficult to measure. Despite this, the large amount of qualitative data seemed to be well-considered and analysed, with useful recommendations made.</p>

Victoria

Program/strategy background	
Jurisdiction	VIC
Program/strategy	Family Violence Safety Notices
Evaluation	Thomson Goodall Associates (2010). <i>Final report to Victoria Police: Family violence safety notices evaluation steering committee</i> . Victorian Department of Justice: Melbourne. Thomson Goodall Associates (2011). <i>Family Violence Safety Notice evaluation: Executive summary</i> . Family Violence Roundtable 2010. Victorian Department of Justice: Melbourne.
Description of program/strategy	Family Violence Safety Notices (FVSNs) were introduced as part of the Family Violence Protection Act (Vic), 2008 for a two year pilot period “to enhance the safety of Affected Family Members (AFMs) ... by providing immediate safety for victims and their children for a 72 hour period from the time of issue, acting as an application to the Magistrate’s Court of Victoria for a Family Violence Intervention Order” (Thomson Goodall Associates, 2010, p. i).
Definition of "safe at home" within program/strategy	This report defined “safe at home” in relation to the strategy itself; as enabling women and children to stay safely at home, if they wish, with the perpetrator removed.
Lead agency/department	Victoria Police.
Collaborating agencies	FVSN Evaluation Steering Committee (representatives from Victoria Police, Department of Justice, the Magistrates’ Court of Victoria, Department of Human Services and the Department of Planning and Community Development).
Inclusion rationale	The evaluation report recognises the relevance of Family Violence Safety Notices to important reforms taking place in Victoria police regarding stay at home initiatives. The report self-identifies as an evaluation of the FVSN strategy and received funding from the Victorian Department of Justice. The FVSN strategy had a specific domestic violence focus and explicitly aimed to improve safety for women and children who wished to remain in their home following domestic violence. The strategy also had a criminal justice focus, with FVSNs issued by the Victorian Police. The report therefore met the criteria for inclusion in the meta-evaluation.
Evaluation summary	
Key information: funder; length of evaluation; evaluation governance; and stated purpose of evaluation	The evaluation took place during the 2 year pilot. The report was commissioned by Victoria Police and funded by the Victorian Department of Justice. The Department of Justice Family Violence Steering Committee had oversight of the evaluation, and a FVSN Steering Group was also established. External consultants (Thomson Goodall Associates) conducted the evaluation. The aims of the evaluation were: <ul style="list-style-type: none"> i. to examine the effectiveness of the FVSN pilot; ii. establish the extent to which the objectives of the pilot are being achieved; and iii. identify further actions required to achieve the objectives of the pilot. Detailed research questions were developed but not listed in the Report. The key research areas of the evaluation framework were: <ul style="list-style-type: none"> • establishment of the FVSN pilot (including training, guidelines, changes to policies and procedures); • utilisation of FVSNs by police; • court processes in relation to FVSNs; • outcomes of the FVSN pilot; and • potential for improvement.
Methodology	The study pays particular attention to the development of an evaluation plan and evaluation methodology. This is developed in conjunction with FVSN Evaluation Steering Committee. A variety of methods were utilised including: <ul style="list-style-type: none"> • document review for the history, development and context of FVSNs; • data analysis of Police and Court records; • consultations/discussions with organisations and individuals; • interviews with Affected Family Members.

	<ul style="list-style-type: none"> • multiple surveys for different groups; • regional analysis of the data; and • interviews with Affected Family Members and a series of surveys with stakeholders.
Key program elements	<p>“Family Violence Safety Notices (FVSNs) were introduced primarily to enhance the safety of Affected Family Members (AFMs) through Police actions by:</p> <ul style="list-style-type: none"> • providing immediate safety for victims and their children for a 72 hour period from the time of issue • acting as an application to the Magistrates’ Court of Victoria for a Family Violence Intervention Order • acting as a summons for a respondent to attend Court on the first mention date.” (Thomson Goodall Associates, 2010, p. i) <p>FVSNs were introduced in 2008 as a 2 year pilot and the objectives of the pilot were:</p> <ul style="list-style-type: none"> • “to improve the after hours response to family violence incidents • to improve the safety of victims after hours • to hold perpetrators accountable for their behaviour.” (Thomson Goodall Associates, 2010, p. i) <p>As a result of FVSNs, AFMs can remain in the home.</p>
Program/strategy practice approaches	To provide “immediate safety for victims and their children for a 72 hour period from the time of [police] issue” (Thomson Goodall Associates, 2010, p. i).
Specific conditions under which ‘safe at home’ was not going to be viable/safe	Not specified in this report.
Diverse population groups and geographical locations	The report mentioned client demographics in relation to Aboriginal and Torres Strait Islander and CALD communities. The report also discussed client demographics in relation to disability and rural locations.
Relevant policy and legislative context	<p><i>Family Violence Protection Act 2008 (Vic)</i></p> <p>Increased investment by government and the community sector to enable women and children to stay safely in the home.</p>
Key findings	<p>The key finding is that “the FVSN pilot is meeting its objectives to a reasonable extent, and that a number of further actions are required” (Thomson Goodall Associates, 2010, p. i).</p> <p>Other key findings include:</p> <ul style="list-style-type: none"> • FVSNs have made a significant contribution to the whole of government reform agenda to reduce, and more effectively address family violence in the Victorian community. • FVSNs have contributed to an increase in safety for Affected Family Members. • Women report feeling safer as a result of Police issuing FVSNs. • Women acknowledge the benefits of Police taking the initiative to issue FVSNs.
Conclusions and recommendations based on the findings (incl. how to improve “safe at home” programs in the future)	<p>There is sufficient evidence to suggest that FVSNs are being applied with appropriate discretion overall and are being upheld by the courts in 67% of cases.</p> <p>Shortcomings which need to be considered include:</p> <ul style="list-style-type: none"> • “Consideration of whether contraventions of FVSNs are being adequately addressed and dealt with by the police • Improved communication by Police to respondents and [Affected Family Members] regarding the consequences of breaching FVSNs • Significantly increased referrals by Police to men’s referral services” (Thomson Goodall Associates, 2010, p. vii).
How the findings are useful for wider program development/practice	Orders preventing the perpetrator from returning to the family home are an important aspect of “safe at home” schemes.

Evaluation quality	
Conducted by a person(s) independent of the service	Yes - the evaluation was conducted by external consultants.
External ethics review	Yes - ethics approval was granted by Victoria Police and the Department of Justice.
Accessible in a form other than grey literature	No - the evaluation was only accessible in grey literature.
Peer reviewed	The state of peer review was not discussed in the evaluation report; however there may have been internal review via the FVSN Steering Committee.
Appropriateness of the aims / questions for the evaluation	The stated research aims were appropriate for the evaluation.
Clearly outlined methodology/study design	The methodology and study design were clearly outlined in the report. An evaluation plan was developed with major and subsidiary questions and detailed strategies for obtaining answers to those questions including type of evaluation tools and techniques as well as sources of information.
Appropriate / rigorous methodology for the evaluation aims and timeframe	Yes - the methodology was appropriate and rigorous given the evaluation aims.
Primary data collected and appropriate for meeting research aims	Yes - primary data was collected in the form of qualitative interviews, surveys and discussions with stakeholders. Data collected was appropriate for meeting research aims.
Process measures used	Yes - process measures were used.
Outcome measures used which match the research questions	Yes - outcome measures were used which were aligned with the research aims.
Any important areas not covered by the evaluation	Not specified in this report.
Overall assessment of evaluation quality	The overall quality of the evaluation was high. The evaluation was conducted independently of the services and attracted funding from the Department of Justice. The goals of the evaluation were clear and the conclusions reached were supported by the data analysis.

Program/strategy background	
Jurisdiction	VIC
Program/strategy	Improving Safety in the Home Response
Evaluation	Safe Futures. (2015). <i>Improving safety in the home response – 12 month pilot – Evaluation report 05.11.2013 – 05.11.2014</i> . Ringwood: Victoria.
Description of program/strategy	The “Improving Safety in the Home” response is an early intervention, holistic response whose primary goal is to support women and their children to stay in their own homes when safe and appropriate, and enhance their safety outcomes. It includes: a comprehensive risk and safety assessment; specialist case management support; IT support and cyber safety information and advice; a specialised safety and risk audit of the property; identified safety upgrades on the property; access to funding; negotiations with landlords; and notifications to police.
Definition of ‘safe at home’ within program/strategy	“Safe at home” was defined in relation to the program. The primary goal of the response was “to enhance safety and stability outcomes for women and children and to raise women’s awareness of their personal and environmental safety”, in the context of supporting women and their children “to stay in their own homes where safe and appropriate” (p. 4).
Lead agency/department	Safe Futures Foundation.
Collaborating agencies	Eastern Domestic Violence Outreach Service; Eastern Access Community Health; and Victoria Police.
Inclusion rationale	The report self-identified as an evaluation of the “Improving Safety in the Home” response. The “Improving Safety in the Home” response involved risk assessment, case-management and use of electronic technology to improve the safety and confidence of women who wished to remain in their home after leaving a relationship characterised by domestic violence. The report therefore met the inclusion criteria.
Evaluation Summary	
Key information: funder; length of evaluation; evaluation governance; and stated purpose of evaluation	Safe Futures Foundation had not received any formal funding for the program at the time of the evaluation. The pilot ran for 12 months and the evaluation was for this period. This was an internal evaluation. The purpose of the evaluation is not explicitly stated in the report.
Methodology	<u>The methodology involved:</u> <ul style="list-style-type: none"> • an evaluation with each woman one month after her Home Safety and Risk audit; • subsequent reviews conducted every 2 months; and • collation of these evaluations/reviews. Involved responses from 21 women.
Key program elements	Key program elements included: <ul style="list-style-type: none"> • comprehensive risk and safety audits of home, IT and cyber environment, and assessment of cultural risk; • home safety and security upgrades for families identified as at-risk; and • provision of SafeTcards (personal safety devices that provide GPS tracking and live audio streaming to a security centre) and training.
Program/strategy practice approaches	<u>Program strategies included:</u> <ul style="list-style-type: none"> • to enhance safety and stability outcomes for women and children; • to raise women’s awareness of their personal and environment safety; • to act as a deterrent to perpetrators breaching intervention orders; • to increase conviction in cases of intervention order breaches; • to improve the responsiveness of police and courts to victims of family violence; • to reduce police call outs for family violence; and • to support police responses aimed at recidivism.
Specific conditions under which “safe at home” was not going to be viable/safe	Not specified in this report.

Diverse population groups and geographical locations	This evaluation did not make mention of any diverse population groups, apart from a "cultural risk report" for clients that was listed as an "administration requirement" (p. 9).
Relevant policy and legislative context	<ul style="list-style-type: none"> • <i>Family Violence Protection Act 2008</i> (Vic) • Increased investment by government and the community sector to enable women and children to stay safely in the home.
Key findings	<ul style="list-style-type: none"> • Women reported feeling less stressed, more confident and empowered. • Decrease in breaches of intervention order. • Makes perpetrators accountable.
Conclusions and recommendations based on the findings (incl. how to improve "safe at home" programs in the future)	<p>The recommendations made in the report are only partly based upon the evaluation findings.</p> <p><u>Recommendations:</u></p> <ul style="list-style-type: none"> • funding for a full-time Police Liaison Women's Advocate; • that the "Improving Safety in the Home" response be fully funded to ensure ongoing relationships with external services and Police are strengthened, and to develop referral pathways and protocols in order to provide a State-wide consistent and effective response; • that future funding of the "Improving Safety in the Home" is given to ensure this response is fully integrated into other regional Victorian Police and agency initiatives to provide the best possible safety outcomes for women and children in the Eastern region; • that financial resources are required to continue the Home Safety and Risk audits and purchase the recommended safety upgrades required to enhance women and children's safety; • that either the courts or police advise perpetrators of the safety upgrades and related consequences to ensure a safer approach for women; • that the Attorney General varies the existing VOCAT practice guidelines to enable a faster process where women can access immediate VOCAT funds to purchase recommended safety upgrades; • that the Response is considered a Crime Prevention strategy; • that a Crime Prevention Tribunal be established to provide funding to those identified at high risk of becoming victims of family violence; and • that funding for a part-time administrative officer is required (pp. 6-9).
How the findings are useful for wider program development/practice	The use of electronic technology in "safe at home" schemes is being looked at with interest by many, and these findings add to the evidence base about how clients respond favourably to their use.
Evaluation quality	
Conducted by a person(s) independent of the service	No - this was an entirely internal evaluation.
External ethics review	No - external ethics review was not sought.
Accessible in a form other than grey literature	No - this report was only accessible via a key stakeholder.
Peer reviewed	No - the report did not detail any peer-review processes.
Appropriateness of the aims / questions for the evaluation	There were no aims or research questions specified in the report.
Clearly outlined methodology/study design	Yes - the methodology was clearly outlined.
Appropriate / rigorous methodology for the evaluation aims and timeframe	The data collection utilised in this evaluation was appropriate. Given the lack of detail regarding the methodological approach, and the non-critical appraisal of the program and outcomes for clients, the methodology was not particularly rigorous.
Primary data collected and appropriate for meeting research aims	Yes - primary data was collected and was appropriate for meeting the aims of the review. However the involvement of other key stakeholders would have increased the rigour of the report and contributed to an assessment of program quality.

Process measures used	Yes - process measures were utilised.
Outcome measures used which match the research questions	Not specified in this report.
Any important areas not covered by the evaluation	Longitudinal data on client outcomes and data on the experiences and outcomes for diverse population groups were absent in this report.
Overall assessment of evaluation quality	This evaluation was conducted internally and was not critical of the response. The evaluation did not specify goals or research aims, and data collection and analysis was not transparent in the report. Conclusions were not clearly connected to the analysis of data. While the recommendations do inform our knowledge regarding “safe at home” approaches, the overall quality of this evaluation was poor.

Program/strategy background	
Jurisdiction	VIC
Program/strategy	Bsafe
Evaluation	Nicholson, D. (2012). <i>Bsafe from family violence: Business case and 2012 evaluation findings</i> . Women's Health Goulburn North East: Wangaratta.
Description of program/strategy	<p>"Bsafe is a personal alarm system and risk management option primarily for people escaping family violence and sexualised assault perpetrated by intimate partners. Bsafe utilises VitalCall/Chubb Security who supply two types of products - a water-proof pendant that operates via the home telephone line that can be activated within the area of the victim's home and garden, and a 'mobile unit' which is similar to a mobile phone. The mobile unit is used where there is mobile coverage and allows Bsafe clients increased autonomy and security when out in the community." (Taylor & Mackay, 2011, p. 5).</p> <p>Eligibility criteria: "Bsafe recipients must have an IVO with an exclusion clause that states the perpetrator is not allowed within a specified distance to the primary residence or workplace" (Taylor & Mackay, 2011, p. 48).</p>
Definition of "safe at home" within program/strategy	While "safe at home" is not explicitly mentioned in this report, it is noted that the Bsafe alarm is "for women who have left a family violence situation, have an Intervention Order and are in fear of violence by an ex-partner... to allow women and children to remain living in their homes, knowing that help is only a button away" (p. 12).
Lead agency/department	Women's Health Goulburn North East
Collaborating agencies	The SAFER team collaborated regarding the evaluation.
Inclusion rationale	This report self-identifies as an evaluation of the Bsafe pilot. The Bsafe service was designed to provide longer-term support arising from the ongoing consequences of family violence, and has a specific focus on enabling women and their children to remain safely in their home. The report matched the criteria for inclusion in the meta-evaluation.
Evaluation summary	
Key information: funder; length of evaluation; evaluation governance; and stated purpose of evaluation	This report represents an evaluation of the Bsafe pilot, the data collection for which ran from March – August 2012. "The SAFER Team, in particular Dr Lucy Healey with Professor Cathy Humphreys and Dr Kristin Diemer, provided critical feedback and oversight throughout the evaluation project" (Nicholson, 2012, p. 6). The report follows on from previous evaluation reports (also included in the meta-evaluation). The study aimed to validate previous BSafe research, with the specific research question being: <i>was Bsafe "still providing a similar level of support and protection to women and their children two years after the previous evaluation survey"</i> (Nicholson, 2012, p. 34)?
Methodology	<p>The methodology is described as a participatory action research model. It utilised three methods:</p> <ul style="list-style-type: none"> • Interviews with Bsafe clients (8 telephone interviews). • Interviews/surveys with Bsafe coordinators. • Bsafe partner agency forum (five agencies attended).
Key program elements	The key element of this "safe at home" strategy was the provision of personal alarms, under the condition that women had an IVO with an exclusion clause. To be eligible for a Bsafe alarm the report also notes that women needed to be "at risk of the Intervention Order being breached" (p. 12). "At risk" eligibility was determined through the use of the Family Violence Common Risk Assessment Framework (CRAF) Comprehensive Risk Assessment Tool, which is approved by the Victorian state government.
Program/strategy practice approaches	See above row.
Specific conditions under which "safe at home" was not going to be viable/safe	While the report did not specifically refer to conditions under which a "safe at home" response was not going to be viable or safe, it did note that Bsafe was not designed to operate as a crisis response. The report noted that "safety planning and other security measures are essential and it is crucial that women are provided with the time needed to make an informed decision about whether staying in their home is a safe and desirable option" (p. 14). The report also notes that installation of the alarm is not immediate, and the risk posed by some perpetrators can necessitate the use of crisis or other accommodation options.

Diverse population groups and geographical locations	The report noted that most women but “especially those living on isolated properties, reported that with Bsafe they felt secure in their homes” (p. 19); however “a small number of women noted that Bsafe [did] not work where there [was] no mobile reception” (p. 19). While no women with disabilities were interviewed for the evaluation, it was noted that there were a number of women with disabilities in the Bsafe program at the time of the evaluation. The authors noted that accessibility for women with disabilities and/or hearing impairment has increased as alarm technology has become more sophisticated, and that Bsafe is a viable risk management option particularly for women who face the multiple disadvantage of rural isolation and disability (p. 20). It was noted that a number of Aboriginal women had Bsafe units, however it was recommended that further education and community engagement occur within Aboriginal communities regarding the intervention. Similarly with CALD clients, consideration of accessibility was recommended. The flexibility of the Bsafe alarm system was seen as a strength in that it was flexible enough to meet the needs of various diverse clients.
Relevant policy and legislative context	<p>“A key plank of the 2006-2009 reforms ... was the creation of an integrated family violence system (IFVS) in Victoria. The IFVS enabled system reform that responds more effectively to victims of family violence (including children), holds perpetrators accountable and provides opportunities to create a reduced tolerance for family violence in Victorian communities.</p> <p>In 2012, along with other States and the Federal Government, the Victorian Government reconfirmed their commitment to these aims by announcing significant funding for additional services to women, children and men in addition to further legislative and policy change that protects women and children, and makes men who use violence accountable.</p> <p>In September 2012, the Victorian Coalition Government announced new measures to help protect and support women and children who have experienced family violence and sexual assault. The package of \$16 million over four years is for the expansion of services included an extra \$9.25 million for additional family violence counselling and case management.” (Nicholson, 2010, p. 21)</p> <p>The <i>Family Violence Protection Act 2008</i> (Vic) is also relevant to the Victorian context.</p>
Key findings	<p>Bsafe was continuing to provide support and protection to women and their children.</p> <p>Most of the women reported that their wellbeing improved after getting the Bsafe unit.</p>
Conclusions and recommendations based on the findings (incl. how to improve ‘safe at home’ programs in the future)	The report does not come to any general conclusions. The report reinforces the findings of the 2010 evaluation – that clients and partner agencies valued the work of the BSafe scheme. The report recommends that the State Government of Victoria “recognise the viability of the Bsafe Program, accept the costed Business Case and adopt the Bsafe model in the Hume Region in 2013-14 as a vital family violence response and prevention strategy throughout rural Victoria” (p. 11).
How the findings are useful for wider program development/practice	The use of electronic technology in “safe at home” schemes is being looked at with interest by many, and these findings add to the evidence base about how clients respond favourably to their use.
Evaluation quality	
Conducted by a person(s) independent of the service	Yes - the evaluation was conducted by Deb Nicholson, an external consultant.
External ethics review	Yes - the questionnaire used in interviews with Bsafe clients was reviewed by three experts.
Accessible in a form other than grey literature	No - the report was only accessible in the grey literature.
Peer reviewed	No - the report was not peer reviewed.
Appropriateness of the aims /questions for the evaluation	The aim was to validate previous Bsafe research, and this was appropriate.
Clearly outlined methodology/study design	The methodology was described as a participatory action research model and was clearly outlined in the report.
Appropriate / rigorous methodology for the evaluation aims and timeframe	Yes - the methodology was both appropriate and rigorous.

Primary data collected and appropriate for meeting research aims	Yes - the primary data collected from interviews with Bsafe clients & Bsafe coordinators was appropriate for meeting the aim of the research.
Process measures used	Yes - workers agreed that generally Bsafe saved time and resources within agencies.
Outcome measures used which match the research questions	Yes - outcome measures were utilised that matched the research question.
Any important areas not covered by the evaluation	Long-term viability of the scheme in terms of funding.
Overall assessment of evaluation quality	This evaluation was more structured than the previous 2010 evaluation. It was conducted by an external consultant. The report included a list of the questions asked in client interviews along with a summary of responses as well as extracts of responses. While the report reflects the strong support for Bsafe, it also includes some critical comments by Bsafe coordinators on the Bsafe technology – some teething problems. Overall it was a rigorous evaluation.

Program/strategy background	
Jurisdiction	VIC
Program/strategy	Bsafe pilot project 2007-2010
Evaluation	Taylor, E. (2010). <i>Bsafe pilot project 2007-2010: Interim evaluation report</i> . Women's Health Goulburn North East: Wangaratta. Taylor, E., & Mackay, R. (2011). <i>Bsafe pilot project 2007-2010: Final report</i> . Victoria Police and Women's Health Goulburn North East: Wangaratta.
Description of program/strategy	“Bsafe is a personal alarm system and risk management option primarily for people escaping family violence and sexualised assault perpetrated by intimate partners. Bsafe utilises VitalCall/Chubb Security who supply two types of products - a water-proof pendant that operates via the home telephone line that can be activated within the area of the victim's home and garden, and a “mobile unit” which is similar to a mobile phone. The mobile unit is used where there is mobile coverage and allows Bsafe clients increased autonomy and security when out in the community.” (Taylor & Mackay, 2011, p. 5) Bsafe was a 3-year pilot program (2007-2010). <u>Eligibility criteria:</u> “Bsafe recipients must have an IVO with an exclusion clause that states the perpetrator is not allowed within a specified distance to the primary residence or workplace” (Taylor & Mackay, 2011, p. 48).
Definition of "safe at home" within program/strategy	The reports did refer to the “safe at home” approach. The report noted that “Bsafe sits within and supports the ‘safe at home’ model. ‘Safe at home’ referred to a jurisdictional response to family violence that aims to have the perpetrator removed from the home while women and their children remain in the home in circumstances where it is safe, appropriate and desirable” (Taylor & Mackay, 2011, p. 14).
Lead agency/department	Women's Health Goulburn North East
Collaborating agencies	Victoria Police
Inclusion rationale	This report self-identifies as an evaluation of the Bsafe pilot. The Bsafe service was designed to provide longer-term support arising from the ongoing consequences of family violence, and has a specific focus on enabling women and their children to remain safely in their home. The report matched the criteria for inclusion in the meta-evaluation.
Evaluation summary	
Key information: funder; length of evaluation; evaluation governance; and stated purpose of evaluation	Little to no information is given regarding the evaluation governance and purpose of the evaluation. It is unclear who funded the evaluation. The evaluation seems to have been governed by the Bsafe Steering Committee, but this is unclear in the report.
Methodology	<u>“Methods of evaluation included:</u> <ul style="list-style-type: none"> • Comprehensive Risk Assessment Tool (CRAF) – information was collated about women and their children and the perpetrator's use of violence against them. This included demographic information and the evidence-based risk and vulnerability rating of 67 of the 72 women who participated. • questionnaires - completed voluntarily by participating women, after three and six months with a kit and when they exited the project. This provided qualitative and quantitative data. • interviews - data was collected through one-to-one, semi-structured telephone interviews with five women by the Bsafe project coordinator. • reflective workshops - conducted with Safe's key stakeholders in 2008 and 2010. Key enablers and barriers to the project's success were identified in both workshops. Barriers were rectified to strengthen the pilot's ability to meet its objectives and be responsive to the needs to women and their children escaping violence. • key stakeholder questionnaires - provided feedback after the three year pilot project concluded.” (Taylor & Mackay, 2011, pp. 9-10) No information was provided in the report regarding data analysis procedures.
Key program elements	“Women had to have a Family Violence Order with exclusion clauses in place and ... not want to have ongoing contact and a relationship with the perpetrator” (Spinney, 2012a, p. 49).

Program/strategy practice approaches	<p>“Two types of alarm systems were used: a home-based model that work[ed] with a landline and a unit designed to work with mobile phones. The latter proved particularly useful for use out of the home, and meant that women and children could resume a more normal life.” (Spinney, 2012a, p. 50)</p> <p>“The Bsafe project had <u>two key objectives</u>:</p> <ol style="list-style-type: none"> 1. to reduce homicides, assaults, sexualised assault and recidivism relating to family violence by funding the Bsafe kit and service to provide an additional level of support and service to victims of family violence so they can safely stay in their own homes and communities; and 2. to strengthen the relationship between the police, family violence, and health and community sectors and the community.” (Taylor & Mackay, 2011, p. 8)
Specific conditions under which "safe at home" was not going to be viable/safe	<p>“While the report did not specifically refer to conditions under which 'safe at home' was not going to be viable or safe, the authors noted that Bsafe did not operate when there was not an intervention order in place or when a risk assessment determined that the unit would not deter a perpetrator from breaching their intervention order.” (Taylor & Mackay, 2011, p. 8)</p>
Diverse population groups and geographical locations	<p>The report noted that Bsafe “can be invaluable” to women and children from CALD backgrounds due to the ease of access (p. 20). The report also noted that more than 7 percent of Bsafe participants were women living with a disability or a range of disabilities, and that these women were supported by the VitalCall system. Demographic data was recorded for Aboriginal and Torres Strait Islander clients, however no comment was made on the usefulness of Bsafe for this group. The authors noted that Bsafe had been “successfully piloted in rural and remote Victoria with high risk women and children” (p. 56).</p>
Relevant policy and legislative context	<p><i>Family Violence Protection Act 2008 (Vic)</i></p> <p>Increased investment by government and the community sector to enable women and children to stay safely in the home.</p>
Key findings	<p>The <u>most successful elements of BSafe</u> were:</p> <ul style="list-style-type: none"> • “Ongoing contact and risk assessment with clients ... • Employment of Bsafe coordinator to oversee referral process, ensure timely kit installation, monitor activations and police response, and communicate with key stakeholders. • Training workers (police, service providers’ workers) in the use of Bsafe. ... • Women using it whenever a breach occurred, however minor.” (Spinney, 2012a, p. 49) <p>The <u>key findings</u> are:</p> <ul style="list-style-type: none"> • Bsafe provides a risk management option for high risk women and their children. • Bsafe could be incorporated into safety audits. • Bsafe is good risk management option for rural women. • Bsafe can fill a gap in the current integrated family violence service system – this system focuses on immediate crises rather than the need for longer-term support arising from the ongoing consequences of family violence.
Conclusions and recommendations based on the findings (incl. how to improve "safe at home" programs in the future)	<p>BSafe was valued by the clients of the program and the main finding of the evaluation was that the program should continue to be funded and its use should become more widespread.</p>
How the findings are useful for wider program development/practice	<p>The use of electronic technology combined with support and an effective justice response such as in the BSafe program appear to be important elements in enabling women to remain safely in their home with confidence.</p>
Evaluation quality	
Conducted by a person(s) independent of the service	No - the evaluation was conducted internal to the organisation.
External ethics review	No - an ethics review process was not detailed in the report.
Accessible in a form other than grey literature	No - the evaluation was not accessible in a form other than grey literature.
Peer reviewed	No - the report provided no detail regarding peer review.

Appropriateness of the aims / questions for the evaluation	The aims of the evaluation were not explicitly stated, hence the appropriateness of the aims is unclear.
Clearly outlined methodology/study design	An action research methodology was noted in the report, however there was no other detail regarding data analysis.
Appropriate / rigorous methodology for the evaluation aims and timeframe	There is little detail regarding the methodology, hence it is unclear as to the appropriateness / rigour of the methodology. Several primary and secondary data sources were used, although a greater amount of primary data from clients as well as comparative data would have improved the rigour.
Primary data collected and appropriate for meeting research aims	Primary data was collected. Research aims were not specified.
Process measures used	Yes - process measures were used.
Outcome measures used which match the research questions	Yes - outcome measures were used, although these were not matched as there was no explicit research question.
Any important areas not covered by the evaluation	Any negative aspects of the BSafe Program.
Overall assessment of evaluation quality	<p>As an evaluation of Bsafe, this evaluation activity has some limitations. The evaluation does not include any critical comments on Bsafe as a program. Indeed, it is framed in a way that promotes the importance of Bsafe.</p> <p>Other points on <u>limitations of the evaluation</u>:</p> <ul style="list-style-type: none"> • The questionnaire mailed to the Bsafe users was not included and could not be assessed. • The sample size for the questionnaire is very small – 36 responses (50%). The questionnaire was sent at intervals - 3 month, 6 month and on exit – yet with only 13 or 1/3 completed more than one evaluation. • The evaluation does not include any critical comments on Bsafe as a program. Indeed, it is framed in a way that promotes the importance of Bsafe. • The evaluation provides data and, apart from the comparative cost analysis, does not provide any comparative data, e.g. Table 4 on perpetrator breaches to the IVO generally shows a reduction in IVO breaches prior to Bsafe and over time (a 3 & 6 months). It is inferred that this is directly attributable to Bsafe. Later on page 33, the evaluation refers to a combination of factors. The role of Bsafe in leading to men's violence reducing or ceasing needs further research, particularly compared with other strategies.

Western Australia

Program/strategy background	
Jurisdiction	Western Australia
Program/strategy	Safe at Home
Evaluation	Cant, R., Meddin, B., & Penter, C. (2013). <i>National partnership agreement on homelessness, evaluation of Western Australian Programs: Final report</i> . Social Systems and Evaluation, Western Australia: Australia.
Description of program/strategy	<p>Funded under the National Partnership on Homelessness to provide support for women and children experiencing domestic violence to stay in their housing following domestic violence, when safe. There are 6 sites (4 metro and 2 rural) with two workers per site. Specialist workers assess risk and safety and support needs of women and children to stay in their own home. There is use of brokerage funds to stabilise housing and increase security. Brokerage can also be used more broadly to support women such as paying TAFE fees so that study can continue.</p> <p>“The <u>support and assistance provided</u> by the various services which are part of the funded program area have in general the following features:</p> <ul style="list-style-type: none"> • using a case management model • assisting women with obtaining a Violence Restraining Order • undertaking a risk assessment of the client’s living arrangements • providing safety upgrades to the accommodation • providing access to refuge accommodation if the situation becomes unsafe • making appropriate referral to other relevant services • establishing linkages through a Memorandum of Understanding with the WA Police as well as working relationships with other relevant local agencies. It is noted that the MOU with the Police is aimed at providing guidance for Police operational practice and for clarifying roles and responsibilities.” (Cant, Meddin & Penter, 2013, p. 184) Provision of “wrap around” and intense case management support for up to 12 months.
Definition of "safe at home" within program/strategy	<p>The report describes the “safe at home” response as one that “aims to:</p> <ul style="list-style-type: none"> • support for women and children experiencing domestic violence to stay in their housing following domestic violence, when it is safe to do so • provide specialist workers to assess safety and support needs of women and children to stay in their own home, where it is safe to do so • provide brokerage funds to stabilise housing and increase security • uses linkages to Police through a Memorandum of Understanding and local protocols • undertake risk assessment and an upgrade of security to the home and safety planning in order to ensure confidence and safety.” (Cant, Meddin & Penter, 2013, p. 183)
Lead agency/department	Funding administered by the Department of Child Protection and Family Support - under Homelessness Programs.
Collaborating agencies	Refuges where “safe at home” workers are located, police, other domestic violence support workers, other agencies depending on women’s needs. The report does not provide detail on specific organisations.
Inclusion rationale	“Safe at home” is a program which is "stand alone" but works in partnership, as detailed above. The evaluation is included because it a specific independent evaluation of the “safe at home” program. The Western Australian programs have a specific domestic violence focus and aim to empower women to remain out of supported accommodation and remain in their home or the home of their choice when leaving a violent relationship. The evaluation meets the criteria for inclusion.
Evaluation summary	
Key information: funder; length of evaluation; evaluation governance; purpose of evaluation	<p>Funder is Department of Child Protection and Family Support under National Partnership Agreement on Homelessness. Evaluation conducted over 2012 and submitted March 2013. The evaluation followed the Australian Government’s National Health and Medical Research Council’s guidelines.</p> <p>A reference group was formed to support the evaluation, which comprised of representatives from the Department of Child Protection, a representative from the Department’s Research and Evaluation section, a representative from the Western Australian Council on Homelessness and the evaluators. The evaluation was conducted by independent research consultants.</p>

	<p>“The specific objectives of the evaluation were to:</p> <ul style="list-style-type: none"> • describe each of the 14 NPAH programs; • assess their implementation, effectiveness and efficiency by using the Evaluation Framework developed by Social Systems and Evaluation; and • identify key lessons from the programs including identifying strengths and weaknesses of the programs.” (Cant, Meddin & Penter, 2013, p. 1) <p>Safe at Home is one of the 14 programs funded under NPAH.</p>
Methodology	<p>Data was gathered between January 2011 and December 2012. The evaluation design was based on the Western Australian National Partnership Agreement Implementation Plan Evaluation Framework (2009). A mixed methods approach was taken. A Hierarchy of Intended Outcomes was developed to guide the evaluation, identifying inputs, enablers, outputs and lower level outcomes needed for the achievement of higher level outcomes. The overarching framework used was results based - in essence, for the NPAH the desired population result was the reduction of homelessness in the community (p. 14). The <u>evaluation data sources</u> were:</p> <ul style="list-style-type: none"> • tracking sheets and Progress Reports provided to DCPFS by each agency; • face-to-face interviews with managers and staff of each SAH sites (6); • interviews with current and previous worker of DV Outreach (Men’s Breathing Space Response Service); • on-line worker survey (22 responses); • case studies; • 50 client interviews; and, • brief literature review.
Key program elements	<p>“Safe at home” runs on a coordinated case management approach that strongly collaborates with other DV responses. Involves risk assessment, up to 12 months case management, security upgrades, brokerage funds for other support to remain, access to refuge accommodation should it become unsafe, support for women with restraining orders, overall case management based on needs of woman.</p>
Program/strategy practice approaches	<p>Wrap around case management response that can respond to the individual needs of women includes all key elements of a SAH program including risk assessment, security upgrades, strong links to police and other DV services, including perpetrator programs. Access to crisis accommodation if required. Support up to 12 months.</p>
Specific conditions under which "safe at home" was not going to be viable/safe	<p>SAH programs are available only in urban areas and large rural towns (n=2) as not seen as viable in remote areas due to incapacity to support women’s safety remaining in home. Women assessed as being at high risk may not be eligible and would be referred to refuge crisis accommodation.</p>
Diverse population groups and geographical locations	<p>In two rural locations but decision not to have in remote areas of WA as service support not available including access to police easily. Between July 2010 and June 2012 569 clients used SAH services of which 17% were Aboriginal and Torres Strait Islander and 12% were CALD.</p>
Relevant policy and legislative context	<p>Relevant Policy includes: <i>Preventing Family and Domestic Statewide Plan</i> and <i>WA Homelessness State Plan 2010-2013</i> (Government of Western Australia 2010) which includes SAH as one of its programs. No specific DV Legislation in WA. There is the <i>Restraining Orders Act</i> of 1997 that includes domestic violence and otherwise the criminal law options pertaining to assault and so on. Legislation such as 24- or 72-hour Police Orders effectively exclude the violent partner from the home (McFerran, 2007, p. 14).</p>
Key findings	<p>The SAH services appear to have “consistently ... provid[ed] a comprehensive and seamless service to these clients and their children” (Cant, Meddin & Penter, 2013, p. 200). This included capacity to remain in the family home and thus reduce the homelessness, ongoing case management support for up to 12 months “providing safety audits and subsequent modifications of the accommodation which are key and critical components of the SAH program” (Cant, Meddin & Penter, 2013, p. 200). “Many key benefits to women and their children were in respect to support and intervention such as domestic violence education for the woman”, linkages to mainstream support services (legal, judicial, policing, income support, counselling etc), “enrolment and support to attend school regularly for the children involved and either intervention or referral to address issues such as financial management” (Cant, Meddin & Penter, 2013, p. 200). All women interviewed strongly agreed about the program benefit. 109 out of 243 (49%) of clients maintained accommodation at least for 12 months.</p>

Conclusions and recommendations based on the findings (incl. how to improve "safe at home" programs in the future)	Women have been able to stay <i>Safe at Home and their place of employment and/or study</i> whilst reducing disruption and financial costs of having to relocate. Children and young people have been supported to continue their normal activities such as schooling, recreation and friends. Mother-child bond is able to strengthen with the absence of the violence. The programs have undoubtedly reduced the levels of homelessness as a result of domestic and family violence and saved some lives. Key areas of strength with SAH identified included: safety audit particularly with police and workers involved, security modifications, mobile phones and duress alarms, funds to repair damage to property, court support and ongoing psycho-social support including referrals as needed.
How the findings are useful for wider program development/practice	Findings highlight that specialised local SAH responses can enable women to remain in home more safely. Longer term support appears to bear this out in relation to there being no critical incidents to date with SAH clients. Whilst not trialled in remote areas it would seem to not be an appropriate response given the distance and isolation. SAH has been appropriate for CALD and Aboriginal women because the case management and individualised approach enables specific needs to be addressed re safety and risk.
Evaluation quality	
Conducted by a person(s) independent of the service	Yes - the evaluation was conducted by external consultants : Cant and colleagues.
External ethics review	Yes - Government Department Communities Ethics Committee.
Accessible in a form other than grey literature	No - the report was not accessible in a form other than the grey literature.
Peer reviewed	No - the report gave no detailed regarding a peer review process.
Appropriateness of the stated aims / questions for the evaluation	Yes - the evaluation objectives mentioned above were appropriate for the evaluation.
Clearly outlined methodology/study design	Yes - the methodology and study design were clearly outlined in the report.
Appropriate / rigorous methodology for the evaluation aims and timeframe	Yes - the methodology was appropriate for the evaluation aims and timeframe. The study design and analysis were well explained and rigorous.
Primary data collected and appropriate for meeting research aims	Yes - primary data collected included interviews with "safe at home" providers, clients, domestic violence men's workers, as well as an online worker survey. The data collected was overall appropriate for meeting research aims.
Process measures used	Not really - rather, qualitative data was used to described what staff and clients reported was most helpful to promote safer outcomes.
Outcome measures used which match the research questions	Yes - main outcome measure was women remaining in accommodation and children remaining in school etc. 49% of women had remained in accommodation for at least 12 months. These women were able to keep their child(ren) in school and maintain good school attendance - no quantitative data on this though. Not clear aspect: time/days women remained as clients of SAH was reported but no conclusions drawn about this. In many ways it is opposite to homeless accommodation services as time with SAH can be positive and not reflect homelessness.
Any important areas not covered by the evaluation	Not a lot of detail provided about women not eligible for SAH. This would have been useful to know. No police data reported about SAH clients and the perps on VROs would have been interesting to know. More detailed info about the processes of referral and collaborative working would have been helpful.
Overall assessment of evaluation quality	The overall quality of the evaluation was fair. The evaluation was conducted by consultants independent from the NPAH projects. The evaluation was mostly descriptive of what had occurred in "safe at home" responses, and information about data analysis was not always transparent. The conclusions reached were only somewhat connected to the data presented, however the conclusions do directly inform what we know about "safe at home" approaches.

Appendix E: International evaluations

There are a number of international examples of support programs/strategies for victims of domestic violence, many of which include provision of housing assistance. In this meta-evaluation, we have included a closer discussion of two such initiatives as exemplars that provide a useful context for the related landscape beyond Australia. The UK's Sanctuary Schemes, conceived in 1998, have been seminal and highly influential precursors to similar Australian schemes designed to prevent homelessness for victims of domestic violence by enabling them to remain in their own accommodation. Utilising a risk assessment process, corresponding security upgrades and ongoing support, Sanctuary Schemes are supported by local governments and women's advocacy groups. Two evaluations of the Schemes have been very positive, finding that benefits to involved agencies included cost savings and a reduction in homelessness caused by domestic violence (see matrix below for further details).

In the Pacific region, initiatives such as the New Zealand Safe@Home service have developed in parallel to the establishment of "safe at home" programs/strategies in Australia. Safe@Home commenced in 2008, bringing together Shine*, an Auckland-based NGO and the district police to secure the homes of high-risk DV victims through a range of safety upgrades, thereby enabling women to stay in their own dwellings. A formative evaluation of Safe@Home was conducted in 2010, finding strong interagency relationships forged through the steering group and formalised through Memoranda of Understanding, referral and assessment processes and the role of project coordinator were key success factors for the program, which was reported as reaching its intended target group (see further details in the matrix below).

To canvass the full range of "safe at home" programs/strategies offered internationally is beyond the scope of this meta-evaluation; however, the above two initiatives have been included here to demonstrate:

- A key international program (Sanctuary Schemes), developed prior to similar schemes in Australia, which has proved influential in the design and implementation of local "safe at home" programs and strategies.
- A relevant example of "safe at home" programs in our geographical region, useful for highlighting similarities in objectives, implementation and best practice principles with cognate Australian initiatives.

Evaluations of other international "safe at home" and/or DV-focused initiatives were excluded from this meta-evaluation, with brief descriptions of these programs/strategies and respective rationales for their exclusion are listed below.

Regarding US programs, searching and contact with domestic violence researchers in the US led the authors to conclude that "safe at home" type schemes had not been actively pursued as program options/interventions, and therefore published evaluations were not available and accessible.

All information in the following section has been directly derived from the evaluation report concerned unless otherwise stated.

Crellin Consulting. (2014). *Staying Put: Evaluation and social impact report*. West Yorkshire, UK: Crellin Consulting.

Exclusion rationale: The Staying Put program provides services to women and children experiencing domestic abuse in the Bradford region of the United Kingdom. As noted in its 2014

evaluation, the central objective of Staying Put is to enable these women and their children to remain safely in their homes. This evaluation examines the link between deprivation and the need for the Staying Put program, as well as stakeholder views and program impact. While this international example of an individual “safe at home” program meets the inclusion criteria for this meta-evaluation, the task of including all relevant international evaluations as case studies is beyond the scope of this research. Given this, coverage of only a select number of evaluated international programs has been included in this meta-evaluation.

Howarth, E., Stimpson, L., Baran, D., & Robinson, A. (2009). *Safety in numbers: A multi-site evaluation of independent domestic violence advisor services*. London, UK: The Henry Smith Charity.

Exclusion rationale: This evaluation examines the provision and impact of Independent Domestic Violence Advisor (IDVA) services in the UK for women experiencing DV at high risk or harm or homicide. This evaluation examined seven IDVA services in both urban and rural locations, over a 27 month period. IDVAs assist women at high risk with a range of support pathways, as well as crisis support such as safety planning. Offering short to medium term support, IDVAs work in partnership with a range of services. However, ANROWS Project 3.1 is primarily concerned with an analysis of evaluations of existing “safe at home” programs or initiatives. While IDVA services do include support with housing options and related referral pathways through the multiagency model IDVAs work as part of, this is not the primary focus of the IDVA services evaluated here, and as such, it does not meet the inclusion criteria for this meta-evaluation.

Coy, M., & Kelly, L. (2011). *Islands in the stream: An evaluation of four London independent domestic violence advocacy schemes – Final report*. London, UK: London Metropolitan University.

Exclusion rationale: This evaluation of London’s four Independent Domestic Violence Advocacy Schemes (IDVAs) is a comprehensive review of what IDVAs offer and the focus of their interventions. Whilst they aim to offer medium term support where required and they favour women remaining safely where possible, they do not provide these types of services but rather refer women to Sanctuary Schemes for this to be implemented. The evaluation itself does not include an analysis of women who have been referred to Sanctuary Schemes or women they are working with who are remaining in their homes.

Granville, G., & Bridge, S. (2010). *PATHway project: An independent domestic violence advisory service at St Mary’s Maternity Hospital, Manchester. Independent evaluation: Final report*. Manchester, UK: St Mary’s Maternity Hospital.

Exclusion rationale: This independent evaluation assesses an Independent Domestic Violence Advisory (IDVA) service at St Mary’s Maternity Hospital in Manchester, UK. This service was established in 2009 in response to the Manchester Domestic Abuse Strategy (2008-2011), with an Independent Domestic Abuse Advisor installed in the antenatal department of St Mary’s hospital, as evidence has shown domestic abuse can begin or worsen during pregnancy. IDVAs are centrally important in a multiagency response to domestic abuse, and the IDVA service evaluated here refers women experiencing DV to a suite of coordinated support services. However, ANROWS Project 3.1 is primarily concerned with an analysis of evaluations of existing “safe at home” programs or initiatives. While IDVA referral pathways may include housing assistance, this is not the primary focus of the IDVA service evaluated here, and as such, it does not meet the inclusion criteria for this meta-evaluation.

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