One in three Australian women experience domestic violence at some point during their adult life and it is women and their children who typically suffer the most severe short and long-term consequences of this violence.

In this paper the findings are presented from an evaluation of a Queensland police-led integrated service response to domestic violence incidents that was designed to better address women and children’s needs for short and long-term safety. The findings indicated that a significant improvement in women’s self-rated safety and wellbeing was generated throughout the initial six-week support period. However, subsequent follow-up interviews with a sample of participants identified that the women had continued to experience a range of abuse, harassment and stalking after the initial support period had ended. This suggests a need to provide ongoing support to women and children escaping domestic violence, as well as a stronger focus on perpetrator accountability, if improvements to the safety and wellbeing of women and children escaping domestic violence are to be sustained.

Victims’ experiences of short- and long-term safety and wellbeing: Findings from an examination of an integrated response to domestic violence

Silke Meyer

This paper examines victims’ short and long-term experiences of safety and wellbeing after being supported through a six week police-led integrated response to domestic violence in Caboolture, Southeast Queensland. The overarching objective of this integrated response was to create safer home environments for women and children affected by domestic violence. The response was run as a pilot project from January 2010 until December 2011 and received subsequent funding for continuation after the initial pilot period. Findings presented in this paper are based on the last six months of the pilot period and illustrate women’s perceived safety and wellbeing during and after their initial state of crisis.

Background

Domestic violence is a serious and widespread phenomenon that continues to affect many women and their children in Australia and worldwide (WHO 2005). Domestic violence has been identified as the leading cause of physical injuries to women of reproductive age and a factor implicated in approximately 60 percent of Australian homicide cases involving a female victim (Shackelford & Mouzos 2005). With most incidents causing injuries being male to female perpetrated, women and their children are the ones suffering the most severe consequences when subjected to domestic violence (ABS 2012; Edleson 1999). In addition to the immediate physical and emotional impact on women and children, domestic violence further imposes an enormous financial burden on individual victims, as well as society at large.
The National Council to Reduce Violence Against Women and Children (the Council) (2009) recently estimated that by 2021, domestic violence would cost Australia close to $10b if left unaddressed. As part of its strategy to reduce violence against women and children in Australia, the Council (NCRVAWC 2009) has highlighted the need for Commonwealth, state and territory governments to implement more specialised and integrated responses to domestic violence to tackle its complex nature effectively. This component of the Australian Government’s strategic plan to reduce violence against women and their children follows the examples of a number of international jurisdictions, which have previously piloted and implemented integrated responses to domestic violence (Home Office 1995; Robinson 2006; Sadusky 2003).

The term integrated response is often used arbitrarily and interchangeably with collaborative or coordinated multiagency responses (Wilcox 2010). In the context of this research, it is understood as a partnership response that involves formalised agreements regarding processes, roles, responsibilities and cross-unit accountability. Integrated responses to domestic violence have been identified as good practice models due to their various benefits for those affected by domestic violence, as well as those trying to address the needs of these victims (Hovell, Seid & Liles 2006; NCRVAWC 2009; Robinson 2006) and are increasingly being developed and trialled across states and territories. While some states and territories have implemented statewide integrated systems (eg South Australia, Tasmania and Victoria) others, including Queensland, support more localised integrated response models (ALRC 2010; Wilcox 2010). Benefits associated with integrated responses to domestic violence are multilayered and include more timely responses to victims’ needs for support and protection, and a greater emphasis on offender accountability. In addition, integrated responses are designed to offer more streamlined referral processes for agencies providing initial crisis responses (eg law enforcement agencies), intermediate support and protection (eg women shelters) and long-term support for women and children affected by domestic violence (eg specialised counselling services, transitional and long-term housing support services). While these different service providers frequently support victims of domestic violence individually, it is the larger sum of integrated service deliveries that improves outcomes for victims, services and the community at large (NCRVAWC 2009; Robinson 2006; Wilcox 2010). Past research reveals that working collaboratively through an integrated response network facilitates access to relevant services for women and children through suitable interagency referrals and fosters victims’ safety through improved interagency communication and tighter monitoring of perpetrator behaviour (Day et al. 2010; Hovell, Seid & Liles 2006).

Findings presented in this paper are based on an examination of an integrated response to domestic violence that aims to better protect high-risk cases of affected women with dependent children. Informed by national and international recommendations around the development and implementation of integrated responses to domestic violence (eg see DVRCV 2004; Home Office 1995; Queensland Government 2009), this particular response was led by police and involved three additional key partner agencies including probation, child safety and a regional domestic violence support service. Integrated response work involved information sharing between the four key partner agencies to facilitate identification of high-risk cases, adequate support referrals for women classified as high risk and joint monitoring of children’s safety, as well as perpetrator compliance with Domestic Violence Order (DVO) conditions. The classification of women as ‘high risk’ was informed by the assessment of different risk indicators, including controlling and obsessive behaviour by the perpetrator, threats to kill the victim and increasing frequency and severity of abuse. Individual risk assessment was based on the presence of these risk factors, as well as the domestic violence liaison officer’s judgement of the victim’s overall circumstances. Victims therefore did not have to meet all high-risk criteria to be monitored and supported under the integrated response. This type of ‘individualised’ risk assessment is a common approach used in national and international responses to domestic violence (eg see DCP 2011; Robinson 2006). Women classified as ‘medium’ or ‘low risk’ still received relevant information around police support and other available services but were not subject to an intensive six week support period. In addition to information sharing and collaboration around identifying high-risk cases, the project had a high-risk intervention officer who was a social worker from the regional domestic violence support service based at the local police station. This strategic placement of a non-government organisation worker at the local police station further facilitated both victim support at the initial point of police contact, as well as subsequent cross-agency collaboration and communication.

Methodology

The examination of the pilot phases of the integrated response involved a mixed-method approach, combining data from pre and post-support surveys (n=78) and in-depth interviews (n=7) with women affected by domestic violence who had dependent children living with them at the time and were classified as high risk due to the severity of domestic violence identified during the initial police contact.

Pre-and post-support surveys

The survey sample consisted of 78 high-risk victims supported through the integrated response during a selected three month period towards the end of the 24 month pilot project. A total of 164 women with dependent children came in contact with the integrated response during the three months data collection period. Of these, 79 (48%) were classified as high risk and thus eligible for the intensive support period. Of the 79 women classified as high risk, 78 completed both pre and post-support surveys. One woman only completed the pre-survey and was therefore excluded from the analysis.
Table 1 Mean scores of self-rated safety and wellbeing items pre- and post-support period (ranked)\(^a\)

<table>
<thead>
<tr>
<th>Safety/wellbeing items</th>
<th>Self-rated safety/wellbeing at initial contact</th>
<th>Self-rated safety/wellbeing at conclusion of support period</th>
<th>Change in safety/wellbeing over 6 week support period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical safety</td>
<td>3.35</td>
<td>4.64</td>
<td>+1.29(^b)</td>
</tr>
<tr>
<td>Housing stability</td>
<td>3.33</td>
<td>4.39</td>
<td>+1.06(^b)</td>
</tr>
<tr>
<td>Emotional wellbeing</td>
<td>2.99</td>
<td>3.92</td>
<td>+0.93(^b)</td>
</tr>
<tr>
<td>Children's physical safety</td>
<td>3.84</td>
<td>4.75</td>
<td>+0.91(^b)</td>
</tr>
<tr>
<td>Children's emotional wellbeing</td>
<td>3.29</td>
<td>4.01</td>
<td>+0.72(^b)</td>
</tr>
<tr>
<td>Financial stability</td>
<td>2.93</td>
<td>3.41</td>
<td>+0.48(^b)</td>
</tr>
<tr>
<td>Social support access</td>
<td>3.32</td>
<td>3.59</td>
<td>+0.27(^b)</td>
</tr>
<tr>
<td>Sense of identity</td>
<td>4.11</td>
<td>4.38</td>
<td>+0.27(^b)</td>
</tr>
</tbody>
</table>

\(^a\) Items are ranked from highest to lowest for observed change over the six week support period
\(^b\) Observed change is statistically significant at \(p<0.01\)

Pre and post-support surveys were designed to capture women’s self-rated level of safety and wellbeing at their initial contact with the high-risk intervention officer and at the end of the six week support period. Safety and wellbeing was measured using the following items:

- women’s physical safety;
- children’s physical safety;
- women’s emotional wellbeing;
- children’s emotional wellbeing;
- housing stability;
- financial stability;
- access to social support; and
- sense of identity.

Items included in this survey were drawn from a previous internal evaluation of a similar integrated response run in a different geographic location. Using the same items allowed a comparison across projects for internal purposes. All items were measured on a scale from 1–5.

Women’s safety and that of their children was categorised into very unsafe, unsafe, uncertain, somewhat safe or very safe. Women and children’s emotional wellbeing was measured as very poor, poor, uncertain, good or very good. Current housing stability was measured as very unstable, unstable, uncertain, somewhat stable or very stable. Financial stability was measured in form of women’s perceived financial struggle with answers ranging from ‘I’m struggling a lot,’ ‘I’m somewhat struggling,’ ‘I’m uncertain about my current financial situation,’ ‘My financial situation is somewhat stable and My financial situation is very stable.’ Access to social support was measured as ‘I have no social support at all,’ ‘I have very few people I can ask for support,’ ‘My social network is unaware of my current situation,’ ‘I have a few people I could ask for support or I have an extended social network I can ask for support.’ Women’s sense of identity was measured to capture whether women had lost a sense of who they are throughout the abusive relationship. Answer categories ranged from ‘I feel like I’ve lost a sense of who I am during this past relationship,’ ‘I feel like my sense of who I am has been somewhat affected by this past relationship,’ ‘I’m uncertain about my sense of identity,’ ‘I think I have a fairly good sense of who I am to I’m confident I have a very good sense of who I am.’

Respondents were asked to rate all items at initial contact with the integrated response and at conclusion of the six week support period to examine whether their overall safety and wellbeing had changed throughout the support period. While all surveys were self-administered, the high-risk intervention officer was available to clarify different questions or items and help clients with reading or writing difficulties at the time of survey completion. Paired sample t-tests were conducted to identify mean self-rated safety and wellbeing scores at time 1 and time 2, along with change observed over the six week support period.

In-depth interviews
In order to obtain some more in-depth information around women’s initial perception of safety and wellbeing and its sustainability after the initial support period, a small number of survey respondents were interviewed three months after the initial support period had ended. Ten women were approached for an interview by the local domestic violence liaison officer and a total of seven agreed to be interviewed by a researcher from the University of Queensland; either face-to-face or over the phone. Selection of interviewees was informed by the researcher to ensure diversity across a number of items, including demographic characteristics, different levels of satisfaction with the integrated response (identified from satisfaction survey results reported elsewhere) and different levels of improvement in safety and wellbeing over the six week support period.

Results

Survey

Results from the pre and post-support surveys provide a snapshot of women’s self-rated safety and wellbeing at initial contact and after the six-week support period through the police-led integrated response to domestic violence and indicate a statistically significant improvement across all items associated with women’s safety and wellbeing during the initial support period. Table 1 illustrates the mean scores for each safety and wellbeing item in the pre and post-support period, along with the identified change achieved throughout the support period.
The greatest improvement was observed for women’s immediate physical safety and housing stability, along with their own emotional wellbeing and their children’s overall wellbeing. Less improvement was observed for women’s financial situation, along with their access to social support and their sense of identity. These observations are not surprising since the greater improvement around immediate physical safety and housing stability is most likely associated with the initial removal of the perpetrator, the protective factors put in place in the form of a DVO, the leave-taking decision of some of the victims and their subsequent referral to specialist crisis accommodation for women who were unable to make their own alternative and safe housing arrangements. Other issues, including (re)establishing financial stability after separating from an abusive partner and rebuilding a social network, and a sense of identity or self-worth after an extended period of abuse, control and manipulation, are conversely likely to take longer to be resolved and often require continuous support (Briere & Jordan 2004; Edwards 2004). It also needs to be acknowledged that the relatively short intervention and initial follow-up period of six weeks is too short to draw any generalisable conclusions on whether the observed improvement in women and children’s initial safety and wellbeing is sustainable over time. The follow-up interviews discussed hereafter were designed to address some of these limitations.

**Interviews**

Findings derived from in-depth interviews with women supported through the initial integrated response three months prior to the interview suggest that victims’ needs for continuous support go beyond addressing some of the issues left unresolved during the initial support period (eg financial stability, social support and women’s sense of identity). Ongoing support may indeed be crucial to ensure that women and children’s initial improvement in safety and wellbeing is actually sustainable over time. The following sections highlight how women continued to be affected by the impact of domestic violence and how their safety and wellbeing partly deteriorated again after the initial support period ended.

At the time of the interview, all women had separated from their abusive partner. However, one woman was still residing with her (ex)-partner in the mutual rental property. This woman reported that her (ex)-partner was currently working on his anger issues through counselling and that they were aiming to work things out for the sake of the mutual children as long as he was able to maintain his non-abusive behaviour. The remaining six women had separated from the abusive partner in a spatial and emotional sense. Those who were legally married to the abusive partner were currently in the process of finalising the divorce, along with custody arrangements and property settlements where applicable.

Five of the seven women were currently relying on family and friends for housing support, predominantly for financial and safety reasons. Of these five, one woman was currently residing with a friend after being evicted from her previous rental place because she was no longer able to afford the weekly rent on her own. Two women moved in with their respective sibling; one because she felt safer living with her brother and one because she was relying on her sister for support with rental payments.

Another two women chose to leave their own properties vacant while moving in with their parents because they felt unable to protect themselves and their children while staying at their respective properties by themselves. These observations suggest that while women’s safety and housing stability may improve immediately after the initial separation from an abusive partner, partly due to access to crisis accommodation, it may not necessarily be sustainable without ongoing support (Baker et al. 2010; Edwards 2004; Spinney 2012). The following quote reflects the financial struggle of maintaining safe and stable housing arrangements experienced by some women:

> I had to get on a bus and move with the children…to somewhere that he didn’t know…what was quite difficult is that there are such long waiting lists and housing is a real big issue. I’ve now moved 25 times in nine years and I’m really, really struggling because every time you move house it costs so much money and then all the bills you get left behind with. They [the ex-partner] leave you with all the bills because everything’s in your name and now I’m finding it very difficult to actually get back on my feet. If my sister wasn’t living with me I wouldn’t even be able to afford to get through the week. I really need more help with housing. That’s a really big issue (I4).

In addition to the financial impact on women’s long-term safety and wellbeing, women further described how moving in with other family members seemed to be the only option to ensure greater levels of safety for themselves and their children because their ex-partners were believed to be more hesitant to engage in stalking and further physical abuse while women were residing with other (male) family members.

> He’ll come in the middle of the night on his way home from the pub and smash my windows…He’ll stalk my daughter at the park. He’ll drive past the house in different cars. I’m not having my kids go through that anymore. They’re safer at mum and dad’s and I don’t think he’d go to my mum and dad’s…there’s four dogs there, too…So I sort of feel a bit more secure there…I also record everything [breaches] myself at home and I go to the police when I have hard evidence…but he’s slippery, everything just slides off. Nothing sticks, you know? (I2)

While the proactive measures taken by most women represented suitable short-term solutions to re-establish immediate safety and a housing solution that was removed from the abusive ex-partner, women also voiced their desire to move back into their own properties because they did not want to crowd their parents’ space, especially in those cases where these women owned a property that was currently vacant:

> There was an order [in place] so he shouldn’t have done what he did. But since he did it once there was every chance he’d do it again so after the attack I actually moved out of the house and moved in with my parents,
which left the house vacant but at that point they said ‘Move. It’s better to be safe’. I’d like to be back in the house by Christmas but at this stage I don’t know…(7)

Only one woman was currently residing in her own property with her dependent children and no other family support. This woman felt uncertain about her own and her children’s safety due to his ongoing stalking behaviour but at the same time refused to give up her children’s familiar home environment and their social support network by moving:

We’ve got my mum and dad who are fantastic. And a good community at school…I would like to know that my kids are safe at all times but I can’t control what he does. I do the best I can to make sure they’re safe…but I won’t be bullied into moving because this is our home (6).

The described housing scenarios illustrate that women struggle in achieving one of the integrated response’s main objectives, namely establishing safe and sustainable home environments for themselves and their dependent children. While most women felt their current housing arrangements were somewhat safe at the time of the interview, the majority of these arrangements were temporary solutions that were unsustainable in the long run. Even women who were in a position to afford sustainable housing arrangements (eg their own property) experienced the post separation phase as challenging and felt unable to maintain their own and their children’s safety unless residing with other family members for support and protection.

The ongoing abuse experienced by several women post separation (including stalking behaviour, subsequent physically and verbally abusive incidents recorded as DVO breaches and what women described as ‘power games’ around property settlement and child custody matters) not only negatively affected women’s housing stability but further delayed women’s and children’s overall recovery from the short and long-term impacts of domestic violence. In particular, resolving legal issues (family law matters more so than criminal law matters) involved lengthy processes that prevented women from moving on and offered further opportunities for the perpetrator to exercise their last remaining forms of power (eg by delaying court matters around custody and property settlements). Women described these experiences as time and energy consuming for themselves and primarily unsettling for their children. Past research suggests that women and children’s long-term recovery from the detrimental impacts of domestic violence is strongly affected by their experienced safety and stability post separation, with scenarios of ongoing abuse and housing instabilities like the ones observed in this study significantly impeding the recovery process (Briere & Jordan 2004). Findings therefore point towards the need for ongoing support beyond the initial stage of crisis (Edwards 2004; Spinney 2012) and greater perpetrator accountability post separation to minimise ongoing violence and support women and children’s long-term safety and wellbeing (Day et al. 2010; Edwards 2004).

Discussion

Findings presented in this paper reveal an overall improvement in women and children’s safety and wellbeing throughout and beyond their initial involvement with an integrated response to domestic violence. Pre and post-support survey results indicate a clear improvement of women’s overall situation during the initial support period. These observations are in line with previous research findings that highlight the value of integrated responses to domestic violence in supporting women and children’s transition towards safety (Day et al. 2009; Robinson 2006; Spinney 2012). Data collected through qualitative in-depth interviews to further contextualise some of the survey results three months after the initial support period however alerted to women’s need for ongoing support. This indicates the need for a two-fold intervention strategy to address women and children’s initial need for crisis support, along with their ongoing need for support to sustain initial improvement around safety and wellbeing. A number of women who felt safe and secure during the initial (crisis) support period came to realise that some of the initial safety measures put in place were not sustainable long term without ongoing support. As a result, these women had experienced different forms of housing instabilities after the initial support period, predominantly as the result of their ex-partner’s ongoing abusive behaviour. Similar to findings revealed by past research on women and children’s safety after leaving domestic violence (Edwards 2004; Moe 2007), women in the current context found themselves in a position where they felt they had to take proactive measures to protect themselves and their dependent children from the ongoing abuse. These measures often included sacrificing housing stability for the sake of greater perceived safety. While these women felt they had achieved an improved sense of safety and an extended supervision network for their children to deter unwanted or unauthorised child contact by the abusive ex-partner, they also acknowledged that the newly created housing arrangements were not sustainable in the long run. The second component of a two-fold integrated response strategy therefore needs to incorporate a needs assessment that goes beyond initial crisis support to enable women to maintain their newly established safety and support them in transitioning towards safe and sustainable housing solutions.

Conclusions and implications

The observed findings raise some key implications for the future delivery of (integrated) responses to domestic violence. While integrated responses have been identified as good practice models by a number of national and international evaluations (eg see Cussen & Lyneham 2012; Day et al. 2009; Robinson 2006; Spinney 2012), findings presented in this paper are also applicable to other forms of responses to domestic violence, including less formalised partnership responses that do not necessarily follow a fully integrated approach. First and foremost, practical responses to domestic violence need to consider victims’ priority and long-term needs to incorporate support mechanisms
that are able to establish immediate safety and subsequently support women in their transition towards safe and sustainable housing arrangements. With domestic violence being identified as the main reason for homelessness among women with dependent children and over half of clients who access supported accommodation services being female (AIHW 2007; Chamberlain & McKenzie 2008), access to safe and sustainable housing arrangements is a key necessity. Facilitating this access can, however, be challenging due to a shortage of crisis accommodation, as well as affordable subsequent housing (Baker et al. 2010; Spinney 2012).

From a policy perspective, it is therefore crucial for both the Australian and territory and state governments to further invest in affordable housing solutions for women with dependent children. While initiatives such as the National Rental Affordability Scheme or private rental brokerage schemes are one step towards more affordable housing solutions, it still excludes a large proportion of women and children affected by domestic violence as potential tenants because their financial means are often too restricted to enter the private rental market (Edwards 2004; Wilcox 2000). In addition to limited financial means, other factors including having been blacklisted due to prior evictions, rental arrears and rental property damage caused by the abusive partner throughout the course of the abusive relationship prevent women affected by domestic violence from (re)-entering the private rental market. This can result in victims with dependent children relying on access to public housing, which is often associated with lengthy waiting periods despite the priority given to women with children affected by domestic violence in the public housing sector (Baker et al. 2010; Spinney 2012).

Other alternatives to minimise the risk of housing instabilities for women and children affected by domestic violence can be found in the Staying Home, Leaving Violence or Safe at Home-type schemes, which enable women to remain in the family home to start with while the perpetrator is ordered to leave even if the perpetrator is the primary tenant or owner of the relevant property. Comprehensive Staying Home, Leaving Violence and Safe at Home schemes are currently limited to New South Wales, Tasmania and Victoria (Edwards 2004; Spinney 2012). Other states and territories have incorporated provisions for exclusion orders into their domestic violence and tenancy legislations that force the perpetrator to seek alternative accommodation. This allows victims to remain in the home while the perpetrator is forced to find alternative accommodation (Wilcox & McFerran 2009). While these approaches are an important step towards greater perpetrator accountability and less disruption to women and children’s everyday lives, they may not be suitable for all women. Research shows that some women, especially those with highly dangerous (ex)-partners who cannot be deterred through legal mechanisms from repeatedly threatening the victim, may not feel safe remaining in the known family home location (Edwards 2004; Wilcox & McFerran 2009). In order to achieve adequate safety and protection of women and children affected by domestic violence, any response—whether aiming to keep women and children in their initial home or aiming to transition them into safe, alternative housing arrangements—therefore requires a stronger focus on perpetrator accountability, which goes beyond the initial removal of the perpetrator from the mutual premises (Edwards 2004; Spinney 2012; Wilcox & McFerran 2009). While women and children should be able to rely on protective mechanisms available to them through state and territory domestic violence legislations and their enforcement through local authorities, including police, courts and corrections, a more holistic approach needs to be taken to perpetrator accountability. Given the mixed evidence around the risks and benefits associated with criminal justice responses that promote greater perpetrator accountability in isolation of other community responses (eg see Braaf 2008; Douglas 2008), it would be irresponsible to simply advocate for pro or mandatory arrest policies. Instead, perpetrator accountability needs to become a core component of integrated responses that couple initial (legal) accountability with subsequent monitoring and treatment options for perpetrators (eg see Day et al. 2010). Incorporating greater perpetrator accountability as a core component allows integrated responses to address victims’ needs, support their safety and wellbeing through greater collaboration, communication and shared monitoring responsibilities, and relieve women from having to take their own protective measures that increase their safety but may decrease their housing stability in return.

To ensure ongoing safety and wellbeing of women and children, integrated responses need to incorporate a two-fold approach that combines short-term crisis support with long-term tangible support that holds offenders accountable and supports women in establishing safe and sustainable home environments for themselves and their children.

Acknowledgements

The research was funded by the Queensland Department of Communities and Queensland Police Service, with in-kind support from the regional domestic violence support service.

References

All URLs correct at April 2014


