

# SAFE+EQUAL

Standing strong  
against family  
violence

## Co-designing the foundations for a client outcomes framework for specialist family violence services

September 2022 / Project Closure  
Report

## Acknowledgement of Traditional Owners

### **Acknowledgement of Aboriginal and Torres Strait Islander peoples**

Safe and Equal acknowledges Aboriginal and Torres Strait Islander peoples as the traditional and ongoing custodians of the lands on which we live and work. We pay respects to Elders past and present. We acknowledge that sovereignty has never been ceded and recognise First Nations peoples' rights to self-determination and continuing connections to land, waters, community and culture.

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Think Impact is a specialist social impact consultancy based in Melbourne. Our focus is to support, enable and inspire organisations, across all sectors, to manage for better impact.

### **Commissioned by Safe and Equal**

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### **DISCLAIMER**

This report has been prepared by Think Impact on the instructions, and for the benefit, of Safe and Equal in relation to supporting the development of a client outcomes framework for specialist family violence services. It is not to be used for any other purpose.

Although every effort has been made to ensure the accuracy of the material and the integrity of the analysis presented herein, Think Impact accepts no liability for any actions taken based on the contents of this report.

## **Key contributors**

The project was implemented through a co-design approach. As part of this, the voices of victim-survivors were placed at the centre of conversations and were the most significant influence on the final design of the outcomes framework. Regular reflection and opportunities for feedback on the process overall were also provided to victim-survivors.

As a result, Think Impact would like to acknowledge the contribution of all members of the Safe and Equal Client Outcomes Measurement Survivor Advocate Advisory Group (‘the advisory group’) for their important contribution to the development of the client experience outcomes framework.

## **About Us**

This project represented a collaboration between two organisations: Safe and Equal & Think Impact

### **Safe and Equal**

Safe and Equal is the peak body for specialist family violence services that provide support to victim survivors in Victoria. We are an independent, non-government organisation that leads, organises, advocates for, and acts on behalf of our members – with a focus across the continuum from primary prevention through to response and recovery.

We work towards a world beyond family and gender-based violence, where women, children and all people from marginalised communities are safe, thriving and respected.

### **Think Impact**

Think Impact is a leading Australian social impact and sustainability advisory firm. Our purpose is to enable organisations to manage for better impact. We are committed to a new prosperity, using our work to redefine and move towards a world that accounts for the wellbeing of people and the environment in everything we do.

Our team comprises highly experienced impact management, evaluation, sustainability and reporting specialists. We are committed to evidence-based practice and using approaches that support our clients to improve their future readiness and develop solutions that address our most complex problems.

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# **1. Introduction**

## **1.1 This report**

This is the final report from the first stage of development of a client outcomes framework for specialist family violence services. Its purpose is to describe insights, methodology, and recommendations that arose from the project. It also includes a draft questionnaire to support data collection. As part of this, the report is intended to be used as a basis and starting point for future development of the client outcomes framework.

The report's primary audience is victim survivors, specialist family violence services, and Safe and Equal. Secondary audiences are policy makers in the family violence service sector. Tertiary audiences are people interested in understanding how to run co-design processes in the family violence sector, or else how an outcomes framework might be developed.

## **1.2 Background**

On 22 February 2015, the Victorian Government established a Royal Commission into Family Violence. This was created in recognition of the significant harms caused by family violence. The Royal Commission also recognised that policy responses to family violence had – to date – been inadequate.

In handing down its findings, the Royal Commission identified several important and significant reforms for the Victorian family violence response system. As part of this, the Commission acknowledged that there is an identified lack of a shared understanding of client outcomes; whether services are meeting the needs of clients; and whether there are sufficient resources for services to meet demand (Royal Commission 2016).

In February 2022, Safe and Equal began a process to develop a client outcomes framework for specialist family violence services to address some of these gaps. Safe and Equal had identified such a framework as a necessary step towards a broader approach to monitoring service impact and efficacy. As part of this, the framework is intended to:

- centre client experiences in our understanding of the efficacy of specialist family violence services
- contribute to evidence-based decision-making and embed continuous improvement processes into the design, delivery and evaluation of services
- assist Safe and Equal and its members to understand whether the specialist family violence sector is supporting victim-survivors when, where, and how they need it
- help to identify future improvements and enable a whole-of-system response to client needs.

The process to develop the outcomes framework was designed to elevate the lived experience of victim-survivors. It did this by ensuring that the outcomes framework was co-designed with an advisory group of survivor-advocates. The advisory group was recruited from within Safe and Equal's Expert Advisory Panel and the Survivor Advocate Alliance. The advisory group was comprised of five survivor advocates with diverse experiences of family violence – Mishka, Elvis, Tash, Issara and Amar.

The intention of the process was to develop a draft framework for future work. As a result, the framework included in section 3 represents a starting point and tool for further discussion. In addition, much more work needs to be completed to develop metrics, indicators and data collection processes. Given this, section 5 describes and prioritises the necessary steps to ensure that the final framework meets the needs of, and enjoys a high level of uptake in, the specialist family violence service sector.

## **2. Methodology**

There were five main components to the methodology for this project:

- a rapid document review
- a co-design planning process
- a series of co-design workshops
- framework development
- this report.

### **2.1 Rapid document review**

To commence the process, documents were reviewed to understand the family violence service system in more depth; identify good practice co-design in the family violence sector; explore and adapt guiding frameworks and documents; and ensure that the process is underpinned by a focus on the voice of service users. The review also explored potential domains of best practice; common outcomes that victim-survivors are likely to seek from specialist family violence services; and initial ideas for indicators for both adult and child clients.

The documents reviewed through this process were:

- Burkett: An introduction to co-design
- Cross-Sector Alliance: Principles of co-design
- Department of Health & Human Services (DHHS): Client voice framework for community services
- DHHS: Family violence outcomes framework
- Domestic Violence Victoria (DV Vic): Code of practice for specialist family violence services
- University of Melbourne: Family violence experts by experience framework
- Fair Deal Forum: Principles of co-design
- Family Safety Victoria (FSV): Client partnership strategy for The Orange Door
- Safe and Equal: 2022 Budget submission
- Safe and Equal: Measuring family violence service demand project (Phase One Outcomes Report)
- West Australian Council of Social Service: Co-design toolkit
- Federation of Community Legal Centres: Outcomes measurement framework.

## **2.2 Planning process**

A series of meetings between Think Impact and Safe and Equal resulted in the development of a co-design process. This document considered:

- logistics of co-design sessions (i.e. date, time, venue)
- purpose and focus of each session
- roles of the two organisations at each session.
- parallel consultation with sector representatives to support the co-design process
- how the principles of good co-design would be applied in the context of the project.

Due to timing and resource limitations, the parallel consultation outlined in the document was not undertaken. Recommendations have been made later in this report as to how this might be done in the future.

## **2.3 Co-design workshops**

Five workshops were held to support the co-design of the outcomes framework. The main participants in the workshops were five members of an advisory group of survivor-advocates.

Based on the document review, the workshops drew on some good practice principles of co-design processes in the social services sector. The specific principles adopted, and how these were implemented are outlined in Appendix A.

Workshops were held fortnightly from 10 May 2022 until 5 July 2022. Workshops involved a 'rotating chair' approach, with staff from Safe and Equal and Think Impact alternating roles between facilitator and note-taker, depending on the specific topic under consideration. All workshops were online via Zoom.

A schedule of workshops is provided in Appendix B. Overall, the following questions were explored as a way of generating the content for the framework:

- What is the need we are addressing? How has the need arisen? How do we know this (i.e. what is the evidence base)?
- What might get in the way of addressing the need?
- What do clients want from the service system? To what extent are they receiving this? What gets in the way?

In addition, the survivor-advocate advisory group was given an opportunity to reflect on the co-design process overall. This occurred in the final workshop. This discussion focused on what elements of the process worked; what could have been improved and what recommendations might we make in the future.

## **2.4 Framework development**

The framework was iteratively developed alongside the workshop input. First, workshop discussions were thematically analysed. These were then explored inductively as a way of identifying potential outcomes, enabling factors and their relationship to each other.



Several draft frameworks were then provided to the advisory group for consideration and refinement.

A draft questionnaire was also developed as part of the process. This is included in Appendix D. This was closely based on the ways in which outcomes were defined through the framework. It will need further refinement following wider consultation with the sector, victim-survivors and member organisations.

Finally, a draft outcomes framework was presented to Safe and Equal staff on 30 June 2022. This produced a robust discussion about the utility of the framework and potential areas for refinement.

## **2.5 Project closure report**

The final element of the methodology is this report, which has been designed to document the overall approach; describe the outcomes framework; consider any lessons learnt; and make recommendations for future development of the outcomes framework.

As mentioned above, all frameworks, tools, metrics and indicators included in this report represent a starting point for future discussion and consultation within the sector, as well as the basis for development of additional documents and frameworks. The report should therefore be read in that light.

## **3. Outcomes framework**

### **3.1 Overview**

An outcomes framework is a statement of what outcomes a program, organisation or project is trying to achieve and for whom. The term 'outcome' refers to changes that take place for people, communities and society because of activities. Changes can be positive or negative, intended or unintended.

Once the outcomes have been established, then the outcomes framework describes indicators that allow organisations to test whether those outcomes are in fact being achieved. Outcomes frameworks may also include data collection instruments (e.g. surveys, interview questions) to collect data against the indicators and metrics.

### **3.2 Scope**

The draft outcomes framework in this report focuses on clients who have accessed specialist family violence services. The role of the framework is to define the outcomes that are achievable within the relationship between workers and their clients. It is not intended to apply to outcomes that may be more appropriately defined at a system level or may be outside the influence of specialist family violence services to achieve.

As described above, the outputs developed to date are nascent. Further work is needed to consult and test this model with a broader range of stakeholders and people with diverse lived experiences. To date, the process has focused on the experiences of adult clients. It therefore does not centre the experience of children and young people who access specialist family violence services. Thus, further work also needs to be done to explore the indicators and outcomes for children and young people. This work is further described in section 5.

Given this, and as part of this process, we have done some initial consideration of how the client outcomes framework differs to other tools and frameworks in the sector. This discussion is included in Appendix C, while the process to develop this analysis further forms part of section 5.1.

In addition, the outcomes framework focuses its analysis on the diverse range of victim-survivors that access 'mainstream' specialist family violence services in Victoria. Further work also needs to be done to understand how to articulate and measure outcomes specific to various cultural contexts. Section 5.4 recommends considerations for progressing this in future.

Finally, emphasis has been placed on the subjective experience of clients with respect to the service and/or worker. This has been done through using the phrase 'Client feels' (or similar). This has been done to ensure that the framework places clients at the centre, and to accentuate the client experience within the framework.

### **3.3 Structure**

As at time of writing, the framework has three elements: enabling conditions, client outcomes, and a questionnaire. These elements are all presented in draft form. Indeed,

and as explored in detail in section 5, further work will be needed to develop metrics, indicators and instruments.

### **Enabling conditions**

Enabling conditions are the characteristics of the client-worker relationship that will allow for client outcomes to be achieved. In this sense the client-worker relationship is understood as a proxy for client-service relationship, with the worker likely to be the most direct representative of a service.

Importantly, the enabling factors are not outcomes in-and-of themselves but still need to be in place. In other words, they are necessary but not sufficient for improvements in client outcomes. Assuming the client-worker relationship is working effectively, then additional work will still be needed to achieve client outcomes. The enabling conditions have been represented as a circle to reflect that they are all related to each other.

The components of the client-worker relationship that were most strongly revealed through the consultation were:

- **Trust:** clients need to trust both the service and the worker
- **Client voice:** clients need to feel like their voice is sought, heard and respected
- **Transparency:** clients need to feel capable of making fully-informed decisions, and that they can hold services and workers to account.
- **Safety:** clients need to feel both culturally and physically safe in the service, and they need to understand how their information is kept safe.

### **Client outcomes**

Client outcomes are the specific changes that we hope to see in a client's circumstances and experience as a direct result of engaging with a particular service. These have been represented in three inter-locking spirals to represent their interconnectedness, but also the ways in which they reinforce each other.

Themes from the workshops supported outcomes in three domains: Connection, personal power, and wellbeing.

- **Connection:**
  - Clients should feel less isolated.
  - Clients should feel like they can develop relationships with their community and other social supports.
  - Clients should feel their choices to maintain relationships and/or manage connections with family, culture and community are respected.
- **Personal power:**
  - Clients should feel better equipped to achieve their goals.
  - Clients should feel engaged in making decisions about all aspects of service provision.
  - Clients should feel more confident to advocate for themselves.
- **Wellbeing:**
  - Clients' mental and emotional wellbeing should improve.
  - Clients should have an increased understanding of safety risks and strategies.

- Clients should have an increased awareness of their strengths and strategies to support their safety.

### Draft questionnaire

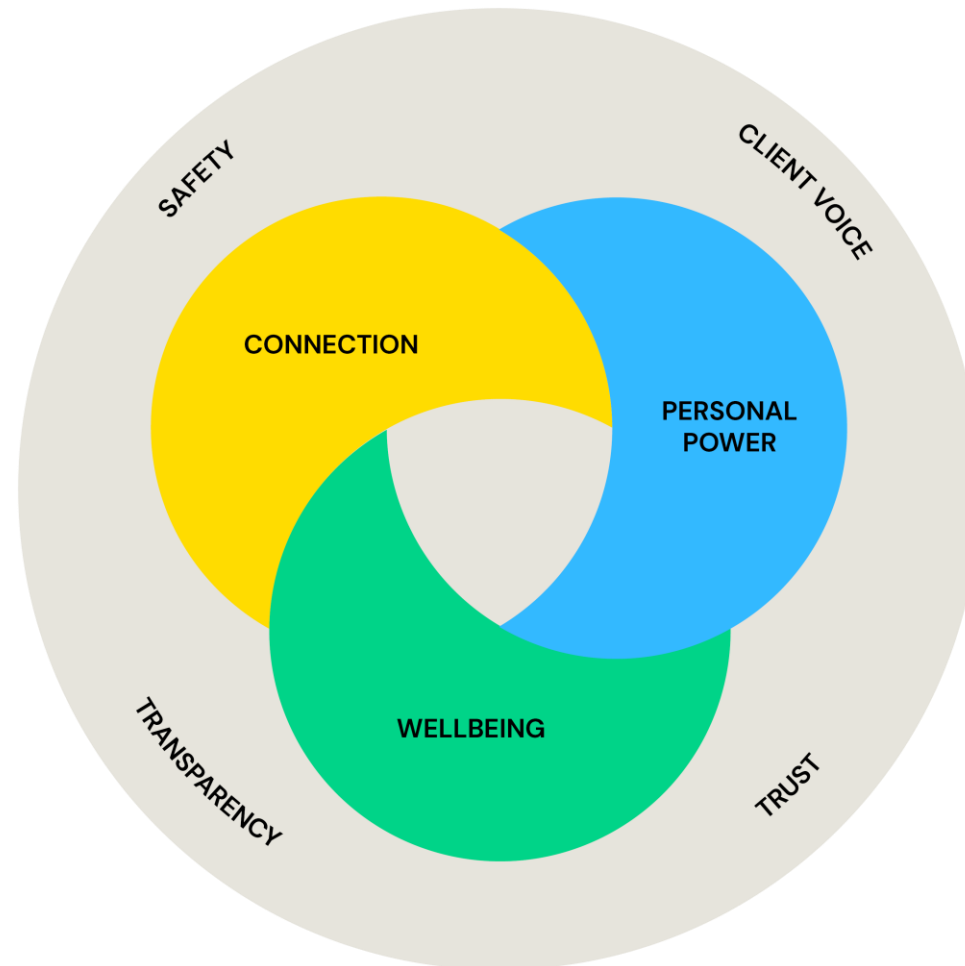
Finally, we have developed a draft questionnaire. The outcomes presented in the framework to date have been incorporated into a draft questionnaire, which has been provided in **Error! Reference source not found.**. The questionnaire has been provided for indicative purposes, to support further consultation with victim-survivors and specialist family violence services about the collection of outcomes data. The most appropriate mechanism, timing and responsibility for data collection would be determined as part of these discussions.

Through the process, the following approaches to data collection were reported as useful:

- A combination of closed and open-ended questions
- Opportunities for multiple forms of feedback (i.e. interviews, questionnaires, etc.)
- Consideration of privacy and trust issues, particularly when administering paper-based questionnaires
- Distribution of online questionnaires through SMS
- Making interpreter services available
- Clear communication of rights and how information will be used
- Employing (where possible) someone independent of the service to conduct interviews
- Collecting data from people twice (i.e. once at the end of service and again 12–24 months later)
- Reflective sessions in groups.

This input should be considered for future design of data collection processes.

Figure 1: Draft outcomes framework



**Figure 2: Draft enabling factors**

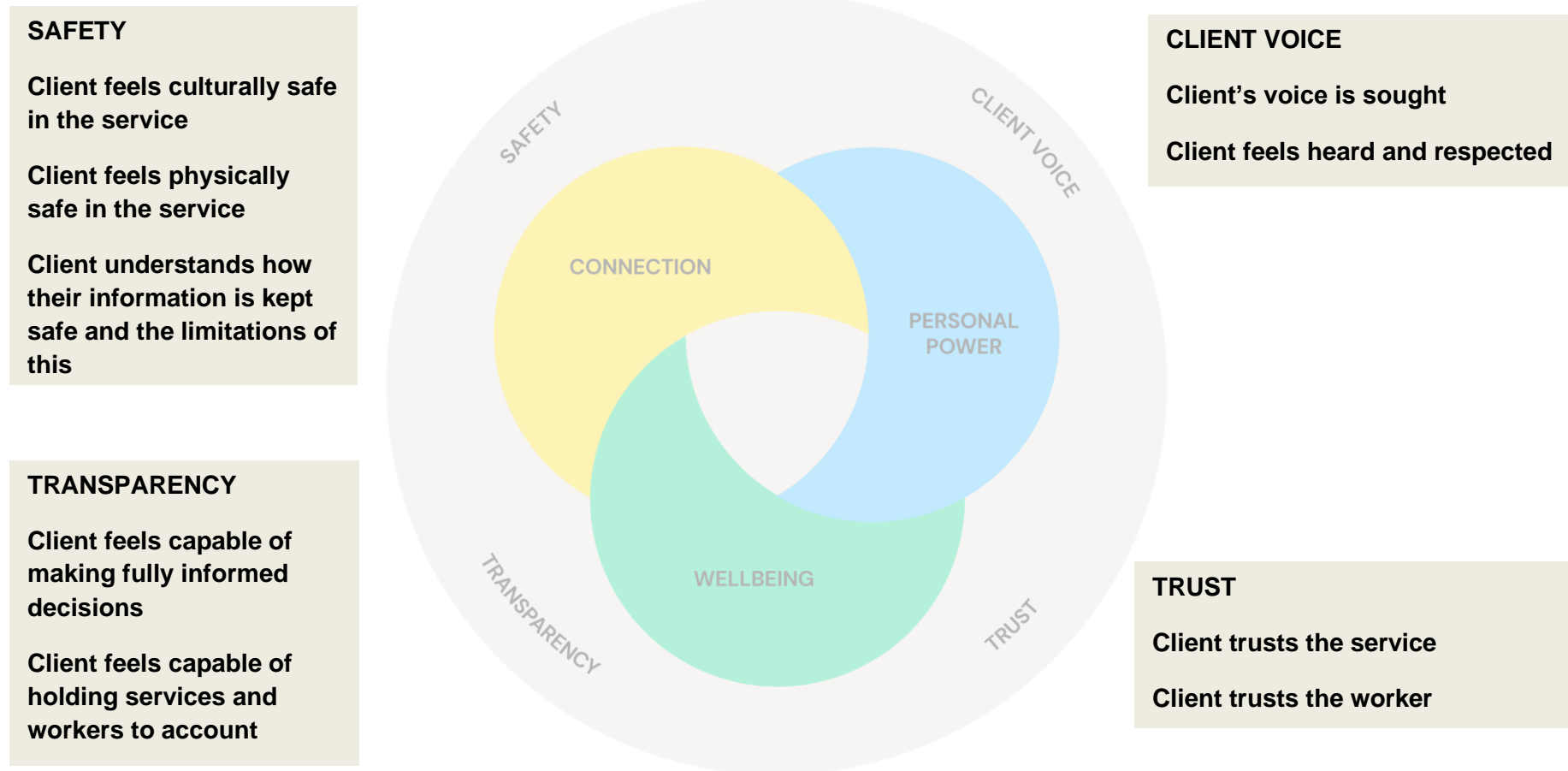


Figure 3: Draft client outcomes

### Connection

Client feels less isolated

Client develops relationships with community and social supports

Client choices to maintain relationships and/or manage connections with their family, culture and community are respected

### Personal power

Client feels better equipped to achieve their goals

Client feels engaged in making decisions about all aspects of service provision

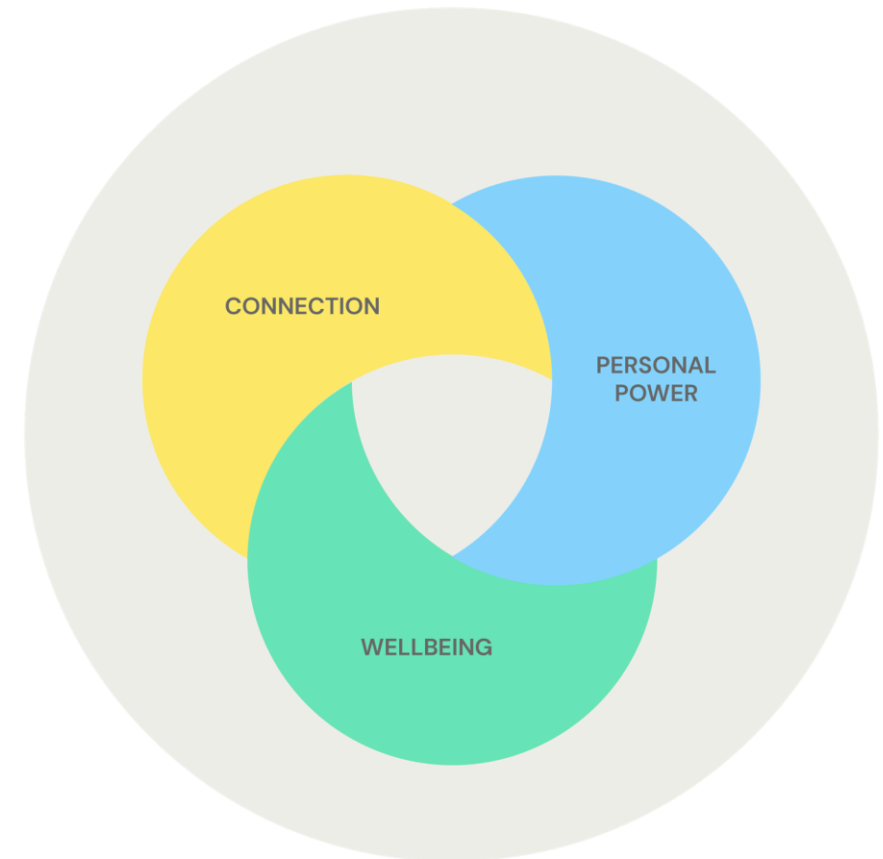
Client feels more confident to advocate for themselves.

### Wellbeing

Client's mental and emotional wellbeing improves

Client has increased understanding of safety risks and strategies

Client has increased awareness of their strengths and strategies to support their safety



## **4. Insights from the co-design process**

The process produced several insights regarding how to run a co-design process with Safe and Equal stakeholders in the future. In the final co-design workshop, participants were asked what had worked about the process, what didn't work, and what improvements might be made. In addition, Think Impact have provided some general comments and insights from our perspective.

### **4.1 Participants perspectives**

#### **What worked**

Overall, participants felt that the process had worked very well and had allowed for a multiplicity of perspective on the development of the outcomes framework.

More specifically, workshop participants commented on the value in establishing a group in which several people already knew each other (i.e. from the Expert Advisory Panel and Survivor Advocate Alliance). This meant that the workshops felt safe; there was trust and rapport already; and that there were established ways of working.

Related to this was the fact that it was a group setting rather than individual interviews. Workshop participants indicated that having several people in a workshop together meant that they allowed for ideas and comments to 'bounce off' one another. This meant that deeper insights could be created and a shared meaning could ensue. This would not have been possible with individual consultations.

Workshop participants also reported that the mechanics and structure of the sessions was also conducive to productive and effective ways of working. Having a workshop every fortnight was considered to have worked well as it allowed easy recall of previous conversations. Having a longer, 5-hour session early in the process was also considered to be productive. The group size (five people) was also reported to be 'about right'. For future, group sizes should be somewhere between five and seven. Finally, having materials circulated prior to each session was also helpful in providing participants with notice as to what was going to be discussed.

#### **What didn't work**

There were also several areas through which the process might be improved in future. The first area for future consideration is inclusion of people who may not speak English as their primary language. Some participants reportedly struggled with some of the language used through the process. This was reflective of the diversity of the group. Not all group members spoke English as a primary language, and some were not familiar with some of the more technical jargon that was used. As a result, future co-design processes should create mechanisms and approaches to mitigate some of these barriers (including the creation of a 'guardian' role – see below).

Second, some workshop participants reported that it was difficult at the start of the process to understand what was being produced. Some participants reported being visual



learners and so providing at the start a visual representation or example of the final product was suggested as being helpful.

Third, all sessions were online, and participants felt that the process would have benefitted from some in-person sessions. At the same time, it was recognised that online sessions provide a degree of flexibility and convenience for participants and that online options should be retained for those who may find it difficult to attend in-person.

Finally, some workshop participants felt the sessions were a bit too long and shorter meetings might have been helpful.

### **Improvements**

Other specific improvements recommended by members of the survivor-advocate advisory group were:

- have more regular breaks
- use accessible language and provide multiple options for people who may not speak English as a first language
- use visual boards or provide people with the option to add their thoughts on sticky notes
- use break out rooms or platforms that can be used on people's phones (i.e. Miro, Jamboard)
- agree on a protocol for people who might not be following a particular conversation (i.e. hand signals or virtual signals for 'slow down' or 'please explain differently').

## **4.2 Think Impact perspectives**

First, we acknowledge the value brought to this process through creating a group of survivor advocates who have worked together before within the Expert Advisory Panel and Survivor Advocate Alliance. If this is not possible for future groups, then more time should be built into the process to build trust and rapport and ensure that everyone is on an equal footing. That said, too much familiarity may be counterproductive in that it risks producing a homogeneity of views. While this does not appear to have happened in this instance, it is something to keep in mind for future iterations.

Second, there is always a trade-off between group approaches and individual approaches. While group dynamics are helpful for collective sense-making, they can obscure marginalised voices (i.e. people who don't feel confident in their English fluency). Future processes would be well advised to include a variety of different opportunities for people to contribute, including one-on-one interviews for people who may not be familiar with the technical language used in the sector. While these issues were well-managed in this process, it is, again, something to be mindful of in designing a similar co-design process in the future.

Third, we agree that in-person sessions would have benefited the process, as would have some initial one-on-one conversations with each individual advisory group member to understand their individual needs and interests in the project. It is also a very helpful way of building rapport quickly.

Finally, given the sensitivity of the topic, and the differing experience and backgrounds of participants, it may also be valuable to establish a role of ‘guardian’ as part of the co-design sessions in the future. The co-design sessions for this process included a facilitator and scribe. The guardian would be a third person involved in managing the process. Their primary responsibility would be on ensuring the health of the group and bringing a group back to its intention. This role is fundamental in the facilitation practice known as Circle, which may also be a beneficial technique for future in-person co-design processes.<sup>1</sup>

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<sup>1</sup> For more information on Circle facilitation techniques, please see Baldwin & Linnea (2010), *The Circle Way: A Leader in Every Chair*, Berrett-Koehler, San Francisco.

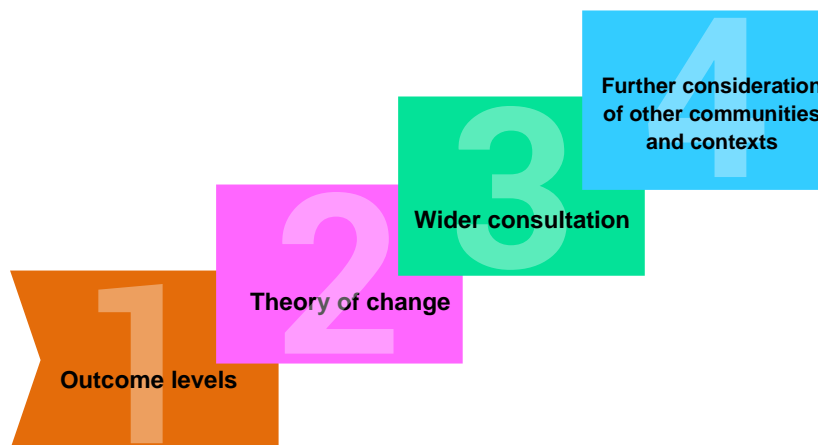
## 5. Recommendations for future work

The draft outcomes framework included here is a first step that put victim-survivors at the centre. Future stages of the project should build on this initial work and develop it further so that it can meet the needs of a wide range of sector stakeholders.

As part of this, we recommend the following as crucial next steps to support further refinement and embedding of the framework across the sector:

1. Define the difference and interactions between service-level and system-level outcomes
2. Develop a theory of change for client outcomes
3. Conduct wider consultation
4. Further consideration of specific age groups, communities and contexts

This section of the report explores each of these steps in more detail. Figure 4 provides an overview of the next steps.



**Figure 4: Next steps**

### 5.1 Map outcome levels

A core intention of the outcomes framework is to understand what changes for clients because of the services they receive from specialist family violence services. This is a complex and challenging ambition given services are delivered alongside other social supports and in the context of system-level constraints. These constraints include overwhelming client demand; shifting infrastructure, policy and systems; and insufficient investment in service capacity to meet demand.

Given this context, stakeholders involved in this process noted that services should not be held accountable for outcomes that should instead be achieved by other components of the service system (i.e. housing, health care, education/employment, criminal justice) or that are not achievable due to system-level influences or constraints.

While the project team and survivor-advocate advisory group sought to produce a client outcomes framework that reflects outcomes that are within the control of a service to

support clients to realise, further work is recommended to map service-level and systems-level outcomes. Addressing these links will be vital in articulating the unique value proposition of the client outcomes framework for specialist family violence services and to ensure uptake of the framework throughout the sector. Ideally, this would involve:

- a conceptual discussion defining what counts as a system-level versus service-level outcome
- drawing on existing outcomes frameworks in the sector, a desktop exercise describing overlaps and interactions
- a facilitated reflection session with key experts to consider and critique the outputs of the first two steps.

Trialling and refining measurement of service-level and system-level outcomes over the longer-term would be necessary to enhance validity. In the meantime, some preliminary observations can be made as a starting point for future discussion and for the process outlined in steps 1 – 3 above. These are provided in **Error! Reference source not found.**

## **5.2 Develop a theory of change for client outcomes**

A theory of change is a comprehensive description of how change is expected to occur in a particular program, organisation, project or initiative. It also defines who is expected to experience the change, in what ways, to what extent, and over what timeframe. While an outcomes framework defines what changes might occur, a theory of change describes how those changes will occur.

Typically, theories of change are developed before an outcomes framework. This allows stakeholders to understand, at a high degree of abstraction, the ways in which change happens. As part of this, it describes the underlying mechanisms or processes of change, factoring in inputs, activities, and outputs – not just outcomes. An effective theory of change will also describe the assumptions underpinning a model, which can also be used as a way of understanding why a program is or isn't working.

Developing an outcomes framework before a theory of change is not necessarily a problem as a theory of change can be 'retrofitted' to the outcomes framework. This process can also be used to understand whether the outcomes described in the framework are achievable by specialist family violence services given their day-to-day activities and outputs. Ideally, creating a theory of change will also give stakeholders an indication of what changes are reasonable to expect in the short-, medium-, and long-term.

Moreover, a theory of change will be a useful exercise in understanding a client journey in more detail. Indeed, the data for these two outputs are likely to be very similar. As a result, a series of workshops combined with desktop analysis of key documents could support the development of a theory of change, as well as providing significant insights into the client journey.

As a result, developing a theory of change is another important step that should be prioritised in this process.

The development of the outcomes map and theory of change may produce findings and insights that have bearing on the enablers and outcomes described in the draft outcomes framework above. As a result, once these two additional processes have been completed, they should be used to test and refine the current version of the client outcomes framework and the indicative questionnaire.

### **5.3 Conduct wide consultation**

Wider consultation should occur with victim-survivors, specialist family violence services and policy makers.

#### **Consultation with victim-survivors**

This co-design process has involved detailed discussions with victim-survivors through the survivor-advocate advisory group. However, this only included a very small group of five victim-survivors. As a result, additional consultation with a larger number and a broader range of victim-survivors is likely to increase the utility and validity of the framework.

Consultation with victim-survivors would ideally focus on the extent to which the enabling conditions and client outcomes resonate with the experience of victim-survivors as they access services. It should also focus on what victim-survivors ideally want from their experience.

#### **Consult with Specialist Family Violence Services**

Consultation with Safe and Equal's member organisations would also help support the utility, validity and uptake of the framework within services. This consultation would ideally be undertaken with a representative sample of services across geography, size, client demographics, and years in operation. It would focus on the extent to which the framework resonates with member organisations' understanding of good and effective client experience; what is going to be possible and desirable from the perspective of data collection and analysis; and the role of Safe and Equal in data collection processes.

A draft questionnaire has been provided to support this consultation and specifically discussions about the mechanisms for, timing of and responsibility for data collection. This consultation may result in the need for further development of data collection instruments.

#### **Consult with policymakers**

Finally, it would also be beneficial to conduct additional consultation with policymakers. This consultation would help ensure alignment with similar government frameworks and tools; avoid duplication of efforts; and build the authorising environment for the implementation of the client experience framework.

### **5.4 Further consideration of specific communities and contexts**

As previously acknowledged, this work is nascent. Further work therefore needs to be undertaken to test the framework with a broader range of stakeholders. This should include victim-survivors from different cultural backgrounds and contexts, as well as

different ages. Indeed, the need for further work to ensure the framework reflects the experiences of victim-survivors from different cultural contexts and at different ages was a key theme in the co-design workshops.

For instance, the work completed to date has not been developed with the specific perspectives of First Nations peoples. Further exploration with community representatives is recommended. This would consider how a client outcomes framework can reflect and support self-determination and cultural safety within non-Aboriginal service contexts. It would also consider the potential application of a framework like this within Aboriginal Community Controlled service contexts. The work completed to date should therefore be shared with key representatives from Aboriginal Community Controlled Organisations for their consideration in relation to any client outcomes measurement work being developed and led by those communities. Likewise, the specific experiences and circumstances of victim-survivors who are children and young people also need further exploration.

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## Appendix A – Good practice co-design

Principle of good co-design	How it was practiced through the project
Work backwards from the desired outcome	The final output is a client outcomes measurement tool. The overall approach was designed to ensure that this was what was ultimately achieved in the end. A high-level sketch or examples of what might emerge from the process was presented to the advisory group early in the process.
Alignment on meaning of co-design	The first workshop on 10 May ensured that everyone involved had a collective understanding of the process and how it will unfold.
Sharing power with victim-survivors	This was done through establishment of the survivor-advocate advisory group
Recognition of differences in language, culture and accessibility	We made all written materials accessible for people experiencing vision impairment. We also discussed accessibility issues with survivor-advocates early in the process.
Shared understanding of evidence on gender-based and patriarchal violence	The process operated in accordance with the evidence that family violence is highly gendered and strongly influenced by patriarchy.
Awareness that co-design is not consultation	Survivor-advocates were engaged in ways that give them direct ownership and control over the final output.
Remuneration for the time of service users	All survivor-advocates were remunerated for their time
Non-linear and iterative nature of the process	There were multiple opportunities for the team to review the work done to date and make refinements as necessary. This was done primarily through project team meetings and workshops with the survivor-advocate advisory group.



## Appendix B – Workshop schedule

Date	Time	Significant agenda items
10 May 2022	1.00pm – 3.00pm	<ul style="list-style-type: none"> <li>Introduction and ‘get to know you’</li> <li>Setting our ways of working</li> <li>Co-design process, roles and constraints</li> <li>Contextualising the project</li> </ul>
24 May 2022	10.00am – 3.00pm	<ul style="list-style-type: none"> <li>Endorse terms of reference</li> <li>Clarifying co-design process</li> <li>Ways to elevate client voice</li> <li>Barriers to understanding client experience</li> <li>Examples of outcomes frameworks</li> </ul>
7 June 2022	12.30pm – 3.00pm	<ul style="list-style-type: none"> <li>Presentation and critique of themes from previous workshop</li> <li>Discussion of DVV Code of Practice</li> </ul>
21 June 2022	12.30pm – 3.00pm	<ul style="list-style-type: none"> <li>Presentation and critique of draft outcomes framework</li> <li>Discussion of ‘enabling conditions’</li> <li>Discussion of ‘client outcomes’</li> </ul>
5 July 2022	12.30pm – 3.00pm	<ul style="list-style-type: none"> <li>Further presentation and critique of outcomes framework</li> <li>Discussion of data collection processes</li> <li>Reflection on co-design process</li> </ul>

## Appendix C – Points of difference

Document	Points of difference
Family Violence Outcomes Framework (DHHS)	<p>Focuses on the ways in which whole-of-system outcomes can be achieved</p> <p>Designed to communicate key priorities, their importance and what constitutes success for the entire family violence service system</p>
Client partnership strategy for The Orange Door	<p>Focuses more directly on client voice within the client-worker relationship</p> <p>Designed to embed clients as partners in all aspects of work related to The Orange Door</p>
Case management program requirements	<p>Focuses on the day-to-day tasks and activities of workers</p> <p>Designed to ensure that case management is consistent, coordinated, timely and flexible</p>
Code of practice	<p>Focuses on service design and continuous quality improvement</p> <p>Designed to ensure consistency in specialist family violence services' processes and administrations</p>

## Appendix D – Client outcomes survey






You are invited to share your views on the effect of the family violence services you received. This survey is important because it helps us understand how you are going and to make decisions about how we provide services in the future for the benefit of our clients.

You do not have to do the survey, but we value what you have to say, and would appreciate you taking the time to let us know how you are going. Your responses are anonymous and confidential and will not affect your access to services in any way. There are no wrong answers, so please answer as honestly as possible. If there are any questions you do not wish to answer, feel free to skip to the next question.

The survey will take about 8 minutes, depending on your answers. Thank you for taking the time to share your experience.

### YOUR EXPERIENCE OF ACCESSING SERVICES

1. To help us understand more about your experience of this service, please circle the response that best describes your feelings for each of the following statements.

AS A RESULT OF THE SERVICES I RECEIVED...					
	Strongly disagree	Disagree	Neutral or N/A	Agree	Strongly agree
The services were delivered in a way that prioritised my safety	Strongly disagree	Disagree	Neutral or N/A	Agree	Strongly agree
I had a say in decisions about the services I received	Strongly disagree	Disagree	Neutral or N/A	Agree	Strongly agree
Changes or improvements were made in response to my feedback to the service	Strongly disagree	Disagree	Neutral or N/A	Agree	Strongly agree
I understood what the service could and could not do	Strongly disagree	Disagree	Neutral or N/A	Agree	Strongly agree
I had enough information to make decisions about the services I received	Strongly disagree	Disagree	Neutral or N/A	Agree	Strongly agree
The service followed up on agreed actions	Strongly disagree	Disagree	Neutral or N/A	Agree	Strongly agree
I felt that I could trust my worker/s	Strongly disagree	Disagree	Neutral or N/A	Agree	Strongly agree
I felt that I could trust the service	Strongly disagree	Disagree	Neutral or N/A	Agree	Strongly agree
I understood who had access to my information and how it would be used	Strongly disagree	Disagree	Neutral or N/A	Agree	Strongly agree

My cultural beliefs were respected	Strongly disagree	Disagree	Neutral or N/A	Agree	Strongly agree
Is there anything else you would like to say about your experience of accessing services?	Free text box				

2. To help us understand more about how the services affected your life, please circle the response that best describes your feelings for each of the following statements.

THE SERVICES I RECEIVED HAVE CONTRIBUTED TO ME...



Feeling less socially isolated	Strongly disagree	Disagree	Neutral or N/A	Agree	Strongly agree
Feeling like I could develop relationships in the community	Strongly disagree	Disagree	Neutral or N/A	Agree	Strongly agree
Feeling like I could develop relationships with support services	Strongly disagree	Disagree	Neutral or N/A	Agree	Strongly agree
Feeling better able to identify respectful relationships	Strongly disagree	Disagree	Neutral or N/A	Agree	Strongly agree
Feeling better able to look after my physical health	Strongly disagree	Disagree	Neutral or N/A	Agree	Strongly agree
Feeling better able to look after my emotional health	Strongly disagree	Disagree	Neutral or N/A	Agree	Strongly agree
Feeling better equipped to manage my own safety	Strongly disagree	Disagree	Neutral or N/A	Agree	Strongly agree
Feeling better able to achieve my goals	Strongly disagree	Disagree	Neutral or N/A	Agree	Strongly agree
Feeling more confident in advocating for myself	Strongly disagree	Disagree	Neutral or N/A	Agree	Strongly agree
Feeling more aware of potential family violence risks	Strongly disagree	Disagree	Neutral or N/A	Agree	Strongly agree
Is there anything else you would like to say about how the service has affected your life?	Free text box				

3. On a scale of 1 to 10, how satisfied are you with the effect of the services on your wellbeing? Use a ✓ to select the response that applies to you. Select one response only.

Not at all satisfied			Moderately satisfied				Extremely satisfied		
1	2	3	4	5	6	7	8	9	10

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4. What suggestions, if any, do you have for how family violence services could improve your quality of life?

**PLEASE TELL US ABOUT YOURSELF**

These questions will help us understand more about service users, and what works or does not work for different types of people. If there are any questions you do not wish to answer, please skip to the next question.

Use a ✓ to select the response that applies to you. Select one response only.

5. What is your age range?

	Under 18
	19 – 29
	30 – 39
	40 – 49
	50 – 59
	60 - 69
	70 and over

6. Do you identify as Aboriginal or Torres Strait Islander?

	Yes
	No
	Prefer not to say

7. Do you identify as lesbian, gay, bisexual, transgender or gender diverse, queer, intersex, or asexual?

	Yes
	No
	Prefer not to say

8. What is the main language you speak at home?

	English
	Other (please specify) _____

9. Do you have a disability, impairment or health condition that affects your day-to-day life?

	Yes
	No
	Prefer not to say

#### CONSENT TO BE CONTACTED

Please provide your contact details below if you consent to being contacted by Safe and Equal if there is related research being done. Safe and Equal is the peak body for specialist family violence services that provide support to victim survivors in Victoria.

Name:	
Phone number:	
Email:	
Instructions about being contacted:	

Thank you for completing this survey.

If this survey raises questions or causes any distress, or you would like to seek assistance, please contact 1800RESPECT (1800 737 732), a national, 24-hour counselling service to support people impacted by sexual assault, domestic or family violence and abuse.