

PILOT EVALUATION STUDY
**DOMESTIC VIOLENCE ADVOCATE
CO-LOCATION AT TWO QUEENSLAND
POLICE STATIONS: FINAL REPORT**

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Executive summary

This report presents findings from the evaluation of a pilot program placing advocates from the Domestic Violence Prevention Centre Gold Coast (DVPC), a domestic violence specialist support service, at the Southport and Coomera police stations two days a week from October 2020 to July 2021. The impetus for the pilot was anecdotal information from Queensland Police Service (QPS) and DVPC indicating that some domestic and family violence (DFV) victims/survivors¹ had negative experiences when reporting domestic violence matters to police.

Accordingly, DVPC and QPS sought to collaborate to improve responses to domestic and family violence by placing a domestic violence victim advocate at Southport and Coomera police stations to assist in supporting people approaching the stations for assistance with domestic violence matters. The Department of Child Safety, Youth and Women and Commonwealth COVID-19 Response Fund and DVPC funded the pilot project.

The evaluation used surveys with closed- and open-ended questions to capture the perceptions of victims attending the stations for domestic and family violence-related matters, QPS staff at those stations, and the DVPC victim advocates who staffed the pilot program at the police stations.

A total of 88 participants completed all or most of the substantive questions in the survey:

- 60 participants completed the survey for victims;
- 25 completed the survey for QPS staff; and
- 3 completed the survey for advocates.

Key findings

“I [think] this program was a fantastic initiative, not only building on relationships between all of the agencies involved, but more importantly providing a very personal service to victims of DV in a time of need, often when [their] life is at its worst.” - QPS 13

Strong support for co-location of victim advocates at police stations

There was overwhelmingly positive support for the co-location program. Participants recommended continuing the co-location program after the conclusion of the pilot. They also requested that it be expanded to cover more days of the week and more locations.

¹ We use the word victim or survivor in this report to refer to people approaching the police station for assistance with domestic and family violence matters. We recognise that many people who have experienced violence and professionals in different jobs may use other terms, and there is no ideal term for all uses.

Benefits

Improved victim experiences

The evaluation investigated victims' experiences approaching the police stations for assistance with domestic violence matters with and without the aid of an advocate during the pilot. Victims who met with only an advocate, or an advocate and QPS staff, reported more positive experiences than those who only met with police.

Participants from all three cohorts reported multiple benefits from the co-location program:

- enhanced feelings of safety for victims who met with the advocate or the advocate and police;
- reduced wait times;
- more support for victims;
- reduced fear and anxiety talking to police;
- faster connection and referral to services;
- increased likelihood of police taking the incident seriously or taking action for victims who met with the advocate or the advocate and police; and
- more options available to victims for whom police action was not an option.

Enhanced collaboration between DVPC and QPS

All but one QPS participant and all DVPC victim advocate participants reported that the co-location program enhanced collaboration between the organisations. This collaboration contributed to many of the benefits for victims listed above.

Shared learning between DVPC and QPS

QPS staff and DVPC advocates indicated that having an advocate at the police stations provided opportunities for shared learning about one another's roles, the options and services available to victims, how to interact with victims effectively, and the dynamics of coercive control and domestic and family violence.

Reduced workload for QPS

QPS staff indicated that the co-location project reduced their workload by sharing the burden of providing advice and referrals, liaising with victims to enhance investigation, and reducing the need for repeat calls for service.

Challenges

DVPC advocates and QPS staff identified challenges with the co-location pilot to address moving forward. Some of these were related to the short duration of the pilot. Others were due to differing approaches.

Participants described these key challenges:

- communication between DVPC and QPS about the advocates' roles, schedules, and the referral process;
- QPS staff turned victims away when the advocate was not at the station and asked them to return another day;
- disrespect for advocates from some QPS staff; and

- limited days and times the advocates were at the stations.

Victims identified additional challenges with their experience seeking assistance at the police stations. None of the victims who only spoke to QPS reported increased safety after they visited the station. Four (66%) reported no change in safety. Two (33%) reported being less safe after speaking with police but not an advocate.

About Griffith Criminology Institute

Griffith Criminology Institute (GCI) creates knowledge on the causes, nature, responses to, and prevention of crime and inequality, and works with partners to apply that knowledge for real-world outcomes. It houses one of the world's largest concentrations of crime and justice scholars from diverse disciplines including psychology, sociology, social work, law, data sciences, public policy, and criminology. GCI has a focus on five key global challenges: preventing violence, enhancing security, transforming justice, breaking cycles of intergenerational disadvantage and promoting First Nations Justice.

About this project

This report presents findings from the evaluation of a pilot program placing advocates from the Domestic Violence Prevention Centre Gold Coast (DVPC), a domestic violence specialist support service, at the Southport and Coomera police stations two days a week from October 2020 to July 2021. The impetus for the pilot program was anecdotal reports from Queensland Police Service (QPS) and DVPC indicating that some domestic violence victims had negative experiences when reporting domestic violence matters to police. Accordingly, DVPC and QPS sought to collaborate to improve responses to domestic and family violence by placing a domestic violence advocate at the police stations to assist in supporting domestic violence victims.

QPS and DVPC initiated a pilot project to trial the co-location of a DVPC victim advocate for two days each week at the Coomera and Southport police stations from October 2020-July 2021. The Department of Child Safety, Youth and Women and Commonwealth COVID-19 Response Fund and DVPC funded the pilot.

Although the Department of Child Safety, Youth and Women did not fund the evaluation of the pilot, Griffith University provided funding to assist DVPC and QPS in collecting data to learn from the pilot and provide evidence to inform decisions about the desirability of continuation or expansion of the program beyond the initial trial. The Arts, Education & Law Group at Griffith University provided a small Research Grant to fund the study. Griffith Criminology Institute provided additional funds. Griffith MA student Casey Cale graciously agreed to incorporate the pilot study into her thesis research.

Acknowledgements

We would like to acknowledge the people who are the traditional custodians of the land where the authors, collaborators, participants, and readers live and work. On the Gold Coast, where this study took place, we acknowledge the Kombumerri peoples, pay respect to Elders, past, present, and emerging, and extend our respect to all Aboriginal and Torres Strait Islander people.

We would especially like to thank the victims who took the time to participate in this evaluation study during a very stressful time in their lives. We hope to learn from your advice and experiences to contribute to improved responses and support for all domestic violence victims and ultimately prevent domestic and family violence.

We would also like to thank the Domestic Violence Prevention Centre Gold Coast and Queensland Police Service for supporting this project. In particular, at QPS, Senior Sergeant Andrew Godbold, Officer in Charge (Coomera), Sergeant Bruce Oliver, Domestic Violence Liaison Officer Lisa Stutz, Domestic Violence Liaison Officer Kim Ludicke, Inspector Scott Knowles, Inspector Chris Smith, and Domestic Violence Liaison Officer Nikki Bell were instrumental to supporting the pilot and the evaluation. At DVPC, we'd like to thank Executive Director Rosemary O'Malley and advocates Lucy Jacques, Girija Dadhe, and Kristyn Bell for organising and supporting the pilot program and evaluation.

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Ethics

Ethics for this study was approved under Griffith University Human Research Ethics Committee GU ref no: 2020/754.

Introduction

In Australia, domestic and family violence (DFV) is a significant public health and social problem with extensive economic and personal costs (Hegarty, Hindmarsh & Gilles, 2000). From 2015-2016, violence against women and children cost an estimated \$22 billion. DFV is a leading cause of homelessness in Australia (Australian Institute of Health and Welfare, 2018). In 2014, DFV was declared a 'national emergency' in Australia following high-profile murders of women and children by their current and former male partners (Segrave et al., 2016).

Domestic and family violence crimes comprise a significant portion of police work in Australia, with 40 to 60 per cent of front-line policing activities reportedly related to DFV (Meyer, 2016; Royal Commission into Family Violence, 2016; Segrave et al., 2016). Nearly two in five homicide and related offences (37%) were DFV-related in Australia in 2020, and most victims of DFV-related homicide were female (59%) (Australian Bureau of Statistics, 2020a, 2020b).

Despite national and Queensland recommendations for increased interagency cooperation around DFV in Australia (COAG, 2011; Special Taskforce on Domestic and Family Violence in Queensland, 2015), there has been minimal research to examine the outcomes of DV service and police co-location to date. In Australia, only two evaluations of programs co-locating domestic and family violence victim advocates at police stations have been conducted to date. Seuffert and Mundy (2021) conducted a qualitative evaluation using interviews with nine survivors, four police, four government and NGO staff, and two advocates involved with a longstanding co-located service in New South Wales. Rodgers et al. (2022) evaluated a co-located service in Queensland using advocates' administrative records, surveys with 18 survivors and 19 police, and interviews with six police and four advocates who had contact with the program.

These evaluations collected useful information about participants' experiences with co-located programs and their outcomes in relation to the victim services' program goals, which were generally well received and perceived as beneficial for victims. However, they did not compare the experiences of those who met with advocates with those receiving a standard police response. This report fills this gap in the literature by including a comparison of victim safety across groups who met with co-located advocates only, police and advocates, and police only. As the approach to and volume of DFV cases varies across locations, information specific to Southern Queensland was also desirable. The evaluation research questions were derived from practical concerns about the outcomes of the pilot co-location project, whether it should be continued or expanded, and changes that could improve responses to DFV going forward.

Research Methods

Research Questions

1. Did the pilot enhance collaboration between DVPC and QPS to

maximise opportunities to support domestic and family violence victims and improve community safety?

2. What are victims' experiences approaching the police station for assistance with domestic violence matters with the assistance of an advocate? (e.g. satisfaction with interaction, safety)?
3. What are DVPC advocates and QPS staff perceptions about the effectiveness/benefits of the co-located service and necessary improvements going forward?

The pilot study included surveys with closed and open-ended items administered to three cohorts:

- 60 victims speaking with an advocate and/or QPS staff member about domestic violence matters at Coomera and Southport police stations;
- 3 DVPC advocates co-located at the police stations;
- 25 QPS staff at Coomera and Southport police stations.

The open-ended questions provided information to guide the interpretation of responses to the closed-ended questions. Open-ended questions allowed participants to expand on some of their answers if they wished to do so. The open-ended items also captured participants' explanations of benefits and areas for improvement of the co-location program if it were to be extended beyond the pilot.

The questionnaires were developed in consultation with DVPC staff to ensure that the data would help evaluate the pilot project and inform future practice. Each survey focused on capturing whether the trial project had been beneficial and information about how the program could be improved post-pilot. The qualitative items elicited rich feedback from participants.

Victim recruitment

The advocate invited domestic and family violence victims who met with an advocate to participate in a brief survey about their experiences at the police station. Those who chose to participate completed the survey via a computer-assisted survey on an iPad. They received a \$15 gift card to compensate them for their time and encourage participation. Because DVPC is a specialist women's service, participants recruited this way were women. Women and men who identified as domestic and family violence victims but did not meet with an advocate were recruited via posters in the waiting areas of the police stations. Posters included a QR code to access the survey on their mobile device. For safety and confidentiality reasons, we did not offer these participants gift cards because that would have necessitated collecting personal data and contact that may have posed safety risks. Although these posters and the survey were open to women and men, only one male who identified as a victim completed the survey. Victim survey participants were provided contact information for domestic violence resources and online safety information via the survey link.

Advocate and QPS recruitment

Advocates and QPS staff were recruited via emails from the research team to key stakeholders at DVPC and QPS, who forwarded the survey link to the staff who had exposure to the pilot program. Multiple reminders were sent following the initial email to maximise participation.

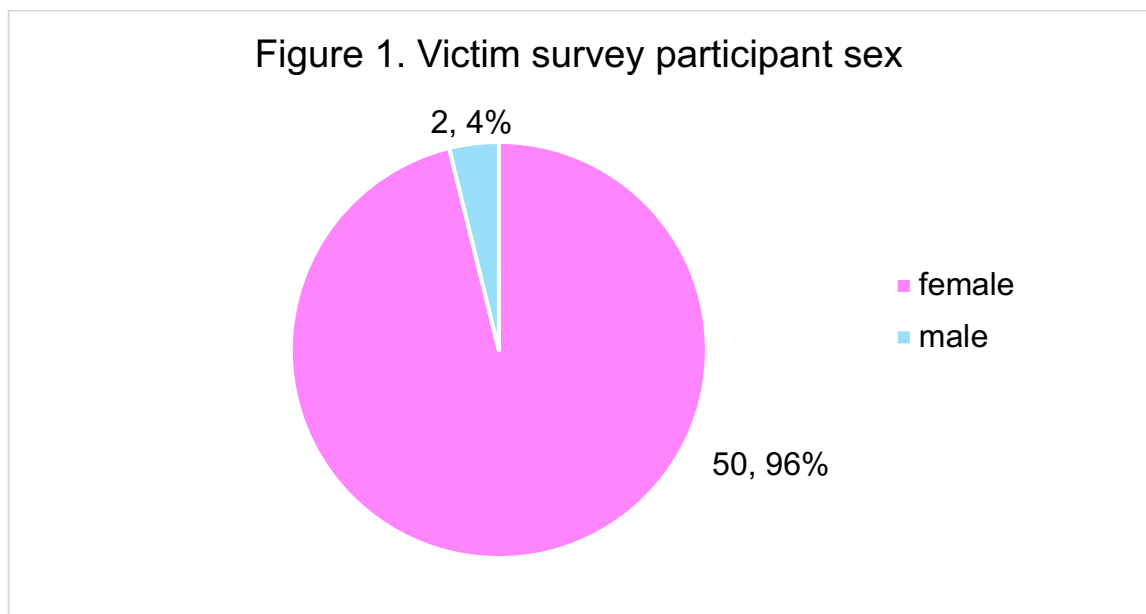
Limitations

Like all research, this study had limitations. Ideally, pilot program evaluations include pre- and post-pilot components to permit the assessment of changes due to the program. However, an evaluation study of this pilot was not funded. The lack of evaluation funds and a short timeline before program commencement prevented a pre/post-pilot comparison. The pilot program also ran for a short duration. A longer pilot may have increased opportunities for QPS and DVPC to collaborate and learn from each other. In addition, DVPC experienced staff turnover during the pilot resulting in limited days the advocate was located at Coomera. As a result, there were fewer participants from all cohorts at Coomera Police Station. Finally, there was limited participation from QPS staff. Sample sizes were small across all cohorts, with only a portion of those approaching police for DFV matters and QPS staff participating.

Victim Survey Findings

Demographics

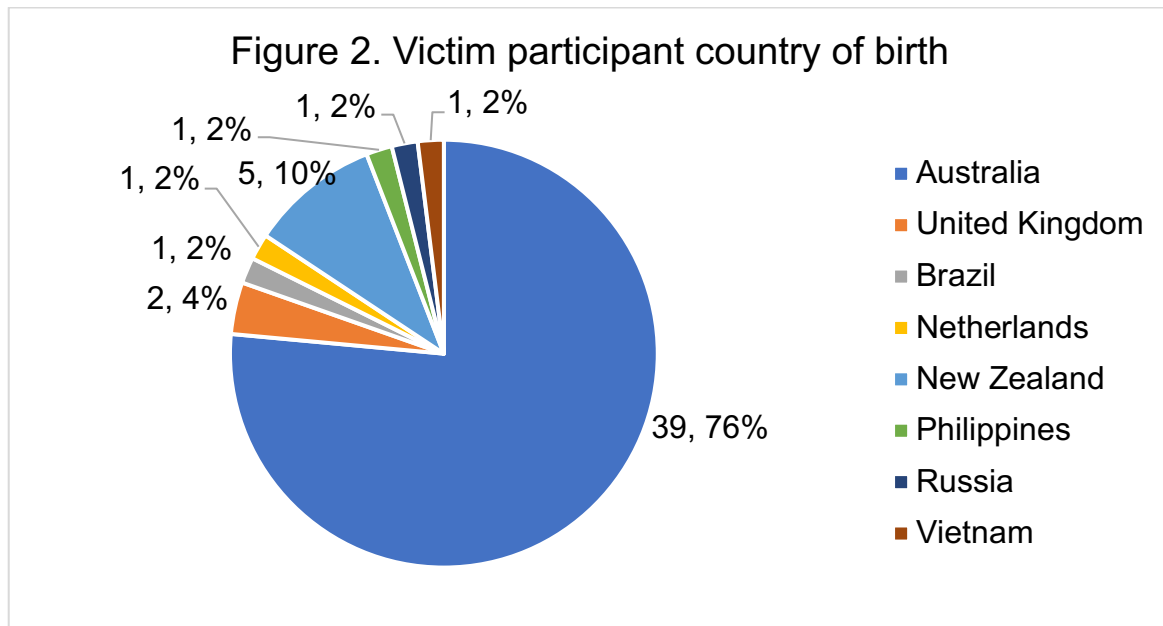
Fifty-two people approaching the police station for assistance with domestic or family violence matters provided demographic information.² Most participants (75%³) visited Southport Police Station. The remainder (25%) attended Coomera Police Station. The average age of participants was 38 years old, with participants ranging from 20 to 72 years old. Fourteen per cent of participants identified as having a disability. The majority of participants were female, as indicated in Figure 1. Fifty participants (96%) in the victim survey identified as female. Two identified as male (4%). One of the male participants was not a victim but the partner of a female victim seeking assistance with ongoing abuse from her male former partner.



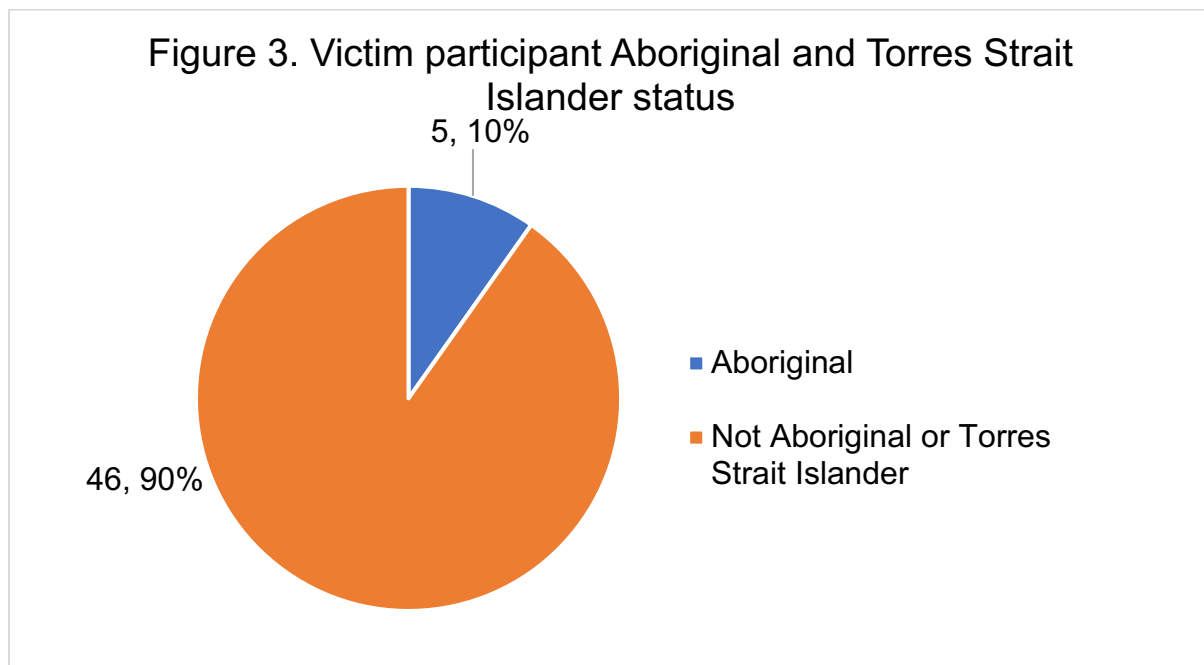
² The number of responses to different survey questions varied. We have presented percentages and numbers in the figures. The numbers differ across figures to reflect the number of answers to that question item.

³ Percentages have been rounded to the next whole number.

As indicated in Figure 2, most participants (76%) were born in Australia. Ten per cent were born in New Zealand. Fourteen per cent were born in other countries, as shown below.



Ten per cent of victim participants identified as Aboriginal, and 90% identified as neither Aboriginal nor Torres Strait Islander.



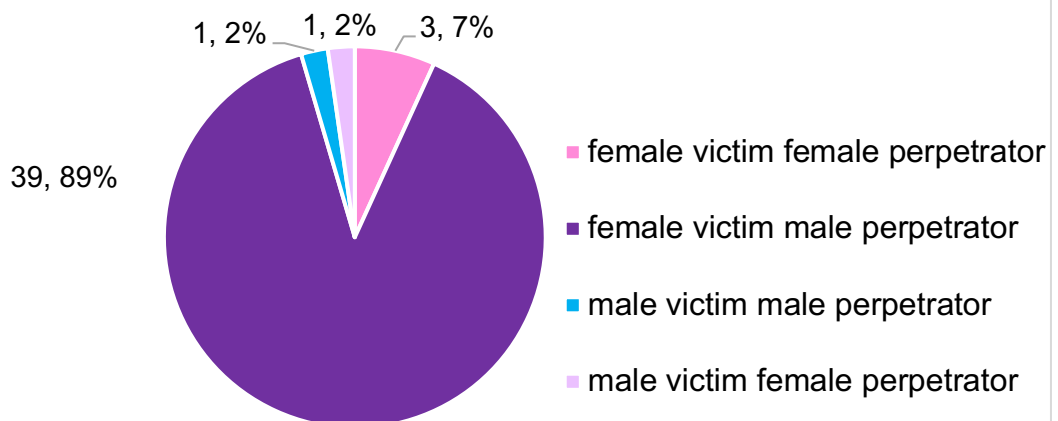
Most survey participants (87%) attended the station to talk to police about intimate partner violence. An additional 11% attended about family violence, and 2% attended about an issue with a carer, as shown in Table 1.

Table 1: Who is the person you came to talk to the police about?

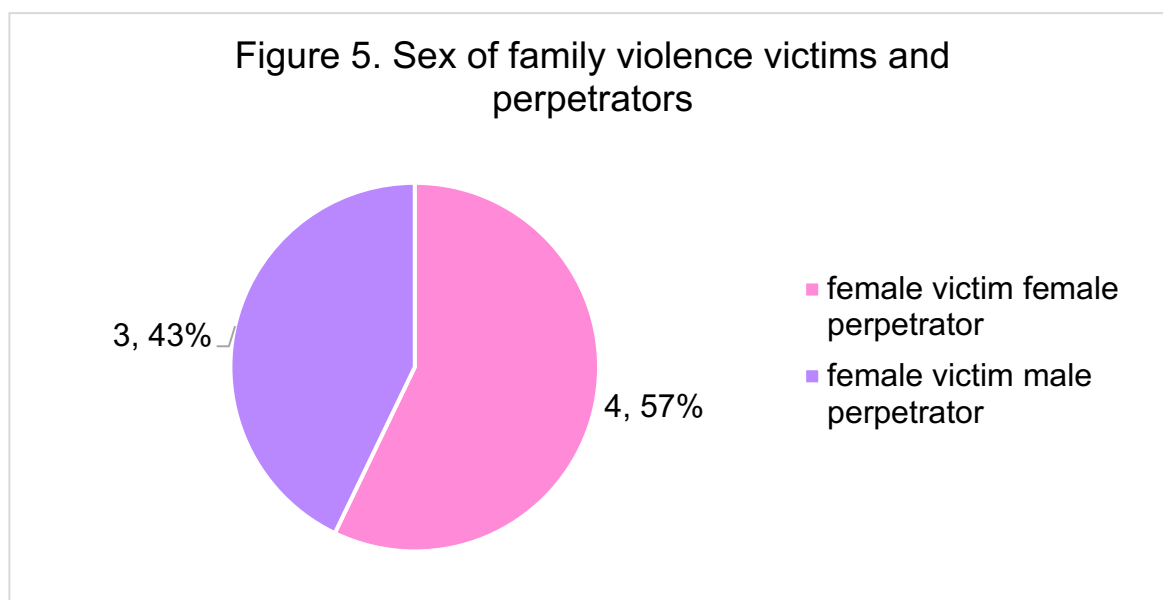
	<i>N</i>	%
intimate partner	54	87
family member	7	11
carer	1	2

The sex of victims and perpetrators varied by type of abuse. There were substantial sex differences in the intimate partner cases. The majority (89%) of intimate partner cases involved female victims and male perpetrators, as shown in Figure 4.

Figure 4. Sex of intimate partner violence victims and perpetrators



Family violence cases had smaller sex differences. Most family violence cases involved female victims and female perpetrators (57%), while 43% involved female victims and male perpetrators. The one carer case involved a female victim and a female perpetrator.



Most participants (81%) no longer lived with the person that they had come to talk to the police about. Nineteen per cent were still living with that person. Most participants (82%) reported that this was not the first time they had contacted the police about this person concerning a domestic or family violence matter.

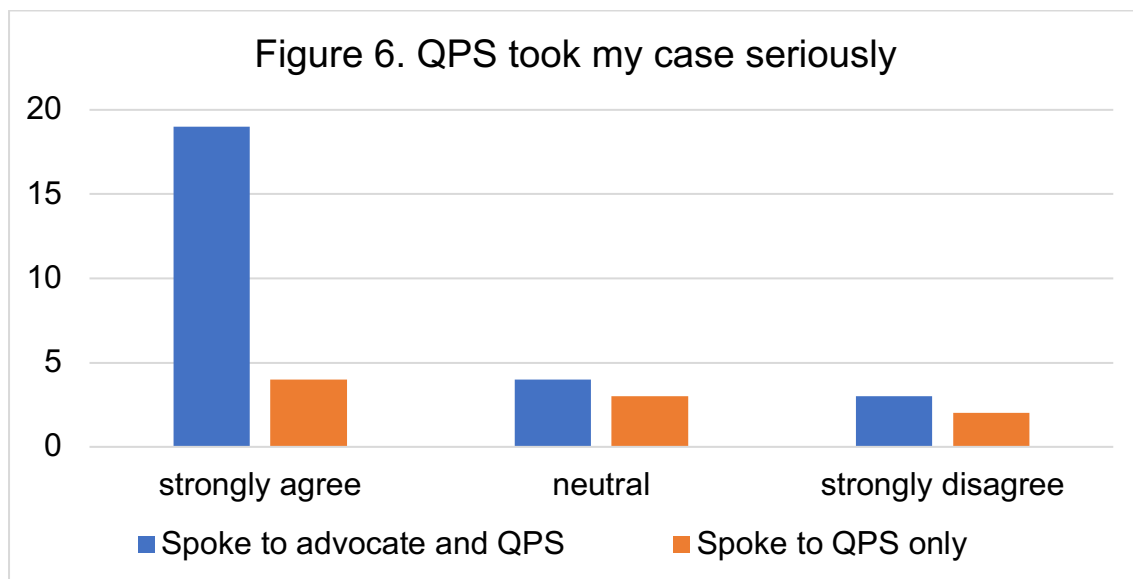
Victims' experiences

The largest group of survey participants (40%) spoke to police and the advocate. About a third (32%) only spoke to the advocate, and 20% only spoke to police, as indicated in Table 2.

Table 2: Who victims spoke to at the police station

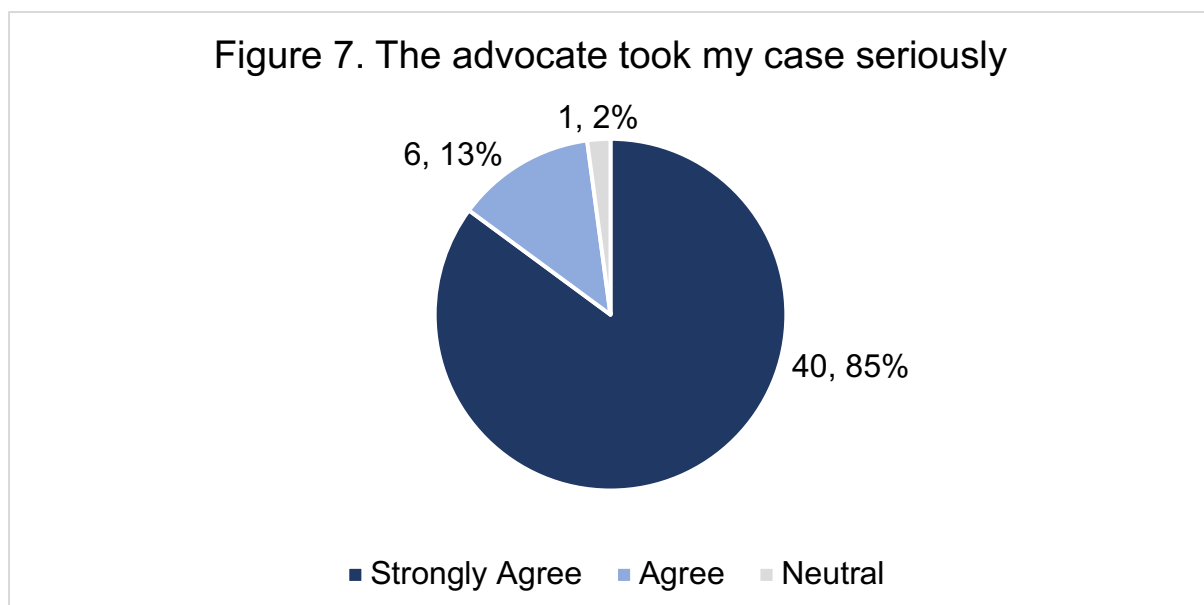
	<i>N</i>	%
Advocate only	21	32
Police only	13	20
Advocate and police	26	40

Participants' perceptions about whether QPS took their case seriously differed across these groups.



Victim experiences with advocates

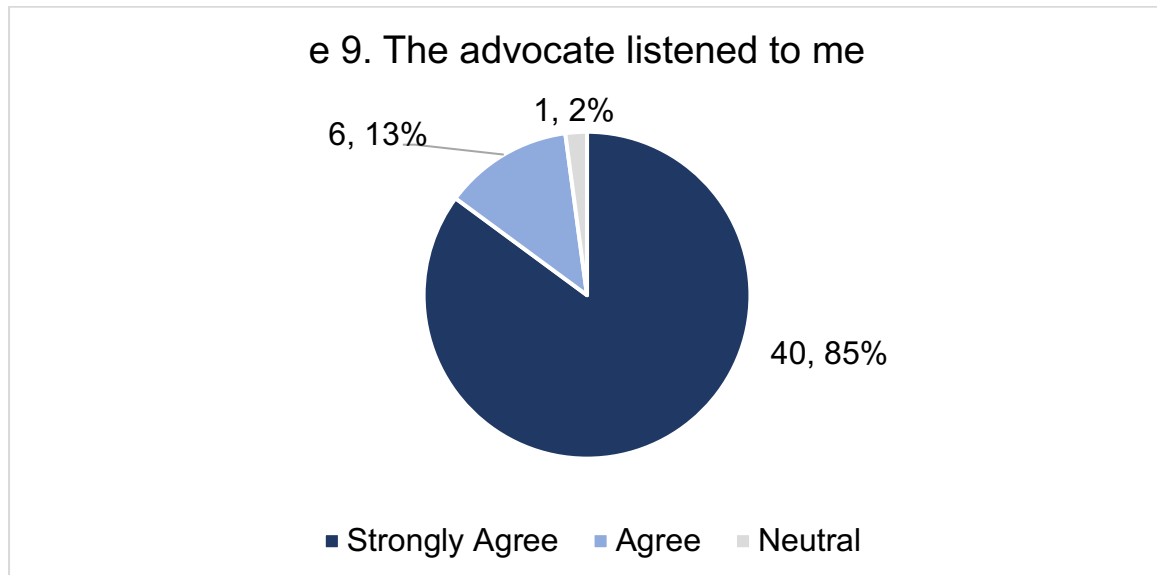
Almost all participants who spoke to an advocate provided positive feedback about the experience. Ninety-eight per cent of victim participants either strongly agreed or agreed with the statement that the advocate took their case seriously, with 2% feeling neutral about this statement.



I was believed which gave me the confidence to speak my truth. -Victim 60

The domestic violence advocate has helped me to validate the situation I'm currently involved [in]. -Victim 65

Figure 8 shows that the overwhelming majority of participants (98%) also strongly agreed or agreed with the statement that the advocate listened to them, with 2% feeling neutral about this statement.



Ninety-six per cent of participants strongly agreed or agreed that the advocate they spoke to believed them, with 4% feeling neutral about this statement.

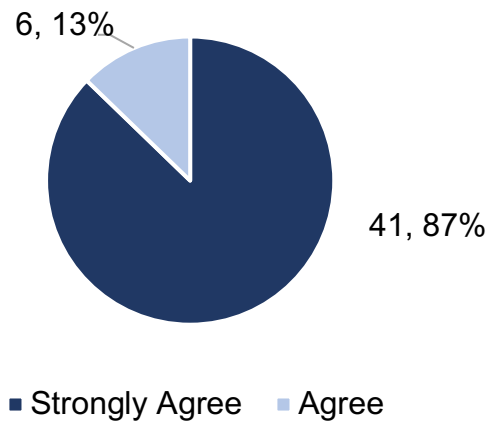
I was finally heard. -Victim 72

Offers so much support, great to speak to before police. Validates and makes your situation real as I am very desensitised. -Victim 65

She listened and I felt heard. It's very scary to talk to the police. -Victim 113

In addition, as indicated in Figure 10, 100% of participants strongly agreed or agreed that they were treated with respect by the advocate.

Figure 10. The advocate treated me with respect

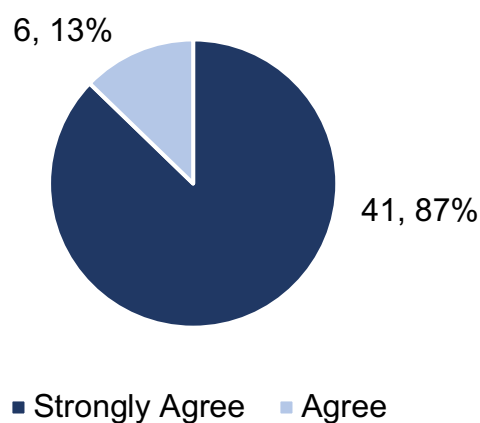


Overall I cannot fault the support offered. I was treated with compassion and respect and empathy. No issues whatsoever. -Victim 33

My domestic violence advocate listened to me and took my case seriously. I felt respected and understood. The police recommended I speak with the advocate. Talking with the advocate helped me. -Victim 68

As shown in Figure 11, 100% of participants strongly agreed or agreed that the advocate was sensitive to their situation.

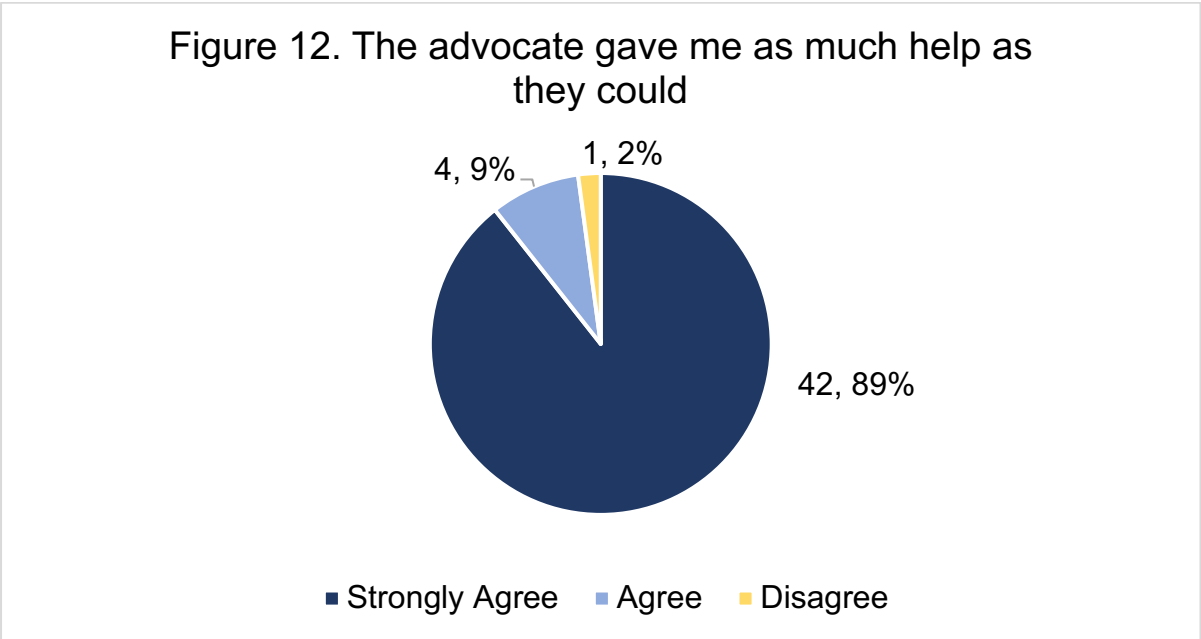
Figure 11. The advocate was sensitive to my situation



She was extremely helpful, kind and understanding. We have met before and both times she has been such an amazing advocate for me. -Victim 68

I found this experience very reassuring and safe and I am leaving feeling much better about my situation thank you. -Victim 94

Ninety-eight per cent of victim participants agreed or strongly agreed that the advocate gave them as much help as they could, while one participant disagreed (2%) with this statement, as shown in Figure 12.



Responses to the open-ended questions about experiences with advocates explain these results.

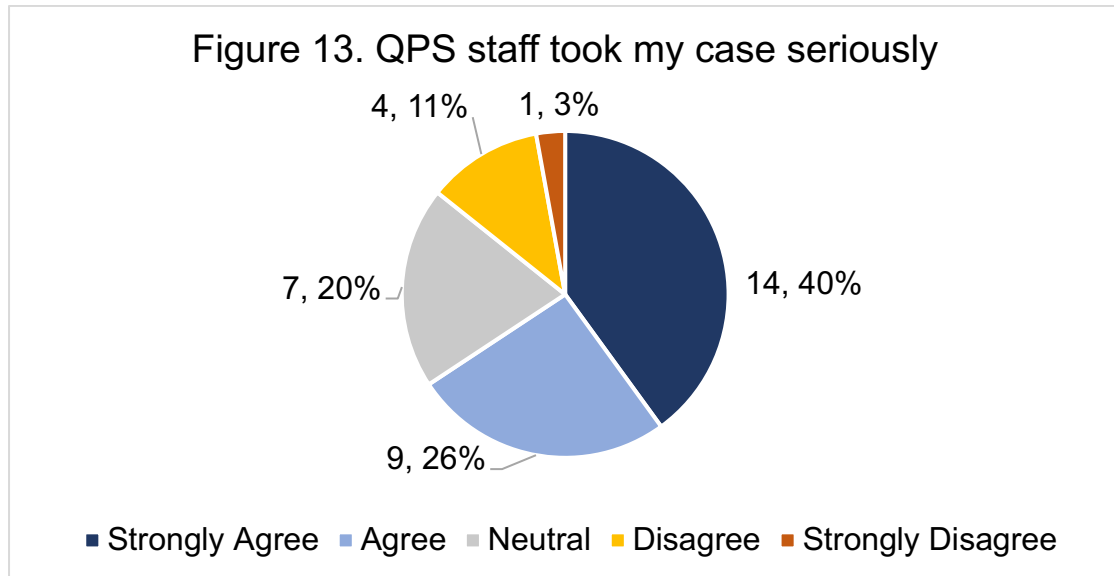
The support to understand and recognise what domestic violence is, how it hides how to healthily make boundaries. Speaking with the advocate, she was helpful in terms of services available for housing, emotional support, crisis support. -Victim 63

I had questions about what am I to do next and if I needed a lawyer. The advocate gave me all the information I needed and referrals. -Victim 61

I think this is an amazing and needed service for women. -Victim 71

Victim experiences with Queensland Police Service staff

The majority of victim participants also reported positive interactions with QPS staff. As shown in Figure 13, 66% of participants who spoke with QPS staff either strongly agreed or agreed that QPS staff took their case seriously. Meanwhile, 7% were neutral and 14% strongly disagreed or disagreed.

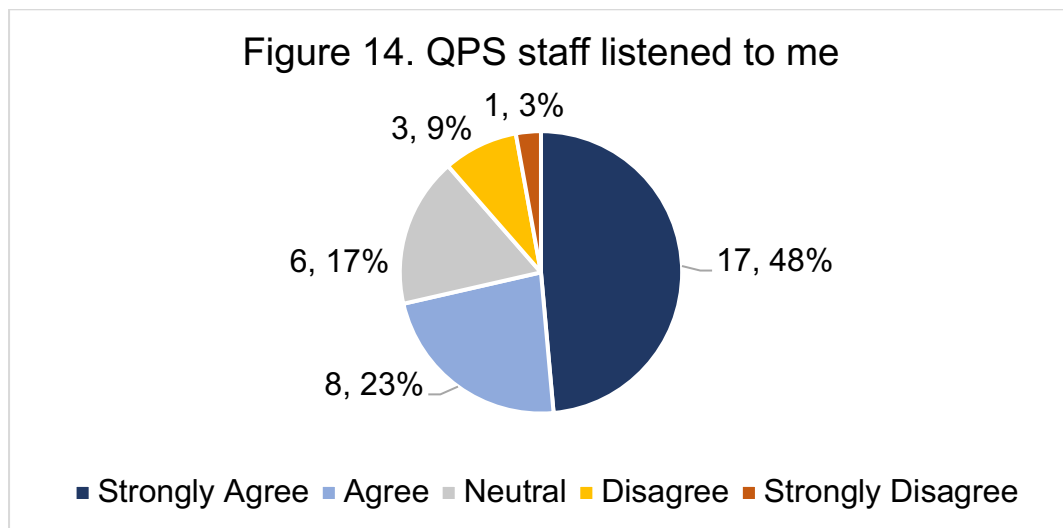


They were so helpful and did their best to help me in my situation, taking me seriously and helping me so much. -Victim 33

Conflicting information. Didn't take it serious enough. [Advice] varied from officer to officer. -Victim 40

I have suffered with DV for two years and completely lost trust in the QPS. In my opinion they do not take DV threats seriously or respond appropriately. They respond in an extremely reactive manner and do not seem to have a thorough understanding of coercive control, manipulation and intimidation that often occurs prior to physical harm. In my opinion, they require [additional] education and resources for the QPS and timely support for the victim. -Victim 69

As indicated in Figure 14, 71% of victim participants strongly agreed or agreed that QPS staff listened to them, while 17% were neutral. The remaining 12% disagreed or strongly disagreed with this statement.



I felt understood and guided. -Victim 67

The Constable was of great assistance to us and whilst he listened to me he was restricted on what he could do. -Victim 59

Seventy-two per cent of participants strongly agreed or agreed that QPS staff believed them when seeking support with a domestic violence matter while 3% felt neutral about this statement. Some survey participants did not feel as though QPS staff believed them, with 14% reporting that they disagreed or strongly disagreed with this statement, as shown in Figure 15.

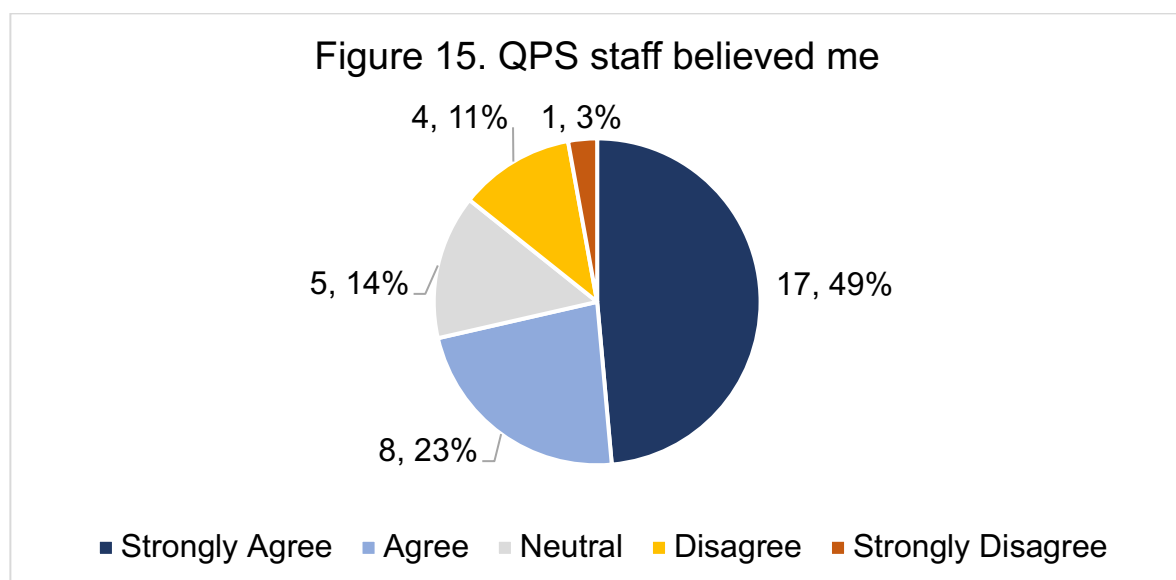
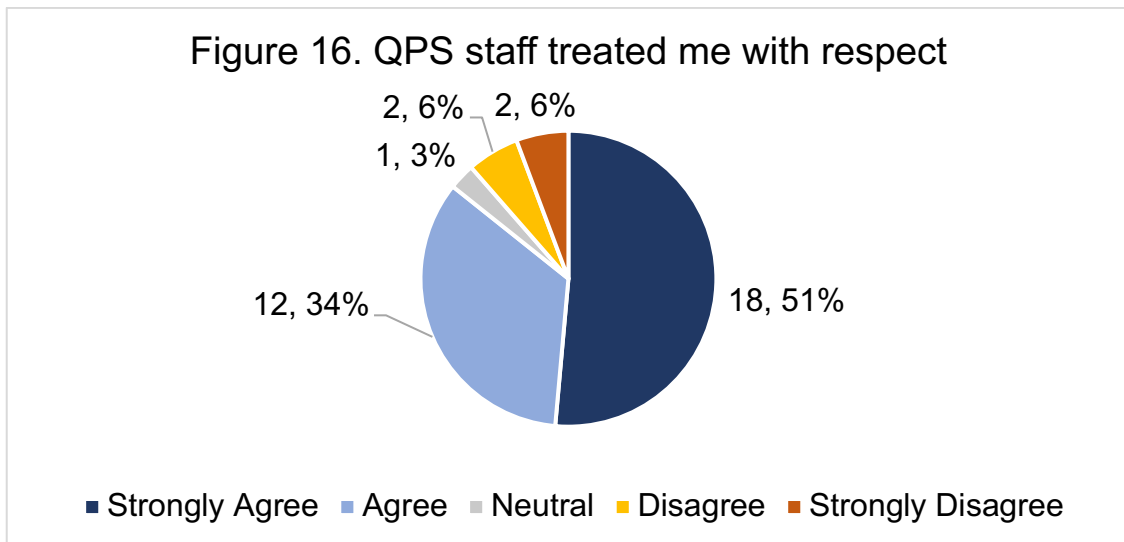
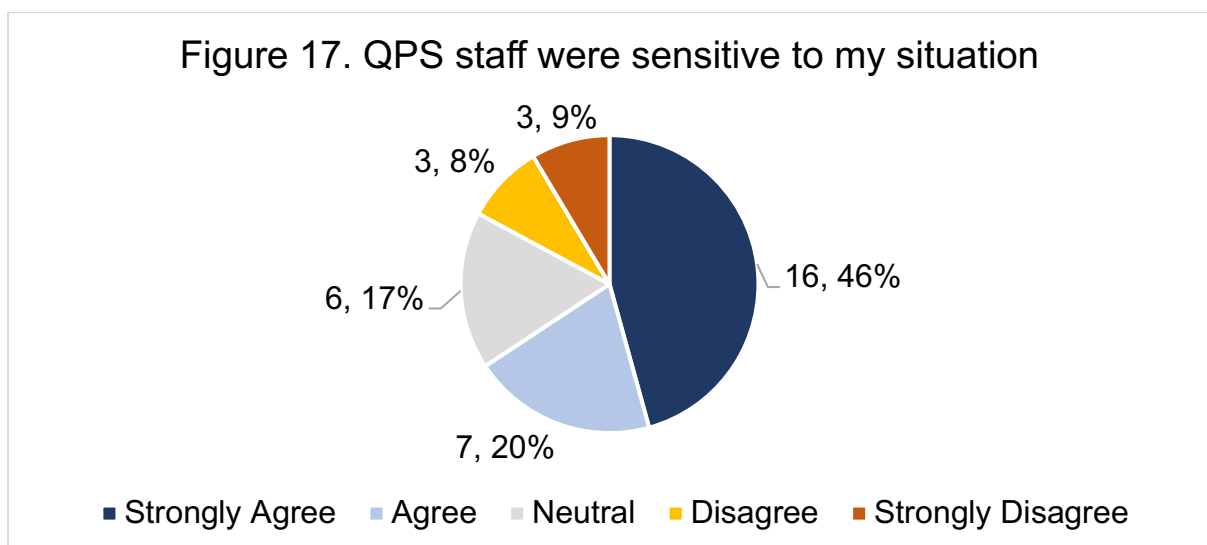


Figure 16 highlights that most participants (85%) either strongly agreed or agreed with the statement that QPS staff treated them with respect when they attended the station in relation to a domestic violence matter. Three per cent felt neutral about that statement, and 12% disagreed or strongly disagreed with this statement.



The police took my case seriously, they listened to me and have respected me the whole way through. I feel really listened to by them. The Southport team are amazing. -Victim 68

In response to the statement that QPS staff were sensitive to their situation, 66% of participants strongly agreed or agreed, while 17% felt neutral about the statement. Eighteen per cent of participants disagreed or strongly disagreed that QPS staff were sensitive to their situation, as shown in Figure 17.

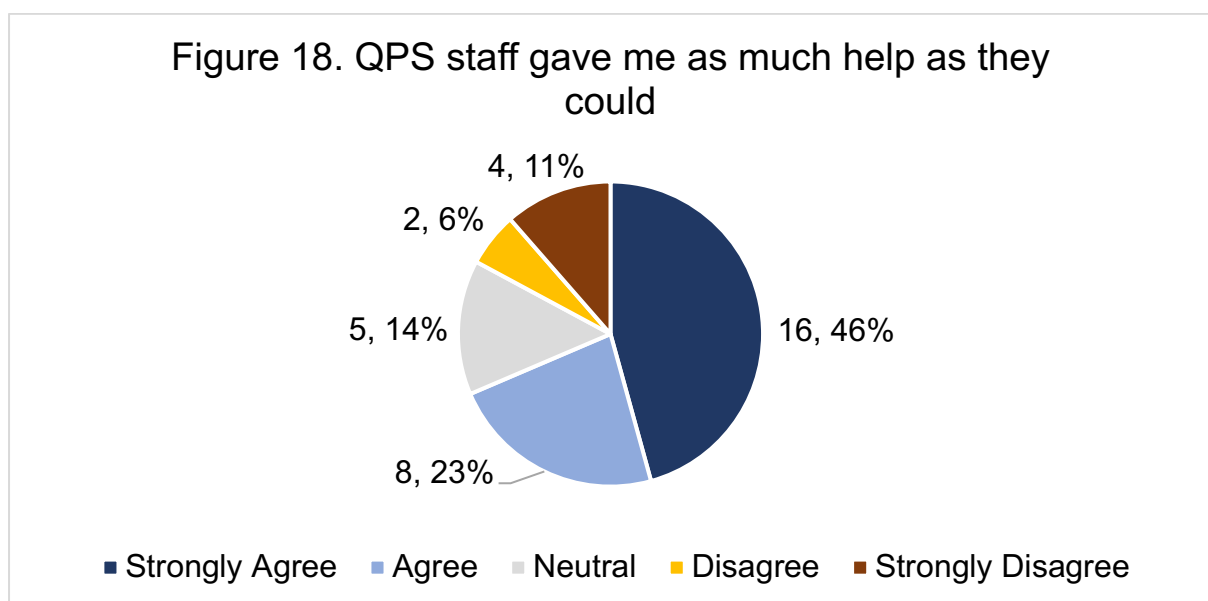


The officer was very understanding. -Victim 82

The police officers and woman's advocate were extremely understanding, they made me feel comfortable to talk about my assault. -Victim 61

My situation involves a perpetrator very experienced in coercive manipulative controlling behaviour that flies under police radar due to lack of in depth knowledge of police about domestic violence in my opinion from my perception unless personally experienced long term abuse behind closed doors over 25-28 years the average police officer users gender specific bias comments and reacts inappropriately to a victim that is in a current traumatised state whom maybe unable to articulate exactly the circumstances of the events due to the flight, fight reactive response due to your conscious brain shutting down due to casual response of victim wanting to escape abusive state. -Victim 42

Finally, Figure 18 shows that 69% of participants strongly agreed or agreed with the statement that 'QPS staff gave me as much help as they could.' In addition, 14% felt neutral about this statement, and 20% disagreed or strongly disagreed.



The two female officers handling this matter... have gone above and beyond to assist. -Victim 72

They can only do what they can do. It's a system and not their fault. -Victim 65

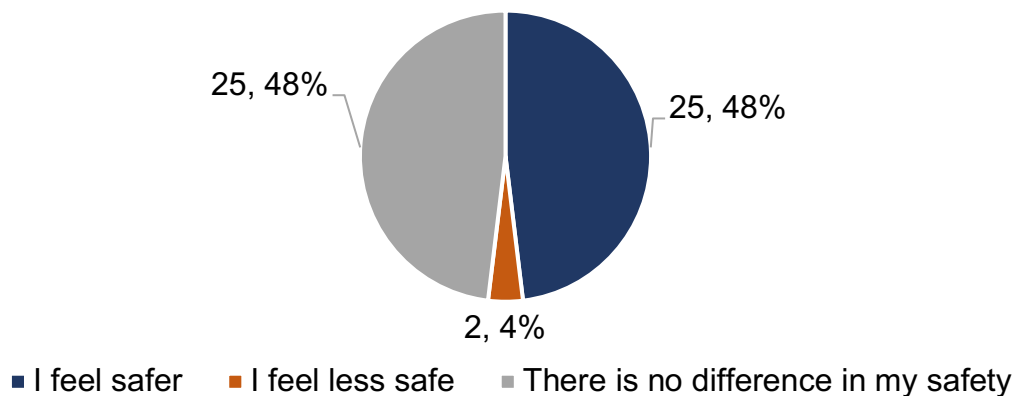
Very supportive, understanding and willing to help. -Victim 110

I genuinely feel like the police are helping me with the resources they have. -Victim 68

Outcomes

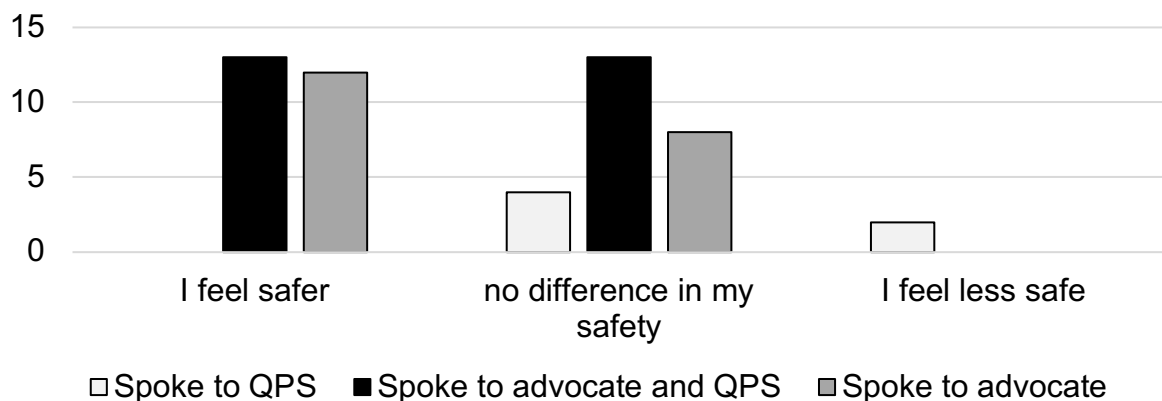
As a result of their experiences, 81% of victims indicated that they would feel comfortable coming back to the police station again about a domestic violence matter, and 6% said they would not feel comfortable doing so. The remaining 13% were unsure. Participants were also asked about their safety. As indicated in Figure 19, these results were more mixed. Nearly half of the victims (48%) reported that they felt safer, nearly half (48%) felt that there was no difference in their safety, and a couple felt as though there were less safe (4%) following their visit to the police station about a family or domestic violence-related matter.

Figure 19. How has your visit to the police station today affected your safety?



Perceptions of safety varied according to who the victim spoke with.

Figure 20. How has your visit to the police station today affected your safety?



One victim who spoke to both QPS and the advocate indicated their safety had improved due to being provided security systems.

Very helpful and knowledgeable, immediately phoned to get information which I feel made me feel safe in my situation. -Victim 104

One victim had only spoken to the advocate, as her former partner is a police officer, and she was afraid of the repercussions if she pursued a DVO. She said her safety hadn't changed because,

I am still dealing with a very volatile person. -Victim 30

One victim who spoke to both QPS and advocate had ongoing safety concerns due to her experience with the police response.

I was made to sit in the foyer and tell my story. I had to watch as police smirked at the fact they had strong evidence of a breach, even though this could mean serious threats to my safety. These people are not bad people but they need more training to understand the gravity of this type of complaint. I have serious concerns about my safety. -Victim 60

Two victims who had only spoken with police explained their increased safety concerns,

They completed my statement in a timely and respectful manner, it however, concerns me about the steps taken after the statement is taken.... My experience with DV escalates when police are involved, and I find I'm not safe until in front of the courts and that they have a poor understanding of DVO conditions. -Victim 69

I do not feel that domestic violence issues are taken seriously from police, I have no faith in the system at all. -Victim 73

Advocate Survey Findings

Demographics

Three advocates participated in the pilot and survey. All of them were female. One identified as Aboriginal, and two identified as not Aboriginal or Torres Strait Islander. One advocate from Coomera Police Station and two from Southport Police Station completed the survey. Advocates were 34 to 42 years old.

Overall perceptions

All three advocates (100%) reported that the trial co-locating domestic violence advocates at police stations was beneficial. Table 3 summarises the outcomes of the pilot from the advocates' perspective. Advocates were asked to select all that apply.

Table 3: Outcomes advocates reported as a result of the trial co-locating a domestic violence advocate at the station

	<i>N</i>	<i>%</i>
Survivors received a trauma-informed response	3	100.0
Survivors were better informed about their options	3	100.0
The program facilitated immediate engagement between the survivors and the advocate	3	100.0
Survivors received emotional support and crisis counselling whilst at the station	3	100.0
Survivors felt more comfortable interacting with police	3	100.0
Survivors had a safe place to get information	3	100.0
Survivors were offered safety planning	3	100.0
Survivors had more privacy at the station	2	66.7
Advocates and QPS were able to learn from each other	2	66.7
Survivors were more able to assess their own level of risk	2	66.7
Survivors weren't waiting as long	1	33.3
I gained a better understanding of how to best provide support to survivors	1	33.3

The open-ended questions provided additional information about why advocates supported continuing the co-location program.

I think that there is a definite need for the co-location to continue as over the duration of the pilot project, we had some great outcomes with supporting women. -Advocate 10

I believe moving forward it is vital to ensuring women get the best response possible when attending a police station. If women get to the point they are involving police we know they have serious concerns for their safety; this is where women need to be offered engagement in safety planning and DV support to support women to be the safest they can be. -Advocate 11

Women [were] able to be practically and emotionally supported even if [there were not] QPS grounds to assist with application-Information and appropriate referrals.- Advocate 12

Table 4 shows advocates' views on the benefits of the pilot.

Table 4: Which of these statements apply to the co-location pilot?

I was able to learn from QPS staff	N	%
Strongly Agree	2	66.7
Neither Agree nor Disagree	1	33.3
I am more aware of operational constraints faced by QPS when responding to domestic violence		
Strongly Agree	2	66.7
Agree	1	33.3
I was able to work collaboratively with QPS to provide the best possible support and resources for women reporting domestic violence		
Strongly Agree	2	66.7
Agree	1	33.3
DVPC and QPS can use shared learning from the co-location pilot to work toward longer term arrangements for future co-located services		
Strongly Agree	2	66.7
Neither Agree nor Disagree	1	33.3

Advocates described opportunities for shared learning, as in this comment,

This pilot project was very much helpful for building strong working relationships with police officers and having opportunities for shared learning. I developed a better understanding of QPS processes and some of the barriers that they face in their work and I was able to share with them the services that DVPC provide. -Advocate 10

Advocates also described improved collaboration as a result of the co-location pilot.

I think the program has been instrumental in developing a closer partnership between DVPC and QPS. Many officers approached me and said that by having me there, they understood what our service actually does to support women. -Advocate 10

Table 5 shows the advocates' assessment of improvements due to the pilot.

Table 5: Which of these statements apply to the co-location pilot? (Continued)

It improved Domestic Violence Prevention Centre's responses to survivors of domestic and family violence	N	%
Strongly Agree	2	66.7
Neither Agree nor Disagree	1	33.3
It improved Domestic Violence Prevention Centre's ability to provide timely support and advice for women		
Strongly Agree	2	66.7
Agree	1	33.3
It improved Domestic Violence Prevention Centre's ability to advocate on survivors' behalf with QPS		
Strongly Agree	2	66.7
Agree	1	33.3
Domestic Violence Prevention Centre was able to remain victim-focused and child-centred in interactions with survivors		
Strongly Agree	2	66.7
Agree	1	33.3
It improved collaboration with QPS to maximise the opportunities to support survivors of domestic and family violence		
Strongly Agree	2	66.7
Agree	1	33.3
It improved collaboration with QPS to maximise the opportunities to increase community safety		
Strongly Agree	2	66.7
Disagree	1	33.3

Advocate perceptions of victim experiences at the police stations due to the co-location pilot

Advocates described a range of beneficial outcomes of the pilot based on feedback from the victims.

Most importantly, every single woman who I worked with at the station gave feedback about [how] helpful it was for them to have the support from me when came to the station. -Advocate 10

From what the women attending the station said to me, they felt less overwhelmed and less anxious having me as the link in their communication with police. They said they felt heard and understood by me. -Advocate1

Women said that they felt more comfortable in speaking with police when I was there to support them. -Advocate10

I believe it was beneficial due to the feedback received from women accessing this support. I would regularly hear feedback such as "it's so good to finally have a DV worker at the station" and "it makes it much less scary knowing I can have your support when dealing with police. -Advocate 11

Advocates described outcomes including reduced wait times for victims.

It reduced the waiting time for women when they attended the station. When a woman came to the counter and said that she was there to see me, most of the time, she was able to see me within a few minutes, whereas the waiting time to see a police officer could be quite long on busy days. - eg: One woman who attended the station was not sure if she was ready to speak with police. She knew I was at the station and so she went straight to the counter and asked for me. After I had spoken to her, she decided to give statement to police and the police were able to take action against the person who was using violence. Afterwards, the woman told me that she would have not spoken with police if she had not got the opportunity to speak with me first and had to wait in the waiting area for hours. – Advocate 10

More convenient for women - having the 2 resources in one place, important due to time restraints. -Advocate 11

Advocates also described the increased likelihood of police action in some cases.

Many women said that they felt the response from police was more helpful when I was able to provide the advocacy support. -Advocate 10

I also saw first-hand the positive outcomes that could be achieved from advocating with police - there was several occasions where police at first had said they couldn't take action however with my advocacy and education they ended up taking action. -Advocate 11

DVPC could advocate with QPS re: Breaches (especially when women struggling to articulate/ provide evidence. -Advocate 12

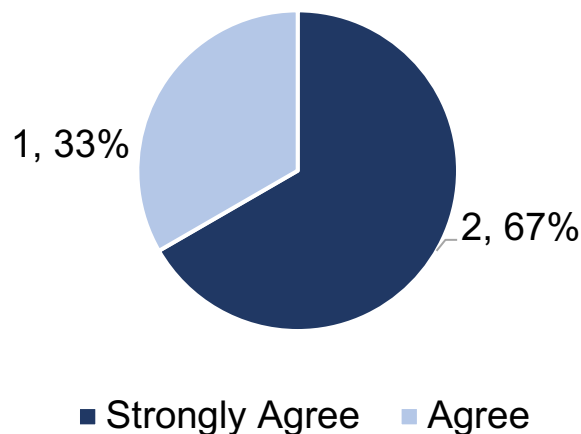
Advocates described increased support for victims as another outcome of the pilot.

Women could discuss their options such as a private applications if QPS were unwilling or unable to assist -Women could be referred in for appropriate and timely supports in the absence of an order. -Advocate 12

It was a more wrap around service - women accessing police supports could also have the safety planning and emotional support provided to them by [a] DV advocate.- Advocate 11

Based on these benefits, all of the advocates would like the co-location project to continue after the pilot, as shown in Figure 21.

Figure 21. I would like the co-location pilot to continue



Reasons for supporting continuation and expansion of the program

I think that there is a definite need for the co-location to continue as over the duration of the pilot project, we had some great outcomes with supporting women. -Advocate 10

I think that moving forward, it will be really important to resume the co-located model as soon as possible as otherwise, the pilot program may lose its momentum. I think the program has been instrumental in developing a closer partnership between DVPC and QPS.- Advocate 11

As Table 7 shows, all of the advocates thought it would be beneficial to have an advocate present more than two days a week.

Table 7: The advocate was present at the station two days per week during the pilot. Would it be beneficial to have an advocate present more often?

	<i>N</i>	%
Yes	3	100.0

Written comments explain these views.

Having an advocate full-time at the police stations will help in more women getting the opportunity to engage for support....If the advocate is present every day, it saves time for women and increases the likelihood of immediate engagement. -Advocate 10

it could not be predicted which days would be busiest for DV victims to attend.Women experiencing/fleeing DV often only have small windows of time to seek engagement and if an advocate isn't there on the day they attend this could mean they won't get their full options provided to them (refuge etc) and could impact on their decisions.- Advocate 11

Having advocates at more stations may contribute to more consistent response for survivors as this is an issue reported depending on station-Additional days may also ensure consistency and continuity of support. -Advocate 12

Table 8 indicates that all of the advocates think it would be beneficial to have advocates at other police stations.

Table 8: Do you think it would be beneficial to have domestic violence advocates at other police stations?

	<i>N</i>	%
Yes	3	100.0

All women said that they absolutely want to see this model continue in future and at all stations. -Advocate 10

More days / stations may contribute to better collaboration between DVPC and QPS as well as a greater opportunity for shared learnings. -Advocate 12

Challenges

Advocates noted a number of challenges with the pilot, including building awareness and rapport at the start of the trial, collaborating across organisations working from different approaches, some officers' reluctance to engage with advocates, some officers turning women away when the advocate was not at the station, and inappropriate use of advocacy services.

In the first few months it was difficult to spread the word among the officers at the station about my role and what days I would be there at the station. -

Advocate 10

The intersection of frameworks between QPS and DVPC - trying to understand where each party is coming from. Building rapport with QPS officers when they are very time poor and also many different shifts makes the consistency of workers hard. -Advocate 11

Women would be asked to come back on a day the DV advocate was on and whilst they confirmed they would come back; they never made it back to the station and therefore this was a missed engagement opportunity. -Advocate 10

DVPC Advocates not respected/taken seriously by some officers. -Advocate 12

DVPC Advocates being used when aggrieved is 'too emotional' for officers to deal with. -Advocate 12

Queensland Police Service Survey Findings

Demographics

Twenty-one QPS staff from Southport Police Station and four QPS staff from Coomera Police Station completed the survey about the pilot program. Fourteen QPS participants identified as male, eight identified as female, and two preferred not to say. One QPS participant identified as Aboriginal. The participants were 27 to 63 years old. Three QPS participants were specialist domestic violence officers.

Overall perceptions

Twenty-three QPS participants from Southport Police Station reported that the trial co-locating a domestic violence advocate at this police station was beneficial. Two reported that it made no difference or was neutral. Their comments explain these assessments,

The project is a major success. -QPS 14

Being able to sit down in company of the advocate I feel makes the victim feel more comfortable and greatly assists with managing the victim at all levels. This service WORKS! -QPS 13

I think this program was a fantastic initiative, not only building on relationships between all of the agencies involved, but more importantly providing a very personal service to victims of DV in a time of need, often when their life is at its worst. – QPS 13

Having a DV support advocate was beneficial for additional and real-time support and advice for survivors [sic] reporting at the station. – QPS 43

Both QPS participants who thought it made no difference or was neutral took issue with DVPC being a women's service. However, despite their closed-ended survey responses indicating the pilot did not make a difference or was neutral, their written responses to the open-ended questions indicated it should be expanded to include more services.

Irrespective of [the] gender of an aggrieved, support services like this need to be offered to all. A true understanding and improvement of DV support services cannot truly progress when it is one-sided. -QPS 49

NO, male aggrieved (VICTIMS) clients were allowed to be referred, and, NO services at all were offered to MALE (VICTIMS) clients. Most MALE Aggrieved clients are often simply seeking advice and assistance, so therefore having a point of contact for them would be of benefit, however, none offered. In contrast, most female aggrieved attend the station already seeking POLICE PROTECTION NOTICES not just referrals. -QPS 34

Table 9 summarises the outcomes of the pilot from the QPS participants' perspective. QPS staff were asked to select all that apply.

Table 9: Outcomes QPS staff reported as a result of the trial co-locating a domestic violence advocate at the station

	N	%
Aggrieved were better informed about their options	25	100
The program facilitated immediate engagement between the aggrieved and the advocate	22	88
Aggrieved had a safe place to get information	21	84
Aggrieved were offered safety planning	21	84
Aggrieved received emotional support and crisis counselling whilst at the station	20	80
Aggrieved received a trauma-informed response	15	60
Advocates and QPS were able to learn from each other	18	72
Aggrieved had more privacy at the station	18	72
Aggrieved were more able to assess their own level of risk	18	72
Aggrieved felt more comfortable interacting with police	17	68
Aggrieved weren't waiting as long	13	52
I gained a better understanding of how to best provide support to survivors	11	44

Open-ended items illuminate these outcomes.

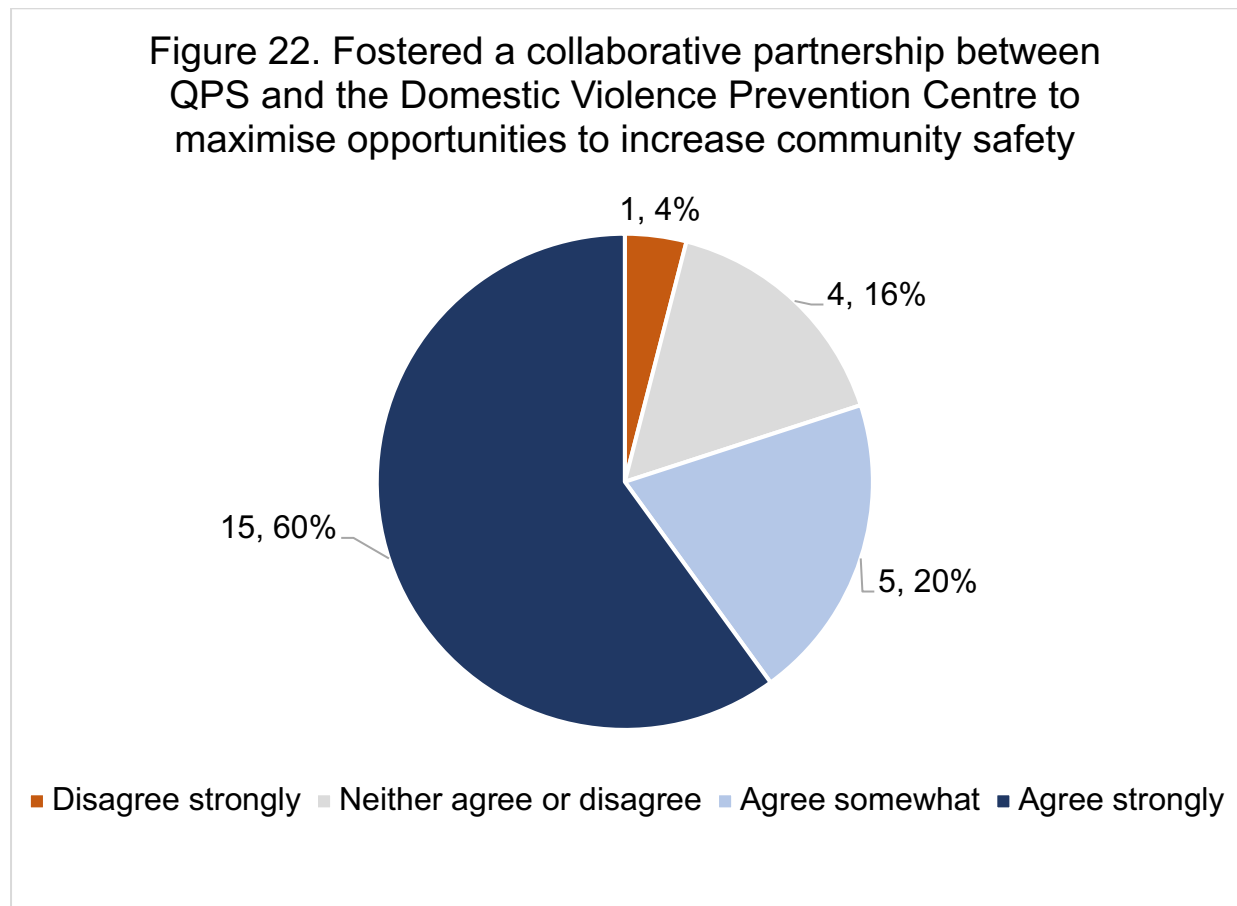
I believe that having the advocate present at the station helps not only educate the victim about what services are available, but also assists in providing education to the investigator, especially junior Constables that are new to policing. -QPS 13

Having the advocate available at the station level increases your ability as an investigator to build rapport with a victim who is often reluctant to disclose a true and often accurate version of events due to the fear of retribution of the offender. -QPS 13

The specialist support and advice that can be provided to victims along with learning available for officers. -QPS 24

Real-time and additional support and information for the aggrieveds. -QPS 43

Figure 22 shows QPS staff perceptions about whether the pilot fostered a collaborative partnership between QPS and DVPC to maximise opportunities to support victims of domestic and family violence.



Responses to the open-ended questions confirmed these responses.

It built a positive relationship between QPS and DVPC. -QPS 36

I saw a deeper level of understanding and appreciation occurring between the organisations and individuals which can only be for the benefit of the aggrieved. -QPS 18

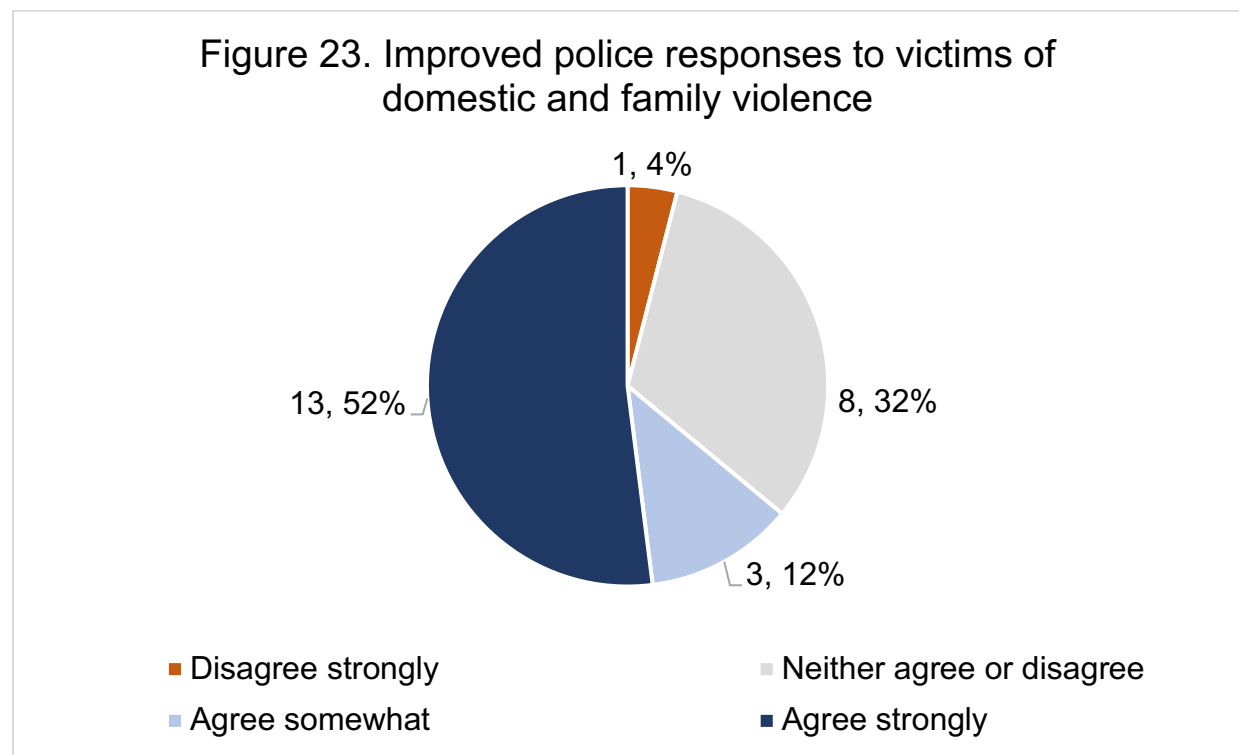
It allowed information to be shared more easily under Part 5A of DFVA. -QPS 36

They can share the work load, particularly advice wise. -QPS2 41

The QPS participant who disagreed strongly with this and other outcome items about the co-location program impact seemed to dismiss the benefits of services for women because no men's service was present. They stated,

It provided no support to any of the aggrieved men. Advocates seemed disinterested in providing assistance or information to whom could go to for support. -QPS 49

In addition to improved collaboration between DVPCGC and QPS, participants reported that the pilot helped improve responses to domestic and family violence cases. Figure 23 shows QPS staff from Southport Police Station perceptions about whether the pilot improved police responses to victims of domestic and family violence.



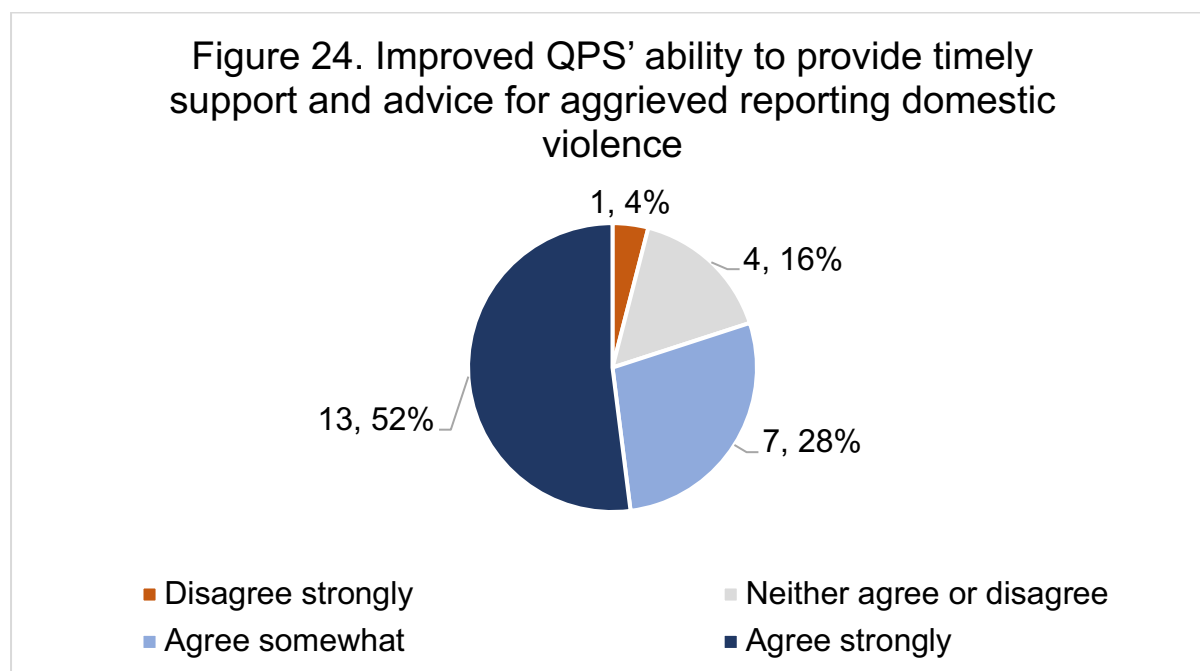
It offered immediate assurance to distraught victims that assistance was available; made the experience much less traumatic and lit a pathway to their future. -QPS 29

Enabled an effective and improved response to be provided to the aggrieved/victim whilst freeing police resources to assist in other areas. -QPS 33

I also believe that this service at a station level reduces the calls for service as the victim is able to personally attend a safe environment where they can feel comfortable in the company of the advocate directly rather than over the phone. It's a more personal approach which assists greatly when dealing with vulnerable people. -QPS 13

Being about to provide a more holistic and tailored approach to the aggrieved at the time of their arrival without the need for repeated appointments generally. – QPS 19

Figure 24 shows QPS staff perceptions about whether the pilot Improved QPS' ability to provide timely support and advice for aggrieved reporting domestic violence



While aggrieved could be referred to services normally, it was found that by having aggrieved return to the station to source support services those services were more tailored and quicker in delivery. -QPS 19

It's very beneficial for the Agg[rieved] person to have this interaction with the advocate straight away so they feel as though they are being taken seriously and being attended to whilst sometimes having lengthy wait times to actually see police due to their high workload. Sometimes Agg[rieved] are waiting in excess of 3-4 hours to speak to a police officer due to the high number of DVs being reported at the counter.-QPS 27

All but one of the QPS participants indicated that it would be beneficial to have an advocate present more often than two days a week.

Table 10: The advocate was present at the station 2 days per week during the pilot. Would it be beneficial to have an advocate present more often?

	N	%
Yes	24	96
No	0	0
Unsure	1	4

Responses to the open-ended questions helped explain the reasons for wanting advocates on the stations on more days.

Due to the volume of DV reporting at the Southport Police Station, two days is simply not enough. Having a greater presence would allow police to better provide services to Aggrieved persons. -QPS 30

Every day we have multiple DV complaints at the counter and all would be helped by having the DVPC advocate there.-QPS 22

Counter is open here 5 days and DV reports come in every day. -QPS 19

Table 11 shows most QPS participants thought that it would be beneficial to have domestic violence advocates at other police stations. A couple were unsure.

Table 11: Do you think it would be beneficial to have domestic violence advocates at other police stations?

	<i>N</i>	%
Yes	23	88
No	0	0
Unsure	2	12

Responses to the open-ended questions helped explain these results.

In my career I have performed duty in many of the remote Indigenous Communities in far western QLD and I only wish that this service was available to the vulnerable people in these remote areas of the State. -QPS 13

All stations should provide the same services. It would take a lot of pressure off Coomera and Southport if the service was everywhere. But it also needs to be advertised so people know that 'their' police station has an advocate on which day. -QPS 16

Perhaps a rotational roster for the advocate to attend various stations. Coomera Station has a significant amount of DVs reported via the Counter each day (8am to 5pm) and having an advocate for real-time support and advice would be very beneficial. -QPS 43

If other stations had an advocate attend once or twice per week (depending of the amount of DV reported in their patrol districts) it would allow DV response to become a little more streamlined. Busier station could have the advocate present 3-4 times per week and go see benefits to victims straight away. -QPS 42

Challenges

QPS participants from both stations provided information about challenges associated with the pilot. This feedback generally supported the findings above, with comments indicating that the main challenges were due to the short duration of the pilot, the limited number of advocate days at the station, and the need for more advocates to meet demand. The need for greater visibility and promotion of information about the program to police was also noted. Expanding services to include support for people who identify as male victims was also suggested.

Initial take up by clients at counter and officers. 9 months was too small a period. -QPS 2

Advertising of the presence of the DV advocate at the commencement of shift and during shifts was not ideal. More awareness for QPS officers and counter staff would result in a greater use of this service. -QPS 12

The limited number of hours/days this service was provided. -QPS 19

Availability - sometimes persons waiting in a queue to see DVPC due to high demand. The limited number of hours/days this service was provided. -QPS 7

Lack of support for men who are an aggrieved. -QPS 49

Conclusion

This report investigated these research questions:

1. Did the pilot enhance collaboration between DVPC and QPS to maximise opportunities to support victims of domestic and family violence and enhance community safety?
2. What are victims' experiences approaching the police station for assistance with domestic violence matters with assistance of an advocate? (e.g. satisfaction with interaction, safety)?
3. What are DVPC advocates and QPS staff perceptions about the effectiveness/benefits of the co-located service and necessary improvements going forward?

In answer to research question one, our findings indicate that the pilot did enhance collaboration between DVPC and QPS to provide better support for victims and enhance victim safety.

In response to research question 2, we found that the overwhelming majority of victims reported positive experiences with advocates. While most victims also reported positive experiences with police, their written comments indicated a more varied response, identifying areas where responses could be improved via continuation of the co-location pilot. A key finding is that victims who met with an advocate only or an advocate and police were more likely to report increased feelings of safety than those who only met with QPS staff. None of the victims who met with an advocate felt less safe, while a few who only met with QPS staff felt less safe.

Participants identified multiple benefits from the co-location program, including improved victim experiences such as:

- enhanced feelings of safety for victims who met with the advocate or the advocate and police;
- reduced wait times;
- more support for victims;
- reduced fear and anxiety talking to police;
- faster connection and referral to services;
- increased likelihood of police taking the incident seriously or taking action for victims who met with the advocate or the advocate and police; and
- more options available to victims for whom police action was not an option.

Findings from this evaluation are broadly in line with those from the previous two evaluations of co-located programs, both of which documented strong support for the programs and recommended their extension and expansion.

In relation to research question three, advocates and QPS staff strongly supported the continuation and expansion of programs co-locating domestic violence advocates in Queensland Police stations. Specific benefits included enhanced collaboration and shared learning between DVPC and QPS, reduced workload for QPS, including suggestions that a co-located service could potentially reduce repeat

visits by better meeting victim needs. As 82% of victims indicated that it was not the first time they had contacted police for assistance with a domestic violence matter, this would be a clear benefit.

The findings revealed some challenges associated with the co-location program. Most of these centred on requests for better advertising and information about the program and greater advocate availability. For example, one participant indicated that people approaching the police for assistance with domestic and family violence were turned away on days when the advocate was not at the station and asked to attend later. Another indicated that police used advocates to deal with people who were upset. Care will need to be taken to establish expectations for the division of tasks between advocates and police, as well as to ensure victims are not turned away from police stations when seeking help.

While many victims expressed ongoing serious concerns about their safety, it's clear from the written feedback that the co-location program could help to alleviate some of the issues identified in the pilot evaluation. Finally, the informal education and support offered by collaboration and communication between QPS and DVPC can increase knowledge of coercive control, communication with victims, and support to access resources.

Recommendations

Based on these findings, there are some recommendations for measures to strengthen co-location programs and police response to domestic and family violence victims going forward. These measures would maximise the benefits of co-location and minimise the risks of predictable unintended outcomes.

1. Co-location is an expansion of victim services, so new programs should be resourced with additional funds rather than requiring DFV organisations to staff more programs using existing resources.
2. High-quality program evaluation includes before and after components and requires planning. Evaluation should be funded and built into the launch/re-launch of co-location programs and begin before the program to permit assessment of changes due to the program as well as individual participants' reflections on their experiences.
3. Establish written protocols for the referral process to advocates at the station. Protocols should include when and how to refer to victim advocates, the roles of each organisation, and what not to do. For example, police should be explicitly prohibited from referring women to the advocate at the station rather than investigating while out on calls or telling women to leave and come back another day or visit another police station if an advocate is not on site.
4. Repeat explanation of program and roles at the beginning of each shift to ensure awareness by all staff.
5. Implement weekly check-in meetings between police representatives and advocates to identify themes and problems in DFV responses and create solutions. These meetings could identify areas where targeted training is needed and ways to improve procedures.

6. Permit victims to speak to advocates first rather than waiting to be triaged by police staff if there is a wait at the station.
7. Position the victim advocate in a highly visible location to police to maximise interaction and opportunities for shared learning and collaboration.
8. Use a private space to ask victims questions rather than asking sensitive questions at the counter in full hearing of everyone waiting in the station.
9. Supplement informal learning with bi-directional training, so that victim support organisations and police better understand each other's roles and responsibilities. Training from police should include standard operating procedures and legal requirements for responses to DFV, such as requirements to record victim statements on body-worn cameras, the conditions in which victims can and can't be turned away, and the conditions in which domestic and family violence orders may be made. Training from the DFV organisations should target persistent misconceptions affecting police responses, such as that domestic and family violence is not gendered and that police should be sceptical of women reporting abuse as there may be family law issues. Training is needed to improve recognition of the ways trauma victims commonly present in interviews, the difference between offensive and defensive injuries, and common ways in which perpetrators manipulate and weaponise police as part of systems abuse. These measures could help to reduce the misidentification of victims as perpetrators and enhance evidence collection for investigation.

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