Keep following the yellow brick road. The trials, tribulations and triumphs of colocated police, child protection and sexual assault workers

New Model For Service Delivery

Victoria has a new model for delivering services to victims of sexual assault and family violence. They are Multidisciplinary Centres, or MDCs. These are partnerships of Victoria Police Sexual Offences and Child Abuse Investigation Teams (SOCITS), Counsellor/Advocates from Centres Against Sexual Assault, Forensic Physicians from the Victorian Institute of Forensic Medicine and Child Protection Workers from the Department of Health and Human Services. In this new model all of these agencies are located in one building giving victims a one stop shop for service delivery.

There are six Multidisciplinary Centres now in operation in Victoria. Two are based in Melbourne suburbs and four in major regional centres. Two are in the North of the State, one in the West and one in the East.

As you can imagine, establishing these centres is not cheap, because it means finding premises that can accommodate 60 to 100 workers. So the question can be asked – why this model?

History of MDC Development

After the initial fight in the 1970’s by the Women’s Movement to obtain services for victims of sexual assault, pressure had been brought to bear on the Police about their treatment of sexual assault victims and on the judicial system to curb the worst excesses of cross examination and prejudice. Even after changes to Police procedures and organisation and legislative reforms, Victoria still had the lowest rate of reporting of sexual assaults in Australia.

The Victorian Law Reform Commission (VLRC) had been asked to look at this issue in 2001 and in 2004 handed down 202 recommendations in a Sexual Offences: Law and Procedure Final Report. This report responded to the widely held perception in Victoria that the criminal justice system did not deal with complainants fairly. Some of these recommendations related to legislative changes and Victoria Police procedures, intended to address the following matters:

- People who alleged they had been sexually assaulted were the least likely of all crime victims to report the offence to the Police
- Only 1 in 6 reports to Police of rape and less than 1 in 7 reports of incest or sexual penetration of a child resulted in prosecution
- Conviction rates for rape were substantially lower than for other offences and had fallen since the late 1980’s

There were 10 recommendations in this report specifically related to Victoria Police which were around the need for enhanced training, ensuring victims were treated with sensitivity and providing continuity of contact for a victim. The report saw Police as gate-keepers to the criminal justice system and “vitaly important” in relation to an initial response to people who reported a sexual assault.

As well as the VLRC recommendations suggesting improvements could be made in the way victims of sexual assault were treated by the Police, it had also become very clear that the majority of people assaulted were not reporting at all. CASAs in Victoria had consistently stated that most of their clients had never reported to the Police and even when encouraged to do so often came back discouraged by the response they had received from the General Duties member on the desk at the Police Station. In addition to that a National Personal Safety Survey in 2006 conducted with more than 17,000 respondents found 1 in 6 women had not told anyone that they had been sexually assaulted.
Multi Disciplinary Centres

The Victorian Government response to the VLRC’s recommendations was to develop a whole of government strategy and allocate, in the Victorian 2006-2007 State budget, A$34.2 million over 4 years aimed at reforming the way the criminal justice system responded to sexual assault. $6 million was provided for the creation of a pilot project of two Multi-Disciplinary centres - one rural at Mildura and one metro based at Frankston. There was to be an evaluation of the pilot conducted by Deakin University.

The purpose of the Centres was to deliver integrated justice and human services responses by bringing together one of the newly created 27 Victoria Police Sexual Offences and Child Abuse Investigation Teams (SOCITs) with a sexual assault centre. Child Protection workers were added into the model later. Sexual assault workers are social workers or psychologists and provide counselling and therapy. They also see their role as advocating for justice for their clients. CASA workers have a strong awareness of their origins in the Women’s Movement. The SOCITs are specialised teams of investigators with forensic expertise in the interviewing of sexual assault victims and offenders. Prior to these Teams being developed, their role was divided between Sexual Offence and Child Abuse Units and Criminal Investigation Units.

It was highlighted in the VLRC report that this approach made for an inconsistent response.

It was hoped that this collaboration with the new Teams would

- Increase sexual assault and child abuse reporting rates
- Stem the attrition rates of reported matters through the criminal justice system
- Increase prosecution rates
- Reduce offending and re-offending
- Assist the recovery of victims

After 3 years of operation, the two pilot MDCs were evaluated in 2009 by Deakin University. Victims and MDC staff were interviewed and victims confirmed that their experience of the MDC model was positive. This positive feedback was described as six elements:

- The victims stated they felt treated as a valued complainant
- Their privacy and anonymity was respected
- The number of service providers was minimised
- They had a timely response
- Services were accessible
- The process was explained to them and they were kept informed of the legal status of their case.

Victims made comments such as

- “They never once made you feel it was your fault or anything.”
- “I didn’t have to explain my whole story or the whole case or where things were at because I was only dealing with one or two police members.”
- “It’s important because you don’t have to go shopping for things, everything’s in the one spot.”
- “They let me know all the time what was happening.”
- “It is comforting knowing that unless somebody else has experienced this or either works here, they don’t know what building you’re going into.”

Benefits of Co-location

It was clear from the Deakin University evaluation that victims found the service they receive at an MDC preferable to separate facilities. There are also additional benefits which were not anticipated in the initial service model development, but have become part of practice. These include:

- Improving the process for interviewing children. If a child becomes distressed during a recorded interview a counsellor is asked to spend some time with the child and assist them with the process
- Increased access for children to counselling. Children who do not disclose when interviewed, but there are concerns about the behaviour or disclosure which has led to the interview, are referred directly to SECASA for counselling with their non-offending parent/s or carers. Whilst this may have happened in the past when a child
was interviewed in a Police Station the referral often got overlooked or parents were dealing with very complicated situations and did not get around to making a referral.

- The close relationship between the Police and the Child Protection workers led to a quicker response time from point of notification to investigation
- Clients benefit from the proximity of agencies leading to greater and quicker communication
- Child Protection and CASA counsellors work closely with families where there are children and young people who require counselling
- Counsellors ask SOCIT members to come into counselling sessions to explain what support can be given to someone uncertain about reporting
- SOCIT members call on counsellors when they have a victim with them who is ambivalent about reporting or counselling
- Walk in clients for Police who need CASA input are seen as soon as a counsellor is free
- If the Police decide not to continue with an investigation the victim has a joint appointment with the counsellor involved and the Police member which makes for much clearer communication and allows for a challenge to the decision.

Developing collaborative work practice took the workers in the pilot MDCs a couple of years. The new MDCs have been able to benefit from this experience. This has led to changes in the layout of the MDCs, an acknowledgement that there needs to be regular training and team building with all the partners involved, and a modification of attitudes and practices for all involved.

The second evaluation was carried out from August to December 2015, by which time the two pilot MDCs had been in operation for 8 years and two more had been opened. The scope of this evaluation involved focus groups, one-on-one interviews with staff and an online survey, interviews with key government partner agency representatives, and a reflection workshop with key stakeholders to consider emerging issues identified from Crime Statistics Agency data. Victims were not interviewed this time.

The first evaluation found that colocation had improved co-operation and changed practice. The second evaluation, 6 years later, provided strong evidence of the high levels of collaborative effort now taking place. The evaluation survey indicated that two-thirds of respondents identified that CASA, SOCIT and Child Protection work collaboratively in response to initial disclosures of child sexual assault on a weekly or daily basis.

According to survey respondents, joint investigations occur frequently. 33% of SOCIT and Child Protection survey respondents reported working together on joint investigations on a daily basis, and 52% on a weekly basis. Almost 50% of CASA respondents reported being involved in Child Protection and SOCIT investigations on a weekly basis.

Several key recommendations were made by respondents to this second evaluation including that
- the Victorian government should consider further investment in the MDC model
- the Partner Agency Agreements that support the functioning of MDCs should be reviewed
- a new position of MDC Co-ordinator should be created and funded for each MDC
- the agency partners should develop an infrastructure and design plan as input for creating future MDCs.

Lastly, but very important – the agency partners should explore the inclusion of family violence into the MDC model.

It is worth emphasising that MDCs are not located in Police Stations and that staff in the MDCs sit near each other, not on different floors. This has a number of benefits for close working relationships. Obviously there are challenges in co-locating agencies with totally different cultures, but Police Officers, counsellors and child protection workers share tea rooms, interview rooms and one reception team, which encourages liaison and collaboration.

An example of how this process now works is a young woman who had been raped two weeks before came to counselling to deal with not sleeping and being hyper vigilant. She said that at the time she was raped she had attended the local Police Station and spoken to the General Duties member on the desk who the victim felt was not helpful. She had walked out, decided not to report and returned home. A friend had become concerned about her wellbeing and had persuaded her to attend SECASA. After talking with the counsellor the young woman agreed to meet a SOCIT member. This only entailed walking down the corridor to see if a Police member was free. The young woman subsequently reported and after some investigation an offender was located. In some ways the outcome is less relevant here than the process. In the end there was not a successful court case. However, throughout the process the victim felt supported, knew what was happening and, although disappointed, understood the final outcome.
Before the MDC, the counsellor would have suggested that the young woman might want to talk to local Police. An appointment would have been made for her at the local Sexual Offences and Child Abuse Unit, the squads which pre-dated the current SOCIT teams. Counsellors are usually too busy to accompany a client to the Police Station. We know that people find it daunting to go to a Police Station and often do not follow through and talk to the Police. We had, over a number of years, many discussions about better ways to handle this issue. The tension for counsellors has always been between ongoing service provision, waiting times for appointments and the need to help current clients with contact with the Police.

Not all of our MDCs provide the same range of services. All of them provide the core services: police response to sexual assault; sexual assault counselling; and child protection services. Some MDCs also provide management of the Sex Offender Register; and programs for problem or abusive sexual behaviours for young people.

**Initial Challenges with the MDCs**

- Selling the concept to senior Police.
- Initial difficulties fully appreciating each other’s roles. This included a perception of unfriendliness when doors between work areas were closed.
- Different assessments of risk.
- Providing enough counsellors that they have sufficient numbers to cope with large numbers of Police and CASA workers do not become marginalised
- Avoiding segregation and just co-locating. This has required an ongoing commitment re regular meetings, joint training and social events

**Conclusion**

MDCs have been a work in progress since 2004 when the discussions started about closer collaboration between Victoria Police and Centres Against Sexual Assault being a possible way to increase reporting of sexual assaults. Starting with the two pilot projects in 2006 in Mildura and Frankston we have moved to there being six functioning MDCs with another one on the drawing board.

Whilst there is no indication that MDCs have increased the conviction rates it is clear that they have increased the reporting rates. It will be interesting over the next decade to see what changes these colocations bring about in public perceptions about Police and their dealing with sexual assaults.

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