



**MINISTRY OF SOCIAL
DEVELOPMENT**
TE MANATŪ WHAKAHIA TO ORA

Sexual Violence Crisis Support Services

Service development consultation document

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Executive summary

This document provides an overview of the sector engagement that was carried out to develop the sexual violence crisis support services and sets out the next steps in the service development process.

The service development work is focussed on how these services can be supported to further develop capability and build capacity to enable the sector to become more sustainable in the long term. Feedback from the sector is now being sought on the proposals in this document.

The document

This document is made up of six parts. Your feedback is sought on specific parts of the document.

Part 1: Setting the scene. This section provides background information to the work and what we know about services.

Part 2: Vision for Sexual Violence Crisis Support Services. This section sets out the vision for services, what the services are and who they are for. Your feedback is sought on the proposed vision and definition of crisis support services.

Part 3: What you told us. This section summarises what we learnt from regional hui held in October 2016.

Part 4: Funding allocation model. This section describes the funding allocation model that will be used to distribute funding for crisis support services from 1 July 2017.

Part 5: Service Framework. This section shows the draft service framework for crisis support services. Your feedback is sought on the proposed vision, definition of the services and the intervention logic.

Part 6: Next steps. This section provides advice on the next steps for the work.

Background

The rate of sexual violence in New Zealand is high, with longer term impacts such as post-traumatic stress, alcohol and other drug misuse, mental health, employment and relationship breakdown, and self-harm/suicide, being well documented. Early intervention has been shown to mitigate impacts on survivors and having awareness of and access to support services is critical. Historically, sexual violence services in New Zealand have been under-resourced with limited capacity to meet demand.

In response to these issues, the Minister of Social Development commissioned an in-depth review of the sector in March 2013. Shortly after, the Social Service's Select Committee announced an inquiry into the funding of specialist sexual violence services. The Select Committee reported its findings to Parliament in December 2015.

As part of Budget 2014, \$10.4 million over two years was made available for the short-term stabilisation of specialist sexual violence services.

In May 2016, the Minister of Justice Amy Adams and the Minister of Social Development Anne Tolley announced that Budget 2016 would invest \$46 million over four years for sexual violence services. This investment aims to create a more sustainable and integrated national system of services to ensure more people get what they need, at the right time.

As a result of the Budget announcement, a specific work-stream was established under the Family Violence and Sexual Violence Ministerial Work Programme for the development of sexual violence services.

In October 2016 the Ministry of Social Development (MSD) held eight hui across the country with the sexual violence crisis support sector. This provided a valuable opportunity to hear about the strengths of existing services, gaps in services, what good practice looks like, the capabilities a specialist sexual violence workforce require and what a potential service framework would include. This document provides an overview of the sector consultation and subsequent findings with a particular focus on issues of sustainability, capability and capacity.

It is acknowledged that the sexual violence sector is a specialist sector that has been operating on limited funding since its inception. Funding to the sector has been both contributory and time limited, with contracts often rolling over on a 12-month basis. These arrangements have led to difficulties for the sector to build capability and co-ordinate resources for a more integrated response, including the development of Kaupapa Māori interventions that show a primary focus on whole of whānau well-being and interventions that uplift and enhance the mana of survivors, their whānau, and those who have engaged in sexual violence.

The sector has worked hard to establish a base of good practice capability. This was reflected in the timely release of the ‘good practice guidelines’ which were developed by the sector for the sector, and released at the time of the hui (October 2016). In spite of this capability and commitment to sound and safe practice, consultation with the sector confirmed a number of constraints and challenges to further development. The gaps in existing services identified during the hui, are outlined in this document.

Draft service framework

As a result of sector consultation and additional research, this document aims to set out a draft service framework for the delivery of crisis support services. The Ministry wants to develop this framework with providers and is seeking feedback on the framework through a series of hui during April 2016. There will also be the opportunity to provide written feedback via an online discussion tool and by email.

The framework is intended to cover principles of good practice, key components of service delivery, workforce capability, outcomes and effective reporting measures. The objective is to have key elements of the framework in contracts for services from 1 July 2017. In summary the draft framework covers the following elements:

Vision

The intended vision for the crisis support services is that they are accessible and readily available to those affected by sexual harm/violence wherever and whenever they need them, and that those services are based on good practice and culturally responsive.

For this vision to be realised it is critical that steps are taken to secure and develop capability across the sector, and that a focus is placed on ensuring sustainability for the sector through contracting, training, resourcing, and monitoring.

Services

The core services being referred to as crisis support services for this work include:

- 24/7 callout for advocacy and support
- Emergency Face-to-Face sessions (including crisis counselling)
- Crisis Social Work Support

It is important to note that ‘crisis’ is not defined by an actual event, but by a person’s (and their family and whānau’s) response to that event. Therefore a person’s response to a crisis event is not limited to a timeframe. A response can happen immediately after the event or be triggered at a later time.

This was reflected strongly throughout consultation and resulted in a shift from the term ‘first response’ to the term ‘crisis response’.

Clients

Sexual violence crisis response services are primarily for adults impacted by sexual violence. This can include the primary victim/survivor and their family and whānau. The majority of those seeking help are women. However, a number of adult men who have experienced childhood sexual assault and/or adult-to-adult abuse also seek out support services.

Services specifically for children are out of scope of this work. However, it is vital that strong links are built and maintained between adult services and children’s services to provide integrated, systemic interventions that provide whole of whānau interventions.

Principles of good practice

Until the recent release of the “Good Practice Responding to Sexual Violence: Guidelines for ‘mainstream’ crisis support services” the sexual violence crisis support sector has not had a guiding document on good practice. It is envisaged that the principles of good practice outlined within this framework will take from, as well as complement, both the good practice guidelines developed by the sector (see below), and the workforce capability framework currently being developed as part of the Ministerial Work Programme on family violence and sexual violence.

Broadly speaking the 15 principles are based on a ‘do no harm’ ethos and underpinned by the need for a workforce that understands immediate and inter-generational impacts of trauma; the importance of user autonomy and efficacy in their healing journey; and the need to provide robust, integrated interventions for not only the primary survivor but those around them whom have also been impacted by the violence/abuse.

The sexual violence sector is advocating for the development of a separate set of good practice guidelines for Kaupapa Māori sexual violence services providing crisis support. This recommendation is supported and seen as being a fundamental component of the service framework.

Workforce

The sexual violence workforce has historically been staffed by a largely volunteer workforce. This has been due in part to limited funding but also to the fact that there is currently no specific qualifications that lead into the specialist field that is sexual violence intervention.

Going forward, both the ‘Family Violence, Sexual Violence, and Violence with Whānau Workforce Capability Framework’ and the sector’s ‘good practice guidelines’ define the skills, knowledge, and actions required to safely and effectively address family violence, sexual violence and violence within whānau, and better meet the needs of victim/survivors and their family and whānau. It is envisaged these documents will provide a basis for a national capability build and support the sector toward having an aligned and accredited workforce.

Funding

A funding allocation model has been developed for crisis support services. This is a multi-layered model that provides a robust view of each region by taking into account the needs of clients, the prioritisation of equal access to services, current market conditions and local knowledge.

Results and reporting

To be able to assess the impact and effectiveness of services we need to understand who is using the services we fund and demonstrate they achieve results for people, families and whānau. Also to achieve results we need to contract for outcomes and have sector wide understanding of these outcomes and resourcing to support their capability and capacity to achieve these.

At present MSD does this via quarterly narrative reports and quality measures such as how many clients accessed the service, how many clients completed an intervention, and how many clients reported they were satisfied by the service they received.

A draft intervention logic, results and outcome measures are proposed. This is intended to provide a measurement system that links performance measures in Provider Outcome Agreements to the bigger results being sought.

Next steps

This document seeks your feedback on elements of the draft service framework that has been developed for the sexual violence crisis support services.

You can contribute to the discussion through the online discussion tool Loomio or by email to the Safe Families Team. The online consultation will be supported by five hui during April that will provide an opportunity for existing providers of services to come and discuss the document and approach.

Part 1: Setting the Scene



Part 1 – Setting the Scene

Purpose

The Ministry of Social Development (MSD), under the Family Violence and Sexual Violence Ministerial Work Programme, is leading the development of sexual violence services (namely crisis support sexual violence services, including a new national sexual violence helpline; harmful sexual behaviour services and services for male survivors of sexual abuse).

To progress the development of sexual violence crisis support services, MSD undertook a round of sector engagement, through a series of regional hui.

This report provides an overview of that engagement and proposes next steps to develop and implement services. There is a specific focus on looking at how services can be supported to further develop capability and build capacity in order to become more sustainable in the long term.

Budget 2016

On 18 May 2016, the Minister of Justice Amy Adams and the Minister of Social Development Anne Tolley announced that Budget 2016 will invest \$46 million over four years to better support victims and prevent sexual abuse.¹

Of this sum, \$39.6 million is new operational investment and \$6.4 million is reprioritised funding, to be used to maintain existing services in the short term and develop and implement services for the long term. This investment aims to create a more sustainable and integrated national system of services to ensure more people get what they need, at the right time.

The investment will support:

- crisis support sexual violence services for victims (including a new national sexual violence helpline) (\$37.444m)
- services for those with concerning or harmful sexual behaviour (\$6.628m)
- services for male survivors of sexual abuse (\$1.900m).

[Appendix 1](#) sets out the work that has happened within government and the Sexual Violence Sector that lead up to the announcement of Budget 16.

Name of services

More recently we have referred to ‘First Response Sexual Violence Services’ which cover the health, justice and psychosocial support services required by victims/survivors of sexual violence during and following a crisis.

During our engagement with the sector we received feedback on the name of services and that ‘first response’ does not accurately describe the services being delivered. We heard that crisis responses may be on-going and include multiple responses over unspecified periods of time.

¹ Minister of Justice (A Adams), Minister of Social Development (A Tolley) (18 May 2016). *Budget 2016: \$46m to support victims and prevent sexual violence*. Retrieved from <https://www.beehive.govt.nz/release/budget-2016-46m-support-victims-and-prevent-sexual-violence>.

In response to this feedback, we are now referring to these services as ‘sexual violence crisis support services’. This title also aligns more closely to the terminology used within the good practice guidelines developed through Te Ohaaki a Hine National Network for Ending Sexual Violence Together New Zealand (TOAH NNEST).²

Approach

Initial discussions

As a first step in developing these services we talked with some providers in August 2016 about the way they currently operate and things we need to consider moving forward.

The feedback we received from providers informed the planning of the hui held in October 2016. These hui were intended to be an opportunity for existing sexual violence service providers to input and inform the development of services.

Regional hui

MSD hosted eight regional hui across New Zealand in October 2016 to talk about the development of crisis support sexual violence services. Hui were held in Kaitaia, Whangarei, Auckland, Paeroa, Rotorua, Palmerston North, Wellington and Christchurch. Invitations were extended to existing Ministry-funded providers delivering crisis support services. In total 110 people participated in the hui (excluding MSD staff).

The hui provided an opportunity for us to hear directly from providers delivering crisis support services about the strengths of existing services and any gaps in services. We talked about what good practice looks like, the capabilities a specialist sexual violence workforce requires and what a potential service framework for services should include.

What we know

Sexual violence within New Zealand

Wall and Quadara (2014) Wharewera-Mika and McPhillips, 2016) suggests that sexual violence is one of the causes of greatest harm in our society, with impacts such as life-long anxiety and social withdrawal, disabling levels of shame and self-blame, suicide, alcohol and drug use, drop in socio-economic status, teen pregnancy and parenting, relationship and sexual difficulties, family violence and involvement in crime. Wharewera-Mika and McPhillips (2016, p.11) suggest that “these impacts spread out around individuals to weaken families and social safety”. Subsequently this also leads to higher rates of re-victimisation and vulnerability factors.

Sexual violence rates are high in New Zealand³ with 24 per cent of women and 6 per cent of men surveyed in the 2014 New Zealand Crime and Safety Survey reporting that they experienced sexual

² The good practice guidelines refer to ‘crisis support services for survivors’.

³ Ministry of Women’s Affairs (2009). *Restoring Soul. Effective interventions for adult victim/survivors of sexual violence*. Ministry of Women’s Affairs, Wellington.

violence at some time in their lives.⁴ Research indicates that these figures are likely to be underreported.⁵

Victim/survivors of sexual violence are extremely vulnerable.⁶ Negative consequences can include feelings of fear, anxiety, depression and anger, loss of self-esteem and confidence, alcohol and drug dependency, mental health, PTSD and increased vulnerability to subsequent sexual and physical violence.

Consequently, the costs of sexual violence are high. A 2006 Treasury working paper estimated sexual violence to be the most costly type of crime in New Zealand, at around \$72,000 per incident or \$1.8 billion per annum. This estimate is considered conservative given the high number of unreported/undisclosed sexual violence.

Although a number of organisations exist that are committed to the safety and recovery of those impacted by sexual violence, demand for services is often greater than capacity. Also, a number of areas have limited or no sexual violence crisis support services for either male or female survivors.

Developing services to build capacity and capability

Since the 1980s specialist sexual violence social services have grown from grassroots community organisations and been delivered locally. Providers have been funded at the community level, without a formal nationwide infrastructure or permanent funding to support them.

The sexual violence sector is a capable, compassionate sector that has committed huge personal resource to the sustainability and resourcing of support services to those impacted by sexual violence. The sector has historically been underfunded and stretched beyond capacity. Inconsistent and contributory funding, along with limited resources for training and capacity building has meant the sector has had to work hard to continue to deliver services.

The Social Services Committee Inquiry⁷ into the funding of specialist sexual violence social services highlighted that limited, unstable funding; a large volunteer workforce, variable quality guidelines, and a lack of training are all issues that have affected the sector. These issues remain.

These are the issues the sexual violence crisis support service development project is focused on addressing, along with integration with other services. A review of current services, research and sector consultation has determined that strengthening the capability and capacity of the sector is a priority as opposed to the development of ‘new services’. Within the sexual violence crisis support sector there is strong capability, however capacity is limited and the demand for services remains high.

⁴ Ministry of Justice (2014). *New Zealand Crime and Safety Survey: Main Findings Report*. Ministry of Justice, Wellington.

⁵ Research and official statistics are known to underestimate the extent of sexual violence. There are also higher rates of sexual violence for young, Māori or disabled women.

⁶ Ministry of Women’s Affairs (2009). *Restoring Soul. Effective interventions for adult victim/survivors of sexual violence*. Ministry of Women’s Affairs, Wellington.

⁷ Social Services Committee (December 2015). *Inquiry into the funding of specialist sexual violence social services. Report of the Social Services Committee*. Wellington

Services funded by MSD

Budget 14 – stabilisation of services

As part of Budget 2014, \$10.4 million over two years was made available for the short-term stabilisation of existing specialist sexual violence emergency and/or crisis services. Funding was dispersed across a number of areas.

The aim was intended to relieve funding gaps across these services. It was not intended to extend existing services, or to fill unmet demand, but to stabilise certain services whilst long term solutions were considered.⁸

As part of Budget 14 a total of \$2.25m per annum was allocated to stabilise existing crisis support services. This funding was allocated through a closed application process. In consultation with TOAH NNEST, MSD identified 27 existing specialist sexual violence service providers and they were invited to apply. Twenty six applications were received and all received funding through this process.

Further funding was allocated to contracts with providers to fill gaps in crisis support services in New Zealand. This was an open tender process that had mandatory requirements, one of which sought responses from providers that were deemed to be ‘an existing specialist sexual violence service provider’.⁹ It further defined a specialist sexual violence service provider as:

“A non-government organisation that provides services with a sole or primary focus on delivering psycho-social support to people affected by sexual violence”¹⁰

Following that process most of the gaps identified were filled, but gaps were reported to remain in Gisborne and Wairarapa.

The Senior Officials Group¹¹ reported back to the Social Services Committee that the funding had successfully stabilised existing services and increased the geographic reach and opening hours of some services in the short term.¹²

However in recent feedback from the regional hui, providers report an over-demand for services, being under-resourced to deliver those required services and that a number of service and geographical gaps remained.¹³

⁸ Social Services Committee (December 2015). *Inquiry into the funding of specialist sexual violence social services. Report of the Social Services Committee*. Wellington

⁹ Ministry of Social Development (26 January 2015). *Sexual Violence Crisis Response Services for Current Gaps in Service Request for Proposal*. Wellington

¹⁰ Ministry of Social Development (26 January 2015). *Sexual Violence Crisis Response Services for Current Gaps in Service Request for Proposal*. Wellington

In consultation with TOAH NNEST, MSD determined which providers were specialist sexual violence service providers. A list of those providers is available on the TOAH-NNEST website.

¹¹ Made up from officials from ACC, the Department of Corrections, the Police, and the Ministries of Education, Health, Justice, Women and Social Development.

¹² Social Services Committee (December 2015). *Inquiry into the funding of specialist sexual violence social services. Report of the Social Services Committee*. Wellington

¹³ Feedback received by providers that attended the Regional Hui held in eight locations across the country in October 2016.

Currently funded services

MSD currently provides contributory funding to 33 providers to deliver crisis support services across New Zealand. These providers received funding through Budget 14 process and this funding was extended for a further 12 months following the announcement of Budget 16. A full list is available at [Appendix 2](#). [Appendix 3](#) shows where each provider is located in New Zealand (Map 1), and target areas based in current contracts (Map 2).

Funding available through Budget 16

The table below further illustrates what the sexual violence services investment over four years intends to support. This includes the funding allocated for the implementation of a new national sexual helpline, harmful sexual behaviour services and services for male survivors of sexual abuse.

Table 1: Funding for sexual violence services across four years:

Service type	Funding type	16/17 (\$m)	17/18 (\$m)	18/19 (\$m)	19/20 (\$m)	4 year total (\$m)
Sexual violence crisis support services for victims in crisis (including new national sexual violence helpline)	New	3.612	5.279	9.714	12.439	31.044
	Reprioritised	1.600	1.600	1.600	1.600	6.400
Services for people with concerning or harmful sexual behaviour (children, youth and adults)	New	2.168	2.247	2.213	0.000	6.628
Services for male survivors of sexual abuse	New	0.500	0.650	0.750	0.000	1.900
	Total	7.880	9.776	14.277	14.039	45.972

Please note:

- *that for harmful sexual behaviour services and services for male survivors of sexual abuse, funding for three years has been appropriated. Further advice will be provided to Ministers for future funding for these services beyond 2019.*
- *that within this budget a small component (\$2.702m over four years) has been ring-fenced for the development, implementation and evaluation of each service type.*

Part 2: Vision for sexual violence crisis support services

Part 2 – Vision for Sexual Violence Crisis Support Services

Sexual violence crisis support services that are accessible and readily available to those affected by sexual harm/violence wherever and whenever they need them and that those services are culturally responsive and based on good practice.

Through [Budget 2016](#) the Government is seeking to fund a more effective integrated national system which delivers the right support and services that can reach more of the people who need them.

Immediate support must be available to those impacted by sexual violence, as close to the point of disclosure, sexual harm or crisis as possible, no matter where or when.

Therefore, as part of the work we are looking at how we can develop and support an effective suite of sustainable sexual violence crisis support services that demonstrate good practice, are culturally responsive, and readily available to more people throughout New Zealand.



In your view, have we got this vision right?

Who are services for?

Services are intended to be for people affected by sexual violence, rather than only focusing on a single victim/survivor. The intent is to have accessible services available for the primary victim/survivor of sexual violence and also their family and whānau (or those additionally impacted by the violence - peers, community).

It is important to note that this work to develop sexual violence crisis support services does not include crisis support sexual violence services designed specifically for children. It is anticipated that the specifications for services to children will be held and funded by the Ministry for Vulnerable Children, Oranga Tamariki.

What are the services?

Are specialist sexual violence crisis interventions that are culturally responsive and are based on established principles of good practice. These include 24/7 callout for advocacy and support, emergency face-to-face sessions and crisis social work support.

Crisis is not defined by an actual event, but by a person's (and their family and whānau's) response to that event. A response can happen immediately after the event or be triggered at multiple points beyond the event.

Funding secured through Budget 2016 for sexual violence crisis support services is specifically for the development and provision of psychosocial crisis support services. These services take a trauma-informed approach to service provision and include: 24/7 callout for advocacy and support, emergency face-to-face sessions and crisis social work support.

Given the nature of sexual violence and its ongoing impacts for many survivors, the importance of accessible services and immediate response capability cannot be over-estimated. It is known that many incidents of sexual violence are not reported and that many survivors do not disclose until years after the fact, if they disclose at all.

The services being described here as sexual violence crisis support services are those required by a victim/survivor of sexual violence during or following a crisis. In accordance with principle nine of the good practice guidelines¹⁴, these services need to be:

- immediately available and accessible to all victims/survivors, with sufficient specialist staff to respond
- at no cost to the victim/survivor
- available 24/7, 365 days a year (as sexual violence can occur at any time, but anecdotal evidence suggest it is more likely to happen at night. Also flashbacks and nightmares, and disabling terror can happen anytime, but often at night)
- linked into local communities so appropriate referrals can be made.

See [Part 5](#) of this paper for more detailed descriptions of the crisis support services the Government is seeking to purchase.

In conjunction with the development of the crisis support services, work is underway to develop and implement a new national service that will increase service accessibility for those affected by sexual violence by implementing a free 24/7 multimodal information and support service. The intended services provided through the national service include information and immediate crisis support where appropriate and connection to face to face services available.

Integrated services

The Family Violence and Sexual Violence Ministerial Group and the Select Committee Inquiry identified that an integrated purpose-built service system is needed to effectively respond to sexual violence. This requires a systems approach that includes prevention and early intervention through to crisis response and long term recovery services.

Beckett (2014)¹⁵ highlights that while overseas governments have been comparatively proactive; no country has achieved national coordination or a national standard of integrated sexual violence services through government oversight.

Beckett (2014) further states that given New Zealand's small population base and geographic size; national and local governance structures; national Police and medical/forensic structures;

¹⁴ Wharewera-Mika, J.M & McPhillips, K.M (2016) *Good Practice Responding to Sexual Violence. Guidelines for 'mainstream' crisis support services for survivors.*

¹⁵ Beckett, L.L (2007) *Care in Collaboration: Preventing Secondary Victimisation through a Holistic Approach to Pre-Court Sexual Violence Interventions.* Retrieved from <http://researcharchive.vuw.ac.nz/xmlui/handle/10063/517>

nationwide community organisations; and the will to take advantage of these, we have the opportunity to be the first to provide a nationally-structured response.

There are two levels of integration that are relevant here and further discussed below:

1. development of an integrated whole-of-system approach to preventing and responding to sexual violence
2. integration within crisis support services.

Institutional arrangements for an integrated response to sexual violence

Under the Ministerial Family Violence and Sexual Violence Work Programme, a specific workstream of work was established to confirm the appropriate cross-agency policy and institutional arrangements to maintain an effective, integrated response to sexual violence in New Zealand for the long term.

This project is being led by MSD and is being progressed in parallel to the development of the sexual violence crisis support services.

Integration within and across services

Principles 13 and 14 of the good practice guidelines¹⁶ discuss the importance of services

- being integrated with other psychosocial services to be able to provide survivors a ‘wrap around service’ and
- working collaboratively within their community and nationally.

Integration within services

Wharewera-Mika and McPhillips (2016) discuss that to meet the needs of survivors; services often provide crisis and non-crisis support services, court support, advocacy, on-going counselling and prevention education.

This allows for services to be able to support a survivor through their recovery journey and allows their needs to be met by a service they have already established a safe and trusting relationship with.

Collaborative working relationships within communities and nationally

Principle 14 of the good practice guidelines (2016)¹⁷ highlights the importance of integration across the psycho-social, medical and legal response to sexual violence in a way that best meets the needs of the survivor. Wharewera-Mika and McPhillips (2016)¹⁸ discuss that this is currently achieved by

¹⁶ Wharewera-Mika, J.M & McPhillips, K.M (2016) *Good Practice Responding to Sexual Violence. Guidelines for ‘mainstream’ crisis support services for survivors.*

¹⁷ Wharewera-Mika, J.M & McPhillips, K.M (2016) *Good Practice Responding to Sexual Violence. Guidelines for ‘mainstream’ crisis support services for survivors.*

¹⁸ Wharewera-Mika, J.M & McPhillips, K.M (2016) *Good Practice Responding to Sexual Violence. Guidelines for ‘mainstream’ crisis support services for survivors.*

two main initiatives: The National Tripartite Forum¹⁹ on Sexual Violence and Local Level Agreements.²⁰

Both initiatives focus on ensuring that the medical response, criminal justice response and crisis support response has the survivor at the centre and services are delivered to ensure the needs of the survivor are met.

¹⁹ A national forum set up in 2009 to reflect the collaborative tri-partite response to sexual violence.

²⁰ Local area working model of the tri-partite approach to service delivery.

Part 3: What you told us

Part 3 – What you told us

Regional Hui October 2016

This section of the document focuses on the key findings taken from the eight regional hui held in October 2016. It is acknowledged that there were some strong regional variation, but this section focuses on the key themes that came through and does not necessarily reflect everything discussed as part of the hui.

The information below is divided into the five sessions held at the hui.

Session 1: How do we define ‘crisis’ in relation to these support services?

As part of the Budget announcement in May 2016 it referred to services providing a more effective and consistent response in the 72 hours after a sexual assault. Feedback provided suggested that ‘crisis’ and the psychosocial support required in a crisis is not restricted to only the first 72 hours following an assault (although noting that forensic information is often compromised after this timeframe).

When defining ‘crisis’ in relation to sexual harm it is important to consider the immediate and on-going impacts of sexual harm on victims/survivors. Rather than being defined by an actual event, crisis is defined as the person’s internal response/trauma to that event and not limited to a timeframe and/or a ‘one off’ intervention. Therefore, crisis can arise at the point of victimisation, or can be triggered by events later in a victims/survivors life.

Research²¹ shows there are often long delays between an actual event of sexual harm and disclosure, between 12 and 20 years for female and male survivors respectively, if in fact a disclosure is made at all.

The diagram below captures some of the key themes that come from participants at the hui:

²¹ Dr Lesley Campbell (April 2016). Sexual Assault Support Service for Canterbury. Research to inform service design.

Diagram 1: Key themes to define ‘crisis’ in relation to sexual violence



Session 2: What are the strengths of existing services?

As part of the hui we asked participants to tell us about the strengths of their services. [Appendix 4](#) provides a summary of the key themes and strengths that came from the providers. Please note that these strengths are not applicable to all existing services, but reflects the feedback provided from a range of providers.

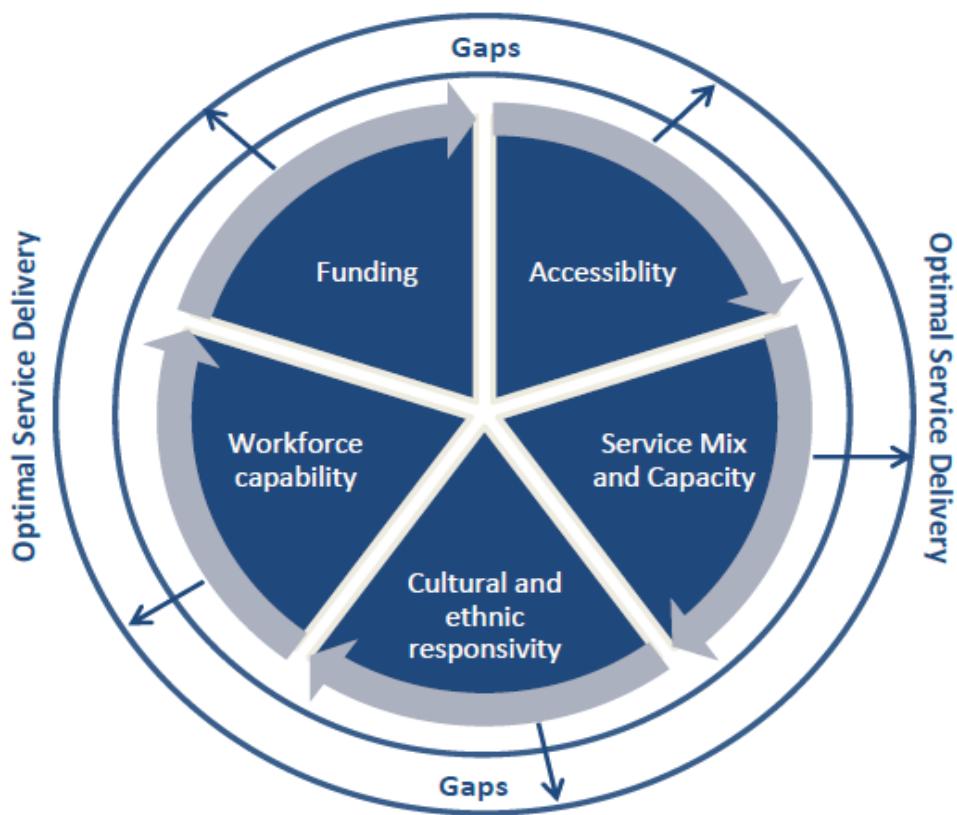
In summary, the key themes were:

- the accessibility of services – that providers were doing all they can to ensure that clients could receive the services they need, when they need them
- the range of services – providers are delivering a wide suite of services that are responsive to what clients need
- service delivery and development – that providers are working to continuously develop their services and delivered in accordance with good practice
- delivery of culturally inclusive services – strong commitment to deliver services that are culturally inclusive, with a specific focus on Kaupapa māori services.
- Integrated service delivery – strong local relationships and working collaboratively
- People delivering the services – are committed, strong, passionate, empathic, compassionate and strong advocates.

Session 3: What are the known gaps in existing services?

Gaps in existing services can be summarised under the following broad categories (*note, these gaps do not exist for all providers but are indicative of common gaps across the sector*):

Diagram 2: Gaps in existing sexual violence crisis support services



Funding

Funding was a consistent gap highlighted by providers, particularly that current services are under-funded and continue to struggle to meet increasing demand for services. The Select Committee Inquiry²² found that current services do not provide consistent, effective cover and that current funding approaches are fragmented, insufficient and cause instability given that funding is usually only partial funding over the short term.

Providers reported that funding has been short-term, often year by year. This has made it difficult for services to meet the known demand for their services, publicly advertise their services for risk of being unable to manage the potential demand, train and retain staff, and grow and develop services.

Accessibility

Geographic coverage

Services do not currently have full geographic coverage. Over-demand coupled with limited capacity means that services are often not able to extend their geographic coverage without compromising their capability and resources, therefore some areas remain cut off from services. This is coupled with limitation in technology in that not all areas have internet connection, or cell phone reception.

²² Social Services Committee (December 2015). *Inquiry into the funding of specialist sexual violence social services. Report of the Social Services Committee*. Wellington

Awareness of services

There remains in some areas a lack of awareness of services. Some providers reported that they were unable to advertise their services as any further increase in demand would outstrip available resources. Should any further demand be placed on services via increased awareness and help seeking, there is a current risk that capacity and capability will be compromised to the detriment of survivors seeking support.

Regional service mix and capacity (range of services)

Providers have shown a high degree of capability and commitment to integrated responses that meet the needs of those seeking support. In some areas however, there is not a 24/7 crisis support service available and there is not equitable service capability or accessibility. Examples of this include areas that have crisis response services but may not have access to the full suite of services that exist elsewhere.

Sexual Abuse Assessment and Treatment Services (SAATS)

SAATS deliver medical and forensic services to victims of sexual abuse of all ages (child, adolescent and adult) for acute, historic, forensic and non-forensic presentations. ACC purchases and administers this service on behalf of the NZ Police and the Ministry of Health. Providers reported that these services are not always readily available and the sustainability of the SAATS services has been a recent focus for ACC, Ministry of Health and Police²³.

Care and recovery: Integrated Services for Sensitive Claims (ISSC)

ACC as a crown entity provides cover and entitlements and care and recovery services to survivors of sexual violence. The Sensitive Claims Unit manages claims for physical and mental injuries resulting from sexual violence. Providers reported that this is not always the right pathway for some people; with some choosing not to engage in that process, some not eligible.

Some crisis response services continue to support clients through care and recovery outside of the ISSC and are not funded by MSD specifically for this.

Housing

A common gap that came through was the need for emergency housing or safe houses for victims and family/whānau of sexual violence. Providers discussed the need for respite care for victims, including having somewhere safe to go.

Cultural and ethnic responsiveness

Inclusive practice

A challenge to providers across the sector has been to provide responses that are culturally appropriate and that allow for maximum engagement and enhanced support.

²³ ACC, Ministry of Health and New Zealand Police engaged Sapere Research to review the existing delivery and sustainability of the SAATS service. Sapere Research's report identified a number of areas where it could continue to build the service – see: http://www.acc.co.nz/for-providers/contracts-and-performance/all-contracts/PRD_CTRB131885

As part of the second round of development of the good practice guidelines²⁴, there was a focus on expanding the cultural reach of the guidelines by providing information on how services can respond appropriately to cultural diversity of survivors.

This provides information of appropriate and safe practices for services to support survivors of sexual violence. It dedicates sections on working with survivors from the following communities and cultures: Māori, Pacific, LGBTI+, Men, Muslim Women, Disability and Asian.

Kaupapa Māori

Māori women are over-represented as victims/survivors of sexual violence and the importance and relevance to the sector of Kaupapa Māori approaches is vital going forward. Kaupapa responses acknowledge the importance of ‘whole of whānau interventions’ as well as the need for sexual violence to be approached from a ‘mana enhancing’ perspective.

There is a need to develop and promote Kaupapa Māori services as the current capacity of these services is limited. Wharewera-Mika and McPhillips (2016)²⁵ confirm that there are few Kaupapa Māori services specialising in sexual violence left in the country, and none with 24/7 capacity.

As part of the good practice guidelines Te Wiata and Smith (2016) discuss working with Māori survivors of sexual violence and highlight:

- the on-going development of Te Tiriti partnership and relationship between mainstream and Māori services is a priority
- the need for more funding to support Kaupapa Māori sexual violence services
- Policies and funding contracts need to reflect whānau ora when working with Māori whānau (so as to not exclude tāne within services)
- The importance of accessing Māori expertise (through engaging with Kaumatua and local iwi with guidance from local Kaupapa Māori sexual violence support service)
- That mainstream services continually develop cultural competence.

The Taskforce for Action on Sexual Violence highlighted the need for development of a separate set of good practice guidelines for Kaupapa Māori sexual violence services providing crisis support.

Workforce capability: training and development

Limited resourcing and over demand of current services has meant limited capacity to provide on-going service development and training, specifically in smaller regional areas and/or areas of particular need.

Many services rely on unpaid work and volunteers and there is a varied skills base within the sector with the majority of providers using mentoring and supervision as a means of up-skilling staff. Some but not all, staff bring life experience to their roles rather than having a formal qualification.

In the absence of any current qualifications available in the area of sexual violence intervention, many providers have developed training and induction processes that provide a minimum

²⁴ Wharewera-Mika, J.M & McPhillips, K.M (2016) *Good Practice Responding to Sexual Violence. Guidelines for ‘mainstream’ crisis support services for survivors.*

²⁵ Wharewera-Mika, J.M & McPhillips, K.M (2016) *Good Practice Responding to Sexual Violence. Guidelines for ‘mainstream’ crisis support services for survivors.*

knowledge and skills base for those working in the sector, as well as acknowledging the skills brought to the work by those who have ‘lived experience’ of sexual violence and have moved through crisis to recovery.

In addition to this there has never been an agreed national standard of service delivery and/or training regime, and there remains an absence in all relevant tertiary training for sexual violence specific responding.

Session 4: What does good practice look like for sexual violence crisis support services?

A key part of the hui was discussions on what good practice looks like for crisis support sexual violence services. This included an opportunity to talk about the release of the second round of the [good practice guidelines](#) developed through Te Ohaakii A Hine – National Network Ending Sexual Violence Together (TOAH-NNEST).

In October 2016 TOAH-NNEST released an update to its existing good practice guidelines that were released in 2009. The Guidelines are intended to be used as a resource for the sexual violence sector to promote on-going development of good practice, including increased access to research.

Principles of good practice

Multiple factors, but most importantly the needs of the victim/survivor determines the best response to sexual violence and no ‘one size fits all’ model of intervention is sufficient. This is exemplified in the European Rape Crisis Specifications²⁶ which name success as ‘any action that proves successful, or achieves positive outcomes for users of their service’.

Participants at the hui endorsed the 15 principles that are covered as part of the good practice guidelines. Below covers some the key principles discussed at the hui:

Accessible and immediate support

Victims/survivors of sexual violence are vulnerable and often in a state of confusion, fear, high anxiety, and emotional numbing and/or overwhelmed. Accessible services and timely responses at this critical point allow an opportunity to de-escalate the immediate impact and normalise the response, while being supported and safe. Often this support will be in the form of crisis counselling and social work. Accessibility can also include on-line forums and web based information sites specific to local and regional sexual violence support services.

Trauma informed responding

Understanding trauma and its effect (emotionally, physiologically, and behaviourally) is for responding to sexual violence in a purposeful and supportive way. This framework also supports an

²⁶ European Parliament Directorate-general for internal policies (2013). *Overview of the worldwide best practices for rape prevention and for assisting women victims of rape*: European Union, Brussels. Retrieved from <http://www.europarl.europa.eu/studies>

understanding of the impact trauma can have on behaviour, processing, and reactions and helps the support a person to ‘balance challenge with resource and growth with safety’.²⁷

Belief

A crisis response is a believing response. There is no room for doubt or responses that imply any part of the persons account is made up. Belief allows the victim/survivor to feel validated and supported and provides the very first sense of hope, that they are not alone in dealing with their trauma.

“A woman victimized by (sexual) violence deserves to tell her story to a non-judgmental, empathetic person. It is critically important to let her know that she is believed and that the violence is not her fault. This might be her first opportunity to be fully heard” (The Missouri Coalition against domestic and sexual violence, 2012, p.27).²⁸

Non-judgemental, victim/survivor centred responses

Victims/survivors of sexual violence are in no way responsible for their victimisation, regardless of factors around the violence (e.g. time and place of the assault, employment choice, alcohol and drug use, style of dress, inability to fend off an attacker).

Survivor centred responses seek to give utmost autonomy, control and choice back to the victim/survivor and to ‘pace’ the work in a manageable way, including the use of the person’s own language, and supporting their immediate needs and goals. Strong messages of support and care, coupled with responses that help to re-frame survivors sense of self-blame and/or fault.

Advocacy and navigation (from crisis to recovery)

Given the sensitive and traumatic nature of sexual violence, victims/survivors are often not in a position to navigate their own way through various services or to access information required to support them to move toward recovery. This can include access to medical services and information about laying charges and the court process. It is important that consideration is given to the paramount importance of advocacy and support through crisis and into recovery.

The very nature of sexual violence crisis response means that those in need of support are often in their most vulnerable state. Providers need to accurately assess the potential risk of re-victimisation and protect them from that, as well as provide interventions that are delivered in a context that up holds the safety, confidentiality, and dignity of the victim/survivor.

Session 5: What are the key capabilities required from the workforce?

The final session of the hui focussed on discussing the key capabilities required from the workforce delivering sexual violence crisis support services. Focus was given to looking at the key capabilities across the workforce – as represented in diagram 3:

²⁷ Briere, J (2002). *Treating adult survivors of severe childhood abuse and neglect: Further development of an integrative model*. In J.E.B. Myers, L. Berliner, J. Briere, C.T. Hendrix, T. Reid, & C. Jenny (Eds.) (2002). *The APSAC handbook on child maltreatment, 2nd Edition*. Newbury Park, CA: Sage Publications.

²⁸ The Missouri Coalition against domestic and sexual violence (2012). *Understanding the nature and dynamics of domestic violence*.

Diagram 3: Key groups that comprise the sexual violence workforce



Diagram 3 evolved as discussions continued. It was important to represent the collective responsibility of different people working in this sector and the capabilities needed to deliver safe, responsive and effective crisis response services.

[Appendix 5](#) summarises the key capabilities across the crisis support workforce raised by participants at the hui.

From the first contact, every point of service delivery is geared towards fostering a sense of safety and support to the person (and their family and whānau) seeking help.

A specialist sexual violence response

As part of this session, participants reiterated that responding to a sexual violence crisis is a specialist response and that this requires a more robust and qualified workforce. Crisis response is not only specialised, it is highly relational and dynamic. In other words ‘who’ is delivering the response is as important as the response itself.

Historically, people responding to sexual violence crisis have been volunteers. Limited funding has constrained the development of a more specialist workforce and often providers have utilised the ‘lived experience’ within their volunteer workforce to gain insights into what good response means.

Given the sector knowledge and the lived experience of many in this workforce, it is a fear that to ‘professionalise’ the sector would be to lose real life expertise and experience to a more formally trained and often younger workforce. This would be detrimental to the development of good practice as well as to the needs of those seeking help and support.

Part 4: Funding allocation model

Part 4 – Funding allocation model

Building a funding allocation model based on need and demand for services

A funding allocation model for sexual violence crisis support services has been developed to ensure that there is a consistent and strategic approach to the distribution of funding across the country. The aim is to ensure that funding is allocated in a way that supports accessible services across New Zealand.

Development of the model has been based on three key principles:

1. Using a client-centric approach – understanding who clients are and where they are located.
2. Using an evidence-based approach – utilising 50+ datasets to build the model.
3. Applying specialist knowledge and expertise to the data.

The model incorporates available evidence and expertise to produce a distribution of funding to ensure services get to the right people, at the right time.

The model has four steps to ensure a robust approach:



Step 1: Needs analysis

The needs analysis has used population-based data indicators to express a relative level of need for crisis support services across the country. The indicators act as building blocks for the model and are intended to incorporate factors that may increase the likelihood or indicate the need for a crisis support service in an area. This process involves analysing the target client group and exploring who they are, and where they are located.

This is intended to create an independent, evidence-based, ‘perfect world’ view of how the crisis support service funding should be distributed across the country. The needs analysis provides a base set of data that can be built on with the following steps two to five. Seven indicators were selected from 50+ for inclusion in the final model.²⁹

²⁹ These demographic and psychosocial indicators are not to be seen as exhaustive, and have been limited to seven for the purposes of the allocation tool being used. This is to allow for clear trends to show in the data. If too many indicators are used, this can blur any trends. We acknowledge that there were other datasets that are relevant and could have potentially been included in the model, but have determined that the seven identified provide the most robust platform from which to build the model.

Table 3: Indicators and weightings

Indicator	Source	Weighting ³⁰
ACC sensitive claims <i>The number of clients currently engaged with ACC, with a sensitive claim³¹.</i>	ACC	21%
Female, 15-39 <i>1 in 3 women have experienced or will experience sexual harm over the course of their lifetime (compared to 1 in 6 men)</i>	Statistics NZ	18%
Sexual assault victims <i>The number of victim/survivors of sexual violence related incidences, as reported by the Police.</i>	NZ Police	15%
Victim Support clients <i>Victim Support provides 24 hour, seven day a week access to an integrated, personalised, professional support service to all victims of crime and trauma (including for victims of sexual violence if no other local service is available)</i>	Victim Support	14%
Deprivation <i>The number of people living in decile 9 and 10 areas, as rated by the University of Otago Deprivation Index. Each decile contains 10% of New Zealand's population. This indicator maps the 20% of New Zealand's population that are the most deprived.</i>	Statistics NZ	12%
Density of Māori <i>Density data isolates pockets of Māori communities, rather than the total number of Māori people.</i>	Statistics NZ	12%
Mental health issues and hazardous drinking <i>This indicator includes two mental health factors:</i>	Ministry of Health	7%
1. <i>the relative level of people ever diagnosed with a mood (depression or bipolar) and/or anxiety disorder</i> 2. <i>A score of 12 or more on the Kessler-10 (K10) scale). This indicates a high or very high probability of having an anxiety or depressive disorder.</i>		
Total		100%

[Appendix 6](#) provides a map of New Zealand showing the high risk areas based on the seven indicators.

Step 2: Known demand for current services

To gain a better understanding of current demand for and coverage of existing crisis support services, providers were asked to supply information about the actual demand for their services. This process has helped to clarify providers' geographical coverage and the actual demand for their

³⁰ The Sexual Violence Cross Agency Working Group completed an exercise to determine the relative importance of each indicator. This was done by ranking each of the indicators from 1 to 7 in terms of significance in indicating the need for crisis support services.

³¹ This includes clients with actively managed sensitive claims, and those with a sensitive claim not being managed. This is based on where the client lived at the time where they lodged their claim.

current services. This information combined with the independent needs analysis, creates a more comprehensive view of what is happening in an area and what is required.

What the data showed us

Some 25 providers responded from a total of 33 crisis support providers with information about their services.

The ways each provider reported its information differed, thereby making it difficult to draw any direct comparisons. Through this work, reporting will form an important part of the service framework so we can begin to build a more comprehensive story about services across New Zealand.

From the information provided (noting the caveats placed on the data), it showed:

- An estimated 19,300 clients received crisis support services over an indicative 12 month period, of which:
 - 78 percent of clients accessed support via a helpline/phone support, which largely inflated the total reported number of clients (total of 15,100)
 - 7 percent of clients accessed crisis counselling (total of 1,400)
 - 15 percent of clients accessed other support services, including callout support (total of 2,800).
- There was a very large variation in the number of clients reported per provider, ranging from 35 to 13,000 clients.
- Reported geographical coverage largely reflected providers contracted target areas, but minor adjustments were made to better acknowledge providers' coverage.

Step 3: Sustainability of providers – minimum levels of funding

As part of the model a fundamental premise is that providers need to receive a viable level of funding to enable them to operate at a minimum service standard.

In order to establish a minimum viability funding amount, we have used one Full Time Equivalent (FTE) worker and all associated costs. This includes the worker's salary and on-costs, supervision, a team leader, high grade administrator, travel costs, cell phone, other disposable direct costs, overheads, as well as a net margin for reinvestment of 3 percent to support provider sustainability.

We intend to establish a set minimum level of funding that a provider can receive in Year 1 (2018). As the development work concludes and services are fully implemented by 2020, a new increased minimum amount will become available.

Step 4: Local knowledge and expertise

The information collected through steps 1 – 3 have been tested internally and with our key government agency partners.

This now provides an opportunity for your feedback and local input, particularly on the needs analysis at [Step 1](#).

Outcome: Reliable result

Through the multi-layered funding allocation model an attempt was made to form a robust view of each region by taking into account the needs of clients, the prioritisation of equal access to services, current market conditions and local knowledge. The approach was tested with the Sexual Violence Cross Agency Working Group and the Ministry's local Community Investment Advisors.

The modelling is intended to ensure clients of equivalent need profiles are able to access services across New Zealand. While demand for services may continue to exceed the funding available through the Ministry, the model provides a tool to enable funding to be targeted to areas of greatest need to ensure clients receive the support they need, when they need it.

Part 5: Draft service framework

Part 5 –Service framework

Part 5 proposes the draft service framework for the crisis support services funded by MSD. This has been developed based on the previous parts of this document which includes stakeholder engagement, research and feedback.

Please note:

- this is a high level framework that feedback is now being sought on
- a framework will be implemented from 1 July 2017
- there will be on-going opportunities to continue to develop and strengthen this over the next two years.

Draft service framework

The framework is intended to cover what are the essential elements to have in place for 1 July 2017 as the Ministry enters into a new contracting cycle for crisis support services.

Diagram 4: Draft Service Framework for Sexual Violence Crisis Support Services



Vision

The proposed [vision](#) for services is discussed earlier in the document. To recap, the proposed vision is:

Sexual violence crisis support services that are accessible and readily available to those affected by sexual harm/violence wherever and whenever they need them and that those services are culturally responsive and based on good practice.



Do you agree with the vision we have set for these services going forward?

Services

What are crisis support services?

The proposed [definition](#) for crisis support services is discussed earlier in the document. To recap, the proposed description is:

Are specialist sexual violence interventions that are culturally responsive and are based on established principles of good practice.

***Crisis is not defined by an actual event, but by a person's (and their family and whānau's) response to that event. A response can happen immediately after the event or be triggered at multiple points beyond the event.**



Have we defined crisis support services accurately from your perspective?

What are the services the Ministry is seeking to purchase?

The core services being described as sexual violence crisis support services are those specialist support services required by a victim/survivor of sexual violence during or following a crisis.

The specific services that MSD will seek to purchase with the available funding are:

24/7 Callout for advocacy and support

A service for victims/survivors of sexual violence where a qualified specialist counsellor (or suitable qualified equivalent) is available (24 hours a day, seven days a week) to support a person through any treatment or other processes immediately following an event. This may include:

- Police interviews
- Sexual Abuse Assessment and Treatment Services (SAATS)
- Forensic medical examinations
- Therapeutic medical examinations
- Follow-up medical examinations when requested

This would involve a specialist counsellor meeting a survivor at the Police station or the hospital to provide support and advocate for them through a very difficult time. This support may include counselling, and legal and medical information and advocacy.

In aligned with the good practice guidelines³² it is essential to have someone who is able to advocate for the well-being of the survivor and that that person understands the process. This person is critical in ensuring that the survivor feels believed, is treated with respect and understanding, retains some control over proceedings and given adequate information (Jordan, 1998 cited in Wharewera-Mika and McPhillips, 2016).

Emergency face-to-face sessions (including crisis counselling)

A service for victims/survivors of sexual violence, or those affected by sexual violence (including support networks), that provides:

- Face to face or remote crisis counselling during and/or following a crisis to be delivered by a qualified specialist counsellor (or suitable qualified equivalent).
- Face to face support sessions to provide clients with information and coping mechanisms in the interim before the next steps as determined by the client (this may involve on-going therapy or nothing at all).
- Referral of clients to counsellors and psychotherapists who are providers under the Integrated Services for Sensitive Claims contract with ACC and/or referral to other services that are best able to meet a client's need (cultural, mental health, self-harm, alcohol and drug use). This may include transition to other services
- Assistance with informed decision making
- Arranging access to resources.

These services are provided during business hours, with arrangements able to be made outside of these hours if required.

³² Wharewera-Mika, J.M & McPhillips, K.M (2016) *Good Practice Responding to Sexual Violence. Guidelines for 'mainstream' crisis support services for survivors.*

Crisis social work support

A service for clients where social work support is provided during the crisis period, this can include assistance with Work and Income and accommodation, as well as consultations and liaisons re child safety and crisis support work.³³



Do you agree with the core crisis support services identified and how these have been defined?

Please note that telephone and internet based services will be purchased separately. A new National Sexual Helpline is in the process of being developed. The vision of the National Service is to provide free, confidential, information and support to those impacted by sexual harm, wherever, and whenever, they might need it.

Target clients

Who are the services for?

The crisis support services (to be funded by MSD) are intended primarily for adults impacted by sexual violence. This could include the primary victim/survivor of sexual violence but also their family and whānau (or those additionally impacted by the violence - peers, community).

This funding is not for the provision of sexual violence crisis support services designed specifically for children. These services are highly specialist and vary in delivery from adult services. Although it may be the same providers that deliver these services, it is envisaged that the specifications for services to children will be held and funded by the Ministry for Vulnerable Children, Oranga Tamariki.

Principles of good practice

What are the principles of good practice?

The [good practice guidelines³⁴](#) have been referred to regularly throughout this document, and provide the basis for describing the principles of good practice for delivery of mainstream crisis support services purchased by MSD. The 15 principles of good practice are shown below. Further information on each principle is available through the TOAH-NNEST website:

<http://toahnnestgoodpractice.org/principles-of-good-practice> .

³³ Wharewera-Mika, J.M & McPhillips, K.M (2016) *Good Practice Responding to Sexual Violence. Guidelines for 'mainstream' crisis support services for survivors.*

³⁴ Wharewera-Mika, J.M & McPhillips, K.M (2016) *Good Practice Responding to Sexual Violence. Guidelines for 'mainstream' crisis support services for survivors.*

Diagram 5: 15 Principles of Good Practice – TOAH NNEST



Te Wiata and Smith (2016) within the good practice guidelines advocate for development of a separate set of good practice guidelines for Kaupapa Māori sexual violence services providing crisis support. This recommendation is supported and once developed we see these becoming a fundamental component of this service framework.

Inclusive practice

TOAH NNEST as part of its second round of development of its good practice guidelines, focussed on expanding the cultural reach of the guidelines by providing information on working with survivors of sexual violence from different and diverse cultures.

It focuses specifically on how to support:

- Māori survivors
- Survivors in Pacific communities
- Survivors in the LGBTI+ community
- Male survivors
- Muslim women
- Survivors with disability
- Asian survivors.

Reference is intended to be made directly to this information as part of the service framework, see diagram 6 below. Further information on working with survivors from different cultures and communities is available through the TOAH NNEST website:

<http://toahnnestgoodpractice.org/inclusive-practice> .

Workforce

Who are required to deliver these services?

Service delivery personnel are made up of both volunteers as well as professional staff. All of whom share a combination of qualified knowledge and lived experience that allows them to approach this work in a way that is client-centred, non-judgemental, and that seeks to determine the persons best interests and needs at the time.

The fundamental requirement is to have a workforce capable of supporting those affected by sexual violence. The [Family Violence, Sexual Violence, and Violence within Whānau Workforce Capability Framework](#) acts as the basis for this service framework for crisis support services, see [Appendix 7](#) for the framework.

The bicultural principle-based framework defines the skills, knowledge and actions required to safely and effectively address family violence, sexual violence and violence within whānau, and better meet the needs of victim/survivors, people perpetrating violence and their families. The framework is a system-wide framework that sets the ways individuals and organisations need to adapt and grow and continuously improve in order to achieve the highest standards of practice.

The framework describes the actions expected of the workforce, appropriate to their required level of expertise and role expectations, when working with people impacted by family violence, sexual violence and violence within whānau.

We do, however, note the requirement to have a specialist response to sexual violence. For this reason, although we see the Family Violence, Sexual Violence, and Violence within Whānau Workforce Capability Framework as the basis for the crisis support services framework, this needs to be in conjunction with the principles of [good practice](#)³⁵. Further work on this will be progressed over the next two years.

Funding

How will services be funded?

[Part 4](#) of this document details the proposed funding allocation model for crisis support services. The multi-layered model provides a robust view of each region by taking into account the needs of clients, the prioritisation of equal access to services, current market conditions and local knowledge.

The modelling is intended to ensure clients of equivalent need profiles are able to access services across New Zealand. While demand for services may continue to exceed the funding available through the Ministry, the model provides a tool to enable funding to be targeted to areas of greatest need to ensure clients receive the support they need, when they need it.

Further information will be released in due course about how the model translates into available funding per region.

³⁵ Wharewera-Mika, J.M & McPhillips, K.M (2016) *Good Practice Responding to Sexual Violence. Guidelines for 'mainstream' crisis support services for survivors.*

Results and reporting

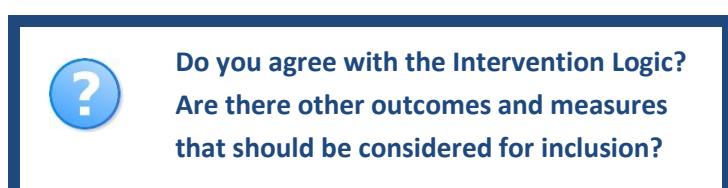
We are developing the intervention logic, results and measures for the crisis support services. This will provide a measurement system that links performance measures in Provider Outcome Agreements to the bigger results being sought.

This has two levels - **the population level** – that cover high level Government priorities, and **the performance level** - which looks at individual providers, services and client results³⁶. The draft intervention logic is outlined in Diagram 6.

³⁶ Further information on Result Measurement Framework is available at: <https://www.msd.govt.nz/about-msd-and-our-work/work-programmes/community-investment-strategy/results-measurement-framework.html>

Diagram 6: Draft Intervention logic, results and measures

INTERVENTION LOGIC, RESULTS AND MEASURES SEXUAL VIOLENCE CRISIS SUPPORT SERVICES																																	
Providing a line of sight for MSD and Providers - what are we contributing towards?																																	
Supporting adult victims/survivors, addressing perpetrators' behaviour and reducing violent crime																																	
Intermediate Outcomes	New Zealanders' beliefs, attitudes, awareness and knowledge about family violence and sexual violence is improved	Perpetrators of family violence or sexual violence access and engage with services that meet their needs	Victims of family violence or sexual violence access and engage with services that meet their needs	Victims of family violence or sexual violence are supported to lead safe and healthy lives	Perpetrators of family violence or sexual violence are held accountable for their behaviour	New Zealanders' are motivated and supported to act on concerns about family violence and sexual violence																											
Population Indicators (to be developed)	Population indicators from a variety of sources (eg MSD, MoE, MoH, MoJ, Corrections, Police and other agencies, administrative data, population surveys) will measure medium to long-term progress against intermediate outcomes <ul style="list-style-type: none"> Sustained change at the population level will take time to observe for some outcomes, and in some instances be only indirectly or weakly attributable to programmes 																																
Intervention Level	<table border="0"> <tr> <td style="text-align: center; vertical-align: top;"> High risk / Intensive Support High risk families are identified, monitored, and their problems managed or reduced </td><td style="text-align: center; vertical-align: top;"> Statutory Intervention / Crisis responses Children / young people who have been maltreated are safe, recover and have good outcomes </td><td colspan="4" rowspan="3"></td></tr> </table>						High risk / Intensive Support High risk families are identified, monitored, and their problems managed or reduced	Statutory Intervention / Crisis responses Children / young people who have been maltreated are safe, recover and have good outcomes																									
High risk / Intensive Support High risk families are identified, monitored, and their problems managed or reduced	Statutory Intervention / Crisis responses Children / young people who have been maltreated are safe, recover and have good outcomes																																
Services	Sexual Violence Crisis Support Services																																
Theory of Change	<table border="0"> <tr> <td style="vertical-align: top;"> If we: Develop and support the delivery of services that are culturally inclusive and based on good practice Increase knowledge of and accessibility of services to people wherever and whenever they are needed Support the integration of services and enable whole of sector training, accreditation and sustainability Support the capability and sustainability of services (including the provision of Kaupapa Maori services) nationally </td><td style="vertical-align: top;"> We will help improve: National coverage and accessibility of services More immediate disclosures and supportive responses for survivors and their whanau Physical, emotional, and psychological safety for survivors Increased self-esteem/efficacy and restoration of mana </td><td style="vertical-align: top;"> Which will contribute to: Early disclosures and more immediate positive responses to survivors of sexual violence Reduced long term impacts for survivors and greater resiliency/productivity Enhanced community awareness and pro-social responding to sexual violence </td><td style="vertical-align: top;"> For the ultimate goal of: Safe, attentive and responsive communities of care Healthier families and whanau, and more vibrant communities A decrease in sexual violence within communities and increase in survivor well-being A reduction in costs of sexual violence impacts on society </td></tr> </table>						If we: Develop and support the delivery of services that are culturally inclusive and based on good practice Increase knowledge of and accessibility of services to people wherever and whenever they are needed Support the integration of services and enable whole of sector training, accreditation and sustainability Support the capability and sustainability of services (including the provision of Kaupapa Maori services) nationally	We will help improve: National coverage and accessibility of services More immediate disclosures and supportive responses for survivors and their whanau Physical, emotional, and psychological safety for survivors Increased self-esteem/efficacy and restoration of mana	Which will contribute to: Early disclosures and more immediate positive responses to survivors of sexual violence Reduced long term impacts for survivors and greater resiliency/productivity Enhanced community awareness and pro-social responding to sexual violence	For the ultimate goal of: Safe, attentive and responsive communities of care Healthier families and whanau, and more vibrant communities A decrease in sexual violence within communities and increase in survivor well-being A reduction in costs of sexual violence impacts on society																							
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Individual client level data

We are aware of concerns from providers delivering specialist sexual violence services about the Ministry's intention to request providers to collect individual client level data (ICLD) from 1 July 2017.

As part of our on-going work with providers to co-develop and implement crisis support services we will work with the sexual violence sector to look at what needs to be in place to collect and securely store what we know is sensitive information.

We are also aware that there are specific and additional considerations that need to be worked through in respect to collecting this level of information from someone who is accessing a sexual violence service.

Providers of specialist sexual violence services will therefore be exempt from collecting and providing ICLD for at least 12 months to allow time for this further work to happen.

The Minister has asked for this exemption, and asked the Ministry to report back outlining how we propose to safely and securely collect ICLD from providers of specialist sexual violence services.

Part 6: Next steps

Part 6 – Next Steps

Consultation

Consultation document

This version of the document is now live on the Loomio online site for broader consideration and discussion.

The online consultation will be open until 26 April 2017. To join the online conversation, you will need to follow the prompts and register at <https://www.loomio.org/g/BqeRcfmh/sexual-violence-crisis-support-services>

We encourage feedback and discussion on this document. Please feel free to contribute in the discussion through Loomio, or should you wish to provide any feedback in confidence, you may do so emailing CI_Sexual_Violence_Services@msd.govt.nz which is monitored by the Safe Families Team.

Regional hui

Release of this document will also be followed by five regional hui during April. These hui will provide an opportunity for existing providers of sexual violence crisis support services to come and discuss the document and approach.

Current providers will receive information on these directly from their Community Investment Advisor.

Development of a service guideline

Following the release of this document and feedback, work will commence on development of a new service guideline to sit alongside contracts MSD will issue for delivery of sexual violence crisis support services.

Our intention is that the service guideline reflects the discussion in this document and subsequent consultation.

Service continuation from 1 July 2017

Current funding and contracts for crisis support services funded by MSD end on 30 June 2017. On 1 July 2017:

- all existing providers currently contracted by MSD to deliver sexual violence crisis support services (pending due diligence) will be invited to negotiate a new three (3) year contract³⁷
- the new contract will contain provisions to enable the on-going development of the crisis support services through the service guidelines
- all contracts will have:

³⁷ Refer to [Appendix 2](#) for the full list of providers. The providers previously received funding through the [Budget 14](#) process.

- stronger reporting requirements (aligned with the new results based contracting requirements)
- clear service descriptions
- alignment to the good practice guidelines developed by TOAH NNEST
- a new funding allocation model.

After 1 July 2017, we will:

- invite proposals to address any remaining gaps in crisis support service provision (before the end of 2017)
- focus on how to support the development of culturally inclusive services and Kaupapa Māori services working with experts in the sexual violence sector.

Through using this approach we wanted to recognise and acknowledge the strength of the existing sexual violence service sector. Longer-term contracts and funding is intended to allow the sector to build capacity and capability, thereby creating more stable and effective services to reduce the costs of sexual violence, both to society and to individuals.

Evaluation

A commitment has been made that the crisis support services detailed in this report will be monitored and evaluated. The evaluation is timed to run from February 2018 to February 2021 and will look at the process and outcomes of the crisis support services.

Process evaluation

We will work to highlight successes and opportunities for improvement associated with implementation and service provision, and recommend service refinements. The process evaluation will largely focus on providers and will conclude in December 2018

The evaluation will initially focus on what can be learned about the strengths, weaknesses, and opportunities for improvement and/or change in the implementation of new contracts and delivery of crisis support services. This process evaluation will feed back to service delivery to allow for continuous improvement.

Outcomes evaluation

Over the longer-term, the effectiveness of the crisis support services, reflected in client outcomes and wider social outcomes, will be examined.

The outcomes evaluation will include victim/survivors, families and whānau, and the wider community and will conclude in June 2021.

Methodology

We will use 'Collaborative Outcomes Reporting' (COR) as a methodology for the evaluation of specialist sexual violence services. COR is a participatory evaluation approach centred on performance stories. Performance stories are reports that detail how a project contributed to outcomes. The aim is to tell the 'story' of a project's performance using multiple lines of evidence. One of these lines of evidence will be monitoring data generated throughout the implementation and delivery of services period.

COR includes mixed methods to collect and analyse data, and involves the participation of key stakeholders across all stages (to varying degrees). It uses contribution analysis, among other techniques, to map existing and additional data against the intervention logic model to produce a performance story. The performance story of how a project has contributed to outcomes will then be reviewed by both technical experts and project stakeholders.

Future impact evaluation

As the evaluation will be completed by 2021, long-term changes produced by SVCSS will not be measured. The outcomes evaluation will provide a “progress report” on how well the programme has progressed towards achieving its outcomes. The information required to assess the feasibility of impact evaluation will become available after the completion of the service development, and the conclusion of the process and outcome evaluations. For this reason, an assessment of the most appropriate methodologies to conduct an impact evaluation will be undertaken in one to two years working with experts in this area.

Appendices

Appendices

Appendix 1: Summary of work to date

The Taskforce for Action on Sexual Violence

In 2007, a Taskforce for Action on Sexual Violence was established, made up of 10 government chief executives and four representatives from Te Ohaaki a hine – National Network Ending Sexual Violence Together (TOAH-NNEST).

In its 2009 report, it made 71 recommendations³⁸ relating to sexual violence prevention, improvements to front line services, criminal justice reforms, and direction about sector cooperation.

The taskforce was disbanded before all the issues had been addressed. Key issues included the availability and quality of frontline services, the need to build capability, and to develop strong culturally responsive (Kaupapa Māori) services.

2013 cross-agency review

In 2013, the Minister of Social Development commissioned a cross-agency review of sexual violence services. The reviewed aimed to review the state of the sector, provide support in the short term and look into long term solutions. No substantive changes to funding and/or service development were completed as a result of the reviews and recommendations.

Budget 2014 – Stabilisation of specialist sexual violence services

In 2014, through Budget 2014, \$10.4 million over two years was made available for the short-term stabilisation of specialist sexual violence services. Funding was dispersed across a number of areas:

- harmful sexual behaviour treatment services
- services for male survivors of sexual abuse
- medical /forensic services (to support the work of Doctors for Sexual Abuse Care (DSAC))
- gaps funding to fill gaps in the provision of sexual violence crisis response services
- a discretionary emergency funding pool to support services to meet demand.

Ministerial Group on Family Violence and Sexual Violence³⁹

In December 2014, the sexual violence work programme and the then Achieving Intergenerational Change Family Violence work programme were combined under the auspices of the Family Violence and Sexual Violence Ministerial Group. The Ministerial Group is responsible for oversight and direction-setting across government agencies in relation to sexual violence and family violence.

³⁸ Refer: https://www.parliament.nz/resource/en-NZ/51SCSS_ADV_00DBSCH_INQ_12392_1_A403748/cd1f9e5756e5037ff47d9eb2741bdbb0f740e8f6

³⁹ The Ministerial Group on Family Violence and Sexual Violence is co-chaired by the Minister of Justice and Minister for Social Development. The other Ministers in the group include: Ministers of Health, Education, Police, Corrections, ACC, Pacific Peoples, Ethnic Communities, Senior Citizens, Disability Issues, Women, Māori Development, and Whānau Ora; Associate Ministers of Social Development and Justice.

Social Services Committee Inquiry into the funding of specialist sexual violence social services⁴⁰

In 2014, the Social Services Committee reinstated its inquiry into the funding of specialist sexual violence social services. The Committee made 32 recommendations to the Government and overall the inquiry found that:

- current specialist sexual violence social services do not provide adequate cover
- current funding approaches are insufficient
- having stable and effective services that are easily accessible would significantly reduce the harm and costs of sexual violence in New Zealand.

The Government accepted the overarching finding of the Committee's report and accepted all of the issues raised within its recommendations.

The Justice Response to Victims of Sexual Violence⁴¹

In December 2015, the Law Commission reported on its review of the justice response to victims of sexual violence. The Law Commission made a number of recommendations aimed at improving social support for victim/survivors of sexual violence.

Budget 2016

On 18 May 2016, Minister of Justice Amy Adams and Minister of Social Development Anne Tolley announced that Budget 2016 will invest \$46 million over four years to better support victims and prevent sexual abuse.⁴²

\$39.6 million is new operational investment and \$6.4 million is reprioritised funding, to be used to maintain existing services in the short term and develop and implement services for the long term. This investment aims to create a more sustainable and integrated national system of services to ensure more people get what they need, at the right time.

The investment over four years will support:

- crisis support sexual violence services for victims (including a new national sexual violence helpline) (\$37.444m)
- services for those with concerning or harmful sexual behaviour (\$6.628m)
- services for male survivors of sexual abuse (\$1.900m).

⁴⁰ New Zealand Government (31 March 2016). *Government Response to the Report of the Social Services Committee on its Inquiry of specialist sexual violence social services*. Retrieved from https://www.parliament.nz/en/pb/papers-presented/current-papers/document/51DBHOH_PAP68769_1/government-response-to-the-report-of-the-social-services

⁴¹ The Law Commission (December 2015). *The Justice Response to Victims of Sexual Violence Criminal Trials and Alternative Processes*. Retrieved from <http://www.lawcom.govt.nz/sites/default/files/projectAvailableFormats/NZLC-R136-The-Justice-Response-to-Victims-of-Sexual-Violence.pdf>

⁴² Minister of Justice (A Adams), Minister of Social Development (A Tolley) (18 May 2016). *Budget 2016: \$46m to support victims and prevent sexual violence*. Retrieved from <https://www.beehive.govt.nz/release/budget-2016-46m-support-victims-and-prevent-sexual-violence>.

Sexual violence service development work programme

Alongside the announcement of Budget 16, a specific workstream was formed under the Family Violence and Sexual Violence Ministerial Work Programme to cover the development of sexual violence services (namely sexual violence crisis support services, harmful sexual behaviour services and services for male survivors of sexual abuse).

The focus of this document is on the development of sexual violence crisis support services.

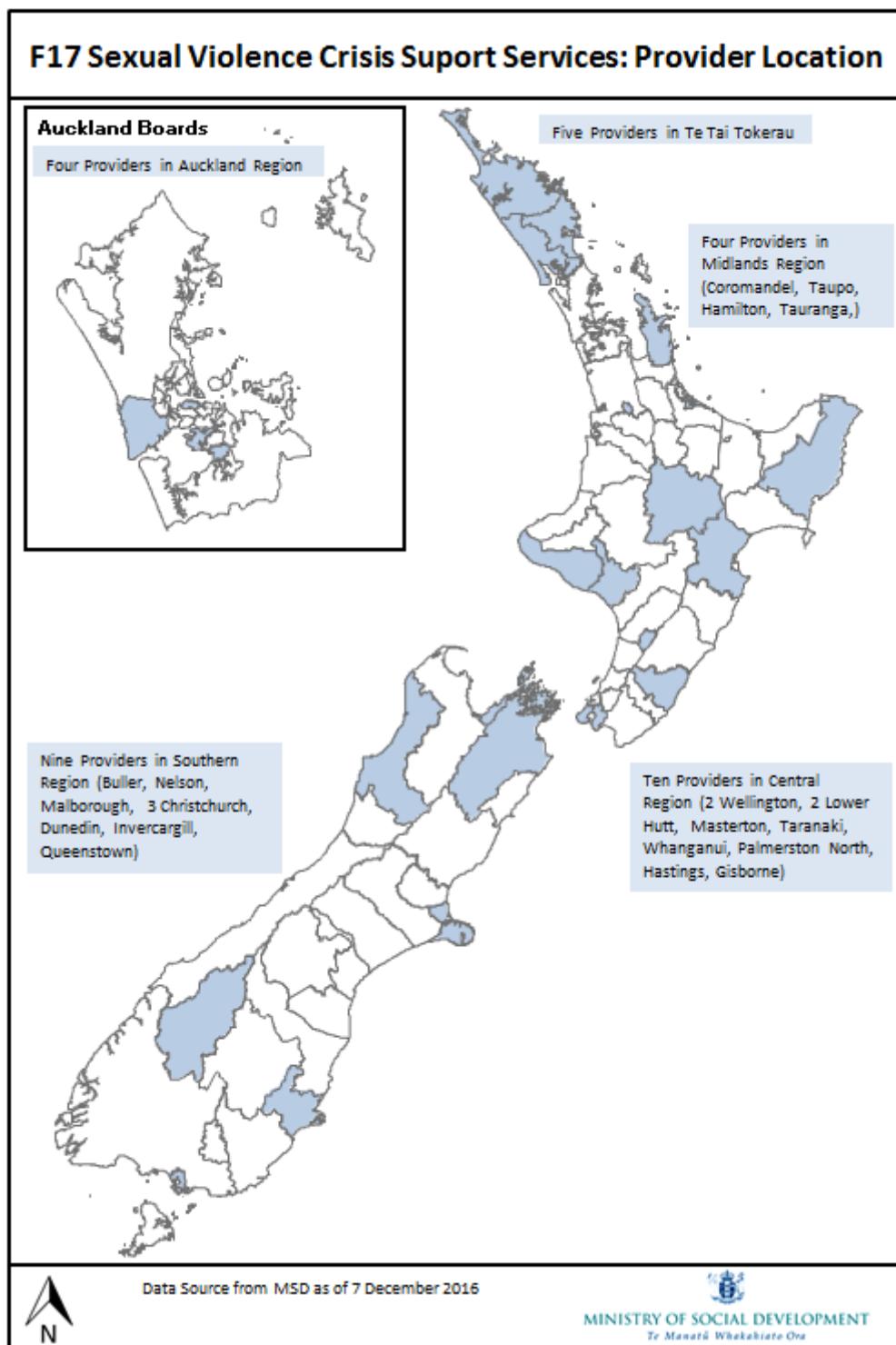
Appendix 2: List of currently MSD funded providers of sexual violence crisis support services

Provider Name
Abuse & Rape Crisis Support Manawatu Incorporated
Auckland Sexual Abuse HELP Foundation
AVIVA
Awhina Whanau Services Incorporated
Bay of Plenty Sexual Assault Support Services
CAPS Hauraki Incorporated
Counselling Services Centre
Family Action
Family Support (Mid North) T/A Mid North Family Support
Hawkes Bay Rape Crisis
Hutt Rape Counselling Network (Incorporated)
Miriam Centre Child Abuse Treatment and Research Trust
Rape and Abuse Support Centre Southland Incorporated
Rape And Sexual Abuse Healing Centre Incorporated
Rape and Sexual Abuse Support (West Coast) Incorporated
Rape Crisis (Dunedin) Incorporated
Rape Crisis Gisborne Incorporated
SASH Nelson Incorporated
START Trust
Summit House Trust
Support Of Sexually Abused For Dargaville and Districts Incorporated
Taupo Family Centre Incorporated
Te Puna Oranga Incorporated
Te Whare Ruruhau O Meri Trust Board
Tu Wahine Trust
Wairarapa Rape and Sexual Abuse Collective Incorporated
Wakatipu Abuse Prevention Network Incorporated
Wellington Rape Crisis Incorporated
Wellington Sexual Abuse Help Foundation
Whanganui Safe and Free
Whangarei Rape Crisis Incorporated
Women's Refuge, Sexual Assault Resource Centre Marlborough Incorporated

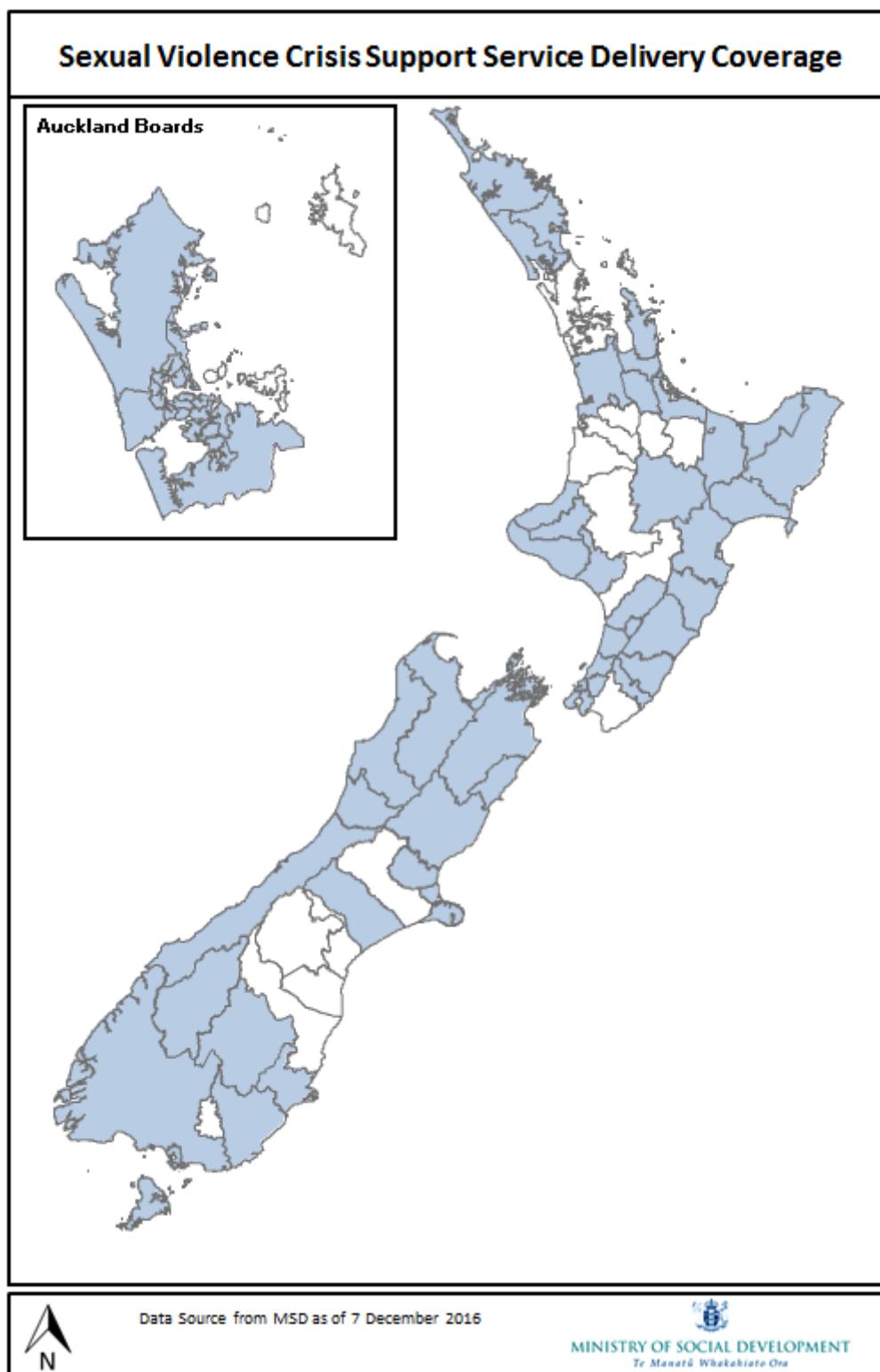
Please note this list is of providers that received funding through Budget 14, and then Budget 16 to sustain existing services. It does not include providers that have been funded through Regional MSD funding.

Appendix 3: Location of contracted providers and service areas

Map 1: Location of providers funded by MSD to deliver crisis support services



Map 2: Service areas providers funded by MSD to deliver crisis support services (as reflected in current contracts)



Appendix 4: Strengths of existing services.

Please note that these strengths are not applicable to all existing services, but reflects the feedback provided from a range of providers.

Key theme	Key points raised
Accessibility of Services	<ul style="list-style-type: none"> ▪ “Never let anyone walk away without a service” ▪ 24/7 response capability with multiple access points (phone lines, face to face, text) ▪ Culturally respectful responses ▪ Strong links with other local services ▪ Provision of safe and comfortable environments ▪ Provision of outreach, or mobile services – including travelling to clients ▪ Services are free to clients
Range of services available	<p>Prevention</p> <ul style="list-style-type: none"> ▪ Awareness raising activities (in schools, community) ▪ Education (information on services, safety, community presence, in schools) ▪ Training in the community <p>Services</p> <ul style="list-style-type: none"> ▪ Specialist services ▪ Client-centred ▪ Immediate response providing a range of wrap around services (specialist counselling, advocacy, peer support, social work) ▪ Adaptable and flexible to meet the needs of the community ▪ Outreach and mobile services ▪ Drop in centres ▪ Programmes about self-awareness and self-harm ▪ 24 hour crisis lines set up to provide a connection to services ▪ Support within the Court ▪ Providers doing more than that are funded to do ▪ Communities and Providers offer and provide services despite contracts and funding
Service delivery and development	<ul style="list-style-type: none"> ▪ Delivery of ‘specialist services’ ▪ Professional development, supervision and training ▪ Strong induction and mentoring processes for new workers ▪ Whole of whanau approach ▪ Grass roots creativity (not always driven by hard evidence, but based on perceived need). ▪ Offer services based on need (not necessarily on contract) ▪ Travel to clients if necessary ▪ Multi-media responses and access
Delivery of	<ul style="list-style-type: none"> ▪ Kaupapa Māori programmes

culturally responsive services	<ul style="list-style-type: none"> ▪ Māori staff and bi-cultural service delivery ▪ Working with whanau – whanau approach to services ▪ Strong connections to Iwi throughout the country ▪ Holistic approach to practice ▪ Links to existing Kaupapa Māori Services ▪ Strong Kaupapa/tikanaga māori practice ▪ Tua Kana relationships (mentoring) ▪ Working with Kaumatua/Kuia ▪ De-colonising approaches ▪ Recognition of violation of tapu/mana ▪ Use of Māori healers and traditional practice to restore mana and wairua ▪ Commitment to tangata whenua and the Treaty of Waitangi ▪ Culturally inclusive services
Integrated service delivery	<ul style="list-style-type: none"> ▪ Strong local relationships and working collaboratively ▪ Role of Te Ohaakii A Hine – National Network Ending Sexual Violence Together (TOAH-NNEST) ▪ The importance of having all the right services involved working together (Sexual Abuse Assessment & Treatment Services (SAATS), Police, Clinical and Social Services) ▪ Effective tri-partite relationships ▪ Seeking support from other services if that is best for the client ▪ Provision of ‘wrap-around’ support and services ▪ Provision of outreach and mobile services in some areas ▪ Services are part of the community – known within the community and by other agencies ▪ Co-locating and sharing of resources
People delivering services	<ul style="list-style-type: none"> ▪ Strong, passionate, empathetic, compassionate, advocates ▪ Willingness of staff to travel and be accessible ▪ Client centred (what they need, when they need it) ▪ Strong advocates for services and people ▪ Strong interpersonal skills ▪ Good boundaries and self-care ▪ Knowledge of trauma ▪ Experienced and trained (including volunteers) ▪ Collaborative relationships and networking

Appendix 5: Key capabilities for the sexual violence workforce

Leaders

Individuals who are self-selected or selected by their community to advocate for change

Personal	Functional
'Walk the talk'	Self-care – Good boundaries, recognise their own limitations.
Passionate	Advocating for change
Authentic	Understanding Services
Credible	Community Accountability
Committed to the Cause	Honest and transparent
Can Inspire change	Building and Maintaining relationships
Trustworthy	Culturally aware
Aspirational	Personal values that align with the work (Tikanga)
Respected and have mana within the community	Mentor / Role Model
Resilient	Challenging and responding to myths about sexual violence

Governance

Sets the structures and processes that are designed to ensure accountability, transparency, responsiveness, stability, equity and inclusiveness, empowerment, and broad-based participation

Personal	Functional
Non-judgemental	Cultural representation and understanding the māhi of the work
Strong values and beliefs regarding the work	Understand and apply principles of the Treaty of Waitangi
Make and sustain relationships across a wide sector	Understands what the sexual violence sector does and value the core business
Understanding and compassion for the work	Strong links with community organisations
Not being driven to a governance role for personal gain	Up to date with political trends (connect between the political agenda and operational needs)
Strategic thinker	Vision for the sector - understands and translates the 'bigger' picture
Business and finance experience	Recognition of the work versus limited resources
Able to make sound decisions	Understands the needs for sector wide training and personal/professional development
Empowering	Build the capacity of services.
Strong Communication skills	Collective governance
	Awareness of power and control dynamics within a governance setting

Business Managers

Directs processes, structures and arrangements that are designed to mobilise and transform the available physical, human and financial resources to achieve concrete outcomes.

Personal	Functional
Strategic thinker	Business acumen
Strong communication skills	Understanding the māhi of the work
Empowering	Understand and apply principles of the Treaty of Waitangi
Able to make sound decisions	Strong links with community organisations
Business and finance experience	Recognition of the work versus. limited resources
Approachable	
Empowering	

Clinical supervisors

Responsible for the supervision and oversight of specialist practice (clinical and personal)

Personal	Functional
Honest, fair and reasonable	Clinical experience (clinically safe)
Client and family/whānau focused	Cultural capability
Lateral thinker	Culturally appropriate (tikanaga/kawa based)
Empathic	Experienced and qualified and affiliated to a professional body
Good communication skills	Accountable, ethical
Role model	Links in with policies of services (safe workloads, risk management, how client reports are managed, assessing client cases)
Empowering	Self-care - Good boundaries, recognise their own limitations.
Approachable	Knowledge of trauma – and vicarious impact
Non-judgemental	Strong boundaries
Versatile	Recognising signs of burnout and how to remedy

Specialist workforce

Directly delivering services specifically for victims/family of sexual violence across the continuum (prevention, to tertiary care)

Personal	Functional
Life skills	Understand specific trauma of sexual violence and the impacts of the culture it occurs within
Self-reflective	Good resilience and practices of self-care, both personal and with organisational cooperation
Great team player	Wide understanding of mental health problems and presentations and helpful response to these.

Passionate	Understanding power and control dynamics – not only in relation to sexual violence, but in relation to intervention.
Non-judgemental	Great capacity to work in relationships across systems with those with institutional authority
Relational	Mana enhancing responses for the whole whānau Commitment to on-going training and professional development
Empathy	Appropriately qualified (experience/qualification)
Self-awareness	Gives and receive positive and constructive feedback
Approachable	Willingness to train and mentor others
Empowering	Capacity to respond with absolute respect and acceptance
	Understand limits of own competence

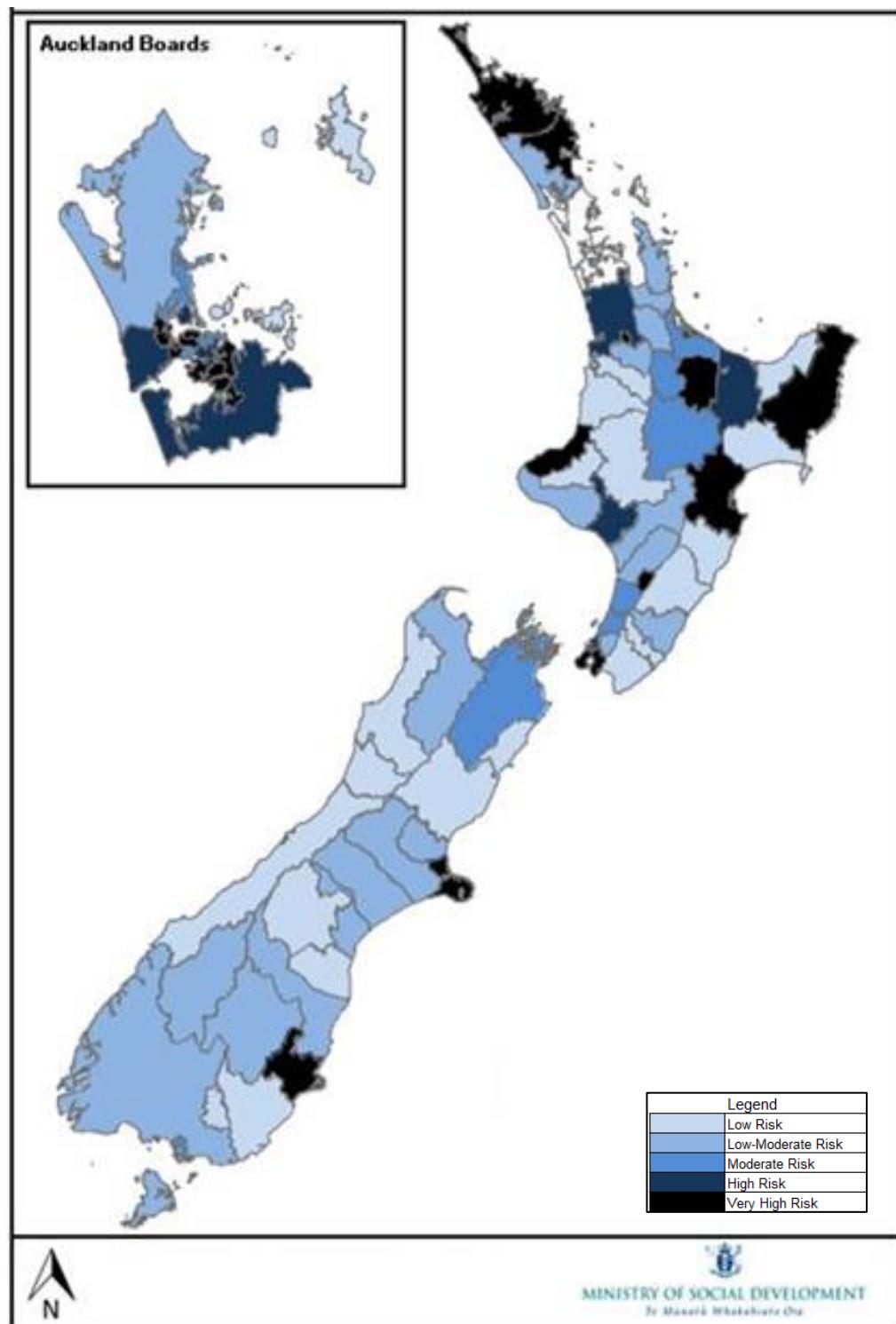
General workforce

Is the widest group and incorporates anyone that has a peripheral connection to victims can include people working in the community, volunteers and non-specialist networks.

Personal	Functional
Warm	General awareness of sexual violence and its impacts
Empathic	Able to counter rape myths and beliefs
Respectful	Knowledge of specialist services and networks and how to access services
Self-reflective	Understands the importance of non-judgmental responses and beliefs
Discreet	Supporting cultural responsiveness
Shared vision for safe communities, families and whānau	Understands role boundaries – knowledge of when to refer to a specialist service
Non-judgemental	Consciousness raising – increase openness to having conversations about sexual violence
	Understanding safety for clients

Appendix 6: Needs analysis

Using the data from the seven selected indicators shows geographical areas that have an increased likelihood requiring crisis support services.



Appendix 7: Draft Family Violence, Sexual Violence and Violence within Whānau Workforce Capability Framework

