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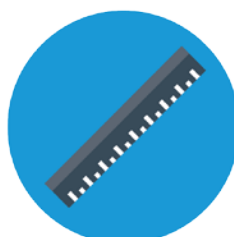
Systems Mapping for Safe at Home

Prepared for

McAuley Community Services for Women



RESEARCH



EVALUATION



DESIGN

www.fpconsulting.com.au

Company information

Matt Healey

First Person Consulting Pty Ltd

03 9600 1778

matt@fpconsulting.com.au

ABN 98 605 466 797

www.fpconsulting.com.au

Tenancy 3, Level 4, 224 Queen Street

Melbourne VIC 3000

First Person Consulting (FPC) is a Melbourne-based consulting firm where staff specialise in social research, evaluation and design. Staff at FPC have conducted a wide variety of projects across a range of sectors, including public health and health promotion, primary health, climate change, sustainability and innovation.

We acknowledge and appreciate the time and contributions of all those involved in this project, including key stakeholders that were consulted and to the team at McAuley Community Services for Women that instigated this project. The team at FPC are proud to have made a contribution through the production of this systems map.

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Acronyms and definitions

FPC	First Person Consulting
FSP	Flexible Support Package
MARAM	Multi-Agency Risk Assessment and Management
NTV	No To Violence

1 Introduction

1.1 Background

Family violence is the leading cause of homelessness in Victoria, accounting for 45% of presentations to homelessness services in 2019/2020. It is most often perpetrated by men against women in intimate partner relationships. However, can also occur within extended families, kinship networks, LGBTIQ relationships, and carer relationships.

The flow on effects of women and children leaving their homes to escape violence are many, and despite this knowledge, it remains the traditional approach to ensuring their safety.

Safe at Home is an approach which involves a range of actions and policies that seek to increase the likelihood that women and children remain at home, while the perpetrator of violence is excluded. While this approach has been used elsewhere to great effect, there are a range of barriers and systemic failures that present an effective Safe at Home approach in Victoria

In 2021, McAuley Services for Women convened a group of key stakeholder organisations who share an interest in the issues of family violence and homelessness, and were keen to work together on these 'Safe at Home' goals:

- That more women and children are choosing to remain home because they feel, and are, safe enough and have access to the full suite of support that enables them to do so
- Public recognition that Safe at Home is a victim-survivors right and that support be orientated to ensuring that choice is made possible
- That Safe at Home is a clearly identifiable strategy within the Victorian Government's second 10-year plan to end violence and is resourced accordingly
- That Safe at Home is recognised as a prevention to homelessness
- That a benchmark is set for measuring progress against safe at home goals
- That the fifth National Plan to reduce violence against women includes the above mentioned goals accompanying the release of the National Audit of Safe at Home programs (2020).

First Person Consulting (FPC) was engaged by the group to develop a systems map related to the barriers and enablers to a Safe at Home approach being implemented.

An **interactive version** of the systems map is available online [here](#).

1.2 Project objectives

The objectives of this project were to:

- Engage with Working Group stakeholders to gather their insights and expertise as to the range of barriers that exist to a Safe at Home approach
- Develop a systems map that documents the systemic nature of the barriers and existing enablers to a Safe at Home approach, including priority or high-influence points of the system
- Identify possible areas of intervention that are more likely to have a whole-of-system impact to help keep women and children at home, and avoid homelessness.

Ultimately, the purpose of this project is to help frame opportunities for action, but also to foster conversations and discussion in a continued effort to ensure women and children are safe at home.

1.3 Report structure

This document is structured as follows:

- A summary of the approach to preparation of the systems map (Section 2)
- An overview of how to review and understand the systems map (Section 3)
- Recommendations for action drawing on the systems map (Section 4).

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2 Methodology

2.1 Our approach

FPC's approach to this project was centred on a close and collaborative working relationship with McAuley Community Services for Women. The approach involved the following steps:

- **Kick-off meeting with key McAuley staff.** This covered:
 - the objectives and scope of the project, including what 'success' looks like, and the 'boundary' for the systems maps
 - Clarifying the project's context, including the audience for project outputs, and how they can best be framed to inform subsequent pieces of work
 - Discussing the nature of existing documents and data, as well as specific areas of knowledge and perspectives that Working Group members hold
 - Timing for key stages of the project
- **Document review.** This involved reviewing a small number of background documents and on the Safe at Home approach to help inform our understanding of the range of barriers and other factors that exist (see Section 5). From this review we developed an initial set of barriers and enablers to be further explored through consultations. This included review of research produced by McAuley Community Services for Women.
- **Consultations with Working Group stakeholders.** A total of ten consultations were undertaken with key organisations that operate within the Family Violence / Homelessness Prevention systems. These consultations were semi-structured and used a series of broad questions to elicit stakeholder insights on barriers and enablers to the Safe at Home approach (see Appendix 1). Stakeholders were asked to identify, from their perspective, possible priority areas to support transformative systems change. Each consultation was recorded and professionally transcribed to ensure that all comments were captured. Stakeholders that were consulted were:
 - Council for Homeless People
 - Courts Victoria (Family Violence Branch)
 - Domestic Violence Victoria
 - Family Safety Victoria
 - InTouch
 - No to Violence
 - Noor Family Violence Survivor Advocates
 - University of Melbourne
 - Victim Survivor Advocacy Council (x2)
 - Victoria Police
 - West Justice
- **Analysis and drafting of systems map.** Transcripts were thematically analysed to identify barriers and enablers to the Safe at Home approach, including those considered high priority. This analysis was used to expand and refine the initial list developed in the document review stage. The platform [Kumu](#) was then used to draft the systems map, by grouping barriers and enablers around key outcome areas and drawing connections between each element and outcome, and between elements themselves.

- **Workshop with Working Group stakeholders.** The draft systems map for Safe at Home was presented to Working Group stakeholders that participated in consultations. Participants were provided with an overview of the approach and development of the map, and an explanation of the map itself. Participants were also sent a link to the interactive map to individually explore different view functions and additional information or examples behind each element. Opportunities to provide comments and feedback on the draft map were provided both within the workshop and following the workshop. Feedback was used to further refine the systems map.
- **Preparation of report.** To support the systems map, a report was prepared (this document). This report provides an overview of the background, approach and methodology, and presents key messages and recommendations for action within the system.

2.2 Limitations

At the outset it is important to recognise that this systems map draws on the perspectives of key stakeholders and, as such, is reflective of the experiences of those individuals. As much as possible the noted barriers and enablers have been triangulated across consultations and through our review of documents and the literature. However, we anticipate that there may be specific factors that are not represented in this map and / or that there are factors not represented as others may frame them.

This map is a representation of these perspectives at a particular point in time. The intent is for this map to inform and foster discussion, and to help frame possible actions and conversations on the need for action to ensure that women and children are Safe at Home.

3 Understanding the systems map

3.1 Overview

This systems map aims to present the broad range of factors preventing or contributing to the **Safe at Home approach in Victoria**. While considering this, it must be acknowledged that a **person's experience within the system is shaped and influenced by their intersectional identities** of gender, race, indigeneity, ability, class, citizenship, age, sexuality and so on. For more information on intersectionality and family violence, see [Everybody Matters: inclusion and equity statement](#).

Rather than provide a static version of the map, it is more useful to view an **interactive version** of the map, please follow [this link](#).

The systems map has been structured around the following components:

- **Vision** (purple circle) – our vision for the future where **Women and Children are Safe at Home**.
- **Contributing Outcome** (blue circles) – these reflect the seven pre-conditions needed in order for the Vision to be realised.
- **Barriers** (orange circles) – the factors identified that prevent or inhibit the contributing outcomes from occurring.
- **Enablers** (green circles) – the factors identified as currently in existence and facilitating or helping the contributing outcomes to occur.

The arrows connecting each factor signify a relationship and the directionality of the link. For example, 'Residency status' is connected by a directed arrow to 'Restrictions on working, seeking work', indicating that the former influences or contributes to the latter. **Where the nature of the influence is generally accepted the term 'more' or 'less' is attached to the connection to indicate whether a factor increases or decreases relative to its upstream causal factor.**

By capturing the system as a map, we are presenting a snapshot of the **current state** of the barriers and enablers to Safe at Home. However, the very nature of systems is that they are dynamic and able to change. Given that, the intent of the systems map is to support action planning on how to progress Safe at Home and – by association – the map will shift and change.

This should be kept in mind when interpreting the map as it stands, but also reinforce that this mapping process should be revisited in future to understand **how the system has shifted** as a result of changes in the landscape.

3.2 The role of Contributing Outcomes

While the **Vision** is our guiding 'North Star' for the purposes of take action, the **Contributing Outcomes** are the initial focus in the shorter term. The rationale for structuring the map in this way is to:

- Articulate the key parts of the system that need to operate in a 'healthy' way so as increase the likelihood that the Vision will be realised
- Refine the boundaries to the 'problem' to help them be more focused, while maintaining a view of the factors that help or hinder the outcomes from occurring

- Reflect outcomes that operate at different levels (individual through to systemic), that can help stakeholder organisations prioritise where they might contribute in recognition of their organisational remit and focus.

There were **seven Contributing Outcomes** identified and represented in this systems map. A brief summary of the **Contributing Outcome** and associated barriers and enablers is provided below. We suggest you review the below content in conjunction with exploring the systems map.

Effective coordinated system

For the system to function effectively, coordination and consistent approaches must be occurring between contributing groups.

One of the barriers to Safe at Home in Victoria is the number of different organisations and agencies involved, and their respective approaches, requirements and processes around family violence. Consultations revealed that delays in communication and processing of information between different groups has flow on effects which ultimately impacts the ability to keep a victim/survivor safe in the home. Timely and complete sharing of information is also lacking, largely influenced by confidentiality/policy limitations within specific agencies.

The accessibility of services and knowledge and awareness of support available for victim/survivors was discussed across most groups. That there is no 'all-in-one' integrated service where victim/survivors can be presented with all their options to make an informed decision often results in them becoming exhausted and overwhelmed by appointments, and disengaging with the system.

The quality of care and knowledge and awareness among those working within the system also presents a barrier where clients may be provided with inappropriate advice or support that does not align with their needs or the Safe at Home approach.

While several barriers exist, it was noted that there has been progress towards improving coordination between interagency partners. There is increased recognition and focus on perpetrator services, capacity building and training occurring within and across agencies (e.g., No to Violence attending police training), and efforts to improve information sharing through Multi-Agency Risk Assessment and Management (MARAM).

Economic security

Victim/survivors require stable income or access to other sustainable resources to support them to stay safe in the home.

Economic insecurity was identified as a contributing factor to victim/survivors potentially remaining in the home with the perpetrator. Financial dependence on the perpetrator may be because of caring responsibilities, unemployment, or their ability to access resources due to their residency status. Trauma and a lack of confidence can additionally impact their capacity to seek or engage in employment.

High cost of mortgage, rent and utilities may also prevent victim/survivors ability to remain in the home longer-term, particularly if two incomes have been reduced to one. In many cases,

perpetrators may restrict victim/survivors access to bank accounts as a means of manipulation and abuse.

The presence of children impacts in different ways. With young children, victim/survivors may be unable to work as they are the primary caregiver. On the other hand, if there are multiple children, welfare payments may increase enough to afford rental costs.

Being financially secure and in stable employment was said to significantly increase the likelihood that victim/survivors will be able to remain in the home – or access stable accommodation - long-term if this is their choice.

Homelessness prevention

The availability of housing alternatives is a key component of ensuring the safety of women and children in instances where remaining at home is not appropriate. It may also influence decision making when it comes to choosing to remain or leave.

One barrier consistently identified across consultations was the lack of short- and long-term housing options available to victim/survivors and perpetrators. Crisis support has generally been the focus which can address immediate safety concerns but fails to provide sustainable solutions.

Societal attitudes and norms around family violence generally encourages the victim/survivor to leave the violence, and thus the primary residence. It should be recognised that there is a reinforcing link between Safe at Home and this outcome of homelessness prevention. However, in this context the focus is on the availability of accommodation alternatives as a means of preventing homelessness when the victim/survivor is unable to safely remain at home.

Support networks including community and cultural connections can play a major role in this. Some may encourage victim/survivors to stay home or return home to the perpetrator due to religious or cultural beliefs including that family violence is a normal part of life. Others may not have community or support networks and the perpetrator/s family are the only connections they have and therefore leaving the relationship is not an option. The other aspect of this is that those networks can support victim/survivors to stay in the home and leave the relationship.

Perpetrator accountability

It is of benefit to shift the focus on perceptions of accountability to sit with the perpetrator, and that the appropriate systems and structures are in place to support this.

With the emphasis being on victim/survivor safety and services, perpetrator accountability has often been overlooked as an enabling factor. Consultations suggested there is inadequate support available for perpetrators, including affordable housing, mental health and drug and alcohol services.

There are also limitations around being able to hold perpetrators accountable. For example, non-violent perpetrators are difficult to exclude or charge and often use the system to their advantage by shifting the blame to the victim. The misalignment between the Magistrates Court and Family Law Court has also presented issues where Family Law contact arrangements may order children have

contact with both parents and through this a perpetrator can exercise coercive control over victim/survivors.

High rates of intervention orders being breached and lack of enforcement or inability to enforce suggests this has not been an effective measure to deter perpetrators and keep victim/survivors safe in the home. In cases where intervention orders are able to be enforced, this was seen to better enable the Safe at Home approach.

Similarly, perpetrators that voluntarily leave the home and are willing to engage with the system e.g., through behaviour change programs, significantly increases the likelihood that victim/survivors will remain safely in the primary residence.

Victim/survivors are safe and supported in leaving the home

Should a victim/survivor decide that leaving the home is the most appropriate option for them, they should be provided with the structures, processes and support to ensure their safety.

Traditionally, victim/survivors of family violence have been encouraged to leave the home to flee violence. In cases that involve higher risk, victim/survivors may be removed from the home and provided crisis accommodation as a response to ensure their immediate safety. Individual choice also plays a role where remaining in the home can be traumatising and triggering for many victim/survivors. Although it may be the wish of the victim/survivor to leave, often the alternatives to staying in the home are worse and can be a reason they return. The lack of appropriate short and long-term housing options available is a key reason for this – particularly in regional/rural areas, as well as victim/survivors knowing and understanding their options.

A fear that leaving the home or the relationship will escalate the violence was a consideration for many victim/survivors. Flexible Support Packages (FSPs) can help with financial and home security measures short-term, although can be difficult to obtain and justification of spending can be limiting.

Victim/survivors are safe

Victim/survivors should be safe, not just during immediate crisis but long-term.

It is apparent that the system does not adequately support victim/survivors through the various stages of their experience. With services predominantly focused on crisis responses and ensuring immediate safety, many victim/survivors live with ongoing fear and the prospect of repeat harassment and violence. This can be compounded when structures to monitor and ensure accountability of perpetrators are not sufficient.

Because of weaknesses and loopholes in the system (e.g., Family Law Court prioritising dual parenting), perpetrators are able to find ways to maintain contact with victim/survivors and exercise various forms of persistent coercive control and harassment. Victim/survivors discussed not feeling safe no matter where they go and still being followed by their perpetrator up to ten years later.

Consultations identified several limitations around monitoring and keeping the perpetrator 'in view' as contributing to this, including high cost of home security, policing resources required for ongoing monitoring, and the voluntary nature of perpetrator accountability programs that rely on cooperation of the perpetrator to engage with the system.

Where perpetrators engage with the system (e.g., NTV Perpetrator Accommodation and Support Service, behaviour change programs), this was viewed as contributing to ensuring victim/survivor safety. Legislation that supports women's safety and workplaces with family violence policies were also identified enablers of keeping the victim/survivor safe beyond immediate crisis.

Positive individual experience

Victim/survivors need to feel understood and supported by the system, with the experience being as positive as possible. This experience has flow on effects to the likelihood and willingness to engage with the service system into the future, and their ability to make appropriate, informed choices.

The complexities of family violence and individual circumstances were seen to significantly impact the way a victim/survivor experiences and engages with the system. A lack of empathy and feeling misunderstood by services involved, particularly at point of entry into the system can deter victim/survivors from engaging further. Victim/survivors also reported receiving inappropriate advice and poor-quality support in some interactions, including a lack of assistance where language barriers exist.

Negative perceptions of police or law enforcement either through previous experience or trauma (e.g., in countries of origin) was suggested to influence whether a victim/survivor will pursue action against the perpetrator. This can also be influenced by the desire not to get the perpetrator in trouble. Cultural and community norms and expectations can add additional barriers to this where shame and stigma associated with family violence, as well as the fear of being outcast from the community may mean victim/survivors will not speak out. In some cases, perpetrators may also use coercive control to isolate victims/survivors from the community.

Having access to support networks and culturally responsive services was therefore seen as enabler to the Safe at Home approach by instilling confidence in the victim/survivor that they will be supported. Engaging wraparound services, such as mental health and substance abuse was also suggested as an enabling factor to ensure quality and individualised care.

3.3 Identifying areas for action

Applying a systems lens to identify where to intervene relies on understanding the **relative influence** of addressing a particular factor, but also the recognition of the **relative effort** to effectively address a factor. **Relative effort** can include:

- The 'scale' of the factor
- The complexity of the relationships and interactions to address the factor
- The time and cost to address the factor
- The power dynamics at play, including the ability for organisations like McAuley Community Services for Women and others to influence change (e.g. through advocacy, or direct action)

As such, by exploring the systems map and considering both the relationships between factors and **Contributing Outcomes** we can start to develop a picture of possible places to intervene – both in the short and long-term – that will help to shift the system closer towards our **Vision**.

Addressing factors that have influence across the system and Contributing Outcomes are more likely to have a bigger impact, but also may require greater relative effort and – in some instances – be outside the ability for individual organisations to address.

Section 4 outlines a set of **suggested actions** – we present these as a starting point and would expect further work to expand upon these opportunities.

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4 Recommendations for action

The following actions are presented as a starting point for McAuley Community Services for Women and the Working Group to consider and discuss as part of an action planning process. The recommendations include **foundational actions** which relate to establishing a way of working for the group, **shorter-term actions** to continue progressing towards Safe at Home by achieving some 'quick wins', and **longer-term actions** to consider as part of future planning.

Foundational actions

1. **Ongoing advocacy for funding to support the Safe at Home approach.** There are several barriers to the Safe at Home approach that require more resources and funding, including short-, medium- and long-term housing options for both victim/survivors and perpetrators, service capacity to provide quality and ongoing case management care, improve perpetrator monitoring, and income support for victim/survivors. We recommend ongoing advocacy for funding, as well as support from groups that work within and outside of the system, including banks, and rent and utility providers. **Dissemination and sharing of the interactive systems map will help with this.**
2. **Seek commitment from Working Group members to continue progress and action towards Safe at Home.** Using this project as a launchpad, we recommend that there is a formalised process to seek commitment from Working Group members to continue involvement and progress. This could be through development of a Terms of Reference or similar, and help to ensure that there is clarity over the role and purpose of the working group, and that there is accountability for the group as a whole in progressing actions.
3. **Identify a suitable 'lead' organisation to help maintain momentum.** To continue coordinating agencies and progressing actions towards the Safe at Home approach in Victoria, we suggest a clear appointment of a 'driving' agency to support action. It should also be acknowledged the time and resource implications of this, but also the value that a 'driver' will add to ensuring action is taken.

Shorter-term actions

4. **Document a clear and shared understanding of the Safe at Home concept, and that it incorporates victim/survivor and intersectional perspectives.** Also worth considering are addressing foundational questions to Safe at Home, such as: is "home" the residence of the victim/survivors choosing, or the primary residence?
5. **Undertake a stocktake of the suite of existing awareness raising materials and processes that seek to improve awareness of services available pre-crisis.** The stocktake should account for materials that span Family Violence services, rights to the home (and the premise of Safe at Home), and financial literacy. The focus initially should be on materials for women and children, followed by perpetrators. The second component of this being awareness raising not only for victims/survivors themselves but also for the service sector, workplaces, schools and communities. It is important to also recognise that awareness raising will be an ongoing requirement and as such should be considered an embedded requirement across all actions.
6. **Identify specific gaps or deficiencies in relation to information sharing within the system, and the actions needed to address them.** There has been acknowledgment and an increased focus on information sharing within the system, including through the MARAM.

Notwithstanding limitations around confidentiality and internal policies, it would be beneficial for to document the specific gaps or deficiencies that limit information sharing, and possible solutions. For example, there appears to be limited sharing between victim/survivor and perpetrator services, and processing between law enforcement and courts.

7. **Identify gaps or barriers to specific service access that are influenced by factors like residency status.** Residency status is a specific barrier that has connections to a range of other areas – including the ability to access certain services or funding support. Understanding what can and cannot be accessed, and thus where the specific gaps are will make subsequent advocacy and action more effective.
8. **Ensure that any actions are evaluated, with a clear theory of change that links actions to the relevant Contributing Outcome.** We recognise that change takes time, and as such the regular evaluation of any actions undertaken will help communicate that a) action is being taken, and b) progress is being made.

Longer-term actions

9. **Maintain and increase the focus on perpetrator accountability.** Progress had been made to improve accountability of perpetrators and their role in the system. One of the key issues identified is that perpetrator engagement is largely voluntary, meaning that those without an intention to change or cooperate with the system remain ‘out-of-view’. We recommend drawing on learnings from current initiatives and pilot programs focused on perpetrator accountability (e.g., NTVs Perpetrator Accommodation) and that perpetrator services work with law enforcement and courts to improve monitoring of perpetrators. This may involve reducing the threshold for mandating behaviour change programs or ensuring there is ongoing risk assessment processes that provide options to the perpetrator of either engaging with the system or initiating monitoring through police.
10. **Advocate for a unifying state-wide strategy that supports the shift from crisis orientation, funding and services to a prevention-focused model.** This will also support the shift towards an all-in-one integrated service for victim/survivors, that also accounts for an increased focus on perpetrators. An all-in-one integrated service will improve the overall experience, and reduce the complexity for victim/survivors. Working towards state-wide integrated services (similar or within Orange Doors) that operate 24/7 and provide victim/survivors with quality case management, present legal, housing and wraparound service options available, as well as longer-term support will be needed to progress and support women and children being safe at home.
11. **Explore how law enforcement and legal processes can more closely align.** To some extent this ties into the shorter-term action around barriers or inhibitors to information sharing, however there is value in specifically acknowledging this link and the opportunities to reduce the likelihood that victim/survivors will be lost or disengage from the system.

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Appendix 1 Key stakeholder consultations guiding questions

Below are the questions that guided the consultations with key stakeholders. Note, these were a starting point for each consultation, with additional questions posed during implementation where necessary.

*Thank you very much for agreeing to take part in this discussion to contribute to the Safe at Home systems mapping project. **If it's OK with you we'd like to record this conversation to make it easier to transcribe later** – none of what you say will be provided to anyone else (completely confidential and anonymous), and will only inform the development of a systems map alongside of the other consultations we are undertaking.*

This discussion provides an opportunity for us to better understand the barriers and enablers of the Safe at Home approach from your perspective. This information will be useful in identifying key leverage points for action.

Safe at Home – in summary – relates to the actions and policies which aim to maximise the likelihood that women and children remain, safely, at home, while the perpetrator of the violence is excluded. At the end of the day we're trying to pick out some of the deeper causal factors to why SAH outcomes are not occurring.

We'll be using this consultation to inform the development of a systems map to depict those barriers and enablers. This will help to understand how these barriers and enablers are related and, ultimately, where possible action might be taken.

We're keeping these discussions very informal and conversational – I do have some questions to help guide this – but we want to keep the focus on what you feel most equipped to discuss as well. All of the insights you provide will be analysed and used specifically in the development of the systems map we are preparing for McAuley and the broader working group.

There is a workshop planned for early September where we'll present a first draft to the group, with a chance to discuss and further improve the product.

Any questions before we get started?

Like I mentioned briefly before, Safe at Home – in summary – relates to the actions and policies which aim to maximise the likelihood that women and children remain, safely, at home, while the perpetrator of the violence is excluded

1. From your respective positions, what do you think prevents or inhibits Safe at Home as an approach or set of outcomes?

[prompt]: that being, what is reducing that likelihood that women and children remain, safely at home, while the perpetrator of violence is excluded?

2. A) Of those points you listed, are there any that are more or less influential?

[prompt]: by which I mean, are there factors that if addressed would improve that likelihood more than others?

B) and why is that do you think?

3. A) Turning it around slightly, are there particular factors or needs that would enable or support Safe at Home outcomes?

B) what is preventing those enablers from occurring or manifesting?

4. Are there particular barriers or enablers you see that could or should be addressed prior to the time of crisis? So more upstream prevention work?

[prompt]: what could be actioned now to better support Safe at Home for women and children now

5. What do you see as the priority action that needs to be taken to facilitate Safe at Home as an approach?

6. Anything else to add?

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