



15 JUN 2017



Dear 

On 6 April 2017 you emailed the Ministry requesting, under the Official Information Act 1982, the following information:

- *Any briefings to the minister and memos (dating from the beginning of the year) regarding proposals for the allocation of sexual violence support services funding.*
- *Any briefings and memos (dating from the beginning of the year) regarding the funding for the Auckland Sexual Abuse HELP Foundation.*

As you are aware, on 18 May 2016, the Ministry announced that Budget 2016 will invest \$46 million over four years to better support victims of sexual abuse and to prevent sexual abuse. The full announcement is available on the Beehive website online at: <https://beehive.govt.nz/release/budget-2016-46m-support-victims-and-prevent-sexual-violence>

The objective of the service development work is to further develop and support an effective suite of sexual violence services that are:

- Effective, evidence based and sustainable
- Readily available and accessible throughout New Zealand, and
- Culturally responsive.

Two publically available documents titled '*Sexual Violence Service Development Update*' from 22 February and 24 March 2017 are in scope of your request and available at: www.msd.govt.nz/webadmin/html/enews/svsdu-february.html and www.msd.govt.nz/webadmin/html/enews/svsdu-march-24-2017.html respectively.

Please find enclosed the following documents which have been identified as in scope of your request:

Date	Title
15 February 2017.	Report: <i>'Funding for Specialist Sexual Violence Services contingency drawdown'</i> .
24 February 2017.	Report: <i>'Sexual Violence Services: Rollout of Budget 2016 funding'</i> .
7 March 2017.	Letter to Ms Kathryn McPhillips from Hon Anne Tolley.
16 March 2017.	Report: <i>'Funding Allocation for Sexual violence Crisis Support Services'</i> .
16 March 2017.	Memo: <i>'Specialist Sexual Violence Services: Sector Consultation'</i> .
17 March 2017.	Report: <i>'New National sexual violence helpline: Re-phasing of funding'</i> .
17 March 2017.	<i>'Sexual Violence Crisis Support Services: Service Development Consultation Document'</i> .

Some names have been withheld under section 9(2)(a) of the Act in order to protect the privacy of natural persons. The need to protect the privacy of these individuals outweighs any public interest in this information.

Some information is withheld under section 9(2)(f)(iv) of the Act as it is under active consideration. The release of this information is likely to prejudice the quality of information received and the wider public interest of effective government would not be served.

Additional information is withheld under sections 9(2)(j) and 9(2)(i) of the Act to enable the Ministry to carry on, without prejudice or disadvantage, negotiations (including commercial and industrial negotiations). The greater public interest is in ensuring that government agencies can continue negotiate without prejudice.

The principles and purposes of the Official Information Act 1982 under which you made your request are:

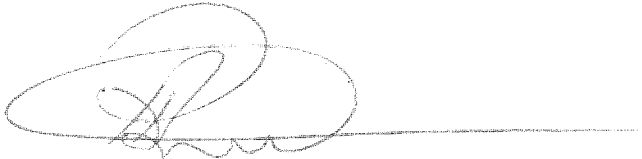
- to create greater openness and transparency about the plans, work and activities of the Government,
- to increase the ability of the public to participate in the making and administration of our laws and policies and
- to lead to greater accountability in the conduct of public affairs.

This Ministry fully supports those principles and purposes. The Ministry therefore intends to make the information contained in this letter and any attached documents available to the wider public shortly. The Ministry will do this by publishing this letter and attachments on the Ministry of Social Development's website. Your personal details will be deleted and the Ministry will not publish any information that would identify you as the person who requested the information.

If you wish to discuss this response regarding sexual violence services funding with us, please feel free to contact OIA_Requests@msd.govt.nz.

If you are not satisfied with this response, you have the right to seek an investigation and review by the Ombudsman. Information about how to make a complaint is available at www.ombudsman.parliament.nz or 0800 802 602.

Yours sincerely

A handwritten signature in dark ink, appearing to be 'Ruth Bound', written over a horizontal line.

Ruth Bound
Deputy Chief Executive, Service Delivery



**MINISTRY OF SOCIAL
DEVELOPMENT**
TE MANATŪ WHAKAHIAO ORA

Report

Date: 16 February 2017

Security Level: IN CONFIDENCE

To: Hon Anne Tolley, Minister for Social Development
Hon Steven Joyce, Minister of Finance

Funding for Specialist Sexual Violence Services contingency drawdown

Purpose of the report

- 1 This report seeks your endorsement of the evaluation plans for the Specialist Sexual Violence Services and approval to drawdown the contingency funds set aside in Budget 2016 [CAB-16-MIN-0189.27 and CAB-16-MIN-1095 refers]. Funding was set aside in a tagged contingency to allow for the development of 'robust' evaluation plans covering services for crisis support, addressing harmful sexual behaviour and services for male survivors of sexual abuse.

Recommended actions

It is recommended that you:

- 1 **note** that the Minister of Finance and the Minister for Social Development have delegated authority to approve the drawdown of the contingency Funding for Specialist Sexual Violence Services (pending evaluation), which is due to expire on 28th February 2017

AT Yes/No

- 2 **note** Treasury and Superu agree that the plans, while still high level, are sufficient to meet the requirements for the drawdown given that service development is in the early stages, however propose that once more detailed evaluation plans are complete, they are:

- 2.1 peer reviewed by an independent evaluation expert
- 2.2 submitted to Treasury for re-approval once they are complete
- 2.3 outlined in a report back to the Social Policy Cabinet Committee by 30 June 2018.

A Yes/No

- 3 **agree** that the Ministry of Social Development provide a report back to the Social Policy Cabinet Committee by 30 June 2018 covering the points in recommendation 2

A Agree/Disagree

4 **approve** the evaluation plans that cover:

- 4.1 Sexual Violence Crisis Support Services for adult victims
- 4.2 Harmful Sexual Behaviour Services for adults
- 4.3 Services for adult Male Survivors of Sexual Abuse

☒ **Agree/Disagree**

5 **9(2)(f)(iv) - Active Consideration**

☒ **Yes/No**

6 **agree** that the drawdown of funding for Specialist Sexual Violence Services be charged against the Funding for Specialist Sexual Violence Services (pending evaluation) contingency set aside in Budget 2016 as follows:

Funding for Specialist Sexual Violence Services (pending evaluation) contingency	\$ Million –increase/(decrease)			
	2016/17	2017/18	2018/19	2019/20 and outyears
Budget 2016 – contingency	-	1.896	6.397	6.159
Drawdown (subject to approval of evaluation plan)	-	1.896	6.397	6.159
Balance Remaining	-	-	-	-

☒ **Agree/Disagree**

- 7 **approve** the following change in appropriations from 2017/18 to draw down funding for Specialist Sexual Violence Services, with a corresponding impact on the operating balance as a charge against the Funding for Specialist Sexual Violence Services contingency:

Vote Social Development Minister for Social Development	\$m – increase/(decrease)				
	2016/17	2017/18	2018/19	2019/20	2020/21 & Outyears
Multi-category Appropriation:					
Community Support Services					
Departmental Output Expense category:					
Developing and Managing Community Services (funded by revenue Crown)	-	0.072	-	-	-
Non-Departmental Output Expense category:					
Supporting Victims and Perpetrators of Family and Sexual Violence	-	1.824	6.397	6.159	6.159
Total Operating		1.896	6.397	6.159	6.159

AT Agree/Disagree

- 8 **note** a fiscally neutral adjustment is also sought between the Community Support Services MCA categories to re-align the existing funding set aside for Supporting Victims and Perpetrators of Family and Sexual Violence as per table below:


Supporting Victims and Perpetrators of Family and Sexual Violence (non-departmental category)	\$ Million –increase/(decrease)				
	2016/17	2017/18	2018/19	2019/20	2020/21 and outyears
Contingency drawdown (as per recommendation 6 above)	-	1.824	6.397	6.159	6.159
Fiscally neutral adjustments between MCA categories	-	-	0.059	0.659	0.659
Total for	-	1.824	6.459	6.818	6.818

AT Yes/No

- 9 **approve** the following fiscally neutral change to appropriations to transfer funding between Community Support Services MCA categories to re-align the funding for Supporting Victims and Perpetrators of Family and Sexual Violence, with no impact on the operating balance:

Vote Social Development Minister for Social Development	\$m - increase/(decrease)				
	2016/17	2017/18	2018/19	2019/20	2020/21 & Outyears
Multi-category Appropriation: Community Support Services					
Departmental Output Expense category: Developing and Managing Community Services (funded by revenue Crown)	-	-	(0.059)	(0.659)	(0.659)
Non-Departmental Output Expense category: Supporting Victims and Perpetrators of Family and Sexual Violence	-	-	0.059	0.659	0.659
Total Operating	-	-	-	-	-

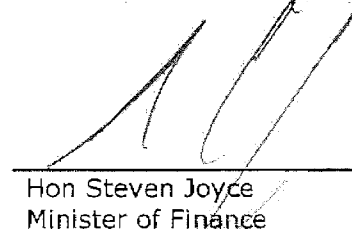
☒ Agree / ☐ Disagree


Maree Roberts
Associate Deputy Chief Executive
Community Investment

15/2/15
Date


Hon Anne Tolley
Minister for Social Development

16-2-15
Date


Hon Steven Joyce
Minister of Finance

27/2/17
Date

Background

- 2 On 18 May 2016, Minister Tolley and Minister Adams announced \$46 million operating funding would be invested through Budget 2016 for specialist sexual violence services.
- 3 \$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 design and implement new services for the long term.
- 4 The specialist sexual violence services include:
 - 4.1 crisis support services that take a trauma-informed approach to service provision and include: callout support, advocacy, crisis social work, crisis counselling, advice, information, and links or referral to aligned services.
 - 4.2 services to address harmful sexual behaviour Services that include the delivery of information, assessment and treatment for non-mandated adults who have engaged in concerning or harmful sexual behaviour
 - 4.3 services for male survivors of sexual abuse that include peer to peer support for male victim/survivors of sexual abuse and their support networks.
- 5 The evaluation approach is an integral component to allow for investigation into the success of these services. Through the evaluation there will be an opportunity to highlight successes and opportunities for improvement associated with implementation and service provision, and recommend service refinements.
- 6 Cabinet had agreed to set aside funding in contingency for the specialist sexual violence services, and authorised joint Ministers to approve drawdowns from this contingency [CAB-16-MIN-0189.27 refers] subject to submission of robust evaluation plans.
- 7 On 14 December 2016, Cabinet agreed to extend the expiry date to drawdown \$14.452 million operating funding for specialist sexual violence services from 1 February 2017 to 28 February 2017 to allow for further work on the evaluation plans [SOC-16-MIN-0195].

Evaluation Plans

- 8 On 25 April 2016, Cabinet agreed that the funding for specialist sexual violence Services contingency item be subject to a robust evaluation plan, and be submitted to the Minister of Finance and the Minister for Social Development for consideration at a later stage [CAB-16-MIN-0189.27].
- 9 Executive summaries from the three evaluation plans for specialist sexual violence services are attached at Appendix 1. They cover:
 - 9.1 Sexual Violence Crisis Support Services for adult victims
 - 9.2 Harmful Sexual Behaviour Services for adults
 - 9.3 Services for adult Male Survivors of Sexual Abuse.
- 10 The evaluation will be from February 2018 to February 2021. The formative evaluation will focus on the implementation of the specialist sexual violence services and conclude in December 2018. The summative evaluation will focus on the effectiveness of the specialist sexual violence services and complete by June 2021.
- 11 The proposed methodology for the evaluation of specialist sexual violence services is 'Collaborative Outcomes Reporting' (COR). 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.
- 12 Treasury has endorsed the evaluation plans. The plans will include a study into the potential approaches for an impact evaluation in the future. (1-2 years down the track), possibly working alongside experts/academics in this field funding permitting.
- 13 The full versions of the three evaluation plans are available from the Ministry of Social Development.

Contingency Funding

- 14 Cabinet authorised the Minister of Finance and the Minister for Social Development to draw down from the tagged contingency for specialist sexual violence services, following the submission and approval of a robust evaluation plan [CAB-16-MIN-0189.27]. These specialist services include crisis support services, services to address harmful sexual behaviour and services for male survivors of sexual abuse.
- 15 Approval is now sought to draw down the *Funding for Specialist Sexual Violence Services (pending evaluation)* contingency as per the table below::

<i>Funding for Specialist Sexual Violence Services (pending evaluation) contingency</i>	\$ Million –increase/(decrease)			
	2016/17	2017/18	2018/19	2019/20 and outyears
Budget 2016 – contingency	-	1.896	6.397	6.159
Drawdown (subject to approval of evaluation plan)	-	1.896	6.397	6.159
Balance Remaining	-	-	-	-

- 16 Note that the funding will be drawn into the *Developing and Managing Community Services and Supporting Victims and Perpetrators of Family and Sexual Violence* categories, and a fiscally neutral adjustment is required to transfer baseline funding in part between these categories.

File ref: REP/17/2/101

Author: 9(2)(a) Team Leader, Safe Families)

Responsible Manager: 9(2)(a) Manager, Adult, Family and Community)

Executive Summary: Sexual Violence Crisis Support Services

Background

This paper detailed the proposed plan to evaluate the implementation and operation of *Sexual Violence Crisis Support Services (SVCSS)*.

Sexual violence crisis support services are specialist response services available to those affected by sexual violence wherever and whenever they need them. These services take a trauma-informed approach to service provision and include: callout support, advocacy, crisis social work, crisis counselling, advice, information, and links or referral to aligned services.

The target population of the SVCSS are people affected by sexual violence after an incident of sexual violence or a crisis event (an event that triggers the trauma of sexual violence experienced in the past). This does not include crisis support services designed specifically for children. The specifications for services for children will be held and funded by the Ministry for Vulnerable Children, Oranga Tamariki.

The SVCS service development along with the development of Harmful Sexual Behaviour services (HSB) and Male Survivors of Sexual Abuse services (MSSA) are part of an integrated service system response model. The services will be evaluated separately but their interconnection will be taken into consideration during the evaluation.

The evaluation is timed to run from February 2018 to February 2021 and will look at the process and outcomes of the SVCSS. We will work to highlight successes and opportunities for improvement associated with implementation and service provision, and recommend service refinements. The outcomes for clients will also form part of the overall evaluation.

The evaluation will also aid in determining any other likely funding requirements of the future-state full service system. If additional funding is required at this time, it will be sought through Budget 2019.

This evaluation plan will inform the Community Investment (CI) strategy. The CI strategy seeks to ensure that:

- victim/survivors and people affected by sexual violence can access support and information and are safe
- victim/survivors of sexual violence are supported and empowered
- psychological consequences and long-term harm of sexual violence is reduced.¹

Services are being developed in partnership with providers of sexual violence services. Efforts are also being made to incorporate the voice of victim/survivors and those affected by sexual violence to achieve the objectives of the services.

¹ See 160324 Aide Memoire Sexual Violence Cabinet Paper

Evaluation Context: Fragmented and underfunded crisis support services

The specialist sexual violence service sector has been characterised by widespread service instability and significant gaps in service provision. Capability is high within the sector, but is not nationally consistent. Providers have struggled to meet the demand for their services. Funding has tended to be time-limited and given to fill gaps in service provision rather than to build a coordinated and systemic response.

Over the last four years, the state of the specialist sexual violence service sector has been the subject of several Government inquiries and reviews. These reviews led to an initial injection of funding in Budget 2014 to stabilise the sector, followed by a more significant investment of new funding through Budget 2016.

As a result of Budget 2016, \$37.444 million has been secured over four years to support the delivery of crisis support services and the implementation of a new sexual violence information and support service. By ensuring the continuity, growth and improvement of crisis support services will:

- reduce the severity and longevity of psychosocial effects and resulting socioeconomic consequences of sexual violence by providing immediate and accessible support
- reduce the severity and longevity of psychosocial, and resulting socioeconomic consequences of sexual violence by increasing access to follow-up response and long-term recovery services which enable continued recovery.²

The additional funds, secured in Budget 2016, are contingent on a robust evaluation plan being approved, as described in the remainder of this document.

The extent of sexual violence in New Zealand

In 2013, 186,000 incidents of sexual violence were reported in New Zealand, which represents 5.2 incidents for every 100 adults. The lifetime prevalence of sexual victimisation for women is 24 percent, meaning that about 1 in 4 women will experience at least one episode of sexual victimisation in their life. In the case of men, the figure is six percent or about 1 in 16 (NZCASS, 2014) although this is under reported and estimated to be more likely around 1 in 6.

Sexual violence results in adverse outcomes for victim/survivors, families and whānau and communities, and causes significant social, health, and economic costs. It has been estimated that the negative impacts of sexual violence (victim trauma, family problems, and unsafe communities) cost approximately 1.8 billion dollars per annum to the NZ economy.³

Given the prevalence and extent of sexual violence, the World Health Organization has described sexual violence as a "global public health problem of epidemic proportions".⁴ Invariably, sexual violence is associated with negative mental health and social outcomes.⁵ At the same time, sexual violence is the single most preventable contributor to child and adult mental illness.⁶

² See 160324 Aide Memoire Sexual Violence Cabinet Paper

³ The Treasury, Budget 2014 Information Release Document July 2014. Retrieve from www.treasury.govt.nz/publications/informationreleases/budget/2014

⁴ World Health Organization. (2013). *Global and regional estimates of violence against women: Prevalence and health effects of intimate partner violence and non-partner sexual violence*. Geneva, Switzerland: WHO Document Production Services, pg. 3

⁵ Fanslow, J., & Robinson, E. (2004). Violence Against Women in New Zealand: Prevalence and Health Consequences. *The New Zealand Medical Journal*, 117(1206), 1-12.

⁶ De Bellis, M. D. (2001). Developmental traumatology: The psychobiological development of maltreated children and its implications for research, treatment, and policy [Special Issue: Stress and development: Biological and psychological consequences]. *Development and Psychopathology*, 13, 539-564.

More support for survivor/victims of sexual violence in New Zealand is needed

In New Zealand, the specialist sexual violence sector has been characterised by widespread service instability and significant gaps in service provision. Funding has tended to be time-limited and given to fill gaps in service provision rather than to build a coordinated and capable systemic response.

An environmental scan commissioned by the Ministry of Women's Affairs in 2009, showed there were gaps in the adequacy of existing sexual violence services to meet, in particular, the needs of victim/survivors in more remote rural areas and from diverse groups.

The scan also identified gaps in establishing and ensuring consistently good practice among all those who respond to victim/survivors and understanding of what is effective and fair practice for diverse groups of victim/survivors.

The report identified that a societal misunderstanding of the nature of sexual violence was also an important barrier to all victim/survivors being able to identify their experiences as sexual abuse and to access appropriate support and justice.⁷

Evaluation of the SVCSS

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 SVCSS. This process evaluation will feed back to service delivery to allow for continuous improvement.

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

The process evaluation will largely focus on providers, while the outcomes evaluation will include victim/survivors, families and whānau, and the wider community. The process evaluation will conclude in December 2018, and the outcomes evaluation in June 2021.

The target population for the outcomes evaluation is people affected by sexual violence, who access services. This may include a victim/survivor of sexual violence but also their family and whānau (or those additionally impacted by the violence - peers, community). Evaluation questions will be developed in partnership with providers and other key stakeholders. These will cover implementation successes and difficulties (including for service providers), greater uptake of services from victims/survivors, and the extent to which services meet user needs. The outcomes evaluation will look at changes in the severity and longevity of psychosocial effects and resulting socioeconomic consequences of sexual violence. It will also include economic evaluation providing an initial assessment of economic outcomes.

We propose a *collaborative outcomes reporting* (COR) method for the evaluation of the SVCSS, which is a mixed method evaluation approach. It will be adapted to incorporate kaupapa Māori principles. Methods of data collection and analysis used will map historical and new data and information against the intervention logic, to describe how the intervention contributes to outcomes.

⁷ Jordan, J., Kingi, V., Macgibbon, L., & Mossman, E. (2009). *Responding to Sexual Violence: Environmental Scan of New Zealand Agencies*, pages 132-33

Executive Summary: Sexual Violence Crisis Support Services

Background

This paper detailed the proposed plan to evaluate the implementation and operation of *Sexual Violence Crisis Support Services (SVCSS)*.

Sexual violence crisis support services are specialist response services available to those affected by sexual violence wherever and whenever they need them. These services take a trauma-informed approach to service provision and include: callout support, advocacy, crisis social work, crisis counselling, advice, information, and links or referral to aligned services.

The target population of the SVCSS are people affected by sexual violence after an incident of sexual violence or a crisis event (an event that triggers the trauma of sexual violence experienced in the past). This does not include crisis support services designed specifically for children. The specifications for services for children will be held and funded by the Ministry for Vulnerable Children, Oranga Tamariki.

The SVCS service development along with the development of Harmful Sexual Behaviour services (HSB) and Male Survivors of Sexual Abuse services (MSSA) are part of an integrated service system response model. The services will be evaluated separately but their interconnection will be taken into consideration during the evaluation.

The evaluation is timed to run from February 2018 to February 2021 and will look at the process and outcomes of the SVCSS. We will work to highlight successes and opportunities for improvement associated with implementation and service provision, and recommend service refinements. The outcomes for clients will also form part of the overall evaluation.

The evaluation will also aid in determining any other likely funding requirements of the future-state full service system. If additional funding is required at this time, it will be sought through Budget 2019.

This evaluation plan will inform the Community Investment (CI) strategy. The CI strategy seeks to ensure that:

- victim/survivors and people affected by sexual violence can access support and information and are safe
- victim/survivors of sexual violence are supported and empowered
- psychological consequences and long-term harm of sexual violence is reduced.¹

Services are being developed in partnership with providers of sexual violence services. Efforts are also being made to incorporate the voice of victim/survivors and those affected by sexual violence to achieve the objectives of the services.

¹ See 160324 Aide Memoire Sexual Violence Cabinet Paper

Intervention logic map for first response services

Intervention

Short term results

First order impact

Second order impacts

Resnick et al. (1999) indicate this could be 18-30% for comparable video based intervention

Effective, holistic and connected first response services

Improved ability to cope and self-regulate, reduce trauma and depressive symptoms

Improved utilisation of long-term response and recovery services

Reduced exposure and severity of problems, mental illness, including depression, anxiety and PTSD

The SSC provides long term recovery counselling services to victims/survivors Chard (2008), McDonagh et al. (2005) and Fox et al. (2013) estimate the effectiveness as between 12-27.1%

Reduced unemployment, Value gained from reduced welfare expense, increased incomes and reduced absenteeism (Lerner & Henke, 2008)

Reduced healthcare utilisation
Without PTSD, individuals have 6 fewer outpatient visits than those with PTSD (Chan et al., 2009)

Improved quality of life
Avoided loss of 0.078165 DALY resulting from living with depression (MOH, 2014)

Reduced suicide risk
NZ suicide rate for those aged 20-24 is 21.5 deaths per 100,000 (Stats NZ, 2011). Khan et al. (2002) found that for those with anxiety disorders there are 267.7 deaths. Taking half the difference gives 123.7 fewer deaths per 100,000 people

Key Stakeholders

Key stakeholders who will participate and utilise the results of the evaluation include:

- The Ministry of Social Development
- SVCSS providers
- Ministry of Women
- Ministry of Health
- NZ Police
- ACC
- Ministry of Justice
- Te Puni Kōkiri (TPK)
- Superu.

RELEASED UNDER THE
OFFICIAL INFORMATION ACT

Executive Summary: Harmful Sexual Behaviour Evaluation Plan

Background

Described here is Insights MSD's (iMSD's) plan for the proposed evaluation of *Services for non-mandated Adults that Engage in Harmful Sexual Behaviour*.¹

Services include the delivery of information, assessment and treatment for non-mandated adults who have engaged in concerning or harmful sexual behaviour. This service development along with the development of Sexual Violence Crisis Support Services (SVCSS) and Male Survivors of Sexual Abuse Services (MSSA), are part of an integrated service system response model. The services will be evaluated separately but their interconnection will be taken into consideration during the evaluation.

The evaluation is timed to run from February 2018 to February 2021 and will look at the process and outcomes of the enhanced HSB services. We will work to highlight successes and opportunities for improvement associated with implementation and service provision, and recommend service refinements. The outcomes for clients will also form part of the overall evaluation.

The evaluation will also aid in determining any other likely funding requirements of the future-state suit of interventions. If additional funding is required at this time, it will be sought through Budget 2019.

This evaluation plan will inform the Community Investment (CI) strategy by assessing the HSB services. The CI strategy seeks to ensure that:

- adults exhibiting harmful sexual behaviour are able to access services, have their needs addressed, and are supported to develop pro-social attitudes, values and behaviours that support desistance from further HSB
- professionals are able to identify those at risk of HSB and link them to appropriate services
- adults at risk of perpetrating sexual violence are identified and risks reduced
- services are delivered by clinical professionals with specialist training and experience in the sexual violence services sector.

In turn, the evaluation will contribute to reducing the risk of reoffending among non-mandated adults who have engaged in HSB.

Services are being developed in partnership with providers of sexual violence services. Efforts are also being made to incorporate the voices of adults who engage in HSB and those affected by sexual violence to achieve the objectives of the services.

Evaluation Context: Underfunded harmful sexual behaviour services

The specialist sexual violence sector has been characterised by widespread service instability and significant gaps in service provision. For the HSB sector however, capability is high but capacity constraints have resulted in service gaps.

Providers have struggled to meet demand for their services. Funding has tended to be time-limited and given to fill gaps in service provision rather than to build a coordinated and systemic response.

¹ Non-mandated adults are those who are assessed and attend programmes outside of the court process and not as a mandatory condition of sentence e.g. via self-referral (or voluntarily).

In 2014, the Family and Sexual Violence Ministerial Group secured interim funding of \$10.4 million in each of Budgets 2014 and 2015.

The funding provided stability to specialist sexual violence service provision while a long-term plan for sustainable contracting was developed.

In 2015, a portfolio analysis concluded that harmful sexual behaviour services were underfunded, in particular services for non-mandated adults who offend against children. Services were found to be geographically limited, lacking treatment options for diverse population groups and over-demanded.

The 2016 Budget initiative approved additional funds to address historical under-supply and gaps in the provision of HSB services, so services can:

- increase available places in existing treatment programmes, thereby clearing current waiting lists and meeting some additional latent demand
- improve the geographic coverage and tailoring of services to diverse population groups
- define and incorporate best practice recommendations from recent and future research on effective delivery of HSB assessment and treatment services.

The additional funds, secured in Budget 2016, are contingent on an appropriate evaluation plan.

What is Harmful Sexual Behaviour (HSB)?

Harmful Sexual Behaviour (HSB) describes sexual practices that involve elements of force, coercion (absence of consent) and/or power by one person over another and are considered inappropriate and/or intrusive due to their sexual content. HSB can include both contact and non-contact behaviours.

HSB causes significant social, health and economic costs to victims, in particular, but also families and communities. It is influenced by broader systemic and societal variables, including socio-cultural attitudes towards gender, sex and violence. Many individuals who exhibit HSB struggle to access appropriate treatments due to lack of availability, high demand, and the high cost of treatment with private clinicians. HSB also occurs "in secret" and is often not visible or even known to anyone other than the "perpetrator" and victim.

More support, treatment and rehabilitation of non-mandated adults that engage in HSB in New Zealand is needed

Historically, treatment and rehabilitation services for sexual offenders have been mandatorily provided. However, only a small fraction of sexual violence incidents are reported to the police, and an even smaller fraction results in a conviction. Therefore, a substantial number of non-mandated adults who engage in HSB or are at risk of doing so are left without support and the opportunity for rehabilitation.

People with HSB who actively and willingly seek help are more likely to succeed in achieving the desired change. However, if services are not available, responsive and timely, people may lose motivation, disengage, and/or go on to sexual offending or reoffending; in turn, sustaining the high prevalence of sexual violence victimisation and re-victimisation in New Zealand. The risk of sexual offending or reoffending can be mitigated by investing more strategically in HSB assessment, treatment, and follow-up services for non-mandated adults with/or at risk of HSB. This investment will help reduce future costs associated with sexual offending and generate benefits such as having safer, healthier and better-supported communities.

Evaluation of the HSB services

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 HSB services. This process evaluation will feed back to service delivery to allow for continuous improvement.

Over the longer-term, an outcomes evaluation would look at HSB services' outcomes, reflected in client outcomes and wider social outcomes.

The process evaluation will largely focus on providers, while the outcomes evaluation will include victim/survivors, families and whānau, and the wider community. The process evaluation will conclude in December 2018, and the outcomes evaluation in June 2021.

The target population for the outcomes evaluation is non-mandated adults who have engaged in HSB and/or who are at risk of sexually harmful behaviour, who access services. This may include the adult affected by HSB but also their family and whānau (or those additionally impacted by HSB – peers, community). Evaluation questions will be developed in partnership with providers and other key stakeholders. These will cover implementation successes and difficulties (including for service providers), greater uptake of services from victims/survivors, and the extent to which services meet user needs. The outcomes evaluation will look at changes in the severity and longevity of psychosocial effects and resulting socioeconomic consequences of sexual violence. It will also include economic evaluation providing an initial assessment of economic outcomes.

We propose a *collaborative outcomes reporting* (COR) method for the evaluation of the HSB services, which is a mixed method evaluation approach. It will be adapted to incorporate kaupapa Māori principles. Methods of data collection and analysis used will map historical and new data and information against the intervention logic, to describe how the intervention contributes to outcomes.

We will establish an expert and key stakeholder review panel, which will include a broad cross-section of experts and community representatives. The role of the review panel will be to ensure the credibility of the evidence, and to determine the extent to which effectiveness can be attributed to the HSB services.

Evidence of service impact

As the evaluation will have to be completed by 2021, it will not be possible to measure what long-term changes HSB services will produce. The outcomes evaluation will be a "progress report" on how well the services have progressed towards achieving its outcomes.

However the Ministry is in the process of collecting client level data for services (and will need to ensure appropriate protocols and processes are followed). The data collected will input into the evaluation approach.

The information required to design an impact evaluation will become available after the completion of the service development. For this reason, an assessment of the most appropriate methodologies to conduct an impact evaluation will be undertaken in 1-2 years working with experts in this area. This assessment will examine how an impact evaluation based on quasi-experimental methods that look at community-level and the available individual client level data will be appropriately applied. The impact evaluation will assess short term results, first order and second order impacts as outlined in the Intervention Logic Map² on page 5.

² This Logic Map has been reproduced from the Cost Benefit Analysis for the Harmful Sexual Behaviour Services, developed by MSD.

Ethics of the HSB services' evaluation

Due to the sensitive nature, possible criminal ramifications, and largely negative and punitive societal attitudes to HSB and sexual offending, this evaluation will apply the following key ethical principles:

- key Treaty of Waitangi principles, including partnership, participation and protection
- respect for persons and Māori collectives
- minimisation of harm to participants, researchers, institutions and groups
- informed and voluntary consent
- respect for privacy and confidentiality
- evaluation adequacy
- social and cultural sensitivity
- distributive Justice

Appropriate ethical approval will be sought prior to commencement.

Key stakeholders

Key stakeholders who will variously participate and utilise the results of the evaluation include:

- MSD
- HSB Service Providers
- Ministry of Health
- NZ Police
- ACC
- Corrections
- Super

Intervention logic map: Non-mandated adults

Intervention

Short term results

First order impacts

Second order impacts

Lambie (2003) indicate 10.9% of participants successfully avoid offending.

Effective holistic and connected adult HSB services

11%

Reduced adult convictions for sexual offending/reoffending

Avoided adult sentences
Avoided imprisonment, home detention, community detention and preventive detention.

Avoided cost of sexual offences

Avoided cost of in-prison treatment programmes for those who would have been imprisoned

Increased employment and benefit payments

For those who have avoided detention, 63% would have been working and the others are assumed to be on the benefit. (Tewksbury et al., 2012)

Executive Summary: Male Survivors of Sexual Abuse Services

Background

Described here is Insights MSD's (iMSD's) plan for the proposed evaluation of the *Services for male survivors of sexual abuse* (MSSA).

Services include peer to peer support for male victim/survivors of sexual assault and their support networks. The target population of the MSSA services are men affected by sexual abuse who access to services. This service development along with the development of Sexual Violence Crisis Support Services (SVCSS) and Male Survivors of Sexual Abuse Services (MSSA), are part of an integrated service system response model. The services will be evaluated separately but their interconnection will be taken into consideration during the evaluation.

The evaluation is timed to run from February 2018 to February 2021 and will look at the process and outcomes of the MSSA services. We will work to highlight successes and opportunities for improvement associated with implementation and service provision, and recommend service refinements. The outcomes for clients will also form part of the overall evaluation.

The evaluation will work to highlight successes and opportunities for improvement associated with implementation and service provision, and recommend service refinements. The outcomes for clients will also form part of the overall evaluation.

The evaluation will also aid in determining any other likely funding requirements of the future-state suit of interventions. If additional funding is required at this time, it will be sought through Budget 2019.

This evaluation plan would inform the Community Investment (CI) strategy by assessing the MSSA services. The CI strategy seeks to ensure that:

1. male victim/survivors of sexual violence can access support and are safe
2. male victim/survivors of sexual violence are supported and empowered
3. psychological consequences and long-term harm of sexual violence is reduced.

Services will be developed with service providers and incorporate the voice of clients, so the above objectives are achieved.

Evaluation Context: Underfunded services for males survivors of sexual abuse

The specialist sexual violence sector has been characterised by widespread service instability and significant gaps in service provision. Capability is high within the sector, but not nationally consistent. Providers have struggled to meet the demand for its services. Funding has tended to be time-limited and given to fill gaps in service provision rather than to build a coordinated and systemic response.

Over the last four years, the state of the specialist sexual violence sector has been the subject of several Government inquiries and reviews. More often than not services are aimed toward the needs of women and children and subsequently, gaps have been identified including specialist services for

males impacted by sexual violence. These reviews led to an initial injection of funding in Budget 2014 to stabilise the sector, followed by a more significant investment of new funding through Budget 2016.

As a result of Budget 2016, \$1.9 million was secured for MSSA services for three years from 1 July 2016, so services can increase access to follow-up response and long-term recovery services for male survivors of sexual abuse. The increase of service capacity will help to reduce the severity and longevity of psychosocial and resulting psycho-social consequences of sexual violence.

The additional funds, secured in Budget 2016, are contingent on an appropriate evaluation plan, described in the remainder of this document.

The extent of male sexual abuse

Internationally, figures show that up 1 in 6 men experience some form of sexual victimisation in their lifetime, often before the age of 16.¹ In the United States, 2011 statistics report that 23.4 percent of men had experienced sexual violence in their lifetime, including unwanted contact. Nearly half of men who reported a sexual assault said their assailant was a woman.²

In New Zealand, about 1 in 16 men and 1 in 6 boys will report experiencing at least one episode of sexual victimisation in their life (NZCASS, 2014). This figure is based on what is reported only and it is understood that men under-report and have longer period of non-disclosure.

Sexual violence results in adverse outcomes for victims, families, and communities, including victim trauma, family problems, and unsafe communities. It causes significant social, health, and economic costs to individuals, families, and communities. Furthermore, it has been estimated to cost approximately 1.8 billion dollars per annum to the NZ economy.³

Men sexually abused in childhood are overrepresented in mental health and other clinical populations

Men who have been sexually abused in childhood are overrepresented in mental health and other clinical populations.⁴ Long-term effects included anxiety, depression, increased feelings of anger and vulnerability, loss of self-image, emotional distancing, self-blame, and self-harming behaviours.⁵ The reality of disclosing child sexual abuse is a complex one for male survivors; research shows that the majority of the men wait until adulthood to disclose their abuse, with negative stereotypes contributing to their delayed disclosures.⁶ Furthermore, research has shown that the lack of treatment after the assault predicts suicide attempts.⁷

¹ Krug, E. G., Dahlberg, L. L., Mercy, J. A., Zwi, A. B., & Lozano, R. (2002). Chapter 6: Sexual Violence. In *World Report on Violence and Health*. Geneva.

² Breiding, M. J., Smith, S. G., Basile, K. C., Walters, M. L., Chen, J., & Merrick, M. T. (2014). Prevalence and Characteristics of Sexual Violence, Stalking, and Intimate Partner Violence Victimization — National Intimate Partner and Sexual Violence Survey, United States, 2011. *MMWR. Surveillance Summaries*, 63(8), 1–18.

³ The Treasury, Budget 2014 Information Release Document July 2014. Retrieve from www.treasury.govt.nz/publications/Informationreleases/budget/2014.

⁴ O'Leary, P. J., & Gould, N. (2010). Exploring coping factors amongst men who were sexually abused in childhood. *British Journal of Social Work*, 40(8), 2669–2686.

⁵ Walker, J., Archer, J., & Davies, M. (2005). Effects of Rape on Men: A Descriptive Analysis. *Archives of Sexual Behaviour*, 34(1), 69–80.

⁶ Gagnier, C., & Collin-Vézina, D. (2016). The Disclosure Experiences of Male Child Sexual Abuse Survivors. *Journal of Child Sexual Abuse*, 25(2), 221–241.

⁷ Walker, J., Archer, J., & Davies, M. (2011). Effects of Male Rape on Psychological Functioning. *British Journal of Clinical Psychology*, 44(3), 44S–451.

Men are almost as likely to be sexually victimised by women as by men

Men, unlike women, are almost as likely to be sexually victimised by women as by men. On the contrary, only one percent of women are victimised by other women. And, once victimised, men are only half as likely as women to report incidents to the police or other authorities. Men often feel embarrassed by their experiences and ashamed to report their incidents to the police or other authorities.⁸

More support for male survivor/victims of sexual abuse in New Zealand is needed

Since the early 1990s, the number of specialist sexual violence providers supporting male survivor/victims of sexual abuse in New Zealand has increased and MSD has outcome agreements with six MSSA providers as well as with the Male Survivor of Sexual Abuse Trust/Aotearoa New Zealand (MSSAT/ANZ) – which “promotes services for male survivors across Aotearoa New Zealand by establishing a national organisation with member organisations that provide peer support on a regional basis.”

Like “mainstream” specialist sexual violence providers, MSSA providers face a number of service delivery and development issues, specifically funding constraints, the shortage of trained specialists, and an increasing demand for services – especially in rural areas. MSSA providers have also noted the need for training for other professionals working with male survivor/victims and for increased public and professional awareness of the issues male survivor/victims experience.⁹

Evaluation of the MSSA services

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 SVCSS. This process evaluation will feed back to service delivery to allow for continuous improvement.

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

The process evaluation will largely focus on providers, while the outcomes evaluation will include victim/survivors, families and whānau, and the wider community. The process evaluation will conclude in December 2018, and the outcomes evaluation in June 2021.

The target population for outcomes evaluation is male adult victims/survivors of sexual abuse and their support networks. Evaluation questions unique and in common to both process and outcomes evaluation will be developed in partnership with providers and other stakeholders, examples of draft evaluation questions are provided in the main body of this evaluation plan.

These will cover implementation successes and difficulties (including for service providers), greater uptake of services from victims/survivors, and the extent to which services meet user needs. The outcomes evaluation will look at changes in the severity and longevity of psychosocial effects and resulting socioeconomic consequences of sexual violence. It will also include economic evaluation providing an initial assessment of economic outcomes.

⁸ Weiss, K. G. (2010). Male sexual victimization. *Men and Masculinities*, 12(3), 275–298.

⁹ Submission to the Social Services Select Committee from the Male Survivors of Sexual Abuse Trust, 17 September 2015

We propose a *collaborative outcomes reporting* (COR) method for the evaluation of the MSSA services, which is a mixed method evaluation approach. It will be adapted to incorporate kaupapa Māori principles. Methods of data collection and analysis used will map historical and new data and information against the intervention logic, to describe how the intervention contributes to outcomes.

We will establish an expert and key stakeholder review panel, which will include a broad cross-section of experts and community representatives. The role of the review panel will be to ensure the credibility of the evidence, and to determine the extent to which effectiveness can be attributed to the MSSA services.

Evidence of service impact

As the evaluation will have to be completed by 2021, it will not be possible to measure what long-term changes MSSA will produce. The outcomes evaluation will be a "progress report" on how well the services have progressed towards achieving its outcomes.

However the Ministry is in the process of collecting client level data for services (and will need to ensure appropriate protocols and processes are followed). The data collected will input into the evaluation approach.

The information required to design an impact evaluation will become available after the completion of the service development. For this reason, an assessment of the most appropriate methodologies to conduct an impact evaluation will be undertaken in 1-2 years working with experts in this area. This assessment will examine how an impact evaluation based on quasi-experimental methods that look at community-level and the available individual client level data will be appropriately applied. The impact evaluation will assess short term results, first order and second order impacts.

Ethics of the SVCSS evaluation

Due to the sensitive nature of the subject, and to societal attitudes towards sexual violence, this evaluation will apply the following key ethical principles:

- key Treaty of Waitangi principles, including partnership, participation and protection
- respect for persons and Māori collectives
- minimisation of harm to participants, researchers, institutions and groups
- informed and voluntary consent
- respect for privacy and confidentiality
- evaluation adequacy
- social and cultural sensitivity
- distributive justice.

Appropriate ethical approval will be sought prior to commencement.

Key stakeholders

Key stakeholders who will variously participate and utilise the results of the evaluation include:

- MSD
- MSSA service providers
- Ministry of Justice
- Ministry of Health
- NZ Police
- ACC
- Corrections
- Superu.

RELEASED UNDER THE
OFFICIAL INFORMATION ACT



MINISTRY OF SOCIAL
DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Report

Date: 24 February 2017

Security Level: IN CONFIDENCE

To: Hon Anne Tolley, Minister for Social Development

Sexual Violence Services: Rollout of Budget 2016 funding

Purpose

- 1 This memo and A3 table provides you with information on the rollout of Budget 2016 funding to better support victims and survivors, and prevent sexual violence.

Recommended actions

It is recommended that you:

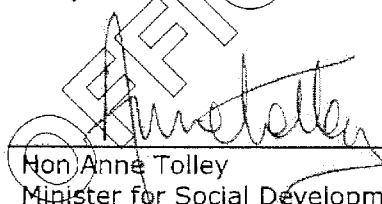
1. **Note** the contents of this report

Yes / No


Maree Roberts
Associate Deputy Chief Executive
Community Investment

24/2/17

Date


Hon Anne Tolley
Minister for Social Development

10-3-17

Date

Funding for sexual violence services

- 2 In 2015, the Social Services Committee and the Law Commission identified that victims/survivors and perpetrators of sexual violence were not receiving the services that they need, because:
 - there was insufficient investment, and
 - services were poorly coordinated, without visibility of specific service needs and populations.
- 3 This was partially addressed in Budget 2014, when \$10.4 million (over two years) was appropriated to stabilise the sexual violence services sector while the Social Services Committee was conducting its inquiry into the funding of sexual violence services. The stabilisation funding ended on 30 June 2016.
- 4 In Budget 2016, \$46m was appropriated (over four years) for ongoing stabilisation and an increase in sexual violence services.

Current state

- 5 In 2016/17 (the first year of the new funding), \$7.88m of funding has been allocated and significant service development is being undertaken to meet the need for services as identified in the development of the 2016 Budget bid.
- 6 The \$7.88m of funding in 2016/17 has been allocated to:
 - maintain the provision of crisis support services for adults affected by sexual violence at 2015/16 levels – services include provision of information and advice, specialist callout support such as crisis counselling and advocacy, and follow-up support to access long-term recovery services
 - increase provision of harmful sexual behaviour services – funding has increased from \$0.410m in 2015/16 to \$1.198m in 2016/17 (an increase of 192%)
 - maintain the provision of harmful sexual behaviour services for children at 2015/16 levels, and
 - maintain the provision of services for male survivors of sexual abuse at 2015/16 levels.
- 7 Development of services for male survivors of sexual abuse will commence in April 2017, with provision of improved and increased services planned for 2018/19.

Services from 1 July 2017

- 8 The attached A3 provides an overview of the specific services and related break down of funding allocated from 1 July 2017 through to 1 July 2019.
- 9 From 1 July 2017, there will be a 36% increase in crisis support service provision to reach more victims and survivors. This increase will be based on the new funding allocation model that will ensure fair and equitable distribution of funding across the country.

9(2)(j) - Commercial and Industrial Negotiation

- 10 New three-year contracts for crisis support services will commence with all existing ☐ specialist sexual violence service providers from 1 July 2017. These contracts will be for the delivery of the responsive crisis service, crisis support services and crisis social work support service from 1 July 2017.
- 11 We will be reporting to you in March 2017 on the new three-year contracts for crisis support services and the new funding allocation model.
- 12 Engagement with the sexual violence services sector has been ongoing since September 2016 to progress service development and design for these services.

13 The services that will be delivered from 1 July 2017 are:

- **Responsive crisis service:**

A crisis service for victims and survivors of sexual violence where a qualified specialist counsellor is available (24 hours a day, seven days a week), to support a person through treatment or other processes, immediately following an event.

This may include:

- police interviews
- forensic medical examinations
- therapeutic medical examinations
- follow-up medical examinations when requested.

- **Crisis support services:**

A range of services for victims and survivors of sexual violence during the crisis period, including:

- acute counselling interventions: face-to-face or remote 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 (client determined) that may be required
- direct referral of clients to counsellors and psychotherapists eligible for payment by ACC, and/or referral to other services that are best able to meet a client's needs
- assistance with decision making
- supporting transition to ACC and other services
- arranging access to resources.

- **Crisis Social Work Support:**

A service for clients where social work support is provided during the crisis period. This can include assistance with income support and accommodation, as well as consultation and liaison related to child safety and crisis support.

14 In addition, from December 2017, a **new national sexual violence helpline** will commence. This will provide, for the first time, a nationwide 24/7 service for free, confidential information and support to those affected by sexual violence. The only helplines currently available are regionally based and so provide limited coverage, and few are available 24/7. The new national helpline, once it is fully implemented, will also provide modes of access that are not currently available (online chat, SMS/texting and social media).

By Dec

15 Further advice on this helpline, including planned timeframes, will be provided to you in early March. It is likely that funding will need to be brought forward in order to enable implementation of the helpline in December 2017.

By Dec

16 We will be doing a full branding process for the helpline to make sure that it is clearly identifiable and will resonate with the target market. The target market is very diverse as it made up of anyone affected by sexual harm, and so effective branding will be essential.

17 From January 2018, there will be an increase in provision of **harmful sexual behaviour services** for non-mandated adults following consultation with providers.

Contracting for these services

9(2)(j)

18 New three-year contracts will be negotiated with the existing specialist sexual violence service providers currently delivering these services across the country.

Through this approach we are seeking to stabilise historically fragmented and unstable services and build service capacity and capability.

- 19 The new contracts will be in place for 1 July 2017 and have clear service specifications and reporting obligations.
- 20 Once those contracts are in place, an open RFP will be released, seeking to address any remaining gaps in service provision (service and geographical gaps). This tender will be open to new and existing providers.

File ref: REP/17/2/156

Author: 9(2)(a) - Privacy of another Senior Analyst, Operational Policy and Innovation

Manager: 9(2)(a) Manager, Operational Policy and Innovation

RELEASED UNDER THE
OFFICIAL INFORMATION ACT

Sexual Violence Services – Budget 2016: \$46m over four years to better support victims and prevent sexual violence

	Year 1: July 2016 – 30 June 2017	Year 2: July 2017 – 30 June 2018	Year 3: July 2018 – 30 June 2019	Year 4: July 2019 – 30 June 2020
Key Deliverables	Continued funding for SV crisis support Increased funding for HSB* services for non-mandated adults Continued funding for HSB services for young people and children Increased funding for male survivors of sexual abuse services	Increased SV service funding New three year contracts for providers delivering SV crisis support services New 24/7 national sexual violence helpline New two year contracts for HSB services(non-mandated adults) with existing providers Continued funding for HSB services for young people and children	Further increase in SV service funding Continued funding for HSB services for children 9(2)(f)(iv)	Final allocation of increased funding for sexual violence crisis support services
Funding	\$7.88m allocated: <ul style="list-style-type: none"> \$5.22m - crisis support services \$1.87m - HSB services for adults \$0.795m - HSB services for young people and children \$0.005m - male survivors of sexual abuse 	\$9.776m allocated: <ul style="list-style-type: none"> \$6.729m - crisis support services \$1.452m - HSB services for adults \$0.795m - HSB services for children \$0.650m - male survivors of sexual abuse 9(2)(f)(iv)	\$14.277m allocated: <ul style="list-style-type: none"> \$10.149m - crisis support services \$1.418m - HSB services for adults \$0.795m - HSB services for children \$0.750m - male survivors of sexual abuse 9(2)(f)(iv)	\$14.039m allocated: <ul style="list-style-type: none"> \$11.998m - crisis support services \$0m - HSB services for adults (funding ends) \$0m - HSB services for children \$0m - male survivors of sexual abuse (funding ends) 9(2)(f)(iv)
Services	Crisis support services Continued services for estimated 4,300 victims/survivors via providers (specialist callout support, crisis counselling, information and advice) HSB services for adults: Increased funding from \$0.410m to \$1.198m for assessment and treatment of non-mandated adults (estimated 99 assessments and 79 treatments) HSB services for young people and children: Continued service provision at 2015/16 levels Male survivors of sexual abuse: Increased funding from 2015/16 levels, and commence service development	Crisis support services New contracts, service guidelines and funding allocation model in place from 1 July Increase in services up to estimated 5,800 victims/survivors: <ul style="list-style-type: none"> 24/7 callout advocacy and support service emergency face-to-face counselling and support crisis social work support Tender to fill geographical gaps in services National sexual violence helpline Helpline commences by December 2017, with extended online services by March 2018 HSB services for non-mandated adults <ul style="list-style-type: none"> New contracts and service specifications by July 2017 Increase in services up to 102 assessments and 82 treatments Pilot Kaupapa Māori service HSB services for children Continued service provision at 2015/16 levels Male survivors of sexual abuse New contracts and service guidelines with existing providers in place from 1 July	Crisis support services 9(2)(f)(iv) HSB services for adults 9(2)(f)(iv) and continue Kaupapa Māori pilot Male survivors of sexual abuse New funding allocation model implemented HSB services for children Continued service provision at 2015/16 levels	Crisis support services 9(2)(f)(iv)
Reporting	<ul style="list-style-type: none"> Regular Ministerial Group and sector updates February 2017 – Report for approval of evaluation plan March 2017 – Report for decision on options for integrated system to support SV sector March 2017 – Report for decision on new 3 year contracts and allocation model for SV Crisis Support Services March 2017 – Update on national sexual violence helpline and timeline 	9(2)(f)(iv)		

* HSB = Harmful Sexual Behaviour



MINISTRY OF SOCIAL
DEVELOPMENT
TE MANATŪ WHAKAHIA TO ORA

Report

Date: 16 March 2017

Security Level: IN CONFIDENCE

To: Hon Anne Tolley, Minister for Social Development

Funding Allocation for Sexual Violence Crisis Support Services

Purpose

- 1 This memo outlines the funding and procurement approach for Sexual Violence Crisis Support Services to start on 1 July 2017, and seeks your agreement to proceed with the proposed approach.

Recommended actions

It is recommended that you:

1. **Note** funding has been appropriated from Budget 2016 for 2017/18-2019/20 for the on-going stabilisation and an increase in sexual violence services

Yes / No

2. **Note** a funding allocation model has been developed using a social investment approach to ensure the fair and equitable allocation of funding across New Zealand

Yes / No

9(2)(j) - Commercial and Industrial Negotiation

3. **Note** the procurement approach to
 - negotiate new contracts with ☐ existing specialist sexual violence service providers from 1 July 2017 for three years
 - run an open tender to fill any remaining geographical gaps in service provision

Yes / No

4. **Agree** to implement the funding allocation model for crisis support services from 1 July 2017

Agree / Disagree

5. 9(2)(i)

Yes / No

6. 9(2)(j)

Yes / No

7.

Yes / No

8.

Yes / No



Peter Galvin
Manager Planning and Performance
Community Investment

16/3/17
Date



Maree Roberts
Associate Deputy Chief Executive
Community Investment

17/3/17.
Date



Hon Anne Tolley
Minister for Social Development

22-3-17
Date

Funding for Sexual Violence Crisis Support Services

- 2 In Budget 2016, \$46 million was appropriated (over four years) for on-going stabilisation and an increase in sexual violence services. This includes funding for the provision of sexual violence crisis support services (SVCSS).
- 3 For SVCSS, the following funding was appropriated:

Table 1. Funding Appropriation 2016/17 – 2019/20

Service Type	Current	2017/18	2018/19	2019/20
Crisis Support Services	\$4,644,390 ¹	\$6,031,000 ²	\$9,752,635	\$11,820,054

Funding Allocation Model

- 4 The funding allocation model (the model) has been developed in line with the Community Investment Strategy and a social investment approach. The model is intended to reflect the known need for SVCSS.
- 5 The vision for the SVCSS is that services are accessible and readily available to those affected by sexual violence wherever and whenever they need them, and that those services are based on good practice and culturally responsive.
- 6 To do this, the model has been developed to ensure there is a consistent and strategic approach to the distribution of funding for SVCSS across New Zealand.
- 7 The model utilises available evidence and expertise to produce a relative distribution of need for SVCSS throughout New Zealand. The model then distributes funding based on the identified need. This allows for services to be readily available for the people who need them, at the right place and right time.
- 8 The model has been developed based on three key principles:
 - client-centric – by understanding the profile of clients who may need SVCSS
 - evidence-based – by using datasets to build the model
 - specialist knowledge and expertise – to develop the model

A robust approach through a four-step model

- 9 The model has been built using the following four steps:



Step 1: Needs analysis

- 10 The needs analysis is based on data indicators to identify the level of need for SVCSS across New Zealand. The data indicators selected to develop the model include:
 - ACC sensitive claims (ACC)
 - Number of women, aged 15-39 (Statistics NZ)

¹ Services defined as Crisis Support Services includes providers receiving funding through the 2014 Crisis Support Stabilisation Fund (\$4.123) and providers assessed as delivering crisis support through regional budgets (\$0.521m).

² 9(2)(f)(iv) - Active Consideration

- Sexual assault victims (NZ Police)
- Victim Support clients (Victim Support)
- Degree of deprivation (Statistics NZ)
- Density of Māori population (Statistics NZ)
- Rate of mental health issues and hazardous drinking (NZ Health Survey).

11 The needs analysis creates a theoretical level of investment for each area of New Zealand. For more information on the needs-analysis and how this compares to current service delivery, see Appendix One.

Step 2: Known demand for current services based on existing coverage

- 12 To ensure a full understanding of where services and funding should be located the current demand for and coverage of existing SVCSS is included in the model. Current providers were asked to supply information about current demand for their services.
- 13 Current providers are delivering a mix of SVCSS and have different reporting parameters, e.g. categorisation of service type, services delivered, and clients supported. Developing consistent reporting standards is an essential part of the service development work.
- 14 Adjustments were then made to the funding allocation model to better reflect current providers' service delivery coverage.

Step 3: Sustainability of services – minimum level of funding

- 15 For services to be sustainable in the future there needs to be an agreed minimum level of funding that applies to all services. This minimum level of funding is a set amount to ensure service viability. **9(2)(f)(iv) – Active Consideration**

9(2)(f)(iv)

- 16 This equates to a minimum "viable" funding level of \$80,000 per provider in 2017/18, increasing to \$160,000 per provider in 2019/20 as they expand to meet needs and provide the full range of services required.
- 17 This ensures that no provider will receive less than \$80,000 per annum in the first year, and will progress to \$160,000 per annum by 2019/20. Providers can receive more funding than this, based on the level of identified need in their area.

Step 4: Regional knowledge and expertise

- 18 The information collected through Steps 1 to 3 has been tested internally within Community Investment, and the Sexual Violence Cross-Agency Working Group has been consulted.
- 19 Targeted and strategic consultation has also been done with external stakeholders, **9(2)(f)(iv)**

Implementation through a staged procurement approach

- 20 The new funding allocation model presents an exciting transition from current short term funding strategies to a needs and evidence-based approach which aligns with the Community Investment and social investment approach.
- 21 This model will be implemented through the following procurement approach:
- Stability: New three-year contracts will be negotiated with the existing specialist sexual violence service providers currently delivering services aligned to SVCSS³

³ This includes providers receiving funding through the 2014 Crisis Support Stabilisation Fund and providers assessed as delivering crisis support through regional budgets.

across the country. This approach seeks to stabilise historically fragmented and unstable services and build service capacity and capability.

The new contracts will be in place for 1 July 2017 and have clear service specifications and reporting obligations.

- **Fill geographical gap:** Once those contracts are in place, an open Request for Proposal will be released seeking to address any remaining gaps in service provision (service and geographical gaps). This tender will be open to new and existing providers.
 - **Quality:** All providers will be required to adhere to new service specifications, and reporting obligations.
- 22 Funding amounts for existing providers and for the geographical gaps tender will be based on the funding allocation model, based on providers' geographical locations.

Implementation of a Funding Allocation Model

9(2)(j)

23 Implementation of the new funding allocation model will see:

- increased and sustained support for the sector
- application of a robust model that is responsive and can be adapted over time as improved data on need and performance becomes available.

24 9(2)(j)

25 The three year contract will be offer a base rate of funding determined in the Year 1 2017/18 budget.

26 9(2)(j)

Any changes to contracts will be managed through existing contract management processes. Based on the funding allocation model:

9(2)(j)

27 9(2)(j)

28

29

30 In addition, the geographical gaps tender will allow the opportunity for new providers to join the market or existing providers to expand their service delivery. This will

support the implementation of the vision of having accessible services available to those that need them, when they need them.

31 9(2)(j)

32 Appendix two provides a breakdown of existing providers' proposed funding based on the funding allocation model, compared to current funding.

9(2)(j)

33 9(2)(j)

34 Outcomes from the existing provider contract negotiations will inform the final geographical gaps that will be addressed through the open tender process. Contracts through the tender process will be negotiated on a case by case basis, dependent on the level of funding available in each area.

9(2)(j)

37

9(2)(i)

Next Steps and Communication

- 38 The allocation model will be shared with providers through the Provider Consultation process that is currently underway. The model will also be discussed at the upcoming provider hui to ensure the model and its messaging is clear.
- 39 Upon agreement of the model and after provider consultation, contract negotiations will start immediately to ensure contracts are in place by 01 July 2017.
- 40 Over the three year contract period, the Ministry is seeking to understand how to best support SVCSS clients. This understanding includes better reporting, refining the service specifications and on-going collaboration with the sector. This will be an iterative learning process which will inform the continual service development of SVCSS services.

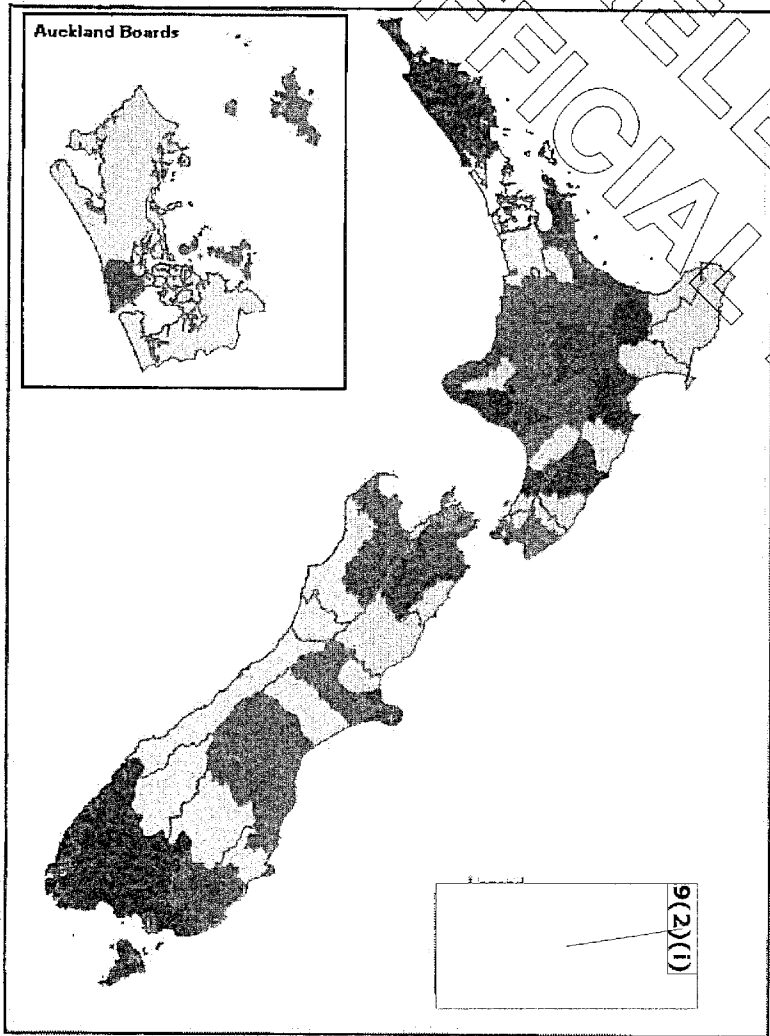
RELEASED UNDER THE
OFFICIAL INFORMATION ACT

Appendix One: Current Service Provision compared to the Needs-Analysis

These maps contrast current service delivery coverage (left hand side) with the need-analysis (right hand side)

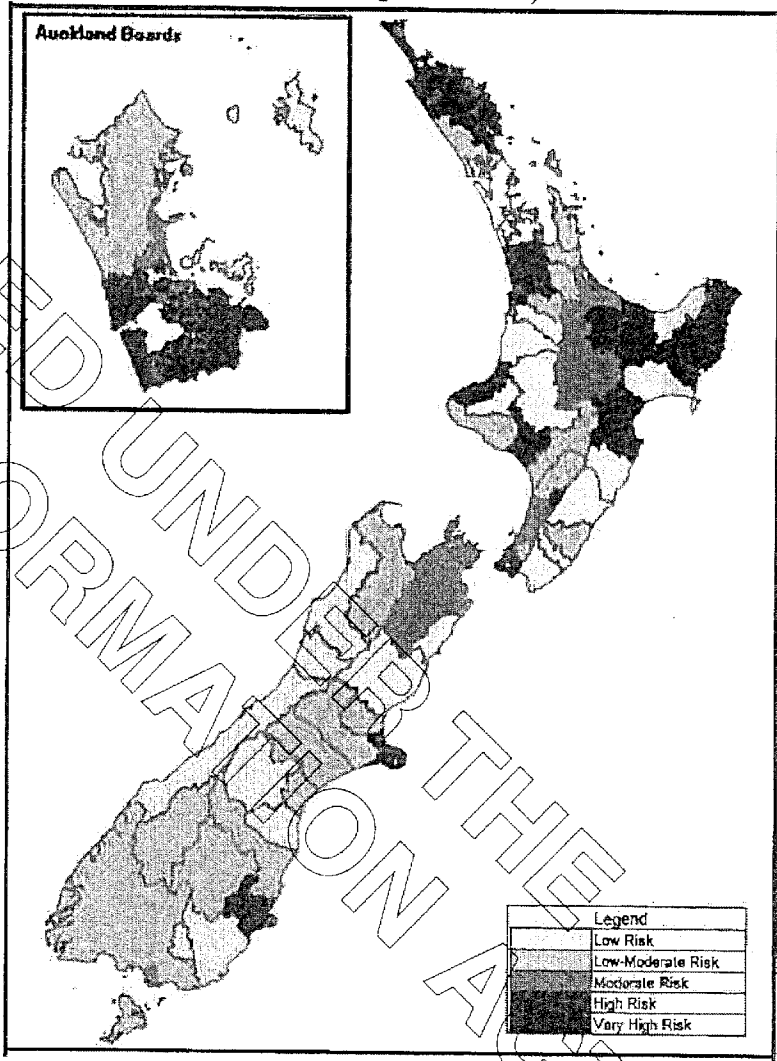
Current Service Delivery Coverage

(red indicates a gap, darker blue indicates high investment)



High risk areas based on the model

(darker blue indicates high risk area)



Selection of the Indicators

The model uses expert analysis and recommendation of population-based indicators to estimate the relative level of need for SVCSS in each area. This informs the proposed level of investment across the country, ensuring equal availability of services for clients with the same need profile.

Indicators and their weightings

Indicator	Source	Weighting
ACC Sensitive Claims	ACC	21%
Female, 15-39	Statistics NZ	18%
Sexual Assault Victims	NZ Police	15%
Victim Support Clients	Victim Support	14%
Deprivation	Statistics NZ	12%
Density of Māori	Statistics NZ	12%
Mental Health Issues and Hazardous Drinking	Ministry of Health	7%

Selection of Indicators

Seven indicators out of 50+ possible indicators perceived relevance by the panel of experts, data quality and availability. These demographic and psychosocial indicators are not to be seen as exhaustive, and have been limited to the "best indicators" for the purposes of the allocation tool being used which is simple and represents both vulnerability and risk to sexual violence (client profile, deprivation, high-risk behaviour) and effect (reports, claims, trauma).

Research and available data suggest the rate of reporting for sexual harm as less than 12%. In addition to low reporting rates, recent research estimates an average timeframe of 14 years between a sexual violence event and first disclosure for women, and an average of twenty years for men, if they disclose at all (Campbell, 2016). This meant it was important to capture indirect factors (female, deprivation, Maori) as well as more direct factors (ACC Sensitive claims, Police Sexual Assault victims).

While no subset of the population is 'immune' to sexual harm, there are demographic factors within the known survivor population that suggest certain people are at higher risk of sexual harm than others. Based on all available data, the above indicators were selected as the best indication of increased likelihood to need SVCSS.

Selection of the Weightings

The cross-agency Sexual Violence 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 9 in terms of perceived relative strength as a predictor of demand for CSS. The rankings derived the weightings for each indicator, allowing a commonly perceived important indicator to influence the model more than another.

Indicators and Rationale

Indicator	Source	Rationale
Sexual Assault Victims/survivors	NZ Police	The number of victims/survivors of sexual violence related incidences, as reported by the Police provides a comprehensive and robust understanding of reported sexual violence victims/survivors. It is a well-recognised and supported dataset.
ACC Sensitive Claims (clients engaging in services only)	ACC	ACC sensitive claims directly correlate to the need for crisis support services. This dataset covers a wider range of clients than the police data as the incident does not have to have been reported to Police. It includes clients engaged in a continuum of ACC support services over time.
Victim Support Clients / Victim Incident Based Information System (VIBIS)	Victim Support	<p>Victim Support:</p> <ul style="list-style-type: none"> provides 24 hour/seven access to an integrated, personalised, professional support service to all victims/survivors of crime and trauma (including for victims/survivors of sexual violence if no other local service is available) advocates for the rights and interests of these victims/survivors. <p>This direct indicator represents coverage from a provider perspective. It is a quality data source and represents direct clients of sexual violence crisis support nationally.</p>
Female, 15-39 / Estimates and Projects based on 2013 Census	Stats NZ	One in 3 women has experienced or will experience sexual harm over the course of her lifetime (compared to 1 in 6 men). Police data reveals that 75% of police sexual assault victims/survivors are female and 52% are aged 15-39. This group is vastly over-represented in the need for First Response services.
Deprivation / MAA2013-09 New Zealand deprivation index 2013	Stats NZ	This dataset maps the number of people living in decile 9 and 10 areas according to NZ Stats New Zealand Index of Deprivation 2013. This indicator maps the 20% of New Zealand's population that are the most deprived. Research shows that economic and social deprivation escalates stress which in turn is associated with increased risk and vulnerability. People living in deprived areas are also less likely to access private services.
Density of Maori / Estimates and Projects based on 2013 Census	Stats NZ	Victims/survivors are disproportionately Māori women. Family Violence clearing House June 2016, shows Māori women by ethnicity to be more represented in statistics than any other ethnic demographic (37%) with high lifetime prevalence for both physical and sexual violence (57%). Furthermore, sexual violence is one of the leading causes of trauma amongst Māori females. ⁵
Mental Health Issues and Hazardous Drinking / 2015/16 results from the continuous New Zealand Health Survey	MOH	<p>Poor mental health has been identified both as a risk factor for victims/survivors in both international and NZ research. Higher prevalence of persons with mental health issues may indicate the increased incidence of sexual violence and therefore requiring SVCSS.⁶</p> <p>Research also demonstrates a strong relationship between hazardous drinking and sexual violence, and therefore the likely demand for CSS.⁷ Hazardous drinking is an "established drinking pattern that carries a risk of harming physical or mental health, or having harmful social effects to the drinker or others."</p> <p>This is a composite indicator including Mental Health and Hazardous drinking, suggested by the MOH.</p>

⁴ 1 in 6 men: Submission to the Ministerial group on FFFSV from MSSAT ANZ, 2015. This figure sits with international research and is reflected in the name of Australia's largest Male survivor service called '1 in 6'.

⁵ Hirini, P., Flett, R., Long, N., & Miliar, M. 2005. *Frequency of traumatic events, physical and psychological health among Māori*. New Zealand Journal of Psychology, 34(1): 20-8.

⁶ Burnam, M. Audrey; Stein, Judith A.; Golding, Jacqueline M.; Siegel, Judith M.; Sorenson, Susan B.; Forsythe, Alan B.; Telles, Cynthia A. *Sexual assault and mental disorders in a community population*, Journal of Consulting and Clinical Psychology, Vol 56(6), Dec 1988, 843-850. <http://dx.doi.org/10.1037/0022-006X.56.6.843>

⁷ Alcohol Healthwatch and Women's Health Action (2013) Women and Alcohol in Aotearoa/New Zealand/Te waipiro me ngā wāhine i Aotearoa Policy Briefing Paper, Auckland New Zealand.

RELEASED UNDER THE
OFFICIAL INFORMATION ACT

RELEASED UNDER THE
OFFICIAL INFORMATION ACT



Memo

9(2)(a) - Privacy of another

To:

From:

Maree Roberts, Associate Deputy Chief Executive

Date:

16 March 2017

Security level: IN CONFIDENCE

Specialist Sexual Violence Services: Sector Consultation

Action: For Information

Purpose

1. This memo provides you with:
 - 1.1 information about the next phase of sector consultation to develop the sexual violence crisis support services (crisis support) and the new national sexual violence helpline (helpline)
 - 1.2 two documents for your review and feedback ahead of public release and consultation planned for 24 March 2017. These documents include:
 - 1.2.1 the Sexual Violence Crisis Support Consultation Document (Appendix 1)
 - 1.2.2 two diagrams detailing the overarching design for the new helpline (Appendix 2)
2. These documents form the foundation for both work streams. The consultation document for the crisis support services provides the basis for the new service specifications that will be developed for the new contracts that will go live on 1 July 2017.
3. The Consultation Document also includes the statement that was made about Individual Client Level Data (ICLD) on 15 March 2017 stating that providers of specialist sexual violence services will be exempt from collecting and providing ICLD for at least 12 months to allow time for further work to happen.

Background

4. Engagement with the sexual violence services sector has been on-going since September 2016 to develop the crisis support services and the new sexual violence helpline.
5. This engagement has included:
 - eight regional hui to progress the development of the crisis support services during October 2016

- three provider workshops and interviews with 11 providers between November 2016 and January 2017 as part of a service co-development process for the new helpline.
- 6 This engagement is informing the service development work and has resulted in the two consultation documents referenced above.
 - 7 We want to release these documents to the sexual violence sector and key stakeholders and provide an opportunity for them to feedback on certain aspects.
 - 8 These documents form the foundation for both work streams; in particular the consultation document for the crisis support services provides the basis for the new service specifications that will be developed for the new contracts that will go live on 1 July 2017.
 - 9 The next round of engagement is scheduled to commence from the 24 March through April 2017.

Sexual Violence Crisis Support Services Consultation Document

- 10 The Sexual Violence Crisis Support Service Development Consultation Document (Consultation Document) provides an overview of the sector engagement to date and proposes next steps to develop and implement crisis support services from 1 July 2017.
- 11 The consultation document has a specific focus on looking at how existing services can be supported to further develop capability and build capacity in order to and become more sustainable in the long term.

12 **9(2)(f)(iv)**

13

- 14 The Consultation Document clearly signals which sections are being consulted on.

Helpline diagrams

- 15 The two diagrams to be released for consultation about the new national helpline are:
 - the Service Pathway diagram that shows the client journey through the helpline. It illustrates the access modes, services to be provided, and referral pathways to local services
 - the Service Users diagram that shows the person(s) affected by sexual violence that may choose to access the Helpline and the groups that have influence or involvement in restoring the well-being of the service user.
- 16 These two diagrams have been developed with sexual violence service providers as part of the sprint co-development process. We had previously committed to consult more widely on the outcome of the sprint process, the outcome now being the two diagrams.

Sector consultation

- 17 Current service providers and key stakeholders will be invited to provide feedback on both documents – these will run as separate consultation processes.

- 18 Providers will be able to provide feedback through the online engagement tool, Loomio, or by email to the Ministry (Safe Families Team).
- 19 The online consultation will be supported by five regional hui starting on 30 March through to 12 April 2017. The hui will be invite only to current sexual violence service providers.
- 20 Pending the Minister's agreement to the funding and procurement approach for the crisis support services, the documents are planned for release by 24 March 2017, to provide sufficient time ahead of the first scheduled hui.
- 21 This phase of consultation is expected to conclude by end of April 2017. This will allow time for consideration of feedback received and ensure contracts for the delivery of crisis support services are in place and operational by 1 July 2017.
- 22 Please note separate advice has been prepared for the Minister that provides a timeline for the implementation of the new national sexual violence helpline and seeks her approval to re-phase funding approved in Budget 2016 to enable implementation of the helpline and re-align budgets to meet expected costs in 2017/18 and 2018/19 [REP/17/3/286].

9(2)(a) - Privacy of another

Author: [REDACTED] Senior Advisor, Safe Families

Manager: 9(2)(a) [REDACTED], Manager, Adult Families and Communities

RELEASED UNDER THE OFFICIAL INFORMATION ACT

Appendix Two

National Helpline narrative and diagrams to be consulted on via the on-line tool and regional Hui.

National Helpline: Context

Narrative for the on-line tool

1. In May 2016, the Government announced that Budget 2016 would invest \$46 million of operating funding over four years to better support victims and prevent sexual violence.
2. One of the work streams resulting from this investment is the development of a national multimodal information and support helpline (National Helpline) for those affected by sexual violence. Since November 2016, the Ministry has been co-developing the National Helpline through 'sprint' co-development workshops and interviews with sector leaders and technical experts. In addition, a review and analysis of relevant literature has been carried out.
3. The purpose of the National Helpline is to provide free, confidential, information and support to those impacted by sexual harm, wherever, and whenever, they might need it. In doing so, the outcomes the National Helpline is seeking to achieve are:
 - service users are aware of and are accessing the service
 - service user experiences a supportive and respectful response
 - increased national coverage of services and responsiveness
 - increased knowledge, understanding and awareness of sexual violence in the community and subsequent pro-social support and response from the community.
 - improved sector capability and capacity.
4. At a practical level, it is anticipated that the National Helpline will be accessible by phone, email, SMS/texting, online chat, a website and/or social media. These modes will be phased in over a three-year period to ensure that service provision through each mode is high, and to manage demand.
5. Once the National Helpline is accessed by a service user, a response person will provide information or referral to local service providers as appropriate and immediate crisis response, crisis counselling and advocacy where these services are hard to reach or immediately required.
6. The National Helpline staff will be suitably experienced and trained. To aid the decision-making process and support service user-facing staff, the National Helpline will have guiding policies and procedures. Further, the National Helpline will be equipped with modern system tools that ensure the services are always accessible by those in crisis.
7. The draft diagrams attached for feedback have been developed as a result of the sprint co-development process. They are aspirational in nature and will be subject to some limitations such as funding.
8. The diagrams include:

- a. The Service Pathway diagram (see thread 2)
- b. The Service Users diagram (see thread 3).

Interactive statement for users to 'vote' on

9. Five important outcomes for the National Helpline are:

- service users are aware of and are accessing the service
- service user experiences a supportive and respectful response
- Increased national coverage of services and responsiveness
- Increased knowledge, understanding and awareness of sexual violence in the community and subsequent pro-social support and response from the community.
- improved sector capability and capacity.

If you do not agree with this statement please provide a comment at the bottom of the page outlining preferred outcomes for the National Helpline.

Thread 2: National Helpline: the Service Pathway

Narrative

10. The Service Pathway diagram represents the possible journeys through the National Helpline when it has been fully rolled-out. Any person affected in any way by sexual violence can access the National Helpline by the mode of their choice.
11. The anticipated modes to be phased in are phone, SMS/text, email, online chat, website, and social media. Through these latter two modes the service user can self-direct their journey without direct contact with National Helpline staff. Through the other modes, the service user will make contact with the National Helpline's sexual violence response team.
12. The response team member will provide information or referral to local service providers as appropriate and immediate crisis response, crisis counselling and advocacy where these services are hard to reach or immediately required.
13. If the service user wishes to be referred to a local sexual violence support provider, informed consent will be obtained before the referral is made. If the service user does not wish to be referred to a local provider, or for geographic or capacity reasons no local service provider is available, the service user will be able to access limited on-going crisis counselling through the National Helpline.
14. You can provide feedback on the service pathway by commenting below, or voting and commenting via the node to the right.

Interactive statement for users to 'vote' on

15. A range of modes will increase accessibility of services allowing for increased disclosure and earlier intervention. This will decrease longer term impacts on survivors and increase overall safety and wellbeing. The important modes to increase accessibility are:

- phone
- SMS/text
- email
- online chat
- website
- social media.

16. If you do not agree with this statement please provide a comment at the bottom of the page outlining any preferred modes for the National Helpline.

Thread 3: National Helpline: the Service Users

17. The Service Users' diagram represents the people affected by sexual violence that may choose to access the National Helpline.

18. The inner group in the diagram represents the six groups that may access the National Helpline, and include:

- those who have been harmed in any way by sexual violence
- those who inquire about someone else (that is sexually harming or has been sexually harmed)
- those who identify concerning and/or harmful sexual thoughts/impulses and wish to seek help
- those who have sexually harmed someone else
- those who have been vicariously impacted by sexual harm
- those who have general enquiries

19. The outer groups in the diagram represent the people and/or groups that have influence or involvement in restoring the well-being of the service user. These groups include:

- family/whānau
- iwi/hapu
- friends/peers
- wider support networks
- community groups
- professional and practitioners
- non-government and government agencies.

20. It is envisaged that some concerns may arise if the National Helpline provides support to both survivors and perpetrators of sexual violence. Options to mitigate these concerns are being explored.

21. You can provide feedback on the service pathway by commenting below, or voting and commenting via the node to the right.

Aim
The aim of the [National Information and Support Service] is to provide free, confidential information and support to those impacted by sexual harm wherever and whenever they may need it.

The service
The [National Information and Support Service] provides specialist sexual violence information and support through a range of technology modes.

Underlying philosophical assumption
The service assumes that accessible and immediate services for people in crisis helps to mitigate the longer term impacts that stems from crisis situations, and supports the steps to recovery by:

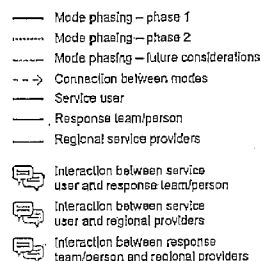
- reducing long term impacts
- increasing support (social and specialist)
- enhancing self-efficacy and empowerment
- increasing safety and reducing risk⁴.

Local service capacity
It is critical that local service capacity is addressed through the Crisis Support workstream before any phase of the [National Information & Support Service] is implemented.

The service user
The [National Information and Support Service] provides accessible support services to anyone affected by sexual violence.

The response person or team
The response team are ready and able to provide an effective and specialist response to sexual violence.

Regional provider
The regional providers are locally based providers of sexual violence support services.

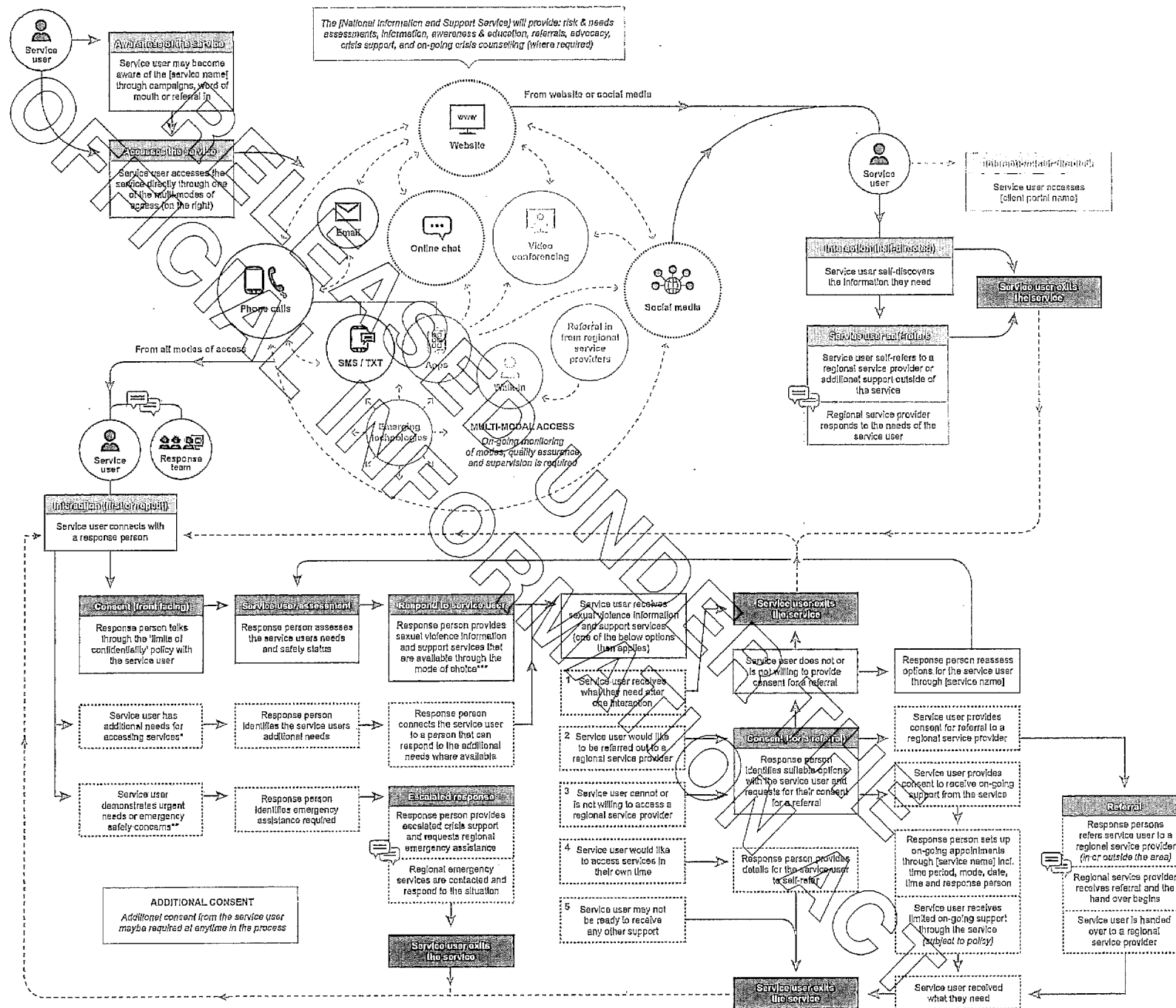


*An additional need is anything that the service user requires that the given response person cannot provide themselves at the given moment. In that regard, a specialist requirement includes, but is not limited to: culturally and linguistically diverse service users; service users with needs external to specialist sexual violence support (i.e. alcohol and other drugs, suicidal thoughts); clients that went to deal with the same response person they have previously dealt with (continuity of service).

****An urgent need or emergency safety concern is anything that requires an emergency response that the given response person cannot provide themselves at that given moment. In that regard, an urgent need or emergency safety concern includes but is not limited to: severe injury; altered/lost suicide.**

*** This may include the response person booking a call back if the person responding to the additional need is unavailable.

Please note: These diagrams are high level representations of particular attributes of the [National Information and Support Service]. For a more detailed breakdown, please see the National Information and Support Service Insights Report.



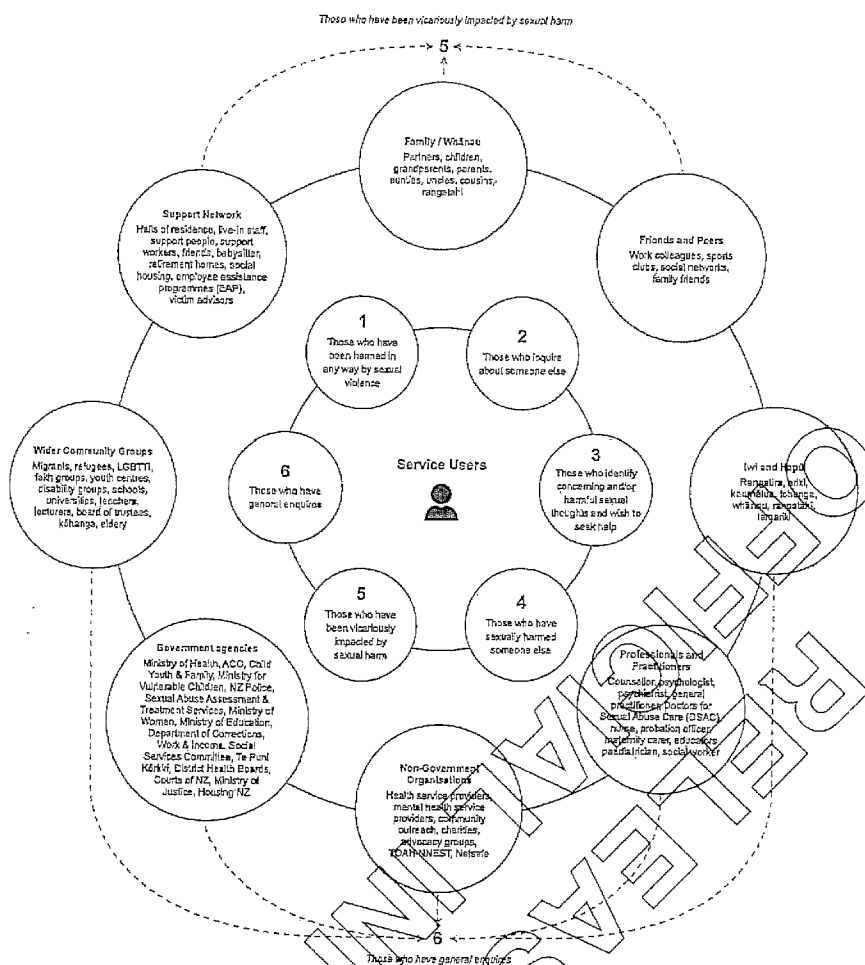
The mission of the [National 24/7 Sexual Violence Information and Support Service] is to provide free, confidential information and support to those impacted by sexual harm whenever and wherever they may need it.

The groups in the diagram represent six broad reasons why a service user may access the (National Information and Support Service). Each group has their own unique needs, and requires of specialist response relative to that need. Service users may sit in more than one group when accessing the (National Information and Support Service).

The groups are:

- 1 Those who have been harmed in any way by sexual violence.
- 2 Those who inquire about someone else (that is sexually harming or has been sexually harmed).
- 3 Those who identify concerning and/or harmful sexual thoughts/impulses and wish to seek help.
- 4 Those who have sexually harmed someone else.
- 5 Those who have been vicariously impacted by sexual harm.
- 6 Those who have general inquiries.

The outer groups in the diagram represent those who have influence or involvement in restoring the well-being of the service user.



RELEASED UNDER THE
OFFICIAL INFORMATION ACT



Report

Date: 17 March 2017

Security Level: IN CONFIDENCE

To: Hon Anne Tolley, Minister for Social Development

New national sexual violence helpline: Re-phrasing of funding

Purpose of the report

- 1 This paper seeks **9(2)(j)** ensure the implementation of the new national sexual violence helpline by December 2017, **9(2)(j)**

Recommended actions

It is recommended that you:

1. **Note** that a new national sexual violence information and support helpline (the helpline) is a key deliverable in the rollout of the \$46m Budget 2016 funding. **Yes/No**
2. **Note** that this helpline will mean that for the first time, there will be nationwide 24/7 access to free, confidential information and support to those affected by sexual violence. **Yes/No**
3. **Agree** that the helpline be implemented in two phases:
 - Phase One: By December 2017 – new national sexual violence helpline with 24/7 phone access to information and support.
 - Phase Two: March 2018 – Inclusion of online chat and a social media presence.**Yes/No**

4. **9(2)(f)(iv) - Active Consideration**

Yes/No

5.

Yes/No

9(2)(j)

6. 9(2)(j)

Yes/No


Maree Roberts
Associate Deputy Chief Executive
Community Investment

17 March 2017

Date


Hon Anne Tolley
Minister for Social Development

21-3-17.

Date

A national sexual violence information and support service is a key deliverable

- 2 In Budget 2016, \$46m over four years was appropriated for the on-going stabilisation of the sexual violence services sector and an increase in sexual violence services.
- 3 A new national sexual violence information and support helpline (the helpline) is a key deliverable in the rollout of the Budget 2016 funding. The helpline will mean that for the first time, there will be nationwide 24/7 access to free, confidential information and support to those affected by sexual violence.
- 4 Once it is fully implemented, there will be multiple modes of access: phone, website, online chat, email, SMS/texting and social media. People will be able to access information, crisis counselling and support and referral to local service providers.

We propose a two phase implementation process

- 5 We have developed a staged implementation of the helpline that will enable people affected by sexual violence to start accessing services by December 2017.
- 6 On this basis, we propose the following two phases for implementation:
 - **Phase One:** By December 2017, a new sexual violence helpline will go live.
 - This will enable people affected by sexual violence to connect with the sexual violence helpline by phone 24 hours a day, 7 days a week.
 - Based on a given person's need, they will be able to access information, crisis counselling and support, or be referred to local service providers as appropriate.
 - A website will provide easy access to information and self-help resources and links to local sexual violence services, and wider support service providers.
 - **Phase Two:** From March 2018, the service will be expanded to include online chat, and a social media presence will be established. These are modes that are particularly important for young people.

Budget sensitive

Budget sensitive

File ref: REP/17/3/286

9(2)(a) - Privacy of another

Author: [redacted] Senior Analyst, Operational Policy and Innovation

Responsible manager: **9(2)(a)** Manager, Operational Policy and Innovation



**MINISTRY OF SOCIAL
DEVELOPMENT**
TE MANATŪ WHAKAHIATO ORA



Sexual Violence Crisis Support Services

Service development consultation document

March 2017

Authors

Safe Families Team
Community Investment

Released

March 2017
Ministry of Social Development
PO Box 1556
Wellington 6140
New Zealand

Telephone: +64 4 916 3300
Email: info@msd.govt.nz
Web: www.msd.govt.nz

ISBN: 978-0-947513-71-9 (online)

Contents

Executive summary	1
The document	1
Background	1
Draft service framework	2
Next steps	4
Part 1 – Setting the Scene.....	6
Purpose	6
Budget 2016.....	6
Name of services.....	6
Approach.....	7
What we know	7
Part 2 – Vision for Sexual Violence Crisis Support Services.....	12
Who are services for?	12
What are the services?	12
Integrated services.....	13
Part 3 – What you told us	16
Session 1: How do we define ‘crisis’ in relation to these support services?	16
Session 2: What are the strengths of existing services?	17
Session 3: What are the known gaps in existing services?	17
Session 4: What does good practice look like for sexual violence crisis support services?	21
Session 5: What are the key capabilities required from the workforce?	22
Part 4 – Funding allocation model	25
Building a funding allocation model based on need and demand for services	25
Part 5 –Service framework	30
Draft service framework	30
Vision.....	31
Services	31
Target clients.....	33
Principles of good practice.....	33
Inclusive practice	34
Workforce	34

Funding	35
Results and reporting.....	35
Part 6 – Next Steps.....	39
Consultation.....	39
Development of a service guideline	39
Service continuation from 1 July 2017.....	39
Evaluation	40
Appendices.....	43
Appendix 1: Summary of work to date	43
Appendix 2: List of currently MSD funded providers of sexual violence crisis support services.....	46
Appendix 3: Location of contracted providers and service areas.....	47
Appendix 4: Strengths of existing services.	49
Appendix 5: Key capabilities for the sexual violence workforce	51
Appendix 6: Needs analysis	54
Appendix 7: Draft Family Violence, Sexual Violence and Violence within Whānau Workforce Capability Framework	55

Executive summary

This document provides an overview of the sector engagement that was carried out to develop the sexual violence crisis support services and proposes 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.

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 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.

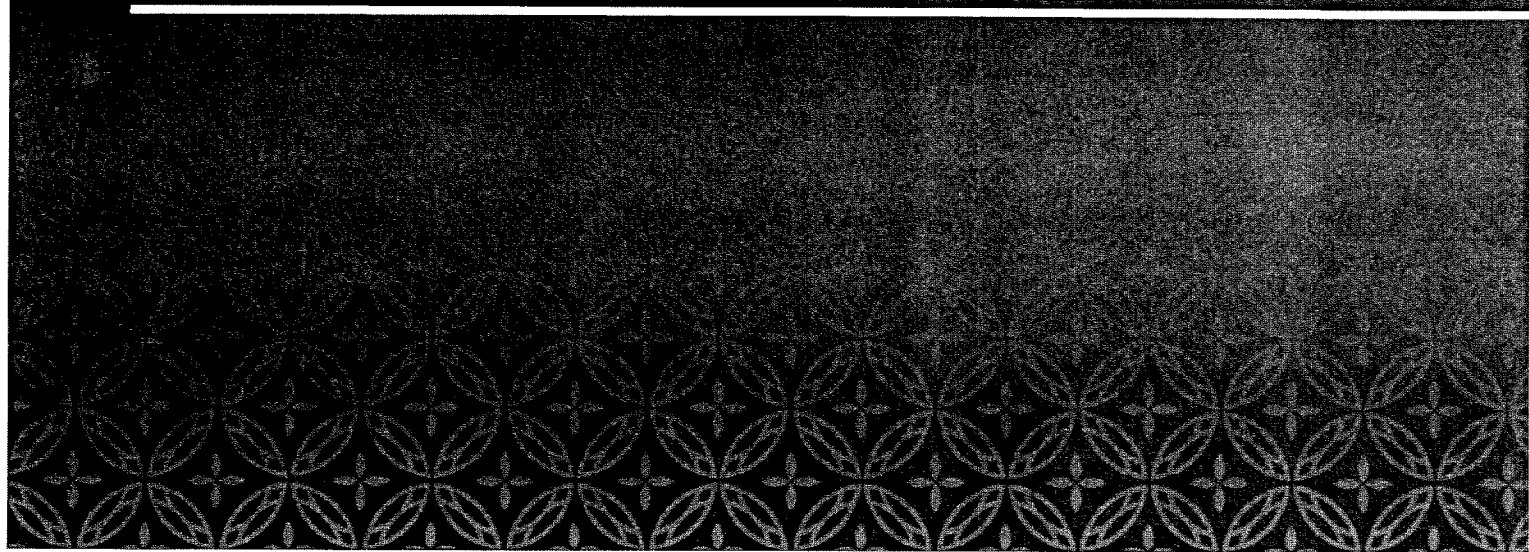
A draft intervention logic, results and outcome measures are proposed. This is intended to provide a measurement system that links performance measures in Provider Outcome Agreements to the bigger results being sought.

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 Kaitia, 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 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 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 violence wherever and whenever they need them and 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?

Sexual violence crisis support services are specialist crisis response services available to those affected by sexual violence wherever and whenever they need them.

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 a later time.

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: callout support, advocacy, crisis social work, crisis counselling, advice, information, and links or referral to aligned services.

Given the nature of sexual violence and its on going 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; 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:

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>

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 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.

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.*

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).

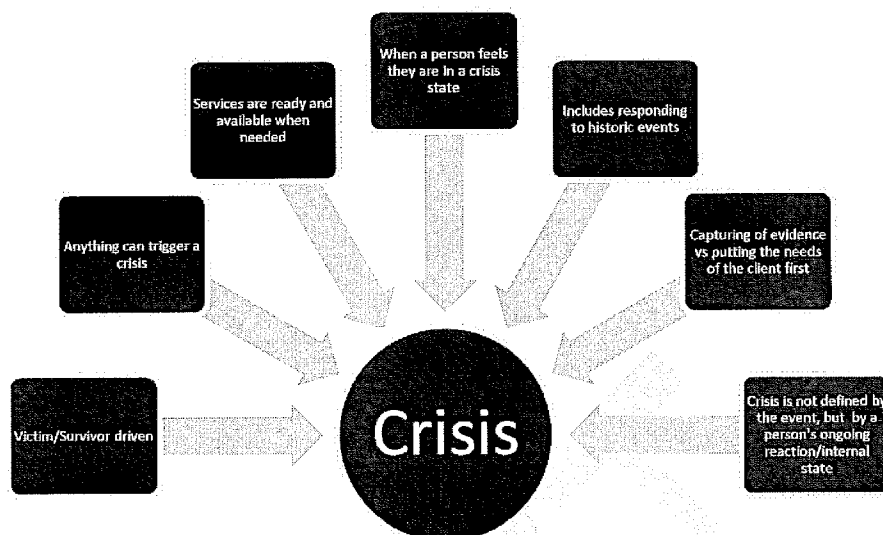
When defining 'crisis' in relation to sexual harm it is important to consider the immediate and on-going impacts of sexual harm on victims/survivors. Rather than being defined by an actual event, crisis is defined as the person's internal response/trauma to that event and not limited to a timeframe and/or 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.

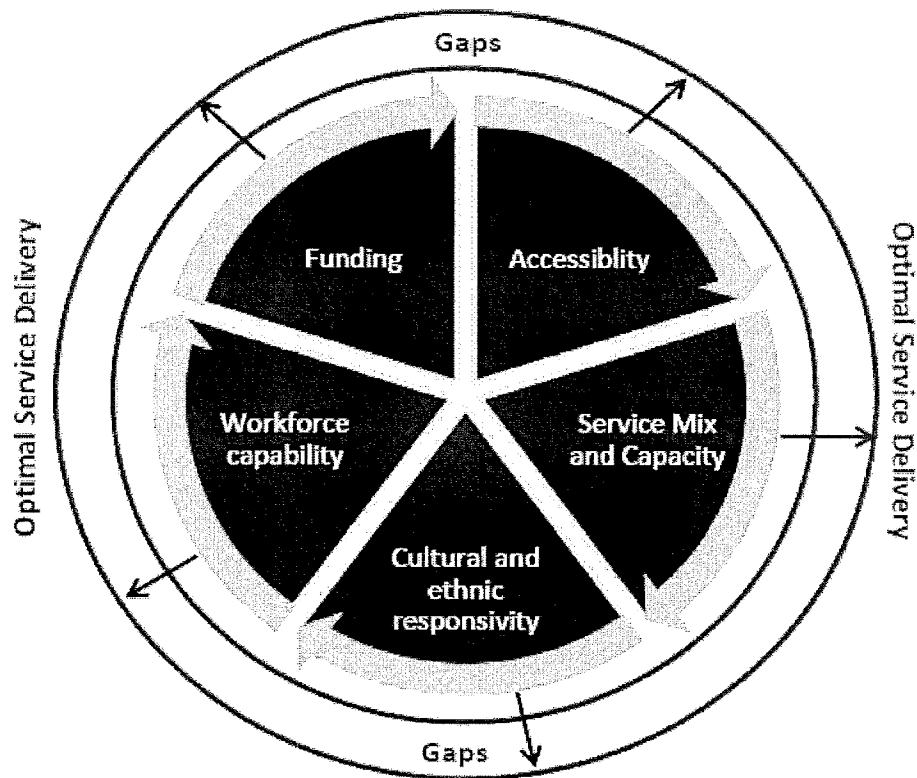
In summary, the key themes were:

- 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.

Long term care and recovery: Integrated Services for Sensitive Claims

ACC is legislated to provide long-term care and recovery services to survivors. The Sensitive Claims Unit assesses and 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 and for some increases their levels of trauma.

Some crisis response services continue to support clients through long-term care and recovery outside of the Sensitive Claims service and are not funded 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.

As part of the second round of development of the good practice guidelines²³, 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.

²³ Wharewera-Mika, J.M & McPhillips, K.M (2016) *Good Practice Responding to Sexual Violence. Guidelines for 'mainstream' crisis support services for survivors.*

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)²⁴ 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 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.

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

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 Specifications²⁵ 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 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'.²⁶

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.

²⁵ 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>

²⁶ 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.

"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).²⁷

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)

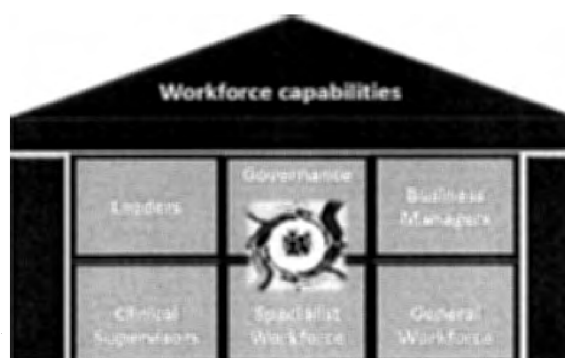
Given the sensitive and traumatic nature of sexual violence, victims/survivors are often not in a position to navigate their own way through various services or to access information required to support them to move toward recovery. This can include access to medical services and information about laying 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:

Diagram 3: Key groups that comprise the sexual violence workforce



²⁷ The Missouri Coalition against domestic and sexual violence (2012). *Understanding the nature and dynamics of domestic violence*.

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.²⁸

²⁸ 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 ²⁹
ACC sensitive claims <i>The number of clients currently engaged with ACC, with a sensitive claim.</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> <ol style="list-style-type: none"> 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> 	Ministry of Health	7%
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 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.

²⁹ 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.

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:

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



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:

Sexual violence crisis support services are specialist response services available to those affected by sexual violence wherever and whenever they need them.

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



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

- 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 guidelines³⁰ 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 eligible for payment by 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.

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.³¹



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

³⁰ Wharewera-Mika, J.M & McPhillips, K.M (2016) *Good Practice Responding to Sexual Violence. Guidelines for 'mainstream' crisis support services for survivors.*

³¹ Wharewera-Mika, J.M & McPhillips, K.M (2016) *Good Practice Responding to Sexual Violence. Guidelines for 'mainstream' crisis support services for survivors.*

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 guidelines³² 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> .

Diagram 5: 15 Principles of Good Practice – TOAH NNEST



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

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 practice³³. 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.

Results and reporting

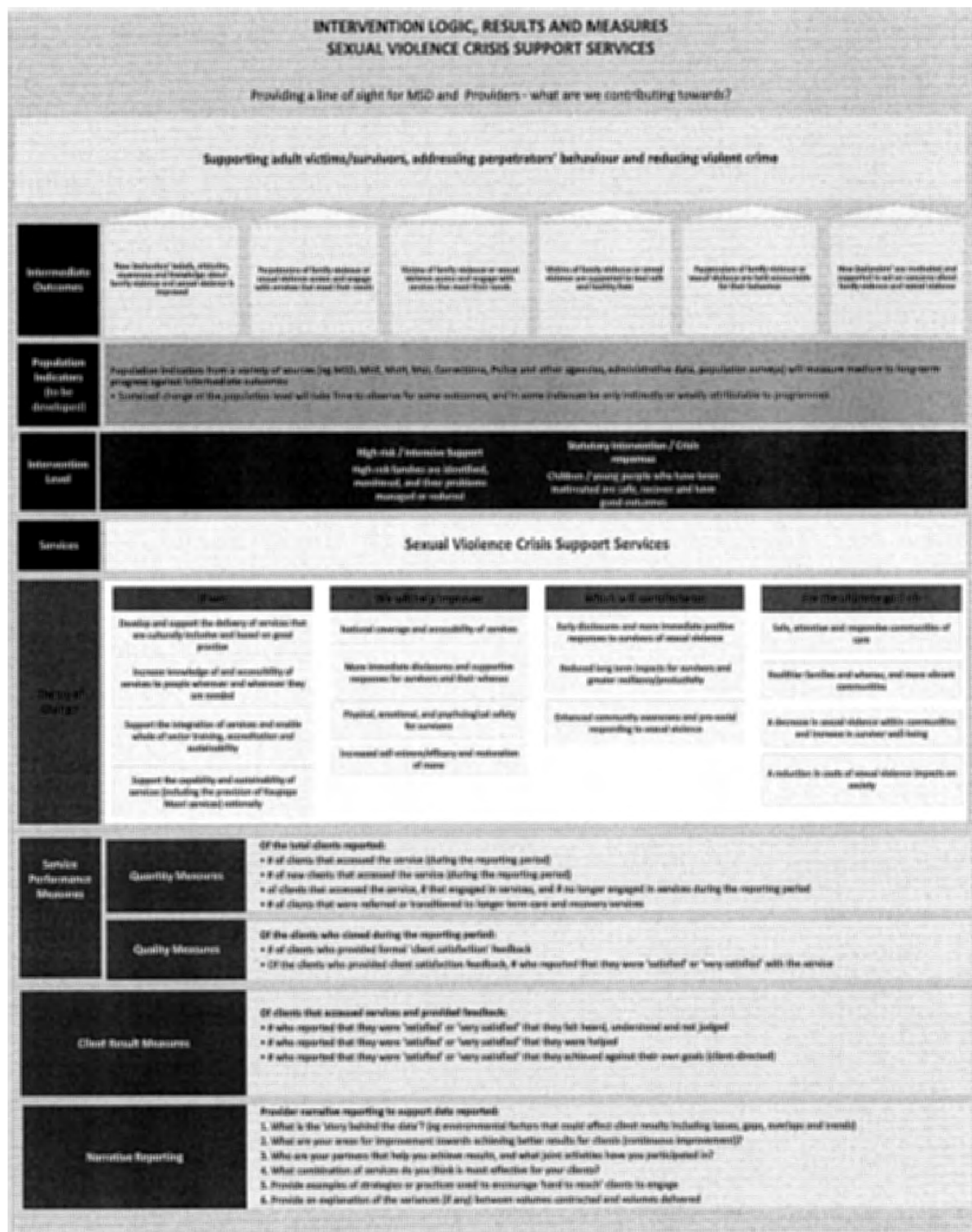
We are developing the intervention logic, results and measures for the crisis support services. This will provide a measurement system that links performance measures in Provider Outcome Agreements to the bigger results being sought.

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 results³⁴. The draft intervention logic is outlined in Diagram 6.

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

³⁴ 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



Do you agree with the Intervention Logic?
Are there other outcomes and measures
that should be considered for inclusion?

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 [\[insert link\]](#)

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 contract³⁵
- 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:

³⁵ 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

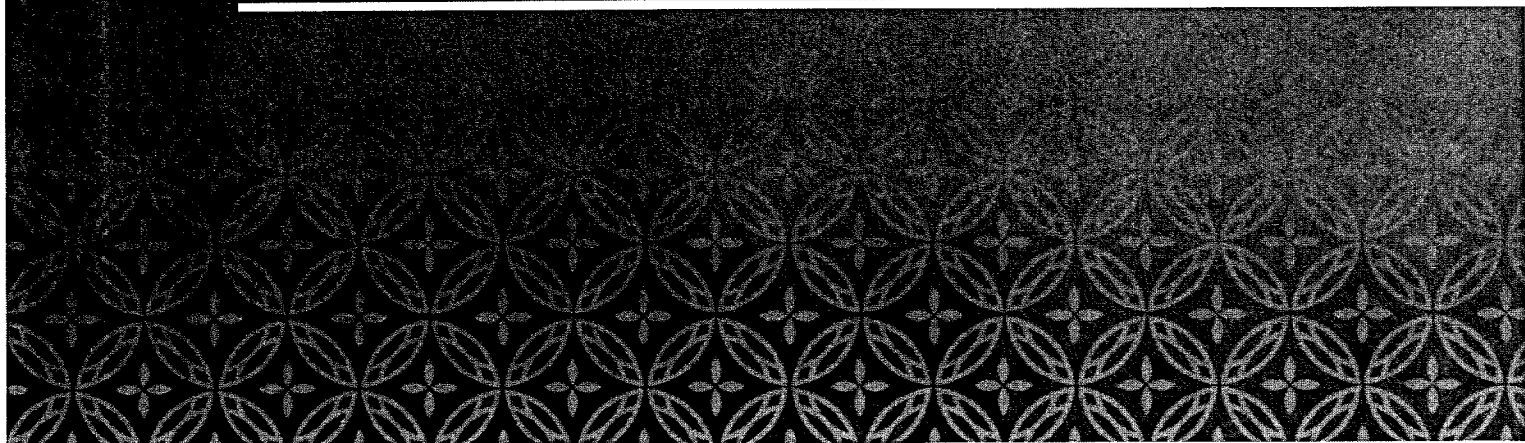
We will use 'Collaborative Outcomes Reporting' (COR) as a methodology for the evaluation of specialist sexual violence services. COR is a participatory evaluation approach centred on performance stories. Performance stories are reports that detail how a project contributed to outcomes. The aim is to 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 measure. 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 recommendations³⁶ 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 review 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 Violence³⁷

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.

³⁶ Refer: https://www.parliament.nz/resource/en-NZ/51SCSS_ADV_00DBSCH_INQ_12392_1_A403748/cd1f9e5756e5037ff47d9eb2741bdbb0f740e8f6

³⁷ 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 services³⁸

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 Violence³⁹

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.⁴⁰

\$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).

³⁸ 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

³⁹ 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>

⁴⁰ 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.

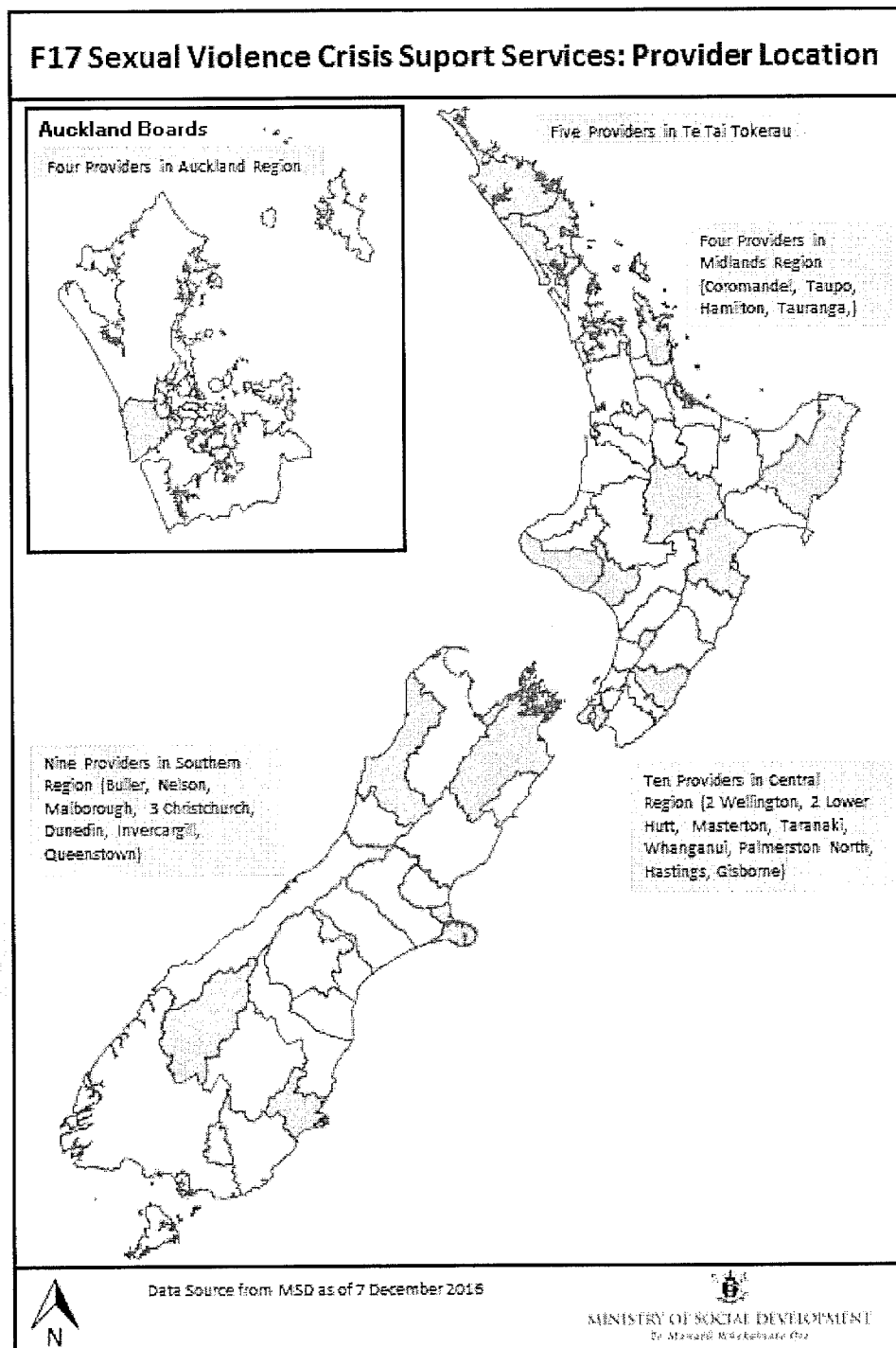
Appendix 2: List of currently MSD funded providers of sexual violence crisis support services

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 Ruruahu 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

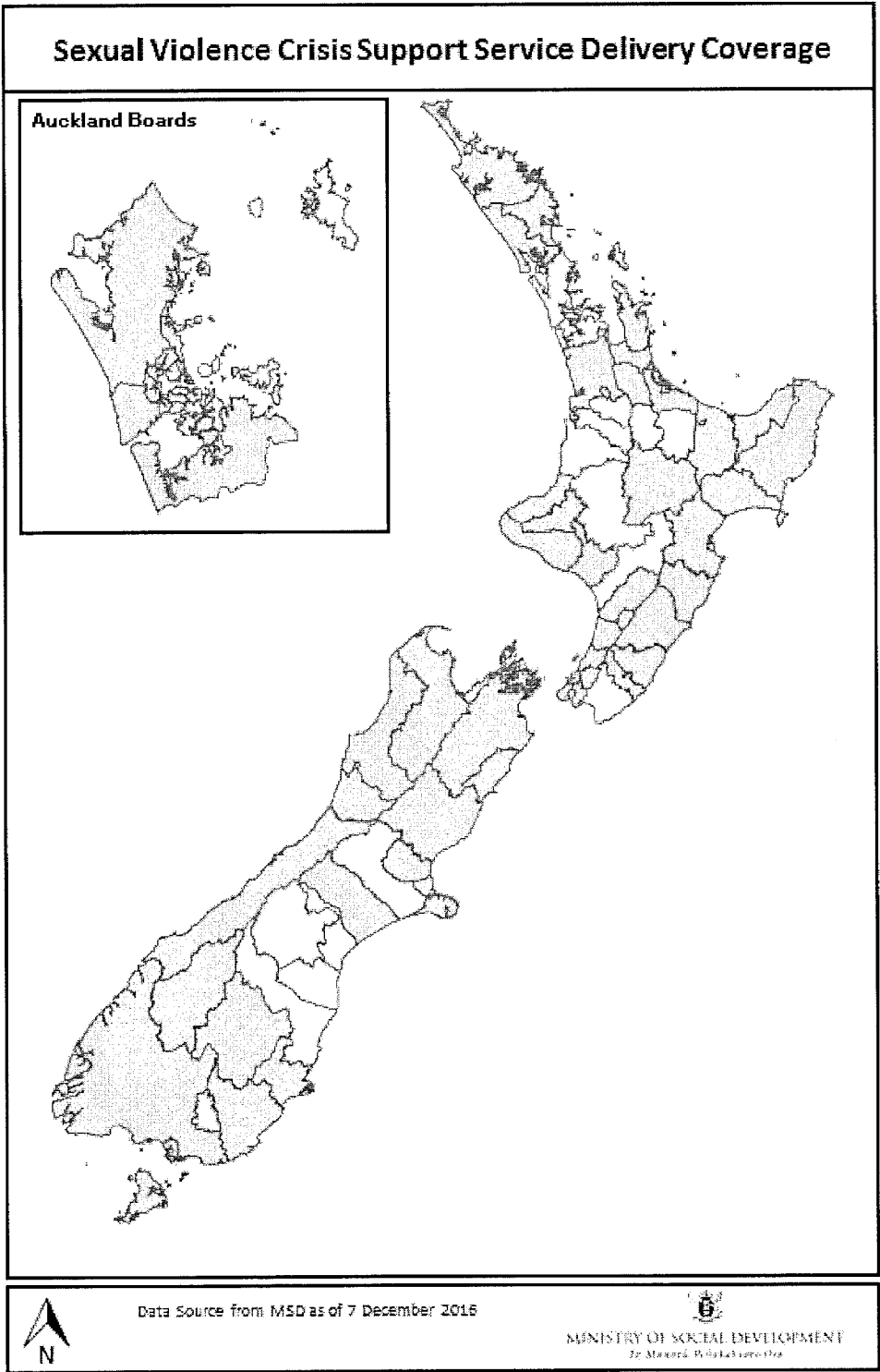
Please note this list is of providers that received funding through Budget 14, and then Budget 16 to sustain existing services. It does not include providers that have been funded through Regional MSD funding.

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-parte 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, empathic, 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

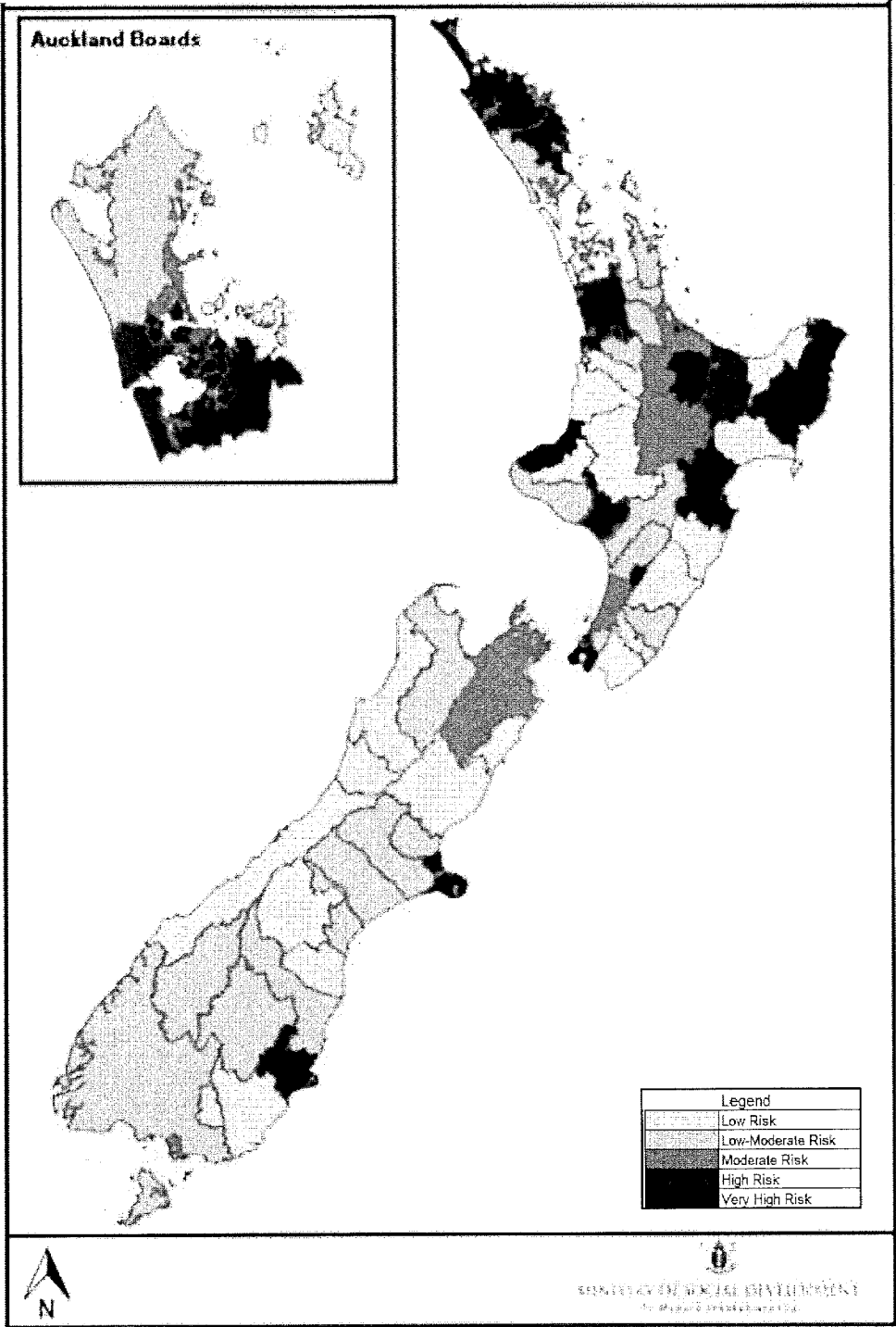
General workforce

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.



Family Violence, Sexual Violence and Violence within Whānau Workforce Capability Framework DRAFT

To build workforce and community sector capability to respond safely and respectfully to people experiencing, affected by, and perpetrating sexual violence and violence in families and whānau.

A Venn diagram with three overlapping circles. The top circle is labeled 'Family Violence'. The bottom-left circle is labeled 'Violence within Whānau'. The bottom-right circle is labeled 'Sexual Violence'. The circles overlap in various combinations, representing the intersection of these types of violence.

Workforce
A strong capable workforce
committed to excellence

Communities
Mobilising networks, resources
and people and providing
leadership to take action
at a local level

Government
Investing in an integrated system
to stop intergenerational violence

