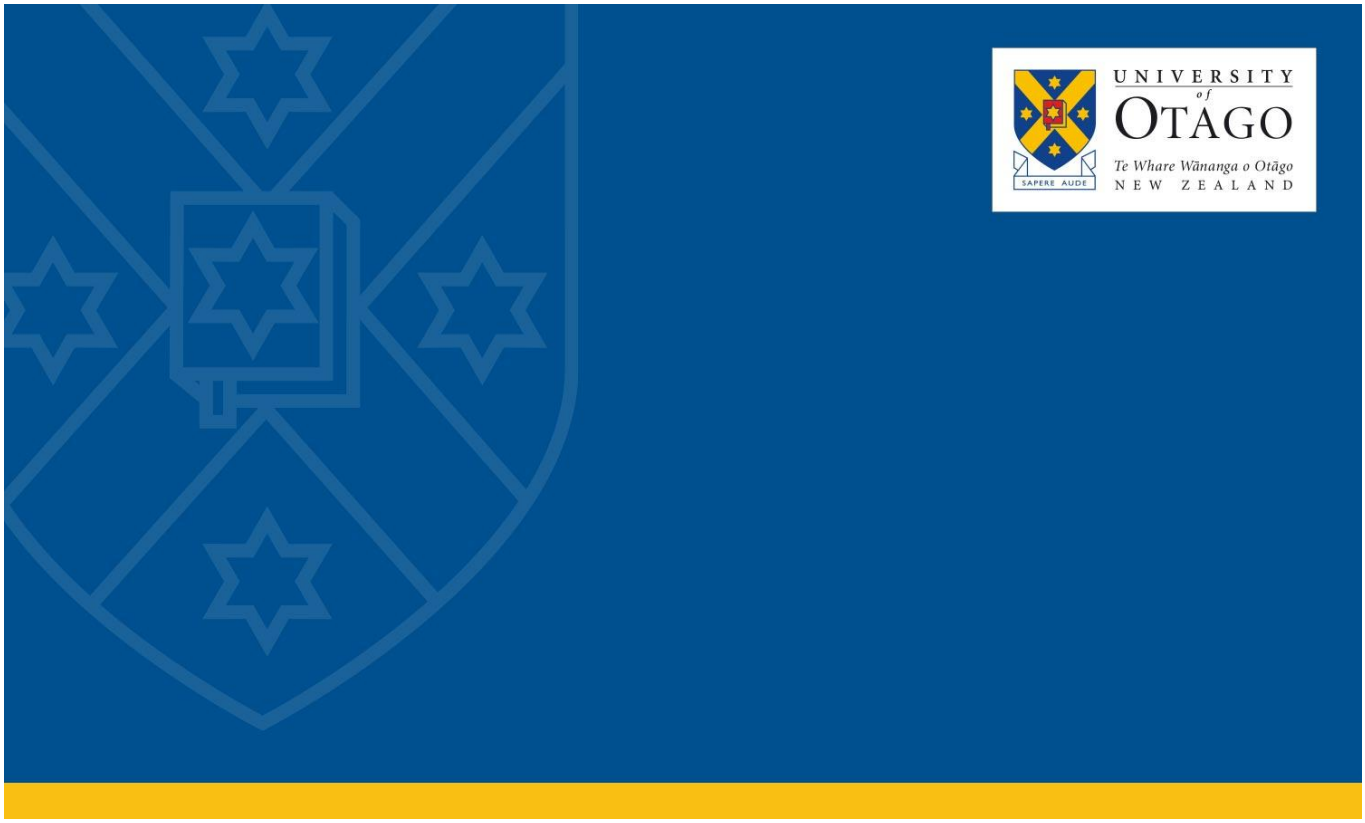


Impact of Budget 2019 Funding on Sexual Harm Crisis Support Service Users and Workforce

Melanie A. Beres, Paulette Benton-Greig, Louise Pearman-Beres, Andrea Clark, Peyton Bond and Jeff Foote

June 2024

Acknowledgements

We would like to thank the victim/survivors who generously shared their time and experiences with us.

Thanks to the staff of Sexual Harm Crisis Support Services who were interviewed as part of this evaluation. We would also like to thank the managers of sexual violence services who supported the evaluation.

We would like to thank Te Ohaakii a Hine – National Network Ending Sexual Violence Together (TOAH-NNEST) for their support and their mahi in the sexual violence sector in Aotearoa New Zealand.

To our advisory team, Dr. Annabel Ahiriri-Driscoll, Professor Anita Gibbs, Akarei Marasala-Thomson, Kiritapu Murray, Professor Gareth Treharne and Professor Patrick Vakaoti, thank you for your insightful feedback and support.

We would like to thank our wonderful team of interviewers, Anna Britz, Hala Burhoum, Sophie Dix, Jordan Dougherty, Alisha Jefferis, Tiria Pehi, Leah Robinson, Avelina Rokoduru, Kris Taylor, and Cassie Withey-Rila for their time and support of the interviewees.

Disclaimer

The views and interpretations in this report are those of the researchers and are not the official position of the Ministry of Social Development.

ISBN

978-1-99-110591-2

Published by the Ministry of Social Development, Wellington, New Zealand. October 2025.

Glossary of terms

Crisis Service	The Sexual Harm Crisis Support Service.
Crisis Service Agencies	Independent, specialist sexual violence organisations that provide a Sexual Harm Crisis Support Service. Throughout the report these are often referred to as just 'Agency'/'Agencies'.
Crisis Worker	Someone whose role, within an Agency, is to support victim/survivors of sexual violence in response to their experience of emotional, psychological or spiritual crisis.
Safe to Talk – Kōrero mai ka ora	A national 24/7 sexual violence helpline.
Sexual violence	The term sexual violence refers to a range of unwanted, non-consensual, coerced and forced sexual behaviours. Types of sexual violence include sexual harassment, sexual coercion, sexual assault, rape, as well as childhood sexual abuse (Krug et al., 2002). These behaviours can occur in person and through digital communications (Henry & Powell, 2014; World Health Organization, 2004). They span serious criminal acts as well as more everyday forms of abuse. Sexual violence is a complex social problem and is deeply embedded in the structures of our society and enabled by many taken-for-granted social norms and values (Gavey, 2019).
Victim/survivors	People who have experienced sexual harm and are accessing the Sexual Harm Crisis Support Service.

Executive summary

Introduction

This evaluation report focuses on the impact of Budget-2019 (Budget-19) funding on the Sexual Harm Crisis Support Service and its outcomes for service users, frontline staff, and sector integration. It was commissioned by the Ministry of Social Development (MSD) as part of a broader work programme evaluating the impact of Budget-19 funding on four specialist sexual violence services. The evaluation aims to inform how MSD designs, commissions, and promotes culturally responsive sexual violence services.

Budget-19 allocated $90.3 million for sexual violence services over four years, covering a spectrum of initiatives including the Sexual Harm Crisis Support Service (Crisis Service). The Crisis Service offers support to adults in crisis due to experiences of sexual violence. It supports victim/survivors and their whānau/supporters. The Crisis Service received $50.553 million which was dedicated for service delivery to increase access to victim/survivors of sexual violence and their whānau/supporters.

Key Evaluation Questions

KEQ 1: How has Budget-19 funding impacted the experiences of the Crisis Service for victim/survivors?

KEQ 2: What impact has Budget-19 funding had on Crisis Service frontline staff?

KEQ 3: How has Budget-19 funding impacted sector integration?

Method

The evaluation employed a Collaborative Realist Approach[1] to produce a performance story report detailing the impact of increased funding on the Crisis Service. Multiple lines of evidence were drawn on. These included: an inception hui with sector experts to ensure the evaluation plan was fit for purpose, a document review, interviews with frontline staff and victim/survivors, and an outcomes panel hui with staff and sector experts to ensure the findings reflected the experiences of those in the sector.

The data were analysed to understand the significant changes brought about by the increase in funding to the Crisis Service.

[1] A Collaborative Realist Approach draws on Realist Evaluation and Collaborative Outcomes Reporting to understand 'what works for whom, in what circumstances, and how?' It is a theory-driven approach that allows for mixed methods (qualitative only used in this evaluation), explores the role of context, and meaningfully involves stakeholders in the evaluation process.

Findings

How has Budget-19 funding impacted the experiences of the Crisis Service for victim/survivors?

Budget-19 funding has impacted the experiences of victim/survivors who accessed the Crisis Service in several key ways. These include:

- More Crisis Workers have been hired. This has contributed to improved accessibility to, and responsiveness of, the Crisis Service for victim/survivors. For example, service users and staff report a reduction in victim/survivors waiting for the service, and a wider range of types of support available to victim/survivors.
- Progress toward a more holistic, wraparound style of crisis response that is better able to meet the needs of a wider range of victim/survivors and, potentially, prevent future experiences of crisis. For example, Crisis Workers have greater capacity to proactively contact and support victim/survivors, to include whānau/supporters within the scope of support, and tailor the nature of support to the specific needs of victim/survivors.
- Reduced barriers to accessing services for victim/survivors through practical/material initiatives. For example, many Agencies have invested in improvements in the spaces and/or premises from which services are delivered, creating more inviting environments, and assisted victim/survivors to attend face-to-face support sessions by providing funding for transport.

What impact has Budget-19 funding had on Crisis Service frontline staff?

For Crisis Workers, Budget-19 funding has resulted in increased staffing capacity, improvements in staff capability, and improvements in staff wellbeing. This involves:

- Increased numbers of staff and staffing hours. This has resulted in reduced caseloads and an increased capacity to meet the needs of victim/survivors and whānau/supporters. There are indications of reduced staff turnover and more sustainable workplaces and teams in some Agencies. This improves workplace culture, uptake of wellbeing supports such as leave and supervision, and reduces staff burnout in response to this emotionally difficult work.
- Improvements in workplaces, such as more comfortable environments, fit-for-purpose technology and furnishings, and accessible and appropriate workspaces. These have had a positive effect on staff members' physical and mental wellbeing.
- Increased opportunities for professional development. In particular, staff have benefited from training and education related to working in culturally appropriate ways with different communities within Aotearoa New Zealand

including Māori, Pacific, migrant and Rainbow communities. Continuing education in trauma-informed and evidence-based modalities of working with people were also beneficial and appreciated.

Limitations to these improvements were noted. Increasing demand for services responding to sexual violence, the high number of unfunded children and young people needing access to services responding to sexual violence and unable to do so, and ongoing difficulties with recruiting and retaining staff in some areas are reducing the potential benefits of Budget-19 funding. There are also challenges in translating training into improved practice and in accessing appropriate premises.

How has Budget-19 funding impacted sector integration?

Budget-19 funding has had positive impacts on sector integration. These include:

- Agencies and Crisis Workers have built or strengthened relationships with external agencies, resulting in improved referral pathways to and from the Crisis Service and improved ability of Crisis Workers to support victim/survivor's access to social and public services. This contributes to a wraparound service for victims/survivors and greater stability in their lives.
- The evaluation had a specific focus on integration with Safe to Talk – Kōrero mai ka ora (Safe to Talk). Safe to Talk is a national 24/7 sexual violence helpline, which can provide victim/survivors at Crisis Services with after-hours support. Some frontline staff experienced a sense of relief from knowing that victim/survivors had 24/7 support available. However, Crisis Worker levels of confidence in Safe to Talk vary, and this is exacerbated by a lack of referrals from Safe to Talk. Crisis Workers believe it would benefit victim/survivors if a policy of direct referrals from Safe to Talk was adopted.

However, gaps in sector integration were identified. For instance, in some areas necessary social services (such as emergency housing) are not available and waiting times for counselling (including ACC-funded counselling) are lengthening, causing significant problems for victim/survivors and increasing pressures on the Crisis Service.

Conclusion

The evaluation highlights the impact of the Budget-19 funding for the Crisis Service on victim/survivors, frontline staff, and sector integration. Both victim/survivors and frontline staff benefited from an increase in capacity across the sector and the improvement of infrastructure. This enhanced the wellbeing of frontline staff and the experience of victim/survivors. The recommendations emphasise the importance of maintaining the positive impacts of Budget-19 funding by ensuring that improvements in staff capacity, service quality and infrastructure continue to manifest, and are sustained over the long-term. The report concludes with suggestions for future evaluations, emphasising participant recruitment methods and support considerations for studies involving crisis experiences. Overall, the impact of Budget-19 funding for the Crisis Service has been positive, though further benefits could be achieved with additional funding.

Table of contents

Impact of Budget 2019 Funding on Sexual Harm Crisis Support Service Users and Workforce i

Acknowledgements ii

Glossary of terms iii

Executive summary iv

Introduction iv

Key Evaluation Questions iv

Method iv

Findings v

How has Budget-19 funding impacted the experiences of the Crisis Service for victim/survivors? v

What impact has Budget-19 funding had on Crisis Service frontline staff? v

How has Budget-19 funding impacted sector integration? vi

Conclusion vi

1. Introduction 1

1.1 The MSD research and evaluation sexual violence work programme 2

1.2. Evaluation overview 2

1.3. The structure of this performance story report 3

2. The service context 3

2.1. Background information about the Crisis Service 4

Service delivery 4

Target group and their access to Crisis Services 4

Key activities and intended outcomes 4

Intended outcomes 6

2.2 Budget-19 funding impact - integrated Theory of Change diagram 6

3. Key evaluation questions 9

4. Evaluation methodology 9

4.1 Our approach 9

4.2 Evaluation activities 10

Development of evaluation tools and inception hui to finalise the evaluation plan . 10

Review and collation of existing documentation 11

Interviews with victim/survivors 11

Interviews with frontline staff 13
Analysis of interview data 14
Outcomes Panel Hui to verify findings 14
Significant Change Hui 15
Finalising this report 15
4.3 Evaluation limitations and challenges 15
Key lessons 17
Locating in-scope service users 17
Experience with recruiting via social media 18
Unintended impacts of participation 18
Participation as a capstone experience 18
5. Key Evaluation Results 19
KEQ 1: How has Budget-19 funding impacted the experiences of the Crisis Service for victim/survivors? 21
KEQ 2: What impact has Budget-19 funding had on Crisis Service frontline staff? 26
KEQ 3: How has Budget-19 funding impacted sector integration? 32
6. Findings and implications 36
KEQ 1: How has Budget-19 funding impacted the experiences of the Crisis Service for victim/survivors? 36
KEQ 2: What impact has Budget-19 funding had on Crisis Service frontline staff? 37
KEQ 3: How has Budget-19 funding impacted sector integration? 39
7. Recommendations 40
References 42
Appendix A - Previous evaluation activities 43
Appendix B - Refined Theory of Change 45
Appendix C – Key evaluation stakeholders, assumptions and external influences 46
Appendix D – Ethics 51
Appendix E– Interview Guides 66

1. Introduction

This report is for a University of Otago led evaluation of the impact of Budget 2019 (Budget-19) funding on the Sexual Harm Crisis Support Service (Crisis Service) and the integration of the Crisis Service with the wider social services sector and Safe to Talk for:

- Service users, including victim/survivors and whānau/supporters (including family, partners and friends).
- Crisis Workers.
- Service integration.

The Budget-19 funding aimed to achieve:

- Increased availability and access to Agencies for victim/survivors and their whānau/supporters.
- Increased skill of employees and an increased number of people in the workforce.
- Increased access to long-term support.
- Increased ability for agencies to provide support to minimise harm in a crisis.

The evaluation was commissioned by the Ministry of Social Development (MSD) who oversaw the allocation of Budget-19 funding for the Crisis Service.

This evaluation contributes to a broader work programme evaluating the impact of Budget-19 on four specialist sexual violence services, including: The Sexual Harm Crisis Support Service (Crisis Service), Court Support Service, Peer Support for Male Survivors of Sexual Abuse (MSSA) Service and Non-Mandated Harmful Sexual Behaviour (NM-HSB) Service. MSD will synthesise evaluation findings on the impact of Budget-19 funding across these four services. The findings will inform how MSD designs, commissions and promotes culturally responsive sexual violence services. It is expected that the findings will support decisions around future funding for sexual violence funding, promote good practice, and inform wider efforts to support the sector.

Alongside MSD, partners and stakeholders of Crisis Service Agencies, who also have an interest in Budget-19 funding outcomes, include: tāngata whenua and Te Tiriti o Waitangi partnerships; victim/survivors of sexual violence; sexual violence agencies; the National Sexual Violence Helpline (Safe to Talk); Te Puna Aonui; and National Network Ending Sexual Violence Together (TOAH-NNEST). More information on these key stakeholders can be found in Appendix C.

1.1 The MSD research and evaluation sexual violence work programme

Budget-19 announced $90.3 million over four years for MSD to invest in sexual violence services. A range of sexual violence services and initiatives received funding from Budget-19, including the Crisis Service, the introduction of the Court Support Service, MSSA Service, NM-HSB Service, and the development of a Concerning Sexual Ideation (CSI) Service.

A proportion ($1.39 million) of the Budget-19 funding was allocated for a research and evaluation work programme which aims to:

- Evaluate the impact of the Budget-19 investment in building the capability of specialist sexual violence services and in creating a more integrated, efficient, and responsive system for all those affected by sexual violence.
- Increase MSD and stakeholder understanding of how best to support people affected by sexual violence, focusing on the needs of select priority groups.

The Budget-19 sexual violence evaluation work programme was developed by MSD and comprises a range of activities, including:

1. Development of service-specific logic models.
2. A Baseline Survey to understand plans and expectations for the Budget-19 funding (Ministry of Social Development, 2021a).
3. The co-design of 'better' service measures.
4. In-depth service-specific evaluations to explore key areas of impact in detail.
5. Follow-up focus groups with managers to determine whether plans and expectations were met, and if not, what the barriers and additional support needs are.

This evaluation is an aspect of the fourth step in the outline above and will focus on the impact of Budget-19 funding on the Crisis Service Agencies, specifically the impacts on frontline staff, victim/survivors and whānau/supporters who used the Crisis Service, and service integration.

1.2. Evaluation overview

The purpose of this report is to describe the impact of Budget-19 funding on victim/survivors who use the Crisis Service, their whānau/supporters, frontline staff, and service integration.

Our evaluation design aligns with the Collaborative Realist approach underpinning the Budget-19 evaluation work programme (see Appendix A). This approach draws on a Collaborative Outcome Reporting process (Dart and Roberts, 2014) and a Realist Evaluation Approach (Pawson and Tilley, 1997). It is a theory-driven

approach that allows for mixed methods,[2] explores the role of context, and meaningfully involves stakeholders in the evaluation process. We have drawn on multiple lines and levels of evidence to show how Budget-19 funding has created impact and to better understand 'what works for whom, in what circumstances, and how?'. We have used participatory processes to generate and develop recommendations. We follow the techniques of a Performance Story report (Dart and Roberts, 2014) to highlight key impacts and changes that have resulted from the increased funding to the Crisis Service.

1.3. The structure of this performance story report

This report identifies key lessons, achievements, and recommendations generated from evaluation activities. Drawing from examples of performance story reporting (e.g. Dart & Davies, 2003; Roughley, 2009), this performance story report has the following structure:

a. **Service context**. We provide background information about the Crisis service and describe and present the Theory of Change that was used to guide the evaluation analysis.

b. **Key evaluation questions**. We describe the key evaluation questions to guide our evaluation of the impact of Budget-19 funding, and the intended use of evaluation findings by MSD.

c. **Evaluation methodology**. We describe the evaluation processes and outline evaluation limitations.

d. **Key evaluation findings**. We present key findings under key evaluation questions to demonstrate the impact of Budget-19 funding and implications.

e. **Recommendations**. We provide suggestions for how MSD might apply findings to support Crisis Service Agencies.

2. The service context

This section starts by providing background information about the Crisis Service, including its target group and general service delivery aspects to provide context to the evaluation. We include a Theory of Change diagram to demonstrate how Budget-19 funding has influenced what Agencies do and the expected outcomes for victim/survivors and their whānau/supporters, frontline staff, and service integration. This Theory of Change was used to guide the evaluation (see section 2.2) and was revised to reflect the findings of the evaluation and the revised diagram is attached as Appendix B.

[2] This evaluation was based only on qualitative methods.

2.1. Background information about the Crisis Service

This section provides context to the evaluation by describing the general service delivery aspects and intended outcomes of the Crisis Service. This information has come from 'Sexual Harm Crisis Support Service Guidelines F21' (Ministry of Social Development, 2021b). Section 2.2 presents a Theory of Change diagram that shows what the Budget-19 funding has been used for in Agencies and the associated outcomes for frontline staff, victim/survivors and whānau/supporters who have accessed services, as well as sector integration. The Theory of Change draws from wider MSD documentation and up-to-date thinking about what service activities Budget-19 investment has enabled and/or strengthened, as well as any associated outcomes. In particular, the Theory of Change integrates information from the 'Baseline Survey: Impact of Budget-19 on Sexual Violence Services and the Sector' (Ministry of Social Development, 2021a), and the 'Sexual Violence Crisis Support Service Logic Model' developed by MSD in collaboration with Crisis Service Agencies.

Service delivery

Target group and their access to Crisis Services

Crisis Service Agencies deliver services to adult (aged 18 years and over) victim/survivors and their whānau/supporters.[3]

People can self-refer or be referred to Crisis Service Agencies. A referral may come from whānau/supporters, Police, community organisations, health and forensic services, or government agencies. Crisis Service Agencies ensure referral pathways and ethical implications (e.g., consent processes and confidentiality) are clear to victim/survivors to reduce barriers to accessing services, including Māori and Pacific Agencies. Safe to Talk, a national 24/7 sexual violence helpline, also refers people to Crisis Service Agencies by providing contact details for local Agencies including options for referral to a local Kaupapa Māori sexual violence service where indicated.

The nature of sexual violence crisis support does not fit within definitive timeframes and/or a 'programmed' delivery. A crisis is not defined by an actual event but by a person's response to that event. A response can happen immediately after the event or be triggered multiple times beyond the event. Agencies will ensure victim/survivors are supported for as long as they are experiencing a state of crisis.

Key activities and intended outcomes

Crisis Service Agencies provide specialist support services required by a victim/survivor of sexual violence and whānau/supporters, during or following a

[3] Oranga Tamariki contracts agencies to support children and young people affected by sexual violence. Crisis Service Agencies have internal capability and/or strong interagency links to other services that are able to work with children.

crisis. These services may overlap, alternate and/or happen concurrently. The supports include:

- **Psycho-social crisis support -** services required by a victim/survivor or whānau/supporter during or following a crisis. The support uses a trauma-informed approach, are immediately available and accessible, use specialist staff, have no cost to the victim/survivor, and are linked into local communities so appropriate referrals can be made to and from the Crisis Service. Crisis Services work to protect, promote, and enhance the wellbeing of victim/survivors and whānau/supporters, by making sure their psycho-social needs are heard and met.
- **Advocacy and support (including callouts)** - a specialist Crisis Worker is available (where possible, 24 hours a day, seven days a week) to support victim/survivors of sexual violence and their whānau/supporters through any treatment or other processes immediately following a crisis event. This may include support with: (a.) Police interviews; (b.) Sexual Abuse Assessment and Treatment Services (SAATS); (c.) different types of medical examinations (when requested). This support may include counselling, advocacy and providing information about legal and medical processes.
- **Emergency face-to-face sessions (including crisis counselling)**[4] - is a service for victim/survivors of sexual violence and their whānau/supporters, where a specialist Crisis Worker provides: (a.) crisis counselling during and/or immediately following a crisis; (b.) support sessions to provide victim/survivors with information and coping mechanisms (this may involve ongoing therapy); (c.) referral to an agency that delivers services under the Integrated Services for Sensitive Claims contract with ACC (Accident Compensation Corporation) and/or referral to other services that are best able to meet a victim/survivor's need (e.g., cultural, mental health, self-harm, alcohol and/or drug use support);[5] (d.) assistance with informed decision making; and/or (e.) support to access information, and other therapeutic resources.
- **Crisis social work support** - is a service for victim/survivors and their whānau/supporters where a specialist Crisis Worker can provide social work support during the crisis period. Many victim/survivors and their whānau/supporters need practical assistance during that crisis. This includes assistance with accessing support through Work and Income, support securing accommodation, childcare, food, clothing, consultations and liaisons regarding child safety and crisis support work.[6]

[4] These services are provided during business hours, with arrangements able to be made outside of these hours if required.
[5] This may include transition to other services.
[6] The safety of adults and their children is paramount and the above issues often require attention at the point of crisis.

Intended outcomes

Intended outcomes for the Crisis Service include:

- National coverage and accessible services.
- More immediate disclosures and supportive responses for victim/survivors and their whānau/supporters.
- Physical, emotional and psychological safety for victim/survivors of sexual violence.
- Increased self-esteem, self-efficacy and restoration of mana for victim/survivors and their whānau/supporters.

In turn, these outcomes will contribute to the longer-term outcomes of:

- Early disclosures and more immediate positive responses to victim/survivors of sexual violence.
- Reduced long-term impacts, as well as greater resiliency and productivity for victim/survivors.
- Enhanced community awareness and pro-social responses to sexual violence.

With the ultimate goal of:

- Safe, attentive and responsive communities of care.
- Healthier individuals, families, whānau and support people, resulting in more vibrant communities.
- A decrease in sexual violence within communities and an increase in victim/survivor wellbeing.
- A reduction in the costs of sexual violence impacts on society.

2.2 Budget-19 funding impact - integrated Theory of Change diagram

To focus the evaluation on the impact of Budget-19 funding on the Crisis Service we developed a Theory of Change and associated assumptions and external influences (see Appendix C). They were drafted consequent to a review of documents created by MSD in its contracting and evaluation activities with Crisis Service Agencies (e.g., service-specific logic models). Our Advisory Group[7] of sexual violence sector and cultural experts, as well as sexual violence service Agencies, provided feedback on the draft Theory of Change.

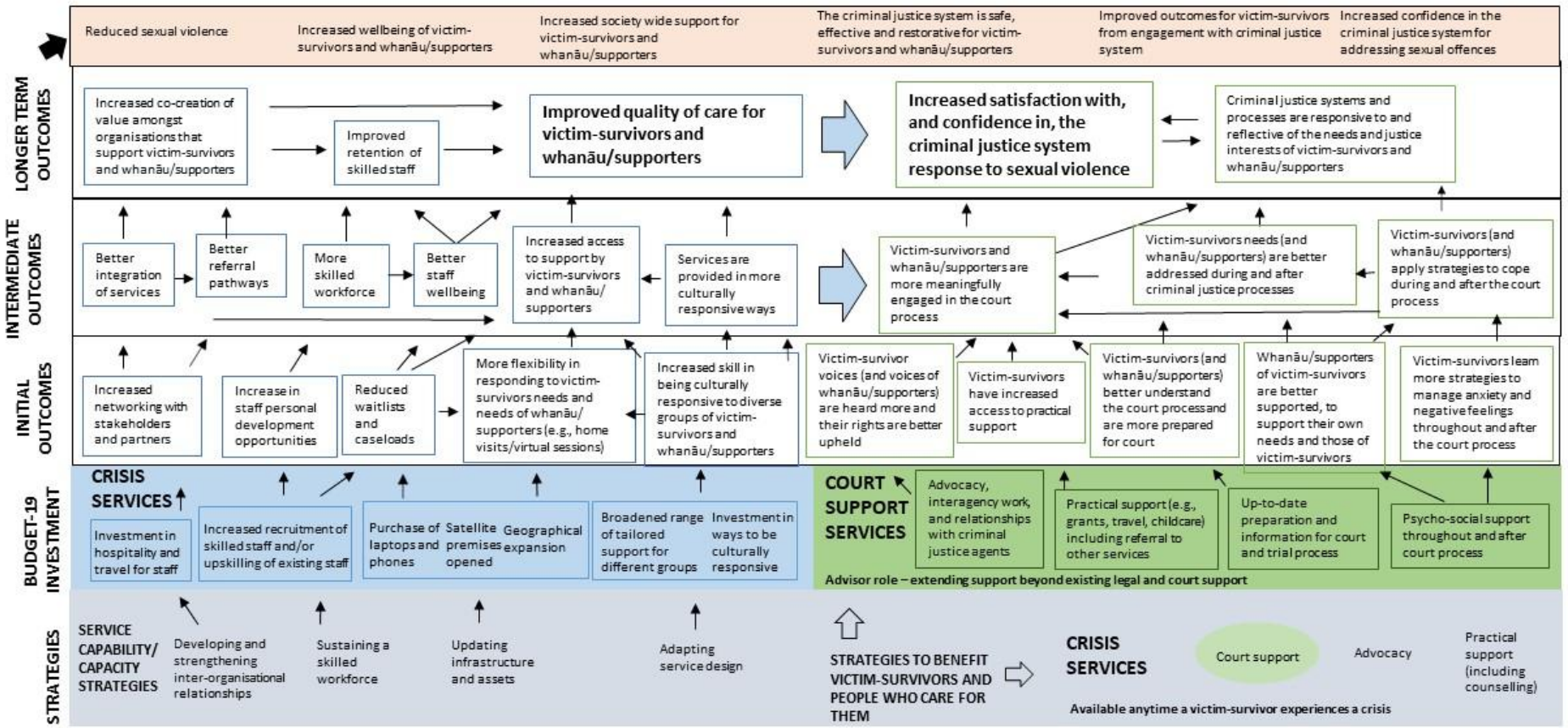
[7] The Advisory group was made up of Dr. Annabel Ahiriri-Driscoll (University of Canterbury), Professor Anita Gibbs (University of Otago), Akarei Marasala-Thomson, Kiritapu Murray, Professor Gareth Treharne (University of Otago) and Professor Patrick Vakaoti (University of Otago).

Due to the interconnected nature of the Court Support Service and the Crisis Service[8], we developed an integrated model that situates the Crisis Service and the Court Support Service alongside each other and demonstrates their shared connection to longer term outcomes. The integrated Theory of Change was revisited and revised after the evaluation of the Crisis Service and the Court Support Service to capture unintended outcomes and other learnings not represented in the initial Theory of Change diagram (see the revised Theory of Change diagram in Appendix B).

The Crisis Service and Court Support Service Theory of Change below outlines how the activities of the Crisis Service are connected to intended outcomes. The bottom two rows reflect the activities and approach of the Crisis Service. Arrows indicate how those activities are intended to create the desired change.

[8] Court Support Services must be connected to an existing Crisis Service. However, not all Crisis Service Agencies currently have a MSD funded Court Support Service worker.

THEORY OF CHANGE FOR CRISIS SERVICES AND COURT SERVICES
IMPACT OF BUDGET - 19



3. Key evaluation questions

The evaluation purpose is to determine the impact of Budget-19 funding for Crisis Services on frontline staff, victim/survivors and their whānau/supporters who access the Crisis Service, and service integration. This section sets out the Key Evaluation Questions (KEQs)[9] for the evaluation and how MSD intended evaluation findings to be used.

The Crisis Service evaluation aims to address the following key evaluation questions:

- KEQ 1: How has Budget-19 funding impacted the experiences of the Crisis Service for victim/survivors?
- KEQ 2: What impact has Budget-19 funding had on Crisis Service frontline staff?
- KEQ 3: How has Budget-19 funding impacted sector integration?

4. Evaluation methodology

In this section, we describe the process used in evaluating the impact of Budget-19 on the Crisis Service and associated outcomes for victim/survivors and their whānau/supporters, frontline staff, and service integration. We also outline the evaluation limitations.

4.1 Our approach

Our evaluation design aligns with the Collaborative Realist approach underpinning the Budget-19 evaluation work programme. We used qualitative methods to answer evaluation questions about the impact of Budget-19 on the Crisis Service. It is important to note here that the use of the term 'impact' differs from the more common use of the term in quantitative approaches to evaluation which measure impact by identifying cause and effect through longitudinal methods, often using a control group. While quantitative methods are useful for determining broad changes across a population, what is often missing are the more detailed, meaningful impacts on the lives of those involved. The methods used within this report understand 'impact' to reflect the meaningful changes that occurred in the lives of victim/survivors, whānau/supporters, and frontline staff as a result of this funding. Through rich and deep engagement with those involved in the evaluation, it becomes possible to see how lives were impacted through the additional resourcing.

[9] The KEQs were collaboratively developed by MSD and the University of Otago Evaluation team. Feedback from stakeholders was invited as an aspect of the Inception hui (see page 9).

4.2 Evaluation activities

This section sets out the evaluation activities we completed in assessing and reporting on the impact of Budget-19 funding on the Crisis Service. We received approval to conduct this study from the University of Otago Human Ethics Committee reference number 23/002.

Development of evaluation tools and inception hui to finalise the evaluation plan

On 6 March 2023, we facilitated a hui with key sexual harm service agencies to solicit feedback on our evaluation plan to ensure it was 'fit for purpose'.[10] This included exploring the integrated Theory of Change, as well as our evaluation focus and approach. Specifically, the hui provided an opportunity for us to clarify and review, with key stakeholders, details of the evaluation such as:

a. The evaluation purpose and intended activities.
b. How evaluation findings will be used and disseminated.
c. The key evaluation questions.
d. The Theory of Change underpinning the impact of Budget-19 funding, including the associated assumptions and external challenge.
e. Roles and responsibilities of our evaluation team.
f. Ethical and logistical considerations for engaging with evaluation participants.

At the hui, stakeholders raised concerns about some aspects of the evaluation design, including:

a. The absence of Crisis Service Agency management perspectives in this service-specific evaluation.
b. The lack of technology and resources necessary to enable the participation of disabled people.
c. The ability of service users and frontline staff to identify the impact of Budget-19 funding on service provision (due to the inability to compare their experiences to pre-funding service provision).

In response to these concerns, the evaluation team and MSD agreed that:

a. MSD will gather the perspective of Crisis Service Agency managers after this evaluation is completed, utilising its findings and recommendations in a separate report that looks at the overall impact of Budget-19 funding on the wider sexual violence sector.

[10] Representatives from MSD, TOAH-NNEST, Crisis Service and the Court Support Service Agencies were present. Representatives from the 17 Court Support Services, including the three Kaupapa Māori services and from the 29 Crisis Services were invited to attend. 16 people from these services attended the hui.

b. Both MSD and the evaluation team would support people to participate within the current design, as additional resourcing was not available to implement a new, fully accessible design.[11]

c. If possible, MSD would use its existing reporting data from services from 2017-2023 to make a comparative quantitative assessment of the impact at the completion of this evaluation.

The Theory of Change at the centre of this evaluation, its revision, and refinement post data collection is also central to assessing impact.

This phase of the evaluation also involved drafting fieldwork documents such as recruitment materials, interview guides, participant information sheets and consent forms. These were included in the University of Otago Human Ethics Committee application and approval process (please see Appendix D for ethics documentation and Appendix E for interview guides).

Review and collation of existing documentation

We reviewed and collated existing documentation about the Crisis Service as a source of evidence against the evaluation questions. For example, we explored information generated from MSD's Budget-19 sexual violence evaluation work programme, such as service-specific logic models to understand plans and expectations for the Budget-19 funding. MSD's Baseline Survey (Ministry of Social Development, 2021a) of sexual violence service providers was reviewed to understand what the expectations of the funding were and later used to assist analysis of the designs for the evaluation. Information from the document review and interviews (described next) were synthesised against evaluation questions for the Outcomes Panel Hui (see page 13).

Interviews with victim/survivors

We interviewed four victim/survivors who had used the Crisis Service. All victim/survivors were female and aged between 25–35 years old. All were Pākehā/New Zealand European, half were rainbow identifying and half were living with a disability.[12] We tried to recruit whānau/supporters to take part in this evaluation, however we were unsuccessful in these attempts. We used several avenues to support recruitment of a diverse range of victim/survivors and whānau/supporters for the evaluation:

- **Project website**. The website aimed to inform people about the evaluation purpose, participant activities, and the use of the evaluation findings. The website also introduced the evaluation team and the project to help visitors to the website feel more comfortable with participating.

[11] The evaluation team asked participants if there was anything that could help them in the interview, e.g., closed captions, sign interpreter, or regular breaks were a few of the options available.

[12] To keep the anonymity for the participants we are only reporting general demographics.

- **Short advertisements for services to share with victim/survivors and whānau/supporters.** Services were able to choose to use advertisements as posters, on social media or to share them directly with victim/survivors as they saw appropriate. The advertisements provided information about the evaluation and what participation would involve. It directed people to the website for further information and provided contact information.[13]
- **Interviewer matching.** We recruited interviewers from diverse communities with the intention that participants could be matched by cultural or identity characteristic where possible (e.g., we recruited interviewers who are a part of Rainbow, migrant, Māori, and Pasifika communities).
- **Interviewer training.** All of our interviewers had experience either in the sexual violence or family violence area, or in interviewing around sensitive topics. They also received up-to-date training in trauma-informed interviewing and dealing with disclosures of abuse and harm.
- **Ensuring diversity in interview participation.** To ensure diversity within the sample of interviewees so a range of experiences could surface, potential interviewees were asked inclusion criteria (e.g., about culture and identity characteristics).
- **Making fieldwork instruments audience appropriate.** Interview guides were drafted by evaluation team members with experience in design, delivery, and evaluation of specialist sexual violence services. Our Advisory Group, reflective of cultural and identity diversity in our project, provided peer reviews and representation of diverse perspectives to make sure instruments were audience appropriate.

Once we were contacted by victim/survivors who wanted to participate in an interview, we:

- **Emailed victim/survivors a message about the evaluation.** We attached a consent form and participant information sheet about the purpose of the evaluation and use of evaluation findings. We also emailed a list of psycho-social support resources to interviewees. The contact details of support organisations were also available on our project website.
- **Followed up with an information, pre-screening and interview booking phone call**. Pre-screening ensured that the people we interviewed had used a service covered by MSD funding and were no longer using the Crisis Service. We also asked if there was anything we could do to make them more comfortable at the interview (e.g., pronoun use, if they wanted a support person or the use of karakia). We also checked if they had a preference

[13] These advertisements were shared with sexual harm service agencies that were in scope for the evaluation as well as any sexual harm agencies or networks that may have adult sexual violence victim/survivor members (but are not specifically in scope), and community organisations who work with priority groups with proportionally high rates of sexual victimisation.

regarding an interviewer, any accessibility needs and if a Zoom interview would work for them.[14]

- **Conducted interviews via Zoom**. The use of Zoom allowed greater flexibility with interviewer matching, timing for interviewees, provided a perceived distance between interviewer/interviewee which could have been useful when discussing sensitive subjects, and was within resource constraints. Zoom's key limitation is that it is not as culturally responsive as kanohi ki te kanohi (face-to-face). Interviews were conducted in a semi-structured style following an interview guide developed specifically for victim/survivors who had received a Crisis Service. The guide focused on five key domains, each containing a series of specific questions and a number of interviewer 'prompts' to assist specificity or recollection where needed. The domains of questioning included the topics: accessing the service; the nature of the service received, the cultural responsiveness of the service; processes of referral to other services; and perceived benefits or impacts of the service received. Interviews took between 40 and 80 minutes. The interviews were audio recorded, transcribed, and de-identified prior to analysis. Participants were able to access transcripts of their interviews on request and to check anonymised quotes before use.
- **Contacted participants a couple of days after the interview**. The purpose of the 'check-in' was to check if participants needed any additional support, and to ensure the participant knew how to connect with services if required.

Following interviews, participants were sent a $30 grocery voucher. Agencies that supported recruitment of victim/survivors were provided with $150 to offset their costs supporting recruitment efforts.

Interviews with frontline staff

We completed semi-structured interviews with 10 frontline staff from the Crisis Service Agencies. Some of the Crisis Workers held dual roles, working in both the Court Support Service and in frontline Crisis Service. All the frontline staff were female and aged between 30 – 60 years. The frontline Workers came from various ethnicities, including Pākehā/New Zealand European, Māori, Pasifika and European. The average time in the Crisis Worker role was 3 years.

Recruitment of frontline staff. Frontline staff recruitment was supported by MSD and TOAH-NNEST. We provided an email script that Crisis Service Agencies could share with their frontline staff. The script provided information about the evaluation and what was involved in participation. It directed people to the website for further information and provided contact information. We also had face-to-face meetings with, and made phone calls, to Agencies to fill any information gaps.

Interviews. Once we were contacted by interested people, we emailed willing participants a consent form and participant information sheet, and followed up with a phone call to book an interview time. The interviews were conducted via

[14] All participants indicated comfort with, and availability of, Zoom for their interview.

Zoom. Interviews were conducted in a semi-structured style following an interview guide developed specifically for Crisis Workers.

The interview guide focused on the following domains of questioning: interviewee role and history of work in Crisis Service provision; the nature and purpose of activities undertaken in the provision of service; issues related to capacity and capability of frontline staff; perspectives on, and experiences with, sector integration and referrals; perceived benefits and impacts of the service. Interviews were audio recorded, transcribed, and de-identified prior to analysis.

The interviews lasted between 45 and 90 minutes. Participants were given the option of checking quotes for identifying information.

Analysis of interview data

Thematic analysis was used to analyse the interview data. It is a well-developed analytic method used across many disciplines. It was formalised by Braun & Clarke in 2006 and developed further by Clarke, Braun, and Hayfield in 2015 and again by Braun and Clarke in 2022. Thematic analysis is a method for identifying, analysing, and reporting patterns within qualitative data. The method takes a phased step-by-step process of identifying patterns in talk through systematic coding, collating codes into themes, reviewing themes against the data set and evaluation questions, the identification of significant stories and illustrative extracts, and relating the analysis back to the evaluation questions and existing MSD documentation (e.g., service-specific logic models, Baseline Survey and co-design of 'better' service measures).

Outcomes Panel Hui to verify findings

An Outcomes Panel Hui was held online with people with expertise and experience in sexual violence service provision. The purpose was to verify preliminary evaluation findings and to identify the most significant stories of change and their contributing factors. Given the interconnected nature of the Crisis Service and Court Support Service, a single panel was convened. This two-hour hui was attended by two people in management positions at sexual harm service agencies and three frontline staff (one was a Court Support Worker, one was a Crisis Worker and one held dual roles). Recruitment for the Outcomes Panel Hui was supported through MSD, TOAH-NNEST and via direct emails to service agencies. Hui participants were given information about the purpose of the hui (and wider evaluation), the use of evaluation findings and were made aware that participation in the hui indicated consent to taking part.

A Thought Space Wānanga (Smith et al., 2019) approach was used during the hui to engage the group in giving feedback on preliminary findings generated from the interviews and document review. Thought Space Wānanga is a process based on Māori tikanga to facilitate "active and collective thinking and problem-solving" (Smith et al., 2019, p.5). The process supported participants to:

- Give feedback on the preliminary findings of the evaluation.

- Determine the extent of confidence they had in Budget-19 funding generating identified outcomes (both intended and unintended), for whom, and under what circumstances.
- Identify the most significant outcomes for frontline staff and victim/survivors.

To support focused feedback and the free flow of discourse, three breakout rooms were used for in-depth discussion. There was one breakout room for Court Support staff, one for Crisis Workers and one for service Agency managers. An evaluation team member facilitated each breakout room conversation and took notes.

Significant Change Hui

The initial evaluation proposal specified that we would conduct a Significant Change Hui[15] to discuss the most important change with victim/survivors and whānau/supporters, to verify evaluation findings generated from victim/survivor and whānau/supporter interviews. Due to the recruitment and engagement issues discussed below (see section 4.3), we did not undertake a Significant Change Hui.

Finalising this report

The MSD project team was provided with a draft of this report for review and feedback. An external expert peer reviewer arranged by the evaluation team also reviewed the quality of the report, including analysis and interpretations of findings. Feedback from these sources was then integrated into a final draft report and resubmitted to the MSD project team for further feedback. A final version of the report was completed following this final round of feedback.

4.3 Evaluation limitations and challenges

Achieving diversity. An evaluation purpose was to learn about how the MSD funded Crisis Service Agencies meet the needs of a diverse range of service users. Our evaluation approach included a range of initiatives aimed at achieving participation from a diverse range of service users. However, the following limitations should be noted:

- There were small numbers of participants from each priority group for both the frontline staff and victim/survivors (Māori, Pasifika, disabled, Rainbow). Due to these small numbers, this report does not make claims that the experiences of these participants are representative of the group of people to which they belong. Rather we have tried to draw out the structural and service implications of their experiences.

[15] The purpose of a Significant Change hui is to enable victim/survivors and any whānau/supporters to review and verify validity of findings in relation to the experience of victim/survivor and whānau/supporters and select the most significant change for victim/survivors and whānau/supporters.

- Interviews were conducted by Zoom. This may have affected participation from victim/survivors or whānau/supporters who do not have internet access, a computer and/or privacy to participate, and from members of communities who prefer to communicate about sensitive issues in a face-to-face context.
- Priority communities may have chosen not to participate in the project due to the perception that, being from a small community, their confidentiality might be compromised.

Recruitment. We experienced significant challenges to recruitment and engagement of victim/survivors and whānau/supporters. In this section, we outline the nature of those challenges.

We attempted a range of recruitment strategies to find and engage with victim/survivors and whānau/supporters. These included:

- Working closely with TOAH-NNEST, a peak body network of sexual harm service agencies to engage Tauiwi services. They supported the recruitment by sending out communication to all in-scope Agencies on several occasions encouraging them to participate. Many of the Tauiwi organisations participated, but none of the three Kaupapa Māori services participated.
- Telephoning and/or visiting all Crisis Service Agencies funded by MSD. We estimate that each Agency heard about the project at least 10 times.
- Mailing and emailing information posters for Agencies to put up in their waiting areas.
- Regular recruitment posts on Facebook and Instagram aimed at victim/survivors and whānau/supporters. These posts were shared by Agencies on their social media feeds.
- Contacting all Aotearoa New Zealand university student unions and Thursdays in Black[16] offices.
- Contacting and engaging with related organisations, including Rainbow Violence Prevention Network[17], Hohou Te Rongo Kahukura[18], Shakti, student survivor groups and Dear Em.[19] Some organisations agreed to share our social media posts and promote the research.
- Seeking to engage online survivor support groups (e.g., Facebook groups). We were not able to locate any victim/survivor groups specific to

[16] Thursdays in Black in an organisation run by and for tertiary students to prevent and respond to sexual violence on campus around Aotearoa New Zealand.
[17] A network of Rainbow organisations in Aotearoa New Zealand who are committed to Rainbow violence prevention. https://rvpn.nz/
[18] Hohou Te Rongo Kahukura is an organisation dedicated to violence prevention and education in Aotearoa New Zealand. https://www.kahukura.co.nz/
[19] Dear Em is run by HELP Auckland to support girls and young women to have a voice, recognise sexual violence and support each other.

Aotearoa New Zealand on Facebook. It is likely that many of these groups are private.

- Contacting all ACC Sensitive Claims[20] providers (about 700) by email including information about the evaluation and inviting them to an online information session. A recording of the session was made available on our website. Sensitive Claims providers were contacted three times – two for reminders of the information session and a third with a link to the recording. Key providers were also telephoned. In addition, ACC promoted the evaluation in their regular email newsletter to Sensitive Claims providers.
- Inviting peak body social service NGOs to the online information session and to visit the website as they may have victim/survivor or whānau/supporters who fit the scope of the project.

Ultimately, all victim/survivor participants were recruited via a counsellor or sexual violence service agency. No whānau/supporters took part in the evaluation. It is difficult to be certain why no whānau/supporters wished to participate, but most likely this related to recruitment methods and the challenges discussed in the subsection below. For example, to try to recruit victim/survivors from the general population, we focused on places where they might engage. However, whanau/supporters are less likely to engage with these places.

Key lessons

Locating in-scope service users

We were attempting to locate a small pool of service users across a highly dispersed population (people in Aotearoa New Zealand). This is also a sensitive and hidden population. Both factors make targeting recruitment materials at potential participants difficult.

Thus, we began with recruiting MSD-funded Crisis Service Agencies. However, this was difficult because we needed to interview people who were not currently in crisis. Due to the nature of the services being provided, people who access the Crisis Service generally do not continue to engage with those services beyond their time in service. Our social media strategy was aimed at promoting the evaluation to people not currently using the Crisis Service but receiving social media posts from an in-scope Agency, or a related service organisation. However, this proved to have a limited effect on participation rates and caused difficulty with managing responses (see further below).

Many of the in-scope service Agencies have a policy that they will not contact previous victim/survivors once they have left the service due to concerns about destabilising recovery progress. For this reason, we approached ACC Sensitive Claims providers in the hope that some of their service users would have accessed an MSD-funded Crisis Service Agency and would be less likely to be experiencing

[20] ACC Sensitive Claims funds support and treatment for survivors of sexual assault.

crisis. However, we found that counselling providers have similar concerns about the potential for destabilising service users and this strategy also had a limited impact on participation rates.

The risk of destabilising victim/survivors was also an ethical consideration for the evaluation team. We were aware that it takes courage for a victim/survivor to initiate contact with unknown evaluators and volunteer to share their experiences. In all our recruitment communications we were careful to describe the scope of the evaluation as focused on experiences of using a service rather than the experience of victimisation to counteract this concern. However, it is possible that this led to a lack of clarity about eligibility and the focus of the evaluation.

These factors – the risk of destabilising victim/survivors and communicating eligibility criteria – also limited our comfort with general population advertising. We considered mediums such as social networks, online trading sites and GP (General Practitioner) offices, but the risk that that would attract people who had been to other types of crisis services or were otherwise out of scope balanced with the likelihood of success, meant that we did not pursue these options. Ethically we wanted to ensure that there was a low risk of needing to turn away people because they did not meet the eligibility criteria.

Experience with recruiting via social media

Social media was not effective for recruiting victim/survivors. We were generally not successful in connecting with online victim/survivor groups, we suspect because most are private. Our social media posts did however result in hundreds of spam emails and 'false' participants. Our pre-screening procedures were helpful to exclude almost all, although this was very time-consuming. In the end, taking the word 'voucher' off all our social media posts stopped the spam.

Unintended impacts of participation

Several Crisis Service Agencies expressed concern about the possibility that participating in the evaluation could cause unintended stress or emotional destabilisation for participants. Whilst the Crisis Service Agencies commended us on our design and recognised that we designed the evaluation to limit this risk as much as possible, the risk of destabilisation remains. They also expressed concern about the flow-on effect of increased demand on Crisis and counselling services already in high demand. We offered Agencies $150 to support the recruitment of victim/survivors, however this did not appear to respond to this concern.

Participation as a capstone experience

Our evaluation plan included a Significant Change Hui with victim/survivors and whānau/supporters to report on preliminary findings and receive feedback. In the end we did not do this, in part because recruitment was difficult, but also because many of those victim/survivors who did participate indicated that their interview participation was to be a final, 'capstone', experience in their engagement with sexual violence related services and processes. Consequently, we felt it would not be ethical to contact them to request further participation or engagement.

In the recommendations section we make suggestions about ways to gather information about the experiences of victim/survivors accessing helping services that minimise post-service contact with them.

5. Key Evaluation Results

In this section, we present the key results for each key evaluation question (KEQ) in order to demonstrate the impact of Budget-19 funding in the Crisis Service on victim/survivors accessing the Crisis Service, frontline staff, and service integration. Each KEQ is presented in the format of a significant change story, followed by results presented in a table format that connects the results to the refined Theory of Change (see Appendix B). This results section is followed by a Findings and Implications section and then the Recommendations section. Together they tell the story of the impact of Budget-19 funding on the Crisis Service.

Consistent with a Performance Story Report (Dart and Roberts, 2014), the significant change story highlights the most significant changes that resulted from the addition of this new service. It does so in a narrative style and at a high level in order to highlight the key impacts of the funding from which results and findings flow.

The tables beneath the significant change story detail the more specific changes and impacts of Budget-19 funding in the Crisis Service. They are the result of the thematic analysis conducted on the data. The fields of the table are structured so that:

- The 'Outcomes' column describes the high-level changes that have resulted from Budget-19 funding in the Crisis Service. These outcomes most directly correlate to the significant change story.
- The 'Results statement' column provides more detail about the main ideas that participants expressed about this outcome. These statements correlate to the themes that were developed during thematic analysis of the data. Some of the results are limitations to achieving the outcome.
- The 'Sources of evidence for results statement' column lists which sources of data provided evidence of the results statement. Generally, results statements were substantiated from multiple sources including victim/survivors, frontline Workers, and background documentation.
- The final column 'Examples of evidence' presents selected information to illustrate how we arrived at the results statement. Most often these are quotes from participants. In some cases, they are a broader description of the information that was not possible to quote, either because it came from the Outcomes Panel Hui or because participants asked for us not to use direct quotes to ensure confidentiality. The 'Examples of evidence' column does not provide examples from each of the sources identified in the sources of evidence column, rather it is a selection of examples that best illustrate the results statement when read together.

Note that results statements and examples of evidence contain different, sometimes contradictory views expressed by different participants in order to detail the variation in participant responses relevant to the outcomes and results.

KEQ 1: How has Budget-19 funding impacted the experiences of the Crisis Service for victim/survivors?

Significant Change Story

Prior to Budget-19, many Crisis Service Agencies reported insufficient numbers of staff to meet service specifications and/or demand for service. This reduced access to service for victim/survivors, resulting in some victim/survivors not receiving a psycho-social crisis response or engaging with less appropriate service providers. For the same reason, the nature and scope of services was constrained; in some cases, reflecting a single intervention service rather than one responding to user-defined crisis. This could result in unmet needs for victim/survivors and their whānau/supporters, despite having sought help. Funding constraints also meant that many Agencies were housed in unappealing or inappropriate spaces. This limited their ability to provide accessible, culturally appropriate and empathic support.

The most significant change afforded by Budget-19 funding is increased workforce capacity. This has resulted in a more accessible and responsive Crisis Service for victim/survivors and their whānau/supporters. Crisis Workers are more reliably able to respond to requests for immediate or urgent service and meet the crisis response needs of a larger number of victim/survivors. Increased capacity has also enabled progress toward a more holistic, wraparound service model, so that service provision is more victim/survivor driven, proactive, responsive to individual need, and able to coordinate a range of different support types to help stabilise psycho-social and practical factors contributing to the experience of crisis.

A secondary significant change has resulted from improved spaces and/or premises where services are provided. Victim/survivors were appreciative of premises that were warm and inviting, and this reduced barriers to seeking and receiving service. Spaces that communicated a sense of being valued, which were comforting and soothing, enabled victim/survivors to relax and engage with the service. Another important change is the ability to provide practical support to overcome barriers to accessing services, and advocacy that improves access to financial support.

Results and evidence

Outcome	Results statement	Sources of evidence for results statement	Examples of evidence
Increased capacity means more needs are met	Victim/survivors receive timely emergency assistance	Victim/survivor interviews; Frontline staff interviews	"Maybe an hour and a half or two hours later, he [police officer] got a phone call, saying that this woman [Crisis Worker] was ready and available to meet us at the hospital." (Victim/survivor 01) "When I went to the hospital within 24 hours to do the rape kit, there was someone there with me who'd come from an agency." (Victim/survivor 03) "[It] wasn't any more than a week that I had to wait for an appointment. So, every week or twice a week, I'd go and talk to her about the assault." (Victim/survivor 01)
	Victim survivor's whole person is supported including their culture, spiritual beliefs and identity	Victim/survivor interviews; Frontline staff interviews; Document review	"I was asked if I wanted a cultural advisor present…I was asked what I prefer, male or female for the hospital…How I identified sexually…I was asked about my mental health history, which was quite good. Culturally, [it] was mostly the offering of a kaumatua to come in, someone to do a prayer before each appointment…I don't actually identify [with a belief in God] …She was like, what if we did a karakia that didn't mention religion, more focusing on spirituality? I was also asked if I wanted to do it in English or Māori, which was quite helpful. I asked for both… [After the karakia] I felt a bit more relaxed about the whole situation, not the situation, but what I was doing at the time. I felt a lot more relaxed…The cultural advisor stuff was really cool. Really helpful." (Victim/survivor 01) "And then for Māori and Pasifika, we always give the option, during the first face to face of do you want to open with karakia? What kind of needs, what can we do to kind of support your feelings of comfort in the space in terms of your cultural identity? That and we do have a Māori practitioner here. So, if someone does want to speak to someone Māori, we can facilitate that for them." (Crisis Worker 06)
Victim/survivors' needs are met, reducing the risk of further crisis	Staff can be proactive in their support of victim/survivors and	Frontline staff interviews; Victim/survivor interviews;	"Previously, it started [with] an initial consult. And then they'd just go on the waiting list. Whereas now, there's the ability to do regular check-ins with families, and make sure that if they've got needs within the space of waiting for therapy, social work can support with that. They [social workers] can also support while they're [victim/survivors] getting therapy with those external things that might come up. So, it's definitely added into being

	work towards wraparound support	Outcomes hui; Document review	able to walk alongside them in their journey and do the advocacy stuff and just connect them in with more things. So, yeah, I think it's made a huge difference." (Crisis Worker 08) "Before, ...it was so focused on their immediate crisis point support. Even though people might be looking for that kind of more longer-term support, there wasn't the capabilities to hold that within the space here, but now we can accommodate for those longer-term support needs, which I think increasingly survivors are needing coming into the space." (Crisis Worker 06) Participants at the Outcomes hui discussed how they were able to be proactive in the support offered to victim/survivors, for example being able to check up with people who were on counselling waitlists. It also means that frontline staff have more time to do regular check-ins with victim/survivors and therefore prevent further crisis. A document review confirms that agencies were looking to use Budget-19 funding to expand what they could offer service users and offer longer term support. (Baseline Survey p.34)
	Victim/survivors get more choice about the types of support they receive	Frontline staff interviews; Victim/survivor interviews; Outcomes hui	"She [Crisis Worker] talked me through how to get a weighted blanket, because they're very calming, very soothing...she helped me apply to ACC for a weighted blanket. And she helped me apply to ACC for a weighted teddy... The Rongoā Māori services is a place in [North Island City], where they do massage and also Reiki, the energy work. So, it's funded through ACC, but the support service instigated that process." (Victim/survivor 01) "People definitely [have] been able to provide more consultations in the crisis space [and] been able to do that in a flexible way, such as longer consultation times or home visits, or multiple consultations for the family that fits within their area of need." (Crisis Worker 07) "I think if someone's been exposed to sexual violence, they've had a huge amount of power and control exerted over them. Part of their journey of getting that back is giving them the voice to speak to what they want to speak to." (Crisis Worker 05) Outcomes hui participants discussed how increased staffing meant that there was more time to explore support options for victim/survivors that might go beyond psycho-social support. These might include self-defence classes, trauma-informed yoga, or equine assisted therapy.

	Whānau/supporters are supported alongside victim/survivors Limitation: Whānau support is led by victim/survivors; this, and resource limitations, may limit service involvement with whānau	Front line staff interviews; Victim/survivor interviews; Outcomes hui; Document review	"He [best friend] got to talk to [Crisis Worker]. Mum and [best friend] got financial assistance. I know [Crisis Worker] offered mum to see someone down in [North Island City] … There was the financial assistance to both of them. And also the face-to-face support to [best friend] and I am aware that they [best friend] would text now and then as well. ...And so yeah, there was a big wraparound through that service." (Victim/survivor 01) A document review confirmed that agencies were working towards increasing their capacity to work with whānau. However, there are challenges for working with whānau such as the need for more staff, more space and that not all victim/survivors want whānau involvement. Staff also noted that working with whānau requires specialist skills. (Baseline Survey, p.43–45) "For example, the lady I met this morning, she was living with [whānau]. I met with her and her [whānau], but that was her choice. It's up to them [victim/survivor]." (Crisis Worker 05)
Safe spaces allow victim/ survivors to work through the crisis	Victim/survivors feel relaxed and safe in Crisis Service buildings	Frontline staff interviews; Victim/survivor interviews; Outcomes hui; Document review	"The offices were lovely, got comfortable couches and everything really made it just much more welcoming." (Victim/survivor 01) "I liked it because it's like, that house and then the room's really comfortable. And yeah, I really enjoy it." (Victim/survivor 04) "... in session when someone was like, 'Oh, this space is really lovely. I always feel really great when I come here'." (Crisis Worker 06) "We moved to this new building a year ago. We have decorated this office, this building is a very welcoming environment and people [experience the] relaxation and the peace, so they like that environment and that is very important for people who have experienced trauma." (Crisis Worker 03) "Making sure that where we are, the building that we're in, is all purpose built for people with disabilities as well. We're definitely trying to make the space, in the way that we work, friendly for all." (Crisis Worker 08) At the Outcomes hui, staff talked about how the physical space of Agency offices indicates to victim/survivors that they are valued and in a safe space and means victim/survivors are more likely to stay engaged in the service.

			The Baseline Survey discusses the importance of space for victim/survivors. A warm comfortable space helps victim/survivors feel welcomed, cared for, and relaxed. (Baseline Survey, p.43)
Practical support facilitated access to emotional support	Victim/survivors are given practical support	Frontline staff interviews; Outcomes hui	"I wasn't working and quite frankly, I was a wreck…We were struggling for food. So financially, she [Crisis Worker] would give me [supermarket] vouchers...There was help with WINZ [Work and Income] … Help with ACC. And there was also help with just getting WINZ to back off for a while, getting a medical certificate, getting in to see my GP [General Practitioner] ... She came with me and articulated what I couldn't to the doctor. And so, she helped me fill in the paperwork and whatnot for that as well." (Victim/survivor 01) "Some clients can't afford to even come to us so we would be paid for, sometimes we pay for the transport to get to us." (Crisis Worker 07) "And we are happy to facilitate that [funding for transport] if there are people who that's not accessible for, so we can provide taxi cards or bus cards." (Crisis Worker 06) Participants at the Outcomes hui also described giving victim/survivors cell phone top-ups to maintain contact with Agencies. Food vouchers were also mentioned as a practical support, and clothing for victim/survivors after medical examination.

KEQ 2: What impact has Budget-19 funding had on Crisis Service frontline staff?

Significant change story

Prior to Budget-19 funding, staff recruitment and retention was a significant challenge for Crisis Service Agencies. Crisis support roles are emotionally demanding and can be chronically stressful. High caseloads and the consequential inability to meet the needs of victim/survivors on a regular basis can lead to compassion fatigue, burn-out, poor workplace morale and high staff turnover. Chronic understaffing occurs as a result of recruitment and retention issues and/or funding constraints. This exacerbates these problems because it undermines relationships with internal and external stakeholders. It also restricts staff's ability to use leave, and to access professional development and cultural/professional supervision entitlements. A workplace environment that is uncomfortable, cannot accommodate the personal or cultural needs of workers, and communicates that one's work is of low value can also lower morale and contribute to high staff turnover.

The most significant changes for frontline staff because of increased funding through Budget-19 has been reduced recruitment and retention problems, improved capability within the Crisis Service and its staff, and improved staff wellbeing. Funding has resulted in increased numbers of permanent employees in many Crisis Service Agencies. This has reduced stress and pressure on staff, improved the quality of services delivered to victim/survivors, and enabled staff to more easily access wellbeing supports such as leave and supervision. Agencies have also invested in improved premises and spaces and new technology and furnishings, and these have contributed to staff wellbeing and efficiency. Increased funding has also been directed to building capability, most commonly good practice initiatives and training, continuing professional development, and diversity education.

However, limitations were also reported. Most significantly, frontline staff identified that Budget-19 funding had coincided with increased demand for services. The resulting pressure is offsetting some of the Budget-19 related gains made in capacity, capability and wellbeing.

Results and Evidence

Outcome	Results statement	Sources of evidence for results statement	Examples of evidence
Increased service capacity	Increased staffing hours and space has increased services for victim/survivors	Frontline staff interviews; Document review	"So really, in the last three years, certainly since I came on, when I came on, it was probably four permanent, five permanent. Now there's a lot. And we've employed, you know, someone part time now, and they ideally will be full time down on the [South Island region]." (Crisis and Court Support Worker 01) "We [Crisis Agency] moved offices, but of course, that's just because we're growing.... my organisation has lots of social workers. So as our team grows, we've had to grow." (Crisis and Court Support Worker 01) "So, they've [Crisis Agency] actually been able to upgrade to a bigger building, which is awesome. So yeah, I think where we're located now, there's like, 10 different spaces that we, even more, maybe eleven in where we can meet with people." (Crisis Worker 08) A document review confirmed that agencies are using Budget-19 funding for larger spaces due to more staff, more demand, and need for more inclusive spaces. (Baseline Survey, p.29)
	Staff can access new geographical areas	Outcomes hui; Document review	At the Outcomes hui a frontline worker said that an increase in staff meant that the agency could access geographical regions that had not been previously reachable. The Baseline Survey discussed how some agencies were reaching into new locations. (Baseline Survey, p.30)
	Limitation: Some Agencies are still experiencing high staff turnover and it can be difficult to recruit staff within some regions	Frontline staff interviews; Document review	"It's really hard to retain staff. Staff turnover is high…A lot of the time it's just due to personal reasons - families, commitments, moving - things like that. But there is also the challenges that this type of work brings in and it can be extremely difficult…Probably half of the office were stable. The other half were constantly changing... Something to combat the turnover?...A lot of the time the [staff] frustrations [leading to turn over] aren't with the clients. It's with the system around them." (Crisis Worker 07) "We've got the ability to work with people. But we don't have the number of orkers needed. Because we can't employ anymore because we've maxed out the money. [If] there was more money, then we could have more Workers...it takes us so long to find somebody suitable.

			Like she [Crisis Service manager] can be advertising for six plus months for somebody regularly before a suitable person turns up." (Crisis Worker and Court Support Worker 02) The document review confirmed ongoing issues with finding suitable staff and concerns about staff turnover. (Baseline Survey, p. 21)
	Limitation: Some staff report still not having appropriate premises or enough rooms to see victim/survivors	Frontline staff interviews; Outcomes hui; Document review	"We also have space issues, we don't have enough rooms to be able to see our clients. So even if we wanted to offer more sessions, we need to book rooms, but we don't have availability of rooms all the time. That is one thing, and it can be sorted by if we have funding, we can get a bigger building." (Crisis Worker 03) "So, we're finding that a lot of our rooms are being taken up at the same time. So, we're actually potentially going to be looking for bigger space sometime in the future...We are looking into it as kind of a long-term goal for the organisation to move premises, it also depends on the premises that are available. So, our needs for our space is very specific with the need for lots of little rooms that have privacy." (Crisis Worker 06) The document review discusses the difficulty finding appropriate premises and being able to manage the overheads of larger premises. (Baseline Survey, p.30)
Improved Agency capability	Agencies were able to professionalise	Frontline staff interviews; Outcomes hui	"However, with the Budget-19, [Sexual Violence Support Agency] was able to restructure and to take a more professional employee-based kind of service." (Crisis Worker 06)
	Professional development opportunities mean staff have more skills in working with victim/survivors	Frontline staff interviews; Document review	Agencies indicated in the Baseline Survey that after the funding increase they would have an increase in the ability to provide more professional development opportunities including trauma-informed care and evidence-based practice. (Baseline Survey, p. 23). "We're expected to keep up to date with training. We have…internal case management and then internal training within the team. If someone goes to training, they're expected to come back and do a little presentation to the team training, what they've learned." (Crisis Worker 05) "I think that the staff here are given a lot of opportunities for professional development, which then ensures that our practice is really focused on responding to our clients, in the most mana enhancing way. Our aim is to not be part of a system that is going to retraumatise... But also, I think it means that I'm keeping to the forefront for my clients and what they've experienced and I'm thinking of the responses that are most appropriate because I'm continually trying to grow as a practitioner. I think it benefits them in that sense, and that my training isn't stuck back when I was a student social worker. If I was using the things that I've learned, then it

			would be poor practice. The fact that I'm having these opportunities to grow and keep up to date with where things are sitting now, it means that I'm practicing in a way that is meeting the needs." (Crisis Worker 04) "I attended a few other trainings that were mainly in the trauma space. And just so important for the work that we do continues to be at the forefront of evidence-based research for trauma work. So that when we're given psychoeducation to individuals and families in our crisis work, that we're giving them the most up to date, most accurate and evidence-based information." (Crisis Worker 07)
	Limitation: Some unmet needs remain in staff accessing professional development	Frontline staff interviews	"I think maybe we could get into more of the LGBTQ rainbow sector as well, for our clients. Yeah, we obviously see LGBTQ clients, but more education around that for staff and programmes or more talk around there, because that's just another whole area." (Crisis Worker 04) "We haven't had age [related training (on working with various age groups)] … Or disabilities. Working with people with disabilities is actually a very specialised space, and especially intellectual disabilities. And they're incredibly vulnerable to abuse or even to be able to articulate what happened to them." (Crisis and Court Support Worker 02) "I think more trainings on trauma informed care will help...I think people are more aware [on how to support people with diverse needs]. Awareness is good but we also need more information, how do actually, you know, offer good quality service. So, people talk about that okay, a disabled person can understand disability and Māori person can understand Māori. But in practicality you have staff working with client, you cannot expect that and so you need to train your staff. So, we need more appropriate trainings." (Crisis Worker 03)
Improved staff wellbeing	Improved equipment and technology have facilitated workplace wellbeing and improved workflow Limitation: Unmet technological needs remain	Frontline staff interviews; Document review	"We got standing desks near the end of last year. Those are cool and the other fancy like electric ones that you can, press the button and they lift. And so that's been really cool and stuff like that, staff have been enjoying." (Crisis Worker 06) "We all have our own offices, [where] lovely furniture has been provided...And so supportive environment." (Crisis and Court Support Worker 02) A document review confirmed that Agencies were investing in technology, mobile phones and laptops. (Baseline Survey, p.28) "I think we had one or two new mobile phones, but we still need a lot of new technology. More newer phones would be great. Yes. And yeah, just been able to use things like two screens would be helpful, too." (Crisis Worker 07)

	Staff have access to formal and informal wellbeing support Limitation: Further development of structured staff wellbeing support may be needed in some Agencies	Frontline staff interviews; Document review	"I think they would be more than happy to consider me having extra supervision sessions, if I identify that that's something that I need for either my practice or my wellbeing." (Crisis Worker 06) The document review confirmed that Agencies were investing more into staff wellbeing due to Budget-19 funding. (Baseline Survey, p.25-26) "Anything that was necessary for self-care was certainly supported by our workplace. So, if someone was needing to go home early or needing to start late or needing to go for a walk or yeah, just needing to talk... [Those supports] could help to bring us back to where we are and knowing that, you know, there's some really heavy things out there, but the whole world isn't heavy." (Crisis Worker 07) "I think when you're working with this type of work…it is heavy and there is that element of vicarious trauma that you can have...Coming into a team where I've got other social workers doing the same work and having my managers right there. I think that's been a huge, huge change for my own wellbeing." (Crisis Worker 08) "I think it needs to come back to how I'm supported in my role and my caseload and how I'm supported to be able to be well resourced, and the role that I'm doing… That should be structurally [supported]." (Crisis Worker 04)
Limitation: Increasing demand for services is offsetting gains in staffing volumes and wellbeing and in space improvements from Budget-19 funding		Frontline staff interviews	"I think there's definitely a sense of pressure on us as workers and I think that can be a negative impact on our wellbeing. I think that's actually indicative of the fact that sexual violence is becoming more known and people are starting to understand what it is and is becoming more known. More people are referring to our service, which means we are becoming very busy." (Crisis Worker 04) "In the last four years? Just more pressure, I guess" (Crisis Worker 05) "Yeah [staff wellbeing has been affected by higher caseloads]. ...so, a small burnout and it's more vicarious trauma. That impact, I can see on staff sometimes...they can be very emotional and teary in internal supervision. I can see that they are tired ...so we encourage them to...use some leave or get some self-care, but practicality you need them at work as well. ...and so that's a juggling thing if we do need more people...but funding is an issue." (Crisis Worker 03)
Limitation: Agencies are not funded to work		Frontline staff interviews	"We work with children for crisis support but we are not paid to work for children under 17yrs old…But because there is no other agency working for children who have been sexually abused in [North Island City] …we are working with 25% of our clients are under 17 but we are not

with people aged under 18 but receive high rates of referrals and lack services to refer onto, so absorb this unfunded service need			getting funding to work with them… To be able to work with children you cannot just offer any clinician to work with them. They need different type of skills like play specialists, they want sand therapy…We need to have trained clinicians for that. We need to have tools for that, we need to have special rooms and space set up for that. So, we don't have these resources because we don't have funding." (Crisis and Court Support Worker 03).

KEQ 3: How has Budget-19 funding impacted sector integration?

Significant change story

Prior to Budget-19 funding, staff found it difficult to find the time to make and maintain relationships with external agencies. This could affect the quality of service to victim/survivors who need referral to, or advocacy in their interactions with, those external agencies. In particular, assisting victims/survivors to navigate public and social services, and government agencies (such as health services, Work and Income or Housing New Zealand) to support their recovery from crisis relies heavily on Crisis Workers understanding those services and having functional relationships with key personnel.

The most significant change to sector integration as a result of Budget-19 funding has been increased capacity for frontline staff to network with external stakeholders and build improved working relationships. This has resulted in:

i. Improved information supporting quality referrals to external agencies.

ii. The establishing and strengthening of relationships and referral processes to culturally appropriate service providers.

iii. Improved visibility and confidence in referring from external agencies to Crisis Services Agencies.

iv. Cross-agency collaboration to meet the needs of victim/survivors.

However, there were limitations to improved sector integration, and related loss of potential in improved outcomes for victim/survivors. In some areas, appropriate referral services or important social services did not exist or were difficult to access. Frontline staff reported that Safe to Talk does not provide direct referral of victim/survivors and this is likely to be resulting in some victim/survivors not reaching Crisis Service Agencies.

Results and Evidence

Outcome	Results statement	Sources of evidence for results statement	Examples of evidence
Better integration of services	Increased stakeholder networking and improved sector relationships	Frontline staff interviews; Document review	"I think there's a lot more of a collaborative response going on and people working together to build up the sector...I think there have been like, obviously meetings in the past, but I think the frequency and the different groups is definitely increased...And just having those conversations together about who does what work, you know, like, and how do we do it together." (Crisis Worker 08) "We've been really focusing on networking in the community. And we've been focusing on trying to work with Māori and Pacific organisations...trying to get to those hardly reached populations and the Māori and Pasifika community. And we have seen a little bit of an increase in those communities coming through our service." (Crisis Worker 06) "We've got a good reputation with most agencies, most agencies know we've got so many doors, the ways that people access our agency… [For instance] they will ring up us and they say: 'Hey, can you go around and talk with [service user], they're not wanting to come in for the meds'…and we have the discussion and work through the reasoning and that sort of type thing. So yeah, we're very good. It's government departments that we have problems with, but you know, I think everybody there [is] over-worked and half staffed." (Crisis and Court Support Worker 02) Funding has helped strengthen relationships within and outside the sector. (Baseline Survey, p.47)
	More networking and improved relationships are supporting increased referrals and better services for victim/survivors	Frontline staff interviews	"When you're not working in isolation, it always helps your practice. But also, just having the ability to work together and share that load and make sure that people's needs are being met because we might not always be the right place for someone. So, it's so good to be able to work together with other people and know: how do we refer to them; what do their waitlists look like?... And then that helps us give the right information to people so that they're not having unrealistic expectations of what's going on out there. So, all of it is so helpful." (Crisis Worker 08)

			"The cultural support is quite a new thing; having people come in. And the relationship with [Māori organisation] I think that's definitely strengthened. You know, and they're referring to us as well. You know, that shows a huge respect." (Crisis Worker 08) "We work very closely alongside… [Kaupapa Māori service]. And we have cultural supervision with some professionals from [Kaupapa Māori service]..and we've also had them come and visit with the team to our office, and we've gone to visit them at their office. And I think that helps, too because they, their services are also evolving. So, it helps us to know what their services offer, so that we can we know, when clients come to us, or we know the right service for you, the service can provide this for you, let's help you get involved with them. So yeah, we've been able to have really smooth support transitions, just really good working relationships… Which it just makes it so much easier for the client." (Crisis Worker 07)
	Limitation: Some areas do not have necessary social services to refer victim/survivors to	Frontline staff interviews	"One thing that I've been finding that increasingly, survivors are coming in with a need for [housing support] and I've struggled to find organisations that actually will help with this, because we're not really well versed in housing needs. Either like emergency housing or a need for transitional housing, or, yeah, or just support with housing...And so you try and call up other organisations to be like, do you have any ideas on how to support with this? And they're like, no, we don't do that." (Crisis Worker 06)
	Limitation: Long waiting lists for counselling and ACC support is negatively impacting victim/survivors and putting pressure on Crisis Workers	Frontline staff interviews; Document review	"Not so much the crisis work, but with the therapy, [adult victim/survivors] are waiting for so long, about a year, and then we may set them up with a therapist that they might be working with for a few months and then because of the turnover, the staff leaves, and then they have to wait again… But I guess what it means is that, I think it makes a client feel, yeah, it doesn't help with helping them to feel valued, even though that's often issues outside of our control. Yes, definitely not related to the client. But it's so important to be able to offer as a good response to their needs. And so I think that just does, it can hinder their journey, I think." (Crisis Worker 07) "There's no more money in the pot to employ more social workers to support the clients that are pouring in through our doors if our waitlist for counselling is now up to over 12 months, 14 months." (Crisis and Court Support Worker 02)
	Limitation: Lack of direct referrals from Safe to Talk	Frontline staff interviews; Outcomes hui; Document review	"When checking referrals, I've never seen any from Safe to Talk. They may come through from them, but I haven't seen it in the last year that I've been here." (Crisis Worker 04)

			"I think we've had one [referral from Safe to Talk], but any clients we have that come in and disclose sexual violence, we always provide them with a Safe to Talk card to call." (Crisis Worker 05) At the Outcomes hui staff talked about victim/survivors getting a service 'recommendation' from Safe to Talk but no direct referral. A recommendation was described by people at the hui as the victim/survivor being given a name to 'google' and the victim/survivor doing the work to find the Agency. Staff conveyed concern that some, possibly many, victim/survivors did not take these steps and expressed a desire for direct referrals to remediate this problem.
Safe to Talk provides some relief for frontline workers	Some Crisis Workers trust Safe to Talk to support victim/survivors out of hours	Frontline staff interviews; Outcomes hui; Document review	"Something that I found really helpful was if clients were having difficulty with sleeping, like, nightmares or things, stressful events, especially over the weekend, or just at certain times that were kind of obscure, and not really easy to access support. I talked to them about being able to call Safe to Talk. And in that I had feedback from a client that they found extremely helpful. And they were able to talk to someone on the phone, it was really, just put them at ease. And they were appreciative of me telling them about Safe to Talk. And so they're appreciative of also the response they got from Safe to Talk." (Crisis Worker 07) At the Outcomes hui, staff discussed how Safe to Talk has meant that frontline staff know there is an agency that can support victim/survivors outside of normal work hours. The knowledge has led to a sense of relief for some frontline Workers.

6. Findings and implications

In this section, we provide an overview of key findings and implications of Budget-19 funding in Crisis Services. It is structured by the key evaluation questions to demonstrate the impacts (both intended and unintended) on frontline staff, victim/survivors and whānau/supporters accessing the Crisis Service. It identifies progress towards intended outcomes and the effect of contextual factors as identified in the Baseline Survey, and contextualises the recommendations made in the following section.

KEQ 1: How has Budget-19 funding impacted the experiences of the Crisis Service for victim/survivors?

Victim/survivors and frontline staff reported many positive outcomes from the increased funding in Agencies through Budget-19 funding. These outcomes are highly consistent with expectations about, and the initial impacts on, victim/survivor experiences identified in the Baseline Survey.

Increased accessibility. As intended, Budget-19 funding for Crisis Support Agencies has increased the number of staff available to provide services. This has improved access to services for victim/survivors. There is greater capacity within services to provide immediate response to requests for service and a reduction in the time that victim/survivors spend waiting for service. There has also been an expansion in the range of people able to receive services, with some Agencies expanding their services into previously unserved communities and regions, as well as increasing their capacity to involve whānau/supporters in service provision.

Many organisations have also used funding to expand or move to larger premises in order to make their spaces and facilities more comfortable and welcoming. This has allowed victim/survivors to more easily relax and engage, reducing barriers to accessing service. Access to funding for practical forms of support, such as assistance with transport to attend face-to-face support sessions, is also helping victim/survivors receive the crisis support they need. All of these results from Budget-19 funding are improving access to services for victim/survivors.

Improved responsiveness. As a result of increased staff capacity, Crisis Workers are better able to meet the needs of victim/survivors. Crisis Workers reported being able to extend their engagement period to better reflect the victim/survivor experience of crisis and be more proactive and timelier in following up with victim/survivors. Increased staff capacity is also enabling more tailored support due to having more time and resources to link people with other services and provide more choice to victim/survivors in the type of support they receive. These factors are helping victims/survivors to remain engaged with services, an outcome that can contribute to a more stable psycho-social state and potentially prevent further crises.

Victim/survivors report that they are receiving crisis support that is responsive to their culture, spiritual beliefs and identity, and that this increases their comfort and engagement with the Crisis Service.

A further dimension of responsiveness is providing help to victim/survivors on waiting lists for ongoing support. Difficulty with timely access to ongoing counselling/therapy was repeatedly reported. While there is not capacity in the Crisis Service to provide more than brief intervention counselling, there was greater capacity to try to bridge the gap to counselling and keep victim/survivors engaged in service during this difficult period of high stress.

Support. Further impacts of increased staff capacity are improvements in service and practice. Crisis Workers report a greater ability to be proactive in their support of victim/survivors, to provide more aspects of support, and to offer greater choice to victim/survivors about the nature of support they receive. For instance, follow up contact can enable immediate social work interventions to prevent the deterioration of a situation. It can also support victim/survivors' engagement with other services, making them more likely to receive those services in a timely way.

Victim/survivors reported having access to a wide range of support types including physical therapies such as massage or Reiki, healing therapies such as Rongoā Māori and soothing supports such as a weighted blanket. Support for whānau/ supporters was made available where victim/survivors chose this and Agency resources were available. Victim/survivors reported that support for whānau/ supporters is a helpful and important aspect of receiving the help that they need. All these factors provided evidence that the intended progress toward a holistic, wraparound service is occurring.

Limitations. Not all victim/survivors received a Crisis Service response when they needed it. This resulted from a mix of limited capacity before funding was available or able to be utilised, gaps in referral systems, and limitations in geographic coverage. Some Agencies remain under-resourced with regard to providing support to whānau/supporters. Some Crisis Workers reported difficulty with accessing the funding necessary to achieve the material and practical supports that victim/survivors needed.

KEQ 2: What impact has Budget-19 funding had on Crisis Service frontline staff?

Frontline staff reported many positive improvements in work conditions and staff wellbeing from the increased funding in Agencies through Budget-19. These impacts are in line with the expectations and intended outcomes identified in the Baseline Survey. However, the contextual factors identified in the Baseline Survey, including increasing demand and constrained capacity in the wider support system, are limiting improvements and putting pressure on frontline staff.

Workforce improvements. Across the sector, Budget-19 funding has led to the expansion of the workforce. This has enabled an increase in the capacity of the Crisis Service to meet the needs of victim/survivors, reduced frontline staff workloads and increased their job satisfaction. The ability to provide a more

accessible and responsive service to victim/survivors positively impacts job satisfaction and workplace morale for frontline staff. In some Agencies, a previous reliance on volunteer or casual workers had been reduced, with permanent, full-time roles formalised. This has led to increased professionalisation of the Crisis Service and improved service quality. Staff reported increased opportunities for professional development, especially related to working competently with different communities within Aotearoa New Zealand including Māori, Pacific, migrant and Rainbow communities, and trauma-informed and evidence-based practice. Some Agencies have used their increased capacity to reach previously underserved communities.

Staff wellbeing. Upgraded technology and improved workspaces and furnishings have improved staff morale. Physical improvements in the workplace, such as standing desks, are having a positive impact on staff physical and mental wellbeing. Staff expressed the importance of having a space that was comfortable and functional, especially considering the emotional toll of their work. Many, but not all, mentioned less burn-out because there was greater capacity to manage their needs and wellbeing. This includes more flexible work arrangements and improved access to employment entitlements such as planned and unplanned leave, professional supervision and professional development. All staff had access to supervision which was seen as key to maintaining their psychological wellbeing and the quality of service to victim/survivors. Increased staffing and improved infrastructure have contributed to improvements in staff morale. This has in turn contributed to increased capacity in informal collegial support for managing the emotional and existential burden of constant exposure to the hurts and harms caused by sexual violence.

Limitations. A significant number of Crisis Workers described increasing demand for services responding to sexual violence. Crisis Workers variously connected this change to the impact of Covid-19, reducing stigma about being a victim/survivor of sexual violence, and increased public awareness about sexual violence and helping agencies. This means that despite increased staff capacity many were still impacted by high caseloads, and the stress and pressure associated with trying to meet the needs of a high number of distressed victim/survivors. The lack of funding for victim/survivors under 18 years old and the lack of appropriate services for youth and children in some regions is also a significant constraint, with up to 25% of service delivery unfunded for this reason.

Some Agencies continue to experience difficulties with staff retention and recruitment. Frontline staff attributed this to a mix of the pressure of high caseloads, the emotional and existential toll of the work, natural attrition, funding constraints and rates of pay, and the difficulty of working with external agencies and systems that are not victim/survivor friendly. Some Agencies have not been able to sufficiently improve spaces and/or premises and this is limiting potential in victim/survivor outcomes and workplace morale. There was some evidence that staff wellbeing continues to heavily rely on informal peer-based care and that there is an ongoing need to improve access to external and structural supports for staff wellbeing. Some staff reported the need to pay and await reimbursement for wellbeing entitlements or practical support to victim/survivors. While frontline staff reported an increase in access to cultural supervision and diversity

competency training it was not clear that this was consistently leading to better practice. For example, some staff talked about attending Rainbow training but then referring Rainbow victim/survivors to another service or asking a Rainbow colleague to support them. It appears that there is more scope for embedding learning in practice.

KEQ 3: How has Budget-19 funding impacted sector integration?

Frontline staff identified increased opportunities to build and strengthen inter-agency relationships. This enables service improvements such as expanded and smoother referral practices, and improved victim/survivor access to a range of other social supports that they may need.

Sector integration. Crisis Service Agencies were able to build and strengthen relationships with external agencies (such as Police, health providers or other social service providers) as a result of Budget-19 funding. The increase in staff capacity allowed for visits and hosting of external agencies at their premises, more frequent contact with service providers to whom Agencies frequently refer, and networking with service providers who work with hard-to-reach populations. These relationships and activities contribute to a more cohesive experience for victim/survivors. Crisis Workers have more current and correct information about other service providers. This improves referrals and smooths transitions for victim/survivors to and from Crisis Service Agencies. Increased collaborative working to meet the needs of victim/survivors improves the experience of victim/survivors and improves practice within Agencies. Frontline staff described having improved confidence in making culturally appropriate referrals for victim/survivors and increased cultural competency in themselves.

Safe to Talk. The evaluation had a specific focus on service integration with Safe to Talk. Many frontline staff said they referred victim/survivors to Safe to Talk, describing Safe to Talk as the one place that victim/survivors could access after-hours support. Some frontline staff experienced a sense of relief from knowing that victim/survivors had 24/7 support. However, levels of confidence in Safe to Talk varied, with some staff having high levels of confidence and others expressing concern about the quality of service.

Many frontline staff said they do not receive victim/survivor referrals from Safe to Talk. It appears that Safe to Talk practice is to give callers the contact number for the local Crisis Service Agency and leave it to the victim/survivor to initiate contact. Frontline staff are of the view that this referral system is insufficient and leaves victim/survivors having to take another help seeking step to receive support. They were concerned that this was creating a barrier to service for some victim/survivors. They felt that a direct referral system, with Safe to Talk directly connecting victim/survivors with the Crisis Service and providing a warm handover, would be preferable.

Limitations. Sector integration, plus the related service and referral benefits for victim/survivors, are limited by several factors. In some areas the necessary

services do not exist or are inaccessible. Housing related services were repeatedly mentioned in this regard. Long waiting times for counselling, including ACC counselling, is an ongoing problem that cannot be improved by relationship building, but is negatively impacting victim/survivors and putting increasing pressure on Crisis Service Agencies.

7. Recommendations

In this section we provide suggestions for how MSD should use the findings of this evaluation to support future phases of development of the Crisis Service associated with Budget-19 funding. It is recommended that MSD:

1. Review funding levels to ensure that staffing levels across the Crisis Service are adequate to meet demand, and that remuneration and working conditions are sufficient to reduce and stabilise staff turnover.
2. Review funding levels to ensure provision of sufficient, fit-for-purpose space, technology and furnishings to the benefit of victim/survivors, whānau/supporters and frontline staff.
3. Review funding mechanisms, service specifications and contracting arrangements, as well as working with government partners, to increase the availability of crisis and long-term therapy services to child and youth victim/survivors.
4. Work with Crisis Service Agencies to ensure that there is effective monitoring of demand for service, and that funding mechanisms and levels are adequately responsive to increases in demand.
5. Work with Crisis Service Agencies to update the Sexual Harm Crisis Support Service Guidelines in line with the findings of this evaluation. Service specifications should include psycho-social, emotional, and practical supports to victim/survivors and whānau/supporters. Service specifications should identify the components and activities that enable a holistic, wraparound Crisis Service. That is, one that is timely, person-centric, victim/survivor driven, whānau/supporter-inclusive, accessible and responsive.
6. Work with Crisis Service Agencies to identify and remediate barriers to service provision for whānau/supporters.
7. Work with Crisis Service Agencies to identify any regions that remain outside the scope of the Crisis Service and take steps to fill those gaps.
8. Explore ways to reduce waiting times for long-term therapy/support and ensure that victim/survivors are able to access them once their crisis support needs have been met.
9. Engage with Crisis Service Agencies and other funding agencies to ensure that financial systems and funding pathways do not create barriers to victim/survivors accessing entitlements or frontline staff filling funding gaps.

10. Engage with Crisis Service Agencies to identify barriers and ways to increase formal, structural and external frontline staff wellbeing supports.
11. Facilitate relationship building opportunities between Safe to Talk and Crisis Service Agencies to enhance Crisis Worker confidence in Safe to Talk and enhance access to around-the-clock support for victim/survivors.
12. Work with Safe to Talk and Crisis Service Agencies to establish a direct referral protocol and ensure victim/survivors are easily able to access the Crisis Service through Safe to Talk.

Future evaluation work with the sector should explore other avenues to understand the experiences of victim/survivors in the system that minimise contact with victim/survivors post-service. Specific suggestions include:

1. When recruiting participants, we caution against using social media to recruit such a specific population of participants. If social media is used, we recommend not mentioning payment or vouchers in the posts.
2. Future studies with participants who have experienced crisis should fund sessions of counselling (when required) to mitigate additional strain on Crisis Service Agencies.
3. We recommend that research and evaluation that involves participation from people involved in lengthy, emotionally demanding experiences limit the demand on those participants and find creative ways of accessing their experiences. Some suggestions include:
    a. The development of a central database of information collected across the sector may be able to capture a range of victim/survivor specific information without needing to engage directly.
    b. Collecting brief and specific feedback during service. For instance, during the last session, the worker may ask for feedback to develop the service more.

References

Braun, V., & Clarke, V. (2022). *Thematic analysis: A practical guide*. Sage Publications.

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology*, *3*(2), 77-101.

Clarke, V., Braun, V., & Hayfield, N. (2015). Thematic analysis. *Qualitative psychology: A practical guide to research methods*, *3*, 222-248.

Dart, J., & Davies, R. (2003). A dialogical, story-based evaluation tool: The most significant change technique. *American Journal of Evaluation*, *24*(2), 137-155.

Dart, J., & Roberts, M. (2014). *Collaborative Outcomes Reporting*. C*arlton: Better Evaluation, Australia and New Zealand School of Government (ANZSOG).* http://betterevaluation.org/plan/approach/cort.

Gavey, N. (2019). *Just sex?: The cultural scaffolding of rape*. (2nd ed). Routledge.

Henry, N., & Powell, A. (Eds.). (2014). *Preventing sexual violence: Interdisciplinary approaches to overcoming a rape culture*. Springer.

Krug, E. G., Mercy, J. A., Dahlberg, L. L., & Zwi, A. B. (2002). The world report on violence and health. *The lancet*, *360*(9339), 1083-1088.

Ministry of Social Development. (2021a). Baseline Survey: Impact of Budget-19 on Sexual Violence Services and the Sector. https://www.msd.govt.nz/documents/about-msd-and-our-work/work-programmes/initiatives/family-and-sexual-violence/specialist-services/impact-of-budget-19-baseline-survey-report-september2021.pdf

Ministry of Social Development. (2021b). Sexual Harm Crisis Support Service Guidelines F21. https://www.msd.govt.nz/documents/about-msd-and-our-work/publications-resources/service-guidelines/sexual-harm-crisis-support-service-guidelines.pdf.

Pawson, R., Tilley, N., & Tilley, N. (1997). Realistic evaluation. Sage Publications.

Roughley, A. M. (2009). Developing a performance story report: User guide. Australian Government.

Smith, L., Pihama, L., Cameron, N., Mataki, T., Morgan, H., & Te Nana, R. (2019). Thought space Wānanga—a Kaupapa Māori decolonizing approach to research translation. *Genealogy, 3*(4), 74.

World Health Organization. (2004). The economic dimensions of interpersonal violence / editorial committee: Hugh Waters...[et al.]. World Health Organization. https://iris.who.int/handle/10665/42944

Appendix A - Previous evaluation activities

The early evaluation activities have been conducted by the sexual violence research and evaluation team based within Insights MSD. The development of the service-specific logic models and Baseline Survey, which are of most relevance to the current procurement, alongside the co-design of service measures, are outlined below.

Development of service-specific logic models

Service-specific logic models were developed throughout late 2020 and early 2021 for the Crisis Service, MSSA Service, NM-HSB Service and Court Support Service to inform subsequent evaluation activities.

The models were co-designed by the research team at MSD and refined with service partners via a series of workshops. The logic models detail the overarching goal of each service, and the long and short-term outcomes required to achieve that goal. They also make explicit how the organisational resources, support activities, and contextual factors (e.g., the ability to recruit staff and maintain their wellbeing) connect through to these outcomes.

Baseline Survey

A Baseline Survey was conducted in 2020 to understand the early and expected impacts of the Budget-19 funding from the perspective of recipients (sexual violence service partners). The Baseline Survey involved semi-structured interviews with Partnering for Outcomes Advisors and managerial staff of agencies funded by MSD to provide a specialist sexual violence service. These services included: Crisis Service, MSSA Service, NM-HSB Service and Safe to Talk. A total of 73 people participated in 57 interviews. The primary research question was:

- How, and when, is the Budget-19 investment expected to impact services and the sector?

Secondary questions encouraged participants to consider the impact of Budget-19 on the following key areas:

- Workforce
- Organisational development
- Service design
- Experiences for victim/survivors
- Inter-agency relationships
- Relationships with MSD.

Most participants reported that the funding had already had a significant impact on their agency, but investments in some areas, such as in organisational development, would take longer to achieve. Service-specific impacts were also

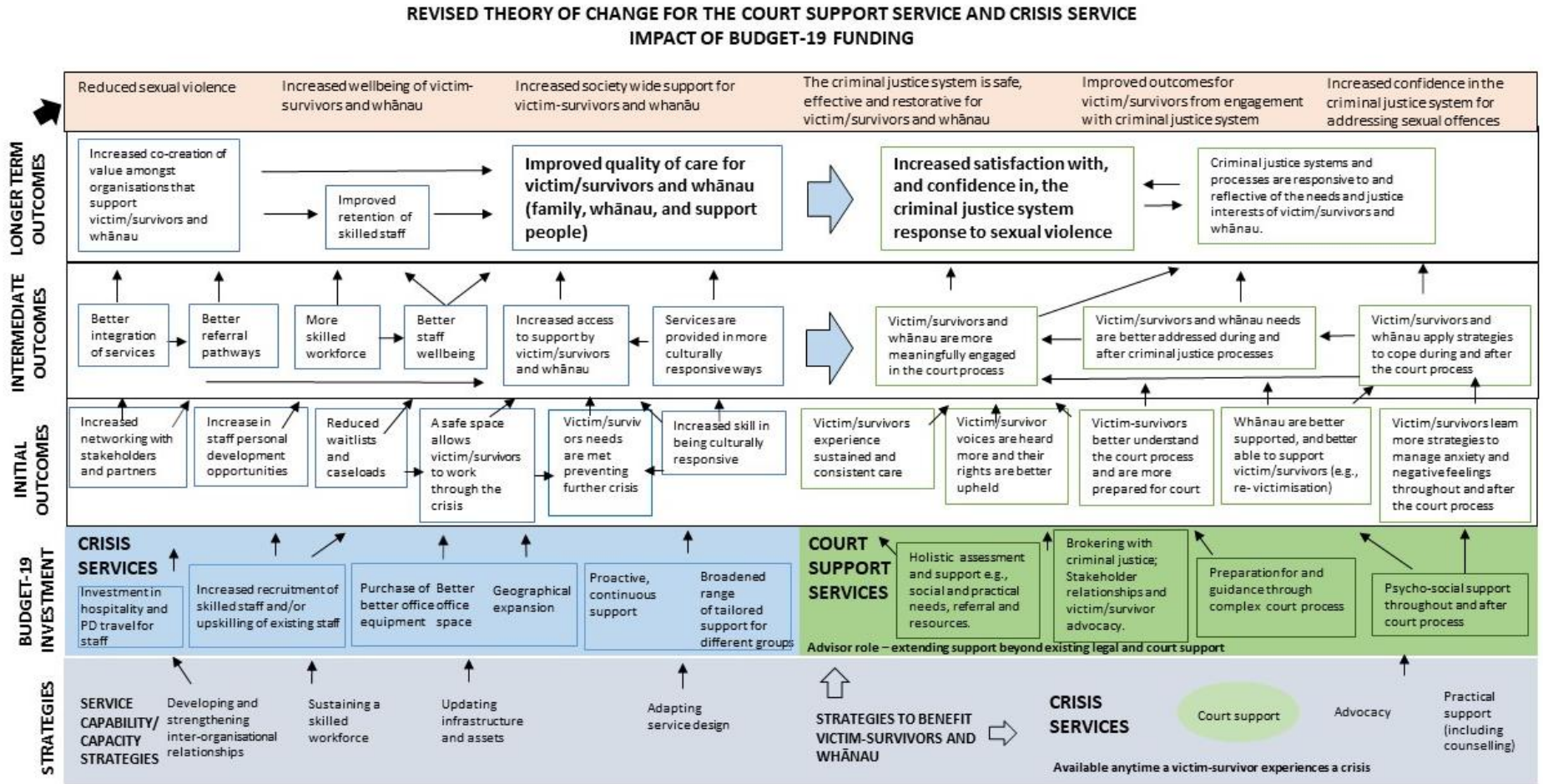
identified.[21] The impacts of Budget-19, however, are likely to be limited by factors beyond the control of sexual violence agencies. The initial and expected impacts of the funding identified in the Baseline Survey included:

- ***Accessibility*** - improved access for victim/survivors through increased workforce capacity and new locations.
- ***Responsiveness*** - improved timeliness of support due to increased capacity and capability of agencies; increased ability to respond to individual and cultural needs of victim/survivors.
- ***Support*** - increase in support available to family and whānau; better experiences and outcomes for victim/survivors due to the ability to provide a wraparound model of support.
- ***Workforce*** – expanded workforce contributes to reduced workload and increased job satisfaction; ability to focus on staff wellbeing; investment in training and competency.
- ***Sector integration*** - strengthened inter-agency relationships.

A copy of the Baseline Survey (the Baseline Report) can be found at: impact-of-budget-19-baseline-survey-report-september2021.pdf (msd.govt.nz)

[21] Refer to pages 58 – 59 of the Baseline Survey report.

Appendix B - Refined Theory of Change



Appendix C – Key evaluation stakeholders, assumptions and external influences

Tāngata whenua and key stakeholders

- **Tāngata whenua and Te Tiriti o Waitangi partnerships** - Some Crisis Service Agencies developed within Te Tiriti o Waitangi partnerships and some services have more recently developed Te Tiriti partnerships. The national body of specialist sexual violence services Te Ohaakii o Hine - National Network Ending Sexual Violence Together (TOAH-NNEST) is a Te Tiriti partnership organisation. The specificity of each partnership will vary across services but almost all specialist sexual harm agencies/services for victim/survivors have Te Tiriti partnerships. These partnerships support inclusive practice and the aspiration that Crisis Services operate from an indigenous worldview. More generally, tāngata whenua have an interest in ensuring that tauiwi/non-Kaupapa Māori services respond appropriately to Māori victim/survivors and their whānau/supporters, including by referrals to Kaupapa Māori services.
- **Victim/survivors -** adults (aged 18 and over) who agree to engage with an Agency for support following a sexual violence crisis event. The people who support victim/survivors – including their family, friends, partners and whānau – may also be supported, where required.
- **Agencies** - work to (a.) employ and support specialist and appropriate staff; (b.) operate a viable service that can support all staff and their professional development;[22] (c.) ensure appropriate community collaboration and networking links are made to support victim/survivors; (d.) participate in any regional networking, information sharing and knowledge building activities; (e.) develop and maintain effective collaborative working relationships with regional MSD sites; (f.) participate in training and up-skilling activities to keep up to date with development, innovations and good practice in the development and delivery of Crisis Services; (g.) provide and enable staff access to training and development opportunities as well as regular supervision (including cultural supervision); and (h.) ensure systems and processes are in place to utilise and report on delivery of services and funding**.**
- **MSD** (a.) approves Agencies; (b.) monitors the performance and contractual management of the Crisis Service Agency; (c.) seeks and supports continuous improvement of service delivery; (d.) leads the development of outcomes and service guidelines; and (e.) ensures national coverage and quality through a fair and equitable funding allocation process.

[22] In accordance with the Ministry of Social Development's Approval and Accreditation Standards and Guidelines.

- **National Sexual Violence Helpline** (Safe to Talk) launched in April 2018 and provides free, confidential information and support to those impacted by sexual harm. Agencies will receive referrals from the helpline, make referrals through the helpline to access and align with other available services, provide information to victim/survivors and whānau/supporters about the helpline, and use the helpline for information and/or support. Safe-to-Talk is also available to people who are concerned about their sexual harm thoughts or behaviour.
- **Te Puna Aonui** (previously the Joint Venture Unit) is a government-formed collaboration to improve the whole-of-government approach to family violence and sexual violence. MSD is part of the Joint Venture that underpins Te Puna Aonui and is represented on its Interdepartmental Executive Board, along with nine other government agencies.
- **TOAH-NNEST** is the national network of those providing specialist services for sexual violence prevention and intervention.[23] It represents (a.) about 40 specialist not-for-profit organisations (NGOs); (b.) many individual specialists working throughout Aotearoa New Zealand with families and in whānau, hapū, iwi and communities; (c.) and associated members from a wide range of allied NGOs.

Assumptions

Crisis Services

Assumptions that have to be true for outcomes in the Theory of Change to occur (associated with Budget-19 funding in the Crisis Service) include:

Te Tiriti o Waitangi

Crisis Service Agencies understand and have a commitment to honouring Te Tiriti o Waitangi in what they do.

Sector capacity

- Agencies have (or can build) effective, trust-based relationships with other relevant agencies and services (e.g., sexual violence services and other services such as hospitals and police).
- There is effective coordination of crisis and other relevant support services that results in responsive referral pathways.
- Victim/survivors and whānau/supporters are able to access the support of other services as needed and in a timely manner (including long-term wraparound support).
- All Agencies will allow ease of access (e.g., be in an accessible location and be designed for people with mobility or other impairments).
- Victim/survivors and whānau/supporters can access support via technology (e.g., they own devices and know how to use them).

[23] https://toah-nnest.org.nz/about/

- If increased numbers of victim/survivors and whānau/supporters can access more services, then all Agencies (including those without a Oranga Tamariki contract) will have the experience and skills to work with whānau/supporters, including younger families.

Workforce development

- There will be a pool of staff available if Budget-19 investment is to be used for recruiting additional service staff.
- Agencies can recruit and/or train and retain staff with suitable skills, experience, and/or qualifications, and personal characteristics service to be culturally responsive to diverse communities of victim/survivors and whānau/supporters.
- There is adequate quality workforce development (including professional development and networks and relationship building) to enable effective engagement with diverse communities of victim/survivors and whānau/supporters (e.g., Māori, Pacific, Rainbow, and disability communities).

Organisational capability

- Agencies are able to learn, and then apply what is learned, from capacity building activities associated with MSD's Budget-19 work programme (e.g., in monitoring and reporting).
- Governance and leadership bodies have the skills and resources to manage service development related to Budget-19 investment.
- There are appropriate management systems in place to effectively manage service development and provision related to Budget-19 investment.

Court Support Service

Key assumptions that have to be true for outcomes in the Theory of Change to occur (associated with Budget-19 funding in the Court Support Service) include:

Te Tiriti o Waitangi

- Court Support Agencies understand and have a commitment to honouring Te Tiriti o Waitangi in what they do.

Sector capacity

- Agencies have (or can build) effective, trust-based relationships with other relevant agencies and services (e.g., sexual violence services and other services such as hospitals and police).
- Other agencies and services are aware of, and supportive of, the additional Budget-19 funded Court Support Workers role, especially the Police and Court personnel (e.g., Court Victim Advisors).
- Agencies actively promote the new Budget-19 funded Service.
- Court Support Workers work in a collaborative way with other agencies, including the Police and Court Personnel to ensure that victim/survivors can access support when they need it.

- Court Support Workers have the ability to refer victim/survivors and/or whānau/supporters on to other support where needed (e.g., they have the capacity to refer and referral agencies have the capacity to receive referrals), including at the end of service.
- Other service providers will have the capacity to offer long-term wraparound support.

Workforce development

- Court Support Workers have the skills and networks required to effectively advocate for the victim/survivor and whānau/supporters, ensure their rights are upheld, and to engage effectively with Police and Court personnel.
- Information provided about the court service is audience appropriate for diverse communities of victim/survivors and whānau/supporters (e.g., Māori, Pacific, Rainbow, and disability communities).
- Agencies can recruit and/or train and retain Court Support Workers with suitable skills, experience, and/or qualifications, and personal characteristics service to: (a.) be culturally responsive to diverse communities of victim/survivors and whānau/supporters; and (b.) transfer knowledge about the court process and Criminal Justice system.
- Court Support Workers are a 'good fit' to enable a trusted and respectful relationship between Court Victim Advisors and victim/survivors and whānau/supporters.

Organisational capability

- Agencies are able to learn, and then apply what is learned, from capacity building activities associated with MSD's Budget-19 work programme (e.g., in monitoring and reporting)
- Governance and leadership bodies have the skills and resources to manage service development related to Budget-19 investment.
- There are appropriate management systems in place to effectively manage service development and provision related to Budget-19 investment.

External influences - Crisis Service and Court Support

The following external influences may impact negatively or positively on intended outcomes from Budget-19 funding shown in the integrated Theory of Change diagram.

Negative influences

- Changes in legislation that impact negatively on service activities and delivery.
- The involvement of other organisations (e.g., in the case of Court Services, Victim Support or Court Victim Advisors) who do not support services due to lack of knowledge about the service or 'buy in' to the Court Support Service.
- A lack of skilled staff to fill positions made possible by Budget-19 investment.

- Pandemics, disasters, protests, strikes, or similar events, which might affect access to services, delays in services (including in the criminal justice system), people presenting with a wider range of complex needs, or staff burnout, or similar barriers.
- Publicity around the harms of sexual violence and the need to better support victim/survivors (e.g., the #MeToo movement and the Royal Commission into Abuse in Care) may result in unmanageable caseloads.
- Services in geographical areas with less resources or accessible locations may be more inaccessible to victim/survivors and whānau/supporters living in those areas.
- Victim/survivors in small towns may be less likely to access a service due to confidentiality concerns.

Positive influences

- Changes in legislation that impact positively on service activities and delivery.
- Publicity around the harms of sexual violence and the need to better support victim - survivors (e.g., the 'Me Too' movement and the Royal Commission into abuse in care) may result in increased confidence by victim/survivors and whānau/supporters in the criminal justice system.
- Strengthened positive relationships between MSD with TOAH-NEST and other stakeholders through the Budget-19 work programme
- Increased support from iwi and hāpu for the Budget-19 work programme, where Budget-19 funding is perceived to benefit Māori victim/survivors and whānau and Kaupapa Māori service providers.
- An increase in interest and investment by Government in initiatives that address inequities for diverse groups.

Appendix D – Ethics

Ethics approval was granted by University of Otago Ethics Committee. Reference Number: *23/002* [7th January 2023]

Participant Information Sheets and Consent Forms for each relevant evaluation activity are inserted below:

Feedback Hui

For the Feedback Hui participants were sent the Information sheet and the consent form. At the beginning of the hui, the main points of the consent form were discussed the participants.

Reference Number *23/002*

[7th January 2023]

IMPACT OF THE BUDGET – 19 FUNDING ON SEXUAL VIOLENCE SERVICES

INFORMATION SHEET FOR PARTICIPANTS
(Frontline Staff: Feedback hui)

Thank you for showing an interest in this project. Please read this information sheet carefully before deciding whether or not to participate. If you decide to participate we thank you. If you decide not to take part there will be no disadvantage to you and we thank you for considering our request.

What is the Aim of the Project?

The aim of the project is to understand the impact of the government's Budget -19 on the sexual violence sector specifically crisis support and court services.

What Type of Participants are being sought?

We are looking for staff with expertise in the Crisis Support and/or Court Support services. The Ministry of Social Development and TOAH-NNEST gave us your details. With your permission, we are now checking with you to see if you are willing to participate in a feedback hui.

Once the evaluation is complete, there will be a publicly available report.

What will Participants be Asked to Do?

Should you agree to take part in this project, you will be asked to: participate in an online hui that will focus on the key findings and recommendations for change in the Crisis Support and Court Support services. You will be asked to give your feedback on what is working and what could improve in the Court Support Services and/or Crisis Support Services. The precise nature of the questions which will be asked have not been determined in advance, but will depend on the way the hui develops. Consequently, although the University of Otago Human Ethics Committee is aware of the general areas to be explored in the hui, the Committee has not been able to review the precise questions to be used.

In the event that the line of questioning does develop in such a way that you feel hesitant or uncomfortable you are reminded of your right to decline to answer any particular question(s) and also that you may withdraw from the hui without any disadvantage to yourself of any kind. If you share something you do not wish to be included in the research you can let us know afterwards.

We will do as much as we can to preserve your confidentiality. This includes asking for the information shared within the hui to remain confidential. We cannot however, guarantee that all members of the hui will maintain this confidentiality.

It is likely that we will use short quotes from the interviews in the report. We will remove any potentially identifying information from the quotes so no one will know who it comes from.

Please be aware that you may decide not to take part in the project without any disadvantage to yourself of any kind.

What Data or Information will be Collected and What Use will be Made of it?

The hui will be audio recorded then transcribed so we have an accurate record of what you say. The recordings and transcripts will be securely stored in such a way that only those mentioned below will be able to gain access to it. Information obtained as a result of the research will be retained for **at least 5 years** in secure storage. Any personal information held on the participants (contact details used to arrange the interview) may be destroyed at the completion of the research even though the data derived from the research will, in most cases, be kept for much longer or possibly indefinitely.

The results of the project may be published and will be available in the University of Otago Library (Dunedin, New Zealand) but every attempt will be made to ensure that you will not be identified.

If you change your mind, you can withdraw from the research up to 2 weeks after your interview.

What if Participants have any Questions?

If you have any questions about our project, either now or in the future, please feel free to contact either:-

Associate Professor Melanie Beres

School of Social Sciences

(03)479 8736

melanie.beres@otago.ac.nz

Dr Jeff Foote

Department of Management

(03) 479 5196

Jeff.foote@otago.ac.nz

This study has been approved by the University of Otago Human Ethics Committee. If you have any concerns about the ethical conduct of the research you may contact the Committee through the Human Ethics Committee Administrator (ph +643 479 8256 or email gary.witte@otago.ac.nz). Any issues you raise will be treated in confidence and investigated and you will be informed of the outcome.

Reference Number *23/002*

[7th January 2023]

IMPACT OF THE BUDGET – 19 FUNDING ON SEXUAL VIOLENCE SERVICE* CONSENT FORM FOR *PARTICIPANTS (Frontline Staff: Feedback hui)

I have read the Information Sheet concerning this project and understand what it is about. All my questions have been answered to my satisfaction. I understand that I am free to request further information at any stage.

I know that:-

1. My participation in the project is entirely voluntary;

2. I understand that by attending the hui I agree to take part in the project;

3. I am free to leave the hui at any point; If you share something you do not wish to be included in the research you can let us know afterwards.

4. Personal identifying information (the audio recording) will be destroyed at the conclusion of the project but any raw data on which the results of the project depend will be retained in secure storage for at least five years;

5. This hui involves discussion on the key findings and recommendations for change in the Crisis Support and Court Support services. You will be asked to give your feedback on what is working and what could improve in the Court Support Services and/or Crisis Support Services. The precise nature of the questions which will be asked have not been determined in advance, but will depend on the way the hui develops. In the event that the line of questioning develops in such a way that I feel hesitant or uncomfortable I may decline to answer any particular question(s) and/or may withdraw from the project without any disadvantage of any kind.

6. We are doing this evaluation on behalf of Ministry of Social Development

7. The results of the project may be published and will be available in the University of Otago Library (Dunedin, New Zealand) but every attempt will be made to ensure that I will not be identified.

I agree to take part in this project.

....

(Signature of participant) (Date)

.....

(Printed Name)

……..

Name of person taking consent

This study has been approved by the University of Otago Human Ethics Committee. If you have any concerns about the ethical conduct of the research you may contact the Committee through the Human Ethics Committee Administrator (ph +643 479 8256 or email gary.witte@otago.ac.nz). Any issues you raise will be treated in confidence and investigated and you will be informed of the outcome.

Interviews: Frontline staff, CVAs and victim/survivors

All participants received a copy of the Information Sheet and the consent form before the interview and were asked if they understood the Consent form and were asked for verbal consent before beginning the interview.

Reference Number: *23/002*

7th Feb 2023

IMPACT OF THE BUDGET – 19 FUNDING ON SEXUAL VIOLENCE SERVICES INFORMATION SHEET FOR PARTICIPANTS (Frontline Staff: Interviews)

Thank you for showing an interest in this project. Please read this information sheet carefully before deciding whether or not to participate. If you decide to participate we thank you. If you decide not to take part there will be no disadvantage to you and we thank you for considering our request.

What is the Aim of the Project?

The aim of the project is to understand the impact of the government's Budget -19 on the sexual violence sector specifically crisis support and court services.

What Type of Participants are being sought?

We are looking to interview people who are currently working in crisis support and/or court support services funded by the Ministry of Social Development from Budget 19. You must be currently be employed or volunteer at a Sexual Violence Crisis Support service and/or Court Support Service who is funded by the Ministry of Social Development. We are looking to interview 10-15 people involved in Court Support and 10- 15 people involved in Crisis Support. MSD/ TOAH-NNEST will not know who has agreed to be interviewed.

Once the evaluation is complete, there will be a publicly available report.

What will Participants be Asked to Do?

Should you agree to take part in this project, you will be asked to: be interviewed by a researcher online via Zoom. We expect the interview will last between 30 and 45 minutes. The interview is informal and will be like a conversation. The general line of questioning includes asking about your day to day work, what has changed in the last three years in terms of case-load, training, support and relationships with the wider sector. The precise nature of the questions which will be asked have not been determined in advance, but will depend on the way in which the interview develops. Consequently, although the University of Otago Human Ethics Committee is aware of the general areas to be explored in the interview, the Committee has not been able to review the precise questions to be used.

In the event that the line of questioning does develop in such a way that you feel hesitant or uncomfortable you are reminded of your right to decline to answer any particular question(s) and also that you may withdraw from the study up to two weeks after the interview without any disadvantage to yourself of any kind.

Anything you tell us will remain confidential to us. This means that we will not inform Ministry of Social Development or TOAH_NNEST, or anyone else about who participated in the study. It is likely that we will use short quotes from the interviews in the report. We will remove any potentially identifying information from the quotes so no one will know who it comes from. You will be given the option to review the quotes we use to confirm there are no identifying details. If you would like to review the quotes to for identifying information please mark this on the consent form.

Please be aware that you may decide not to take part in the project without any disadvantage to yourself of any kind.

What Data or Information will be Collected and What Use will be Made of it?

The interviews will be audio recorded then transcribed so we have an accurate record of what you say. The recordings and transcripts will be securely stored in such a way that only those mentioned below will be able to gain access to it. Information obtained as a result of the research will be retained for **at least 5 years** in secure storage. Any personal information held on the participants (contact details used to arrange the interview) may be destroyed at the completion of the research even though the data derived from the research will, in most cases, be kept for much longer or possibly indefinitely.

The results of the project may be published and will be available in the University of Otago Library (Dunedin, New Zealand) but every attempt will be made to ensure that you will not be identified.
If you change your mind, you can withdraw from the research up to 2 weeks after your interview.

What if Participants have any Questions?

If you have any questions about our project, either now or in the future, please feel free to contact either:-

Associate Professor Melanie Beres

School of Social Sciences

(03)479 8736

melanie.beres@otago.ac.nz

Dr Jeff Foote

Department of Management

(03) 479 5196

Jeff.foote@otago.ac.nz

This study has been approved by the University of Otago Human Ethics Committee. If you have any concerns about the ethical conduct of the research you may contact the Committee through the Human Ethics Committee Administrator (ph +643 479 8256 or email gary.witte@otago.ac.nz). Any issues you raise will be treated in confidence and investigated and you will be informed of the outcome.

Reference Number: *23/002*

7th Feb 2023

IMPACT OF THE BUDGET – 19 FUNDING ON SEXUAL VIOLENCE SERVICES* CONSENT FORM FOR *PARTICIPANTS (Frontline Staff: Interviews)

I have read the Information Sheet concerning this project and understand what it is about. All my questions have been answered to my satisfaction. I understand that I am free to request further information at any stage.

I know that:-

1. My participation in the project is entirely voluntary;

2. I am free to withdraw from the project up to two weeks after my interview;

3. Personal identifying information (the audio recording) will be destroyed at the conclusion of the project but any raw data on which the results of the project depend will be retained in secure storage for at least five years;

4. This project involves an open-questioning technique. The general line of questioning includes experience working in the sexual violence sector since Budget -19, effect of Budget-19 on your work and the sector as a whole. The precise nature of the questions which will be asked have not been determined in advance, but will depend on the way in which the interview develops and that in the event that the line of questioning develops in such a way that I feel hesitant or uncomfortable I may decline to answer any particular question(s) and/or may withdraw from the project without any disadvantage of any kind.

1. We are doing this evaluation on behalf of Ministry of Social Development

2. I would like to review any quotes from my interview for identifying details.
   - Yes
   - No

6. The results of the project may be published and will be available in the University of Otago Library (Dunedin, New Zealand) but every attempt will be made to ensure that I will not be identified.

I agree to take part in this project.

……..

Name of person taking consent

This study has been approved by the University of Otago Human Ethics Committee. If you have any concerns about the ethical conduct of the research you may contact the Committee through the Human Ethics Committee Administrator (ph +643 479 8256 or email gary.witte@otago.ac.nz). Any issues you raise will be treated in confidence and investigated and you will be informed of the outcome.

Reference Number: *23/002*

[*7th January 2023*]

IMPACT OF THE BUDGET – 19 FUNDING ON SEXUAL VIOLENCE SERVICES INFORMATION SHEET FOR PARTICIPANTS

(Victim-Survivors: Interviews)

Thank you for showing an interest in this project. Please read this information sheet carefully before deciding whether or not to participate. If you decide to participate we thank you. If you decide not to take part there will be no disadvantage to you and we thank you for considering our request.

What is the Aim of the Project?

The aim of the project is to understand the impact of the government's Budget -19 on the sexual violence sector specifically crisis support and court services.

What Type of Participants are being sought?

We are looking to interview people who used either a court support service and/or a crisis support service since 2020. The provider of your support will not know if you agreed to be interviewed and this project is not linked to the delivery of any service provided to you now or in the future.

Once the evaluation is complete, there will be a publicly available report.

What will Participants be Asked to Do?

Should you agree to take part in this project, you will be asked to: be interviewed by a researcher online via Zoom. We expect the interview will last between 30 and 45 minutes. The interview is informal and will be like a conversation. The general line of questioning includes your journey through Court Support and/or Sexual Violence Crisis Service; your experience of the service, and how the services supported you. We will not ask you about the experience that led you to seek support. The precise nature of the questions which will be asked have not been determined in advance, but will depend on the way in which the interview develops.

Consequently, although the University of Otago Human Ethics Committee is aware of the general areas to be explored in the interview, the Committee has not been able to review the precise questions to be used.

In the event that the line of questioning does develop in such a way that you feel hesitant or uncomfortable you are reminded of your right to decline to answer any particular question(s) and also that you may withdraw from the project up to two weeks after your interview without any disadvantage to yourself of any kind.

Anything you tell us will remain confidential to us. This means that we will not inform your service provider or anyone else about who participated in the study. It is likely that we will use short quotes from the interviews in the report. We will remove any potentially identifying information from the quotes so no one will know who it comes from. You will be given the option to review the quotes we use to confirm there are no identifying details. If you would like to review the quotes for identifying information please mark this on the consent form.

Please be aware that you may decide not to take part in the project without any disadvantage to yourself of any kind.

What Data or Information will be Collected and What Use will be Made of it?

The interviews will be audio recorded then transcribed so we have an accurate record of what you say. The recordings and transcripts will be securely stored in such a way that only those mentioned below will be able to gain access to it. Information obtained as a result of the research will be retained for **at least 5 years** in secure storage. Any personal information held on the participants (contact details used to arrange the interview) may be destroyed at the completion of the research even though the data derived from the research will, in most cases, be kept for much longer or possibly indefinitely.

The results of the project may be published and will be available in the University of Otago Library (Dunedin, New Zealand) but every attempt will be made to ensure that you will not be identified.

If you change your mind, you can withdraw from the research up to 2 weeks after your interview.

What if Participants have any Questions?

If you have any questions about our project, either now or in the future, please feel free to contact either:-

Associate Professor Melanie Beres

School of Social Sciences

(03)479 8736

melanie.beres@otago.ac.nz

Dr Jeff Foote

Department of Management

(03) 479 5196

Jeff.foote@otago.ac.nz

This study has been approved by the University of Otago Human Ethics Committee. If you have any concerns about the ethical conduct of the research you may contact the Committee through the Human Ethics Committee Administrator (ph +643 479 8256 or email gary.witte@otago.ac.nz). Any issues you raise will be treated in confidence and investigated and you will be informed of the outcome.

Reference Number *23/002*

[7th January 2023]

IMPACT OF THE BUDGET – 19 FUNDING ON SEXUAL VIOLENCE SERVICES
CONSENT FORM FOR *PARTICIPANTS (Victim-Survivors: Interview)*

I have read the Information Sheet concerning this project and understand what it is about. All my questions have been answered to my satisfaction. I understand that I am free to request further information at any stage.

I know that:-

1. My participation in the project is entirely voluntary;

2. I am free to withdraw from the project up to two weeks after my interview;

3. Personal identifying information (the audio recording) may be destroyed at the conclusion of the project but any raw data on which the results of the project depend will be retained in secure storage for at least five years;

4. This project involves an open-questioning technique. The general line of questioning includes my experiences of the Crisis Service and/or Court Support service; my journey through the service. The precise nature of the questions which will be asked have not been determined in advance, but will depend on the way in which the interview develops and that in the event that the line of questioning develops in such a way that I feel hesitant or uncomfortable I may decline to answer any particular question(s) and/or may withdraw from the project without any disadvantage of any kind.

5. It is possible that discussion of my experiences may create discomfort. The interviewer will be able to listen to any concerns and offer referrals to support agencies. I will also be given an information sheet with details of support agencies.

6. I would like to review any quotes from my interview for identifying details.

   - ○ Yes
   - ○ No

7. To reimburse me for my time I will be given a $30 grocery voucher

8. The results of the project may be published and will be available in the University of Otago Library (Dunedin, New Zealand) but every attempt will be made to ensure that I will not be identified.

I agree to take part in this project

....

(Signature of participant) (Date)

.....

(Printed Name)

……..

Name of person taking consent

This study has been approved by the University of Otago Human Ethics Committee. If you have any concerns about the ethical conduct of the research you may contact the Committee through the Human Ethics Committee Administrator (ph +643 479 8256 or email gary.witte@otago.ac.nz). Any issues you raise will be treated in confidence and investigated and you will be informed of the outcome.

Outcomes Hui

For the Outcomes Hui participants were sent the Information sheet and the consent form. At the beginning of the hui, the main points of the consent form were discussed the participants.

Appendix E– Interview Guides

INTERVIEW GUIDE FRONTLINE STAFF - Crisis Services

1. Preamble:

Explain about purpose of interview and how findings will be used.

Discuss the types of questions we will be asking, and the general topic areas.

Discuss consent form, then get verbal consent before starting interview.

- Ensure consent conversations includes explanation that interviewee can decide not to answer any question they don't want to and end the interview at any time.
- Ensure confidentiality is discussed (including limitations).

2. About you:

To start, we would like to know a bit about your role at [service].

a) What is your role at [insert organisation]?

- Note: there could be multiple roles/services they work in within the organisation – get info about each. Then narrow focus of interview on their work in the crisis support service (to the degree it is delineated from therapy/counselling, court support, prevention work etc).

b) How long have you worked in a crisis support role?

3. Supporting staff to provide quality services.

Thinking about the work you do with clients and the resources you have to do that:

a) Over the last 4 years [or since you started] have there been any changes to the types of support that you provide to clients or the ways that you do that?

- Prompts:
  - nature of support provided (i.e., we no longer do…; we have started doing…; social work, youth specific services);
  - the modality (i.e., online/digital, more (or less) in-person delivery)
  - working more directly or inclusively with whānau/supporters.

b) What has been the most unique support you have given to a client/whānau/supporters?

- Has your ability to provide unique and tailored support chanted in the last four years? (if yes, why; if No why)

c) Have staff employment levels changed in the last 4 years [or since you started]? How so?

- What has that meant for staff?
  - Prompts: lower caseloads, better staff well-being, improved retention of staff?
- What has that meant for clients?

- Prompt: improved quality of care / the ability to provide a more holistic or wrap-around service
- Prompt: the amount of time clients wait for service / the amount of time clients can have a service
- Prompt: the capacity to work with whānau/supporters?

d) What changes, if any, have you seen in professional development opportunities over the last 4 years [or since you started]?

- What has worked well (or not) for you / your team?
- What have those additional PD opportunities meant for staff? For clients?

e) Have there been any changes to your work environment over the last 4 years?

- Prompt: Good IT, enough office space, transport options?
- What have those changes meant for staff?
  - Prompt: Well-being? Job flexibility? Job satisfaction? Teamwork?
- What have those changes meant for clients?
  - Prompt: different ways of communicating with clients? Reduced barriers to clients accessing service? Better referrals?
- Have you observed any unintended (positive or negative) outcomes from changes?

f) Are there any other [other than increased staff, upskilling and work environment] supports for you in your role that could help with:

i. Maintaining your health and well-being?

ii. Supporting you to provide a quality service to clients?

4. <u>Service responsiveness to diverse needs</u>

Thinking about the ways that your service works with clients / service users who have differing needs because they are from, for instance, migrant, rainbow, disability, Māori, or Pasifika communities:

a) In what ways does your service aim to support different types of clients and their whānau/supporters?

- Prompt: for a bit of variety amongst differing needs across migrant, rainbow, disability, Māori, Pasifika etc communities.

b) How well do you think your service is able to meet the differing needs of clients and their whānau/supporters?

c) Has there been any change over the last 4 years in how well your service is able to meet those needs?

- Prompts: availability of culturally appropriate referrals, development of online services, improved disability/accessibility services

Thinking about the internal processes that your organisation uses to support you to work with clients/service users:

d) Have there been any recent (last 4 years) changes or initiatives aimed at making the service more responsive or appropriate to the range of people who use it?

- Prompts: training opportunities, cultural supervision; informal networks; leadership; values of the organisation?

e) [*For each example of change given*] What has that change / initiative meant for the way you work with people with diverse needs?

- Prompts: increased confidence in engaging with people who are different to me, ability to provide tailored support to victim/survivors/whānau with diverse needs, better engagement in the service by different types of people.
- Were there any unintended (positive or negative) outcomes for staff or service users from the changes?

f) How well (or not) do you think the changes have worked?

- What more would you like to do?
- What would that mean for your work?

5. <u>Supporting sector development and cohesion</u>

a) Have there been any changes [in last 4 years or since starting] in how you work collaboratively with other agencies also providing services to your clients?

- Prompt: Police, Safe to Talk, MEDSAC, ACC / ACC counsellors

  Safe to Talk: Have you had referrals from Safe to Talk - if yes, how well or not did the referral process work?

  Do they (the Worker) give details of Safe to Talk to clients? If not, is there any reason for not using Safe to Talk? If yes, How well or not does the service work for the clients?

  Have there been any unexpected outcomes of Safe to Talk (positive and negative)?

b) Have there been any changes [in last 4 years or since starting] in how you work network with other relevant organisations in the past few years?

- Prompt: meetings with mana whenua or local Kaupapa Māori groups, support to travel to meetings or conferences, money available to host networking opportunities?

c) [*If applicable*] How have these changes related to networking and/or agency collaboration changed your work?

- Prompt: better understanding of referral pathways, better understanding of cultural diversity/needs, improved professional relationships?
- What have they meant for clients in your view?
- Prompt: Smoother or more appropriate referrals, increased access to a wider range of support services for clients, increased ability to provide coordinated services to clients?

6. <u>Impacts and benefits</u>

a) [*If well-being not discussed yet*] Given what has been discussed about changes in the last four years [or since you started], what changes have you seen – positive or negative – that have had the biggest impact on your well-being as a staff member? In what ways?

b) Over the last four years, what change has contributed most positively to you being able to address the different needs of victim/survivors and people who care for them? In what ways?

c) In your view, have there been any changes in the overall quality of care for clients over the last four years?

   - What do you think this has meant for overall client satisfaction?

d) What do you think are the remaining needs for service quality and client satisfaction (thinking about those that could be addressed by increased service funding)?

7. Closing

   a) To wind up, we would like to ask some demographic questions about you.

   - What is your gender?
   - What are your ethnicities?
   - What is your age?

Thank the participant for their contribution to our shared efforts to provide good services to victim/survivors of sexual harm.

Assure them we will use their thoughts carefully – by being careful with their confidentiality, by considering what they had to say carefully, and by ensuring that our report will be helpful for services and government as they develop services and plan improvement.

INTERVIEW GUIDE FRONTLINE STAFF – Dual Crisis and Court support roles

1. Preamble:

Explain about purpose of interview and how findings will be used.

Discuss the types of questions we will be asking, and the general topic areas.

Discuss consent form, check that we have written consent, then get verbal consent before starting interview.

- Ensure consent conversations includes explanation that interviewee can decide not to answer any question they don't want to and end the interview at any time.
- Ensure confidentiality is discussed (including limitations).

2. About you:

To start, we would like to know a bit about your role at [service].

a) What is your role at [insert organisation]?

- Note: there could be multiple roles/services they work in within the organisation – get info about each. Then narrow focus of interview on their work in the crisis support service (to the degree it is delineated from therapy/counselling, court support, prevention work etc).

- How do these dual roles impact on you as a sexual violence support worker? OR

b) How long have you worked in a crisis support role?

We are now going to focus on the Court Support part of your role.

3. <u>The Court Support service and victim/survivors and whānau/supporters</u>

We would like to learn how the establishment of court support services has affected clients who are dealing with going to court. So we would like your views on how particular aspects of the service help (or don't help) clients deal with those processes.

a) In what ways do you provide psycho-social support as part of the service and how does this help clients to deal with going to court?

- Prompts:
  - learn & apply strategies to manage feelings, develop supportive mental strategies,
  - support to engage in longer-term counselling or health/social work services,
  - staying engaged with criminal justice / court processes,
  - remain engaged in relationships, parenting, work, healthy lifestyle or community activities,
  - improve psychological outcomes and sense of satisfaction from engaging in the criminal trial process?

b) In what ways do you provide information about, and preparation for, going to court and how does this help clients and their whānau/supporters to deal with going to court?

- Are there any gaps in information resources and preparation tools that reduce the effectiveness or appropriateness of the service, especially those from particular communities or with diverse needs?

c) What types of practical support for going to court do provide you through the service and how does this help clients and their whānau/supporters?

- Prompt: Access to grants, travel assistance, childcare; referral to other services?
- Prompt: Before, during, and post-trial?
- Prompt: Increased trust in the service / justice system, reduced stress, increased ability to cope with the Court process?

d) In what ways do you work to advocate for clients and their whānau/supporters throughout the court process (pre, during and post) and how do you think this helps them?

- Prompt: thinking about both direct advocacy and indirect, such as through interagency relationships and networks, or collaborative policies and processes

e) In what ways do you involve the whānau/supporters of clients going to court? And what impacts does doing so have?

The next set of questions is focused on the Crisis Services you provide.

4. Supporting staff to provide quality services.

Thinking about the work you do with clients and the resources you have to do that:

a) Over the last 4 years [or since you started] have there been any changes to the types of support that you provide to clients or the ways that you do that?

- Prompts:
  - nature of support provided (i.e., we no longer do…; we have started doing…; social work, youth specific services);
  - the modality (i.e., online/digital, more (or less) in-person delivery)
  - working more directly or inclusively with whānau/supporters.

b) What has been the most unique or bespoke support you have given to a client/whānau/supporters?

- Has your ability to provide unique and tailored support chanted in the last four years? (if yes, why; if No why)

c) Have staff employment levels changed in the last 4 years [or since you started]? How so?

- What has that meant for staff?
  - Prompts: lower caseloads, better staff well-being, improved retention of staff?
- What has that meant for clients?
  - Prompt: improved quality of care / the ability to provide a more holistic or wrap-around service
  - Prompt: the amount of time clients wait for service / the amount of time clients can have a service
  - Prompt: the capacity to work with whānau/supporters?

d) What changes, if any, have you seen in professional development opportunities over the last 4 years [or since you started]?

- What has worked well (or not) for you / your team?
- What have those additional PD opportunities meant for staff? For clients?

e) Have there been any changes to your work environment over the last 4 years?

- Prompt: Good IT, enough office space, transport options?
- What have those changes meant for staff?
  - Prompt: Well-being? Job flexibility? Job satisfaction? Teamwork?
- What have those changes meant for clients?
  - Prompt: different ways of communicating with clients? Reduced barriers to clients accessing service? Better referrals?
- Have you observed any unintended (positive or negative) outcomes from changes?

f) Are there any other [other than increased staff, upskilling and work environment] supports for you in your role that could help with:

i. Maintaining your health and well-being?

ii. Supporting you to provide a quality service to clients?

The remaining questions apply across both CS and CSS services

5. Service responsiveness to diverse needs

Thinking about the ways that your service works with clients / service users who have differing needs because they are from, for instance, migrant, rainbow, disability, Māori, or Pasifika communities:

a) In what ways does your service aim to support different types of clients and their whānau/supporters?

- Prompt: for a bit of variety amongst differing needs across migrant, rainbow, disability, Māori, Pasifika etc communities.

b) How well do you think your service is able to meet the differing needs of clients and their whānau/supporters?

c) Has there been any change over the last 4 years in how well your service is able to meet those needs?

- Prompts: availability of culturally appropriate referrals, development of online services, improved disability/accessibility services

Thinking about the internal processes that your organisation uses to support you to work with clients/service users:

d) Have there been any recent (last 4 years) changes or initiatives aimed at making the service more responsive or appropriate to the range of people who use it?

- Prompts: training opportunities, cultural supervision; informal networks; leadership; values of the organisation?

e) How well (or not) do you think the changes have worked?

- What more would you like to do?
- What would that mean for your work?

g) What kinds of professional development or organisational supports are in place that support you to meet the diverse needs of different types of clients?

- Prompt: Training to provide information to victim/survivors on trial and court process; professional development in clinical skills; professional development to be responsive to diverse groups
- What is worked well or not? Why?
  - What has this meant? For you? For victim/survivors and people who support them?

h) How well do you think that staff employment levels meet the level of service need and what are the impacts for the quality-of-service provision?

i) Are there any additional (other than increased staff and upskilling) supports for you in your role that would help with:

iii. Maintaining your health and well-being?

iv. Supporting you to provide a quality service to clients?

6. Supporting sector development and cohesion

a) Have there been any changes [in last 4 years or since starting] in how you work collaboratively with other agencies also providing services to your clients?

- Prompt: Police, Safe to Talk, MEDSAC, ACC / ACC counsellors
- Safe to Talk:
  - Have you had referrals from Safe to Talk - if yes, how well or not did the referral process work?
  - Do they (the worker) give details of Safe to Talk to clients? If not, is there any reason for not using Safe to Talk? If yes, How well or not does the service work for the clients?
  - Have there been any unexpected outcomes of Safe to Talk (positive and negative)?

b) Have there been any changes [in last 4 years or since starting] in how you work network with other relevant organisations in the past few years?

- Prompt: meetings with mana whenua or local Kaupapa Māori groups, support to travel to meetings or conferences, money available to host networking opportunities?

c) [*If applicable*] How have these changes related to networking and/or agency collaboration changed your work?

- Prompt: better understanding of referral pathways, better understanding of cultural diversity/needs, improved professional relationships?
- What have they meant for clients in your view?
- Prompt: Smoother or more appropriate referrals, increased access to a wider range of support services for clients, increased ability to provide coordinated services to clients?

7. Impacts and benefits

a) [*If well-being not discussed yet*] Given what has been discussed about changes in the last four years [or since you started], what changes have you seen – positive or negative – that have had the biggest impact on your well-being as a staff member? In what ways?

b) Over the last four years, what change has contributed most positively to you being able to address the different needs of victim/survivors and people who care for them? In what ways?

c) In your view, have there been any changes in the overall quality of care for clients over the last four years?

- What do you think this has meant for overall client satisfaction?

d) What do you think are the remaining needs for service quality and client satisfaction (thinking about those that could be addressed by increased service funding)?

8. Closing

a) To wind up, we would like to ask some demographic questions about you.

- What is your gender?
- What are your ethnicities?
- What is your age?

Thank the participant for their contribution to our shared efforts to provide good services to victim/survivors of sexual harm.

Assure them we will use their thoughts carefully – by being careful with their confidentiality, by considering what they had to say carefully, and by ensuring that our report will be helpful for services and government as they develop services and plan improvement.

INTERVIEW GUIDE VICTIM/SURVIVORS – Crisis Support

1. Preamble:

Explain about purpose of interview and how findings will be used.

Discuss the types of questions we will be asking, and the general topic areas.

Discuss consent form, then get verbal consent before starting interview.

— Ensure consent conversations includes explanation that interviewee can decide not to answer any question they don't want to and end the interview at any time.

— Ensure confidentiality is discussed, including that our reporting will not use any information that could identify them to others, including their service provider.

2. Accessing the crisis service:

To start, we would like to know a bit about how you connected with the crisis service:

a) How did you find out about the service?

- Prompts: Referral from Safe to Talk, other helping agency or Police etc; Self-help (e.g., phone, internet search, brochure); Whānau/supporters > Do you remember if someone suggested that you get in touch with the service?

b) How did you have contact with and use the service?

- Prompts: telephone (from or to), text message, online, social media, face-to-face sessions. Note that there could be several, follow up for all:
- Are there other ways of connecting with or using the service that could have worked better for you? Why?

c) How soon did you hear back from the service when you initially made contact?

- What did this level of responsiveness mean for you?
- In relation to your ongoing use of the service, how well did that work for you in terms of timeliness, availability, or pace?

3. The services received:

We want to know about what the Crisis Service provided to you, what worked for you and any challenges.

a) Can you tell me about what kind of help the service provided you with:

- Prompts:
  - **i.** health or medical information or referral for sexual harm (including MEDSAC)
  - **ii.** information or help with reporting to police
  - **iii.** emotional support and talking
  - **iv.** being available to talk and care when needed
  - **v.** information about your experience and what to expect
  - **vi.** help with talking to supporters (e.g., friends/family/whānau)
  - **vii.** social work support or practical information about accessing other services for things like housing, income support, health or disability needs (non-sexual harm)
  - **viii.** advocating for you with people or services (e.g., employers, WINZ, doctors)
  - **ix.** referral to longer term support such as counselling or ACC

b) How well (or not) did those kinds of help work for you?

- Did they reflect what you felt you needed at the time?

c) Was the service available to you for as long as you felt you needed it?

d) In what ways, if any, were your whānau/supporters included in service that you received?

- What worked well (or not) for you in this regard?
- What did it mean for your whānau/supporters that were included in that way (or not)?

4. <u>Cultural responsiveness</u>

a) When you first approached the service, were you asked about your culture and/or identity and how best to support you? (e.g., pronouns, language, accessibility)

b) How comfortable did you feel at the service?

c) How well (or not) do you think you were provided with support that fitted with who you are or the disabilities that you identify as having?

- What did that mean for you?

d) Thinking about the information, resources or any referrals to other services you may have got. How well (or not) did they reflect your cultural, identity or disability needs?

- What did that mean for you?

5. <u>Referral to other services</u>

Note, you can be relatively brief if this has been covered well in the 'services received' section above.

a) Are you aware of the *Safe to Talk* phone/text line?

- If so, did you use it and how well (or not) did *Safe to Talk* work for you?

b) Were you referred to any other places or services for support or practical help?

- [If yes] What aspects of that referral process worked well (or not) for you?

c) Thinking about the contact with other agencies that you were referred to, in what ways, if any, did you feel that the necessary information about who you are [e.g., identity/ ethnicity/disability] was available to them?

- What did that mean for your support?

6. Benefits and impacts of the service received:

a) What do you think were the benefits for you from having accessed the crisis service?

- Prompts:
  - **i.** being better able to manage the physical or emotional effects of sexual harm,
  - **ii.** being able to increase safety or report to Police or get legal help,
  - **iii.** support for engaging with longer-term counselling or health/social work services,
  - **iv.** remain engaged in relationships, parenting, work, healthy lifestyle or community activities,
  - **v.** improved psychological health or sense of well-being / reduced substance use, self-harm, feelings of hopelessness or despair etc.
- What did these benefits mean for you?

b) What do you think were the benefits of the service for your whānau/supporters (if any)?

c) What do you think contributed most to those benefits?

d) Was there a type of help that was not available that would have been good for you?

- What would they have meant for your overall experience?

e) Were they any unexpected outcomes (positive or negative) from receiving the service?

7. <u>Closing</u>

a) To wind up, we would like to ask some demographic questions about you.

- What is your gender?
- What are your ethnicities? Do you have Māori whakapapa?
- What is your age?
- What city/town you currently live in?
  - Is that the same place you were living when you used the service we are talking about today? If not, where were you based then?
- Are there any religious or cultural groups you identify with?
- Do you have any disabilities that you live with?
- Are you a member of the rainbow community?

Thank the participant for their contribution to our shared efforts to provide good services to people experiencing crisis after sexual harm.

Assure them we will use their thoughts carefully – by being careful with their confidentiality, by considering what they had to say carefully, and by ensuring that our report will be helpful for services and government as they develop services and plan improvement.

Check if they have anything left to say. Check they have contact information for support services. Remind them we will call them in a week to check-in (unless they voluntarily say they don’t want us to – it’s not a question, but it is opt out.).