'A different way of doing it.'
Providing domestic violence services during COVID

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**EXECUTIVE SUMMARY**

**INTRODUCTION**

DV West provides specialist domestic violence services through four refuges, transitional housing, outreach support, a centralised intake and assessment service, Domestic Violence Response Enhancement (DVRE) program for women in temporary accommodation, group programs for women and children and in-house counselling.

In response to the COVID 19 pandemic, DV West moved quickly to put in place policies and resources to support remote working arrangements. This included: making sure that staff had ergonomic workstations, internet, communication software and phones; introducing electronic brokerage; and implementing hygiene and social distancing protocols in refuges. To maintain communication across the organisation, daily routines such as morning and afternoon site meetings were transferred into the remote working arrangements and Zoom meetings were implemented for all staff to stay connected and to provide a forum to promote staff health and well-being.

**THE STUDY**

This study was undertaken in the context of an anticipated increase in domestic violence during the COVID 19 pandemic and widespread concerns about the additional barriers that the pandemic and the associated ‘lockdown’ posed to women’s help seeking and consequently, to providing domestic violence services.

Despite the rapid and radical restructuring of service provision necessitated by health imperatives arising from COVID 19, both service data and staff feedback indicated that many positive outcomes were being achieved for clients. Service data for the period April – September indicated that, during the period including the “hard” lock down:

- There was a 91% increase in outreach clients
- There was a 34% decrease in the number of women and children in our crisis accommodation. Three of our four refuges are large communal houses that were unable to accommodate the same amount of people due to the COVID social distancing health regulations
- The percentage of clients achieving their case management goals was 66%. This is over three times the AIHW reported national average (19%)
- The number of self-referrals increased by 57%
- The number of Aboriginal and Torres Strait Islander clients assisted increased by 42%
- There was a 45% increase in self-referrals for Aboriginal and Torres Strait Islanders

This data was consistent with feedback provided by staff indicating many positive outcomes in their work with clients, including: faster and easier access to essential services and resources; the ability to support more clients and to offer all referred women a service; achieving women’s case plans in a shorter time; stronger client engagement; and more time to talk with clients with no travel or rushing from one appointment to the next. These changes were occurring in the context of more streamlined process in other services and improved relationships with these services.

The aim of the study was to understand how the organisation had achieved positive outcomes in a challenging environment and to explore how the learning from this period of innovation could inform ongoing practice. It involved interviews with 22 staff of DV West (case managers and managers), which explored their experiences of delivering domestic violence services during the change to remote working.

Telephone interviews were conducted at the end of July 2020, approximately four months after the introduction of remote working arrangements. At this time, the ‘hard’ lock down had been eased, enabling some limited face-to-face work, but the surge in the virus in Victoria was raising concerns about a potential second wave of infections in NSW.
Making It Work

Four factors emerged as core to the organisation’s ability to achieve positive outcomes:

Leadership

Decisive and proactive leadership from the CEO and team managers was consistently cited by staff as essential to their confidence and success in implementing the new mode of service delivery. As one respondent noted, ‘jumping sooner rather than later’ before the broader shutdown gave the organisation more time to put plans and resources in place.

Better Able to Focus

All staff talked about the ways in which the changed arrangements facilitated a more focused response to clients, with fewer interruptions and less interaction in a busy office environment. At the same time, the support and camaraderie that sustain staff in domestic violence service delivery were maintained via regular virtual team and all-of-organisation meetings.

Meeting on the Woman’s Terms

Staff were very thoughtful about how they had been able to help many women so effectively, without being able to have face-to-face contact. One strong idea was that help could be accessed more on the women’s terms, reducing anxiety, shame and the power imbalance that could be involved in attending a formal appointment at a service. Many women’s engagement with the service, including with counselling, was found to be stronger and more sustained, which staff attributed to the easier access provided by phone contact; anxiety about missed appointments did not become a barrier to further contact. Being able to access help without a formal appointment also addressed the practicalities of women’s lives such as access to transport and arranging care for children.

Applying and Extending Existing Good Practices

The interviews provided several examples of the ways in which the staff applied existing good practices to the new situation.

Listening to Women

Staff commented that despite offering flexible options for communication to women, most preferred the telephone and texting to visual means of communication. Consistent with their feminist practice, the staff were prepared to listen and respond to women’s preferred ways of receiving the service, rather than acting on assumptions.

Safety

Several factors have been suggested as potentially increasing the risk and severity of domestic violence during the COVID pandemic. These include, victims and offenders spending more time together and increased social isolation, coupled with decreased social movement, which can also limit women’s opportunities to seek help. This raises concerns about how to offer help safely to women in this context and particularly, how to address technologically facilitated abuse with increased reliance on technology to reach women. In discussing the management of these issues, in the context of increased risk during COVID, staff indicated that they drew on prior specialist e-Safety training that the organisation had facilitated and on their existing practices regarding safe contact with women, including addressing the risk of technologically-facilitated abuse/stalking.

‘A different way of doing it.’
Despite extensive efforts to support children, for example, dropping off activities, providing information about online activities, referring children to counselling and keeping the children ‘in view’ when talking with women, the lack of direct contact with children during the COVID lockdown period created a service gap from the perspective of many of the staff. Lack of opportunity to connect directly with children reduced the ability to provide a holistic approach to the family.

These positive outcomes were not achieved without meeting considerable challenges. Remote working was less suited to the needs and context of several client groups. Remote working was less suited to the needs and context of several client groups.

Staff identified older women and women whose first language was not English, as less well suited to remote working. Some older women were not sufficiently skilled with the use of technology or did not have access to it. When CALD women had limited windows for safe contact, arranging telephone interpreters could be difficult.

Although all the staff acknowledged that they had been able to assist women effectively, particularly the essential practicalities of linking them with services and resources, many commented on the ways in which lack of face-to-face contact with the women affected opportunities to build rapport and relationships. In addition, important things, such as the extent of injuries, could be missed without face-to-face contact. Aboriginal staff raised the importance of personal contact for Aboriginal clients.

All respondents talked about the impacts of bringing their work into the home, and the many challenges this presented, for example, dealing with the distress of clients in their home rather than in the workplace. While the advantages of saving travel time to work were widely acknowledged, paradoxically, the lack of travel time impacted for some on their ability to separate work and homelife, as the travel time had provided winding down and debriefing time. While the flexibility of working from home had many advantages, such as more time with family due to less commuting time, staff were also juggling a range of responsibilities, such as caring for children.

Not all women had access to technology, or to the skills to use it. This limited their ability to utilize some of the streamlined processes that had been introduced, but which required, for example, the capacity to scan documents and use email.

Increased flexibility in processes by other agencies.

In addition to the more flexible practices introduced by large agencies, the shared experience of working remotely across services during the pandemic was identified by many staff as contributing to smoother working relationships with the agencies with whom they frequently advocated for resources for their clients, such as Victim Services, Housing and Centrelink. Again, respondents made the point that building relationships with other services was something that DV West had always seen as essential, and which they continued in the changed work environment.
OUTCOMES FOR THE ORGANISATION

Staff reported that DV West’s proactive approach, the care that was applied to ensuring the health and safety of clients and staff, and the attention paid to ensuring that remote working was well resourced, resulted in enhanced loyalty to the organisation. The shared experience of forging new work practices while maintaining strong team connections and support, was reported by many staff as contributing to closer collegiate relationships. The more frequent whole-of-organisation meetings were also reported to have improved relationships across the four teams, resulting in an increased sense of being part of one organisation.

THINGS TO CONSIDER KEEPING POST COVID

A mixture of face-to-face and working from home

Most respondents favoured the organisation considering a more flexible blend of service styles into the future. This arose from reflection about the assumption that all work needed to be undertaken face-to-face and consideration of where it was essential and where alternate approaches could be employed, with the advantages of efficiencies such as reduced time spent travelling and stronger engagement with some clients. It would also continue the flexibility that had been appreciated by an all-female workforce, many of whom have significant caring responsibilities. Flexibility would also meet the needs of staff who preferred office-based work.

Maintain streamlined systems for practical support

The advantages of the streamlined processes, both within the organisation and by other services, had been proven both more efficient for organisations and more suited to the needs of clients who were managing complex and difficult domestic violence experiences.

LESSONS LEARNED

Be prepared to challenge assumptions

This experience has challenged assumptions about the work, and the staff and organisation demonstrated willingness to try new approaches and to learn from this unique experience.

Communal refuge accommodation limited the availability of crisis accommodation

As three of the organisation’s four crisis refuges are based in large communal houses, COVID health requirements reduced the number of women and children who could be accommodated. This highlighted the benefits of the ‘core and cluster’ model of refuge accommodation that is being implemented in several other states.

Separate work and home

Respondents reported developing strategies to establish and maintain firm boundaries between work and home life. These strategies were unique to their situations, for example, long dog walks to mark the end of work time and leaving and entering the house to indicate the beginning and end of the workday to children.

Identify client groups whose needs are best met by face-to-face services

The findings of the study identified the importance of providing face-to-face services to Aboriginal women, CALD women, older women, and children.

Maintain contact with the team

The attention to maintaining contact both within the four teams and across the whole organisation, was recognised by staff as effectively addressing the potential risks of isolation and loss of mutual support.

Self-care

Respondents identified self-care as essential for those providing domestic violence services and increasingly so in the context of the COVID pandemic.
CONCLUSION

The new and very different working arrangements necessitated by the COVID pandemic were implemented in a way that enabled the organisation to continue to provide a high quality service, and to continue to achieve excellent outcomes for women and their children. Across the interviews with staff, four themes that help to explain these outcomes came through strongly. These were:

- The importance of leadership.
- Maintaining and strengthening connections across the organisation.
- Willingness to challenge taken-for-granted assumptions and try new approaches.
- Building on existing good practices in domestic violence service delivery.
INTRODUCTION

THE LANDSCAPE OF DOMESTIC VIOLENCE DURING COVID

This study was undertaken in the context of an anticipated increase in domestic violence during the COVID-19 pandemic and widespread concerns about the additional barriers that the pandemic and the associated ‘lockdown’ posed to women’s help seeking and consequently, to providing domestic violence services.

In response to these concerns, the Australian Institute of Criminology conducted an online survey on the prevalence and nature of domestic violence during the initial stages of the COVID-19 pandemic (February – May 2020). From a nationally representative sample of 15,000 women, they found that:

- 4.6 percent of women experienced physical or sexual violence from a current or former cohabiting partner.
- Almost 6 percent experienced coercive control (defined as 3 or more forms of a of emotionally abusive, harassing or controlling behaviour) and 11.6 percent experienced at least one form of emotionally abusive, harassing or controlling behaviour.
- Two-thirds of women who experienced physical or sexual violence by a current or former cohabiting partner since the start of the COVID-19 pandemic said the violence had started or escalated during this period.
- Many women, particularly those experiencing more serious or complex forms of violence and abuse (i.e. controlling behaviours and physical and sexual violence), reported that safety concerns were a barrier to help-seeking.

ESTABLISHING NEW COVID PRACTICES

When the pandemic first occurred, it was hard to know with surety what action to take to protect the community, staff and clients. The health information was evolving and changing regularly and there were varying views across the sector that ranged from indifference to anxiety. Consultation with overseas colleagues in countries where the virus was widely spread, indicated the benefits in making decisions and arrangements early.

DV West moved quickly to put in place policies and resources to support remote working arrangements. This included making sure that staff had proper ergonomic workstations, internet, phones, that refuges had hygiene and social distancing protocols in place, that all staff had software to enable different forms of communications with one another, other agencies and with the women and children supported by our services. Daily routines such as morning and afternoon site meetings were incorporated into the remote working arrangements. The Managers and the CEO met regularly during the establishment phase to monitor the implementation and address issues as they arose.

The health status of the women and children who were residing in the crisis refuges (particularly the three communal houses) were considered in decisions about taking in new clients.

Staff made more frequent contact with women and children in the refuges, 26 transitional houses and in the outreach program. Each of the four services sites and the central office have physical variances and house staff with different health vulnerabilities to COVID. DV West’s Business Continuity Plan contained guidance and protocols specific to each site for staff and clients. DV West increased brokerage to clients for food, transport and other services and implemented electronic brokerage (e.g. electronic shopping cards) and ceased charging accommodation fees (usually 20% of income) to allow for additional costs to families.

Flexibility of working was important, knowing that workers’ home environments varied: some had children or family members at home, or their partner was also working from home. Zoom meetings were established for all staff to stay connected and to introduce activities that focused on staff health and well-being.

Given the seismic shift for staff in their working arrangements and for clients in the way they received services, it was important to maintain consistency in communications and to underpin changes in arrangements with clear information and reasoning.

OUTCOMES DURING COVID

Collation of data for the period April – September including the “hard” lock down:

- There was a 91% increase in outreach clients
- There was a 34% decrease in the number of women and children in our crisis accommodation. This was due to three of our four refuges being large communal houses requiring reduced numbers to meet the COVID health regulations
- The percentage of clients achieving their case management goals was 66%. This exceeds the AIHW reported national average (19%) more than three-fold
- The number of self-referrals increased by 57%
- The number of Aboriginal and Torres Strait Islander clients assisted increased by 42%
- There was a 45% increase in self-referrals for Aboriginal and Torres Strait Islanders.

OUTCOMES REPORTED BY STAFF

This data was consistent with feedback provided by staff indicating many positive outcomes in their work with clients. This occurred in the context of more flexible processes and improved relationships with other services, including easier access to services for clients through direct phone contact with staff in other services who were also working remotely (e.g. Centrelink social workers), improved service networks and increase in the occurrence of case conferencing resulting in better coordinated approach in supporting the client. The resulting improved and faster outcomes for women and children, are summarised below.

- More efficient, faster outcomes (e.g. Victims services, Housing, Start Safely)
- More clients able to be supported, and all referred women could be offered a service
- More time to talk with clients with no travel or rushing from one appointment to the next
- More frequent contact with clients by staff through telephone or zoom than when meeting face-to-face
- Receipt of positive client feedback about the support
- More clients staying engaged
- Increase in achieving women’s case plans in a shorter time
- Reduction in worker authority and women stepping into empowerment sooner
- Increased regularity of support for women and children in THP (Temporary Housing Properties)
- Less pressure and stress on clients entering the refuge to complete forms immediately
- Having more time to document the case plan and complete data updates

PURPOSE OF THIS REPORT

This report presents the findings of interviews with 22 staff of DV West (case managers and managers). These explored their experiences of delivering domestic violence services during the remote working that was introduced in March 2020 in response to the health risks posed by COVID 19. The aim of the interviews was to understand how the organisation had achieved positive outcomes in a challenging environment and to explore how the learning from this period of innovation could inform ongoing practice. Telephone interviews were conducted at the end of July 2020, approximately four months after the introduction of remote working arrangements. At this time, the ‘hard’ lock down had been eased, enabling some limited face-to-face work, but the surge in the virus in Victoria was raising concerns about a potential second wave of infections in NSW.
MAKING IT WORK

This section discusses the key factors that staff identified as contributing to the many positive outcomes for clients.

LEADERSHIP

‘From the top down’

The strongest theme in the staff’s responses about the factors that contributed to the positive outcomes was the quality of leadership, both overall by the CEO and of teams by each of the managers.

“I think it’s definitely, it just really helped to have such clear leadership and direction from [CEO]. I think that’s been a really sort of fundamental part of why it’s been so successful. I don’t think there’s really been any change in the quality of services that we provide. There hasn’t been any downslide in referrals because the services aren’t as good. I think honestly where we’re carrying on providing excellent services as we did before. And I think part of that is really having such strong managers in the teams and such strong leadership from the top.”

The leadership was experienced as decisive and proactive, which gave staff confidence against a context of growing anxiety in the broader community. As one respondent noted, ‘jumping sooner rather than later’ before the broader shutdown gave the organisation more time to put plans and resources in place.

From the perspective of the team managers, the leadership from the CEO flowed onto the support that they were able to offer to their teams. For example, a manager explained how the CEO’s leadership modelled a way in which she could lead and support her team:

And [CEO] just made a decision and was just really stable in that. And I think that I really respected that because I felt like she put the welfare of staff and the clients first. Just went, “This is important that we do that.” So going into it, I felt valued as a person, as a worker, and I tried to carry that on then into the staff as well, to go, “Yeah, we have values and we are important.” So, for me, it was kind of like, “Yes, let’s do this.”

Team leaders also supported each other: ‘I think for me, I’ve had such good support from the other managers and, of course, Catherine Gander.’ This clearly flowed through to all the staff as many spoke of the importance of the support they experienced from their managers. For example: ‘I just think that [Manager] is absolutely amazing. She’s there, you pick up the phone, you call her, or you text her, or whatever, and she’s there. Like, she’s amazing, and got such a great team. We all work together really well.”

‘A different way of doing it.’
All staff talked about the ways in which the changed arrangements facilitated a more focused response to clients. At the same time, the support and camaraderie that sustain staff in domestic violence service delivery were maintained via regular virtual team and all-of-organisation meetings.

“A flow-on effect was that there was better documentation of work, enabling clearer identification of outcomes for clients:

And the case plans I think are a lot better as well .. Say I did write someone a housing letter and then straight away something happened, they got a house, and then I never went back and put it in the case plan to say caseworker wrote a letter, right away house was approved, it tells the outcome … And when [manager] sends an email every month to say, “Let me know your outcomes for the month.” And when you write it all down, there’s heaps.\n
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FOR WOMEN
MEETING ON THE WOMAN’S TERMS

‘So then we’re doing it on their terms in their own safe space where they feel no shame’

Staff were very thoughtful about how they had been able to help many women so effectively, without being able to have face-to-face contact. One strong idea was that help could be accessed more on the women’s terms, reducing anxiety, shame and the power imbalance that could be involved in attending a formal appointment at a service.

I think it’s the phone. I think it just sort of mediates. Firstly, it disappears the building. It disappears the building. They don’t have to come in and walk through an office where everyone knows why they’re there and sit down in a space that’s not theirs and tell their entire story … It also, for me as a worker, I’m able to really draw a woman’s attention to “but what do you need from me? We’ve got to work this out now.” … I haven’t had one person on outreach not answer the phone, not answer texts. But I’ve had before COVID, women would sometimes just not turn up because it’s just too much.

And the other thing, which is a massive thing, is the power balance. If someone comes into the refuge, it doesn’t matter how conscious you are about not creating that feeling, they’re always going to be because you’re standing there with your piece of paper and they’re coming to your space. Then, it doesn’t matter if you’re conscious of that, we’re still in a position of authority.

Many women’s engagement with the service, including with counselling, was found to be stronger and more sustained, which staff attributed to the easier access provided by phone contact, because anxiety about missed appointments did not become a barrier to further contact:

I think women have engaged better and I think what happens is that we make appointments and women are overwhelmed. They’ve never been to that property before. They’ve never met you face-to-face and sometimes it becomes overwhelming and they don’t turn up or they miss the bus … And then it’s almost like they feel shame or they’re embarrassed and then they tend to not take your calls after that. Whereas I think during this time, for some clients, it’s been much easier just to have that phone and they can answer the phone and if they missed a call, they can text back and say, “Sorry, I missed your call.” But there’s not that, “Okay, well let’s make another appointment for you to come to the office.” And then they’re going like, “I really don’t want to come to the office because I don’t know where I’m going and I don’t know who you are and I’m scared.”
Being able to access help without a formal appointment also addressed the practicalities of women’s lives such as access to transport and arranging care for children: ‘It’s much easier and probably a little bit less stressful for them to accept a phone call than for us to organise a meeting, work out what we’re going to do with the kids whilst meeting.’ In a similar vein, the provision of practical assistance also helped to engage women:

The ready meals have been so helpful. I’ve got a lot of pregnant women who are having babies, who already got like three children. And they’re like, “Yes, please”. And they’re single parents because of the DV. So, I found that really helpful. And then the clients engage, because it’s like, “Oh yes. I don’t only just get to talk to you, but there’s that practical need”.

APPLYING AND EXTENDING EXISTING GOOD PRACTICES

The interviews provided several examples of the ways in which the staff applied existing good practices to the new situation.

LISTENING TO WOMEN

It might have been anticipated that women would have wanted to use technology that employed a face-to-face facility, as face-to-face work has been the core of service delivery in the past. Staff commented that despite offering flexible options for communication to women, most preferred the telephone and texting to visual means of communication, even when that was available to them. Consistent with their feminist practice, the staff were prepared to listen and respond to women’s preferred ways of receiving the service, rather than acting on assumptions.

I invited the team just to get a bit creative around it, but also to listen to what the women were wanting. So we actually found that a lot of women didn’t want to do video calls. They were actually happy just to continue doing emails and phone calls and text messages. We found that they just mainly just wanted to have the phone contact. So even though we’re being creative around how we can engage, we were also really listening to what women wanted.
SAFETY

Several factors have been suggested as potentially increasing the risk and severity of domestic violence during the COVID pandemic. These include, victims and offenders spending more time together and increased social isolation, coupled with decreased social movement, which can also limit women’s opportunities to seek help. This raises concerns about how to offer help safely to women in this context and particularly, how to address technologically-facilitated abuse with increased reliance on technology to reach women. In discussing the management of these issues, staff indicated that they drew on prior specialist e-Safety training that the organisation had facilitated and on their existing practices regarding safe contact with women, including addressing the risk of technologically-facilitated abuse/stalking, while acknowledging the increased risk during COVID. This is a further example of the organisation applying existing good practice in this changed environment.

Nothing any different than we usually do. It’s part of our practice anyway to know they’ve got their location turned off and always check that they’ve got a password on the email or we wouldn’t send anything unless we know that it was safe to do so. Again, it’s just about keeping that in your psyche that, as I say, that’s part of our practice, so it didn’t really change that.

One of the issues was that partners were often working at home ..., and this goes back to Intake and how fantastic they are, when speaking with women around how do we contact you? What would you like us to do? Then, making sure our numbers are private and not leaving messages. But, I think Intake do a really good job from that initial assessment, getting the information about what and when is safe.

Intake also incorporated some questions around that into our initial assessment, but I know that my staff did as well. So, we’ve even got a client currently at the moment who lives with a perpetrator, and he regularly checks her phone. So, we just make sure that in our very, very first conversation, they put a plan in place so when the caseworker rings the client, they’ve got a little script ready so they know to hang up if she can’t talk. So, it’s just making sure, I think, that you really put sound plans, safety plans in place from the start, because it is different now. Perpetrators are home a lot more than they used to be.

CHALLENGES

The positive outcomes were not achieved without meeting considerable challenges. The most frequently mentioned ones are outlined in this section.

SERVICES FOR CHILDREN

‘It’s hard when you can’t see them’

Despite extensive efforts to support children, for example, dropping off activities, providing information about online activities, referring children to counselling and keeping the children ‘in view’ when talking with women, the lack of direct contact with children during the COVID lockdown period created a service gap from the perspective of many of the staff.

Another challenge is the fact that we work with the family, so the mum and the children. I have found it hard to connect with children and to do that holistic approach for the family. So that’s been a challenge. I have been able to drop some activities off to families with kids and just sight them or organise counselling for them. But just having that interaction with the kids has lessened.

I think for me personally, I knew all the women that were in the refuge and I knew the kids, and I would have a chat with the kids, what they got up to, and we didn’t have that connection with the children at all during COVID because all communication was with mum. So that was really difficult. We’re trying to organise schooling or activities for the children and we didn’t know a thing about them besides what mum’s told us, and things that we’ve learnt, like with [CEO] introducing the Children’s Framework, is around, yes, mum tells us a lot of things, but there’s the things that the kids tell us that what they like to do and stuff like that that we are able to support them with as well.

Look, every time we talk with mum, we always ask them, “How’s the kids going? How are you going? How’s everything going?” Because it’s not just her and the kids, it’s everything else going on around her as well. So, I think for children it makes it a little bit difficult for staff because if there are child protection concerns or any concerns around the children, it’s hard when you can’t see them.
Some staff identified older women (in a context of rising number of family violence referrals) and women whose first language was not English, as less well suited to remote working. Some older women were not sufficiently skilled with the use of technology or did not have access to it. Telephone work and meeting the requirements of other services (e.g. scanning documents) were more difficult for these groups of women. When CALD women had limited windows for safe contact, arranging telephone interpreters could be difficult.

The other one was assisting elderly people who have no access to technology or the skills. The library’s been helping out but when the library was closed, that’s really hard.

I’ve got one client that I’m working with at the moment and English is her second language. It’s been quite tricky, that’s why I’ve been going back into the refuge and social distancing. She’s got an accent. I’ve got an accent. We’re talking about complex issues and we’re trying to do it over the phone and she didn’t have access to FaceTime.

Some staff identified older women (in a context of rising number of family violence referrals) and women whose first language was not English, as less well suited to remote working. Some older women were not sufficiently skilled with the use of technology or did not have access to it. Telephone work and meeting the requirements of other services (e.g. scanning documents) were more difficult for these groups of women. When CALD women had limited windows for safe contact, arranging telephone interpreters could be difficult.

NOT SEEING WOMEN FACE-TO-FACE

‘Connection ... that’s one of our gifts in the work that we do.’

This was raised by just under half the staff interviewed. Although all the staff acknowledged that they had been able to assist women effectively, particularly the practicalities of linking them with services and resources, many commented on the ways in which lack of face-to-face contact with the women (as most preferred telephone, text and email contact to visual forms of tele-working) affected the opportunities to build rapport and relationships.

I miss the face-to-face with refuge clients and THP clients because you’re building a relationship. I mean, a woman’s in the refuge eight weeks … you’re building a relationship there.

So you can put a picture to that person, or you can actually see their body language when you talk to them. And there’s just the whole personal part of it.

Sometimes it’s hard, especially when they’re very upset. It’s so much easier if you’re there, so they can see that I’m actually caring. And sometimes it’s hard as well when you talk to them on the phone, and you can hear they’re distracted.

I was working with a client, so she came in just after we started working from home, and it was great. She achieved everything on her case plan and all of her goals. She was exiting into private rental with her child and I hadn’t met her and I think this is just at the point where we were able to go in as one worker. So, I stood at the gate and we waved to each other. But, we’d gone through this journey together and at the very last moment, that was when we met.
Aboriginal staff raised the importance of personal contact for their Aboriginal clients:

I think a big concern for myself was around the clients and the refuge particularly, in terms of building those strong relationships with them. I think that’s something that where we do really well is that we’re able to connect with our clients really well, and I guess and that sort of comes out in terms of some of the outcomes that are achieved there as well. So that was my biggest concern is, well, how are we going to be able to continue that? And also how are we going to be able to make those connections with new clients coming in? … Because a lot of that dealing with Aboriginal clients is a lot of face-to-face. We’re talking about who your family are and connections and starting that from the very first contact. So that was a big one for me.

Yeah, I just feel that they, some of our women are not comfortable using technology, I suppose. So that was hard for them. Sometimes, they just want that contact and that interaction … I had a client, a refuge client, that would call me every day.

SEPARATING HOME AND WORK

‘It feels like it’s in your home’

All respondents talked about the impacts of bringing their work into the home, and the many challenges this presented.

There was two spaces for work. Now, the work’s coming to the home. So I found myself doing work after hours. I found the girls would ring me after hours. And you’ve got to slowly just not answer that phone after you’ve logged off or you’ve clocked off.

I found it tricky one day, when I first started working from home, when someone was being really aggressive towards me and I couldn’t get them off the phone …

While the advantages of saving travel time to work were widely acknowledged, paradoxically, the lack of travel time impacted for some on their ability to separate work and homelife:

Because some of the clients that we have in, some of their stories that they tell are so extreme. When I leave work, back when we were in the office all the time, I’d have that time between work and driving home, even though it was an eight minute drive, but I’ve had that downtime. When I’m working from home, it’s like turn the computer off, walk out the bedroom and straight into dinner, straight into bath. There was no me time … So I’m glad though that we’re slowly back at the office a few more days.

Usually if something like that happened to you, then you’d have to drive home and then you’d shake it off, you’d have a shower. Whereas I think I was left sitting with it and then I’ve walked two paces and I’m in the house.
One staff member pointed out, that it is not always possible to control the home working environment, but that transparency and flexibility within the organisation can address this:

So, if I had family just rock up because they live a couple of hours away and they’re like, “Oh, we’re staying here the night.” So, I’m like, “How am I going to work?” Because if they’re around, how am I going to freely have a conversation? Normally if the kids are in the house, I’m out the back. Vice versa. But when there’s family around, lots of family around you, can’t do that. So, I spoke with [my manager], I rang her and I said, “Look, I do have family over. Am I able to take today off? But I can even work longer or work a different day, whatever works.” She’s like, “No. That’s fine because we’ve got it covered for the day anyway.”

WOMEN’S ACCESS TO TECHNOLOGY

Not all women have access to technology, or to the skills to use it.

So, I think, especially with the women we’re supporting, if they don’t have an up-to-date smartphone or things like that, it can be quite difficult for them to fill forms out or to make a FaceTime call, that kind of thing.

I’ve been dealing with an older woman, who doesn’t use technology. To the point of doesn’t actually SMS even, and how that works in this. Because, what this person needs, I feel, is face-to-face contact.
While more flexible policies were instigated by the other services, as one staff member noted, DV West staff had facilitated these working relationships by engaging proactively with these services:

We had contacts in Housing and that sort of thing and we said, “Look, if you’re doing a Start Safely appointment for our client, can you call me and link me in or let me know what time that appointment is so we can all be part of it?” And they were quite open to that, the Start Safely workers.

**A SHARED EXPERIENCE**

“We’re all in the same boat so there’s no point being obstructive or making things hard”

In addition to the more flexible practices introduced by large agencies, the shared experience of working remotely during the pandemic was identified by many staff as contributing to smoother working relationships with the agencies with whom they frequently advocated for resources for their clients, such as Victim Services, Housing and Centrelink.
I think a big part of the reason why it’s been positive is because there’s a shared experience going on within services as well … We’re all in the same boat. I feel like there’s this shared experience where everyone was sort of banding together and trying to get the outcomes for clients.

There also seems to be another layer, like a better rapport with the workers. I think in some ways, you’ve been inviting them into your home. So, you tend to, I don’t know, because they’re coming into your home it feels like people are being a bit more open.

It’s sort of a sense of comradery, maybe. It’s like that thing because we’re all sort of stuck at home and so you’ll call someone and hear their little kids in the background or their puppy or something. I don’t know, it just makes everybody a little bit more human.

Again, respondents made the point that building relationships with other services was something that DV West had always seen as essential, in order to assist their clients:

Everyone on this team is so respectful and is brilliant at building rapport with people. So, they have quite good relationships with a lot of people in the areas. And those relationships, I guess, they’ve just become stronger through this period. And we’ve developed new ones as well.

I don’t think it will go back to the “old normal”, but I feel that we have, I’m going to say proven, ourselves trustworthy, I suppose to our word as workers, and we always have. I feel that we advocate fairly. It’s a big part of our role. It’s really important to do that, especially with big systems.
THE PERSONAL MEETS THE PROFESSIONAL

Staff’s responses to the sudden change in working conditions also reflected their personal situations and their lives away from work. A key challenge was managing looking after children and working from home.

JUGGLING WORK AND FAMILY

At first I was like, okay how am I going to make it work for myself, because I’ve got a family with little kids. With the little kids, working from home, I’ll do a lot of paperwork early in the morning. So I still do the eight hour day, but I’m a bit more flexible. And then if I had to do a quick client visit for a signature or something, I’ll work that in.

In the beginning, it was quite hard and very stressful because it was new. And I had the kids home. I was trying to home school two teenagers. And trying to do my work and it was hard, to be honest, at the beginning. Look, it really got better when I tried to get in some sort of routine, but it really got better when the kids started going back to school.

The flexibility offered by the organisation was appreciated as women juggled family and work responsibilities:

Yeah, I’m loving it. I’ve always said it’s funny, you pay rent and bills for a house, and you go to work to make sure you earn that money in the house that you’re not in, because you’re at work … So, I finally get to be in my house with my child, that time is so precious.

I’ve missed a little bit of the interaction with my mates at work, but on the other hand my work/life balance has slipped the other way. I’m just totally committed to bringing up my children. So it’s just like I’ve been able to put my time a little bit better towards my children. I think from a feminist background or whatever, me being able to stay at home, with my kids … When I think about if I had to go back to [the way it was] I was gone by seven in the morning and I wasn’t home until five. It’s just made our relationship awesome.

FLEXIBILITY WORKS BOTH WAYS

As one staff member pointed out, flexibility helps both personally and in the workplace; both sides benefit from it. For example, when women have to take time off work with sick children:

I think the flexibility for parents or just for workers is fantastic. Well, for me personally, it really works for me. But I think that if you’re a mother and you’re worrying about where your kids are going to be that day or day care, I think it takes all that pressure off of you as a mother because you can still have your kids there and focus 150% on your jobs. Which then, you’re giving more to your work and you’re giving more to your clients.
OUTCOMES FOR THE ORGANISATION

ENHANCED LOYALTY TO THE ORGANISATION

‘I just felt really cared about by the organisation’

There was a strong sense of pride among the staff interviewed in how proactively the organization had handled the crisis: ‘We were up and running before others had even thought of it.’ There was also a strong feeling expressed about feeling cared for by DV West: ‘They got the work phone home to me here, got it set up, got my own chair for work here. All this stuff that just meant a lot to me in terms of how I felt cared about by the organization.’

CLOSER TO COLLEAGUES

‘Our team have gone through COVID together, so we’re just so solid’

The shared experience of forging new work practices while working from home, yet maintaining strong team connections and support, was reported by many staff as contributing to closer collegiate relationships:

What’s been really lovely is we’ve become closer as a team and have shared more, which has been interesting because we haven’t been in the same kind of physical space and haven’t had distractions and all that kind of stuff, we’ve been able to be more efficient with our work. But then, in the times that we do share, it’s been more prominent. So, for each person, it’s being able to go, “Oh, I did this and it worked really well,” or something. So, we’ve shared a lot more.

ONE ORGANISATION

Staff also reported improved relationships across the four teams, and to an increased sense of being part of one organisation:

We’ve worked very independently, but during COVID, [CEO] and [Exec Assistant] have implemented more catch-ups and stuff like that across all sites, which has been really good, and I’ve noticed staff were contacting each other from different sites to see how things are going. So, I guess the communication and relationships within the service improved.

… a big worry during COVID was around isolation, and I think the organization did really well in ensuring that staff were safe and engaging in that sort of stuff, so that was a really good positive out of that.
A MIXTURE OF FACE-TO-FACE AND WORKING FROM HOME

'I think we should continue to offer the flexibility'

Most respondents favoured the organisation considering a more flexible blend of service styles into the future. This arose from reflection about the assumption that all work needed to be undertaken face-to-face and consideration of where it was essential and where alternate approaches could be employed, with the advantages of efficiencies such as reduced time spent travelling and stronger engagement with some clients. It would also continue the flexibility that had been appreciated by an all-female workforce, many of whom have significant caring responsibilities.

I think it’d be great to be able to work from home if there was a choice. If you wanted to work from home a couple of days a week and work in the office a couple of days a week, I think it’s possible and I think that’d be great, especially for women with kids.

So, I think moving forward, when we return to some level of normality, I would be suggesting to the team that you have an initial visit face-to-face, but most of the moving forward casework would be conducted via Zoom or phone to remove that travel time. Unless, obviously, it’s a really important appointment or you’ve got a child protection case conference or something that can’t be avoided. But otherwise be doing your appointments by phone.

Flexibility would also meet the needs of staff who preferred office-based work:

But for me personally, I have asked, “Can I go back to the site and work?” because I don’t really like having work and home mixed in together.

MAINTAIN STREAMLINED SYSTEMS FOR PRACTICAL SUPPORT

The advantages of the streamlined processes, both within the organisation and by other services, had been proven both more efficient for organisations and more suited to the needs of clients who were managing complex and difficult domestic violence experiences.

I guess lots of little things and bigger things, like having the Coles cards electronically has been brilliant because there’s been times where staff time has been up by going and driving somewhere to drop off a Coles card when really, that time could’ve been better used doing something else. Being in After Hours, we’re very time sensitive, it’s pretty fast paced, so if a woman did want a Coles card, we would just do it because that was important. But now, having those electronic ones just frees our time up so much.

Yeah, I think phone contacts for outreach support and being able to get client permission over the phone, things like that, so that the women don’t necessarily have to come in to sign that form. I think that would be flexible.
LESSONS LEARNED

BE PREPARED TO CHALLENGE ASSUMPTIONS

This experience has challenged assumptions about the work, and the staff and organisation have demonstrated willingness to try new approaches and to learn from this unique experience:

I think what we did is assume some of the things that we were doing were the best things for women, but I feel like this is actually giving us some understanding about, that isn't always the best thing for women. We've kind of gotten some good things out of this experience around that.

But I think as well, our thinking around service delivery has improved during COVID, like the use of technology. We reviewed a lot of our policies and procedures and really sort of come up with better ways of operating, and that’s something that I definitely learned and I think that was a really good opportunity for us to self-evaluate. And in terms of time spent out of the office, like meeting with clients, as much as that’s very valuable, I think there are better ways that we can definitely do it moving forward.

IDENTIFY CLIENT GROUPS WHOSE NEEDS ARE BEST MET BY FACE-TO-FACE SERVICES

The findings of the study identified the importance of providing face-to-face services to Aboriginal women, CALD women, older women, and children.

COMMUNAL REFUGE ACCOMMODATION LIMITED THE AVAILABILITY OF CRISIS ACCOMMODATION

As three of the organisation’s four crisis refuges are based in large communal houses, COVID health requirements reduced the number of women and children who could be accommodated. The pandemic highlighted the benefits of the sole refuge with individual accommodation units. The experience during COVID endorses the national movement towards a ‘core and cluster’ model of refuge accommodation that has seen all South Australian refuges adopt this model and a recommendation by the Victorian Royal Commission into Family Violence that communal refuges be phased out in favour of a core and cluster model which provides individual, accessible units.
MAINTAIN CONTACT WITH THE TEAM

‘Probably to still reach out to who you can from the team’

Contact was kept up through team meetings via zoom at the beginning and end of each day, and extended to include weekly whole-of-organisation zoom meetings. The attention to maintaining contact both within the four teams and across the whole organisation, was recognised by staff as effectively addressing the potential risks of isolation and loss of mutual support.

One of the things that I think is helpful is staying connected with the team, supporting each other and talking about the clients, so you’re not feel like you’re holding on your own because it could be isolating for workers who need additional direction, like new workers.

So we have a little Zoom meeting every morning where we can kind of all chat to each other and it's kind of what we would have done in the morning anyway. We would have all sat around and kind of gone “All right, what have you got on for the day?” So we all see each other and have some level of contact with other people’s faces.

MAINTAIN A ROUTINE

I think it was important for me to maintain my routine, what I would normally do if I was going into the office, which is wake up, go for a walk, take a shower, then go. I still do the same thing but then sit in front of a computer and my phone.

I have two spare rooms that I can work out of, so I’m lucky enough to be able to do that, close the door … Initially, I think I was working a bit all over the place, and I needed to probably be a bit more rigid around my workspace. But again, if I’ve got some conversations, that I need to be outside for, I can do that.

SEPARATE WORK AND HOME

‘I don’t want to have everything all lumped together.’

Establishing boundaries was important to deal with this challenge and several staff described useful strategies to establish firm boundaries between work and home life:

So, another great thing about our dogs is, I take them for a walk the moment I finish work. I basically just get out of the house and I go for an hour walk with them. Just to have that, that’s a really clear separation for me. Close the computer, leave the house, come back in as a mum.

I have my son here. But he’s learned, well, when mum works … I do this thing. I walk out the door and then when I walk in, I go, “Okay, I’m working now. You need to be quiet.” So, he’s already got a drink, he’s got a food. He can play out the back or watch tele, whatever. But then he knows I’m in work mode. And so, I don’t really talk to him until I finish. And then when I finish, I walk out the door and I walk in and I go, “Oh, I’m home from work. How’s everyone’s day been?” You just separate the two.


‘A different way of doing it.’
SELF-CARE

‘Because there is no separation when you’re working at home’.

I think it would be just that constant looking after how you’re actually working, looking after yourself, getting really, really clear on what your self-care is, because how can you give, if you’re not really managing yourself. It’s a tough job anyway, and I think self-care is an important part of this role, but it’s been increasingly important.

CONCLUSION

‘We’ve gotten some good things out of this experience’

As the data in this report makes clear, the new and very different working arrangements necessitated by the COVID pandemic were implemented in a way that enabled the organisation to continue to provide a high quality service, and to continue to achieve excellent outcomes for women and their children. Across the interviews with staff, four themes that help to explain these outcomes came through strongly. These were:

- The importance of leadership.
- Maintaining and strengthening connections across the organisation.
- Willingness to challenge taken-for-granted assumptions and try new approaches.
- Building on existing good practices in domestic violence service delivery.

‘A different way of doing it.’