

# Integrated Prevention and Response to Violence, Abuse and Neglect Framework Summary



## Message from the Secretary

The *Integrated Prevention and Response to Violence, Abuse and Neglect Framework* (the Framework) for NSW Health outlines the vision, guiding principles, objectives and strategic priorities to strengthen NSW Health response to violence, abuse and neglect.

Everyone deserves a life free from violence, abuse and neglect and its adverse effects. The Framework will guide an integrated public health approach that recognises that victims and their families often have complex needs requiring multiple interventions provided by a range of services. The delivery of consistent, high-quality, comprehensive and integrated services for children, young people, adults and families of NSW will help to achieve this vision.

Violence, abuse and neglect is rarely experienced as a single incident. Many people experience multiple forms of violence, abuse and neglect, either co-occurring or at different stages throughout their life and these forms of violence also often overlap within families. NSW Health provides responses to many of the forms of interpersonal violence that are widespread in the Australian community, which include child abuse and neglect, domestic and family violence, sexual assault, and children and young people displaying problematic or engaging in harmful sexual behaviour.

The public health system needs to be mobilised at system, service and practice levels to support the provision of these responses and improve the services we provide. The Framework builds on the efforts undertaken to date by NSW Health to deliver better care for people and their families who have experienced violence, abuse and neglect.

The Framework is a key component of the NSW Health Violence, Abuse and Neglect (VAN) Redesign Program and was developed in partnership with Local Health Districts (LHDs), Specialty Health Networks (SHNs), the Ministry of Health, and NSW Health Pillars.

It is supported by:

- *The Case for Change* (literature scan and discussion paper),
- *VAN Service Profiles*, and
- *Self-Assessment Tool for LHDs/SHNs*.

Phase one will focus on NSW Health VAN services and phase two on integration with the whole Health system and interagency partners.

I encourage you to use these resources to help ensure the NSW Health system delivers enhanced service responses and improved client experiences and outcomes.

**Elizabeth Koff**

Secretary, NSW Ministry of Health



The full Framework and other resources from the VAN Redesign Program including *The Case for Change* can be downloaded from: <https://www.health.nsw.gov.au/parvan/Pages/van-redesign-program.aspx>

# NSW Health Integrated Prevention and Response to Violence, Abuse and Neglect Framework

## System design principles

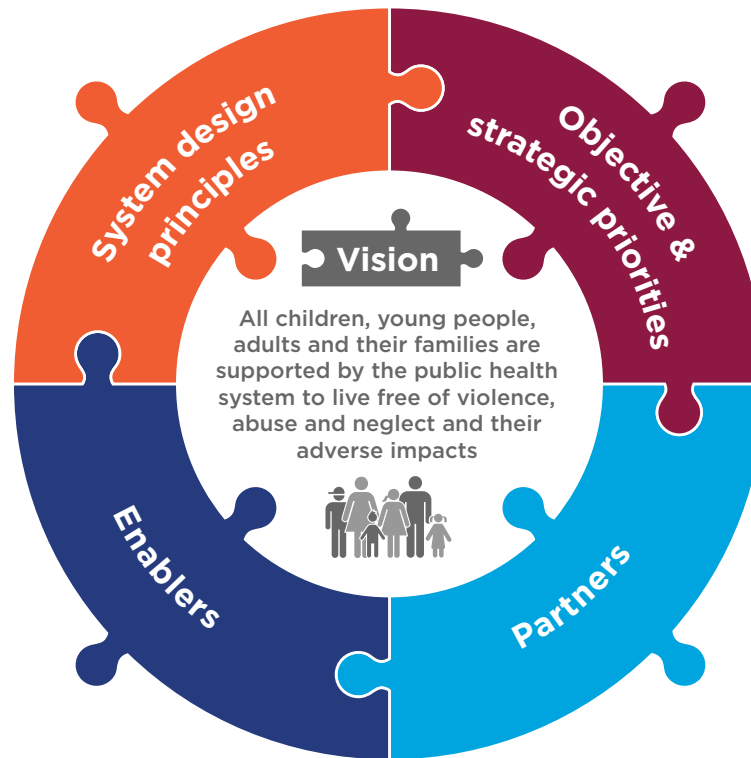
- 1. Prevention and response** to violence, abuse and neglect is a **central role of NSW Health**
- 2. Person and family-centred, holistic and seamless care** is provided by NSW Health that prioritises the safety, well-being and unique needs and preferences of the person and their family
- 3. Minimising the impact of trauma and supporting recovery from trauma** are recognised and valued by NSW Health as primary outcomes of responses
- 4. Early intervention** is prioritised by NSW Health because it can change the long term trajectory of chronic disease and adverse health outcomes for people who have experienced violence, abuse or neglect
- 5. Equitable, accessible and consistent** service responses are provided by NSW Health
- 6. 'No wrong door'** – NSW Health workers will collaborate to support people and their families to access the most appropriate service responses
- 7. The best available** evidence is used to guide NSW Health's prevention of and response to violence, abuse and neglect

### Enablers

- Learning & development
- Clinical networks & evidence-based models of service delivery
- Quality & safety
- Technology & infrastructure

### Partners

- **Premier and Cabinet:** Aboriginal Affairs; Department of Premier and Cabinet; NSW Ombudsman
- **Treasury**
- **Education**
- **Primary Healthcare Networks**
- **Private health Sector**
- **Aboriginal Community Controlled Organisations**
- **NGO community-based services**
- **Stronger Communities:** Child Protection; Coroner; Corrective Services; Courts; Housing; Juvenile Justice; Legal Aid; Multicultural NSW; NSW Police Force; Office of the Children's Guardian; Office of the Director of Public Prosecutions; Stronger Communities Investment Unit - Their Futures Matter; Victims Services; Witness Assistance Service; Women NSW



## Objectives & strategic priorities

Making integrated prevention and response to violence, abuse and neglect happen in NSW Health:

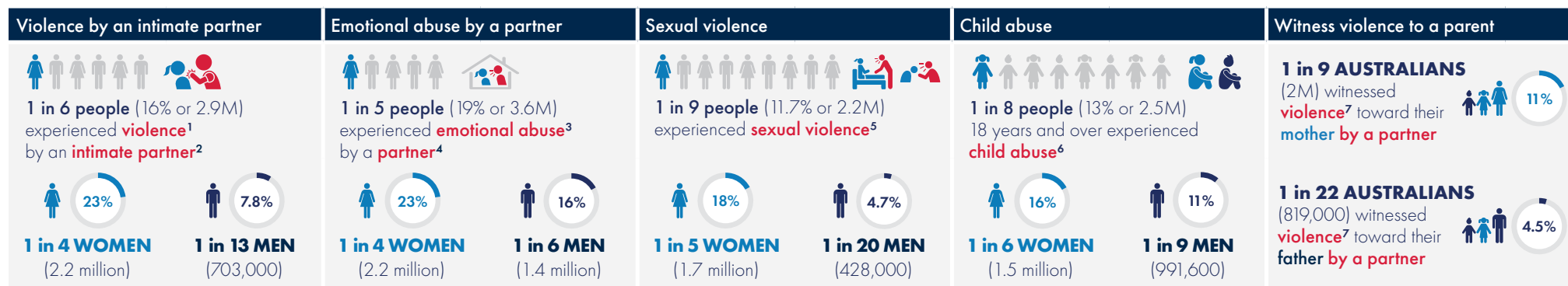
<b>1. Strengthen leadership, governance, and accountability</b>	<b>2. Enhance the skills, capabilities and confidence of the NSW Health workforce</b>
1.1 Leadership driving NSW Health system reform and service improvement 1.2 Strong governance 1.3 Robust system for monitoring NSW Health service performance	2.1 Increasing the workforce to meet demand 2.2 Education, training and professional development to equip NSW Health workers with the right knowledge, skills, attitudes and values 2.3 NSW Health workers receiving appropriate supervision and support
<b>3. Expand Violence, Abuse and Neglect (VAN) services to ensure they are coordinated, integrated and comprehensive</b>	<b>4. Extend the foundations for integration across the whole NSW Health system</b>
3.1 Integrated VAN service models 3.2 Enhancement and expansion of VAN services 3.3 Improving VAN services quality and consistency, and reducing clinical variation across NSW 3.4 VAN services improving the patient journey and empowering people and families to be partners in their care	4.1 System improvement - trauma-informed care and child safe organisations 4.2 Identification, response, referral and coordination 4.3 Integrated electronic clinical information systems

Moving towards integrated prevention and response to violence, abuse and neglect across the NSW Health system

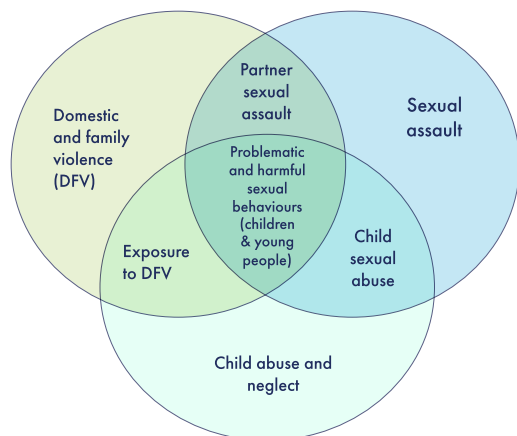
Enhanced service responses & improved client experiences and outcomes

# The case for change: violence, abuse and neglect overview and health outcomes

Violence is very common in Australia with many women, men and children affected.



Violence, abuse and neglect is rarely experienced as a single incident. Many people experience multiple forms of violence, abuse and neglect, either co-occurring or at different stages across their life.



'Violence, abuse and neglect' is an umbrella term for three types of interpersonal violence that are widespread in Australian communities: domestic and family violence; sexual assault; and all forms of child abuse and neglect. Children and young people with problematic or harmful sexual behaviour often present to NSW Health services. This group often also has personal experiences of abuse and neglect.

Extensive research indicates violence, abuse and neglect has **serious outcomes for women, children, and men's health**. These health and wellbeing outcomes are **cumulative and may be incrementally worse** for victims experiencing multiple types of abuse.



**Intimate partner violence**  

**5.1%** of the **BURDEN OF DISEASE** (impact of illness, disability, premature death) for women aged 18-44 years.

**This is more than any other risk factor**, including alcohol, tobacco use and obesity



Estimated **cost of violence against women** (violence, abuse and stalking) in 2015/16:

**\$22 billion**

This includes **\$1.4 billion** to the **HEALTH SYSTEM**



Estimated cost of **child abuse and neglect** in 2007:

**\$10.7 billion**

This includes **\$6.7 billion** for **BURDEN OF DISEASE** & **381 million** to the **HEALTH SYSTEM**

1. Physical and/or sexual violence since the age of 15. 2. Current and/or previous partner, girlfriend, boyfriend or date. 3. Since the age of 15. 4. Current and/or previous partner (lived with). 5. Sexual assault and sexual threat since the age of 15. 6. Physical and/or sexual abuse before the age of 15. 7. Physical assault only witnessed before the age of 15.

# The case for change: NSW Health responses to violence, abuse and neglect

## NSW Health Services

NSW Health has 3 main service types responding to violence, abuse and neglect across the whole health system:

- ▶ **Violence, Abuse and Neglect (VAN) Services:** primary responsibility to respond to these issues.
- ▶ **Secondary / targeted responses:** respond to people at heightened risk (e.g. drug and alcohol services and mental health services).
- ▶ **Primary / universal responses:** help to reduce vulnerability or risk (e.g. maternity services and child health services).



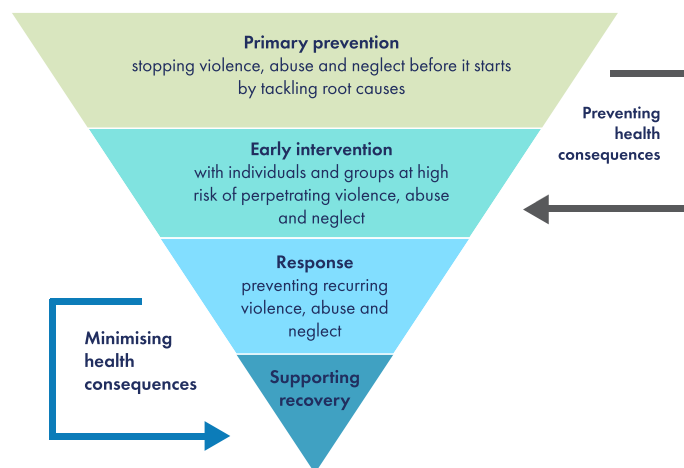
## Need for strengthened responses

Responses have historically been **siloed, fragmented and disconnected** with negative consequences of inconsistent and uncoordinated service delivery on the health and wellbeing of people and their families.

Many skilled and dedicated teams provide timely, high quality, and holistic care, however challenges in delivering care and opportunities for improvement identified included: **governance; referral pathways; information sharing; consistent service models; availability of 24/7 integrated counselling, medical and forensic responses to all forms of VAN; and workforce support.**

**Violence, abuse and neglect can be prevented and its negative outcomes reduced. The health sector plays a vital role in addressing it through an integrated public health response.**

The World Health Organisation promotes a public health approach to preventing and responding to violence and abuse built on the socio-ecological model. Like other public health concerns, such as infectious diseases, violence, abuse and neglect can be prevented by addressing the underlying individual, relationship, social, cultural and environmental factors (WHO, 2013). Adopting a public health approach involves focussing on both prevention and early intervention.



## Trauma-Informed Care (TIC)

It's about asking what's happened to a person, not what's wrong with them.

TIC is a strengths-based framework, which recognises the complex nature and effects of trauma and promotes resilience and healing.

### 6 KEY PRINCIPLES:

#### SAFETY

Creating areas that promote a sense of safety.

#### TRUST

Providing clear and consistent information.

#### CHOICE

Providing options for treatment and care.

#### COLLABORATION

Maximising collaboration between health care staff, patients and their families.

#### EMPOWERMENT

Building upon a patient's strengths and experiences.

#### CULTURE

Providing culturally safe responses.

Infographics: Adapted from Costello & Backhouse, 2019a (<http://www.ecav.health.nsw.gov.au/van-statistics-and-research/>); Webster, 2016; 70/30 Campaign (WAVE Trust, 2018); WHO, 2013.

Data sources: ABS, 2017; Access Economics et al, 2008; Costello & Backhouse, 2019b; KPMG, 2016; NSW Health, 2019a; WAVE Trust, 2018; Webster, 2016; WHO, 2002 & 2013.

Further information and full references available in *Integrated Prevention and Response to Violence, Abuse and Neglect Framework* (<https://www.health.nsw.gov.au/parvan/Pages/van-redesign-program.aspx>)