

DOMESTIC  
VIOLENCE  
VICTORIA



THE FAMILY VIOLENCE  
EXPERTS BY EXPERIENCE FRAMEWORK

Research Report and Framework 2020



THE UNIVERSITY OF  
MELBOURNE

## PROJECT AIM

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THE FAMILY VIOLENCE EXPERTS BY EXPERIENCE FRAMEWORK AIMS TO ENHANCE THE ABILITY OF SPECIALIST FAMILY VIOLENCE SERVICES TO PROVIDE OPPORTUNITIES FOR SURVIVOR ADVOCATES TO INFLUENCE POLICY DEVELOPMENT, SERVICE PLANNING AND PRACTICE.

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# PROJECT BACKGROUND

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Ensuring the centrality of victim survivor voices and responding to the needs and experiences of clients from different communities and client groups was a key message delivered by the Victorian Royal Commission into Family Violence (Recommendation 201).

Following the Victorian Royal Commission, the Family Violence Philanthropy Collaboration Project (FVPCP) was established by Domestic Violence Victoria to bring together representatives from the specialist family violence sector, philanthropic and government sectors to support a coordinated response to the implementation of the Royal Commission's Recommendations.

This group worked with the family violence sector to identify a range of strategic areas for philanthropic investment to address some of the emerging needs of the specialist family violence sector. One of the projects funded was the development of a Lived Experience Framework for specialist family violence services.

The project was supported by Domestic Violence Victoria as part of the Family Violence Sector Capacity Building Program and generously funded by Gandel Philanthropy, the William Buckland Foundation, Give Where You Live Foundation, State Trustees Australia Foundation, the Victorian Women's Benevolent Trust and the Johnstone Gumption Fund and the Jump Start Fund, sub-funds of Australian Communities Foundation.



## OUR TEAM

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The University of Melbourne, supported by Domestic Violence Victoria, developed the Framework. Key Safer Families Centre researchers on the project were Professor Kelsey Hegarty, Dr Katie Lamb and Dr Rhian Parker supported by Kitty Novy.

The research was co-produced with Amanda, Cina and Fiona who are survivor advocates from the University's WEAVERS (Women and children who have Experienced Abuse and Violence: Advisors and Researchers) lived experience group.

An Advisory group oversaw the development of the framework and included representatives from a range of services supporting people experiencing family violence as well as a number of survivors.

The project team would like to acknowledge the victim survivors and practitioners who gave up their time to contribute to the framework's development. The feedback you gave us about your experiences started some fantastic conversations and has significantly influenced the Framework's design and focus.

## PURPOSE

The Family Violence Experts by Experience Framework aims to enhance the ability of specialist family violence services to provide opportunities for survivor advocates<sup>1</sup> to influence policy development, service planning and practice by:

- Encouraging sharing knowledge and experience gained from services and survivor advocates who have been engaged in collaborative work
- Providing guidelines around best practice for engaging survivor advocates of family violence in collaborative work
- Providing resources to support survivor advocates and organisations become ready to engage in collaborative work

This framework complements the Domestic Violence Victoria (2020) Code of Practice: *Principles and Standards for Specialist Family Violence Services for Victim-Survivors*.

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<sup>1</sup>The term *survivor advocate* has been used throughout this document to refer to victim survivors of family violence who are engaged in formal co-production activities and mechanisms to influence policy development, service planning and practice.

# OUR APPROACH

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The development of the Framework was informed by:

- A Literature review
- Mapping existing initiatives
- Consultation with key stakeholders

## LITERATURE REVIEW

In order to provide context for the development of a lived experience framework for the specialist family violence sector, a literature review was undertaken.

The research question guiding the literature review was:

***What are the elements that underpin models and frameworks for co-production and participatory decision-making models on sensitive issues?***

Literature for this review was sought through searches of academic databases and the internet. Key search terms used included 'participatory decision-making', 'community advisory', 'co-production', 'lived experience', 'consumer engagement' and 'service user engagement'. When literature was located that was relevant to this review, the reference lists of these documents was used to locate additional relevant references.

For the purposes of the review, co-production was defined as mechanisms which allow services and those with lived experience to come together to design policies and services that achieve better outcomes.

A summary of the key findings of this review are provided below and a full version of the literature review is provided as Appendix 1.

- There is little consistency in the way in which co-production, co-design and consultation are defined (Loeffler & Bovaird, 2016).
- It is common for the involvement of people with lived experience to be described as occurring across a continuum ranging from relatively low levels of engagement, to work that is consumer-led (Werner-Seidler & Shaw, 2019).
- Co-production is differentiated from consultation because it 'changes people from being "voices" to being agents in the design and delivery of public services' (Boyle, Coote & Sherwood, 2013, p.9)

- The underlying justification for the use of co-production is that needs are better met when people with lived experience are involved in designing and evaluating policies and services (Boyle, Coote, Sherwood, & Slay, 2013).
- Research has also found that the experience of being involved in a co-production activity can have significant positive impacts for the individual (Roper, Grey, & Cadogan, 2018).
- The review found that co-production has been occurring in some areas such as primary healthcare, mental health and Aboriginal service planning for some time.
- In contrast, other areas of social support have only recently begun to engage consumers in the design and evaluation of research, services and policy (Breault et al., 2018).

As the literature about engaging survivor advocates with lived experience of family violence was found to be quite underdeveloped, the Family Violence Experts by Experience Framework has drawn heavily from the literature which has emerged from the mental health sector. This literature was most useful given some of similarities around the sensitivities and stigma that surrounds disclosure of mental health or family violence lived experience.

It should be noted that there are some significant differences between the sectors such as the legislative powers of the mental health system and the additional safety considerations that overlay the work of the family violence sector. Regardless, we can draw upon the literature from the mental health sector to give us a sense of the key barriers and enablers to ensure more effective engagement of consumers in policy, planning and practice.

A summary of the literature is provided arranged under the key themes identified:

### **GENUINE RELATIONSHIP BUILDING**

Regardless of the sector, the literature suggests that the foundations for successful collaboration are strong and genuine relationships between participants which leads to richer dialogue (Clayson, Webb, & Cox, 2018). This point is particularly emphasised in work with Aboriginal communities (Hunt, 2013). The literature suggests that these relationships can take some time to build and to become comfortable and that structures built to facilitate co-production need to have adequate timelines and longevity to be most effective (Werner-Seidler & Shaw, 2019).

### **CLARITY ABOUT DEGREE OF INFLUENCE**

It has also been suggested that some people with lived experience report feeling frustrated about the limited degree of influence they are able to exercise in co-production processes (Werner-Seidler & Shaw, 2019). The literature suggests that these concerns can be overcome if both parties are clear from the outset about the boundaries and constraints of the process.

### **REGULAR PROVISION OF FEEDBACK**

Evidence suggests that a desire to make a difference is a key driver for why people with lived experience decide to engage in a co-production activity (Werner-Seidler & Shaw, 2019). Therefore the literature suggests that it is important participants are given regular and timely information about how their feedback has led to change.

### **ADDRESSING POWER IMBALANCES**

A key factor to effective co-production has been described as the reduction of traditional boundaries between 'professionals' and 'service users' to allow for a more equal exchange of knowledge (Clayson et al., 2018). The literature suggests that for some professionals this can be challenging and experienced as an uncomfortable loss of status (Loeffler & Bovaird, 2016). It is also suggested that power and privilege can still play a role even when barriers between professionals and those with lived experience are broken down. With class, race and sexuality still acting as barriers to effective engagement and levelling of the playing field (Champeau & Shaw, 2002).



## EMPOWERMENT

Research has found that some service users feel that practitioners are resistant to co-production as they have a perception that consumers are vulnerable and needing protection or don't have adequate skills to participate (Phillips & Kuyini, 2017). Service users describe providers concerns about their vulnerability as 'excessive, misplaced and patronising' (Happell et al., 2019, p. 53). Evidence suggests that the experience of being involved in co-production activities as someone from a marginalised group can have significant impacts in terms of improved self-esteem (Mayer & McKenzie, 2017).

## ORGANISATIONAL SUPPORT FOR THE VALUE OF LIVED EXPERIENCE

Evidence suggests that prominent support from organisational leaders is a critical factor in promoting the status and value of co-production efforts with those with lived experience (Bennetts, 2009). The literature notes that one of the key reasons co-production is avoided by some organisations is that it is still seen as highly risky by many who fear a loss of control and the unpredictability about what a co-production process will produce or how it will land (Loeffler & Bovaird, 2016).

## ESTABLISHING HEALTHY GROUP DYNAMICS

Research documenting feedback from participants who have participated in co-production activities often report that the social dynamics at play in the group can have a significant impact on the outcomes achieved. In particular, the need for 'respectful' engagement is a key theme and is characterised by ensuring that each person with lived experience is given an opportunity to speak and be heard (Werner-Seidler & Shaw, 2019). Several studies mentioned that 'clashes' had occurred between lived experience group members who are coming from different backgrounds and experiences. (Lazarus et al., 2014) One study described disagreement as inevitable and suggested that this became a valued and valuable part of the process leading to more discussion and debate than otherwise would have happened (Clayson et al., 2018).

## COMPENSATION FOR PARTICIPATION

There are mixed views in the literature about whether those with lived experience should be provided with financial compensation for their contributions. While it is fairly common for research which is undertaken with vulnerable populations to compensate participants for their time (Head, 2009) there are no guidelines regarding co-production. Several studies with people with lived experience of mental illness found that financial compensation was not a motivating factor for involvement but a symbolic gesture of valuing and recognising contributions (Bennetts, 2009). It has been suggested that this issue is an important one in the context of the family violence sector, given we know that perpetrators of family violence often tell their victims that they are 'worthless' and actively attempt to reduce their partner's self-esteem (O'Leary & Maiuro, 2001). The literature also suggested that offering experts by experience an option for the method of payment (such as cash or vouchers) was useful for those for whom payment may impact other entitlements.

## PROVIDING SUPPORT

Consultation within the mental health sector has found that providing support for people with lived experience during or after an engagement activity is important to ensure people who may have been emotionally distressed or who feel stressed by the experience, are able to discuss this (Victorian Government, 2019b).

The literature about barriers and factors which enable effective co-production in the mental health sector have been influential in the development of the Experts by Experience 'best practice principles' as has the 'Turning Pain into Power: A Charter for Organisations Engaging Abuse Survivors in Projects, Research and Service Development' developed in the United Kingdom (Survivor Voices 2018).

## MAPPING CO-PRODUCTION INITIATIVES IN THE FAMILY VIOLENCE SECTOR

In Australia, as in the United Kingdom and the United States, the specialist family violence service system was built upon the foundations established by the refuge movement in the 1970s, where activists disseminated new knowledge about family violence based on their experience learning from women residents (Theobald, 2009). At this time, the issue of family violence was not a named social issue or a crime and these early activists worked alongside those who had experienced family violence to develop organisations built with collective structures. Women with personal experience of family violence played a key role in establishing services which had a focus on self-help and collective activity (Hague & Mullender, 2006). In addition, a significant number of professionals in this sector also have lived experience of violence (whether they chose to disclose this or not) (Hague & Mullender, 2006).

Internationally it has been noted that due to the success of activists, organisations and peak bodies bringing attention to the issue of family violence, the number of people seeking help and breadth of services offering support to survivors of family violence grew considerably and funding was stretched (Hague & Mullender, 2006). In Victoria over the past decade, both demand and funding levels have increased resulting in a range of changes to the way in which family violence specialist services are structured and operate (Theobald, 2011). Likewise, in the United Kingdom research has found that the demand from funders for family violence services to professionalise has conflicted with the sector's commitment to organisational collective approaches to participation (Hague & Mullender, 2006).

When exploring the degree to which survivor advocates can influence service delivery, research in the United Kingdom has found that there are 'two contrasting situations at play' (Hague & Mullender, 2006, p. 573). The first describes statutory agencies who engage in tokenistic or superficial consultation with users of services. The second situation is driven by

the activist movement (Hague & Mullender, 2006) who have consistently opposed the positioning of service users as 'passive and powerless' and have used a range of approaches to document and project victim survivor voices (Holder & Putt, 2019, p. 909). However, research suggests that the resources to do this work have been difficult to secure and sustain (McCarry et al.2018). The international literature has commented that with the increase in funding, greater efficiencies and professionalisation of the response to family violence has also come with a trend for survivor advocates to be less likely to be involved in management committees, decision-making or employed as workers than in the past (Hague & Mullender, 2006). Despite this, the literature suggests that the specialist family violence sector is more focused on service user engagement than many other sectors.

Some examples of co-production initiatives in the area of family violence both nationally and internationally include lived experience advisory groups and committees, media training and advocacy programs, and peer workers. As part of the development of this framework, work was undertaken to map family violence co-production activities across Victoria. The initiatives which were identified and where available documentation was accessible are listed in **Appendix 2b and include:**

- Women's Health East – Eastern Media Advocacy 'Speaking Out Program'
- Victorian Government – Victim Survivor's Advisory Council (VSAC)
- Drummond St – iHeal Family Recovery Support Service Peer Work Model
- Safe Steps – Survivor Advocate Program
- University of Melbourne – WEAVERS lived experience group
- In Touch Multicultural Centre Against Violence – Inspire for Change: Multicultural Voices of Lived Experience

It should be noted that a significant number of these initiatives are currently inactive due to discontinuation of funding. A key challenge described by the organisations was securing long term and/or ongoing funding.

## CONSULTATION

The development of the Framework was overseen by an Advisory Group which included practitioners, survivor advocates and Victorian government representatives.

A consultation process ran from **September–December 2019** with victim survivors of family violence and a broad range of services who work with clients experiencing family violence. The consultation included:

- Advisory Group meetings (22 people attended including victim survivors and practitioners)
- Online survey of victim survivors (192 responses received)
- Online survey of practitioners (26 responses received)
- Focus groups with existing survivor advocacy groups (3 groups–17 survivors)
- Interviews with key family violence services (5 individual interviews)
- Zoom focus groups with victim survivors (2 meetings with 14 survivors)
- Focus groups with practitioners (3 focus groups with 33 practitioners)
- Presentation to the Domestic Violence Victoria, Specialist Family Violence Leadership Group (15 participants)

Several consultation methods were used to increase access and participation of both victim survivors and practitioners. The consultation process was approved by a University of Melbourne Human Research Ethics Committee (Ethics ID Number: 1955355.1).

### CONSULTATION WITH VICTIM SURVIVORS

Victim survivors were invited to participate in an online survey and 192 responses were received in a two-month period. Of those who responded 93% identified as female, 3% as male, 1% transgender, 1% non-binary and 2% unknown. The majority of respondents were aged 26–45 years (56%) or 46–65 years (39%) with 2% aged over 65 and 2% aged 18–25 years.

In terms of diversity, 11% of respondents indicated that English was their second language, 10% identified as LGBTIQ and 10% as having a disability and 2 respondents identified as Aboriginal and Torres Strait Islander.

At the end of the survey respondents were asked to indicate if they would like to be involved in a focus group or interview. A total of 30 respondents from the survey expressed interest and were contacted to arrange interviews and focus groups. A total of two online Zoom focus groups were run (14 victim survivors) and 3 individual telephone interviews were undertaken as not all respondents were able to attend the focus groups.

In addition, three face to face focus groups were also held with existing victim survivor groups to discuss their experiences and involvement with family violence services (17 victim survivors).

In the survey, focus groups and interviews, victim survivors were asked a range of questions about the degree of influence they believe survivor advocates currently have to influence service and policy development, their experiences of being involved in formal advisory processes as well as the kinds of activities they would like to be involved in.

We have summarised and grouped the comments from victim survivors by key theme:

### OPPORTUNITIES FOR ENGAGEMENT

Victim survivors hoped that the Framework would encourage family violence (and other) services to look for greater opportunities and more innovative ways of engaging survivor advocates so that they can have an impact on service and policy planning.

Some survivors had already been engaged in providing advice and feedback and had positive experiences:

*“I found it affirming and empowering to have my voice heard and to use my experience to help others. I felt that at least all the trauma I went through could be used to help others and that made it more bearable.”*

*“Gives meaning to my experience and pain, that I am helping others. Helps healing and recovery to feel you are impacting on the bigger picture.”*

While a significant number of victim survivors had positive experiences as survivor advocates, others described their experiences less positively, and felt that some organisations might need a mindset shift to see the strengths rather than the deficits or vulnerabilities of survivors.

*“I don’t feel valued by the organisations but I hope I made a difference to other women.”*

*“I felt that my feedback was received well and appreciated but I felt that it did not make a difference to the services.”*

*“Quite a few assumptions are made about survivors of domestic violence, particularly around their capacity. Quite often capacity is understood as competency and the two are very different things. ...quite often there is a stigma attached to people who have experienced and survived domestic violence.”*

Some survivors described being involved in advisory groups where survivors were from similar backgrounds and saw a need for more diverse voices to be both sought and heard.

*“I do feel that I come from a position of privilege—white, middle class, I can’t speak for all survivors who don’t have the resources that I do. With that privilege comes responsibility to speak out and be as vocal as I can. I am aware I don’t speak for everyone.”*

*“Minority groups don’t get invited to the table and this is a failing in the system.”*

A number of victim survivors described a desire to make a difference as a key driver for their choice to engage in providing advice. As a result, there was a strong desire for clarity and transparency about how their advice and feedback had influenced systemic change.

*“Survivors should be heard. We have valuable contributions to make... we should be reimbursed for our contribution but also get feedback on how we have helped shape practice.”*

## COMPENSATION AND CONDITIONS

While some survivor advocates were happy to volunteer their time for one-off media engagements or advocacy, there was a general view that survivor advocates should be compensated for their time when they are engaged in consultation, advisory, project, research or ongoing advocacy work. There were a range of views about what form remuneration should take and agreement that survivor advocates should be asked what suited their individual circumstances.

*“To not compensate survivors for their lived experience and expertise is not just extortionist, but it compounds their trauma (often we’re unable to work ‘regular’ jobs due to trauma, and having no income obviously exacerbates that; especially if we’re asked for our lived experience to inform the work that OTHERS get paid to do/deliver).”*

It was suggested that standards be developed to ensure consistency in how survivor advocates are remunerated and reimbursed for out pocket costs (such as travel, child care and parking).

A number of survivor advocates wanted to join the family violence workforce and were interested in opportunities for skill development that could support them to move into this work in an ongoing way.

*“I built confidence within myself up enough to return to work. I gained this confidence by being involved with an amazing and empowering group of women. The only negative is I wish I could do this work as my full-time job!!”*

*“I’ve had some casual positions in the sector. I wanted more of a foundation and more financial security. Being a single mum magnified all that stuff for me. The insecure nature of advocacy. Lot of us re-building from scratch and I started in the red.”*

### **THERAPEUTIC BENEFITS AND IMPORTANCE OF ADEQUATE SUPPORT**

Survivors felt that being engaged in strategic planning around service responses to family violence could be both therapeutic and empowering. They welcomed opportunities to meet and support other survivors.

*“I can identify with the women and I’ve learnt a lot, and they’ve got my back and I’ve got theirs. There’s real belonging in this group. A lot of women don’t have that.”*

*“Being with people who had similar experiences. Given agency by staff who believe in us and don’t mollycoddle us. Believe we have something to contribute. Even though it’s a journey with no map. Women are very committed to making a difference.”*

It was also suggested that survivor advocates should be engaged in pairs rather than as the one person with lived experience on a panel or a governance group, to ensure a feeling of greater comfort, support and security.

Victim survivors agreed that a process of ensuring a survivor advocate is currently in a good place to participate was important. However, they thought that these discussions should focus less on ‘readiness’ at one point in

time but on regular checking in, recognising that recovery is not a linear process. They felt that some services had a fear of engaging survivor advocates for fear of re-traumatisation but felt that if a range of support options were in place, survivors can often navigate this terrain well.

Survivors were very clear that they needed to be provided with the right level of support to ensure their participation experience was a positive one:

*“People need to be very, very patient. We’ve been muted and we don’t know how to be un-muted. Give us time and believe in us.”*

### **CONSULTATION WITH PRACTITIONERS**

Practitioners who work with people experiencing family violence were also consulted in a range of ways. Three focus groups were held in late 2019 with a total of 33 practitioners. Interviews were also undertaken with five key family violence stakeholders. A workshop was run with specialist family violence services in early 2020.

An online survey was also disseminated to practitioners. A total of 26 responses were received. Of those practitioners who completed the survey 73% also had lived experience of family violence.

Across focus groups, interviews and the survey, practitioners were asked about the degree to which victim survivors are involved in service or policy design in their organisation, barriers or challenges preventing services engaging survivors in more systematic and coordinated ways as well as any examples of good practice they had seen or been involved in.

The comments made by practitioners are outlined below:

### **IDENTIFYING POSITIVE OPPORTUNITIES**

Practitioners were supportive of engaging survivor advocates in service and policy design and generally agreed that it would improve service quality and service user experiences.

*“It’s incredibly important to ensure victim survivors are held at the centre of everything we do. I’m excited to hear their voices are being brought to the forefront.”*

While some practitioners described being involved in formal processes to engage survivor advocates in policy and service design for some time, a considerable number of practitioners suggested that current engagement with survivors of family violence around high level service planning and policy development is often ad hoc and short term.

Some practitioners saw a need for the engagement of survivor advocates in their organisation in a more systematic way.

*“Experts by experience should have more influence than they currently do. They have much to offer”*

### **CURRENT BARRIERS**

Across the board, a lack of resources was described as the major barrier to doing more of this work in an ethically appropriate way:

*“not having adequate funding means that women are being asked for feedback, there can be triggers... how do you manage to support them if things go on... being mindful of some of that trauma-related stuff that sits in the background”*

While some practitioners believed that their organisational culture highly values the contribution of those with lived experience of family violence, there were concerns that this was not universal:

*“our view of people with lived experience is they are the heart and soul of our organisation. But not all organisations do.”*

Several practitioners echoed the comments made by survivors that the biggest barrier to engagement of survivor advocates was:

*“Cultural attitudes which elevate the opinions of university educated professionals over the lived experience of survivors.”*

Some organisations had considerable experience establishing and maintaining formal advisory structures and gave detailed insights into their experiences. Practitioners suggested that the initial stages of establishing these mechanisms and the process of engaging with an individual survivor advocates to discuss risks and mitigation strategies were seen as a crucial stage of the process.

Examples were given of positive engagement of survivor advocates that was genuine, supported with training and supervision, and well resourced:

*“an important aspect of that was that the peer support workers were employed...from the get go, from the ground up, was an acknowledgement that this experience is worth something, it’s worth something to the organisation, it’s worth something to the program and its worth an incredible amount to the victim survivors accessing that program.”*

### **IMPORTANCE OF ESTABLISHING SUPPORTS, STANDARDS AND PATHWAYS**

Practitioners also described being aware of engagement processes which were tokenistic, and emphasised the need to follow engagement with action even when difficult issues are raised:

*“Ensuring their voices and time are valued... and acting on what they say, even if it’s uncomfortable.”*

A number of examples were given where survivor advocates were engaged in advisory work that was not as well thought through as it could have been. Practitioners suggested that some well meaning services are inadvertently setting victim survivors up to fail by placing them in roles they are not prepared for:

*“they are not given the training and support and the education or even just additional clinical supervision to deal with the triggers of that, so they end up leaving, burnt out... they get destroyed. It is endemic across the family violence sector.”*

A number of practitioners wanted to see clear educational pathways supported for survivor advocates so that they are equipped to do the work they are being asked to do:

*“what happens with people with lived experience educational pathways...there is an expectation of government that people have a certain qualification. But they will allow people with lived experience to have a certificate.”*

Some practitioners gave examples where survivor advocates had not been given the support they needed to undertake the roles they had been given. One area that was focused on was the importance of establishing boundaries. A lack of role clarity was described as having the potential to lead to resentment and conflict in the workplace.

*“My concern is lived experience roles are blurry and go into social worker roles. It’s dangerous... and lived experience representatives can’t be challenged—it is considered bullying or being mean.”*

## CHALLENGES FOR PRACTITIONERS WITH LIVED EXPERIENCE

As anticipated, a significant number of practitioners identified as victim survivors themselves and described the challenges they faced when deciding whether to disclose their lived experience in their workplaces. A number of these practitioners expressed concerns about the impact that disclosure would have on their careers and relationships with colleagues, as a barrier to disclosing:

*“I feel I have a unique perspective in contrasting my experience as both a professional as well as someone who has personally experienced family violence. I feel constrained by both family court and professional perceptions in sharing my personal story.”*

*“I don’t talk about my lived experience that often, because there is so much stigma attached.”*

Practitioners agreed that the development of guidelines and practical tools to support organisations who want to engage survivor advocates in policy development, service planning and improvement was an important step towards ensuring consistency and quality standards.

## WORKSHOP WITH SPECIALIST FAMILY VIOLENCE SERVICES

In February 2020 a workshop was run with the Domestic Violence Victoria, Specialist Family Violence Leadership Group. The group discussed the above literature review findings, existing Victorian models, consultation findings, and draft best practice principles.

The group also participated in an interactive activity where they were asked in table groups to 'plot' a number of different engagement activities with survivor advocates on the chart below.

Some of these activities included:

- Asking clients for informal feedback about the service they had received
- Sending a survey to those using their service
- Supporting survivor advocates prepare a submission to an inquiry
- Inviting survivor advocates to sit on an advisory group
- Inviting survivor advocates to sit a governance group or board

- Engaging survivor advocates to do paid project/policy work
- Engaging survivor advocates to do unpaid project/policy work
- Paid Peer Workers
- Engaging survivor advocates to do unpaid advocacy work
- Engaging survivor advocates to do paid advocacy work
- Training victim survivors to become paid media advocates
- Training victim survivors to become unpaid media advocates

This activity resulted in a very rich discussion about the degree of survivor advocate agency and influence in current initiatives and how that might be increased. There was also acknowledgement that some activities might require additional resources to be carried out in an ethical and empowering way. These discussions have heavily informed the development of the 'models' section of the Experts by Experience Framework.

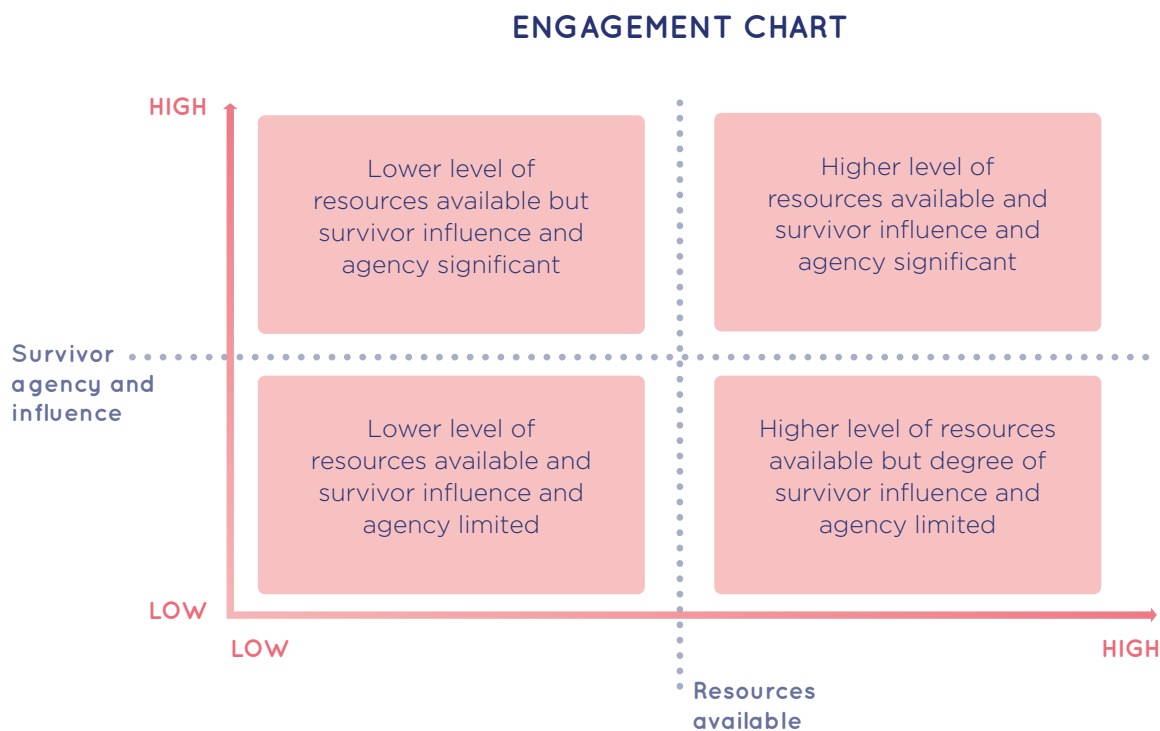


Figure 1: Engagement Activity from the Domestic Violence Victoria Specialist Family Violence Leadership Group workshop, February 2020.



## THE FRAMEWORK

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The development of the Family Violence Experts by Experience Framework has been informed by the existing evidence and the considerable insights gained from both victim survivor and practitioners through the stakeholder consultation process. The Framework has been designed as an online resource where information can be updated and resources added over time. The Framework can be found at **[dvvic.org.au/members/experts-by-experience](https://dvvic.org.au/members/experts-by-experience)**

# FAMILY VIOLENCE EXPERTS BY EXPERIENCE FRAMEWORK

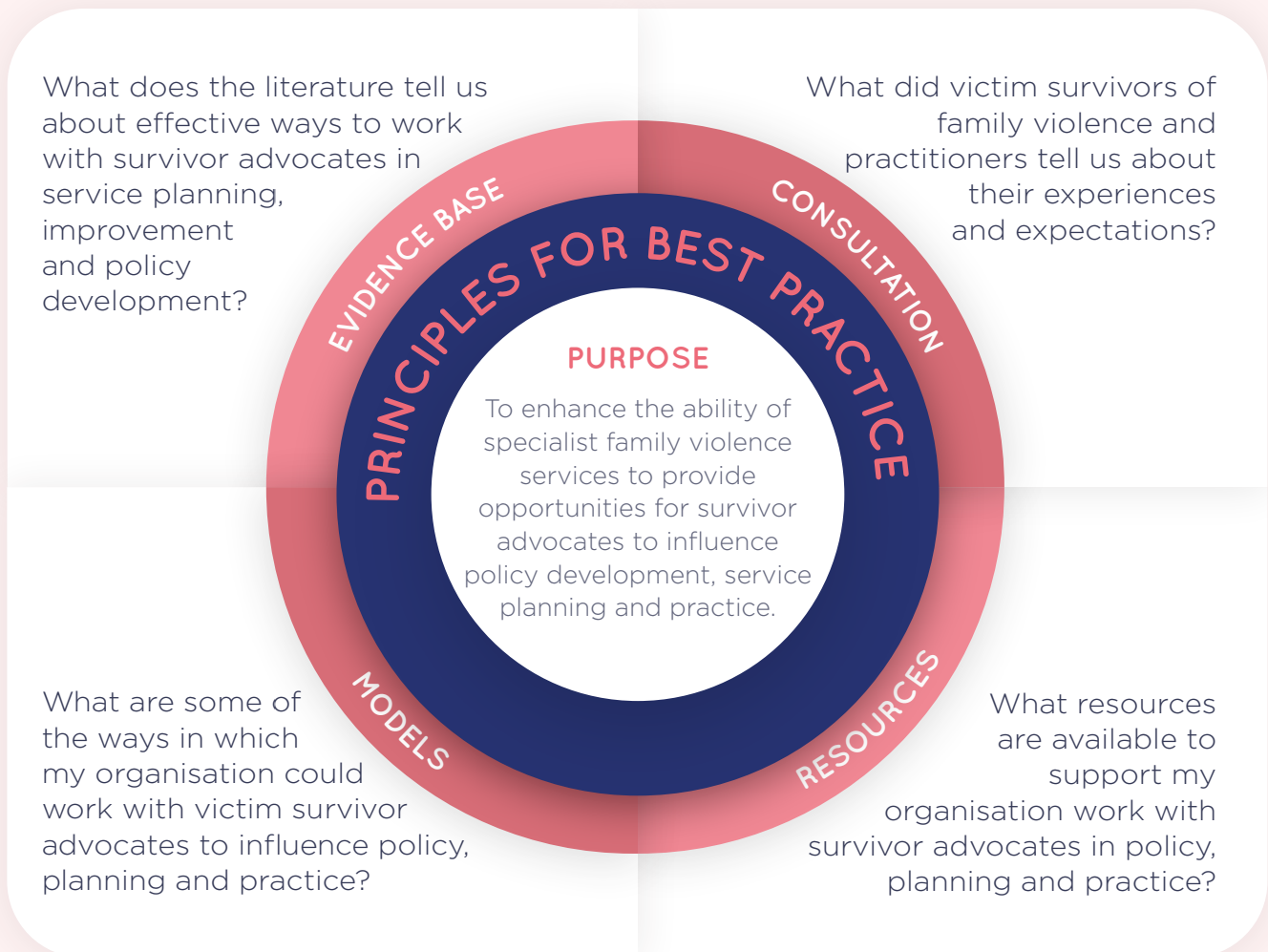


Figure 2: The Experts by Experience Framework

## The Framework includes:

- A set of best practice principles
- Information about the evidence base on which the Framework has been built (see Appendix 1)
- Consultation summary (as outlined in section above)
- Examples of models and initiatives (Appendix 2a and 2b)
- A set of useful resources including
  - An organisational readiness checklist (Appendix 3a)
  - Victim Survivor self-reflection questions (Appendix 3b)
  - A remuneration rates template (Appendix 3c)
  - Strategies for reducing power imbalances video (Appendix 3d)

## PRINCIPLES FOR BEST PRACTICE

The Experts by Experience Framework is based on the belief that responses to family violence will be most effective and safe if they are informed and developed in partnership with victim survivors. The following principles have been developed to guide collaborative processes for engaging survivor advocates by specialist family violence services. They have been developed based on consultation with victim survivors and key organisations as part of the development of the Framework and are consistent with the *Domestic Violence Victoria Code of Practice (2020)*.

### RECOGNISE

Victim survivors are acknowledged as holding valuable knowledge and expertise about family violence which is reflected in organisational policies and governance structures.

### SAFETY

Issues relating to legal, physical, emotional and cultural safety of survivor advocates are carefully considered but not used as a mechanism for exclusion.

### VALUE

In addition to being provided with recognition for their expertise, survivor advocates will be financially remunerated for their time, contributions and expenses when they provide significant input into policy and practice.

### TRANSPARENCY

There is clarity of purpose and information to support survivor advocates make participation decisions, including the degree of influence, nature of engagement and time commitments. Feedback will be given to survivor advocates about how their contribution influenced change.

### ACCOUNTABILITY

Engagement with survivor advocates is subject to regular review, evaluation and accompanied by clear complaints and feedback mechanisms.

### SUPPORT

Options for trauma-informed support and appropriate supervision are made available to enable survivor advocates to participate in collaboration.

### TRUST

Relationships between services and survivor advocates will be collaborative and built on trust. Power imbalances are addressed by reducing traditional barriers and by genuinely involving survivor advocates in decision-making.

### RECIPROCITY

Engagement with survivor advocates will promote mutuality and will be governed by shared information exchange and learning.

### INCLUSION

In order to gain insight into family violence from a broad range of perspectives, efforts will be made to look for and engage diverse victim survivor voices that might not usually be heard.

### SUSTAINABILITY

Formal engagement with survivor advocates is adequately resourced to allow longer term work, for partnerships to be built and key learnings to be shared across the family violence sector.

# RECOMMENDATIONS

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The following recommendations have been developed based on a review of the literature, consultations with victim survivors and practitioners across Victoria and with input from the project advisory group. It is also important to reiterate that these recommendations should be viewed in the context of acknowledging that the Victorian specialist family violence sector has developed and been underpinned by the lived experiences of victim-survivors of family violence since its inception. These principles support the adoption of a more formalised approach to the engagement of survivor advocates into the future.

## **PRIORITISE CO-PRODUCTION**

There is general agreement in the literature and amongst key stakeholders that there is scope and support for greater priority to be given to engaging survivor advocates at the strategic level across the specialist family violence sector. The literature suggests that this can be most effectively achieved when organisations are adequately resourced to do this work, and embed the value of lived experience in strategic planning processes and documents.

## **SECURE SUSTAINABLE FUNDING**

Specialist family violence services report increasingly being expected to engage survivor advocates by government and other funders. Consultations with key organisations and practitioners suggested that while there is support for this approach, these requests are not being accompanied by the additional funding needed. With resources stretched meeting serviced demand, this is described as a key barrier to the establishment or sustainability of initiatives longer term. A number of the co-production initiatives engaging survivor advocates identified in the literature and consultation which were rated highly by those in our stakeholder discussions, were only funded as short term pilots and were inactive at the time of the study due to a lack of continuous funding.

## **MORE CONSISTENT APPROACH**

Throughout the development of this framework, mechanisms being used by the specialist family violence sector to engage survivor advocates were found but were not supported by a statewide framework or standards. The lack of a unified approach has led to a degree of inconsistency in terms of the support, remuneration and conditions survivor advocates are receiving across the sector. There is a need to learn from the specialist family violence services who have been engaging survivor advocates for some time to build our knowledge base and better support innovation and sustainable engagement of survivor advocates more broadly.

## **ACKNOWLEDGE SPECIALIST FAMILY VIOLENCE PRACTITIONER'S OWN SURVIVOR EXPERIENCE**

It is known that a significant number of specialist family violence workers have experienced family violence. Some practitioners who were consulted for this framework development described feeling reluctant to disclose their own lived experience of family violence to their workplace for fear of negative consequences for their career. Further discussion about how to value and harness the strengths and insights of the workforce's lived experience is an area identified for future discussion and exploration.

## **VALUE ALL FORMS OF EXPERTISE**

There is more work to be done to establish an authorising environment that supports and values different forms of experience, expertise and perspectives. This includes workplace discussions about how different forms of expertise on family violence can come together to improve outcomes. Implementing this framework re-iterates and builds on the principles and standards of the DV Vic code of practice and origins of the family violence sector valuing the lived experience voice.

## **ESTABLISH A SURVIVOR ADVOCATE INDUSTRY OR REPRESENTATIVE BODY**

One of the key recommendations to emerge from this project is the need for a unified approach to how survivor advocates are supported, engaged and remunerated when they are engaging in contributing to service, policy and practice. It is therefore recommended that a Victim Survivor Industry or Representative Body be established.

It is recommended that this body be led and run by survivors and should:

- Act as the peak organisation for survivor advocates
- Set minimum standards around payment and conditions
- Provide learning and development opportunities
- Provide emotional support
- Connect programs and services to survivor advocates who are interested in being involved
- Play a role in advocacy
- Represent a broad range of survivor advocates of family violence and look for opportunities to better engage survivor advocates with diverse backgrounds and experience
- Support the development of a Peer Support workforce
- Coordinate responses to submissions and inquiries
- Establish a consulting model of fee for service
- Act as a point of dissemination for examples of best practice

# APPENDIX 1: EVIDENCE BASE

In order to provide context for the development of a lived experience framework for the specialist family violence sector, a literature review was undertaken to explore best practice in co-production and participatory decision-making models with service users around sensitive issues. Some of the key findings of this review are summarised below.

## TYPES OF CO-PRODUCTION

The review found that there is little consistency in the way in which co-production, co-design and consultation are defined (Loeffler & Bovaird, 2016). For the purposes of the review of the literature undertaken, co-production was defined as mechanisms which allow services and those with lived experience to come together to design policies and services that achieve better outcomes.

The literature suggests that the involvement of people with lived experience can occur across

a continuum ranging from relatively low levels of engagement, to work that is consumer-led (Werner-Seidler & Shaw, 2019). Co-production differs from consultation because it ‘changes people from being “voices” to being agents in the design and delivery of public services’ (Boyle et al. 2013). There is a considerable body of literature about participatory engagement and a number of ways of depicting and defining each level of the continuum. The diagram below is a simplified summary.

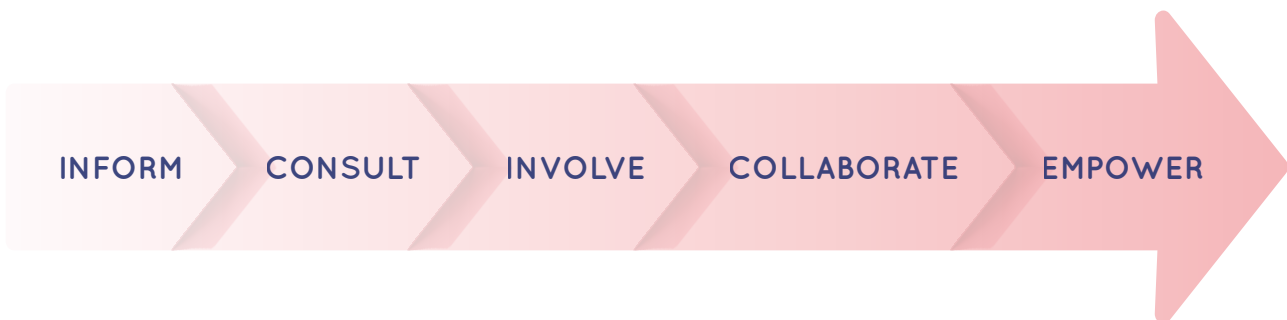


Diagram 1: Continuum of engagement

## IMPORTANCE OF CO-PRODUCTION

The underlying justification for the use of co-production is that the needs of service users are better met when people with lived experience are involved in designing and evaluating policies and services (Boyle et al., 2013). The literature suggests that existing services supporting vulnerable groups have a tendency to disempower those people who are supposed to benefit from services, which may actually entrench and perpetuate a culture of dependency (Boyle et al., 2013). Research has also found that the experience of being involved in a co-production activity as someone from a marginalised group can also have significant positive impacts for the individual (Roper et al., 2018).

## SECTORS USING CO-PRODUCTION

The review found that co-production has been occurring in some areas such as primary healthcare, mental health and Aboriginal service planning for some time. In contrast, other areas of social support have only recently begun to engage consumers in the design and evaluation of research, services and policy (Breault et al., 2018).

When looking at the evidence base supporting co-production, the vast majority of work has originated in the United Kingdom (UK) health system where service user involvement and collaborations have become embedded into policy development since the 1990s. While the health context is useful in providing guidance, it is also a very different area from family violence where the issues being tackled are often more sensitive and complex (Wilson, Smith, Tolmie, & de Haan, 2015). The Australian mental health sector and Aboriginal service planning areas have seen concerted efforts to increase engagement of people with lived experience in service planning and evaluation where there are sensitivities.

Since the 1990s the mental health system has been engaging people with experience of using mental health services in a range of ways. There are many examples of co-production in mental healthcare and a growing body of knowledge which explores methods and challenges (Clayson et al., 2018). The focus on engagement of people with lived experience in the mental health system is associated with the

concept of recovery, with practitioners moving from focusing on the treatment of the disease and client clinical recovery to the promotion of wellbeing and personal recovery, with consumer engagement seen as one way of furthering this goal (Foglieni, Segato, Sangiorgi, & Carrera, 2019). One significant way in which people with lived experience are engaged in the mental health service system is as paid peer support workers, with over 300 of these roles currently funded across Victoria.

The literature (Byrne, Roennfeldt, & O'Shea, 2017) suggests that some of the biggest challenges that faced the introduction of lived experience work in the mental health sector have been:

- professional defensiveness
- attitudes of mental health practitioners
- scepticism regarding the value of lived experience workers
- challenges in gathering formal evidence of efficacy to secure ongoing funding

For some years Australian state and federal governments have recognised that policy and service planning for Aboriginal people is complex due to factors such as colonisation, politics, geography and socio-economic marginalisation (Dreise & Mazurski, 2018). In response they have recognised that more effective outcomes can be achieved if the Aboriginal community is involved in problem solving and self-determination (Victorian Government, 2019a). While efforts to engage the Aboriginal community have occurred, the literature suggests that early efforts were tokenistic consultations which have little impact on service design or responses (Corrigan & Burton, 2014).

More recently it has been acknowledged that consultation alone is not adequate and we can see examples of co-production where Aboriginal people are engaged in designing services, such as the Victorian Aboriginal Maternal Child Health Initiative (Victorian Government, 2017) and antenatal services (Beaumont, 2019).

When looking at the literature about effective co-production across a range of settings including the mental health sector, some key principles emerge and are summarised below:

## **GENUINE COMMITMENT**

The literature suggests that any co-production activity needs to be supported by organisational leaders who promote the view that people with lived experience have a range of valuable skills and knowledge (Boyle, Coote, Sherwood, & Slay, 2013). A lack of organisational commitment has been described as a key challenge or barrier to effective engagement (Byrne et al., 2017).

## **TRANSPARENCY**

It is well-documented that a key driver for why people with lived experience decide to engage in a co-production activity is a desire to make a difference (Werner-Seidler & Shaw, 2019). It is therefore important that participants are given information about the scope, constraints and degree of influence their views are likely to have and also how their feedback has led to change.

## **RELATIONSHIP BUILDING**

Regardless of the sector in which the co-production is occurring, the foundations for successful collaboration appear to be built upon strong and genuine relationships (Clayson et al., 2018). The literature emphasises these relationships can take some time to build and that structures to facilitate co-production need to have adequate timelines and longevity to be most effective (Werner-Seidler & Shaw, 2019, p. 1637). Another key factor underpinning successful co-production is the ability to reduce traditional boundaries between 'professionals' and 'service users' (Boyle et al., 2013). This allows for power differentials to be reduced and a more equal exchange of knowledge (Clayson et al., 2018).

## **COMPENSATION FOR PARTICIPATION**

There is a considerable body of literature about whether people with lived experience should be paid financial compensation for their involvement in co-production activities and there are multiple views. Several studies have found that financial compensation is not a motivating factor for involvement for those with lived experience, but rather something that was appreciated as symbolic of being valued and recognised (Bennetts, 2009). The literature suggests that offering recompense to participants for their time, input and costs incurred can be effective in contributing to reducing power imbalances.

## **PROVIDING SUPPORT**

The provision of support for people with lived experience is described as particularly important when the issues being discussed and addressed are of a sensitive nature or emotionally distressing. The literature suggests that debriefing for both those with lived experience and those working with these groups is important to ensure the maintenance of boundaries, promote self-care, prevent burnout and ensure the experience is a positive one.



## APPENDIX 2A: MODELS OF ENGAGEMENT

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There are a range of ways in which survivor advocates of family violence can be engaged to influence policy development, service planning and practice. In the following section, examples are given about how each activity could be carried out in a way that align with the Framework best practice principles. This list of activities is designed to be illustrative but not exhaustive. It is important to consider that each of the activities listed below provide survivor advocates with a varied degree of agency and influence and require a different level of resourcing.

Activity	Degree of survivor advocate agency and influence	Some examples of how to ensure engagement activities align with the best practice principles
<p><b>Employ survivor advocates as peer workers</b></p> <p>Survivor advocates are paid and employed by family violence services to provide support to other victims of family violence navigating the service system.</p>	High	<p>Organisational and strategic planning documents will acknowledge the valuable knowledge and expertise that survivor advocates have, with an emphasis on the benefits of their engagement in terms of mutual information exchange and learning. <b>(Recognise + Reciprocity)</b></p> <p>Survivor advocates will be provided with clear position descriptions and understanding of their role and its limitations, and support to develop the key skills to perform their role. <b>(Transparency + Reciprocity)</b></p> <p>A diverse range of survivor advocates are sought to bring an intersectional lens to peer worker roles. <b>(Inclusion)</b></p> <p>Careful consideration is given to how to reduce power imbalances between survivor advocates and other employees. <b>(Trust)</b></p>
<p><b>Allocated victim survivor positions on governance groups and boards</b></p> <p>Positions on the boards of family violence services and peak bodies are designated for 2 or more victim survivors who are paid and who contribute to organisational strategic planning.</p>	High	<p>Reservation of positions for victim survivors on governance groups and boards are established in organisational policies and procedures so that the initiative is sustained regardless of leadership changes. <b>(Sustainability)</b></p> <p>Victim survivors who express interest in joining governance groups or boards will be provided with clarity about how they will be remunerated, tenure, time commitments and scope of their involvement. <b>(Transparency + Value)</b></p> <p>Victim survivors will be provided with the emotional support and opportunities for skill development they need to prepare for and participate in governance structures and understand their legal responsibilities. <b>(Support + Reciprocity)</b></p> <p>A diverse range of voices is sought to participate on boards and other governance groups to ensure an intersectional lens on lived experience can be obtained. <b>(Inclusion)</b></p> <p>Careful consideration is given to how to reduce power imbalances between victim survivors and other members of the group (such as ensuring there is more than one survivor representative). <b>(Trust)</b></p> <p>Survivor advocates will be involved in regular reviews and evaluations of their experience being a member of the board or other governance group. <b>(Accountability)</b></p>

Activity	Degree of survivor advocate agency and influence	Some examples of how to ensure engagement activities align with the best practice principles
<p><b>Involve Survivor Advocate in organisational strategic planning</b></p> <p>Family violence services formally engage victim survivors to contribute to and shape organisational policies, procedures and practice.</p>	High	<p>Organisational and strategic planning documents will acknowledge the valuable knowledge and expertise that survivor advocates have, with an emphasis on the benefits of their engagement in strategic planning in terms of mutual information exchange and learning. <b>(Recognise + Reciprocity)</b></p> <p>Survivor advocates will be provided with the emotional support and opportunities they need to prepare for and perform their role and understand their legal responsibilities. <b>(Support + Reciprocity)</b></p> <p>Survivor advocates who are engaged in strategic planning processes will have genuine influence and opportunities to influence decision making. <b>(Trust)</b></p>
<p><b>Include survivor advocates in advisory or working groups</b></p> <p>Survivor advocates are invited to become involved in advisory and working groups established to support organisational policy and service development or to support specific projects.</p>	Medium	<p>Victim survivors who are invited to participate in advisory groups will be provided with clarity about how they will be remunerated, tenure, time commitments and scope of their involvement. <b>(Transparency + Value)</b></p> <p>Victim survivors will be provided with the emotional support and opportunities for skill development they need to prepare for and participate in these groups. <b>(Support + Reciprocity)</b></p> <p>A diverse range of voices are sought to participate on advisory and working groups to ensure an intersectional lens on lived experience can be obtained. <b>(Inclusion)</b></p> <p>Survivor advocates who are engaged in advisory and working groups will have genuine influence and opportunities to influence decision making. They will also be involved in regular reviews and evaluations of their experience being engaged in the advisory or working group <b>(Trust + Accountability)</b></p>
<p><b>Involve survivor advocates in project/policy work</b></p> <p>Survivor advocates are invited to become involved in policy and project work to support organisational policy and service development or to support specific projects.</p>	Medium	<p>Organisational and strategic planning documents will acknowledge the valuable knowledge and expertise that survivor advocates have with an emphasis on the benefits of their engagement in terms of mutual information exchange and learning. <b>(Recognise + Reciprocity)</b></p> <p>Survivor advocates will be provided with clarity around their role in project or policy work. They will also be provided with the emotional support and opportunities to develop the key skills needed to perform their role. <b>(Transparency + Support + Reciprocity)</b></p> <p>Careful consideration is given to how to reduce power imbalances between survivor advocates and other employees they will interact with. <b>(Trust)</b></p>

Activity	Degree of survivor advocate agency and influence	Some examples of how to ensure engagement activities align with the best practice principles
<p><b>Media advocates</b></p> <p>Survivor advocates are supported to safely and effectively share their personal stories and raise awareness of family violence with a range of media audiences.</p>	<p>Medium</p>	<p>Survivors who express interest in becoming media advocates will be provided with clarity about how they will be remunerated, tenure, time commitments and scope of their involvement. <b>(Transparency + Value)</b></p> <p>Survivor advocates will be provided with the emotional support and opportunities for skill development they need to prepare for and become media advocates. <b>(Support + Reciprocity)</b></p> <p>Considerations relating to the legal, physical, emotional and cultural safety of victim survivors are carefully considered and survivor-led, with guidance available via the <b>self-reflection questions (Safety)</b></p> <p>A diverse range of voices are sought to participate as media advocates to ensure an intersectional perspective on lived experience is gained. <b>(Inclusion)</b></p> <p>Processes that involve the engagement of survivor advocates will be regularly reviewed and evaluated. <b>(Accountability)</b></p>
<p><b>General advocacy</b></p> <p>Survivor advocates are supported to safely and effectively share their personal stories with a range of community audiences to raise awareness and to advocate for the service they are engaged with, or for improved responses to family violence.</p>	<p>Low/Medium</p>	<p>Survivor advocates will be remunerated and will be provided with clarity about the time commitments required, costs that will be covered and scope of their involvement. <b>(Value + Transparency)</b></p> <p>Survivor advocates will be provided with the emotional support and opportunities for skill development they need to prepare for their advocacy role. <b>(Support)</b></p> <p>Considerations relating to the legal, physical, emotional and cultural safety of victim survivors are carefully considered and survivor-led, with guidance available via the <b>self-reflection questions. (Safety)</b></p> <p>A diverse range of voices are sought to participate as advocates to ensure an intersectional perspective on lived experience is gained. <b>(Inclusion)</b></p>
<p><b>Support survivor advocates prepare a submission to an inquiry</b></p> <p>At times an organisation may be preparing a submission to a government inquiry or review and will seek survivor stories, experiences and input to develop that submission.</p>	<p>High</p>	<p>Victim survivors are provided with remuneration for their time and the legal, emotional and cultural support they need to participate. <b>(Support + Value)</b></p> <p>A diverse range of survivor voices are sought and engaged. <b>(Inclusion)</b></p> <p>The necessary resources are provided to assist the survivor advocates prepare the submission while ensuring the shape and focus of the submission is heavily informed by the survivors' voices. <b>(Recognise + Trust)</b></p>

Activity	Degree of survivor advocate agency and influence	Some examples of how to ensure engagement activities align with the best practice principles
<p><b>Formal feedback about the service</b></p> <p>All clients who have accessed a service will be asked for their feedback on the service they have attended. This may be via an online survey or phone interview.</p>	<p>Low</p>	<p>Victim survivors will be involved in designing feedback questions and surveys and will receive feedback about the issues raised and how this feedback has influenced practice. <b>(Transparency)</b></p>
<p><b>Informal feedback about the service</b></p> <p>Family violence organisations regularly ask clients for feedback about how they feel their needs are being met and suggestions for how the service offering could be improved. Sometimes this will be done face to face or via anonymous suggestion box.</p>	<p>Low</p>	<p>Clients will receive feedback about how their suggestions influenced practice. <b>(Transparency)</b></p>

## APPENDIX 2B: EXAMPLES OF INITIATIVES

### University of Melbourne, WEAVERs

**WEAVERs** is an initiative of the University of Melbourne's Research Alliance to End Violence against women and their children (MAEVe) and was established in 2016. The WEAVERs initiative was developed to ensure that the voices of women and children who have experienced family violence could influence the research agenda. The role of the WEAVERs is to advise MAEVe on areas of research and research design, which may include co-design and input into methodologies and undertake research in collaboration with MAEVe's Academic team.

WEAVERs also develop and carry out research on topics they determine and are provided with support to develop the skills they need to develop research questions, carry out data collection, undertake data analysis and write up findings. WEAVERs regularly present at research events, forums, and conferences.

### Victorian Government, Victim Survivors' Advisory Council

Following the Royal Commission into Family Violence in Victoria, a **Victim Survivors' Advisory Council (VSAC)** was developed and supported by the Victorian government to ensure victim survivors of family violence are engaged in the implementation of recommendations. VSAC's role is to:

- Place people with lived experience at the centre of family violence reform.
- Include people who have experienced family violence in service design of family violence reforms.
- Advise on how family violence reform initiatives will impact on people who use services.
- Ensure the government's response to the recommendations of the Royal Commission into Family Violence meets the expectations of people with lived experience.
- Ensure advice to the government reflects the diversity of the family violence experience.
- Provide advice on specific issues requested by the Family Violence Committee of Cabinet and/or the Family Violence Steering Committee.

VSAC members are appointed for two years and are supported by members of the Secretariat who are situated in Family Safety Victoria. The first term of operation of VSAC has recently been evaluated.

### Safe Steps Survivor Advocates

Safe Steps is the Victorian statewide response service for women, children and young people experiencing family violence. It provides a 24 hour response line, undertakes risk assessments, arranges access to emergency accommodation, provides emotional support and advocacy. Since 2007 Safe Steps has been running a **Survivor Advocate Program**. This was designed to empower women who have a lived experience of family violence to safely and effectively share their personal stories, and raise awareness of family violence and specialist family violence services with a range of community and media audiences. Safe Steps provides up to three days of training and ongoing support to women, equipping them with skills to effectively engage with the media and present at other events. Safe Steps regularly connects with advocates to offer debriefing and also to seek feedback about their experience of being involved in the program.

### Women's Health East, Speaking Out Program

In 2011 Women's Health East initiated the Eastern Media Advocacy Program (EMAP), 'Voices for Change' (which became the **Speaking out Program**) in recognition that women who are directly impacted by violence have important insight into what needs to change in order to end violence against women. The initiative aims to ensure that the voices of women who have experienced family violence and sexual assault are heard in a range of contexts including in advocacy, consultation, submissions to inquiries, the media and at public events. The program supports women to gain the skills necessary to do this work. This project was evaluated and it was found that it had a positive impact on the self-confidence, knowledge and skills of survivor advocates as well as increasing the quality of media reports about family violence and sexual assault. The project produced an implementation guide which is a useful resource for anyone wanting to introduce a media advocacy program for those with lived experience of family violence.

### inTouch, Inspire for Change

inTouch, the Multicultural Centre Against Family Violence established an advisory group **Inspire for Change: Multicultural Voices of Lived Experience** in 2018. It comprises past clients to inform the current family violence reforms and advise various stakeholders on different issues relating to family violence. The group informs inTouch projects and programs as well as advocating for systemic changes. The group members provide expert advice based on their lived experiences in the prevention and response of violence against women and children, and are appointed for 12 months.

### Drummond St, iHeal Family Violence Recovery

The **iHeal Family Violence Recovery Support service** was a recovery peer work model informed by findings from the Royal Commission into Family Violence that survivors needed longer-term recovery support after leaving family violence situations. The iHeal model was developed and trialled for people from diverse communities, namely Lesbian, Gay, Bisexual, Transgender, Intersex and Queer (LGBTIQ) communities, CALD communities, and people living with a disability. People from these diverse communities who had a lived experience of family violence were recruited and employed as Recovery Support Workers (RSWs). They provide case work and advocacy to other survivors to provide support around the things that survivors identified as barriers to recovery. These include help navigating complex systems such as court, child protection, mental health, housing, alcohol and other drugs (AOD) services, education and employment and assistance with a range of other diverse needs.

# APPENDIX 3A: ORGANISATIONAL READINESS CHECKLIST

The following checklist provides guidance for organisations who are considering engaging people with lived experience of family violence (experts by experience) in the co-design of services and policies. The checklist is designed to be appropriate for a broad range of activities including introducing people with lived experience on boards and other governance groups, or establishing advisory groups.

	Yes	No	Working towards
<b>Governance and Leadership</b>			
Does your organisation have a clear commitment to engaging survivor advocates in the organisation's strategic plan?			
Does your organisation have values and a culture that is consistent with the principles of the <b>Experts by Experience Framework</b> ?			
Does your organisation have a commitment to making changes to your policies and practice based on input from survivor advocates?			
Has your organisation explored a range of models to ensure you can maximise the degree of influence and engagement of survivor advocates?			
<b>Resourcing &amp; Training</b>			
Do you have funding for a coordinator role to work with the experts by experience?			
Is your organisation able and willing to value the contribution of experts by experience and provide them with remuneration and/or cover out of pocket expenses?			
Will paid training or induction be provided to experts by experience to develop the necessary skills to carry out the work?			
<b>Workplace Safety &amp; Inclusion</b>			
Do organisational strategies to ensure a healthy and safe workplace extend to and protect experts by experience?			
Does the organisation operate in a trauma-informed way?			
Does the organisation demonstrate diversity and inclusive practice, including ensuring the engagement of experts by experience is resourced for and accessible to people who need interpreters, translators and/or who have a disability?			



	Yes	No	Working towards
<b>Recruitment</b>			
Is your organisation equipped to support victim survivors to weigh up the benefits and challenges of participating? Read <b>self-reflection questions</b> .			
Has the organisation thought about how experts by experience will be recruited, to ensure a range of diverse perspectives will be included (including ensuring the process is resourced for and accessible to people who need interpreters, translators and/or those who have a disability)?			
Has the organisation given consideration to what type of induction process might be provided to survivor advocates to ensure they are clear about their rates of pay, conditions, tenure and legal liabilities?			
<b>Procedures</b>			
Has the organisation put in place appropriate supervision, support and ongoing professional development for the safety and wellbeing of the survivor advocates?			
Has your organisation thought through how you will put in place protections around confidentiality, privacy and safety and how you will work with survivor advocates to regularly review arrangements put in place?			
Has the organisation put in place appropriate training, supervision, support and professional development for <i>workers</i> supporting the experts by experience?			
Has advice been sought to determine whether survivor advocates are covered by your organisation's insurance policies and legal service?			
<b>Accountability</b>			
Has your organisation established formal feedback mechanisms so that experts by experience are clear about how their engagement with the organisation has influenced change?			
Are there clear formal processes for victim survivors to provide their perspective on how the engagement is working as well as express complaints or concerns?			
Has your organisation established a process for regularly evaluating the initiative?			
<b>Other Considerations</b>			
If your organisation does not have conditions in place and resources to engage experts by experience, have you considered partnering or developing formal memorandums of understanding with other organisations who do?			

## APPENDIX 3B: EXPERTS BY EXPERIENCE SELF-REFLECTION QUESTIONS

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This series of questions has been developed to support family violence victim survivors decide whether they would like to be formally engaged as a survivor advocate. These questions might provide useful guidance for discussions between an organisation and a survivor during the recruitment process. **A checklist to determine organisational readiness is also available.**

### READINESS TO UNDERTAKE THE WORK

- What are my reasons for wanting to participate as a survivor advocate?
- Do I really want to participate or am I feeling that I should?
- Am I ready to talk about my own personal experiences if required?

### RESOURCES NEEDED

- Do I have enough resources in place both personally and professionally to do the work required as an expert by experience?
- What support will I need to ensure my health and wellbeing is not negatively impacted by participation?
- How will I manage the emotions associated with talking about family violence?
- What strategies will I use if someone reacts negatively or judgmentally to my expertise?

### SAFETY CONSIDERATIONS

- Is it safe for me to participate?
- Are there any ongoing risks posed by the person who abused me?
- Are there protections that can be put in place to increase my safety?
- Do I know if this organisation has procedures in place to record and remember the safety protections I want to put in place?

### BOUNDARIES

- How will I ensure my personal and professional boundaries are upheld?
- What are my personal limits regarding what I am happy to contribute as a survivor advocate?
- Am I clear about the limitations of this role and who I am able to represent when I speak publicly?

## LEGAL CONSIDERATIONS

- Am I involved in any ongoing legal proceedings that may be jeopardised by participating as an expert by experience?
- Are there any potential legal consequences of being an expert by experience?
- Am I clear about how I would make complaints or provide feedback about my involvement with this organisation?

## PRIVACY

- What information am I ready to share and what information do I want to keep private?
- How do I feel about colleagues or family members finding out about my experiences?
- Do I want to participate in this work anonymously?
- Am I able to use my own name or do I want to develop a synonym?
- Is it ok for photos to be used of me in promotional materials or online?

## OTHER CONSIDERATIONS

- Are there people in my life who need to be aware of my decision to be an expert by experience?
- How might my children or family feel about my decision to participate? What might the impacts of this decision be for them?
- How might my community feel about and react to my decision to participate? How might their responses impact me?

## APPENDIX 3C: REMUNERATION RATES

One of the Best Practice Principles of the *Family Violence Experts by Experience Framework* focuses on the importance of valuing the contributions and expertise of survivor advocates. One of the other principles emphasises the importance of being transparent when providing information about participation opportunities.

One way in which transparency can be achieved is by ensuring that your organisation provides remuneration in a way that is clear and consistent. An example of the type of document you might like to develop for your organisation is outlined below.

Level of engagement	Remuneration	Mechanisms of engagement	Rate	Specify costs covered (travel, child care, taxi, meals etc)
<b>Co-production</b>	Sitting fee	<ul style="list-style-type: none"> <li>Positions on boards and/or other governance structures</li> </ul>		
<b>Co-production</b>	Salary	<ul style="list-style-type: none"> <li>Paid Peer Support Workers</li> </ul>		
<b>Co-production</b>	Hourly rate	<ul style="list-style-type: none"> <li>Contribute to organisational strategic planning</li> </ul>		
<b>Collaborate</b>	Hourly rate	<ul style="list-style-type: none"> <li>Represent the experts by experience perspective on Steering Committees, Advisory Committees, Working Groups</li> <li>Program and project involvement</li> <li>Invited Speaker at an event</li> </ul>		
<b>Involving</b>	Hourly rate	<ul style="list-style-type: none"> <li>Reviewing or contributing to research or project work</li> <li>Promoting a service publicly</li> <li>Media advocates</li> <li>General advocacy work</li> </ul>		
<b>Consulting</b>	Hourly rate	<ul style="list-style-type: none"> <li>Participation in consultation activities such as focus groups, consultative workshops and interviews (in person or via phone)</li> </ul>		
<b>Informing</b>	None	<ul style="list-style-type: none"> <li>Attend an event as an audience member</li> <li>Formal client feedback (eg. complete survey)</li> <li>Informal client feedback</li> </ul>		

Before you set your payment rates, it might be useful to look at the consumer participation rates set by other organisations, for example:

**The Consumer Cost Model – Victorian Comprehensive Cancer Centre**

<https://www.viccompccancerctr.org/about-vccc/consumer-engagement/resources/consumer-cost-model>

**The National Mental Health Commission - Paid Participation Policy**

<https://www.mentalhealthcommission.gov.au/getmedia/afffd63-8100-4457-90c7-8617f2d3c6d6/Paid-Participation-Policy-revised-March-2019>

**Social, Community, Home Care and Disability Services Industry Award 2010**

<https://www.fairwork.gov.au/pay/minimum-wages/social-and-community-services-industry-pay-rates>

More information about legal considerations of engaging consumer representatives can be found at the **Not for Profit Law – Justice Connect website**

[https://www.nfplaw.org.au/sites/default/files/media/Payments\\_to\\_consumer\\_representatives\\_Cth.pdf](https://www.nfplaw.org.au/sites/default/files/media/Payments_to_consumer_representatives_Cth.pdf)

## APPENDIX 3D: ADDRESSING POWER IMBALANCES

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We asked the University of Melbourne WEAVER survivor advocates for their ideas about how to address power imbalances when working with people with lived experience of family violence.

The video can be accessed online at [dvvic.org.au/members/experts-by-experience](https://dvvic.org.au/members/experts-by-experience).

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