KEY FINDINGS

- Using the shared language suggested by the Safe & Together Model enabled practitioners to collaborate with other professionals and work with families more effectively.
- Informed and supportive leadership is critical in creating authorising environments for practice change and progress.
- Local connections and proximity of work locations are powerful enablers of collaborative and sustained relationships between practitioners.
- Practice change requires everyday workloads to include time and space for reflective practice.

LEARNING ABOUT LONG-TERM PRACTICE CHANGE

This study focused on long-term practice changes reported by participants of the STACY Project in follow up interviews 12 months after the project. STACY (2018-19) investigated and developed practitioner and organisational capacity through Communities of Practice, supported by coaching in the Safe & Together™ Model. Participants focused on collaboratively and holistically providing services to children and families living with domestic or family violence, where parental issues of mental health and alcohol or other drug use co-occur. A set of practice guides were developed through the STACY Project focused on working across these sectors.

Students on field placement as part of their Master of Social Work

degree at the University of Melbourne conducted interviews under the supervision of the research team in 2020. The interviews sought insights from practitioners about changes in their practice since participating in the STACY Communities of Practice in 2019, and the sustainability of any such changes.

The study also aimed to inform the development of the ESTIE Project (Evidence to Support Safe & Together Implementation and Evaluation). This project focuses on how the Community of Practice model can embed the STACY Guidelines into policy and practice. It also aims to build in case and other documentation which maps perpetrator patterns and records the strengths and needs of the non-offending parent and children.

16 STACY PARTICIPANTS

Sites

10 in Site 1 | 6 in Site 2

Gender

14 women | 1 man 1 gender fluid person

Education

7 Masters level | 6 Bachelors level | 3 other degrees

Country of birth

11 in Australia | 5 overseas

1 Aboriginal and/or Torres Strait Islander participant

Service area

4 AOD | 4 CP | 3 FS | 4 FV | 1 other

AOD - alcohol and other drug | CP - child protection | FS - family services | FV - family violence





FINDINGS

Working at the intersection of domestic and family violence, substance misuse and mental health requires embedded, positive practice change and development. Findings from this project concern individual level practice change and organisational, systems level issues. Practitioners in interviews were enthusiastic about the contribution that STACY and the Safe & Together Model had made to their practice.

Shared language | Shared language that enables holding perpetrators accountable and that clearly establishes a position of partnering with the non-offending parent was the most salient, ongoing change in practice for interviewees. Mindful use of questions and framing were seen as key to respectful communication between workers within and across agencies and organisations, as well as between workers and the families they engaged with.

Leadership and authorising environment | Engaged and supportive leadership was critical to embedding and sustaining practice change. Where commitment to practice change and an authorising environment were not present, practitioners struggled to gain traction. Where management were informed and supportive, positive practice change could be explored, pursued and embedded.

Inclusion of management |

Inclusion of management staff and leadership in training and ongoing discussions around implementation and embedding of an all of family approach is critical to fostering an authorising environment for positive and sustained practice change.

Connections and proximity | The geographical location of workers affected their ability to embed collaborative practice and advance their established partnerships. Where practitioners were able to establish connections and were co-located, or in close enough proximity to work together regularly, positive change and lasting relationships could be fostered.

Focusing on diversity |

Practitioners spoke about the importance of focusing on diversity and how Safe & Together principles are implemented in work with

diverse client cohorts including different socio-economic groups, sexual orientations, cultural backgrounds, and families of origin.

Time | Practitioners expressed their need for more time to develop their understanding of the Safe & Together™ Model, and their confidence in working with an all of family approach. This included space and time in everyday workloads to develop and embed positive practice change following training.

Funding | During and following the STACY Project, interviewees wanted further comprehensive training, resourcing and support for practitioners and organisations looking to implement and sustain an all of family approach like Safe & Together. However, they spoke of limited opportunities due to funding constraints.

CONCLUSION

Findings from this project provide valuable learning to inform the ESTIE Project, as well as future work at the intersections of domestic and family violence, substance misuse and mental health.

- Multiple levels of leadership and authorising environment are needed to effectively support and sustain practice change.
- Communities of practice are one way to support reflective time and space that also fosters connections and shared language between practitioners and organisations. However, within the limits of available time and funding, creativity is needed to support practice change and reflection, including developing different approaches to practice rather than additional workload.
- Future leadership focus on creative ways to support and sustain work across sectors, could usefully include
 attention to diversity, fostering connections and where possible, proximity for workers to collaborate and
 share experience towards domestic violence-informed practice.