

Community Initiatives Against Family Violence Protocols Project: A Formative Evaluation

**Submitted to:
Project Steering Committee
CIAFV Protocols Working Group**

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EXECUTIVE SUMMARY

The findings of this formative evaluation of the Community Initiatives Against Family Violence (CIAFV) Protocols project are intended to:

- Help inform future phases of the CIAFV Protocols work; and
- Provide useful, best practices information to other communities considering undertaking a similar protocol development process.

On May 26 1999, an inclusive community consultation process involving 63 community representatives from a broad range of services and systems in the city of Edmonton identified the need to reduce the incidence of family violence through cost-effective coordination and collaborative efforts and through the promotion of preventive initiatives. The Community Initiatives Against Family Violence (CIAFV) group resulted from this process. CIAFV's mission is to strengthen the capability of the Edmonton community to take constructive action against family violence and move toward solutions.

The CIAFV Protocols Working Group determined that the best way to achieve these outcomes was for organizations in Edmonton to develop a set of coordinated guidelines or steps (protocols) to identify, detect and respond, in a consistent manner to persons at risk of family violence as well as those impacted by family violence.

Funding was received from Status of Women Canada and National Crime Prevention Centre – Community Enhancement. A full-time (37.5 hours/week) Protocol Coordinator was hired in September 2001 to develop protocols that addressed issues of family violence with agencies and systems involved in CIAFV. During the 18 months of the project, the Protocol Coordinator focused on the following activities:

- Development of a protocol template;
- Preparation of a family violence handbook; and
- Development and delivery of training on protocols and family violence.

The evaluation process included primary data collected from 77 individuals through personal or telephone interviews and focus groups. Secondary or historic data was gathered through document review. A mixed method approach was used for data analysis.

Twelve agencies completed family violence protocols during the first phase of the project. Representatives from these agencies identified the following benefits from this process:

- A greater knowledge of community resources and the ability to link clients to these resources.
- A formalized process around family violence and risk assessment.
- Inclusion of a family violence question on their agency client intake form.
- Development of a standardized, consistent protocol document.
- Development of safety plans for clients.

- An increased sense of comfort or security provided for staff in having a formalized written protocol.

Agencies that developed family violence protocols identified some challenges with this process as follows:

- Finding time to develop the protocol.
- Staff apprehension with asking clients a direct question about family violence.
- Disagreements among staff based on differing perceptions on family violence issues, depending on their previous experience/knowledge about family violence.
- Resistance on the part of a few staff members as they saw the protocol as a duplication of policies and or procedures they were already following.

All respondents indicated an increased level of understanding of family violence by staff members as a result of the protocol development process. The training sessions provided by the Protocol Coordinator on the topic of family violence provided staff members with a common understanding as well as a common language to discuss the issue.

The CIAFV Protocols project provided an excellent opportunity for community agencies to learn more about the resources, programs and services that they bring to address family violence. Some agencies identified the potential for new programs or services to serve community members.

Ten CIAFV member agencies that had not yet developed a family violence protocol were asked what factors had influenced this decision. This data provided some useful perspectives on what “barriers” caused some agencies to not proceed with developing a family violence protocol.

Recommendations

Some recommendations from this evaluation study are as follows:

a) Protocol Coordinator Role

The most critical role played by the Protocol Coordinator up to October 2002 was that of a “coach”. Through the provision of facilitation, writing, and family violence education services to agencies preparing family violence protocols, the Protocol Coordinator offered continual support, encouragement, and products to help agencies throughout the protocol process. Without a Protocol Coordinator in this coaching role, it is unlikely that agencies would have succeeded in overcoming barriers to developing family violence protocols.

The Protocol Coordinator’s development of a family violence protocol template, screening tools, and a family violence handbook has resulted in a set of useful project materials.

The Protocol Coordinator should provide follow-up contact with agencies that have completed and implemented the family violence protocol. This would provide the opportunity to see if the protocols are working, identify where new

tools or materials may be required, and discover best practices that can be shared with others.

b) Community

Start the protocol development work at the community level then move to the agency level.

c) Individual Agencies or Organizations

Revisit the organization's framework policies (vision, mission, principles/values, and goals) to ensure they are up-to-date and relevant before undertaking the family violence protocol process.

Clarify the purpose of the agency undertaking the family violence protocol development process. Strong organizational commitment and support from management and staff of the agency to commit the time to complete the protocol development process is critical.

Someone in each agency must monitor the implementation of the protocol and make necessary adjustments or changes as a result of implementation.

d) CIAFV Protocols Working Group

Maintain the CIAFV Protocols Working Group as a focal point for protocol development activities. This provides an opportunity for member agencies to share the challenges and benefits of protocol development and implementation. It can also serve as a forum to discuss relevant family violence issues.

Recognize that the sustainability of the protocol development process depends on creating and maintaining a sense of momentum developing protocols at the agency level and linking the protocols at a community level.

e) Communication

Regular communication is critical to maintaining momentum and commitment to the protocol development process.

Agencies that have successfully completed the protocol development process should actively promote and communicate the benefits of having a family violence prevention protocol with agencies that have similar mandates and/or client groups (e.g. persons with disabilities, immigrant servicing agencies, etc.).

f) Training/Education

The family violence-training workshop should be the first activity for an agency that has agreed to undertake the protocol development process. This ensures a common set of family violence prevention definitions, knowledge, and awareness that helps agency staff to work through the process more effectively and efficiently. Include diversity training as part of the family violence training.

I. INTRODUCTION

An evaluation of the Community Initiatives Against Family Violence (CIAFV) Protocols project was requested by the Steering Committee of the CIAFV Protocols Working Group. This evaluation is intended to address questions of interest to:

- The CIAFV Protocols Working Group Project Steering Committee,
- The United Way of the Alberta Capital Region and
- The broader membership of the CIAFV Protocols Working Group.

The findings of this evaluation report will:

- Help inform future phases of the CIAFV Protocols work;
- Provide useful, best practices information to other communities considering undertaking a similar protocol development process;
- Provide data that can be incorporated into reports to agencies providing funding to the initiative; and
- Provide data for future funding proposals to support the CIAFV Protocols project.

This program evaluation is formative in nature. The primary intent is to identify differences in actual project outputs and outcomes compared to the intended outputs and outcomes outlined in the logic model and other background documentation.

II. CIAFV PROTOCOLS PROJECT BACKGROUND

The following background material is provided for the reader who is not familiar with the community context of the CIAFV Protocols project. It is the opinion of the researchers, supported by the research findings, that the resources described in this section of the report were critical to the achievement of the outcomes of the Protocols project.

a) Community Initiatives Against Family Violence (CIAFV)

On May 26 1999, a group of interested parties convened at the invitation of the Safer Cities Advisory Committee of Edmonton. In total, 63 community representatives from a broad range of services and systems in the city of Edmonton gathered for a day-long meeting to discuss issues of concern with regard to family violence in Edmonton. This inclusive community consultation process identified the need to reduce the incidence of family violence through cost-effective coordination and collaborative efforts and through the promotion of preventive initiatives.¹ At the conclusion of the meeting, five working groups were formed to address the following specific areas; coordination, protocols, funding, preventive strategies and public education.

¹ Proposal notes, no date

Through this community consultation it was further determined that problems existed in Edmonton

“in the screening for an appropriate response to family violence. There is an inconsistency in how systems identify cases of domestic violence and also an unacceptable level of discontinuity and fragmentation in responses including inaccessibility to service for many.”²

Since May 1999, the number of members of this initiative has grown. The groups have combined to form three working groups focusing on coordination, protocols and public education strategies. Operating under the name of Community Initiatives Against Family Violence (CIAFV), the group is actively working to coordinate a community response to family violence.

The mission statement for CIAFV is as follows:

“CIAFV is committed to strengthening the capability of the Edmonton community to take constructive action against family violence and move toward solutions.”³

The organization’s vision is:

“Individuals and families in the Edmonton area live free of family violence... The community of Edmonton will coordinate approaches to family violence that reflect inclusiveness and respect in order to create an environment that supports families to live violence free.”⁴

The purpose statement for CIAFV is:

“Working from a proactive – responsive - rebuilding model, the purpose of CIAFV is to coordinate a process that facilitates:

- Identification of issues, barriers and gaps experienced by those impacted by family violence, across the system;
- Articulation of these issues, barriers and gaps toward a common understanding of family violence, and
- Influencing of systems and the larger community.”⁵

Further it is the view of CIAFV that:

“The unique nature of the relationships between victims and perpetrators in family violence, particularly the abuser’s access to the victim and the victim’s vulnerability to continued violence, requires that a coordinated response be developed. In order to establish an effective response it is necessary that agencies consistently screen for and respond to family violence. The resultant screening

² Background notes, no date

³ CIAFV Protocol Project Evaluation Request for Proposals, February 2002

⁴ CIAFV Working Principles approved by CIAFV, 5/6/02

⁵ Ibid.

tools and procedures need to reflect the cultural diversity of the community and the varying requirements of individual situations.”⁶

Based on a review of models of family violence response from Duluth, Minnesota, New Zealand and Calgary, Alberta it was concluded that successful outcomes addressing family violence as a community are best achieved by developing and implementing coordinated practice protocols. It was further determined that protocols would need to be developed based on the Edmonton community context.

b) CIAFV Protocols Working Group

The CIAFV Protocols Working Group meets monthly and is comprised of CIAFV member agencies (approximately 40). Members are individuals and/or representative(s) of organizations and agencies proactively working with family violence or clients who may face issues of family violence.

The goal of the Working Group is to facilitate the development of a consistent response throughout the community for individuals and families affected by family violence. This group’s responsibilities are:

- To plan and facilitate community research required to complete projects;
- To assist agencies, organizations and systems in the development of protocols;
- To assist in training needs to ensure an understanding of the use of the protocols and risk assessment tools;
- To implement the consistent use of protocols across all CIAFV member agencies;
- To evaluate the development of protocols in an on-going way;
- To assist with sustainability of protocol development by obtaining funding and encouraging institutional and cultural change; and
- To review annually the Working Group terms of reference.

The Protocols Working Group established a statement of need and set about to address several conditions in the Edmonton community, specifically:

- A lack of coordinated response to dealing with family violence;
- Fragmented or inconsistent responses to family violence; and
- Gaps in knowledge regarding family violence generally and diversity issues in family violence specifically.⁷

⁶ Ibid.

⁷ CIAFV Protocol Project Evaluation Request for Proposals, February 2002

The CIAFV Protocols Working Group determined that the best way to achieve these outcomes was “for organizations in Edmonton to develop a set of coordinated guidelines or steps (protocols) to identify, detect and respond, in a consistent manner to persons at risk of family violence as well as those impacted by family violence.”⁸

Over an 18-month period from September 2001 to February 2003 the following steps were used to address the above stated outcomes:

- Be inclusive with systems/institutions/agencies and engage systems such as justice, health, police, education, child welfare, community agencies, social services, student financing and housing;
- Focus on the needs of the individual while respecting diversity (such as persons with disabilities, culture, religion/faith, gay/lesbian, etc.);
- Provide education for the community pertaining to protocols, the dynamics of family violence, coordinated responses, screening tools, risk assessment and safety planning; and
- Develop responses that are founded on victim safety and offender accountability.⁹

Through the development of coordinated protocols it was intended that the following goals would be achieved:

- To facilitate the development of a consistent response among systems, for individuals and communities impacted by family violence;
- To provide training and support to systems to ensure the knowledge and confidence in applying standard screening protocols are in place; and
- To be part of a coordinated response to family violence working towards reduction in incidents in Edmonton.¹⁰

Involvement principles for CIAFV members include the following:

- “We hold that the success of our initiative depends upon:
 - Mutual respect of all parties
 - Fostering involvement, trust, respect and open communication; and
 - Informed and involved stakeholders.
- We are committed to provide visionary leadership that is based on best practice research.
- We value the contribution of all participants to the accomplishment of our goals.
- We are financially responsible and accountable.”¹¹

⁸ Ibid.

⁹ Ibid.

¹⁰ CIAFV Protocols Working Group Terms of Reference, no date

¹¹ CIAFV Working Principles approved by CIAFV, 5/6/02

In achieving these goals, continuous communication and consultation with community agencies involved with or interested in the earlier stated outcomes were determined as critical. The first phase of the work was structured as described below:

- Plan and facilitate research activities to determine need and interest in the production of protocols. This resulted in the distribution of a survey to 200 agencies and systems. Agencies surveyed offered services to a diverse audience including seniors, women, men, children and youth as well as special needs clients. Of the eighty respondents (30% of sample), most indicated a need to develop a consistent response to family violence and expressed a willingness to be involved in the initiative.
- Develop protocols that will standardize responses to family violence situations. This work was undertaken by the Protocol Coordinator and is described in further detail in this evaluation report.
- Provide training to participating agencies to ensure understanding in the use of protocols and client assessment tools. This work was undertaken by the Protocol Coordinator and is also described in further detail in this evaluation report.
- Support the sustainability of the project by encouraging the institutional and cultural change needed to ensure the continuity of the protocols.

c) CIAFV Protocols Working Group – Project Steering Committee

The Protocols Project Steering Committee meets monthly and is a group of six representatives from the Protocols Working Group. Its role is to provide support and day-to-day management of the Protocols project and its Coordinator. The Project Steering Committee assumed a number of responsibilities including:

- The development of a job description for the Project Coordinator;
- Supervising the production of a project work plan;
- Supporting and guiding the Project Coordinator;
- Developing guidelines for communication and a supervision model;
- Reviewing all financial statements of the project before presentation to the Protocols Working Group; and
- Acting as spokespersons for the project with the general public and the media.¹²

¹² Adapted from Protocols Working Group – Project Steering Committee, Terms of Reference, no date

d) Protocol Coordinator

Funding was received from Status of Women Canada and National Crime Prevention Centre – Community Enhancement. A full-time (37.5 hours/week) Protocol Coordinator was hired in September 2001 to develop protocols that addressed issues of family violence with agencies and systems involved in CIAFV. This first phase of the project operated between September 2001 and February 2003.

The Edmonton John Howard Society (the administrative agent for the Protocols project) facilitated the hiring of the Protocol Coordinator. The Steering Committee provides direction to and determines priorities for the work of the Protocol Coordinator.

The functions of the Protocol Coordinator are to:

- Work with member agencies of CIAFV to implement protocol development and training in those agencies around issues of family violence.
- Develop a protocol template and guidelines for agencies to develop local, standardized protocols and screening and assessment approaches.
- Research and design tools to support protocol development.
- Develop training initiatives for or with participating agencies to ensure the understanding of and use of the protocols.
- Maintain current knowledge of issues relating to family violence through research, conferences and workshops as available and share information with CIAFV member agencies.
- Research other jurisdictions for their models and coordinated responses to the issues and incorporate beneficial pieces into the local plan.
- Record minutes and disseminate information for the CIAFV Protocols Project Steering Committee.
- Provide inputs and assistance to funding proposals and reports for funders as required.¹³

¹³ CIAFV Protocol Coordinator Job Description, no date

e) Definition of Family Violence

CIAFV uses the terms domestic violence, “domestic abuse” and “family violence” interchangeably.

In the view of CIAFV

“Family violence describes a systematic pattern of abusive behaviours within a relationship that is characterized by intimacy, dependency and/or trust. The abusive behaviours exist within a context where their purpose is to gain power, control and induce fear. Abusive behaviour can take many forms including verbal, emotional, physical, spiritual, economic, violation of rights, and exploitation through neglect.”¹⁴

f) Evidence of Needs for Protocols

A survey was distributed to 200 agencies in Edmonton with responses received from 80 agencies. Of these 80 agencies,

- 80% offered services for women or youth
- 71% offered services for men or children
- 65% offered services for seniors.

Existing agency protocols addressed disclosure of child abuse (63%) or child sexual abuse (53%). Agencies with protocols that asked questions regarding abuse most commonly inquired about child abuse or child sexual abuse.

Only 25% of those agencies providing services to women disclosed reports of wife abuse while 19% asked about wife abuse.

While less than 23% of the agencies providing services to seniors disclosed wife abuse, questions asked by these agencies covered a broader spectrum including elder abuse and financial abuse.

¹⁴ CIAFV Working Principles approved by CIAFV, 5/0/02

III. APPROACH TO THE RESEARCH

a) Background of Research Team Members

The principal researchers for this evaluation report were Dr. Wendy Doughty and Jim Klingle, partners in Emerging Directions Consulting Ltd. a private, incorporated Alberta-based management consulting firm.

Dr. Doughty brings 18 years experience in the development of community-based programs, program evaluation and curriculum evaluation. Jim Klingle has more than ten years experience in carrying out successful research projects involving a variety of community organizations.

Lenore LeMay assisted with the analysis of protocols to determine their degree of respect for diversity issues (disabilities, cultural, religious, elders, gay/lesbian). Lenore is Executive Director of Diversity Works, a local business offering diversity training, consultation, and presentations. Her approach to diversity is very comprehensive including gender, culture, age, size, sexual orientation, ability, and class.

b) Principles Guiding Program Evaluation

The following principles guided the development and implementation of this program evaluation:

- Ownership and buy-in of participants in any program evaluation activity best occurs when participants have a role in helping plan the process.
- Program evaluation processes must be sensitive to and reflect individual differences in gender, culture, learning styles, background and experiences.
- Program evaluation yields authentic results in an environment where participants believe their viewpoints are valued and they are treated with respect.

c) General Approach to the Research

Key stakeholders were notified in advance of the commencement of this study by means of an e-mail letter that explained the purpose of the evaluation research. Community members needed to be aware of the intent of this research so that they could determine whether or not they would participate. This provided the opportunity to ask questions about the impact of data collection on their clients and themselves.

Participation in this research study was on a voluntary basis. Measures were undertaken to guarantee the anonymity of the comments of individual participants as well as organizational perspectives.

d) Key Research Questions

The key research questions that formed the focus of this evaluation study are presented in *Appendix A – Detailed Questions, Indicators and Data Sources for CIAFV Protocols Project Evaluation*.

e) Approaches to Data Collection

The evaluation process consisted of two approaches to data collection. These included:

i) Secondary data

Secondary or historic data was gathered through document review. This included a review of secondary data sources provided by the Protocol Coordinator and Steering Committee members, including the following items:

- Planning documents and background materials
- Program Logic Model
- Protocol Coordinator reports
- Protocol template
- Family Violence Handbook developed by the Protocol Coordinator
- Protocol documents developed by individual agencies
- Literature reviewed on protocols developed in other centres
- Minutes of CIAFV Protocols Working Group meetings
- Minutes of CIAFV Protocols Working Group - Steering Committee meetings

ii) Primary data

Primary data was collected through personal interviews, telephone interviews and focus groups. These methods were used as follows:

- Some agencies involved in protocol development chose to have a focus group involving key staff members who assisted in developing the protocol.
- Some agencies preferred to have a key contact person provide perspectives on the protocol development experience. In some cases this was because one person had sole responsibility for developing the protocol. In other cases it was too complicated to convene a focus group.
- Representatives from ten agencies that did not participate in the protocol process were contacted by telephone or in person to determine the reason(s) their agencies chose not to participate.
- During a CIAFV Protocols Working Group meeting members participated in two separate focus groups based on whether or not their agency or organization had developed a protocol.
- Two interviews were conducted with the Protocol Coordinator.

Personal interviews and focus groups were approximately one hour in length. Telephone interviews lasted from ten minutes to 45 minutes.

The schedule of questions used to guide these interviews and focus groups are presented in *Guiding Questions – Focus Groups and Interviews* in Appendix B.

f) Approach to Data Analysis

A mixed method approach was used for data analysis.

The following quantitative data was analyzed:

- the number of agencies contacted by the Protocol Coordinator
- the number of agencies that developed family violence protocols
- the number of training sessions delivered by the Protocol Coordinator
- the number of participants who attended these training sessions.

The logic model developed for the project was used as a framework for discussion of research findings.

Qualitative data collected through focus groups and interviews was entered into an ACCESS database file and a content analysis was undertaken. The approach to data analysis was a qualitative one; the intent being to identify common themes expressed in response to the questions identified. Through the process of coding, conceptual labels were ascribed to the comments generated through interviews and focus group discussions. These concepts were then compared one to another to determine categories of similar responses.

g) Sample Characteristics

The sample was drawn from the listing of CIAFV member agencies provided by the Protocol Coordinator. Prior to and during the period of this evaluation, 12 protocols were completed. Interviews or focus groups were conducted with all of these agencies. They included:

- Alberta Justice – Family Mediation Services
- Alberta Justice - Family Court Counselors
- Edmonton Family Violence Treatment, Education and Research Centre - Changing Ways
- City of Edmonton – Neighbourhood Social and Recreation Services Branch – Social Work Services
- Connect Society
- Distinctive Employment Counselling Services of Alberta (DECSA)
- Edmonton John Howard Society
- Edmonton Senior’s Safe Housing
- Grey Nuns Hospital – Social Work Department
- Planned Parenthood
- Kara Family Support Centre
- TERRA Association

This evaluation did not include a review of the CNIB protocol since it was created as part of a Calgary initiative. As well, the linking protocol prepared by the Alberta Crown Prosecutor's office was not included.

Members in attendance at the March 3, 2003 CIAFV Protocols Working Committee participated in one of two focus groups depending on whether their organization had completed a protocol or not.

Further follow-up with 10 CIAFV member agencies that had not proceeded with developing a protocol was done through telephone interviews or direct contact while undertaking another evaluation project.

Table 1 - Description of Research Sample

Descriptor of Sample	Number of Participants
Protocols Completed – Individual Interview	4
Protocols Completed – Focus Group	52 (8 focus groups)
Protocol Coordinator – Interview	1
CIAFV Focus Group – Protocols Completed	4*
CIAFV Focus Group – Protocols Not Completed	7
CIAFV Members – Protocols Not Completed - Interviews	10
Administrative Agent – Interview	1
Total	79 *

*Two individuals who participated in the CIAFV Protocols Completed Focus Group were previously interviewed as part of a focus group with their agency.

h) Research Assumptions

- Those participating in the Protocols project during the period of this study were reflective of the diversity of individuals and agencies involved with family violence issues.
- Agencies chose of their own free will to proceed with protocol development.
- Perceptions of respondents regarding the relative strengths and/or weaknesses of the Protocols project were made without concern for consequences as a result of voicing their opinions.
- Agencies participating in this process had little or no previous experience with the development of family violence protocols.

i) Limitations of Research

- The study was time bound between the period September 1, 2002 to March 31, 2003.
- The study examined the protocol development work conducted from September 2001 to October 2002.
- The study was limited to the responses collected during personal or telephone interviews, focus groups, observations made during interviews and focus groups, and the information available in documents during the study period.
- The study was limited to those who chose to participate.
- The findings, conclusions, and recommendations are posited only as they relate to the current study.

IV. FINDINGS

The findings of this evaluation research are presented in three distinct sections. These sections correspond with the questions presented in *Appendix A – Detailed Questions, Indicators and Data Sources for the CIAFV Protocols Project Evaluation*.

a) Progress on Overall Project Goals

The information for this section of the report is presented in terms of six questions that reflect the goals of the CIAFV Protocols Project.

i) *Is each client asked a question about family violence?*

All respondents indicated that they now ask a direct question about family violence of all clients accessing programs/services from their agency. In a few cases, it was noted that the question might not be asked during the initial intake or initial visit with the client.

This is particularly true in cases where

- the client is accessing one-time only assistance for something such as the food bank or job search;
- a trusting relationship has yet to be established with the client; or,
- it was determined that such a direct question may impede developing rapport with the client such as parolees, persons with disabilities, parents, etc.

ii) *Have you seen improvements in the level of understanding of family violence and appropriate responses since implementing coordinated protocols?*

All respondents indicated an increased level of understanding of family violence by staff members as a result of the protocol development process. The training sessions provided by the Protocol Coordinator on the topic of family violence provided staff members with a common understanding as well as a common language to discuss the issue. Agency staff members varied in terms of their education and/or training about family violence and had varying levels of knowledge about family violence. Even those staff members from agencies that deal with family violence on a daily basis found that the training sessions helped them become more sensitized to the issue of family violence and be exposed to new research findings.

Respondents emphasized how the Protocol Coordinator's knowledge and interest in family violence issues and research served as a catalyst for their organization to undertake the development of a family violence protocol.

iii) *Is there an increased accountability for abusers as well as programs that reflect this philosophy with increased coordination of family violence protocols?*

The focus group discussions and interviews did not result in responses to this question.

iv) *Is there decreased evidence of family violence since implementing coordinated protocols?*

It is premature for the agencies/organizations that have implemented protocols to provide data that would address this question.

v) *Do you see a higher priority placed on ensuring victim safety since the protocol coordination efforts?*

Three of twelve agencies reported an increased focus on safety plans for clients. One agency indicated that this insight also had an effect on their concern regarding safety planning for their staff. The following comments were offered:

- “Safety plan was a new concept for staff.”
- “We knew what a safety plan was but had not seen one or knew what questions you might ask.”

The Protocols Coordinator provided examples of safety plans from other agencies to help agencies develop plans appropriate to their clients and services. Several of those who responded commented about the value of the Coordinator’s “relentless search” to locate useful tools.

b) Progress Relative to Program Logic Model

A program logic model was developed for the CIAFV Protocols project and a copy of this document is provided in Appendix C. A program logic model identifies the linkages between the activities of the initiative and the achievement of its outcomes.

This section of the report will assess the extent to which the CIAFV Protocols project achieved the inputs, activities, outputs and outcomes listed in the program logic model.

i) *Progress on inputs*

***Inputs** include all resources dedicated to or consumed by the program. For example staff and staff time, volunteers and volunteer time, facilities, equipment and supplies. Inputs also include the constraints on the project such as laws, regulations and requirements for the receipt of funding.¹⁵*

The CIAFV Protocols logic model specified three key inputs: representatives from agencies and systems such as a **Protocols Working Group**; **Steering Committee** members; and **equipment and office space for the Protocols Coordinator**. These three inputs were in place throughout the period of this evaluation.

The **CIAFV Protocols Working Group** met on a regular basis since July 1999 and was instrumental in setting the direction of the project as well as providing feedback to the Protocol Coordinator on materials, tools, etc. This forum also offered an opportunity to update members on progress with the protocols initiative, share the results of completed protocols, and discuss new resources and research.

This group provided a forum for members to discuss other issues related to family violence that might inform the development of linking protocols and other cooperative initiatives within the community. Several focus group or interview respondents mentioned that they found these meetings to be helpful in updating them about resources in the Edmonton community.

Over time, there has been a decline in attendance rates at these monthly meetings. The group distributed a survey to members to determine what factors might influence attendance and what changes might be needed. The researchers did not review the results of this survey.

The **CIAFV Protocols Project Steering Committee** was instrumental in the successful achievement of the outputs and outcomes defined for this initiative. This group provided feedback and guidance for the Protocol Coordinator. They also assumed responsibility for securing resources to continuously support the project.

This committee focused their attention on the specific objectives of the protocol work while at the same time continuing to gather perspectives on larger, systemic issues through the Protocols Working Group. Their individual and collective leadership and “championing” of the issue of family violence is noteworthy.

The administrative agent, Edmonton John Howard Society, provided equipment and office space for the Protocol Coordinator. The Protocol Coordinator commented that this office was ideally situated and commended the agency for providing an appropriate level of support.

¹⁵ Adapted from Performance Management Network “Integrating Performance Measurement & Evaluation” workshop, January 2002

ii) *Achievement of activities described in logic model*

Activities are what the program does with inputs to fulfill its mission. Activities include the strategies, techniques, and types of treatment that comprise the program's service methodology. For instance, sheltering and feeding homeless persons, teaching illiterate people how to read, etc.¹⁶

Work has proceeded on all of the activities outlined in the logic model described in Appendix C.

The early stages of the Protocols project focused on research and information gathering. Three activities that warrant further discussion are:

- Development of a protocol template;
- Preparation of a family violence handbook; and
- Development and delivery of training on protocols and family violence.

The Protocol Coordinator created a **family violence protocol template** that was provided to agencies to assist with the development of their own protocols. This seven-page document contained a number of appendices including: sample screening questions, a family violence checklist, as well as risk assessment and safety planning information.

This template provided a framework from which agencies developed protocols appropriate to their unique situation. The template components most consistently used by agencies were the principles and the client screening information.

The **family violence handbook** was developed by the Protocol Coordinator and was intended for use as a background document for staff training sessions and as a resource tool for agencies. The document is very comprehensive and brings together a variety of information including:

- general principles and background material
- definitions pertaining to family violence
- dynamics of abuse
- statistics, myths and facts about family violence
- interventions through the Criminal Justice System
- coordination of resources and information.

This document can be appended to an agency's family violence protocol thus providing background information to help orient agency staff.

Agencies developing family violence protocols could access **free training on family violence and protocol development** from the Protocol Coordinator. Family violence training sessions were developed in one-half day and full-day formats. In some cases, training was shortened to a two-hour information session.

¹⁶ Ibid.

The training sessions focused on the basic dynamics of family violence and also some tools that agencies could use to help their clients identify their own abuse cycles. Some agencies also requested a panel presentation with representatives from community agencies. Panel members were typically representatives from shelters, the police, the Family Violence Prevention Centre, or other pertinent groups.

Agencies where the Protocol Coordinator delivered an orientation on family violence reported the following:

- One-half day orientation on family violence helped those doing public education see how they could contribute to the protocol's development and use.
- The one-half day staff training on family violence "resulted in a better understanding and greater openness about family violence. It also allowed staff to address specific questions regarding particular client groups."
- The workshop provided a forum for staff to discuss differing perspectives on issues. "As a result of the training, we established a family violence and relationship bulletin board and drop-in centre at the school."
- "The family violence training helped us realize that we had become de-sensitized to the issue of family violence. It also made us aware that family violence is a cycle, not an event."
- "The family violence workshop identified the need and opportunity for further staff training in family violence. The workshop served as a springboard for discussion of other client issues, including poverty, mental health, and addictions."
- "She (the Protocol Coordinator) provided a training session on family violence issues for staff as well as a 'mini' training session for summer staff."

Not all agencies accessed these training resources. Some agencies, often those with a primary mandate to provide services to victims of family violence, did not see the need for their staff to receive training in this area.

iii) Level of outputs achieved

Outputs are direct products of program activities and usually are measured in terms of volume of work accomplished for example, the number of classes taught, participants served, educational materials distributed, etc. Given enough resources, output levels can be influenced and/or controlled by managers.¹⁷

Three outputs were measured for the CIAFV Protocols Project:

- The number of agencies/programs contacted by the Coordinator to determine their interest in protocol development;
- The number of agencies that developed family violence protocols; and
- The number of training sessions delivered.

¹⁷ Ibid.

Table 2 provides numeric data concerning these three key outputs.

Table 2 – CIAFV Protocols Project Outputs

Time Period	# Agencies Visited by Coordinator	# Agencies that Developed Protocols	# of Training Sessions Delivered	Format for Training Sessions
July 2001 – October 2002	35	12 completed 5 in progress Not Included in Evaluation 1 completed by Calgary, 1 linking protocol	11 agencies received family violence training session (total of 250 people)	1 day (3 agencies) ½ day (5 agencies) 2 hours (2 agencies) Note: five agencies had these sessions repeated two or three times to accommodate different staff groups

iv) Achievement of initial outcomes

***Outcomes** are the benefits or changes for individuals or populations during or after participating in program activities or the initiative. They are influenced by the program’s outputs. Outcomes may relate to behaviour, knowledge, skills, attitudes, values, condition, status, or other attributes. Outcomes are influenced by environmental factors beyond the control of managers.¹⁸*

The initial outcomes established for the Protocols initiative included:

- Development of a logic model
- A review of relevant literature
- A visit to another jurisdiction (Calgary) to review family violence protocols
- Identification of agencies that might develop family violence protocols
- Providing agencies with the framework and knowledge for protocol development and training
- Identification of protocol and family violence training needs within these agencies.

All of these initial outcomes were achieved.

v) Achievement of intermediate outcomes

The following intermediate outcomes were identified for the CIAFV Protocols project:

- Tools gathered (screening, risk, assessment and safety planning)
- Agencies interviewed and aware of the project
- Needs and gaps in service identified
- Agencies develop protocols and training plan
- Agency staff are trained in protocols and family violence issues

¹⁸ Adapted from Performance Management Network “Integrating Performance Measurement & Evaluation” workshop, January 2002

The early stages of the Protocols project focused on research and information gathering. This included the **gathering of tools (screening, risk, assessment and safety planning)** that could be applied or adapted by agencies developing family violence protocols. Agencies appreciated this effort and provided these comments:

- “Tools from other agencies helped us develop our own in less time.”
- “Visual images helped develop screening tools for use with our clients.”

To begin the process of protocol development the Protocol Coordinator visited all CIAFV member agencies to gain an appreciation for the services they offered to the community and **to raise awareness of the Protocols project**. Based on these initial site visits, the Protocol Coordinator in consultation with agency staff then determined whether and how they wished to proceed with the protocol development process. As noted earlier, some agencies chose to start this process with training sessions on family violence or protocol development.

The twelve agencies¹⁹ that completed family violence protocols identified a variety of **benefits** that resulted from this process as follows:

- Eight agencies indicated that they had a greater knowledge of community resources and the ability to link clients to these resources.
- Six agencies said a benefit was the formalized process around family violence and risk assessment.
- Five agencies reported that a family violence question(s) is now included on the client intake form.
- Five agencies identified a benefit was a standardized, consistent protocol document.
- Three agencies said they developed a safety plan as a result of developing the protocol and one indicated that staff began thinking more about personal safety plans.
- Two agencies indicated that staff has a sense of comfort or security in having a formalized written protocol.
- One agency learned from the process that other agencies were unaware of their role.

¹⁹ **Note:** the term “agency” is used to describe the opinions presented in individual interviews or focus groups by those speaking on behalf of their organization. Where individual opinions within a focus group differed, the differences are reflected.

The following **benefits of developing a family violence protocol** were listed by individual agencies:

- “The protocol is a new tool to build rapport with clients. Family violence can now be explored “with” the client, instead of “for” the client.”
- “Referrals have increased generally. This process has helped give a better awareness of the process clients will experience with other community resources.”
- “Protocol team members took the family violence information back through the organization.”
- “Protocol helps equalize skill and comfort levels of staff in addressing family violence situations.”
- “The protocol development process made us challenge our assumptions. For example, we assumed that everyone asked a question about family violence during client intake.”

The comments provided by agencies that developed family violence protocols identified several **challenges with this process** as follows:

- Five agencies indicated that finding time to develop the protocol was a significant challenge. Two agencies reported it was difficult getting staff together to work on the protocol.
- Five agencies indicated a level of apprehension among staff about asking clients a direct question about family violence.
- Five agencies reported there were disagreements among staff based on differing perceptions on family violence issues, depending on their previous experience/knowledge about family violence.
- Four agencies indicated that designing the family violence question created considerable debate.
- Three agencies reported some resistance on the part of a few staff members as they saw the protocol as a duplication of policies and or procedures they were already following.
- Three agencies indicated that concerns were raised about professional liability/legal implications. Examples of such questions were: “If we collect the information, are we responsible to act?” and “We are obligated to report child abuse. Are we also obligated to report family violence?” Differing expectations were raised from various parties regarding the type of action that would be taken as a result of family violence disclosure.

The following **challenges in developing the family violence protocols** were listed by individual agencies:

- The number of person hours required for staff to gain an appropriate level of understanding about family violence.
- The time required for all staff to provide their perspectives on the protocol.
- Discussions were triggered about past incidents of family violence among some staff during protocol development meetings and this slowed down the process.
- The lack of linking protocols in the community.
- Implementing the protocol consistently versus meeting the needs of the individual client.
- Initial skepticism regarding the expertise and intentions of the Protocol Coordinator. As the Protocol Coordinator established trust and credibility with agency staff, the level of skepticism declined.
- Fear of the unknown. Not knowing how much work would result from implementing the protocol.

Some agencies that developed family violence protocols serve **clients that have special needs** and the influence of this situation on protocol development was noted as follows:

- Ten of 12 agencies indicated “Yes” their clients did have special needs that shaped the protocol developed by their agency. One agency indicated that clients did not have special needs that shaped the protocol. Another agency reported that the special needs of its clients did not influence the protocol that was developed.

Upon further questioning by the researcher(s), only four agencies identified specifically how special client needs shaped their agency’s family violence protocol as follows:

- “Clients are juggling priorities and focusing on employment. In this case, we may minimize the family violence question.”
- Cultural issues can make it difficult to assess a different culture’s view of family violence. “Hard to assess in a one-hour meeting when focus is on the client, not the family. When doing community assessment, we hand out the family violence pamphlet as a standard procedure.”
- Client enters intake once for a specific need (such as a resume). This means finding the appropriate time to raise the family violence question.
- Clients are unable to communicate in English. Interpreters are available to ask the family violence question as part of a checklist of questions.
- Different clients across a range of cultures. For that reason, each work team uses its own unique protocol.
- Client confidentiality is critical. “Client privacy is regulated by legislation. FOIPP was raised and forced us to look at how we keep client information.”
- There is a need for a client to obtain emergency funding when family violence occurs.

- Couples are often together at intake. There is a need to separate them to ask family violence questions. This might have some unique dynamics once the protocol is implemented.

Special client needs that other agencies mentioned but did not indicate how they shaped the protocol were:

- Varying literacy levels among clients (mentioned by two agencies).
- Potential of client's caregivers or family members to be abusers (mentioned by two agencies).
- Norm of privacy among clients of the agency.
- High risk of client suicide and violent behavior.
- Past experience as victims of family violence.
- Medication needs and may depend on assistive devices.
- Teen clients involved in violent relationships. They often come from families with a history of family violence and substance abuse and so accept violence.
- Abuse by partners during pregnancy.
- Work with clients from a variety of cultures.

The question of **whether the development of a family violence protocol helped agency staff gain new knowledge or capacity in family violence prevention** yielded some interesting perspectives as follows:

Nine agencies said, "Yes" this process had furthered the knowledge or capacity of their staff in this area. Three agencies said "No" this process did not result in this change.

Those agencies that answered, "Yes", identified the following new knowledge or capacity gained in family violence prevention as a result of the protocol development:

- "It provided a common knowledge base and understanding of family violence. This helped to de-sensitize the issue of family violence."
- "We did some research on family violence particular to our special needs clients and shared this more current information with the Protocol Coordinator."
- Awareness among all agency staff of support services for family violence is growing.
- Established new linkages in the community with agencies involved in family violence.
- "We learned about routine screening, safety planning, and a list of resources."
- It helped to more clearly identify staff training needs.
- "We became aware of the importance of asking the question about family violence rather than waiting for it to surface."
- "It inspired us to do further learning about family violence. We attended a family violence conference as a result of developing our family violence protocol."

Agencies were also questioned as to whether the development of the family violence protocol helped their staff to **gain new knowledge or capacity in protocol development**. This resulted in the following responses:

Ten agencies said, “Yes” that this work had resulted in increased capacity while two agencies said “No.”

The ten agencies that answered, “Yes,” indicated that they now had a greater understanding of the process or approach to use in establishing a protocol.

Individual agencies put forward the following gains they made in **new knowledge or capacity in protocol development**:

- “Gave us a structured way to approach protocol development.”
- “Identified the importance of developing protocols with other key stakeholders, particularly when sharing sites.”
- “It introduced us to new tools, e.g. the safety plan.”

vi) Achievement of long term outcomes

With regard to whether agencies that developed family violence protocols had **implemented these protocols** the following perspectives were offered:

- Eight agencies replied, “Yes, the protocol was implemented within their agency.”
- Two agencies said “Yes, but only within one agency program.”
- Two agencies said “No” but plan to do so in the next few months.

In response to the question “**Is each client served by your agency asked a question about family violence?**” the following responses were received:

- Eight agencies said, “Yes”.
- Two agencies only asked a question about family violence in one of their programs.
- Two agencies indicated the question is asked of all clients except children.

When asked whether their agency has placed an **increased priority on victim safety** as a result of implementing the family violence protocol the following perspectives were provided:

- Six agencies said, “Yes”.
- Four agencies said “No, same as before” or “Has always been a primary concern.”
- Two agencies did not offer comments.

With respect to whether or not there is **an increased accountability among abusers** as a result of the family violence protocols, responses were diverse as follows:

- Six agencies said “Not applicable to our organization, as we do not work with abusers.”
- Two agencies said “Too early to tell.”
- One agency said, “Yes, abusers recognize that agencies that serve spouses and provide services for children are now raising the family violence question at intake.”
- One agency said “Unknown”.
- Two agencies did not offer comments.

c) **Achievement of Goals of Benefit to the Community**

The Protocols project provided a unique opportunity to raise awareness and understanding of family violence and the role of protocols in addressing this issue. Agencies were able to develop family violence protocols that reflected the range of clients served by the agency yet complimented those of other agencies.

The CIAFV Protocols project provided an excellent opportunity for community agencies to learn more about the resources, programs and services that they bring to address family violence. There was considerable learning in terms of resources that could be accessed or shared so that agencies did not duplicate efforts.

In particular, the Justice system was able to coordinate services provided to victims of family violence with the intent of ensuring that “no families or individuals fall between the cracks.” Some agencies identified the potential for new programs or services to serve community members.

Although no formal **partnerships** were reported as a result of this initiative, there certainly is evidence of an increased synergy in the community in terms of responding to family violence. Some comments that reflected this community learning included:

- “ Identified some gaps in services in the agency and community for the perpetrators of violence.”
- “As a result of community need, we are starting an all female anger management session.”

Agencies that developed family violence protocols offered the following ideas about how protocol development and family violence training can be **sustained in the community**:

- Seven agencies said the protocol needs to be revisited on a regular basis, perhaps annually.
- Seven agencies stressed the importance of updating the community resources list.
- Five agencies suggested a process should be put in place to talk about what we are learning by using the protocol (do an internal evaluation of the protocol process).
- Five agencies recommended ongoing staff training on understanding of family violence.
- Four agencies said that new staff members needed to be oriented/trained on the protocol.
- Two agencies suggested there be an opportunity to share protocols between colleagues and the wider community.
- Two agencies recommended that the protocols should be aligned or linked with other CIAFV member agencies.
- Two agencies said that support of the protocols by agency management and administration was critical.

Individual agencies suggested the following activities to **sustain the family violence protocol**:

- Continue participation in the CIAFV member agency network.
- “Protocol needs to be reviewed periodically so all staff understand the protocol process.”
- Develop consumer manuals that include family violence information.
- “Have the Protocol Coordinator hold a follow-up workshop with organizations that have completed the protocol.”
- “If problems are encountered with the protocol implementation, we need to be able to consult with the Protocol Coordinator or other organizations that have already implemented the protocol.”
- “Pilot the protocol in one area of the organization before taking it out to the wider organization.”
- “Commit to the protocol and follow through by including it in agency brochures and publications.”

V. ADDITIONAL PERSPECTIVES ON CIAFV PROTOCOLS PROJECT

On Wednesday, March 5, 2003, two focus groups were held at the Edmonton YWCA with representatives of the CIAFV Working Group. One focus group was with those whose agency had already developed a family violence protocol. The other brought together those Working Group members whose agencies have not yet developed a family violence protocol. The purpose of the focus groups was to learn:

- What factors in the agency contributed to developing or not developing a protocol?
- What external factors contributed to developing or not developing a protocol?
- What conditions or critical prerequisites need to be in place in order to develop a protocol?

a) Agencies That Have Not Developed a Family Violence Protocol

Seven focus group participants offered the following responses to questions raised about why their agency had not yet developed a family violence protocol:

1. *What do you think are the critical prerequisites that need to be in place in order for an organization to be ready to create a family violence protocol?*

- Stable staffing arrangement.
- Support from senior management.
- Having the organization give priority to family violence prevention.
- Links with other agencies and organizations.
- Understanding of the agency's role.
- Clarity in the scope of the protocol development group.

2. *What prevents organizations from developing protocols?*

- Fear of committing funding to the exercise.
- Lack of time. No one has the time to do it.
- Not understanding the value of having a protocol in place.
- A concern that the protocol will create more work rather than less.
- Lack of understanding of the roles and responsibilities of participating partners and participants.
- Getting staff buy-in to the protocol development process as well as their time to develop the protocol.
- Not sure what a protocol is and what it does.

3. *What types of support or assistance do you think are needed in order for an organization to develop a family violence protocol?*

- “More time would need to be available to focus on protocol development. Working on a weekly basis to develop the protocol might work.”
- “Learn more about what is going on within our network of agencies regarding family violence protocols or initiatives.”
- “Do a comparison with an organization our size and scope that has completed a family violence protocol. What does the protocol look like when it’s done?”
- “How will the work of the protocol be funded and what resources are needed to fund its development?”
- “Identify the benefits of having developed a family violence protocol.”
- “We need to be able to present benefits of a protocol from a preventive point of view to secure government support.”

b) Agencies That Have Developed a Family Violence Protocol

Four focus group participants whose agencies had completed a family violence protocol provided the following responses to the questions highlighted below:

1. *What were the driving forces within your organization that resulted in the creation of your protocol?*

- “Sitting on the Working Committee obligated us to ‘walk the talk’.”
- “The Protocol Coordinator contacting and encouraging my supervisor.”
- “The organization had been looking at the Calgary model for family violence protocols.”
- Impetus from agency management.

2. *What are the essential prerequisites that need to be in place in order for an organization to be ready to create a family violence protocol?*

- “It needs to be a community-based initiative.”
- “A sense of the ‘big picture’.”
- “Personal belief and value in addressing family violence.”
- Adequate resources.
- “Training in how to develop a protocol.”
- “Management buy-in is imperative.”
- “Training and orientation on family violence provides a safe opportunity to challenge assumptions. People need to feel comfortable voicing their fears or concerns.”

- “Think about monitoring and accountability issues at the time protocol is established.”
 3. *What do you think is preventing organizations that want to develop a protocol from doing so?*
 - Lack of organizational resources.
 - Competing priorities within an agency.
 4. *What is one piece of advice you would offer to organizations contemplating the development of a family violence protocol?*
 - “Develop a clear understanding of why protocol development is being undertaken and communicate this message.”
 - “Gather support for the development of the protocol from various levels within the agency.”
 - “Look at the broader picture in terms of a system-wide response.”
 5. *Given your experience developing a family violence protocol, what would you choose to do differently next time?*
 - “Set up internal monitoring, accountability and evaluation systems before developing protocols.”
 - “Utilize the family violence training session as a staff development opportunity.”
 - “Have a panel presentation on family violence at the training session.”
 6. *What do you think needs to happen to maintain the protocols once they are developed?*
 - An updating of community resource listing.
 - A forum for continued dialogue and sharing of best practices.
 - Sharing results of implementing protocols with regard to incidence of family violence.

c) Other Agencies that Have Not Yet Developed a Protocol

The researcher asked representatives of ten more CIAFV member agencies why their agency had not yet developed a family violence protocol. This question was asked informally as part of an interview on another topic or at a community meeting. This approach to questioning was used so that respondents would not feel “judged” for their agency’s action. Comments received from these respondents were as follows:

- Six agency representatives responded that the agency had other priorities.
- Five agency representatives indicated that due to leadership changes or other organizational changes, the timing was not appropriate.
- Three agencies wanted to defer until the development of linking protocols.
- One agency stated the agency was not large enough to warrant the development of a protocol.

d) Role of Protocol Coordinator

Eleven of the twelve agencies that completed family violence protocols considered the Protocol Coordinator a critical element in achieving this outcome. Representatives from these agencies expressed the view that “we could not have done this without her help.”

Respondents offered the following comments about the type of support or assistance their agency received from the Protocol Coordinator in developing family violence protocols:

- Eight agencies mentioned the Protocol Coordinator took their ideas down in meetings and prepared draft versions of their protocol.
- Seven agencies reported that the Protocol Coordinator delivered an orientation on family violence.
- Five agencies reported the Protocol Coordinator brought in family violence resources (e.g. individualized safety plans, brochure with pictures describing family violence, useful handouts and articles).
- Three agencies said the Protocol Coordinator brought awareness of other approaches in community agencies.
- Three agencies reported the Protocol Coordinator provided a standardized protocol template.
- Two agencies mentioned the Protocol Coordinator brought in other examples of protocol documents.

Individual agencies reported the Protocol Coordinator provided the following support and assistance:

1. Took extensive notes on agency approach to family violence and reviewed agency materials.
2. Provided two general agency sessions on developing protocols.
3. Pulled initial information together for the protocol (a staff member did the initial protocol drafts).
4. Helped frame the protocol in language specific to the service.
5. Prepared a one-page intake form and manual.
6. Developed a one-page safety plan that was ready to implement.
7. Reviewed the safety plan for intake services.
8. Linked staff to other community agencies and resources.

Eleven of the twelve agencies were complimentary about the skills, expertise, and attributes of the Protocol Coordinator.

- Four agencies reported the Protocol Coordinator had substantial expertise on family violence and youth issues.
- Two agencies said the Protocol Coordinator was well organized.
- Two agencies indicated she was respectful of different points of view.
- Two agencies said the Protocol Coordinator helped balance perspectives on family violence issues.

Individual agencies reported the following perceptions about the Protocol Coordinator's skills, expertise, and attributes:

- Flexible.
- Professional.
- Strong facilitation, leadership and structuring skills.
- Clear boundaries and open about her own personal boundaries.
- Managed conflict.
- Encouraged all to participate.

e) Addressing Diversity Issues in Protocol Development

Each of the family violence protocols for the agencies has attempted, to some degree, to illustrate a respect for diversity issues.

Some examples of this are as follows:

- Inclusion in its vision statement when it states “we envision a society where **all people** are valued, respected...”
- Offer programs targeted to **diverse populations**.
- Programming is designed for **persons with disabilities**.
- Principles/beliefs statement indicates that “family violence is a major health and social issue, which crosses all **economic, cultural and age boundaries**.”
- Client Intake Form includes inquiries about “**ability, learning disabilities and literacy**.”
- Agency guiding principles state, “every individual is unique and valued for their **diverse** talents, attributes and abilities into all aspects of life.”
- Family is “defined as people who are related by blood, marriage or **commitment**...”
- Client Intake Form has a space for “**ethnic origin**” and “**preferred language of service**.”
- “All training will address issues of **diversity and reflect cultural sensitivity**.”
- Risk Assessment includes “**political refugees and immigrants**.”
- Agency core values state, “We believe that every individual has intrinsic worth and has the right to be treated with **dignity and respect**.”
- Belief Statement says, “we believe in the **equality** of men and women.”
- Risk Assessment document, the client is asked, “**Where were you born?**” and “**What are the family roles in that country?**”
- Some of the protocols include on their resource list organizations that serve diverse communities.

However, if there is an authentic commitment to respecting diversity, much more explicit actions need to be taken in the areas of training, inclusion, services, education and resources.

The following are recommendations for addressing diversity issues:

i) Training

- Invest in ongoing Diversity Awareness Training.
- State a definition of diversity that is clearly understood by all members of staff and/or clients. For example: Diversity refers to our differences regarding gender, culture, ethnicity, language, sexual orientation, size, ability, mental health, religion, age and income level.
- Form a Diversity Committee.

- Invite representatives of diverse communities to present in-services to staff and clients.
- Invite diversity professionals to speak at annual meetings and/or conferences.
- Consult with a diversity professional.

ii) Inclusion

- Make a commitment to valuing diversity, and state this clearly in the mission, vision, or values statement. Include this commitment in all written materials and signage.
- Create definitions of “family” that are respectful of diversity. For example: “Family...defined as people who are related by blood, marriage or commitment”.
- Assess all intake procedures, questions, and forms for inclusive language. For example: Use “partner” or “mate” instead of “husband/wife”. Replace the words “marital status” with “relationship status” or the following selections, “married, common-law, registered domestic partnership, same sex partner”, etc.

iii) Services

- Hire interpreters, translators, and multicultural health brokers.
- Create partnerships with other agencies serving a diverse population. This will broaden experiences and increase awareness of differences.
- Use visuals to indicate an inclusive, respectful client/customer/patient space. For example, display pamphlets, posters, and newsletters from organizations that serve diverse communities (Elizabeth Fry, immigrant services, HIV Edmonton, the Gay and Lesbian Community Centre of Edmonton, Living Positive, Aboriginal agencies, and organizations for the deaf and hard of hearing, person’s with disabilities, seniors/youth, low income and size).

iv) Education

- Create a “zero- tolerance” work environment.
- Familiarize staff with various demographic groups and their definitions of abuse/violence.
- Explore the subject of humour and broaden it to include humour that does not rely on stereotypes.
- Learn about the dynamics of abuse in minority communities.

v) Resources

- Request materials from organizations that represent diverse communities for inclusion in resource libraries.
- Participate in resource sharing with other agencies.

- Regularly examine resource lists to determine if they are inclusive and current. For example, the Pride Pages is a directory of gay/lesbian/bisexual/transgendered owned businesses or services, as well as, those that are friendly to this population group. Counseling is also available at the Gay and Lesbian Community Centre of Edmonton, Planned Parenthood Edmonton, and the University of Alberta Sexual Assault Centre.
- Subscribe to a variety of magazines that represent diversity.
- Examine the magazines in your waiting rooms and ask, “Do these address the interests of our clients, do these reflect the values of this agency?”
- Always use inclusive language such as he/she and his/her. Use “partner” to address a client’s mate whether this person is heterosexual or homosexual.
- Having assumptions about people who are different from us is completely normal. Therefore, learn to identify biases and learn to ask many questions.
- Be aware of differing issues for minority populations. For example, if the victim is in a same sex relationship, she/he may fear coming out to a service provider, or employer, due to fear of judgment and/or rejection.

VI. RECOMMENDATIONS

The following recommendations are based on perspectives gained from agency representatives, CIAFV Protocols Working Group and Steering Committee members, the Protocol Coordinator and the researchers' observations.

a) Protocol Coordinator Role

1. The most critical role played by the Protocol Coordinator up to October 2002 was that of a "coach". Through the provision of facilitation, writing, and family violence education services to agencies preparing family violence protocols, the Protocol Coordinator offered continual support, encouragement, and products to help agencies throughout the protocol process. Without a Protocol Coordinator in the coaching role, it is unlikely that agencies would have succeeded in overcoming barriers to developing family violence protocols.
2. The Protocol Coordinator's development of a family violence protocol template, screening tools, and a family violence handbook has resulted in a set of useful project materials. However, now that these have been developed, they should be placed on-line for access by organizations interested in developing their own family violence protocol.
3. The Protocol Coordinator role was essential to the promotion and development of family violence protocols. The Protocol Coordinator should provide follow-up contact with agencies that have completed and implemented the family violence protocol. In doing so, she could learn firsthand how the protocols are working, identify where new tools or materials may be required, and discover best practices that can be shared with the CIAFV Working Group and the community.

b) Community

4. Start the protocol development work at the community level then move to the agency level. For some, it was apparent that a sense of the broader community direction would have provided a frame of reference for the protocol development process and may have helped in gaining "buy-in" with senior level leadership in these organizations.

c) Individual Agencies or Organizations

5. Revisit the organization's framework policies (vision, mission, principles/values, and goals) to ensure they are up-to-date and relevant before undertaking the family violence protocol process. In agencies where this did not occur, considerable time was spent revising framework policies before protocol development could begin.

6. Clarify the purpose of the agency undertaking the family violence protocol development process. Strong organizational commitment and support from management and staff of the agency to commit the time to complete the protocol development process is critical. Agencies took approximately twelve months to complete the protocol development process including sign-off by management. Involving a team of staff in this process provided for greater “buy-in” to the process.
7. Protocol signoff by the agency needs to be done in a reasonable amount of time so that implementation can proceed in a timely manner.
8. Someone in each agency must monitor the implementation of the protocol and make necessary adjustments or changes as a result of implementation.

d) CIAFV Protocols Working Group

9. Maintain the CIAFV Protocols Working Group as a focal point for protocol development activities. This provides an opportunity for member agencies to share the challenges and benefits of protocol development and implementation. It can also serve as a forum to discuss relevant family violence issues.
10. Recognize that the sustainability of the protocol development process depends on creating and maintaining a sense of momentum developing protocols at the agency level and linking the protocols at a community level. One way to do this is to utilize the CIAFV Working Group as a forum for agencies that have completed their protocol to present key findings, best practices, and next steps.
11. In light of the family violence protocols completed to date in the Edmonton community, it is timely for the CIAFV Steering Committee and Working Group to revisit their terms of reference, major objectives, and key activities.

e) Communication

12. Regular communication is critical to maintaining momentum and commitment to the protocol development process. This can be done through the use of a newsletter as well as web-based updates.
13. Agencies that have successfully completed the protocol development process should actively promote and communicate the benefits of having a family violence prevention protocol with agencies that have similar mandates and/or client groups (e.g. persons with disabilities, immigrant servicing agencies, etc.).

14. Other community forums and meetings should be used to promote the value and use of family violence protocols.

f) Training/Education

15. The family violence-training workshop should be the first activity for an agency that has agreed to undertake the protocol development process. This ensures a common set of family violence prevention definitions, knowledge, and awareness that helps agency staff to work through the process more effectively and efficiently. Typically, staff will often have a varied knowledge and experience with family violence.
16. Include diversity training as part of the family violence training and provide a listing of community resources for inclusion in protocols.
17. There is an ongoing interest and need for emerging research and best practices in family violence prevention. CIAFV could play a vital role in the identification and distribution of this information.
18. CIAFV should consider how it could provide ongoing training in family violence issues. Many agencies expressed the need for future training in family violence prevention practices but lack the resources to pay for and organize such training.

g) Protocol Sustainability

19. Agencies that have completed protocols can act as champions promoting the benefits of protocol development to CIAFV Working Group members who have not yet undertaken the protocol development process as well as other community agencies who may be interested in undertaking protocol development.
20. The listing of community family violence prevention resources should be regularly revised to ensure it is up-to-date. A number of agencies that completed the protocol development process indicated this action would help them sustain their protocols.

APPENDICES

Appendix A - Detailed Questions, Indicators and Data Sources for CIAFV Protocol Project Evaluation

Questions	Indicators	Data Sources
Project Goals (as outlined in RFP)		
Is each client asked a question about family violence?	-perceptions of agency staff	-interviews/focus groups with agency staff
In your opinion, have you seen improvements in the level of understanding of family violence and appropriate responses since implementing coordinated protocols?	-perceptions of agency staff -perceptions of Protocol Working Group members -perceptions of key community contacts -perceptions of Protocol Coordinator	-interviews/focus groups with these respondents
In your opinion do you see more coordinated and consistent response among service providers in identifying and problem solving family violence issues?	-perceptions of agency staff -perceptions of Protocol Working Group members -perceptions of key community contacts -perceptions of Protocol Coordinator	-interviews/focus groups with these respondents
In your opinion is there an increased accountability for abusers as well as programs that reflect this philosophy with increased coordination of family violence protocols?	-perceptions of agency staff -perceptions of Protocol Working Group members -perceptions of key community contacts -perceptions of Protocol Coordinator	-interviews/focus groups with these respondents
Is there evidence of decreased incidence of family violence since implementing coordinated protocols?	-perceptions of agency staff -perceptions of Protocol Working Group members -perceptions of key community contacts -perceptions of Protocol Coordinator	-interviews/focus groups with these respondents
In your opinion, do you see a higher priority placed on ensuring victim safety since these protocol coordination efforts?	-perceptions of agency staff -perceptions of Protocol Working Group members -perceptions of key community contacts -perceptions of Protocol Coordinator	-interviews/focus groups with these respondents

Questions	Indicators	Data Sources
<p>Logic Model Outputs and Outcomes</p> <p>What level of outputs were achieved (i.e. number of agencies contacted, number of agencies where protocols are developed, number of training sessions delivered)?</p> <p>Were the initial outcomes established for the project achieved?</p>	<p>-information from Protocol Coordinator</p> <p>-logic model developed</p> <p>-literature review completed</p> <p>-notes describing Calgary process</p> <p>-list of agencies contacted re: protocol project</p> <p>-agencies have framework and knowledge for protocol development and training</p> <p>-training needs identified within agencies</p>	<p>-activity reports</p> <p>-document review</p> <p>-interview with Protocol Coordinator</p> <p>-document review</p> <p>-interviews/focus groups with agency staff, interview with Protocol Coordinator</p> <p>-interviews/focus groups with agency staff, interview with Protocol Coordinator, document review</p>
<p>Were the intermediate outcomes for this project achieved?</p>	<p>-agencies interviewed are aware of protocol project</p> <p>-listing of needs and gaps in service</p> <p>-protocol template developed</p> <p>-family violence handbook developed</p> <p>-agencies developed protocols and training plan</p> <p>-training of agency staff in protocols and family violence issues</p> <p>-agencies are committed to protocol development</p> <p>-agencies have written policies or protocols</p> <p>-agencies implemented protocols</p> <p>-% of staff trained (per agency) on family violence issues and protocols</p>	<p>-interviews/focus groups with agency staff</p> <p>-document review</p> <p>-interview with Protocol Coordinator</p> <p>-interviews/focus groups with agency staff, Protocol Coordinator</p> <p>-interviews/focus groups with agency staff</p> <p>-# of agreements signed by agency directors and/or decision makers</p> <p>-interviews/focus groups with agency staff</p>
<p>Were the long-term outcomes for this project achieved?</p>		

Questions	Indicators	Data Sources
<p>United Way Evaluation Questions</p> <p>Were the outcomes identified for this project achieved?</p> <p>What are examples of specific results you achieved?</p> <p>What impact has the grant from the United Way had on your organization?</p>	<p>-analysis of variance between stated and achieved outcomes</p> <p>-outputs which were achieved</p> <p>-anecdotal data</p>	<p>-document analysis, interviews/focus groups with agencies, Protocol Coordinator, Protocol Working Group members</p> <p>-interviews, focus groups</p>
<p>Were there any new partnerships created in the community?</p>	<p>-listing of new partnerships, ideas, initiatives</p>	<p>-interview with Protocol Coordinator, interview with Executive Director of John Howard Society, interviews with Protocol Working Group members</p> <p>-interviews/focus groups with agencies</p>
<p>Is the project sustainable?</p> <p>Does the project need to be sustained?</p> <p>What difficulties are you experiencing in reaching a sustainable status for this project?</p>	<p>-evidence of community capacity to develop protocols and provide family violence training</p> <p>-evidence of unmet needs, lack of capacity to meet need</p> <p>-identification of limitations, barriers</p>	<p>-interview with Protocol Coordinator, interviews with Protocol Working Group members</p> <p>-interviews/focus groups with agencies</p> <p>-interview with Protocol Coordinator, interviews with Protocol Working Group members, Executive Director John Howard Society</p>

Appendix B1

CIAFV Focus Group and Interview Questions

1. What challenges did your agency have in developing the family violence protocol?
2. What benefits resulted from developing the protocol?
3. Did your clients have special needs that shaped the protocol developed by your agency?
 - 3a If yes, what were these needs and how did they shape the resultant protocol?
4. Describe the type of support or assistance your agency received from the Protocol Coordinator in developing your family violence protocol.
5. Did the development of the family violence protocol help you gain new knowledge or capacity in
 - 5a family violence prevention?
 - 5b protocol development?
6. What needs to happen for the family violence protocol to be sustained in your agency?

Additional Questions on Implementation (if implementation has occurred)

7. Has your agency implemented the family violence protocol?

If yes,

 - 7a Is each client served by your agency asked a question about family violence?
 - 7b. Does your agency have an increased priority on victim safety as a result of implementing the family violence protocol?
 - 7.c Is there an increased accountability among abusers as a result of the family violence protocols?

Appendix B2

CIAFV Focus Group Questions (Focus Groups Held at YWCA)

A. Focus Group Questions for Agencies that Have Not Completed Protocols

1. What do you think are the critical prerequisites that need to be in place in order for an organization to be ready to create a family violence protocol?
2. What prevents organizations from developing protocols?
3. What types of assistance or support do you think are needed in order for an organization to develop a family violence protocol?

B. Focus Group Questions for Agencies that Have Completed Protocols

1. What were the driving forces within your organization that resulted in the creation of your protocol?
2. What are the essential prerequisites that need to be in place in order for an organization to be ready to create a family violence protocol?
3. What do you think is preventing organizations that want to develop a protocol from doing so?
4. What is one piece of advice you would offer to organizations contemplating the development of a family violence protocol?
5. Given your experience developing a family violence protocol, what would you choose to do differently next time?
6. What do you think needs to happen to maintain the protocols once they are developed?

Appendix C

CIAFV PROTOCOLS PROJECT – PROGRAM LOGIC MODEL

Goals	Inputs	Activities	Outputs	Outcomes (Initial)	Outcomes (Intermediate)	Outcomes (Long Term)	Indicators	Tools
To facilitate the development of a consistent response through the systems for individuals and communities impacted by family violence	<p>Representatives from agencies and systems such as protocol working groups.</p> <p>Steering Committee to direct work of Protocol Co-Ordinator</p> <p>Equipment and office space for Co-Ordinator</p>	<p>Hire Protocol Co-Ordinator</p> <p>Planning: -Develop logic model,-Workplan,-ob description</p> <p>Research utilizing: -Questionnaire to identify needs -Literature search -Visiting other jurisdictions</p> <p>Developing and collecting tools already used (screening, risk assessment and safety plans)</p> <p>Contacting CIAFV agencies: -Interviews-gain understanding of continuum of service and determine existing policies/protocols -Assessing buy-in -Identifying needs/gaps in service</p>	<p># agencies programs contacted</p> <p># of agencies where protocols are developed</p> <p># of training sessions delivered</p>	<p>Logic model developed</p> <p>Literature review</p> <p>Visit other jurisdiction (Calgary)</p> <p>Agencies identified</p>	<p>Agencies interviewed and aware of the Protocols project</p> <p>Needs and gaps in service identified</p>	<p>Agencies committed to protocol development</p>	<p>All agencies identified are committed to protocol development</p>	<p>Interviews</p>

Goals	Inputs	Activities	Outputs	Outcomes (Initial)	Outcomes (Intermediate)	Outcomes (Long Term)	Indicators	Tools
To facilitate the development of a consistent response through the systems for individuals and communities impacted by family violence		<p>Identify existing resources</p> <p>Develop protocol template and family violence handbook</p> <p>Develop protocols with identified agencies</p> <p>Develop and deliver training on protocols and family violence</p> <p>Evaluate</p>	<p>Tools gathered: screening, risk, assessment and safety planning</p> <p>Agencies have framework and knowledge for protocol development and training</p>	<p>Agencies develop protocols and training plan</p> <p>Training needs identified within agencies</p>	<p>All identified agencies have written policies or protocols</p> <p>Agencies implement protocols</p>	<p>All identified agencies have written protocols in place</p> <p>All identified agencies implement protocols</p> <p>% staff trained (per agency) on family violence issues and protocols</p>	<p>Agreement signed by agency director and/or decision makers</p> <p>Review of completed protocols</p> <p>Questionnaire, survey or interviews used to determine indicators</p>	