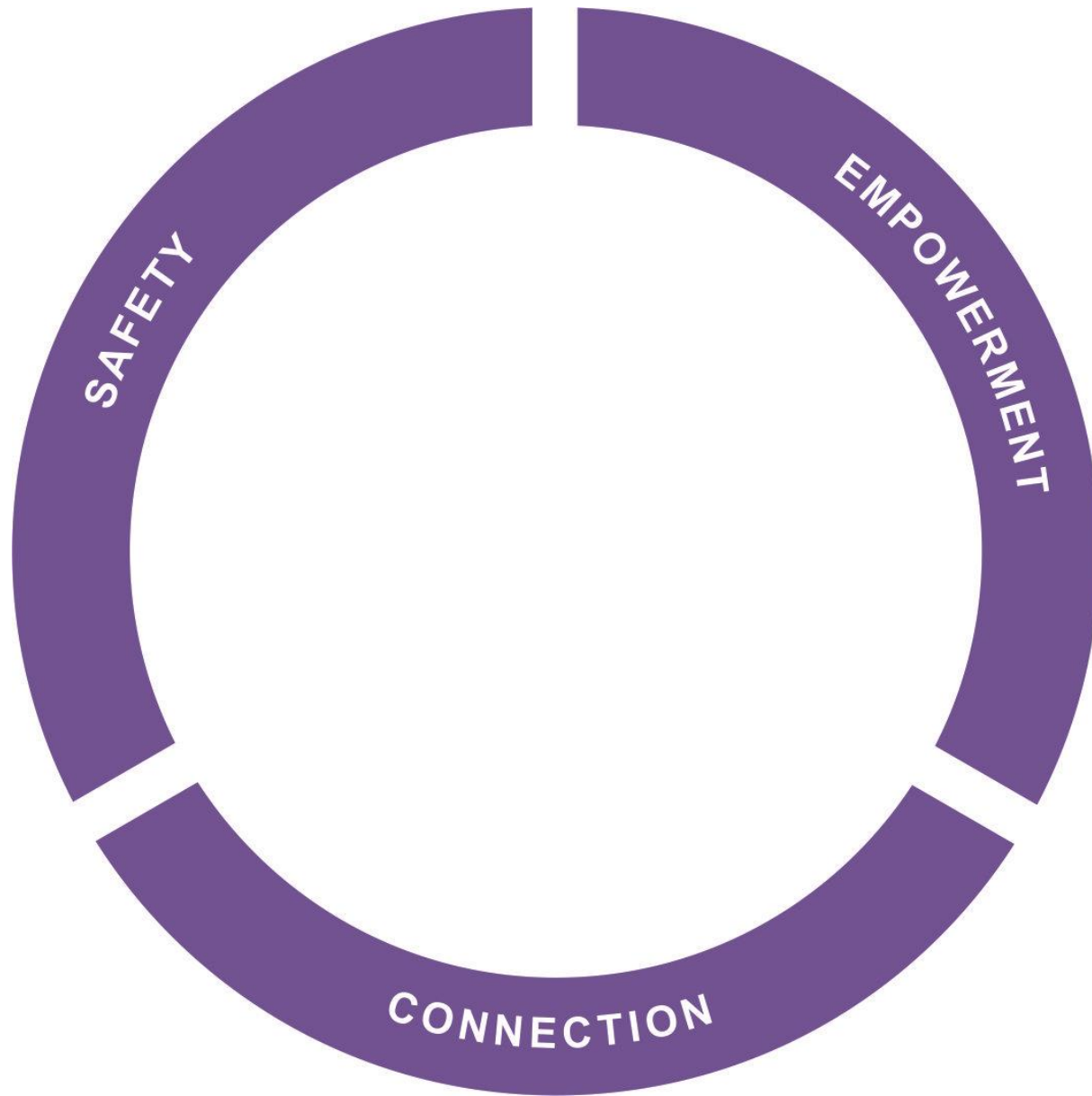


Listening to the experiences of victim-
survivors and their children:
Evaluation of the TRAK Forward Program



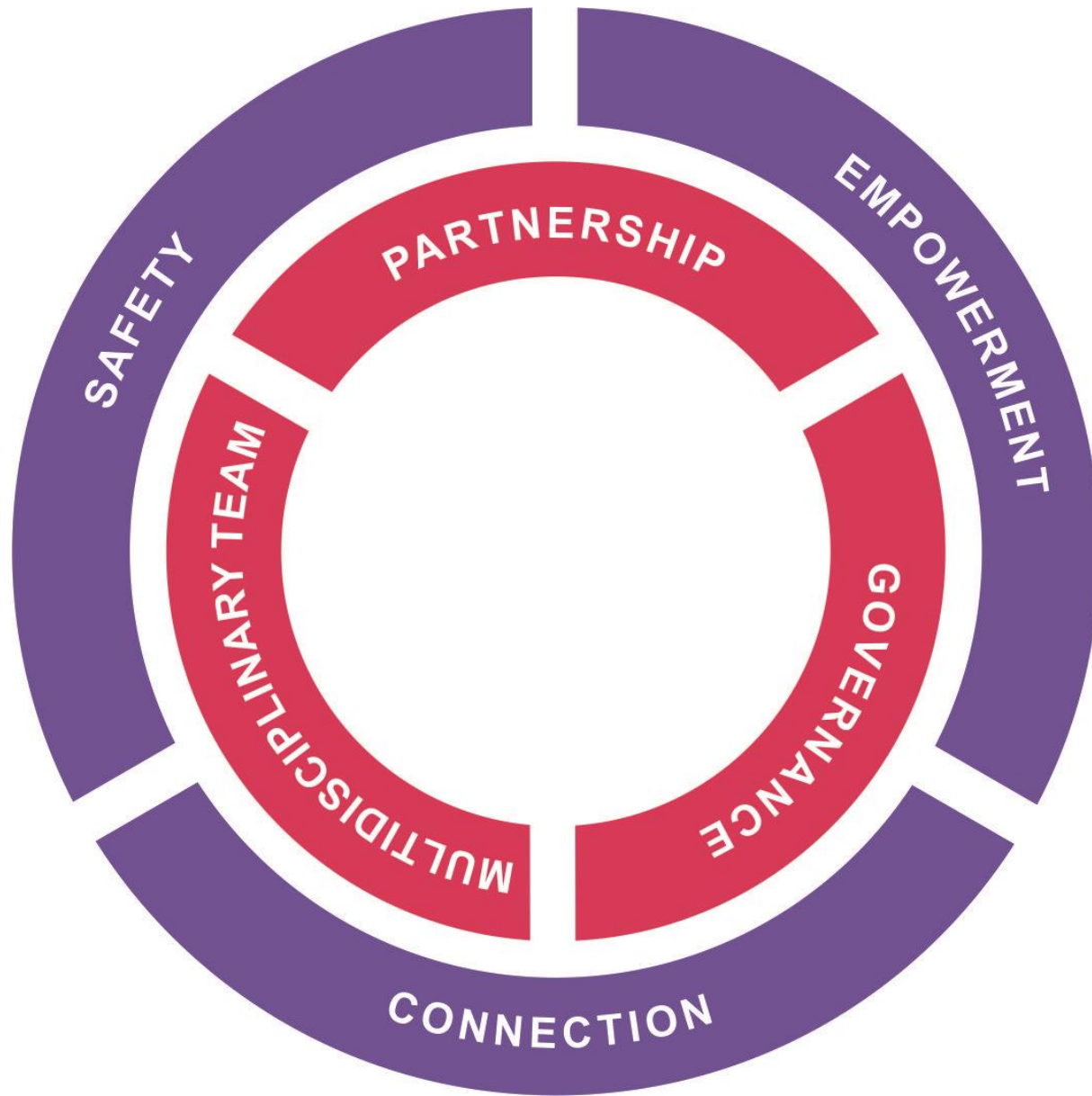
**DR DEBORAH ABSLER & DR GAYE
MITCHELL, EVALUATORS**

**KAREN PISCOPO, PRACTICE LEADER,
ANGLICARE VICTORIA**



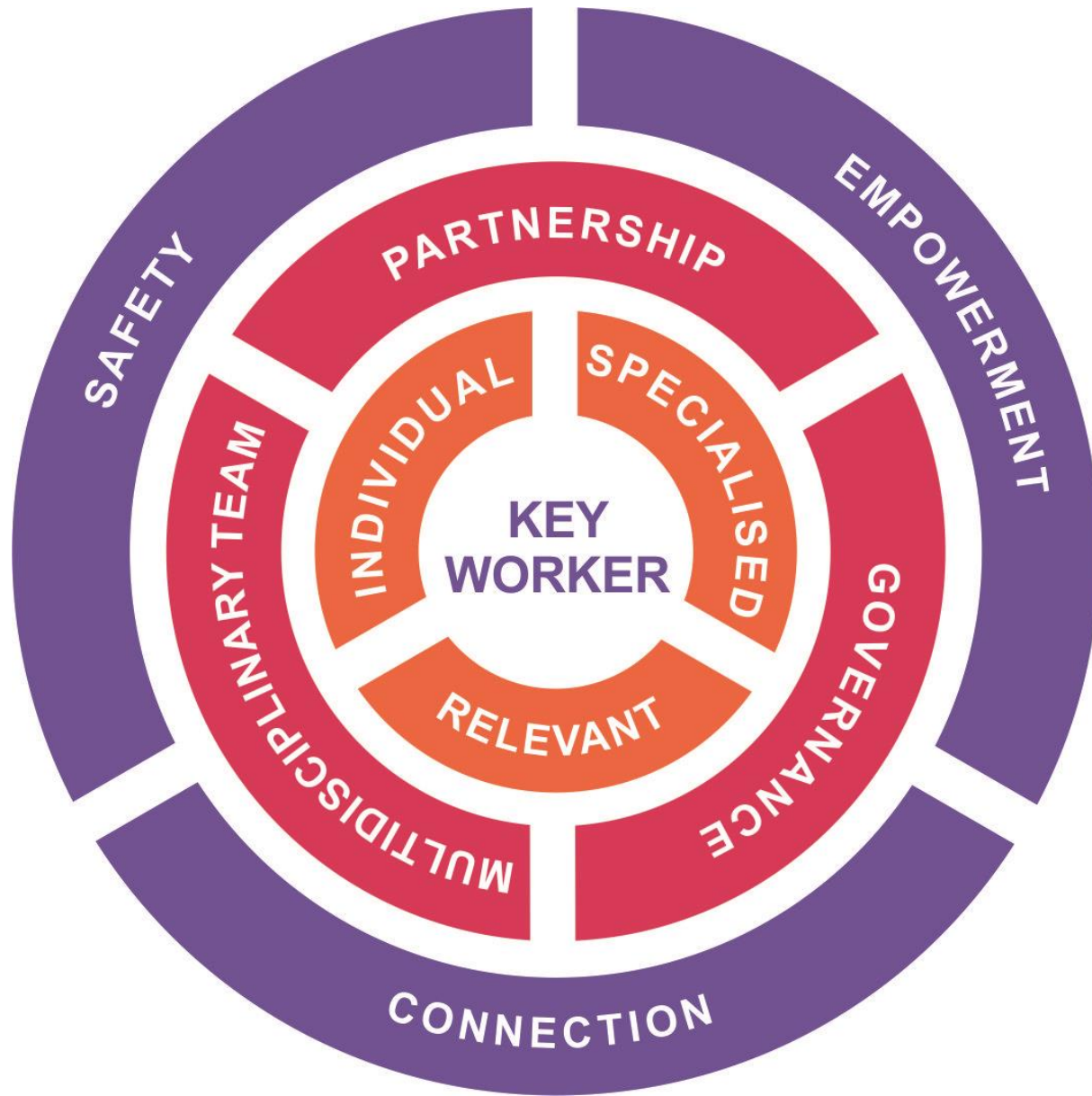
■ WHY





■ WHY
■ HOW





- WHY
- HOW
- WHAT

TRAK Forward Program Evaluation



The evaluation focus:

- ❑ outcomes for service users;
- ❑ the key learnings that emerged through the program's development and implementation

The evaluation was conducted between February and August 2018.

- The evaluation received Ethics approval from the Anglicare Victoria Research Ethics Committee.
- It was informed by a participatory action research collaborative approach & utilised a combination of quantitative & qualitative methods

Why a participatory action research collaborative approach?



- Its empowerment and partnership theory of practice matches those of TRAK Forward.
- It honours the voice and participation of those most affected by the program.
- It enables ongoing review of evaluation methods
- It encourages sharing of key learnings ‘along the way’ to inform program changes.

It utilises a combination of quantitative & qualitative methods:



- ❑ Multiple interviews and Focus Groups with TRAK Forward program staff and management;
- ❑ Multiple interviews and Focus Groups with parents and children and external stakeholder representatives;
- ❑ Case studies of interventions with families
- ❑ Analysis of TRAK Forward documentation and program data.

It involves a combination of quantitative & qualitative methods:



Analysis of validated research measures

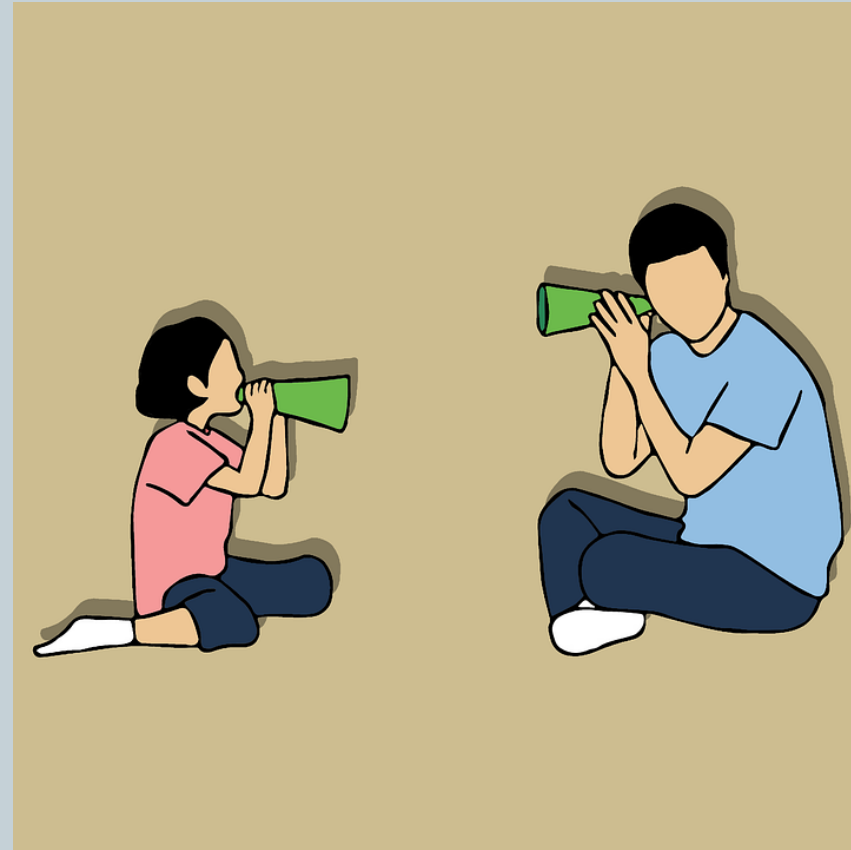
- TRAK Forward Risk Assessment tool (based on the Common Risk Assessment Framework - CRAF)
- the Parent Empowerment and Efficacy Measure (PEEM),
- the Strength and Difficulties Questionnaire (SDQ),
- the Parent-Infant Relationship Global Assessment Scale (PIR-GAS).

The evaluation received Ethics approval from the Anglicare Victoria Research Ethics Committee.

Why listen to the voices of parents & children?

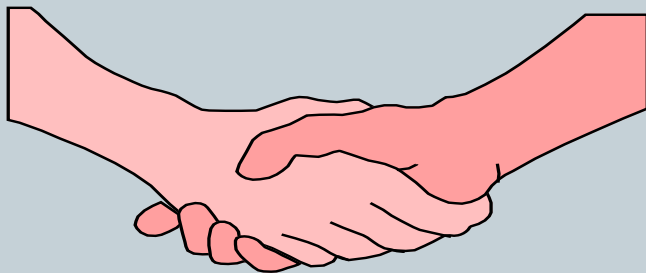
Many research methods don't take account of the client's experience of the program. This is especially so for children.

Who can better judge the effectiveness of intervention, if not those who receive it?



Why listen to the voices of parents & children?

- It is empowering and therapeutic particularly for people who have been dismissed & excluded.
 - Their input can improve the service for themselves and others



- Being listened to about the service adds greatly to their sense of empowerment and agency.
- It provides a perspective on the service that only service users can give.

It adds breadth and depth to.....

- ❑ Understanding the need for the service
- ❑ Providing clear detail & an added dimension to what works & why:
- ❑ The program model

The importance of:

- ❑ The role of the key worker
- ❑ The groups for children & parents
- ❑ The peer support groups

The shared experience being critical to the healing:



- *“We were all in a similar situation. I got more understanding. For example, going to court – it’s very emotional, very hard, and hard to express to friends who don’t understand the fear of seeing the husband in court. But the others in the group have the same fear or struggle. So I didn’t need to explain everything, so I got understanding which was REALLY helpful. I was understood, I could share. I was helped by others in the group, but also I can help them and support them. The support isn’t one way; it’s in many directions (to and from all the other group members.) I don’t have to go through this just by myself. My loneliness has really reduced.”*

Provides a different lens.....

The voice of service users can:

- ❑ Confirm other evaluation findings
- ❑ Name & identify different perspectives from professionals
- ❑ Identify gaps & make valuable suggestions
- ❑ Speak for others

Describe the impact of the service received:

- *She has helped me to unburden my mind.*
- *It's a huge difference. I have learnt to prioritise, to make time for myself. I have gone back to study too.*
- *I am now looking forward to things.*

The children's voices.....



- *The best thing was going to the group – making friends, looking forward to seeing them. I liked to make friends, people I could play with. I like being with people who have the same experience as us.*
- *I like having someone to talk to (the key worker).*
- *It helped a lot.*
- *I feel a lot better mentally and physically because we've had help, I am not scared any more.*
- *Everyone used to get scared – they don't now. It's a little easier for us to control our feelings. We are happier. It is calmer in the house, a lot calmer.*

The evaluation's findings were unequivocal. The TRAK Forward Program:



- successfully engaged 56 families between August 2017 and May 2018.
- developed an innovative, comprehensive, effective & responsive service model.
- successfully and effectively achieved program aims: increased safety, empowerment and connection for victim survivors and their children.

Key components

- No service time limits
- manageable case-loads
- comprehensive care-team
- strengths based, ecological, developmental and empowerment model.

TRAK Forward achieved significant changes for clients across several individual and family domains

Final words

- *“It’s hard to put into words. It’s really personal. They get to know a lot about the kids. They make sure we are comfortable. They check up on us. It’s tailored to us.”*
- *“There are not many services for families experiencing Family Violence let alone one that offers long term interventions and works from a therapeutic framework and works with parents and children.” Stakeholder*
- *‘they should keep doing what they’re doing because they’re doing it well’.*
Young person.