

Counselling Service Modalities and the Needs of Australians affected by Sexual, Domestic and Family Violence

Project Overview

Sexual Assault, Domestic and Family Violence are widespread, pervasive social problems that affect a large number of Australians. Indeed, it is estimated that almost one in five women experience sexual violence and one in three women experience domestic and/or family violence in their lifetime (ABS, 2012). Sexual Assault, Domestic and Family Violence (SA/DFV) causes significant trauma and results in marked psychological consequences for those who are affected (Herman, 1992). There are a number of counselling services in Australia which support people to overcome the adverse effects of trauma resulting from SA/DFV at all stages of trauma recovery. These services are delivered across multiple platforms or modalities, including telephone, online, face to face, group and voice over internet protocol (VoIP). Despite the availability of these counselling service modalities within community practice, there is a paucity of research evidence regarding their application and effectiveness in community settings. Moreover, little is known about service provider and client perceptions of these counselling service modalities. As such, there is a need to carry out an evaluation of the strengths and limitations of these counselling service modalities, as well as the degree to which they work in practice to meet the needs of people affected by SA/DFV living in the community.

Aims and Objectives

The aims of this project are twofold; firstly, the study aims to explore the strengths and limitations of five different counselling service modalities that are delivered by trauma-focussed community services in meeting the needs of Australians affected by SA/DFV at different stages of trauma recovery. Secondly, the study aims to examine the current state of knowledge about effective models of evaluating the effectiveness of various counselling service modalities delivered to people affected by SA/DFV. Taken together, these aims will be achieved by (1) completing a detailed literature review, (2) analysing service usage and referral pathways, (3) surveying clients who access counselling services for relating to SA/DFV impacts, (4) conducting focus groups with specialised SA/DFV service providers and stakeholders around Australia, and (5) online surveys of Australian service provider opinions about counselling service modalities.

Outcomes

Data collection and analysis for this study is currently ongoing. To date, preliminary results indicate that different counselling service modalities address the needs of people affected by SA/DFV in different ways. For example, with regards to telephone and online counselling, both clients and service providers report key strengths of immediacy and anonymity, and key limitations of technological accessibility and difficulties in reaching older populations. In terms of carrying out meaningful evaluations, significant challenges surrounding client safety and confidentiality in this high-risk population underscore the importance of collaborating with service providers to ensure evaluation activities do not compromise client well-being.

3 key words to help describe your paper

Service delivery

Service systems, programs

Lived experience

References

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