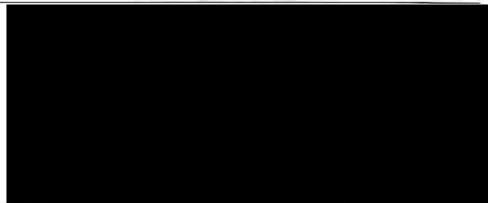**IN THE MATTER OF THE ROYAL COMMISSION
INTO FAMILY VIOLENCE**

**ATTACHMENT PN-3 TO STATEMENT OF PAUL RICHARD NAYLOR**

Date of document: 4 August 2015
Filed on behalf of: the Applicant
Prepared by:
Victorian Government Solicitor's Office
Level 33
80 Collins Street
Melbourne VIC 3000

This is the attachment marked **'PN-3'** produced and shown to **PAUL RICHARD NAYLOR** at the time of signing his Statement on 4 August 2015.

Before me: ...............

Attachment PN-3

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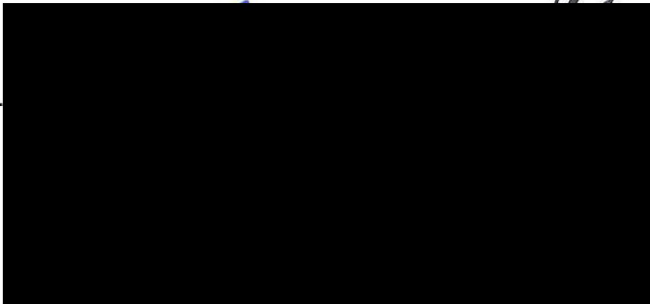
**Stakeholders' perceptions of the new SOCIT and MDC model adopted by Victoria Police**

**Martine Powell and Rebecca Wright**

**Deakin University**

**June 2009**

# Table of Contents

# Acknowledgements

This report was compiled by Martine Powell and Rebecca Wright with the assistance of several other professionals. With respect to the members of Martine Powell's research team at Deakin University, the authors wish to thank:

- Romana Murfett who compiled the demographic information and collated the interviews

- Rita Cauchi who conducted several of the stakeholder interviews

- Julianne Read who assisted with the literature search

- Rebecca Steinberg who assisted with a review of the prior research and copy editing

Several professionals outside Deakin University also assisted in the preparation of this report. Specifically, the authors wish to thank:

- members of the SOCIT project team (particularly Tania Farha and Darren Cooper) who assisted in recruiting participants, designing the interview schedule, and providing comments on drafts of the report

- the stakeholders who participated in the in-depth interviews and focus groups

- April Wilson and Jenny Underwood who transcribed the interviews

# Abbreviations

| | |
|---|---|
| CASA | Centre Against Sexual Assault |
| CIU | Criminal Investigation Unit |
| DHS | Department of Human Services |
| DPP | Director of Public Prosecutions |
| DTS | Detective Training School |
| FIC | Field Investigators Course |
| FME | Forensic medical examination |
| FME | Forensic medical officer |
| MDC | Multidisciplinary Centre |
| OPP | Office of Public Prosecutions |
| SOCACO | Sexual Offences and Child Abuse Coordination Office |
| SOCAU | Sexual Offences and Child Abuse Unit |
| SOCIT | Sexual Offence and Child Abuse Investigation Team |
| SOR | Sex Offenders Register |
| VATE | Video and Audio Taped Evidence |
| VIFM | Victorian Institute of Forensic Medicine |
| VLRC | Victorian Law Reform Commission |

# Biography of the authors

**Professor Martine Powell [DipTeach, BAHons, PhD]**

Martine Powell is a researcher and trainer who specialises in police investigation of abuse. Most of her prior research has focused on the factors that affect witness testimony and what constitutes effective training of investigative interviewers. More recently, however, her work has focused on the personal and organisational barriers that inhibit effective investigation of abuse and the strategies for overcoming these barriers. Professor Powell has a multidisciplinary background. Prior to becoming an academic she worked as a psychologist assessing and treating child sexual assault victims. She is founding coordinator of the Doctor of Psychology (Forensic) course at Deakin University and has assisted in the design, delivery and/or evaluation of eight training courses for sexual assault investigators. Funding sources for her research to date include various state and national granting bodies (e.g., Australian Research Council, Criminological Research Council, VIC and NT Law Societies) and international granting bodies (e.g., NZ Marsden Fund, Social Sciences and Humanities Research Council of Canada), as well as tenders funded by various police organisations. To date, she has over 100 published papers related to the elicitation of evidence about assault and has over 70 conference presentations (three as invited keynote).

**Dr. Rebecca Wright [BAppSc(Hons), PhD]**

Rebecca Wright is a research fellow with expertise in qualitative research methods. In 2003, she was awarded a scholarship by Professor Powell (jointly funded by the Australian Research Council and Victoria Police) to conduct a PhD examining the barriers to best-practice police interviewing of child witnesses. After the award of her PhD in 2006, she continued to work as a researcher in Professor Powell's team on numerous projects, including a tender funded by Victoria Police to evaluate the VATE evidence-gathering process. In addition to conducting research, Dr. Wright lectures in the area of qualitative interview design and analysis.

# Executive summary

## Background

This paper presents the first of a series of studies evaluating a new method of operation for the investigation of sexual assault by Victoria Police. This new model is characterised by two core components. First, it includes the establishment of specialist teams of investigators, referred to as 'Sexual Offence and Child Abuse Investigation Teams' (SOCITs). SOCIT members are responsible for investigation of sexual offences *and* victim support, whereas in the previous system these two roles were administered by different police professionals. Second, the new method of operation includes the establishment of service sites referred to as 'Multidisciplinary Centres' (MDCs), where key services (i.e., investigation, counselling, medical examination, child protection) are accessed by victims in a single location separate from police stations.

At the time of this evaluation, two MDCs had been in operation for approximately 18 months - one at Frankston (the metropolitan pilot site) and one at Mildura (the regional pilot site). The professional groups based at these sites included SOCIT investigators, counsellors and (in the case of the metropolitan site only) child protection (i.e., Department of Human Services [DHS]) officers. Further, each site contained facilities to conduct medical examinations of victims on a needs basis. The responsibility of the SOCITs was restricted to alleged penetrative offences of adults (and children for the metropolitan site only). Indecent assaults of a sexual nature (adults and children) and physical abuse of children were still being managed under the traditional model of service delivery.

## Aims

The first aim of this evaluation was to determine whether the new model of service delivery was associated with improved attitudes and quality of service delivery to victims of

sexual assault. While stakeholders' perceptions do not provide objective evaluation of the model, they nonetheless provide one important indicator of how well the system is operating and the beliefs and commitment of those working within it. The second aim was to identify key issues for Victoria Police to consider which may assist in maximising the success of the model in the long term.

**Procedure**

The procedure consisted of in-depth interviews with 90 stakeholders. These included professionals involved in the MDCs (police, counsellors, child protection and medical practitioners), managers and senior executives at each organisation participating in the reforms and legal professionals. These stakeholders were invited to speak about: (a) their perception of the model, (b) its impact relative to the prior system of operation, (c) any concerns or challenges they had experienced and (d) challenges they anticipated in the event of a roll out of the model. The group of 90 stakeholders also included police members at two comparison sites (Bairnsdale and Footscray). Interviews were conducted at these comparison sites to identify the level of support, biases and concerns (if any) among those who had no direct experience with the system but could *potentially* be impacted in the event of a roll out. The interview data was organised, coded and analysed using principles of grounded theory.

**Results**

The overriding theme to emerge from the interviews was the strong, unanimous support for the ideologies that underpinned the new reforms. All of the stakeholders who took part in the evaluation perceived that the adoption of a multidisciplinary, 'victim-centred', 'one-stop shop' model of service delivery was a major step forward in the service delivery to victims of sexual assault. Further, the overriding perception was that having a qualified police member

undertake the entire investigation (from the initial statement to brief authorisation) ensured a more efficient and user-friendly system for victims.

Collectively, four interrelated elements of the new system were highlighted as being distinct strengths of the reforms. These elements include: (a) co-location of key services, (b) the adoption of a neutral independent service facility, (c) increased specialisation of police, and (d) strong organisational commitment and support. Relative to the traditional model of service delivery still in operation throughout Victoria, the reported outcomes of these elements included improved collaboration, greater or increased victim satisfaction and reporting rates, increased referrals between professionals, reduced response and investigation times, better quality briefs and higher prosecution and conviction rates.

Despite the widespread support for the reforms, however, several concerns were expressed. These related to the adequacy of future resourcing and staff numbers to fill the SOCIT positions and whether the current levels of leadership and collaboration between service providers would be maintained in the long term. In addition, stakeholders raised issues related to the geographic location and design of future MDCs, and the allocation of cases to SOCIT members.

**Conclusion**

The SOCIT and MDC reforms appear to have corresponded with a major shift in police attitudes to victims of sexual assault. This is evidenced by the focus SOCIT members placed on providing sexual assault victims with dignity and respect, compared with the 2004 Victorian Law Reform Commission (VLRC) report that revealed widespread attitudes of scepticism, suspicion and disbelief among detectives when responding to allegations of sexual assault. A strong orientation towards prioritisation of sexual assault investigation was reflected in the way members referred to victims' needs and challenges, as well as in the

way SOCIT members perceived their role within the organisation, the quality of their work and their relationship with other service providers. Across the large and heterogeneous group of stakeholders interviewed for this evaluation, perceptions of the work police members were doing in the new SOCIT-MDC model were also positive. An overwhelming majority of stakeholders stated that SOCIT detectives were providing expert, victim friendly and rapid service delivery under the new model, and that collaboration was significantly improved.

These observations suggest the beginning of a major cultural shift—a shift that the VLRC (2004) stated would be necessary to improve sexual offences law and procedure. However, six areas were identified that pose ongoing challenges for Victoria Police, which should be addressed to ensure the success of the model in the long term. Two of these challenges relate to limitations in the design and location of the current MDCs and the need to factor in increasing court time and administrative tasks into future SOCIT staffing and resource models. The remaining four challenges included the need for: formalised processes to facilitate inter-agency collaboration; improved training in investigative interviewing; an ongoing built-in evaluation system; and a review of the current procedures for managing work-related stress.

Overall, our findings are entirely consistent with the central concept underlying the development of the new MDC and SOCIT reforms – a more accessible, efficient, coordinated and user-friendly service delivery. Our next step is to examine the degree to which the positive achievements reported in this paper are consistent with the way victims talk about their experiences and with hard outcome indicators.

# 1.0 Introduction

This paper presents the first in a series of studies evaluating a new method of operation for the investigation of sexual assault by Victoria Police. The new model is characterised by two core components. First, it includes the establishment of specialist teams of investigators, referred to as Sexual Offence and Child Abuse Investigation Teams (SOCITs). The principal responsibilities of SOCIT members include: sexual assault investigation, victim support and liaison, forensic interviewing of witnesses and suspects and management of the Sex Offenders Register (SOR). In the preceding service model, which is still in operation throughout Victoria, the abovementioned roles had not been amalgamated. Specifically, members of the Sexual Offences and Child Abuse Units (SOCAUs) were responsible for interviewing and victim support, whereas members of Criminal Investigation Units (CIUs) and Sexual Crimes Squads (depending on offence criteria and workloads) were responsible for the criminal investigation component. Although the criteria underpinning appointment to a SOCIT membership is still evolving, appointment at the time of this evaluation required the completion of the Field Investigators Course (FIC) as a prerequisite, and the completion of the Advanced Diploma of Investigation (Detective Training School [DTS]) and the Video and Audio Taped Evidence (VATE) course within 12 months of recruitment to a SOCIT[1].

Second, the new method of operation includes the establishment of service sites referred to as 'Multidisciplinary Centres' (MDCs). These centres incorporate key services involved in the investigation and response to sexual assault and are co-located at stand-alone buildings away from police stations. The key organisations involved in the delivery of services at the MDCs include: (a) Victoria Police (SOCITs), (b) Centres against Sexual Assault (CASAs), which are responsible for providing counselling and general advice and

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[1] While specialised investigative interview training courses for SOCIT members have been devised (one in the area of witness interviewing and the other in the area of suspect interviewing), at the time of this evaluation these had not yet been implemented at the two pilot sites.

support to victims[2], (c) Department of Human Services (DHS)[3], which is responsible for

child protection investigation and (d) the Victorian Institute of Forensic Medicine (VIFM),

which conducts forensic medical examinations (FMEs) of abuse victims[4]. Although in the old

system of service delivery Victoria Police members liaised with the other three service

providers listed above, victims of sexual assault needed to move between separate sites when

obtaining the various professional services. The police service, in particular, was previously

provided at local police stations.

The rationale for the development of the new SOCIT and MDC model arose primarily

from the VLRC final report on Sexual Offences which was tabled in Parliament in July 2004.

The report documented widespread concerns about low reporting, prosecution and conviction

rates for sexual assault in Victoria, and the high attrition rate of reported cases. The highly

critical report referred to widespread anecdotal concerns that the previous service model

suffered from fragmented, inadequate and inconsistent service delivery that exacerbated

victim stress because victims had to repeat their account to numerous service providers. The

report also emphasised the prevalence of poor police attitudes toward sexual assault

investigation. Attitudes of scepticism and disbelief toward victims[5] were prevalent among

sexual abuse investigators, many of whom perceived that a high percentage of reported rapes

were false. Overall, the VLRC recommendations included the need for increased

specialisation of investigators, improved working relationships between key players and a

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[2] The acronym used to refer to these centres differs across regions. For example, Southern Eastern Centre Against Sexual Assault, which is the centre based at the metropolitan MDC, is referred to as SECASA. In this report, however, where anonymity of individual stakeholders needs to be maintained, the acronym CASA will be used to refer to all of the counselling services provided at the MDCs.

[3] The inclusion of sexual offences against children and the co-location of DHS were implemented from July 2008 onwards at the metropolitan MDC only.

[4] The medical examinations did not begin at the metropolitan site until July 2007 due to negotiations with VIFM and the fit out of the medical suite.

[5] The term 'victim' will be used interchangeably with 'witness' irrespective of whether the case of assault had been substantial. This is consistent with other reports (e.g., Statewide Steering Committee to Reduce Sexual Assault, 2006).

response that was more cognisant of the context of sexual abuse and the challenges faced by victims.

The guiding philosophy underlying the two core components in the new service model is that they enable more coordinated, efficient and specialised responses, thereby increasing victim reporting rates, optimising victim recovery and facilitating high quality briefs of evidence (Victoria Police, 2005). After an initial stage of conceptual development (involving discussion with local stakeholder groups), two members of Victoria Police's Sexual Offences and Child Abuse Coordination Office (SOCACO) developed the model. In 2006, as part of the Victorian Government's $34 million sexual assault reform package, Victoria Police received $6 million to pilot the model from January-February 2007 onwards at the two pilot sites. Frankston (which has one of the highest rates of sexual abuse) was chosen as the metropolitan pilot site and Mildura as the regional pilot site. One MDC was based at each pilot site, and the professionals servicing these included SOCIT investigators, CASA counsellors and (in the case of the metropolitan site only) DHS members. Further, each site contained facilities to conduct medical examinations of victims on a needs basis by members of VIFM. The responsibility of the SOCITs involved alleged penetrative offences against adults and children committed in the service area[6]. Indecent assaults of a sexual nature (adults and children) and physical abuse of children were still being managed by SOCAU members located at the Frankston and Mildura police stations. Implementation and oversight of the two facilities was, in the main, undertaken by one Project Manager for almost 18 months until additional resources were found in July 2008.

At the time this evaluation commenced, the new SOCIT-MDC system had been operating at the pilot sites for approximately eighteen months. The current evaluation

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[6] At the time of this evaluation, Frankston SOCIT had the task of responding to and investigating all serious sexual offences committed in the Frankston Police Service Area only. These offences include: Rape, Attempted Rape, Assault with Intent to Rape and any other offence/s involving penetration and any other 'serious sexual offence' as determined by the Detective Sergeant, Frankston SOCIT, in conjunction with the Unit Manager, Frankston CIU and other relevant stakeholders. The task of Mildura SOCIT was to respond to the same criteria in the Mildura Police Service Area as well as certain offences committed within the Robinvale CIU Area.

consisted of in-depth interviews with key stakeholders including: professionals involved in the MDCs; managers and senior executives across all of the organisations that had participated in the reforms; and legal professionals. These stakeholders were invited to speak about the perceived strengths and weaknesses of the new model, its impact (relative to the prior system of operation) and any concerns or challenges they anticipated in relation to a potential roll out of the model across the state. Police professionals were also interviewed at two comparison sites (Bairnsdale and Footscray) that were deemed to be similar in population and sexual offence rates to the regional and metropolitan sites. Interviews were conducted in these regions to identify the level of support, biases and concerns (if any) among those police members who had no direct experience with the system but could *potentially* be impacted in the event of a roll out.

Overall, the purpose of conducting the stakeholder interviews was twofold. The first aim was to determine whether the new model of service delivery was associated with improved attitudes and quality of service delivery to victims of sexual assault. While stakeholders' perceptions do not provide objective evaluation of the model, they nonetheless provide one important indicator of how well the system is operating and the commitment of those who implement it. The second aim was to identify key issues for Victoria Police to consider, which may assist in maximising the success of the model in the long term. Our reason for conducting in-depth, face-to-face interviews (which are relatively time consuming compared to surveys) was to gain a thorough understanding of the reasons underlying stakeholders' concerns and the assumptions that underpinned them. Further, given the paucity of prior evaluation research on co-located models of service delivery and the fact that this reform is such a significant change to the previous way of operating, a non-directive and elaborate method of inquiry was deemed most appropriate. We had no strong preconceptions about what issues or themes would emerge from the interviews.

The remainder of this report is structured as follows. We commence with an outline of the method (participants, procedure and type of analysis). Next, we provide an overview of professionals' perceptions of the model, its strengths and any areas of concern. Quotations are provided to illustrate the various perceptions. In the final section we provide an integrated discussion of the findings and their implications with reference to the prior international literature in the area of sexual assault investigation.

## 2.0 Method

### 2.1 Participants

The participants included 90 professionals who provide services to victims of sexual assault in Victoria. Importantly, the specific professions represented in the current evaluation cover *all* aspects of service delivery, including counsellors (CASA and Victim Witness Assistance Services), child protective interveners, operational police officers (ranks ranging from Senior Constable to Senior Sergeant), police senior management (ranks ranging from Inspector to Deputy Commissioner), forensic medical officers, employed by the VIFM, and members of the Office of Public Prosecutions (OPP). Most of the stakeholders nominated had extensive experience in the area of sexual assault prior to the implementation of the pilot project.

Table 1 provides a list of the positions and locations of the various professionals who were interviewed for this evaluation. A diverse sample of key stakeholders from each professional group was nominated and recruited by the SOCIT Project Team. Nominated stakeholders were selected on the following basis:

    (i)   professionals with direct experience of being co-located within an MDC,

(ii)  police members whose former or current roles have been or may be impacted by the SOCIT and MDC reforms (i.e., SOCAU, CIU members and members of the Sex Crimes Squad) at the two comparison sites,

(iii)  members with high-level operational or managerial responsibilities who are associated with the new SOCIT and MDC reforms (e.g., Inspectors and Deputy and Assistant Commissioners from Victoria Police, CASA managers),

(iv)  members of the SOCIT Project Team and members of the SOCACO and

(v)  professionals from independent agencies who assist within and facilitate the judicial process (i.e., members of OPP, Child Witness Service, VIFM).

Nominated stakeholders were individually invited (in writing) to partake in the current evaluation by the then Deputy Commissioner Simon Overland. Of the 104 professionals invited, 14 (from various regions, agencies and police units) declined to be involved due to their limited involvement and understanding of the new model and/or their inability to attend an interview. Given the large number of stakeholders consulted, data saturation (i.e., when no new information was being obtained about the topics of inquiry: Sim & Wright, 2000) was unequivocally reached. To preserve the anonymity of stakeholders, only broad descriptors were used when providing quotes to illustrate their views. Further, any identifying information was removed from quotes, which were also corrected (where appropriate) for minor wording or grammatical errors.

**2.2 Procedure**

All except 13 interviews were conducted by Dr. Rebecca Wright, an expert in qualitative interviewing with considerable experience interviewing stakeholders about the sexual abuse investigation process. The remainder of the interviews were conducted by Ms Rita Cauchi, a final year doctoral candidate in the area of forensic psychology, who worked under the guidance of Dr. Wright. The interviews ranged in duration from

14 to 87 mins (M = 40, SD = 17 mins) and were conducted between the months of August and December 2008. The majority of interviews were conducted face to face at the stakeholders' places of occupation. For logistical reasons, however, a small proportion of interviews were conducted by telephone.

Table 1

Stakeholders' roles and locations

|  |  | Metro | Rural |
|---|---|---|---|
| Pilot Sites *(Frankston & Mildura)* | Police Senior Management | 4 | 3 |
| | SOCIT Detectives | 6 | 4 |
| | SOCIT personnel (administrative) | 2 | 1 |
| | CASA | 6 | 5 |
| | DHS | 2 | 3 |
| | SOCAU | 4 | 4 |
| | CIU | 2 | 2 |
| Comparison Sites *(Footscray & Bairnsdale)* | Police Senior Management | 2 | 2 |
| | SOCAU | 1 | 2 |
| | CIU | 2 | 2 |
| Other Key Stakeholders | SOCIT Project Team | 4 | - |
| | SOCACO | 4 | - |
| | Sexual Crimes Squad | 6 | - |
| | Specialist Sexual Offences Unit (OPP) | 3 | - |
| | Child Witness Service | 1 | - |
| | Forensic Medical Officers (VIFM) | 3 | 1 |
| | CASA Management | 9 | - |

A semi-structured interview schedule was used to generate discussion about a range of issues deemed (by the researchers and the SOCIT project team, based at SOCACO) to be important lines of inquiry in evaluating the new reforms. Importantly, each interview commenced with a broad open-ended question, which invited each professional to reflect generally on their overall impressions of the new reforms. Subsequent lines of inquiry addressed: (a) factors integral to the success of SOCITs and MDCs, (b) the perceived impact of the new reforms, (c) subjective experiences of being co-located with other professional agencies and (d) future concerns, considerations and support for a roll out of the model of service delivery. Police stakeholders at the comparison sites were asked to reflect on the process of conducting joint investigations of sexual offences and to relay their perceptions of the new model and its likely impact in the event of a roll out.

Importantly, a number of steps were taken to ensure that the stakeholders had the autonomy to direct the discussion towards experiences and concerns that were personally relevant to them, and to attribute their own meaning to these experiences. First, the themes outlined in the interview schedule were broad in nature. Second, a recursive or conversational style of interviewing was used, allowing the researchers (interviewers) the flexibility to pursue any lines of inquiry raised by the stakeholders, including those that were not outlined in the interview schedule. Third, the researcher was largely passive in the interviews, asking only broad open-ended questions to encourage further elaboration and to seek clarification. Finally, the interviewers were allowed some discretion in the order and manner in which questions or issues were raised, to facilitate the smooth communication of ideas.

**2.3 Data management and analysis**

All of the interviews were audio taped and transcribed verbatim. Interview data was organised, coded and analysed using principles of grounded theory (Browne & Sullivan, 1999). That is, the themes were inductively derived and grounded within the dataset. Comments or phrases were placed into categories based on similarities in their direct and implied meanings. Integral to the grounded theory approach, data collection and analysis occurred simultaneously. Soon after each interview was conducted, the interview was transcribed and coded for key themes. Further, the coding process was collaborative in nature; each of the two primary researchers responsible for this component of the evaluation (Dr. Rebecca Wright and Prof. Martine Powell) independently read all of the interview transcripts soon after they were completed to discuss and debate common themes, to develop a coding protocol and to identify new areas of interest which could be followed up in subsequent interviews. Unlike reliability coding used in quantitative research, the value of multiple coding lies within the content of the interpretive discussions between researchers, rather than the degree of concordance between the researchers (Barbour, 2001). Such discussions aided in refining the coding protocol to ensure that it adequately captured the content of the interviews.

## 3.0 Results

The overriding perspective to emerge from the interviews was the strong, unanimous support for the ideologies that underpinned the reforms being evaluated in this paper. All of the stakeholders who took part in the reforms expressed at the outset of their interviews that the adoption of a multidisciplinary, 'victim-centred', 'one-stop shop' model of service delivery was a major step forward in the service delivery to victims of sexual assault, and towards maximising legal outcomes and victim wellbeing. Further, the overriding perception

among professionals who had insight into the impact of increased specialisation of SOCIT members (i.e., police professionals and members of the OPP) was that having a qualified police member undertake the entire investigation, from the initial statement to brief authorisation, ensured a more streamlined and user-friendly system for victims. Clearly, the professionals we interviewed portrayed a genuine commitment to providing better outcomes for victims of sexual assault and perceived that the reforms had greatly assisted in this endeavour.

> "I'll be honest, I would struggle to go from here back to the old way of doing things… It would be like jumping out of a VW into a Ferrari and then having someone take it away from you… It's an integrated service and everyone is working together in providing the best outcomes … I am so passionate about [these reforms] because we can see the benefits of what we're doing. Being part of the reform gives me tremendous professional satisfaction." (Police member – Pilot site)

> "Everyone here has put a fair bit of heart and soul into this. They believe in what we are doing and they want to see it work. I'm actually really proud of what everyone has achieved. If someone had said 10 years ago, 'We're going to put the counsellors, DHS and the police in a building together,' people would have said, 'That will never work.' Well it can work and in our case has worked quite clearly in my view. Without doubt it's a better way to go." (Police senior management – Pilot site)

> "We're all in it for the same reason − we want the services to work well and to achieve the very best outcome for victims of sexual assault. So from that point of view, everyone is on the same page." (Forensic medical officer)

> "I have a very positive view of this reform… It's an ideal set up. We're working together now." (Counsellor – Pilot site)

> "Having everyone in the one place is a brilliant idea because one of our biggest problems is feedback. We don't know what DHS are doing, we don't know what CASA are doing, we don't know what the detectives are doing and thus we lose perspective on what happens to the victim during the process. Without feedback the whole process falls down. But if you're in the one place and you're doing the whole thing together right through to the court process that's better for us and better for the victim." (Police member – Comparison site)

Despite the positive perceptions of the reforms, several challenges or concerns were raised, as well as suggestions about ways the model could potentially be improved. In the following two sections, we provide a more finetuned analysis of the stakeholders' perceptions. Specifically, Section 3.1 describes stakeholders' perceptions of the core features

underpinning the success of the new model. Section 3.2 describes issues of concern that pose ongoing challenges for maximising the success of the model in the long term.

## 3.1 Core features underpinning the success of the new model

Across all interviews with stakeholders, four interrelated elements of the new system were highlighted as being distinct features of the reforms. These elements are: (a) co-location of key services, (b) the adoption of a neutral independent service facility, (c) increased specialisation of police and (d) strong organisational commitment and support. In this section, we elaborate on how the elements were perceived to improve service delivery for sexual assault victims and we provide anecdotal evidence for their effectiveness.

It should be noted that the various elements outlined in the following sections were not emphasised to the same degree by each stakeholder. For example, police stakeholders (understandably) had more insight compared to non-police stakeholders into the advantages of increased police specialisation and therefore they focused on this aspect more than other stakeholders. Further, none of the stakeholders perceived that the old system of service delivery was completely devoid of any positive elements. Rather, they perceived that the new model was one, and by far the most radical, of a series of initiatives over the past two decades towards improving service delivery to victims of sexual assault.

### 3.1.1 Co-location of key services

The issue of co-location of services was a major focus of the interviews because it represents such a stark change to the way that services have traditionally been offered (particularly in the metropolitan region), and because inter-agency collaboration is an integral component of service delivery. Having ease of proximity, accessibility and co-location of multiple services under the one roof was considered to be a major strength of the new model, making it possible for victims to access a range of services with much greater ease.

Overall, the stakeholders reported four interrelated benefits of co-location. First, they perceived that referrals between professionals (particularly between counsellors and police) had increased under the co-location model. This was attributed to professionals' enhanced knowledge and rapport with other service providers and the fact that victims who are hesitant about reporting (due to negative stereotypes of police or uncertainties about legal process) can meet police informally in a supported environment prior to making a decision about whether to report offences.

> "The mere fact that we're all here now [co-located] means we can say, 'Look, we've got some very good police people here. You're under no obligation, but why don't we just get one of them to come in and have a little bit of a chat about what might happen if you were to tell your story.'... And they've typically agreed whereas previously, when we'd said, 'Why don't you go over and see someone at the Police Station?', they'd say, 'No way!'" (Counsellor – Pilot site)

> "I've certainly had clients that were very reluctant to speak to police – scared of them – but after meeting them in the corridor say, 'Oh, they were really nice – maybe I will consider making a statement after all.'" (Counsellor – Pilot site)

> "The ability to meet the [police] officer informally before reporting, and particularly the officer who will be following through on the case as well, is really important, I think. There isn't a single client [under the new system] who hasn't said, 'Oh gosh, he didn't look like a police officer,' or, 'Oh gosh, he was so nice and personable.' I don't know about other counsellors' experiences, but mine have all been really good experiences. Observing the respect they [SOCIT members] have shown to clients has shaped the way I relate to them as well because I feel comfortable working with them." (Counsellor – Pilot site)

The second major advantage of co-location reported by the stakeholders relates to the more direct and immediate manner in which matters or queries are being dealt with. When professionals are co-located it is easier to schedule impromptu meetings or case conferences, which in turn facilitates rapid decision making.

> "Clients often ask me legal questions, or they'll ask, 'Why are the police doing this?', 'What's happening with the case?', or, 'Could this happen if it goes to court?' Having a closer working relationship with the police means that I'm more in the loop and subsequently better able to answer these questions. But if I can't answer them, all I have to do is walk down the hallway and ask one of the guys to come into the room – they're always willing to just drop what they're doing, come and sit in the counselling room and answer questions if needed." (Counsellor – Pilot site).

"Under the old system I'd have to send emails and phone messages, and these can be ignored, but you can't be ignored if you're down the end of the corridor. I think that's a fabulous thing…that has altered our working together. Also I find it more personable to be able to just knock on the door and express those concerns to a professional face to face." (Counsellor – Pilot site)

"Even the time to get on the phone and make an appointment is a deterrent. Now you can just walk over to someone's office and say, 'Listen, we've got this job. What do you know about it?' Then all of a sudden you're talking about the case over a coffee, formulating a plan and a response to the job." (Police member – SOCIT project team)

The more rapid form of information exchange was reported by professionals across all stakeholder groups, but its benefit was particularly emphasised by those at the metropolitan pilot site where DHS is currently co-located. As protective interveners, both police and DHS are required to work collaboratively and to notify each other of cases where children are deemed 'at risk'. Apparently delays in response time due to DHS procedure have been a common source of frustration for police members over the years. In the original child abuse model, police officers are required to notify a *centralised* intake team within DHS of any new referral, and the intake team subsequently refers the case to a particular team within DHS. In the new system being trialled at Frankston SOCIT where DHS are currently located, any 'notifications' requiring joint DHS-police investigation can be *directly* received by the DHS team located on-site. The more immediate referral procedure evolving from co-location was perceived by police and DHS workers to increase the efficiency of case management and victim wellbeing.

"I've kept statistics on most of the cases that have come through [the MDC pilot site]. Whether it's been from intake [DHS department] or police, we've responded within two hours… And that's one of the things that police will tell you about working with DHS in the past is that it takes us such a really long time to respond (days) whereas the police just want to go out and interview the client. That's been one of the things that we've been able to do since we've been here." (DHS worker – Pilot site)

"The other day one of the counsellors had a little girl as a client – she'd been on DHS and police records for a while but hadn't disclosed. But she disclosed to the counsellor who went straight to the officers and said, 'She's just disclosed – is there any chance of doing a VATE?' So they just dropped what they were doing and went and did a VATE

with the little girl. Under the old way they'd have had to ring up the police and make an appointment, which would have delayed the process." (Police member – Pilot site)

"One value of co-location is that cases seem to be moving through the system a lot quicker. Timely responses are really important for victims and families. If they can see that something's moving it means that therapeutically they can move on." (DHS worker – Comparison site)

The third reported benefit of co-location was enhanced collaboration (both within and across organisations) during case management. This was emphasised not only by those professionals located within the pilot sites, but also by those in the comparison sites who expressed that inter-agency tension and poor communication between professionals were major problems under the old system. Co-location was reported to enhance collaboration due to increased opportunities for case conferencing, networking and rapport-building between staff, which in turn facilitates group cohesiveness. Informal as well as formal networking was perceived to be critical for improving understanding of and respect for the unique roles and responsibilities of each partner agency, and for identifying precisely how professionals could assist one another.

"You just can't beat the ease of communication that comes from being co-located and…the relationships that have formed by working together every day… You become familiar with each other. You get to know how people work and how they don't work." (Police member – Pilot site)

"Although there are [non-pilot site] areas within Victoria where there's already strong relationships between partner agencies, the understanding of the roles, responsibilities and capabilities of different agencies is much greater when you co-locate – the shared understanding becomes explicit." (Police member – Pilot site)

The professionals located at the pilot sites were able to provide numerous specific examples to illustrate precisely how inter-agency collaboration had improved. Professionals at the metropolitan pilot site spoke of more deliberate case planning between DHS and police as well as greater sharing of case-related information (where appropriate). Professionals at both the metropolitan and regional pilot sites spoke of greater sharing of resources and administration of personnel under the new system. Further, police officers spoke of the benefits of the counsellors' unique relationship with victims in helping victims to process

their disappointment when a decision was made by police not to progress a case to prosecution. Under the co-location model, police members were able to inform the victim of the decision whilst also in the presence of their counsellor, who could offer additional support to the client.

> "Whether they [victims] are coming in to make a statement or going straight from a counselling session to meet with the police to talk about things, we can be on hand straight afterwards to meet with them if they're a bit upset or just want to debrief… I think it's better to have the support of their counsellor… We're there to pick up the pieces and to make sure that the support follows through." (Counsellor – pilot site)

> "Under the new way the victims' families feel more secure and confident. I can see that more victims are willing to make statements here on the grounds that the statement is made in the same environment where they feel comfortable, accepted and supported. Also the environment is more familiar because they've been coming here for counselling, and familiarity in itself can reduce feelings of unease." (Police member – Pilot site)

> "We've had sessions where we've sat down with the client, a CASA counsellor and myself [the investigating detective] and talked about why things haven't been able to progress to court, and sometimes we've been able to vindicate things to people's satisfaction." (Police member – Pilot site)

The final benefit of co-location was that the police presence provided a safer environment for counsellors to work. In particular, one counsellor spoke of a situation in the previous model where she had been threatened by a client's associate who attended the site. The police presence in the building was reassuring to this counsellor because she knew that she could elicit immediate assistance if needed.

Apart from the initial financial outlay, few disadvantages of co-location were mentioned by stakeholders, and all concerns were largely speculative in nature. One police member at a comparison site was concerned that confidentiality would be a problem under the new model because there was often information related to cases that police members were not permitted to share with caseworkers from other organisations. A forensic medical officer suggested that co-location provided a strong implicit message to victims that they *must* access all services, as opposed to being client directed (i.e., at their discretion). Several professionals commented that some clients would avoid attending counselling at a multidisciplinary site

because they did not want to see police or be seen entering a place where police were based. Finally, one police professional at a comparison site suggested that co-location could potentially lead victims to be confused about the roles of various professionals located at the MDCs.

> "I think people find it quite good to come to a police station sometimes and realise they're dealing with the police because people get confused as to who's doing what when there's a whole lot of different people working together wearing plain clothes. It's an overwhelming situation anyway so when they leave they may think, 'Who was it who told me this? What was their role?' You'd be amazed how many people think that we're Department of Human Services when we've gone to a home or school in plain clothes." (Police – Comparison site)

Importantly, none of the abovementioned concerns about confidentiality, identification of professionals' roles and clients' resistance to attending counselling were reported by professionals who had been working at the pilot sites. To the contrary, these stakeholders emphasised how co-location had improved victims' participation in and understanding of the various professionals' roles.

### 3.1.2 The adoption of a neutral independent facility

Another positive element of the reforms that was identified by stakeholders at both pilot sites was the 'stand alone' and independent nature of the MDCs. The MDCs are located in buildings separate from police stations and other pre-existing service facilities, whereas under the original model SOCAU members are located at police stations. Anonymity is facilitated at the pilot sites by the fact that from the exterior the nature of the service is discrete. For example, at Mildura there is no signage whatsoever and in Frankston there is only a small sign symbolising the presence of police, which is only visible upon entry. The suspect is still interviewed at the police station, which significantly reduces the likelihood that the victim will see the alleged offender. Further, marked cars are not parked on-site and all police members wear plain clothes such that victims would probably not be aware that police officers occupied the building (even after entering) unless they were directly informed of this.

Collectively, these factors were perceived by the stakeholders to assist in the creation of a neutral, safe, confidential and non-stressful form of service delivery that, in turn, facilitated reporting of sexual assault, victims' emotional wellbeing and their legal outcomes.

> "I think the number-one aspect [of the new model] is that it is housed away from the police station. That's probably one of the biggest barriers to people reporting these types of offences – the fact that they need to go to a police station with other people around and talk about something that's very personal and sensitive to them and at times traumatic. The environment here [at the MDC] is very non-threatening and non-judgemental as they're not fronting up with uniforms and cameras everywhere. I never really thought [when working in the old model] that having to go to a police station was a barrier for victims, but I can really see that now. [MDCs] are much more conducive to people reporting these types of offences. Because we're away from the police station, it just takes away one of their concerns immediately." (Police member – Pilot site)

> "There have been a number of times here [at the MDC] where someone would not have reported if they had to go to a police station. Even though we could ring in advance and arrange an appointment time, the client would know they've got to walk in that front door. The police station is confronting – it's not an easy place to walk into. Whatever the police think, it's distinctly unfriendly. There's usually no-one at that front desk ever – you have to ring the bell and then they come out, it's likely to be a young copper on duty who has no knowledge of who you are and why you're there. It takes a lot of courage to come forward but [going to a police station] makes it that much harder." (Counsellor – Pilot site)

> "In country environments where you're policing in a 'gold fish bowl', so to speak, there's increased risk of word about the case getting around (due to cross-pollination of information) if the investigators are working alongside other members [at a general police unit]. If you keep the [sexual offence] police separate [by locating them at an MDC], there is less chance of leaking to the general community and less likelihood of victims seeing people they know in a non-professional capacity." (Police member – Pilot site)

One forensic medical officer expressed concern that the anonymity of the locally based sexual assault services, while important, may be reduced over time.

In addition to providing a victim-friendly service, SOCIT members commented that being located at an independent service facility positively impacted their productivity by minimising distractions or competing demands that arose from working at a station where police needed to respond to a range of offence types.

> "You've got to be away [from the police station] to do this job. At the police station there's too many distractions. Someone will say, 'We're doing a drug warrant – have

you got a moment to give us a hand?' The next minute you're doing something else. You just won't be able to give the job your 100 per cent attention, which it needs, if you were based at the station." (Police member – Pilot site)

"When historical sex crimes and cases of minor sexual assault are handled by divisions who deal with a range of serious offences, these cases are basically put on the backburner – not because investigators don't want to do them but there are serious crimes occurring day in, day out, that require an urgent response, like search warrants, which can't be put off." (Police member – CIU)

The geographic segregation of the MDCs to police stations and other facilities (e.g., hospitals), however, was also perceived to come at a cost. Several police members were concerned about the risk of fragmentation within the police service, although this risk was minimised (albeit in part) by the continuing need for SOCIT members to attend the police station to interview suspects.

"The only personal concern I have had right from the start about SOCIT members being located elsewhere is the potential disenfranchisement from Victoria Police... We need to remember that SOCIT members are still part of Victoria Police. We've adopted strategies to try to manage this. We have meetings every Monday, which [SOCIT investigators] attend... We still work together on jobs at times and help each other out. I'm probably conscious of the need to keep that interaction going. So far there have been no problems." (Police member – Pilot site)

"I don't want to lose contact with the other [police] members that I work with and this tends to happen a bit. It's like you need a building that can have two different doors...one for the offenders and members at the police station and the other where CASA, SOCIT and DHS can enter with the victims. It's important for me as a police person to keep in contact with others at the station... I need to try to go there more often and call in on the CIU and the SOCAU and say, 'G'day.'... I miss the interaction with them. Maybe it's just a personal thing." (Police member – Pilot site)

Further, forensic medical officers associated with the metropolitan site held that the quality of their service is compromised if it cannot be offered on the campus or in the vicinity of a hospital or major health service site. Whilst the pilot site locations are set up with appropriate facilities to enable FMEs to be conducted on-site, medical professionals who service the metropolitan site expressed concerns about lack of medical management on-site and necessary restrictions on the functions performed at MDCs (e.g., dispensing of medications, the lack of immediate access to a hospital

including an Emergency Department and other acute medical services). These professionals did not dispute the importance of minimising the time taken for victims to access services (which occurs when all facilities are located at the same service site). Rather, they felt that the need to eliminate travel did not outweigh the need to optimise expert medical service delivery.

> "We do have some reservations about victims, especially in that early acute phase, being seen off campus from a hospital because they're not attached to medical facilities… The typical examples that we would come across are people who are quite drug affected and just lying asleep on a couch and they're actually pretty unconscious and shouldn't be at all in any kind of unit without a medical facility. Some other victims aren't always forthright with what's going on with their bodies: bleeding, for example. They may have been strangled but not know that their airways are slowly occluding, their voice is changing and they're having difficulty swallowing. Those are all the signs for us to quickly get them help. Often people could have their behaviours put down to drugs and alcohol or psychiatric disorders. I just think there are quite large safety issues and concerns, physically and psychiatrically, for the victims and also the people who attend the units." (Forensic Medical Officer)

> "We need to further explore whether the medical people actually sit in this unit or not… I think everyone would agree that if you could find something which balances the ability to provide a service that's of use and ease to somebody with the expertise and the specialist nature of the work, and resources, and location, etcetera, then we're on to something. For us, it's about finding that balance." (Forensic Medical Officer)

The other issue raised by medical practitioners who serviced the metropolitan region was that providing a medical response at the independent service site significantly reduces the pool of available medical practitioners who are willing and able to offer this service. Recruitment of medical practitioners is not an easy pursuit because of the unfavourable work conditions (e.g., night-time examinations, attendance at court and the demanding nature of the work). Further, these professionals reported that there were ensuing occupational health and safety concerns for medical practitioners who were required to travel to different service sites across the ever-expanding Metropolitan Melbourne region.

> "The location provides huge problems because we're extended to our maximum and now we're asking medical practitioners to drive from one end of town to another…and

with that comes a lot of occupational health and safety issues for us… And most people [medical practitioners] have another job…This is like an extra little niche that they work… So it's about drumming up the interest… It's not purely a monetary issue… There's a lot to the job that people don't like…court appearances, disruption with daytime work. Mostly they [medical practitioners] do this work for the good of the community." (Forensic Medical Officer)

In contrast, several police professionals disagreed that immediate access to a

hospital and staff recruitment issues provided sufficient justification for asking victims

to drive to a separate service centre to receive their medical examination, especially

immediately after the incident, which is a period of heightened stress for victims.

Collectively, these professionals reasoned that: (a) the majority of victims who present

to the MDCs do not actually require emergency medical facilities and, if they did, they

could be immediately transferred to hospital, (b) no complications have arisen from the

provision of on-site medicals at the regional pilot site and (c) shortage of medical staff

could be accommodated by recruiting the assistance of specially trained nurses.

"One of the concerns is whether they [forensic medical officers] can actually provide appropriate levels of care because they don't have access to emergency staff and hospitals. Our answer to that is, if it's a medical emergency, they [the victims] go to hospital. There's no argument about that. But the evidence is that for most of the people who come and see us it's not a medical emergency. They're not about to go into anaphylactic shock or have a heart failure or whatever… It's fine to have your centre of expertise but that doesn't mean you can't deliver services in a devolved way. We're not talking about necessarily having forensic medical people embedded in the centres full time, but it's the capacity to come there and provide the service within a specified period of time." (Police senior management)

"How can you have a truly state-of-the-art multidisciplinary centre where you have child protection workers, specialised child abuse police investigators and counsellors, and then say, 'Oh, sorry mum and dad, now you have to bundle the kid in the car and drive 40 minutes to the nearest facility,' while they've got grandma or whoever looking after the other three kids back at home. In my view, we can't just bury our head in the sand and say, 'We can't do it.' If at the end of the day we can't provide the level of service we require involving VIFM, then we need to look at other options, whether that be expansion of the role of the forensic nurse network or whatever." (Police member – Pilot site)

"I don't see nurses' inability to prescribe medication as a major problem in using them [at the MDCs]. Postinal [the 'morning after' contraception pill] can be bought over the counter and that's the main one we give immediately. The incidence of STDs after sexual assault in this state is very low – three to five per cent – and the number of times I have to prescribe STD prophylaxis is fairly small

in one year. They could always have some doctor give them medication the next day. Most of the medications don't have to be given immediately." (Forensic Medical Officer)

### 3.1.3 Increased specialisation of police

The high level of specialisation of the SOCIT members was considered by stakeholders to be a critical feature of the new model of service delivery, receiving support from all of the stakeholder groups. As mentioned in the introduction, SOCIT members conduct interviews and criminal investigations as well as provide victim support, which represents a unification of the roles traditionally carried out by SOCAU members and CIU detectives. Further, unlike members of the CIU, SOCIT members focus solely on sexual offences. The benefits of the combined role and specialisation of SOCIT members were identified by numerous stakeholders, including police members at both pilot and comparison sites, members of the CIU (who recognised that sexual abuse investigation was particularly resource intensive), members of the OPP and police who had direct experience of 'specialised' service delivery in relation to other offence types such as armed robbery.

Overall, the perceived benefits of the SOCIT member profile were threefold. First, the model provided a more *streamlined response* to victims of sexual assault because victims only needed to liaise with one police person throughout the investigation. Having only one investigator responsible for the case was perceived to provide greater continuity of care, to reduce the need for victims to repeat their story to multiple professionals and to ensure that victims and related professionals were well informed about the status of the case and the effort invested in the victim's care. One police stakeholder from a pilot site felt that when victims were well informed during the investigation process, they became more accepting of the advice provided by SOCIT investigators even if such advice was contrary to their expectations or desires. Other

stakeholders emphasised that the more streamlined response maximised victim

wellbeing and reduced loss or contamination of evidence.[7]

> "I think it's just the general understanding of the public that if you report sexual assault to police you have to tell your story on numerous occasions. But that's one of the advantages of the way it is now. We can say, 'If you report to police then the chances are that the police officer you tell your story to today will be the one that follows it all the way through.'" (Counsellor – Pilot site)

> "The outcome at court for victims isn't as important as being treated with respect and dignity by people in authority. But with the current system what quite often happens is that the SOCAU member does a great job initially to instil confidence in the victim, but then the investigation goes to a different area and [the victim gets] very little follow up or assistance. The continuity of that service is lost and subsequently confidence in the victim is diminished." (Police member – Comparison site)

> "You lose evidence along the way [with the old system] because people get sick of telling the same story. It's like if I tell you something and you've got to tell a chain of people – by the time it gets to the end person, it's a different story... However, if you're the investigator *and* the one who talks to them [victims], there's no handballing of information and responsibilities. You know what's got to be done and how to do it... and at the end of the day, there's no one else to blame if you didn't ask the right questions." (Police investigator – Pilot site)

> "The advantage of investigating the *same* type of crime is that you can say, 'Gee, that one [case] is extremely similar to the offence that happened last week,' and this prompts you to following up and find out that it's the same guy. When there are so many different crimes and offences to monitor you can't see the wood for the trees. Also, loss of information is inevitable when you rely on a system where others, for example, SOCAU members, have to hand over cases to investigators." (Police investigator – CIU)

The inferences made by the abovementioned stakeholders about the benefit of a

streamlined response on victim wellbeing were consistent with a case described by a

CASA worker at a pilot site. This counsellor spoke about a client of Indigenous

background who was sexually abused in her twenties and was again reoffended against

in her forties, after which she attended the pilot MDC site. Apparently this victim

reported to the CASA worker that the quality of care and prioritisation of her case was

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[7] Although contamination of evidence is a risk with all offence categories, it is particularly problematic in sexual offences, where the victim's statement is usually the only available evidence.

markedly improved in the new system due to the police's combined investigator–victim-support role.

The second advantage of the combined SOCAU-CIU role is that SOCIT members produce better quality briefs of evidence via greater appreciation of the elements that need to be covered in the interview and better understanding (through face-to-face contact) of the victims' experiences and difficulties in reporting. This advantage was not expressed by all stakeholders. Indeed, some police members speculated that specialisation of police might make police members too insular, and that conducting investigations in an objective or impartial manner might be harder due to officers becoming 'emotionally involved' in cases. However, this speculation was not supported by SOCIT members, who reported that having personal knowledge of what the victim had experienced was a distinct advantage compared to merely reading a statement taken by someone else. Further, members of Victoria Police responsible for authorising briefs (e.g., local crime managers) and members of the OPP who regularly assess briefs prepared by SOCIT investigators did not support speculation about a decreased quality in investigations. Collectively, these stakeholders held that briefs were of a consistently higher standard compared to those received prior to the implementation of the SOCIT model, and that the charges proposed by SOCIT investigators were less likely to be overturned or challenged.

> "The briefs [of SOCITs] are definitely better. They tend to be smaller. They tend not to subpoena information that's irrelevant. The charges are more likely to be correct because they know what they are looking for. They're more familiar with the law. They are more forensic in their approach to the investigation. Specialisation clearly leads to better outcomes. A significant aspect is that now you have investigators who are actually doing the record of interview and that is a huge shift… Because they have conducted both [the interview and investigation] they are more in tune as to what the evidence is." (Prosecutor)

> "It's easy for me to make a decision when they [briefs of evidence] come to me. They are spot on. I've only ever sent one back for them [SOCIT investigators] to get something else that I thought was needed… I've come from an area where some of the briefs were lacking badly. Now they're just great." (Police senior management)

The final reported advantage of combining the SOCAU and CIU role relates to a reduction in the number of inappropriate requests from police members for advice from members of the OPP (i.e., advice related to operational and investigative decisions that the OPP should not be privy to). Importantly, there was recognition by the OPP that SOCIT members are far less likely than other police members to seek such operationally based advice.

> "One of the things I've been doing for a number of years is documenting what we call 'advices', written and oral advices... And they're often in relation to operational investigative decisions and that's just not our function... It puts us in a very difficult position sometimes as prosecutors because we should not be privy to the investigative decision-making process which goes into the brief of evidence...And that's where I think the SOCITs get it right more. You don't get that degree of request for assistance on an operational basis because they're more specialised. They're going to be making their own investigative decisions and they're not relying so heavily on us to make some of the tough decisions. With the SOCITs, we've had a lesser degree of involvement in the investigative process, which is a good thing because it means they're getting it right." (Prosecutor)

Importantly, the apparent reduction in police members seeking advice from prosecutors about operational issues was not associated with poorer collaboration with prosecutors in general. Indeed, some members of the OPP reported that SOCIT members appeared *more* willing to consult with their agency (at an earlier stage) about the most suitable charge, which is entirely appropriate and saves a lot of time down the track. Further, while the number of Director of Public Prosecutions (DPP) reviews[8] had increased in recent times, few of these involved SOCIT investigators. According to members of the OPP, this finding provides added support for the assertion that there is better management of victims by SOCIT investigators.

> "In the past there has often been a breakdown of communication between Victoria Police and the complainant and that sometimes leads to a review being sought. But there's been only one DPP review involving a SOCIT member that I can remember. That in itself reflects better management of victims." (Prosecutor)

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[8] A DPP review is a formal review process whereby victims have the right to appeal the decision of Victoria Police to not authorise a case for criminal prosecution.

Collectively, the three abovementioned benefits of the combined SOCIT-CIU role were perceived to increase victim reporting and decrease the delay between the initial complaint and charge compared to those investigations conducted in the original system. A quicker process was seen to improve victim wellbeing and also benefit prosecution.

> "One thing that is very noticeable is that the delay between complaint and charge is enormous with sex offences. I did a snapshot over February and March... I tried to identify cases where there was a period of greater than six months between complaint and charge. Only one came from the SOCIT and that was because they inherited the file. This in itself is another important indicator of success because delay hurts the prosecution of sex offences. There's absolutely no doubt they have reduced delays in terms of making a decision whether to proceed or not... They don't sit on their cases, they move forward." (OPP)

### 3.1.4 Strong organisational commitment and support

The organisational support of Victoria Police and other agencies located at the MDCs was perceived by stakeholders to be integral in realising the new model's potential to improve service delivery to victims of sexual assault. In particular, many police professionals described the SOCIT investigators as being in a privileged position, in the sense that, for the first time, they are truly being given the time, resources[9] and professional development to investigate sexual assault cases properly. In return for this investment, the professionals felt they provided unprecedented commitment to the model and enhanced the quality and efficiency of investigations.

> "It's a lot better service and the reason why it's so much better is that there's resources dedicated specifically to these types of investigations. They've got access to training and feedback on their interviews, they've got adequate vehicles, they've got investigators." (Police member – CIU)

> "I've had [trainer] sit in on a couple of witness statements and he gives you some good feedback, instantaneous feedback, as opposed to just theoretical-based training. The fact that I can run things past [the trainer] when needed is fantastic. That's a really big improvement." (Police member – Pilot site)

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[9] One exception to this was a complaint regarding the shortages of computers at the metropolitan site.

Improved resourcing at the pilot sites, however, should not be taken to mean that the current level of resourcing is adequate. The police managers at both pilot sites gave the impression that they were just 'keeping afloat'. Increased resourcing was considered essential in future workload models if the current level of service were to continue. Increases in workloads since the commencement of the trial were attributed to: (a) increases in victim reporting, (b) SOCITs' role as managers of the Sex Offenders Register[10], which is continually expanding in size, and (c) the demands of court appearances on SOCIT investigators, whose initial cases are only just starting to appear in court. Further, maintenance of the various data bases used by Victoria Police for the purpose of evaluating the reforms was a cumbersome task. Apparently, these factors had not been included in the original workload model.

> "We're just coming into trials now with matters that initially started when the SOCIT began about 18 months ago... At times we've been very close to having to hand over some work. It's a significant issue and I think, down the track, staffing has definitely got to be addressed. Once you get into the court process, you can lose a member for a week at a time, which puts more pressure on the rest of the Unit. I'm finding as a manager that I'm basically just performing the role of another investigator because of the number of jobs. I can see that's only going to build up before we get to the end of the pilot project." (Police member – Pilot site)

> "SOCITs have taken on the sex offenders register which is significant in terms of workload. The numbers are climbing at about 20 per cent a year. So it's getting to the stage where they [the investigators] just can't handle any more of them." (Police member – Pilot site)

## 3.2 Concerns or factors to consider in a roll out of the pilot program

As evident in the previous section, there was widespread 'in-principle' support for the reforms. Indeed, no stakeholder implied that Victoria Police should revert back to the system of responding to sexual offences that is still in operation at the non-pilot sites. However, despite their support for the reforms, there was considerable apprehension,

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[10] The Sex Offenders Registration Act 2004 was introduced to improve the long-term monitoring of convicted sexual offenders whilst they live in the community. The Register is managed at the state or territory level by relevant police organisations.

anxiety and concern among the stakeholders about how a roll out would be achieved, and whether the initial benefits of the reforms could be sustained long term on a broad scale. Some stakeholders (e.g., members of the OPP) expressed the need for a phased roll out due to: (a) the relatively short time frame in which the pilot program had been operating, (b) the largely anecdotal evaluative evidence available at this stage and (c) the fact that there were several factors that could potentially undermine the effectiveness of a roll out. They suggested implementing a few more MDCs in high demand areas and evaluating their impact (e.g., conducting a risk assessment) as new sites were introduced.

Concerns of stakeholders included sufficiency of future resourcing and staff numbers to fill the SOCIT positions. In addition, stakeholders raised concerns about the geographic location and design of future MDCs, the case criteria of SOCIT members and the degree to which the current strong management and collaboration between service providers would be maintained on a broader scale. The purpose of this section of the report is to elaborate on each of these concerns.

### 3.2.1 Adequate resourcing

The most salient concern of the stakeholders regarding the sustainability of a roll out of the SOCIT-MDC model across Victoria was funding. This issue was raised by a range of service providers but particularly senior police members who were responsible for budgets and allocation of resources. These persons were aware of how resource-intensive the pilot program had been (in terms of both infrastructure and staffing). Further, they were aware that the source of funding for the pilot project was an external (time-limited) project grant and that the workload of SOCITs was continually growing.

> "I think [the SOCIT model] is the way to go but I'm not sure how we are going to resource it without additional funding by the government, especially given the current economic conditions. We'd be lucky to keep the budgets we currently have. Do we change how they're going to do their jobs? Do we limit what they

do? Do we focus it more? I don't know the answer to these questions. Just *how* we're going do it I'm not sure." (Police member – Pilot site)

"The biggest hassle is money – it's got to come from somewhere. There needs to be rented accommodation across the state, additional cars, staff on call every night, training… That's money all currently provided for out of the pilot not our operational budget. If we decide, 'Yes, this is what we're going to do,' then all of a sudden all that money is going to have to come out of our operating budget." (Police senior management – Pilot site)

Police stakeholders in remote areas were concerned that if population determined the number and location of SOCITs then a tiered model of service delivery would result that would disadvantage persons in remote areas. Police stakeholders in the metropolitan region were most concerned that inadequate resourcing would lead to 'cutting corners' (e.g., eliminating investigative interview training) or staff burnout. Several suggestions were made about ways to cut current costs without a reduction in productivity. These included: (a) the use of unsworn members (who worked at a lower rate of pay) to assist SOCIT investigators with administrative tasks, (b) the provision of an after-hours response service, which was calculated by one SOCIT manager to be more cost-effective than maintaining night-shift staff, and (c) better training of investigators, which maximises work productivity.

### 3.2.2 Selection of SOCIT staff

Stakeholders across all organisations emphasised the critical nature of ensuring appropriate selection of staff for MDCs. Police members, in particular, perceived that not all police were well suited to sexual assault investigation, and that the success of the new model of operation would depend on selecting the right people to fill SOCIT and team manager positions. Appropriate people were perceived as those with a genuine desire to succeed in their roles and the right personal qualities to do so.

"Attracting the right people to this type of investigation is going to be a challenge because the majority of police people don't want to be involved in this type of work. It's so draining and taxing because the outcome for the people reporting the crime is so intertwined with their emotional wellbeing." (Police member – Sex Crimes Squad)

"The success of the model is dependent in large part on the managers and others who are heading it up. If you get the right people in there – people who want to be there and are interested in the work, then it will work. A lot of it has to do with if you get the right people in the right positions." (Prosecutor)

"Picking the people is crucial for this to succeed. Unless you actually have the right personality, the right passion, and belief in dealing with victims it won't work. You need to have people who are compassionate and who can show empathy towards victims as well as being able to investigate." (Police member – Pilot site)

Concern about filling SOCIT positions in a roll out centred on the issue of whether the staff who applied for these positions would have the personal qualities deemed important for building rapport and communicating with victims about sensitive issues (e.g., perseverance, empathy), while also having the skills required to carry out investigations to a high standard (e.g., detective qualification, investigation experience, a proven high standard in the quality of their briefs and an internal desire to investigate sex crimes). Many of the current SOCAU members are part-time female investigators and there was some concern that many of these members would not have the inclination or capacity to complete the time-intensive detective training required to become a SOCIT member.

When considering the attributes of potential SOCIT candidates and the recruitment process, several questions were raised by stakeholders. One question that stakeholders posed to themselves was, "To what degree should SOCAU or CIU experience be prioritised in the selection of individuals?" Overall, most police stakeholders recommended up-skilling persons from SOCAU units.

"I think the emphasis should be more on SOCAU skills first. At the end of the day it doesn't matter how great your evidence is. If that victim hasn't been treated right they're not going to get in the box to give evidence so your case is gone anyway. Anyone can be taught to be an investigator and told what to look for but not everybody has the empathy to be able to speak to the victims." (Police member – Comparison site)

"I'd be focusing on looking at the SOCAU people who have dealt with victims and who are really switched on and ambitious enough to become detectives. I would have a preference for them first rather than go to the detectives and finding out who may be good working with victims because I really think working with

victims is more a natural thing. You can pick up detective skills by learning and reading and practising whereas I really think dealing with people is something *within* you – some people can learn that, some can't." (Police member – Pilot site)

"I had a program in place where I encouraged people from the SOCAU throughout Melbourne and also the rural area to come into the sex crimes squad and work on a three-month secondment or assignment at the squad. I also provided that opportunity to other people from police stations and other criminal investigators. However I found invariably that the people who came from the SOCAU units were my best performers – they had the right personality attributes, skills and ability to perform those tasks. They had the skill set that was required with regard to victim management that enhanced the overall performance of the team they were part of." (Police member – Sex Crimes Squad)

However, a number of senior police managers highlighted the importance of selecting future SOCIT members on ability and merit rather than permitting all SOCAU members to upgrade if they wanted. If people upgraded who were not suited to an investigative role, this would ultimately compromise the specialisation of SOCITs. One non-police stakeholder speculated that people who had long-term experience in sexual assault might not be suited to new roles because they were set in their ways and less receptive to taking on new methods of responding.

Another question raised by stakeholders was – presuming police managers can identify the desirable qualities or experience in potential SOCIT candidates – are there sufficient procedures or tools to detect which individuals have these features? Stakeholders perceived that individuals needed to be able to function well within a team, to be adaptive to new ways of thinking and to be resilient. However, they also perceived that such qualities were difficult to detect in job interviews, especially given restrictions imposed by human resources departments.

"People can change for short periods of time and the wrong people can also behave in a way during the interview to make it appear as though they're the person you want. Therefore, you need to look beyond the way they present and their referee reports to examine the quality of their prior work. What are their verbal communication skills like? Have they done quality investigations in the past?" (Police officer – Pilot site)

"You have to be very careful with the selection process to ensure that [potential candidates] are there for the right reason. There's no easy answer for how you do that.

With the selection process in the Victoria Police, you're pretty well locked in to a certain format and certain questions." (Police senior management)

Some senior managers speculated that the safest option might be to support a 'transition strategy' whereby current SOCAU members should be actively encouraged and supported in upgrading their skills to detective level. However, one risk identified with this model is that some people may choose to elevate their career to detective status for reasons other than a genuine interest in investigative work (e.g., the higher pay scale).

The third question regarding the selection process of SOCIT members related to the issue of staff rotation: should limited tenure be enforced to prevent burnout? Opinions in relation to this issue varied markedly among stakeholders.

> "I just don't think you can stay in any area of policing for too long. If people stay there too long they get affected by staff welfare issues arising from the type of offences they deal with." (Police senior management)

> "This type of investigation is very emotional and taxing. It's important not to place people on the front-line consistently where they just burn out – we need to give them downtime as well." (Police member – Sexual Crimes Squad)

> "Some police have done 20 years responding to sexual assault and still love going into work each day. If someone is very, very good at it and enjoys it, why would you want to lose that expertise?" (Counsellor - Pilot site)

> "I've been doing this work [sexual and physical abuse] for nearly eight years – and I absolutely love doing my job. I get a lot of satisfaction out of what I do. I don't want to go anywhere else. You either love it or hate it. There's no in between with this kind of work." (Police member – Pilot site)

### 3.2.3 Geographic location and building design

Several stakeholders acknowledged that geographic location and building design were important considerations in any roll out of the MDCs. However, opinions varied with regard to what criteria should be considered. Several police professionals suggested that future MDCs should be located in major regional centres, whereas others concluded that placement should be determined by workload analysis and reporting trends rather than divisions/regions. There was some concern from police in regional areas about

whether any roll out of the model should, or could, include their areas due to funding restraints.

> "I can't see a SOCIT being here [rural area], not in my lifetime. It's another pie in the sky which is fine for the city and sometimes your outer-metro area, but when it comes to the country – you can forget about it! The demand is certainly here. It would just be funding issues. We can't get members to fill positions and they won't give us extra members to fill positions so I can't see a SOCIT getting up and running." (Police member – Comparison site)

Apart from the metropolitan Forensic Medical Officers (who emphasised that MDCs should be based on or near major hospital sites), non-police stakeholders did not offer firm suggestions regarding location. They merely highlighted the importance of ongoing and extensive consultation between Victoria Police and other organisations.

With regard to the design of the MDCs, several recommendations were made based on professionals' experiences. Specifically, stakeholders addressed the need for more: accessible secure parking, adequate soundproofing, storage and floor space to allow for growth of staff and for victim-friendly entrances that minimised the police presence.

> "The police are based up the front of the building at our SOCIT and they shouldn't be. They should be at the back. Some clients get a bit freaked out – it's shut off now but it's not the warm, inviting entry counter that it should be. It's high. And in our waiting room there're no windows. I think it would be nice if we had a warm, welcoming waiting room and police were not the first thing you notice when you come into the building." (Counsellor – Pilot site)

> "We've had issues with victims overhearing unrelated calls that CASA people are making in their office. There needs to be better separation between the staff working environment and public space. A lot of our work quite naturally involves us sitting in here talking about penises and vaginas, and people coming here don't necessarily want to hear us talking about other people's penises and vaginas. All the lessons that we've learnt here need to be incorporated into the design of future sites." (Police member – Pilot site)

One police stakeholder suggested that, given the particular needs of the various professional organisations, it would be more cost effective to design and build a

completely new MDC rather than to completely remodel an existing building, which was the case with the current MDCs.

Some staff also talked about the need for a work environment that established a compromise between encouraging staff collaboration and addressing issues related to security and confidentiality of data.

> "Some of the sex offences we investigate here at the SOCAU relate to child porn and things like that. We'd have to make sure there was a clean desk policy, secured lockers, that sort of thing where only the police informant and perhaps the detective supervisor could have access to that sort of evidence. We need to consider how we store evidence and who can access the evidence before co-locating with other agencies. I think we need to have completely separate offices in the same building." (Police member – Comparison site)

Another reason for segregated work areas related to the different cultures, ways of coping and personalities of members of the agencies. Some professionals felt that having segregated work areas facilitated collaboration because the physical boundaries served as a reminder of professionals' distinct roles and expertise and also provided professionals from the same organisation with a place to retreat for debrief sessions when needed.

### 3.2.4 Case criteria of SOCITs

As outlined in the introduction, SOCITs under the new model were responsible for investigating all penetrative sexual offences, including those committed against adults and children. Other sexual offences (e.g., indecent assault) as well as child physical abuse and neglect matters were still being investigated by SOCAUs across the state. With regards to the delineation of cases in a potential roll out, there was much consideration in the interviews about whether the SOCAUs should be disbanded or the current demarcation of case files should be retained (in which case the function of SOCAUs would continue to be maintained across the state). If the SOCAUs were

disbanded, then all offences of a sexual nature (involving both children and adults) would come under the purview of SOCITs.

Discussions about the case criteria of SOCITs were confined to the police and members of the OPP. However, opinions varied markedly. The argument in favour of continuing SOCAUs is that these teams deal with a range of offences not related to sexual abuse (e.g., family violence, physical abuse of children, neglect). Several police stakeholders were concerned that specialisation would suffer if the scope of SOCIT was expanded and that current SOCAU members had considerable expertise that might be lost in the event of a roll out. Further, several stakeholders felt that the police organisation had an obligation not to abandon those SOCAU members who had served victims of sexual assault long term and wanted to remain in this area but did not want to upgrade to the new SOCIT model.

> "The biggest difficulty is that you have members currently at SOCAUs who have extensive amounts of experience in what they do. Are you going to cut that off and lose that skill overnight and have them doing tasks where their skills aren't going to be utilised? I know there are some SOCAU members out there who won't be happy to cut loose and who don't have the investigative skills currently or the aptitude to want to undertake further studies or development." (Member – SOCIT Project Team)

The argument against retaining SOCAUs is that it would undermine the aims that justified the reforms (i.e., increased specialisation and improved service delivery for *all* victims of sexual assault). Several members of the OPP and SOCITs, for example, felt that continued delineation of cases according to 'seriousness' was inappropriate because all victims of sexual assault should be afforded the same level (quality) of service delivery irrespective of whether sexual penetration occurred or not. They pointed out that non-penetrative offences can be just as traumatic for victims as penetrative offences and it is not often clear what offence occurred until after the investigation has commenced.

> "The ability to investigate a physical assault requires the same principles of investigation as a sexual assault. If you can do a sexual assault, you can do a physical, and vice-versa. It wouldn't be good to separate the two offences because you'd have double the personnel doing the same kind of jobs. We need the same level of service across the board." (Police member – Pilot site)

Several suggestions were offered about ways to retain the SOCAUs while also maintaining a high standard of service delivery for all victims of assault. Several stakeholders suggested setting up a bank or database where SOCAU members' skills can be utilised for forensic interviews or training. At least one professional suggested developing modified (i.e., more focused and less intensive) detective training specifically tailored for SOCIT roles, to make the transition from SOCAU to SOCIT easier to achieve. Another professional suggested having SOCAUs working alongside SOCITs (in a co-located fashion with the other services) to provide an investigative support role.

### 3.2.5 Maintaining strong collaborations between service providers

Stakeholders emphasised that success of co-located service delivery is dependent on the continuing goodwill and commitment of participating agencies, and that without continued investment in maintaining good relationships across and within industry sectors the system was not likely to function well in the long term. Ongoing consultation and debate was perceived to be the key element for successful collaboration. Although most stakeholders acknowledged that co-located service delivery had increased collaboration between professionals, all recognised that co-location in itself was not synonymous with good collaboration and that continued investment in building and maintaining relationships was required.

> "In a purely physical sense, co-location is easy to achieve. You just build a house with four walls and a roof and put everyone in it. However, bringing a number of professional groups together to function in a coordinated kind of way is not so easy. Problems are inevitable when you have people from very different backgrounds under the one roof. Matters of communication and integration continually arise that need to be

dealt with – but, yes, they can be overcome. It's a work in progress. We're all still learning about working together and must continue to improve on it, but I reckon we've come an enormously long way." (Police member – Pilot site)

Several stakeholders felt that sufficient inter-agency cohesiveness had not been achieved by co-location. Conflicts were reported to arise from: (a) professionals perceiving that their own perspectives were being devalued, (b) insufficient communication between professionals about the process and outcome of investigations, (c) different perspectives among professionals regarding the credibility of a particular witness and (d) a perception among certain individuals that others were trying to take control of the process and restricting people from fulfilling their roles correctly. These professionals emphasised the need for more regular team meeting, informal liaison and case discussions between professionals across organisations. One counsellor commented that although formal case conferencing and team-building sessions had been scheduled at the metropolitan site, these meetings were too infrequent to be of any long-term benefit. Another counsellor complained that the importance of 'informal socialisation' or exchange had been underestimated by SOCIT members, which contributed to reduced staff morale at the metropolitan pilot site.

> "Apart from discussing specific cases, we don't have a formal way of discussing the system generally – about the commonality of our purpose and how our cultural differences impact the way we work. I think we have two very different cultures here – our culture is that we believe the victim's allegation is true. That's what you have to do to address the trauma. Whereas I think their [police] perspective is different – they're on the lookout for false reporting." (Counsellor – Pilot site)

> "We try to hold regular meetings but more often than not the police don't attend – they don't seem to see the point of the meetings. These meetings should be held irrespective of whether there are any case issues to talk about. There's no point waiting till you've got a crisis. Have a regular time and do it quickly. If there's not much to do, we'll all be grateful to get out in the hour or half hour. But you just need the time." (CASA management)

Interestingly, however, opinions about whether current collaboration was adequate varied markedly among professionals at the metropolitan pilot site. While some professionals commented that informal socialisation between different professionals (e.g., shared coffee

breaks) was an asset of being co-located, others felt that requests to engage informally with persons from different organisations had not been accepted or reciprocated. Some professionals suggested that collaboration between professionals would be facilitated if staff had a formal system for debriefing when interpersonal conflicts between different professionals arose.

Tensions arising from communication issues were not contained to 'front-line' workers. Several professionals felt that there had been insufficient levels of communication from managers, particularly during the stage of initial implementation. Tensions seemed to arise from differences in expectations regarding the role of managers and the nature and level of their involvement and feedback.

> "I really think that management higher up should have painted the picture a bit more clearly to people. [Project management] should have run regular meetings when we first started." (Police member – Pilot site)

> "There were never any processes in place for case coordination and management. These probably sound like little nitpicking things but, from a working point of view, the wheel should have been greased properly to make the processes work smoothly for everybody... It's almost like everybody was plonked here, boom, and then nothing." (Police member – Pilot site)

### 3.2.6 Strong management

The final aspect that professionals mentioned as being critical to the success of the reforms was strong strategic and centralised management to ensure consistency and high-quality service delivery. The need for strong management was reported by professionals from all organisations, but particularly professionals from Victoria Police, who emphasised the important role of management in maintaining high staff morale and productivity, and attracting competitive SOCIT applicants. Some police as well as non-police professionals expressed concern that there had been inadequate consultation and formal direction during the initial design and implementation of the new model of service delivery. Further, one police member complained that inconsistencies in commitment between local managers had been a weakness of the traditional SOCAU

system. This person explained that although SOCACO had provided guidance in terms of policy, training and procedure, they had no influence over what local management did, which led to a disparate quality of service delivery across the state. Some professionals suggested that corporate management needed to take a strong role in ensuring that proposed reforms were actually implemented in the manner expected and that the public was made aware of their organisations' efforts at improving services.

> "There needs to be some mechanism whereby if the organisation says, 'This is what we're going to do,' that it is enforced across the board and local management don't have the option to say, 'Nope, we're not doing it.' We saw this inconsistency in the SOCAUs – there were some local managers who understand, appreciate and value the work that SOCAUs do and then there are others who don't understand or value it. The organisation can have all the broadest aims in the world but if it's left to local management to influence how and if those services are delivered then you may as well not bother. It's just doomed to fail, in my view." (Police member – Pilot site)

## 4.0 Discussion

Our overriding impression from analysing the stakeholder interviews, and particularly those with SOCIT members, is that the SOCIT and MDC reforms have corresponded with a major shift in police attitudes towards victims of sexual assault. This conclusion is based on our comparison of the current findings and those of the VLRC (2004) evaluation. While the VLRC revealed widespread attitudes of scepticism, suspicion and disbelief among detectives when responding to allegations of sexual assault, the themes arising from our interviews with SOCIT members (like those of other stakeholders) all centred on the importance of providing victims with dignity and respect. Stakeholders emphasised the importance of providing a non-stigmatizing, non-intimidating environment and a specialised service that is cognisant of the complexities of sexual assault and its impact on victims. Given that investigators' attitudes play such a critical role in underpinning victims' engagement with the system and attrition of cases, the importance of

this finding cannot be overstated (Powell, Wright & Clarke, in press; Statewide Steering Committee to Reduce Sexual Assault, 2006).

A strong orientation toward prioritisation of sexual assault investigation was reflected not only in the way SOCIT officers referred to victims' needs and challenges but also the way they perceived their role within the organisation, the quality of their work and their relationship with other service providers. In the years leading up to these reforms, sexual assault was perceived as one of the most undervalued areas of work within Victoria Police, with poor morale and organisational support being two of the most common complaints of SOCAU members about the system in which they worked (Aarons, Powell, & Browne, 2004; Wright & Powell, 2006a; 2006b; Wright, Powell, & Ridge, 2006; Powell & Wright, 2008). Further, collaboration with other stakeholders (especially DHS) has historically been one of the most stressful aspects of working in the area of police investigation of sexual assault (Wright et al., 2006). In contrast to this backdrop, all of the SOCIT members felt they were in a privileged position to be specialising in this field of investigation, and that their commitment, diligence and the quality of their briefs were unprecedented as a consequence. Further, SOCIT members spoke about their relationships with other service providers (e.g., DHS, CASA, OPP) in a consistently positive light and reported that inter-agency collaboration had markedly improved. These outcomes were attributed to the following factors: better resourcing and specialist training, co-location with other service providers at an independent service site and the ability to focus solely on sex offences. Collectively, these factors were perceived to facilitate the development of expertise, ease of communication and elimination of unnecessary workplace distractions.

So what about the views of other stakeholders? Importantly, SOCIT officers' perceptions were relatively consistent with others' reports about the way these officers respond to victims, their engagement with other stakeholders and the quality of their investigations. We interviewed a very large and heterogeneous group of stakeholders for this

evaluation and the overwhelming majority of people we spoke to perceived that SOCIT detectives were providing expert, victim friendly and rapid service delivery under the new model, and that collaboration was significantly improved. Specifically, members of the OPP reported observations attesting to better quality briefs of evidence, greater police knowledge and expertise, better legal outcomes, shorter investigation/charge times and better liaison (where appropriate) between police and prosecutors to ensure appropriate legal advice was sought. DHS workers (solely located at the metropolitan site) highlighted better collaboration and reduced response and investigation times. CASA workers at both pilot sites highlighted greater police prioritisation of casework, increased inter-agency referral and greater responsiveness of police to victims' needs and concerns. The majority of CASA workers also suggested that the model had improved their relationships with police.

Collectively, the abovementioned findings, coupled with the apparent shift in police attitudes toward victims, suggest that the SOCIT-MDC reforms have contributed to a major cultural shift; a shift that the VLRC stated would be necessary to improve sexual offences law and procedure in this state (VLRC, 2004). While our findings are solely based on stakeholders' perceptions and could reflect (at least in part) stakeholders' knowledge of the philosophy that guided the development of the reforms (Victoria Police, 2005), the themes are robust (i.e., consistent across *all* stakeholder groups) and are similar to the findings of evaluations of MDC models overseas (e.g., Lovett, Regan, & Kelly, 2004; Walsh, Lippert, Cross, Maurice, & Davison, 2008; Zweig & Burt, 2003). These factors, along with the marked contrast in findings to previous interviews with Victorian stakeholders, strengthen the validity of our conclusion regarding a cultural shift. To provide further potential support for this conclusion, we are currently in the process of eliciting victims' perceptions of the system and analysing hard outcome indicators related to the SOCIT and control sites (e.g., number of complaint withdrawals, legitimacy of decisions not to authorise cases).

In addition to determining the impact of the current reforms, the current research aimed to identify key issues for Victoria Police to consider, which may assist in maximising the success of the model in the long term. Here the conclusions are necessarily tentative in nature. While the stakeholders vocalised many concerns, opinions differed across individuals. Little prior research has compared the relative effectiveness of specific components of co-located and specialised service delivery. Further, it needs to be considered that the system we evaluated was, and still is, continually evolving. Collectively, these factors make it difficult to draw conclusions about the long-term impact of any 'perceived' weaknesses in the system and the way in which they could or should be addressed in a roll out of the model.

Despite the limitations of this evaluation, however, we were able to identify six areas that pose ongoing challenges for the organisation which should be addressed to ensure the success of the model in the long term. Two of the challenges were clearly described by the stakeholders and are presented in the results section of this report; we only briefly elaborate on them here. The first concern relates to limitations in the design and location of the current MDCs, which need to be considered in any future construction or remodelling of existing centres. Specifically, improvements are warranted in relation to: the positioning of staff (particularly the location of police members within centres), the proximity of the MDCs to other services, the accessibility of parking and floor space to allow for growth of staff, and adequacy of soundproofing.

A related but independent point with regard to the location of the MDCs is accessibility of victims to major medical centres and emergency services; this was contentious issue among stakeholders. Specifically, VIFM members in the metropolitan region concluded that the provision of a medical response is not feasible unless the MDCs are located on or near hospital sites. The SOCIT Project team is aware of this concern and the Department of Justice is currently working with all critical stakeholders (police, DHS,

CASA and VIFM) to develop a framework to deliver an integrated crisis response service to victims of sexual assault (personal communication, Tania Farha, May 7, 2009).

Second, stakeholders identified the need to factor increasing court time and administrative tasks into future SOCIT staffing and resource models. One administrative task that poses a particular risk to the SOCIT project is the Sex Offenders Register (SOR). Administration of the SOR requires considerable expertise and thus its allocation to the SOCITs is justified. However, the number of offenders on this register is increasing at a rate of around 20 per cent per year (personal communication, Darren Cooper, May 7, 2009). Concerns about the increasing workload imposed by this register are not isolated to Victoria Police. The first author has conducted informal discussions with various Australian police members associated with the register, revealing widespread concern about inadequate resourcing. Specifically, police officers are concerned about the potential risk to the community if a serious offence were to occur by a registered offender who had not been adequately monitored due to inadequate resources and the consequent negative perceptions of the organisation in the media [11].

In addition to the above-mentioned two ongoing challenges, four issues arose in the reports that were not directly identified by stakeholders but evolved from our analysis of the *underlying* themes emerging in the interviews and our consideration of the prior literature. These challenges include the need for: (a) formalised structures and processes to facilitate inter-agency collaboration, (b) improved training in investigative interviewing, (c) a comprehensive ongoing system for objective quality control evaluation and (d) a review of the current procedures for managing work-related stress. In the remainder of this report, we

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[11] Currently, the first author and three experts at Deakin University who specialise in offender reintegration and risk assessment are applying to conduct focus group sessions with police organisations across the country (including Victoria Police). The aim of these focus groups is to better understand the procedures and challenges faced by those who administer the SOR and how these researchers can potentially assist in improving the process (e.g., through the development of better risk assessment tools and interview techniques) so that resources can be more efficiently allocated.

elaborate on these additional four elements with reference to the stakeholder interviews and prior literature.

## 4.1 The need for formalised structures and processes to facilitate inter-agency collaboration

Compromise and collaboration among service providers are the keystones of truly victim-focused, comprehensive and effective systems for responding to sexual assault (Ahrens, Campbell, Wasco, Aponte, Grubstein, & Davidson, 2000). Interdisciplinary collaboration is particularly relevant for police because evidence collated during an investigation of sexual assault is usually derived from a wide variety of sources. As acknowledged by the current stakeholders, however, good collaboration between professionals is not a direct consequence of working under the same roof. Co-location can only address those barriers to collaboration that normally arise from the existence of parallel independent service sites (e.g., increased travel time, lower levels of familiarity between professionals). Indeed, despite the fact that co-location of services at the MDCs facilitated collaboration related to case management, conflicts and tensions still arose between professionals. Such tensions were particularly evident between the counsellors and police; however they also arose between police professionals (e.g., members of SOCITs and senior management). Tensions tended to arise from different expectations regarding people's roles, ideal levels of communication and workload priorities.

Importantly, the stakeholders we interviewed were easily able to identify and express their concerns, and those professionals who were the subject of criticisms seemed aware of the nature of the concerns directed towards them. A weakness of the system, however, is that there was no built-in system by which stakeholders could reach a resolution or compromise regarding differences in expectations or opinion. Some professionals held the view that tension among professionals was an inevitable part of coordinated service provision and that

issues had been dealt with appropriately. Others inferred, however, that formal consideration and proactive (as opposed to reactive) intervention processes were warranted and that if the tensions between professionals were ignored they could potentially undermine the success of the reforms in the long term. Overall, the background literature supports the latter view: the prior research has clearly demonstrated that a highly integrated community culture is critical for sustaining multi-agency participation and professional wellbeing, commitment and engagement (Robinson, Hudson, & Brookman, 2008; Wright et al., 2006). Thus, without a more formalised and proactive approach to enhancing professional collaboration, there is the risk of increasing fragmentation of services and poor stakeholder morale, which could negatively impact victim satisfaction and service quality in the long term.

Our recommendation for introducing formalised intervention to minimise professional tensions should not be taken to mean that the level of collaboration between professionals at the MDCs was poor. To the contrary, despite that no formal mechanism or instruction was provided to help stakeholders adjust to the new way of cooperating (as it was agreed to keep the model flexible at the early stages), professionals reported a marked increase in collaboration compared to the old (parallel) system of operating, and complaints about group cohesion were contained to only a proportion of individuals located at one pilot site (Frankston). Further, although a wide range of complaints has reportedly arisen in other jurisdictions incorporating co-located heath service models[12], tensions among the current stakeholders were relatively confined in scope. They related primarily to the diverse agency cultures, and breakdowns in communication – problems which can be directly targeted in intervention programs (McCallin, 2001). Collectively, the findings provide good reason to conclude that the professionals at the MDCs are functioning relatively well under co-

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[12] Challenges reported in prior overseas research include competitiveness between professionals, withdrawal of agency participation, overstepping of duties and inappropriate or insufficient referrals between agencies (Cole & Logan, 2008; Payne, 2007; Robinson et al., 2008; Statewide Steering Committee to Reduce Sexual Assault, 2006).

location and that methods of further enhancing collaboration and conflict resolution can be learned and sustained in the long term.

So what strategies are known to facilitate collaborative relationships in co-located service models? Strategies reported in the literature fall into three broad areas, which are ideally assigned after formal assessment by an expert (e.g., organisational psychologist) specialising in interdisciplinary collaboration. First, experts have emphasised the value of regular inter-agency meetings to establish open lines of communication, to solicit feedback and to enable consistent responses to concerns (McCallin, 2001). The importance of informal as well as formal meetings is highlighted. Informal social gatherings assist the development of collective understanding by getting to know one another in a personal sense which facilitates trust, respect and understanding. Indeed, several stakeholders suggested that familiarity could explain why group cohesion appeared stronger at the regional pilot site. Due to Mildura's relatively small geographic location and lower staff turnover, most of the professionals would have known each other prior to the commencement of the project.

Second, the prior literature has emphasised the value of formal expert mediation and joint training. Such training can assist professionals in obtaining specific skills in conflict prevention and resolution (e.g., open communication, assertiveness, team building) and it can also assist in facilitating acceptance and understanding of professionals' distinct and collective roles, missions, boundaries of expertise and strategies to prevent conflict and subsequent system failure (Bronstein, 2003; Cole & Logan, 2008; McCallin, 2001).

Finally, some experts have highlighted the value of psychometric testing to screen potential job applicants (particularly managers) for skills that facilitate strong collaboration (e.g., problem solving aptitude, tolerance of uncertainty and critical coping skills: McCallin, 2001; Robinson et al., 2008; West & Poulton, 1997). Indeed, strong leadership was perceived by the stakeholders to be critical for driving the success of the project by ensuring staff engagement and commitment towards the new initiatives.

**4.2 The need for improved training in investigative interviewing**

A major area of focus in the interviews with police related to the ongoing role of current SOCAU members in the event of a roll out of the SOCIT model. Opinions varied in relation to this matter. Some police members held that SOCAU members who do not or cannot upgrade to detective status should be retained in their current role in the new model whereas others disagreed. Only some stakeholders expressed the view that SOCAU members should be prioritised in the recruitment of SOCIT positions. Our analysis of stakeholders' views in relation to the fate of SOCAU members was not conducted with the intention of advising how a transition process should take place (if at all) or whether SOCAUs should be retained in some capacity. Such decisions need to be made with careful consideration of a range of organisational and industrial issues to which we and the stakeholders are not privy. Rather, our motivation for analysing perceptions about these issues is that they provide additional insight into officers' underlying *beliefs* about the investigation process and how skills are obtained.

Overall, our discussions with police stakeholders in relation to case criteria and selection of SOCIT staff revealed several myths about the investigation process; myths that are incompatible with the scientific literature and the philosophies that underpinned the reforms. A list of these myths, and references to the research that disputes them, are displayed in Table 2 below. As shown in Table 2, some of the myths conflict with the notions that: (a) all victims of sexual assault are worthy of specialised detective-trained investigators, (b) the victim-support and detective role can be effectively combined without compromising impartiality, (c) behaviours that facilitate rapport with victims and the elicitation of reliable evidence can be learned through training and other workplace experiences, and (d) false reports are difficult to detect. Not all stakeholders believed the myths, but they were widespread. The myths were exhibited by a range of police

Table 2

Examples of myths exhibited in the interviews with police stakeholders

| Myth | Fact |
| --- | --- |
| Combining a victim-support and investigator role compromises one's ability to remain impartial.<br><br>A good relationship with the victim is established through showing empathy and belief in the victims' account. | Good rapport between the victim and investigator is synonymous with good investigation (Powell, Fisher, & Wright, 2005; Read, Powell, Kebbell, & Milne, in press).<br><br>The establishment of a relationship based on trust is achieved by adopting an investigation style that shows the victim that his/her story is being heard, understood and not judged (Powell et al., 2005). |
| SOCAU members who have demonstrated commitment to sexual assault through long-term service in a victim-support role are naturally better at eliciting witness disclosures. | SOCAU members (and any person who receives little ongoing interview practice and feedback) have considerable difficulty eliciting disclosures of abuse from victims (Hughes-Scholes & Powell, 2008; Powell & Hughes-Scholes, in press). |
| Investigators can determine whether the victims' account is false. | False reports are difficult to detect beyond chance, even with sophisticated psychometric measures (Ceci, Loftus, Leichtman, & Bruck, 1994; Vrij, Mann, Kristen, & Fisher, 2007). |
| Ability to support witnesses should be prioritised over good investigation skills when recruiting SOCIT members. | Poor quality victim statements (the main evidence in sexual assault cases) have been the primary concern of prosecutors and other legal professionals (Guadagno, Powell & Wright, 2006;; Powell & Wright, press; VLRC, 2004). |
| Investigator behaviours required for good victim engagement reflect innate personal qualities. | Behaviours valued by victims (e.g., respect, honesty, fairness, patience) can be acquired through human learning principles (e.g., reinforcement, instruction and modelling: Sternberg, Lamb, Hershkowitz, Yudilevitch, Orbach, Esplin, & Hovav, 1997). |
| Cases can be effectively delineated at the outset according to offence type (e.g., physical or sexual abuse).<br><br>Cases can be categorised at the outset according to 'seriousness' of offence (e.g., whether penetration occurred), with more serious cases assigned to better trained investigators. | There is very strong overlap between various maltreatment types (Buckle, Lancaster, Powell, & Higgins, 2005; Higgins, 2004; Higgins & McCabe, 2000)<br><br>The impact of abuse on physical/mental wellbeing cannot be predicted by offence type. Further, full disclosure of an offence is a gradual process, determined in large part by the skill of the investigative interviewer (Pipe, Sternberg, Lamb, Orbach, Stewart, & Esplin, 2007). |

stakeholders, including senior police staff and police members of comparison sites who could potentially be recruited to future SOCITs, as well as multiple SOCIT members.

The belief in these myths provides important feedback to the coordinators of the Field Investigation Course (FIC), Advanced Diploma of Investigation (DTS) and the Video and Audio Taped Evidence (VATE) course. These courses had all been completed by SOCIT members (and many other of the police stakeholders we interviewed) prior to the implementation of this evaluation. We know that at least one of the courses (the VATE course) had focused on instilling the principles reported in the second column of Table 2. Prior evaluations have demonstrated that the ineffectiveness of this and other training courses is that they omit elements that are essential for maintaining performance over time, particularly ongoing practice and feedback (Powell, 2008a; Powell et al., 2005). While there are many factors that shape investigators' knowledge and behaviours, poor transfer of learning from the classroom to the field is the major contributor to poor competency of investigative interviewers (Powell et al., 2005; Smith, Powell, & Lum, 2009).

The SOCIT project team recognise the importance of adhering to scientific principles underlying best practice and the complexity of training needed to facilitate and maintain competent skills in investigation. Two specialists in investigative interviewing (one for suspects and one for witnesses) were appointed to the project with the sole purpose of developing and administering intensive formal and informal training in investigative interviewing to SOCIT members. The fact that the myths were evident among some SOCIT members should not be considered a deficiency of the SOCIT model because the formal training component commenced *after* the interviews for this evaluation were conducted. While anecdotal evidence suggests that the training has been successful in facilitating appropriate knowledge and behaviours, a comprehensive *objective* evaluation of this training is about to be undertaken by the manager of the offender interviewing component. The current findings (demonstrating widespread myths held by the police stakeholders) provide

strong support for the inclusion of these additional specialised training components and the decision of SOCIT project team members to expose the SOCIT training model to rigorous empirical validation.

## 4.3 The need for a comprehensive ongoing system for objective quality control evaluation

Stakeholders' perceptions regarding the strengths and weakness of the SOCIT-MDC system were based largely on personal insights. In some instances, stakeholders did refer to actual data they had been collated (e.g., a DHS and OPP member spoke about recording of response times, and a member of the OPP referred to documentation relating to written and oral advices). However, references to hard indicators were rare. As some stakeholders (e.g., members of the OPP) acknowledged, lack of empirical data related to case outcomes is a weakness of the current system because it potentially impedes effective professional decision making. Interestingly, this conclusion was a core concern of legal stakeholders in the recent Victoria-Police-funded VATE evaluation (Powell & Wright, in press) as well as evaluators of other police models related to sexual assault investigation (e.g., Clarke & Milne, 2001).

Victoria Police cannot be criticised for lack of investment in research to improve its response to victims of assault. To date, the organisation has engaged in more formal research in this area than any other Australian police or human service organisation. For example, Victoria Police is currently in the process of collating data as part of a broader evaluation of the SOCIT-MDC model and the three-year Department of Justice evaluation of the Sexual Assault Reform Initiative. An evaluation of the VATE interview process was completed in 2006 and Victoria Police has contributed both cash and in-kind (salary) costs to 18 major Australian Research Council Linkage grants over the past decade (involving over 20 universities and 100 academics), many of which were aimed at improving responses to, and

prevention of, crimes committed against vulnerable members of the community. One grant in particular is aimed at assisting police to improve responses to adult victims of sexual assault: *Adult Sexual Assault: An Evidence Based Policy and Advocacy Model for Victoria Police.* However, much of the research to date represents a retrospective analysis of certain components of the system. Further, the research is time limited in the sense that data analysis ceases once the projects are completed. We believe there is a need for an *ongoing, built-in* and *comprehensive* evaluation strategy; a system that allows stakeholders to determine at any point in time how well the system is travelling in meeting its objectives and how the processes can be improved.

An ongoing, comprehensive, built-in system of evaluation serves several purposes. First, it enables organisations to verify the precise impact of the model on a variety of outcome measures including prosecution and conviction rates. Most evaluations to date of 'one-stop shop' models have been retrospective, cross-sectional and largely restricted to qualitative interviews with victims and stakeholders or counting the number of persons served (Snell, 2003). Prospective, longitudinal data is essential for examining the efficacy of the system as a whole and for understanding the inter-relationship between various elements and their precise impact on performance measures. In this way, small 'cracks' or deficiencies can be identified in the system before they become insurmountable problems, and the efficacy of new and innovative actions to remedy these problems can be tested. Without ongoing evaluation data, professionals are forced to learn and make decisions through 'trial and error', which is an operationally wasteful process that exacts a heavy toll on professionals and victims (Powell & Wright, 2009).

Second, regular dissemination of evaluation data would help dispel myths that underlie inter-agency tensions. When professionals need to rely heavily on their own experiences and perceptions, potential misunderstandings can arise which exacerbate the level of insularity and conflict between different professional groups (Woody, 2005; Wright

et al., 2006). This issue was highlighted in the recent evaluation of the VATE system, where interviews with stakeholders revealed considerable discrepancies in opinion regarding the role and impact of VATE interviews in the criminal justice system (Powell, 2008b).

Third, ongoing and comprehensive evaluation data enables an accountability structure for benchmarking performance of units and managers, and enables verification of whether procedures are actually being implemented in the manner intended (Pipe et al. 2007). Clear performance objectives provide a strong internal motivator for 'front-line' professionals, and facilitate group cohesion through common goal setting. For senior management, validation of the cost effectiveness of new models of service delivery (compared to traditional models) provides accountability to taxpayers and governments who fund these systems (National Children's Alliance., 2009; Snell, 2003; Taylor et al., 2008).

In sum, Victoria Police is at the forefront of new developments and research in the area of sexual assault investigation. Return on its investments to date could be further enhanced by the development of a system where stakeholders have clear objective performance measures linked to legal outcomes and methods of evaluating these on a regular basis.

## 4.4 The need to review current procedures for managing work-related stress

Sexual assault investigation can be a stressful area of work, and in some cases it can contribute to psychiatric difficulties among professionals (Brown, Fielding, & Grover, 1999; Violanti & Gehrke, 2004). This fact has been highlighted by several common-law psychiatric injury claims made against Australian police organisations for failing to 'take reasonable precautions' to reduce psychiatric injuries among employees exposed to sexual crimes, especially those involving children (e.g., *State of NSW v Seedsman*). Like most areas of policing, sexual abuse investigation is an area that is constantly evolving and exposing new challenges for workers. For example, police investigators are increasingly being

exposed to sexually graphic and violent images involving children, which pose a particular risk to mental wellbeing (see Burns, Morely, Bradshaw, & Domene, 2008). Further, the implementation of the Sex Offenders Register requires police members to develop long-term relationships with offenders post-release from prison. Relationships prior to this registry would not typically have extended beyond the investigative interviewing setting.

The issue of workplace stress was raised by several police stakeholders. The only suggestion put forth by these stakeholders to address this issue was to impose limited tenure on SOCIT staff. We do not agree that maximum tenure is an appropriate course of action purely on psychological grounds. Particularisation of sexual offences is one of the most complex areas of law (Guadagno, Powell, & Wright, 2006) and the elicitation of evidence in these cases (e.g., reliable and detailed witness statements) requires considerable expertise which develops over time with ongoing training (Ericsson & Charness, 1994). Second, there is no empirical evidence involving sexual abuse investigators to suggest a direct association between longevity in the field and stress (Powell & Tomyn, 2009). Indeed, considering the immense passion that some of the long-standing sexual assault investigators we interviewed felt about their work, enforcing maximum tenure against these employees' will could feasibly cause them psychological distress.

Further, the major workplace stressors reported by SOCAU members in the past have primarily related to high workloads and conflicts arising from inter- and intra-agency collaboration rather than the nature of the work per se (Wright et al., 2006). Workload and collaboration are the very issues that have been addressed in the new SOCIT- MDC model, which could explain in part the apparent improvement in morale among SOCIT members compared to those SOCAU members we have interviewed in the past. Indeed, after personality, morale (i.e., a sense of energy and pride in one's work) is the strongest predictor of whether a person will submit stress-related compensation claims and medically uncertified sick leave (Cotton & Hart, 2003). This is another justification for retaining the

new SOCIT-MDC model and for not imposing forced rotation on people who have worked long-term in the field, are coping well and want to continue their specialised role.

A review of the literature indicates other (potentially more effective) options for addressing workplace stress, some or all of which may well be included in Victoria Police's current system of operation. These procedures include: (a) educating investigators about the potential impact of their work so they can make informed and appropriate decisions that will minimise the risk of detrimental psychological outcome (Woody, 2005), (b) educating managers about how to monitor the psychological wellbeing of their staff and facilitate the development of a supportive workplace climate (Cotton & Hart, 2003), (c) initial and ongoing psychometric assessment of the psychological functioning of staff to detect extreme stress symptoms and deficiencies in coping strategies (Kalimo, Pahkin, Mutanen, & Toppinen-Tanner, 2003) and (d) the provision of targeted and structured psychological interventions for investigators and strong incentives to access these services (Cotton & Hart, 2003).

## 4.5 Concluding comment

The central concept underlying the development of the new MDC-SOCIT reforms is a more accessible, efficient, coordinated and user-friendly service delivery. The findings of this evaluation are entirely consistent with this concept. As with any new system, there are opportunities for further improvement, and evaluation data must be collated from numerous sources. The evidence from this evaluation, based on in-depth qualitative interviews with a large and representative sample of stakeholders, suggests that the reforms have corresponded with a major change in police attitudes towards, and marked improvement in the quality of service delivered to, victims of sexual assault.

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