A literature review to support a proposed program evaluation of the North Okanagan Integrated Case Assessment Team, an integrated high-risk domestic violence assessment, response and management team.

Jay Buckner, MPA candidate
School of Public Administration
University of Victoria (Uvic)
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Client: Operations Strategy Branch (OSB), RCMP—Dr. Eli Sopow, Ph.D.; and, North Okanagan (Vernon) Integrated Case Assessment Team (N.O. ICAT)—Ms. Debby Hamilton, Regional Coordinator, Community Coordination for Women’s Safety, Ending Violence Association of British Columbia (EVA BC)

Supervisor: Dr. Catherine Althaus-Kaefer, Ph.D.
School of Public Administration, UVic

Second Reader: Dr. Kimberly Speers, Ph.D.
School of Public Administration, UVic

Chair: Dr. James McDavid, Ph.D.
School of Public Administration, UVic
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EXECUTIVE SUMMARY

INTRODUCTION

Project Conceptualization
During the spring of 2012, I was invited to consider completing a program evaluation of the N.O. ICAT by Ms. Debby Hamilton. I was introduced to Debby through Gail Edinger, also a Regional CCWS Coordinator, who I had met a couple of semesters earlier while doing research for a public policy course. Through Debby and Gail, I met the other founding member of the N.O. ICAT team, Sergeant (Sgt) Robb Daly and the final member of the N.O. ICAT evaluation client team, Ms. Brooke McLardy, Program Coordinator, North Okanagan Transition House.

When this project was first conceptualized, the N.O. ICAT had been functioning for over three years; it is now over four years old. The N.O. ICAT was the first formal, coordinated response to high-risk domestic violence cases in “E” Division. Their goal is to provide a framework for a coordinated and collaborative approach to assess, address and decrease the risk of serious bodily harm or death for victims of intimate partner violence.

Project Formation
The initial invitation to complete a program evaluation was broad with only general assessment parameters and no defined measures. I therefore turned to the literature to identify topics relevant to CCRs and their program evaluations. I set out to understand: how and where an ICAT-type response fit into the domestic violence literature; the contemporary issues related to societal responses to domestic violence and evaluations of these programs; and, how this might inform the structure of an N.O. ICAT program evaluation. I also needed to understand the N.O. ICAT at the service-delivery level through to its theoretical foundations.

In the early stages of this process I had significant contact with the ICAT members through attending an ICAT meeting, their two-day training workshop and over a number of working sessions. At the same time, I was reviewing the literature around CCR and CCR evaluations. Early on the need for legal approvals from the RCMP was recognized and it was at this time that Dr Sopow, “E” Division OSB was contacted. He gave his support to the project and “E” RCMP Legal Services, Mr. Kyle Friesen, approved the project shortly thereafter.

Both the N.O. ICAT and the OSB want to know if the N.O. ICAT is meeting its objectives and they currently do not have a formal evaluation process. This literature review will provide the foundation for the surveys and measures that can be used in a future program evaluation of the N.O. ICAT.

Project
This project reviews and summarizes the literature relevant to the ICAT approach. It answers the following question: what factors emerging from the literature on violence against women might...
be considered when constructing a program evaluation of a CCR, such as the N.O. ICAT? In considering this question, the research also answers the following specific questions: what societal responses have been employed to address violence against women in the last 30 years? How have these evolved and been evaluated? What constitutes a contemporary CCR and how are they being evaluated? And lastly, what were the specific drivers of the ICAT approach?

**METHODOLOGY**

*Conceptual Framework*

Given the prevalence of domestic violence in our society, one would expect domestic violence to be a significant public policy issue\(^1\) and it is; however, this was not always the case. The pressures exerted by the Battered Women’s Movement and legislative changes in the decades prior to the 1980s changed domestic violence from a private or family matter to a significant social problem and criminal justice issue (Barner & Carney, 2011; Bonanno, 2008; Cramer, 2004; Post, Klevens, Maxwell & Ingram, 2010). Following this paradigm shift, the institutional response to domestic violence also moved from victim-focused, such as providing transition housing for women and their children’s safety, to offender-focused such as the criminal justice system holding offenders to account (Barner & Carney, 2011; Post et al, 2010). The literature, in breadth, scope and volume, is a reflection of this changed paradigm and whereas there was comparatively little literature on societal responses to domestic violence in the early 1980s, by the early twenty-first century the volume, the breadth and complexity of the studies in the literature had dramatically increased.

*Methodology*

Being unfamiliar with the contemporary domestic violence research, my literature review was very broad. I conducted searches of the McPherson Library and Canada Police College holdings. I searched the open internet, numerous advocacy sites, community program websites and think-tanks many of which had their own publications, research and reports. I also located Coroner’s Reports and other government publications such as policy documents on government-affiliated websites. I relied on professional contacts and identified a number of unpublished manuscripts. I validated in the use of the ODARA risk assessment tool and accessed the RCMP internet site known as the Infoweb. In all, I located material from social scientists, advocacy groups, the courts, feminists and health and mental health practitioners, to name a few.

*Deliverables*

The deliverables for this project are a program logic model and a report that identifies the background, theory, composition and operations of contemporary CCRs. It will also identify and develop a research design, measures and instruments that can be used to evaluate the N.O. ICAT. From this material a rigorous program evaluation of the N.O. ICAT can be conducted.

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\(^1\) In BC it is estimated that there were 183,000 individuals aged 15 years and older who were victims of domestic violence and domestic violence cases constitute the most numerous case type for Crown Counsel, 14 % in 2008-2009 (VAWIR, 2010, p. 4)
Early Responses

In the early 1980s, a seminal study conducted in Minneapolis Minnesota credited arrest with a decrease in domestic violence recidivism (Sherman & Berk, 1984). This study and two decades of pressure from advocacy coalitions coalesced into broad adaption of pro-arrest and charge policies across the US (Dixon, 2009). Immediately following the Sherman and Berk (1984) paper, a series of studies, known as SARP, were established to confirm Sherman and Berk’s results (Maxwell, Garner & Fagan, 2001). Although the results of the SARP studies were mixed, they are noteworthy for a number of reasons. First, they identified recidivism as a measure of program effectiveness and, although other measures emerged such as offender accountability and collaboration, recidivism rates remained the key measure in assessing a program effectiveness. Second, the SARP gave impetus to the study of other criminal justice system responses to domestic violence such as court monitoring and pro-charge policies. SARP also focused attention on the importance of the individual, relationship and societal determinants of domestic violence and the need to account for them in evaluations. Finally, from SARP flowed the branch of research that is concerned with risk assessment and the various tools that would be developed for this purpose.

Uncoordinated Responses

In part due to the lack of clear evidence of arrest as a specific deterrent to domestic violence, a number of jurisdictions began looking at the effect that other criminal justice system components had on recidivism. Emphasizing a criminal justice response was also consistent with the growing societal view that domestic violence was a criminal matter, not a private one, and that offenders should be held to account (Barner & Carney, 2011; Post et al, 2010). In the last two decades, there have been countless studies examining the efficacy of criminal justice interventions aimed at reducing domestic violence. In these studies, one sees the emergence of more rigorous research designs and researchers adjusting for recidivism risk using various statistical methods. However, similar to the arrest studies, debate continues on how effective criminal justice responses have been as a specific deterrent. Also similar to the ongoing arrest debate, evaluations of the efficacy of criminal justice responses to domestic violence was complicated by a number of methodological issues. Indeed, there are few studies that have methodologies which have not been criticized. There is, however, evidence that criminal justice system responses have at least some effect on recidivism and this does lend support to the theory that it is the cumulative effect of responses that will keep women safe (and prevent men from re-offending). It is this theory that is the premise of contemporary CCRs—that is, the cumulative effect of criminal justice sanctions, offender treatment and enveloping the victim in support and services will keep women safe.

Community Coordinated Responses

In CCRs, one finds the convergence of feminist theory, advocacy work, criminal justice responses and government-agency and community support. CCRs evolved in response to a
perceived lack of service coordination for victims and because neither the criminal justice system nor community groups were successful at addressing the problem on their own (Hoffart & Clarke, 2004a). There is a generally accepted set of philosophies that underpin contemporary CCRs which include client-centered service delivery, women’s advocacy, women and children’s safety, holding offenders to account and women’s empowerment (Shepard & Pence, 1999). Best-practices identified in the literature include networking, collaboration, information sharing, creating an evaluation component and risk assessment (Victim Services and Crime Prevention Division [VSCPD], 2010). Emerging from the studies and evaluations of modern CCRs is a set of well-agreed upon evaluation best practices that include using: a mixed-methods approach and recidivism data; client surveys; agency surveys; focus groups; and, a comparison group of offenders (Shepard, 1999b).

Inquiries, Inquests and Reports
Various inquests, inquiries and reviews affirm much of the contemporary CCR theory and underline the importance of the issues raised by advocacy groups by reviewing tragic incidents where systems failed. Further, it was the Turpel-Lafond report (2009), Honouring Christian Lee, which resulted in the expeditious implementation of the N.O. ICAT. These reports have identified information sharing and collaboration between criminal justice actors, advocacy groups, government agencies and community groups as critical elements in society’s response to domestic violence. The recommendations of these reports are manifest in the philosophies that underpin the structure and functioning of the N.O. ICAT model. The N.O. ICAT’s logic model, developed for this paper, is a reflection of many of the recommendations in these reports.

Risk Assessment and Controlling for Pre-intervention Risk
Risk assessment is a central component of ICAT. It is the “high-risk” designation that gives ICAT the legal authority to share personal information between agency partners and risk assessment is integral to safety planning (CCWS, 2012; Kropp, 2008) Risk assessment is a significant subject in the domestic violence literature and there are a number of risk assessment tools currently used in Canada. Although there is no “best” tool and research continues on risk assessment tool validity and reliability, the use of a recognized structured risk assessment tool in any contemporary CCR is well-agreed upon. The specific risk assessment tool that the N.O. ICAT uses, a modified B-Safer tool, allows for safety plans tailored to a woman’s identified risk factors and preserves professional judgment, both advantages for ICAT.

ODARA is an actuarial risk assessment tool that has shown to have predictive validity and reliability. It was developed by Canadian researchers in a Canadian legal context using male offenders and female victims. It has been validated as a means of assessing pre-intervention risk. It is a dichotomous 13-item checklist that was designed for use by front line police and therefore relies on information routinely available in police files. For these reasons, it is an ideal means of determining pre-intervention risk in a proposed ICAT program evaluation.
RECOMMENDATIONS & CONCLUSIONS

Recommendations

This project started with an invitation. It was a broad invitation to complete a program evaluation of the N.O. ICAT. The N.O. ICAT had been functioning for three years and the ICAT founders wanted to know, quite simply, were women safer having participated in the program than they would have been otherwise? At first, it seemed an uncomplicated question and answering it would be a straightforward process. However, on initial review of the literature to identify topics relevant to CCRs, it became clear that this was a significant and complicated undertaking. CCRs are sophisticated entities and their program evaluations are technical and time consuming. After developing a logic model, completing the literature review and developing draft measures and survey documents it was clear (or made clear to me) that this project was simply not going to fit into an MPA Capstone.

It is recommended that the evaluation use a pre-post design and rely on quantitative data from police databases and qualitative data from surveys and interviews. As seen in the literature, recidivism rate is the quantitative performance measure. In order to control for pre-intervention risk, ODARA is a straightforward tool that has been validated for this use in the past and for which data is readily available. Recidivism data can be correlated with women’s feelings of safety, empowerment and engagement. Further, agency partner data can also be compared to client survey data on overlapping issues. The remaining qualitative data, including the open-ended responses, should be reviewed and summarized for consideration in the future operations of the N.O. ICAT.

Conclusions

At the start of this project a number of agencies and departments needed to come together: the N.O. ICAT, the North Okanagan RCMP, the “E” Division OSB, my supervisor and “E” RCMP Legal Services. These agencies and departments needed to come together because of privacy and the data access issues. Authorizations and permissions were obtained as required; however, given the time delay and resulting change in circumstances, these should be refreshed. Once complete, the analysis should be conducted with the final report taking the form of a paper and/or a presentation to CCWS and “E” Division OSB, independent of the MPA program.
# TABLE OF CONTENTS

Acknowledgements ........................................................................................................................... i

**Executive Summary** ................................................................................................................... ii
  - Introduction .......................................................................................................................... ii
  - Methodology ..................................................................................................................... iii
  - Literature Review .............................................................................................................. iv
  - Recommendations & Conclusions .................................................................................. vi

**Table of Contents** ................................................................................................................... viii

**List of Abbreviations & Acronyms** ....................................................................................... xi

1.0 **Introduction** ......................................................................................................................... 2
  - 1.1 Project Client and Problem .......................................................................................... 2
  - 1.2 Project Objectives ........................................................................................................ 3
  - 1.3 Terminology .................................................................................................................. 4
  - 1.4 Background ................................................................................................................... 6

2.0 **Methodology and Deliverables** ......................................................................................... 12
  - 2.1 Conceptual Framework ............................................................................................... 12
  - 2.2 Methodology ................................................................................................................ 14
  - Figure 1. Conceptual Framework and Literature Review Organization ......................... 17
  - 2.3 Strengths and Limitations ........................................................................................... 17

3.0 **Literature Review** ............................................................................................................... 19
  - 3.1 Evaluating Societal Responses To Domestic Violence ................................................ 19
  - 3.2 Early Responses .......................................................................................................... 20
    - The Spousal Assault Replication Program .................................................................. 21
    - Summary ..................................................................................................................... 25
  - 3.3 Uncoordinated Responses ......................................................................................... 26
    - Positive Effect ............................................................................................................. 26
    - No Effect ...................................................................................................................... 28
    - Summary ..................................................................................................................... 30
  - 3.4 Community Coordinated Responses ......................................................................... 31
Appendix “B” – Recidivism Sheet (Draft) ................................................................. 86
Appendix “C” – Agency Partner Survey (Draft) .......................................................... 87
Appendix “D” – Structured Client Interview (Draft) .................................................... 88
LIST OF ABBREVIATIONS & ACRONYMS

“E” Division: The RCMP in British Columbia

“G” Division: The RCMP in the Northwest Territories

BIP: Batter Intervention Program

B-SAFER: Abbreviated Spousal Assault Risk Assessment Guide

CCR: Community Coordinated Response

CCWS: Community Coordination for Women’s Safety

CDC: Centre for Disease Control and Prevention

CPC: Canadian Police College

DA: Danger Assessment

DAIP: Domestic Abuse Intervention Programs

DV: Domestic Violence

DV-MOSAIC: The Assessment of Domestic Violence Situations or Domestic Violence Method

DVU: Domestic Violence Unit

EPO: Emergency Protection Order

EVA BC: The Ending Violence Association of BC

FOIPA: The Freedom of Information and Protection of Privacy Act

FPT Working Group: Ad Hoc Federal-Provincial-Territorial Working Group

IPV: Intimate Partner Violence

JOD: Judicial Oversight Demonstration

MARAC: Multi-Agency Risk Assessment Conference

MCFD: Ministry of Children and Family Development

[xi]
MOU: Memorandum of Understating

MPSSG: Ministry of Public Safety and Solicitor General

N.O. ICAT or ICAT: North Okanagan Integrated Case Assessment Team

NIJ: National Institute of Justice

ODARA: Ontario Domestic Assault Risk Assessment

OPP: Ontario Provincial Police

OSB: Operational Strategy Branch

RCMP: Royal Canadian Mounted Police

ROC: Receiver Operating Characteristic curve

SARA: The Spousal Assault Risk Assessment Guide

SARP: Spousal Assault Replication Program

STOP: Service Training, Officers, and Prosecutors

The Greenbook: The Greenbook Initiative

VAWIR: Violence Against Women in Relationships Policy

VSCPD: Victim Services and Crime Prevention Division
1.0 INTRODUCTION

1.1 PROJECT CLIENT AND PROBLEM

Clients
The Royal Canadian Mounted Police (RCMP) is Canada’s National Police Force. Established in 1874, its domestic operations are organized into Regions and Divisions. The Pacific Region includes “E” Division, the province of British Columbia (BC), and “M” Division, the Yukon Territory. Measured in terms of personnel, “E” Division has the largest establishment of RCMP employees in the country. One branch within the Pacific Region is the Operations Strategy Branch (OSB) which supports operations through continuous enhancement of police-service delivery initiatives (RCMP, 2012). Dr. Eli Sopow is the Director of Continuous Improvement in the OSB.

The Ending Violence Association of BC (EVA) is a non-profit organization that provides support and training to over 200 anti-violence programs across BC (Community Coordination for Women’s Safety [CCWS], 2012). These include community-based victim assistance programs, Stopping the Violence programs and sexual assault centres (CCWS, 2012). EVA conducts research, policy and legislation analysis, develops and distributes resources, educates the public and government bodies on the needs of victims of violence, develops and maintains standards for the provision of services and works to foster and develop relevant intersectoral initiatives across BC (CCWS, 2012). EVA also acts as a link between government, policy makers, legislators and other provincial organizations (EVA, n.d.). Included in EVA’s Mission Statement is to “...coordinate and support the work of victim-serving and other anti-violence programs in BC through the provision of issue-based consultation and analysis, resource development, training, research and education” (EVA, n.d., para.1). CCWS is a provincial initiative of the EVA BC (CCWS, 2012). Established in 2011 with funding from the Law Foundation of BC, CCWS assists communities in developing or enhancing cross-sector collaboration designed to increase women’s safety by establishing and/or supporting integrated and coordinated responses to gender-based violence (CCWS, 2012). CCWS’ goals are to: support the development of an integrated and coordinated response to gender-based violence; increase the safety of women who have experienced violence; provide consultation, information, analysis and training to rural and isolated communities; and, support developing solutions and strategies that address sexual and domestic violence and increasing women’s access to justice and other systems (CCWS, 2012).

CCWS is currently funded by the Ministry of Public Safety and Solicitor General (MPSSG) and is a result of several years of work, consultation and coordination by EVA BC and the Victim Services and Crime Prevention Division of the MPSSG (EVA, n.d.). CCWS is now solely managed by EVA, funded by the MPSSG and guided by a provincial working group that includes senior officers from municipal police departments and the RCMP, executives from
women’s programs and transition houses, legal experts, academics, senior government officials, Aboriginal women, women with disabilities and immigrant and refugee women (CCWS, 2012; EVA, n.d.). The North Okanagan Integrated Case Assessment Team (N.O. ICAT or ICAT) is one initiative of CCWS. Ms. Hamilton is a founding co-chair of the N.O. ICAT and is currently a Regional Coordinator for CCWS.

Problem
During the spring of 2012, I was invited to consider completing a program evaluation of the N.O. ICAT by Ms. Hamilton. I was introduced to Ms. Hamilton by Gail Edinger whom I had met while doing research for a public policy course (ADMN 556). Ms. Edinger is also a Regional Coordinator of the EVA. Through Ms. Hamilton and Ms. Edinger I met the other founding members of the N.O. ICAT team—Sergeant (Sgt) Robb Daly (introduced below) and Ms. Brooke McLardy, Program Coordinator, North Okanagan Transition House.

My initial invitation to complete a program evaluation was broad—there was no logic model, no strictly defined assessment requirements and no defined measures. My program evaluation experience being limited to my academic course work a number of questions arose. Among these questions were: How and where does an ICAT-type response fit into the domestic violence literature? What are the contemporary issues related to assessing societal responses to domestic violence? And, how might this inform the structure of an N.O. ICAT program evaluation? I also needed to understand the N.O. ICAT from the service-delivery level through to its theoretical constructs. The answers to these questions would be found in the literature and inform the design of a program evaluation and its instruments.

1.2 PROJECT OBJECTIVES
Conceived in 2008 and formally supported in policy by BC Government, the N.O. ICAT was the first community coordinated response (CCR) in “E” Division to address cases of high-risk domestic violence (MPSSG & Ministry of Children and Family Development [MCFD], 2010). The N.O. ICAT was initiated by the Vernon Women’s Transition House Society and the Vernon RCMP Detachment. It responds to situations of domestic violence where there is a high risk of death or grievous bodily harm to a survivor, her children or any other person (CCWS, 2012). In addition to being the first operational team working in “E” Division, the N.O. ICAT is the model on which other teams are being structured. Indeed, it is the individuals who originally conceptualized and operationalized the N.O. ICAT who have traveled the province and taught other violence in relationship committees how to establish and run their own high-risk domestic violence teams.

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2 This policy is jointly published by MPSSG & MCFD. It is commonly known by police, MCFD, Crown and others professionals in this field as VAWIR (Violence Against Women in Relationships) and has been referred to as VAWIR for the remainder of this paper.
The ICAT approach supports domestic violence victims by enveloping the woman and/or her children with support. Support is collaboratively provided by a collection of community and government agencies that includes Corrections, health authorities and agencies, government social agencies, police and community-based agencies. In addition to collaborative service delivery, the N.O. ICAT has, at its core, information sharing. Information sharing has been identified by numerous coroners’ inquests, various government reports and academics as a key component of women’s safety. Personal information on the victim, the offender, or anyone else, which could impact the safety of any person, is shared between team members. The ICAT approach is not “new” in the sense that any of the partner agencies are new, rather it is the inter-agency collaboration and information sharing that is new. The result is a coordinated approach to women’s safety.

This project reviews and summarizes the literature relevant to the ICAT approach. It answers the following question: what factors emerging from the literature on violence against women might be considered when constructing a program evaluation of a CCR, such as the N.O. ICAT? In considering this question, the research also answers the following specific questions: what societal responses have been employed to address violence against women in the last 30 years? How have these evolved and been evaluated? What constitutes a contemporary CCR and how are they being evaluated? And lastly, what were the specific drivers of the ICAT approach? Answering these research questions will provide the foundation for a program evaluation of the N.O. ICAT.

1.3 TERMINOLOGY

Gender Specific Language
In this paper I have chosen to use non-neutral gender language—I have used woman or women when referring to victim(s) and men or male when referring to the offender. I have characterized intimate partner violence and domestic violence as violence against women. I have done this for a number of reasons. First, the use of non-neutral gender language is consistent with much of the literature including the CCWS material and BC’s domestic violence policy. Second, the use of gender specific terms acknowledges that the vast majority of police-reported domestic violence victims are female.3 Finally, all of the victims supported by the N.O. ICAT are women and all the offenders were male.4 For these reasons, I have used gender-specific language in this paper.

Domestic Violence

3 In 2007, 83% of police-reported spousal assault victims were female (VAWIR, 2010, p. 4). Women were almost 4 times as likely to be victims of spousal homicide as men and twice as likely to be injured (Statistics Canada, 2011, p. 35; VAWIR, 2010, p. 4). In domestic violence situations, women are three times more likely to fear for their lives, twice as likely to suffer serious injury and six times as likely to seek medical attention (VAWIR, 2010, p. 4).
4 Although there is a debate in the literature, led chiefly by Dr. Donald Dutton, Phd, University of British Columbia, about the actual incidence of male perpetrated IPV, police-reported statistics show clearly that women are significantly more often victims of intimate partner violence than males. (Dutton & Corvo, 2006 & 2007; VAWIR, 2010)
In this paper (and the appendices) I have used the following definition for domestic violence:

“...physical or sexual assault, or the threat of physical or sexual assault against a current or former intimate partner whether or not they are legally married or living together at the time of the assault or threat. Domestic violence includes offences other than physical or sexual assault, such as criminal harassment, threatening, or mischief, where there is a reasonable basis to conclude that the act was done to cause, or did in fact cause, fear, trauma, suffering or loss to the intimate partner. Intimate partner relationships include heterosexual and same-sex relationships.” (VAWIR, 2010, p. 1)

I have used this definition because the BC policy on domestic violence (VAWIR) applies to the clients in this project, the RCMP, Crown counsel and all others working in the domestic violence field in BC. Finally, using an clearly stated and consistent definition will assist in a future program evaluation.

The literature uses several terms interchangeably when discussing domestic violence. These terms are: “violence against women in relationships”, “spousal violence”, “spousal abuse”, “spouse assault”, “intimate partner violence” (IPV), “relationship violence” and “battering”. I have also used these terms interchangeably, with the exception of “battering” which is predominantly an American term.

Community Coordinated Responses
In the literature a wide variety of programs are referred to as “community coordinated responses”. For example, there are programs that are predominantly administered by criminal justice actors with or without supporting elements from community groups or social agencies. Others are operated by and out of police departments but have significant contributions from community groups and social service agencies. Some, such as those that follow the ICAT model, are truly community coordinated responses where there is no apparent first-among-equals agency or partner. In this paper I have used the term “community coordinated responses” broadly to describe all manifestations of a response that includes some or all of the principle actors set out by the Duluth Model\(^5\). I have distinguished a CCR from a non-CCR only where it was clear that a particular response was clearly one-dimensional, such as with the early American pro-arrest and pro-prosecution studies. To differentiate between CCRs which are multi-dimensional, but do not espouse integration and those, like ICAT, that are founded on it, I have used the term “contemporary CCRs” to denote the latter.

Recidivism
In the literature recidivism is not consistently defined. Researchers do not consistently use the same criteria for counting a new occurrence as an offence, they do not use the same timeframe for this occurrence to take place or by what means that it had to have been reported (by a victim

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\(^5\) The Duluth Model is discussed further in this paper under the subheading Contemporary CCR Theory.
or to the police, for example). This lack of a consistent definition is a significant challenge to researchers in comparing independent studies or when evaluating intervention strategies because there are no base-line recidivism statistics. Consequently, each study must find a suitable comparator. This is a significant challenge.

Where discussing recidivism in the context of a particular study, I use the definition of the original authors. When I refer to the concept of recidivism for the purpose of the ICAT program evaluation, it means: a new occurrence, as defined by VAWIR, committed by the original offender against the same victim. There are a number of advantages to defining recidivism in this way. First, the VAWIR definition follows BC policy. Second, any offences that are defined by VAWIR are also Criminal Code offences. Third, when conducting research (such as in relation to an ICAT program evaluation) one can use police data because Uniform Crime Reporting guidelines require police to use the definitions reflected in the Criminal Code which are consistent with BC policy (VAWIR, 2010). And finally, by using a consistent definition it makes this study comparable to other BC and Canadian jurisdictions.

1.4 BACKGROUND

N.O. ICAT Formation

In December 2008, the North Okanagan (Vernon) RCMP and the Vernon Women’s Transition House Society collaborated on a grant opportunity from the MPSSG Victim Services and Community Programs Division. They formed a partnership to work toward a comprehensive safety assessment and planning process for victims of domestic violence who were at high risk of suffering grievous bodily harm or death from further domestic violence (CCWS, 2012; Sergeant Robb Daly [Sgt Daly], personal communication, May 29, 2012). They created an ad hoc committee for an integrated case assessment team and a basic framework for the committee (Sgt Daly, personal communication, May 29, 2012). They set this framework out in a memorandum of understating (MOU) which was forwarded to RCMP “E” Division Headquarters for review (Sgt Daly). As the MOU waited for approval from “E” Division’s Commanding Officer, Mary Ellen Turpel-Lafond’s report (2009), Honouring Christian Lee, was tabled in the British Columbia Legislature (Sgt Daly). Turpel-Lafond’s report (2009) pointed to the lack of a coordinated response and information sharing on the part of the agencies mandated to protect and assist victims of domestic violence as a major contributing factor to the murder of Christian Lee, his mother and his maternal grandparents (Turpel-Lafond, 2009, p. 8). As MPSSG staff were aware of the N.O. ICAT grant and proposal, they contacted the N.O. ICAT co-chair and MOU author, Sgt Daly, and, after some amendments, the MOU became “E” Division policy (Sgt Daly). The N.O. ICAT became the first formal and systemic integrated approach to high-risk domestic violence in “E” Division. Since its inception in 2009, the N.O. ICAT has managed over 50 high-risk domestic violence cases. Further, they have held workshops for more than 25 communities throughout the province to assist them in establishing their own ICATs (Ms. Debby Hamilton, personal communication, October 15, 2013).
Definitions
In the context of the N.O. ICAT protocol, domestic violence is defined as physical or sexual assault, or the threat of physical or sexual assault, towards a person with whom there is a past or ongoing intimate relationship (CCWS, 2012). Behaviour such as stalking, intimidation, sexual abuse, neglect, deprivation, kidnapping, mental or emotional abuse or threats towards children, loved ones or property is recognized as part of the continuum of domestic violence (CCWS, 2012). This definition mirrors VAWIR’s definition. High-risk is defined as any case where there is a concern of serious bodily harm or death to either partner or other parties (CCWS, 2012). The designation of high-risk is based upon, but not limited to, factors which have been identified in the Spousal Assault Risk Assessment (SARA) and other agreed upon instruments (these are discussed further below) (CCWS, 2012).

N.O. ICAT Procedures
Cases are referred to the N.O. ICAT through the RCMP Okanagan Domestic Violence Unit (DVU) coordinator by partner agency representatives or by community members. Referrals are done as soon as possible but within 24 hours of an agency or individual becoming aware of a high-risk domestic violence case (CCWS, 2012). Referrals are made using the N.O. ICAT Domestic Violence Team Initial Case Referral form which, when completed, includes information relevant to the offence and risk factors which includes, in part, the following information: victim and offender tombstone data; the severity of the assault; the presence and/or use of weapons or threats; if any children are involved; victim vulnerability and offender risk factors; and, relationship and social factors (CCWS, 2012). The referral also leaves space for an open narrative where the referring agent can include any information that she believes is important to evaluate and address risk (CCWS, 2012). Completed initial case referral forms are faxed to the DVU coordinator. Referring agencies are then required to advise the DVU coordinator by phone that a referral has been made. If the victim is in danger, agencies must call 911. The DVU coordinator then conducts police database queries and causes a police investigation if immediate action is necessary. If the DVU finds that there is no need for ICAT involvement, other action, such as safety planning or referral to victim services, may occur.

If the victim has not completed an ICAT consent form, ICAT will attempt (normally through RCMP Victim Services) to have her sign one (CCWS, 2012). The person obtaining victim consent ensures that the victim is aware that the accessing and sharing of her personal information is subject to the constraints of privacy legislation and that it may happen even in the absence of her consent (CCWS, 2012). The DVU coordinator, or her designate, then circulates the victim and the offender’s tombstone data to the N.O. ICAT members (and other service providers where appropriate) who review their databases for information relevant to risk assessment and safety planning (CCWS, 2012). An N.O. ICAT meeting is scheduled as soon as
is practicable (CCWS, 2012). Prior to the meeting, agency participants review, summarize and prepare for discussion the relevant information that they have retrieved from their files and databases.

At the start of an ICAT meeting, any non-ICAT persons sign an affirmation of confidentiality. Non-ICAT persons may be present because they brought the case forward or because their agency has information relevant to risk assessment and/or safety planning. N.O. ICAT has a quorum which is a representative from each of the following agencies: the transition house, the RCMP, victim services and the MCFD (Personal communication, Sgt Daly, May 29, 2012). Cases are discussed in a round-table format where representatives from each of the partner agencies share information from their files in relation to the victim, offender and any other circumstances relevant to the risk assessment or safety planning processes. The N.O. ICAT uses a structured risk assessment tool to record the presence of risk factors. It is a three-page document titled “Summary of Domestic Violence Risk Factors” that is completed by the community coordinator during the round-table portion of the ICAT meeting.\textsuperscript{6} If the committee determines that a case is high-risk, the process continues; if not, the victim is referred to various support services (CCWS, 2012). At the end of the case assessment meeting, ICAT members prepare an initial safety plan and appoint two liaison persons—one for the victim and one for the offender (CCWS, 2012). The victim’s liaison is typically a specialized victim assistance worker while the offender’s liaison is an RCMP member or probation officer (CCWS, 2012).

ICAT reviews cases to monitor risk, adjusting the safety plan when necessary, at the regular bi-weekly ICAT meetings. In addition, ICAT holds emergency meetings as circumstances require. All N.O. ICAT members and/or designates attend all case reviews, regardless of their involvement with a specific victim or offender (CCWS, 2012). Other agencies or individuals may also be invited if knowledge and information that they hold is critical to the assessment.

\textit{The Legal Context}

Consent is normally required before personal information about a victim, offender or anyone else is shared between agencies. However, federal and provincial privacy laws allow the sharing of personal information, without consent, where it is in the public interest, if there are significant health or public safety concerns or for the purpose of reducing the risk of domestic violence. The key pieces of legislation are as follows:

- The Privacy Act (federal legislation) applies to the RCMP and Parole employees and allows the sharing of information where: the public interest in disclosure clearly outweighs any invasion of privacy that would result from disclosure; or, disclosure would clearly benefit the individual to whom the information relates (Privacy Act, s. 7);

\textsuperscript{6} Risk assessment tools, including ICAT’s risk assessment tool, are discussed in detail in the Literature Review section of this paper.
• The Freedom of Information and Protection of Privacy Act (FOIPA) (provincial legislation) applies to municipal police, Crown counsel, Community Corrections and health authorities and allows the sharing of information if compelling circumstances exist that affect anyone's health or safety; or, for the purpose of reducing the risk that someone will be a victim of domestic violence if domestic violence is reasonably likely to occur (FOIOPA, section 33.1); and,
• The Personal Information Protection Act (provincial) applies to community-based antiviolence programs and allows the disclosure of information if there are reasonable grounds to believe that compelling circumstances exist that affect the health or safety of any individual (Personal Information Protection Act, section 18).

VAWIR policy states that information should be shared in a timely manner where risk factors are present (VAWIR, 2010). It also requires that a “high-risk” designation be made on a case-by-case basis and that it be aided by a formal risk assessment tool (VAWIR, 2010).

Although the N.O. ICAT can rely on privacy laws to share personal information, they attempt to obtain the victim’s consent by way of a formal “Release of Personal Information” form (CCWS, 2012). This consent limits information that is subject to disclosure by specifically identifying what information may be disclosed. The ICAT consent form also sets out how a woman can withdraw her consent. By taking this approach, the N.O. ICAT accomplishes two things: it creates a buy-in from the women that they serve; and, it ensures that a woman’s consent is fully informed. This is important as empowerment is a crucial piece in a woman’s struggle to end a cycle of violence. All information collected for the purposes of reducing risk in a domestic violence case can only be used for this purpose and only shared within the agencies and community partners directly involved (CCWS, 2012; VAWIR, 2010).

Reports
The N.O. ICAT’s community coordinator (or her designate) is responsible for the majority of the ICAT documentation. This documentation includes the initial case referral form, the risk assessment tool, case notes, consent forms and affirmations of confidentiality (CCWS, 2012). The community coordinator also prepares a summary of the ICAT meeting. This summary follows a standard format and includes information on the meeting date, the agencies present, the risk level determined by the committee and a summary of offender and the victim-related risk factors. This summary is forwarded to Crown counsel with the police disclosure package should police recommend charges. If Crown elects to charge the offender, defence counsel also gets a copy. At present, Crown counsel in Vernon are relying on the ICAT summary for bail and sentencing purposes (Gail Edinger, CCWS Regional Director, personal communication, May 29, 2012).

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7 Empowerment is discussed further in the Literature Review section of this paper.
Owing to the case-law around disclosure, ICAT documents are kept separate from the police operational file (which is subject to disclosure)\(^8\). ICAT documents are filed and secured in the DVU of the RCMP detachment.\(^9\) The documents that are non-disclosable are printed on pink paper with “for non-disclosure” clearly marked on them. Additionally, all notes or documents made or used by the agency representatives during the ICAT meetings are collected by the community coordinator at the end of each meeting with the exception of material that a committee member may need to carry out his or her work in relation to the client. Once this work is done, the committee member must destroy these copies or notes as well.

Only the RCMP DVU is permitted to forward information to Crown counsel and only the RCMP or Community Corrections, who supervise bail\(^10\), can discuss the case with Crown. Other ICAT members are not permitted to voluntarily provide information to Crown unless the request originated with Crown counsel. ICAT files are named by year and case number and ICAT file retention periods mirror RCMP file retention periods (CCWS, 2012).

**New Committees**

Under the umbrella of CCWS, the three founding members of the N.O. ICAT—Gail Edinger, CCWS Regional Director, Debby Hamilton CCWS Regional Director and Sgt Daly, Non-commissioned officer in charge, Armstrong RCMP—are actively involved in setting up ICAT programs throughout the province of BC. This three-person team runs two-day workshops which train local agents on how to create and implement ICATs to address high-risk domestic violence in their communities.\(^11\) Invited to these seminars are the core agencies involved in an ICAT and any other interested community group or agency. These workshops are participatory. In addition to presentations on the ICAT’s theory, legal context and protocols, there is group work where participants—who are the individuals who will be forming the local ICAT—work together on the tasks needed to create their local committees. For example, there is a “finding common ground task” where participants identify and explore preconceptions about the causes of intimate partner violence; a “mapping to action” task where participants identify resources and gaps for the protection of women in their community; and, a mission statement task where participants start to develop their committees’ mission statement.

As collaboration and information sharing are foundations of the ICAT model, each new ICAT trained by the N.O. ICAT facilitators is driven and developed collaboratively by the local group members (Sgt Daly, personal communication, May 30, 2012). The workshop facilitators

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\(^8\) R v. Stinchcombe, SCC is the leading Canadian disclosure case.

\(^9\) Inadvertent disclosure of protected information can result in defence receiving this information. ICAT information pertaining to the victim’s safety is not disclosable and strict protocols are required to prevent this from happening.

\(^10\) Bail refers to the period of time from the offender’s arrest date to the conclusion of the court process. During this time the offender is normally on conditions restricting his movement, contact and other activities that could impact victim or witness safety. Community Corrections monitors these conditions.

\(^11\) After being invited to complete this program evaluation, I participated in one of these workshops—Working Collaboratively to Identify and Respond to Risk: Building a Regional Violence against Women in Relationships Initiative sponsored The Southern Gulf Islands partnership for women’s safety on, May 29 – 30, 2012,
encourage groups to develop plans and protocols specific to their community because the dynamics, people and situational factors are different in each community (Ms. Gail Edinger, personal communication, May 30, 2012). For example, although they share the same principal goals and are founded on collaboration and information sharing, an ICAT in Bella Bella would function differently than the one in Vernon. The workshop facilitators recognize that unique situations call for local solutions. In this way each committee’s protocol has aspects that are based on the situational factors in the community which is the reason workshop facilitators focus on having participants work together. This collaborative and locally-flavoured process of engendering ICAT committees creates a genuine grass-roots feel to the committees.

Evaluation
The N.O. ICAT has been functioning for over three years. They were the first formal, coordinated response to high-risk domestic violence cases in “E” Division. They are also the model upon which other coordinated responses are being structured and their founding members have trained, under the umbrella of the CCWS, numerous other BC jurisdictions in the ICAT approach.

“E” Division’s OSB is mandated with continuous enhancement of police service delivery initiatives and coordinates most research initiatives in the Division. Domestic violence is a national and divisional priority. “E” Division has an established a formal partnership with the CCWS (RCMP, 2011, part 2.4.3). Senior management from the RCMP sits on the provincial working group that guides the CCWS (EVA, n.d.). “E” Division policy requires RCMP members to collaborate with community groups and other government agencies to reduce the incidents of domestic violence (RCMP, 2011, part 2.4.1.3). Although the format of this collaboration is not explicitly stated in the operations manuals, it is the largely ICAT model that is being adopted and implemented throughout “E” Division.

The goal of the N.O. ICAT is to provide a framework for a coordinated and collaborative approach to assess, address and decrease the risk of serious bodily harm or death for victims of intimate partner violence (CCWS, 2012). Both the N.O. ICAT and the OSB want to know if this is working. They currently do not have a formal evaluation process. This literature review will provide the foundation for the surveys and measures that can be used in a future program evaluation for the N.O. ICAT.
2.0 METHODOLOGY AND DELIVERABLES

2.1 CONCEPTUAL FRAMEWORK

Historical
Canadian statistics report that 6% of Canadians reported being physically or sexually victimized by their current or former spouse and almost one in five said that they had experienced some form of emotional or financial abuse in their current or previous relationship (Statistics Canada, 2011, p. 5). One would therefore expect that domestic violence is a significant public policy issue; and, it is. However, this was not always the case. In fact, domestic violence was not a significant public policy issue prior to the early 1980s.

The first substantive change in Canadian domestic abuse policy was a 1965 Criminal Code amendment which removed the requirement for women (or anyone) to prove that she had been “battered” by her husband in order to be considered a victim of a crime (Gail Edinger12, personal communication, November 24, 2011). In 1973, the first women’s shelter in the country, the Vancouver Transition House, opened in BC (Vancouver Rape Relief Society, 2010). However, it was not until 1982 when a Canadian Member of Parliament, Margaret Mitchell, openly raised the issue of violence against women in the House of Commons that the paradigm of violence against women started to shift13 (Edinger, personal communication, November 24, 2011). Subsequent to Mitchell’s action and also in 1982, the Solicitor General directed the Commissioner of the RCMP to mandate that the RCMP lay charges in all cases of domestic violence (Edinger, personal communication, November 24, 2011). In 1984 the Attorney General of BC created the first domestic violence policy in the country—it was a scant two pages, explicitly included “spouse assault” with all other assaults and permitted both diversion and discretion (Ministry of Attorney General, Criminal Justice Branch, 1991). It would not be until the late 1980s, when advocacy groups and the feminist anti-violence movement in particular grew sufficiently in numbers and influence, that “...violence against women went from obscurity to a significant social issue” (Kachuk, 2008, para.1). For the Province of BC, the first step in this process was a 1989 pilot project funded by the Attorney General. The project was funded for seven coordination committees, the largest and most integrated of which was located in Vancouver, each with the objective of developing and forwarding community-based action plans and best practices in regards to violence against women to the government (Baldwin, Edinger, Leavitt, Porteous, & Ruebsaat, 2005). This pilot project did not end and there are now literally hundreds of women’s support and advocacy groups in BC. They are well-funded, well-organized and well-lead. In BC the vast majority of these community-based women’s advocacy and support groups are coordinated through the EVA.

12 Gail Edinger, EVA Regional Coordinator, and was the first Chair of the Vancouver Community Coordination Committee Pilot Project, 1989.
13 Edinger points to the seminal work of Linda Meleod in, Wife Battering in Canada: the Vicious Cycle Linda Meleod, as starting domestic violence advocacy in Canada.
Contemporary

The literature of the past three decades reflects the paradigm shift in domestic violence—from private family matter to significant social problem and criminal justice matter—and since the early 1980s, domestic violence literature has grown in breadth and volume. Early domestic violence studies were focused on arrest and the effect that this had on recidivism. Later studies focused on the various criminal justice responses to domestic violence. Contemporary studies focus on community coordinated responses where the advocacy and societal responses to domestic violence merged. However, using the measure of recidivism to evaluate a program or intervention has remained a constant. The definition recidivism has varied, the data used to score recidivism has varied but the core question of whether woman is safer after a particular intervention or support program has not changed—it is still assessed through recidivism.

Evaluations

N.O. ICAT’s mandate, structure and operations make it a CCR and many evaluations of CCRs can be found in the literature but, due to methodological issues, these studies are difficult to compare (Babcock & Steiner, 1999; Bouffard & Muffic, 2007; Cattaneo & Goodman, 2005; Exum, Hartman, Friday, & Lord 2010; Feder, Austin & Wilson, 2008). One of the challenges in comparing various domestic violence interventions and their evaluations is that there is no established definition of recidivism which is the predominant measure in these studies. Researchers want to know if a particular program, intervention or combination of interventions has decreased violence as measured by a new domestic violence occurrence. However, comparing studies is difficult when what constitutes a new incident is inconsistent. Other challenges in comparing domestic violence evaluations are that not all CCRs are the same (even among programs that were established as replication studies) and that many are located in the United States (US) where the legal context is different than in Canada (Visher, Harrell, Newmark, & Yahner, 2008; Garner & Maxwell, 2008; Post et al, 2010). One Canadian CCR, HomeFront, located in Calgary, Alberta, arguably has the most comprehensive CCR evaluation in Canada but it not directly comparable to the ICAT approach because HomeFront has a domestic violence court as a key component of their program while the N.O. ICAT does not. Also, the HomeFront evaluation examined the individual components of their program whereas the N.O. ICAT is more interested in the collaboration between their agency partners and the overall results (measured by recidivism), than the component parts. In summary, finding a program evaluation that is directly comparable to the N.O. ICAT would be difficult and none were found.

There are various reasons for researchers to use different measures of recidivism including time and resource constraints and the specific focus of the study. But, perhaps the most salient issue is data access. For example, a health care professional studying the impact of a primary screening program for domestic violence must, by virtue of their relationship to the individuals involved, rely on victim reporting because they do not have access to criminal records or police reports. A
criminal justice actor working outside a police service may have access to arrest reports or criminal convictions but not police reports or ongoing contact with victims. Transition house or other social service agency personnel may have victim reporting information but not police or court records. The result is that different researchers have access to different measures and their studies and evaluations are constrained by this access. This is also true for researchers’ access to qualitative data.

Being a serving police officer and having the benefit of collaborating partners that are advocacy personnel has advantages in regards to data access. For example, it allows for a research design that can readily identify a comparison group of offenders. It also facilitates access to risk factor data, police data and information from clients. However, the close relationship that an evaluation team has to the program leaves open the criticism of a biased evaluation. I have tried to address this perception of bias by giving a balanced review of the literature. For example, included in this paper are many studies that report no effect or mixed effects of an intervention. I have included studies and meta-analyses that criticize various research projects for methodological issues. I have also included studies that set out problems and challenges to CCRs. Drawing on a balanced review of the literature, the aim is to produce a proposed methodologically sound evaluation design and instruments.

2.2 METHODOLOGY

The N.O. ICAT has been functioning for more than three years and is the model upon which other coordinated responses in other BC jurisdictions are being structured. “E” Division’s OSB is mandated with continuous enhancement of police service delivery initiatives and coordinates most research initiatives in the Division (OSB website). Domestic violence is a national and divisional priority (RCMP, 2011, part 2.4). “E” Division has an established and formal partnership with the CCWS and senior management from the RCMP sit on the provincial working group that guides the CCWS (CCWS, 2012; “E” Div Ops Manual 2.4.3, 2011). “E” Division policy requires RCMP members to collaborate with community groups and other government agencies to reduce the incidents of domestic violence and although the format of this collaboration is not explicitly stated in the operations manuals, it is the ICAT model that is being adopted and implemented throughout “E” Division (“E” Div Ops Manual, 2.4.1.3, 2011).

The goal of the N.O. ICAT is to decrease the risk of serious bodily harm or death for victims of intimate partner violence and both the N.O. ICAT and the OSB want to know if the N.O. ICAT is meeting its mandate; that is, is the N.O. ICAT protocol keeping women safer?

Literature Review Purpose, Process and Search Parameters

To understand the ICAT process, I attended one of the new committee training seminars—Working Collaboratively to Identify and Respond to Risk, The Southern Gulf Islands Partnership for Women’s Safety, Salt Spring Island, May 29-30, 2012. Subsequent to attending the training seminar, I conducted a preliminary literature review on the source documents referenced in the workshop’s training material. These were largely secondary literature documents, government
publications, policy and legislation relevant to high-risk domestic violence cases in BC. Early in this process, I also attended an N.O. ICAT session and met with the founding N.O. ICAT members as a group and individually on a number of occasions to build the logic model, discuss the work and guide my research.

From the training material, the related references and these meetings, I developed my search parameters, terms and information sources. My search terms included various combinations of the terms “Community Coordinated Response”, “Domestic Violence”, “Program Evaluation”, “Recidivism”, “Intimate Partner Violence”, ”Violence against Women”, “Treatment”, “Collaboration”, “Coordination” which I used in conjunction with the various search operators. I conducted searches of the McPherson Library holdings using the various search engines, databases and the Public Administration subject guide. I also obtained assistance from the Public Administration Librarian who assisted with searches of McPherson holdings. I obtained the assistance of staff at the Canadian Police College (CPC) Library who conducted searches on my behalf after I set out my general topic and search parameters. Much of the material at the CPC is in hard copy and it was mailed to me. This is a service available to serving Canadian police officers. In addition to library holdings, I searched the open internet using these same search terms and located numerous advocacy sites, community program websites and think-tanks many of which had their own publications, research and reports. Also available on the open internet were Coroner’s Reports and other government publications such as policy documents. Government and government-affiliated websites were also a source of information. These were identified through open internet searches and by identifying the funding agencies for various research projects. Using my professional contacts, I identified a number of unpublished manuscripts. I also contacted and have had ongoing correspondence with an expert in the field of risk assessment through whom I validated in the use of the ODARA risk assessment tool (discussed further below). Being a serving RCMP officer allowed access to RCMP policy which is located on an in-house internet site known as the Infoweb.

Being unfamiliar with the contemporary domestic violence research, my literature review was initially very broad. I located material from social scientists, advocacy groups, the courts, feminists and health and mental health practitioners, to name a few. I also found studies that were specifically conducted as program evaluations and others that were in fact program (or response) evaluations but were not so named the nomenclature of “program evaluation” being a more recent development in domestic violence literature. From this research a number of themes emerged. First, the majority of the studies conducted over the past 30 years have been North American and consequently most of the literature is North American. Some literature emerges from the United Kingdom (UK), Australia and New Zealand but the majority of studies come from the US. Therefore, although this literature review principally discusses North American studies, and predominantly US literature, this was not by design; rather, it is a reflection of the proportion of the research that is funded by the US.
Organization of the Literature Review

The organization of this literature review was emergent in nature. In the early 1980s, two decades of pressure from advocacy coalitions, academic discourse and one seminal study—Sherman & Berk, 1984 (discussed in detail below)—coalesced into broad adaption of pro-arrest and charge policies across the US (Dixon, 2009). Researchers questioned the strength of the link between arrest and recidivism claimed by Sherman and Berk (1984) and this resulted in a series of replication studies known as SARP (also discussed in detail below) (Dixon, 2009). Whether the SARP studies were the catalyst for the explosion of domestic violence research that followed or whether they were simply part of a that phenomenon, the SARP studies can be seen as the starting point of a narrative which is the study of societal responses to domestic violence. That narrative starts with Sherman & Berk (1984) and ends with CCRs. This literature review is organized, in part, to illustrate this narrative.

There are also other branches of research that emerge during the past three decades such as offender treatment, risk factor identification, risk assessment and program evaluation, to name a few. Many are germane to contemporary CCRs which, by their nature, incorporate these response components but it was not possible to include a review of all this literature in this paper. Therefore, the literature included in this review is that which can be seen as part of the ongoing narrative of societal responses to CCRs—early responses, uncoordinated responses and CCR theory and practice—plus a review of the literature that is specific and integral to the N.O. ICAT and a future program evaluation. This includes risk assessment literature and government reports and inquiries which catalyzed the formation of the N.O. ICAT. Other literature, although relevant to CCRs and components of ICAT, has been largely excluded. Consequently, the organization of this paper resulted from the nature of the literature, of the N.O. ICAT and the initial broad request to complete a program evaluation.

Figure 1 shows the conceptual framework of the literature review contained in this report. It highlights the focus on recidivism as a core measure of domestic violence response strategies and the principal themes notably: (i) early responses; (ii) uncoordinated responses; (iii) community centered responses; (iv) inquiries, inquests and reports; and (v) risk assessment. These are the major subsections of the literature review section of this paper.
This narrative is not the only one in the literature as one’s view is influenced by the lens through which they look; mine was a researcher’s lens. My filters were my professional background, law enforcement, my position as a graduate student and, my goal of creating a program evaluation. There are other narratives in the literature—a treatment or feminist narrative, for example. But the societal-response-to-domestic-violence narrative is, arguably, the principal one found in the literature, if judged by the volume and traceable impact of various studies.

2.3 Strengths and Limitations

In this literature review, I have identified the key measure used in assessing women’s safety—recidivism. In reviewing societal responses to domestic violence, I set out how this measure emerged in the literature, the challenges researchers faced in using it as a measure and the steps that they took to address these challenges. In recounting this narrative, I have also identified the trend towards coordination and collaboration of previously uncoordinated responses. I have reviewed literature that underpins contemporary CCR theory and practice. I have also reviewed the literature on risk assessment and how it applies to an ICAT-type response. Finally, I have
reviewed the specific drivers of the ICAT response. I have covered the material from which one could develop the design and key performance measures of an ICAT-type program evaluation which focused on overall effectiveness, information sharing and collaboration. The information in this literature review was used to inform the construction of the N.O. ICAT logic model (Appendix “A”) and develop the proposed evaluation design and its instruments (Appendix “B”, “C” and “D”) which are very similar to other evaluations found in the literature.

However, it is beyond the scope of this project to cover all of the topics in domestic violence literature. Such an evaluation would require a large research team, years of study and very large datasets, like the HomeFront program evaluation (discussed below). This literature review is therefore limited to material that is specific to the conceived N.O. ICAT evaluation—assessing the overall impact on women’s safety and collaboration and information sharing within contemporary CCRs. I have not included, for example, detailed information with respect to offender treatment programs (even though the N.O. ICAT has such a component) nor considered the ongoing debate in the literature about the effectiveness of these programs. Also, I have not summarized the literature specific to the other individual components a contemporary CCR, such as health care or child services or considered evaluating these individual components. I have not analyzed in detail the various statistical methods that different researchers have used to control for pre-intervention recidivism risk; rather, I have identified that this needs to be addressed. And, I have reviewed only the literature relevant to the tool proposed to accomplish this for the N.O. ICAT evaluation. Finally, I have not discussed the theoretical constructs of program evaluation as it was not a topic of significance in the literature reviewed. Moreover, including all these topics would have required more financial resources, a larger evaluation team, more data (which would have been difficult to obtain) and a longer time frame. All of this was beyond the scope of this project.

2.4 DELIVERABLES
The deliverables for this project are a program logic model and a report that identifies the background, theory, composition and operations of contemporary CCRs. It will also identify research designs, instruments and common measures used to evaluate CCRs. From this material a rigorous program evaluation can be conducted of the N.O. ICAT program.
3.0 LITERATURE REVIEW

Since the early 1980s domestic violence literature has grown exponentially. The pressures exerted by the Battered Women’s Movement and legislative changes in the decades prior to the 1980s changed domestic violence from a private or family matter to a significant social problem and criminal justice issue (Barner & Carney, 2011; Bonanno, 2008; Cramer, 2004; Post et al, 2010). Following this paradigm shift, the institutional response to domestic violence also moved from victim-focused, such as transition houses providing for women’s safety, to offender-focused such as the criminal justice system holding offenders to account (Barner & Carney, 2011; Post et al, 2010). The literature, in breadth, scope and volume, is a reflection of this changed paradigm. Whereas there was comparatively little literature on societal responses to domestic violence in the early 1980s, by the early twenty-first century the volume, breadth and complexity of the studies in the literature had dramatically increased. Contemporary domestic violence research is being conducted by criminologists, the judiciary, legal professionals, physiologists, health care professionals and social scientists. The research topics include criminal justice responses, societal responses, feminist perspectives, cultural determinants, risk factors and risk factor analysis, among others.

3.1 EVALUATING SOCIETAL RESPONSES TO DOMESTIC VIOLENCE

The body of literature that concerns evaluating societal responses to domestic did not began with the nomenclature of “program evaluation”, which, in the domestic violence literature, is a more recent term. However, these early studies did all try to answer the question of whether a specific intervention (such as arrest) occurring within a larger system (such as the criminal justice system) decreased the re-offence rates of offenders more than some other intervention; that is, they asked if women were safer after the arrest of an offender than they would have been had the offender not been arrested. In this sense these early studies were program evaluations with one measure—recidivism. In contemporary evaluations, this fundamental question has not changed. Researchers are still trying to answer the question of what interventions keep women safe, as measured by recidivism.

What has evolved, however, is the complexity of societal responses to domestic violence and the ways in which researchers are assessing recidivism. For example, from the early arrest studies of the 1980s researchers learned that not all offenders were equally likely to re-offend—individual, relationship and societal factors influenced recidivism risk—and, these factors needed to be considered in evaluating a particular program. This complicated research. Evidence also suggested that it was the cumulative effect of various interventions (such as arrest, criminal sanctions and women’s advocacy) that would prevent re-offending. As coordinated interventions and collaboration of services emerged, new challenges that affected the efficacy of these programs also surfaced. These challenges included the collaboration process between agencies of different histories and mandates. Different agencies also had different goals that could seem, at times, to be at cross-purposes. Finally, agencies very often had different organizational cultures,
misunderstandings of their partner agencies’ cultures and mandates and worked in silos. It has taken time to move through these challenges. The challenges, sophistication and complexity of contemporary CCRs are also reflected in the literature.

By the time contemporary CCRs emerged, many included program evaluation as a key component. These evaluations were complex and difficult to conduct. Modern CCR program evaluations control for pre-intervention risk in a variety of ways including program design and by using various statistical methods. Consequently, they are more rigorous and more time consuming than the early arrest and uncoordinated response studies. Typically contemporary CCR evaluations use a mixed method approach with quantitative data from police reports and qualitative data form victim reports and partner agency surveys. However, the fundamental question at the core of these evaluations remains—are women safer—is as it was when first asked in Minneapolis Minnesota, in 1981.

3.2 EARLY RESPONSES

The Minneapolis Experiment

The seminal study on domestic violence is the 1981 Minneapolis, Minnesota, arrest study conducted by Sherman and Berk (1984). This was an experiment conducted in conjunction with the Minneapolis, Minnesota, Police Department. It was explicitly designed as a study to test two competing sociological theories in the context of domestic violence: the specific deterrence hypothesis and labeling theory. The former predicts that the pain of punishment deters people from committing the crimes for which they are punished; the latter predicts the opposite—that punishment (and labelling criminals) often makes people more likely to commit crimes (Sherman & Berk, 1984, p. 261).

The Minneapolis study ran over an 18-month period (Sherman & Berk, 1984). Police officer participants, who had received experiment-specific training, randomly applied one of three intervention strategies when responding to calls of misdemeanor domestic violence: arrest; removing the offender from the premises; or, some form of counseling/mediation (Sherman & Berk, 1984). Victims were contacted at two-week intervals for up to six months after the initial incident and asked about new offences (Sherman & Berk, 1984). Official police records were also used to determine if there were any new offences (Sherman & Berk, 1984).

With police records as a measure of recidivism, Sherman and Berk (1984) found that those offenders who were arrested had a recidivism rate that was half the recidivism rate of offenders who were assigned to the separation group (p. 267). The advice group was not statistically distinguishable from either the arrest or separation groups (Sherman and Berk, 1984). Although, as acknowledged by Sherman and Berk (1984) at the time, there were some challenges to the

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14 Misdemeanor is an American legal term that indicates the classification of offence. Misdemeanor offences are punishable by no more than 1 year in jail and/or a fine (Legal Information Institute, n.d). The Canadian equivalent is s. 266 of the Criminal Code which is classified as a dual procedure offence.
experimental design of this study such as post-intervention victim follow-up and officers not following the protocol, Sherman and Berk (1984) statistically adjusted for these inconsistencies and argued that their results were still valid—arrest did deter recidivism.

THE SPOUSAL ASSAULT REPLICATION PROGRAM
The results of the Minneapolis study were announced in the New York Times, reported in over three hundred American newspapers, broadcast on major television networks and discussed in nationally syndicated columns and editorials—it was a big deal (Garner, Fagan & Maxwell, 1995, p. 4). Their study and the resulting media attention, decades of pressure from advocacy coalitions and academic discourse resulted in the rapid and broad adoption of pro-arrest policies across the United States (US) (Dixon, 2009). The Sherman and Berk (1984) study was also the impetus for six large and well-funded US studies, collectively known as the Spousal Assault Replication Program or SARP, aimed at duplicating Sherman and Berk’s results (Barner & Carney, 2011; Dunford, 1990; Dunford, Huizinga, & Elliott, 1990; Garner et al, 1995). A multisite replication of the Minneapolis experiment, SARP, was funded by the National Institute of Justice (Maxwell et al, 2001). It was created explicitly for the purpose of analyzing and cross-analysis of the data from the Minneapolis and replication sites (Maxwell et al). The studies were located at five different locations: Charlotte, North Carolina; Colorado Springs, Colorado; Dade County, Florida; Milwaukee, Wisconsin; and, Omaha, Nebraska (which had two studies in one city).

Omaha, Nebraska
Omaha Nebraska was the site of two SARP studies in one city. The first study was to test the deterrence effect of three different police actions—mediation, separation or arrest—in cases of misdemeanor domestic violence (Dunford, Huizinga & Elliot, 1990). The first protocol was initiated if the offender was present at the time of police attendance and if probable grounds existed to believe that a misdemeanor offence had been committed (Dunford et al, 1990). It was the same as the original Sherman and Berk (1984) experiment.

The second protocol was initiated in situations where the offender had left the scene prior to police attendance (Dunford, 1990). This formed the second study; it was an augmentation of the Minneapolis experiment. It was initiated because researchers estimated that up to half of the domestic offenders leave the scene prior to police arrival (Dunford, 1990, p. 632). When an offender leaves the scene prior to police attendance, the victims are normally left to seek a warrant through the legal system on their own (Dunford, 1990). This second protocol however, required police to pursue the warrant on behalf of the victims in half of the cases and leaving the status quo in the other half—the victims had to pursue the a warrant themselves (Dunford, 1990). Consistent with the other SARP studies, both experiments used police-reported recidivism as well as victim-reported recidivism as measures; however, the follow-up time frame was six

15 Sherman and Berk’s original study (1984) is commonly included in the SARP group.
months for the arrest study and 12 months for the warrant study (Dunford, 1990; Dunford et al, 1990).

Dunford et al (1990) found that arrest had no overall effect on the prevalence or frequency of re-offending but neither did it appear to place victims in greater danger of any further violence (as was the case in other studies which are discussed below). However, the women who had police pursue arrest warrants on their behalf experienced fewer re-assaults (measured in prevalence, frequency, and time to new offence) than those offenders who were only advised of how to get an arrest warrant issued (Dunford, 1990). This was true whether official police reports or victim interviews were used to score recidivism (Dunford, 1990). Men for whom warrants were not police-pursued were twice as likely to be arrested for an offence against the same victim within the follow-up period as men who were subject to a warrant pursued by police (Dunford, 1990, p. 642).

Given that there was no effect of arrest, Dunford et al (1990) called for those who respond to domestic violence incidents to start considering new strategies.

Charlotte, North Carolina

This study, conducted in Charlotte, North Carolina, examined three treatment options for officers attending a domestic violence misdemeanor offence where police had a discretionary power to arrest. The treatment options were: providing advice to and/or separating the couple; giving a court appearance notice (called a citation) to the offender to answer to the charge; and, arresting the offender, if permitted by state law (Hirschel, Hutchison III, & Dean, 1992). Cases excluded from the study were those where the victim insisted that the offender be arrested, where the offender assaulted an officer and where the officers believed that the offender posed an imminent threat to the victim (Hirschel et al, 1992). In each of these situations the offender was always arrested.16 Researchers followed each eligible case for six months to determine if there were any new domestic violence offences. Recidivism was measured by official police reports and victim interviews.

The Charlotte study authors concluded that “the results of this experiment are decisive and unambiguous…arrest of misdemeanor spouse abusers is neither substantively nor statistically a more effective deterrent to repeat abuse that than either of the two police responses examined in this location” (Hirschel et al, 1992, p. 29). These authors further noted that:

“The dynamics of domestic violence in general, and the abuse of female spouses in particular, are so complex and intertwined with historical, traditional, psychological, political, and social forces that it may be unreasonable for any short-term action by the

16 Note that this could result in the highest risk offenders being removed from the study.
criminal justice system to have a significant deterrent effect” (Hirschel et al, 1992, p. 31). 17


colorado springs, colorado

The Colorado Springs replication examined the effects of four randomly assigned treatments for domestic violence offenders who were arrested subsequent to a misdemeanor offence (Berk, Campbell, Klap & Western, 1992). The four treatment options were: an emergency protection order for the victim (an EPO) and the offender’s arrest; an EPO and crisis counseling for the offender; an EPO only; and, no EPO but crisis intervention to restore order at the scene (Berk et al, 1992). After on-scene police officers determined that the case met the eligibility requirements, random treatment assignment done by police dispatchers with the prescribed treatment being received in 82% of cases (Berk et al, 1992, p.174). Recidivism was measured by police reports and victim interviews (Berk et al, 1992). Similar to other studies, police action outside the random assignment was attributable to “upgrading”—arrest in place of, or in addition to, the assigned treatment. In this study the counseling and restoring order was upgraded to arrest largely for the same reasons as in the Minneapolis experiment (Berk et al, 1992).

An additional goal of this study was to examine the possibility of a differential effect of arrest on those who were employed or in the military (Berk et al, 1992). In order to accomplish this, the authors combined their data with the data from the Milwaukee and Omaha results (which they had available). To make these data more comparable, they collapsed the categories of treatment into arrest versus everything else (Berk et al, 1992). Berk et al (1992) found that there was a positive effect of arrest for socially bonded offenders 18 and that this effect was even stronger for those who were in the military. Although the overall effect of the pooled data across all three sites (Milwaukee, Omaha and Colorado Springs) showed that arrest had no effect on recidivism, Berk et al (1992) did not focus on the overall effects because the impact of offender characteristics were not yet well understood; that is, Berk et al (1992) did not consider the average effect of arrest on the combined group of offenders because this “depend[ed] in part on the particular mix of the relevant offender classes” (p. 179). They go on to say that “…varying proportions of offenders in the different offender classes could produce varying [average] effects” (p. 179). In retrospect, and in the context of an ICAT evaluation, this finding is significant—Berk et al (1992) are saying that examining recidivism without regard to offender characteristics (and, as later research would illustrate, relationship and societal factors) is not informative. Two corollaries of this finding are that in the absence of data on the factors that influence recidivism, the effectiveness of a particular treatment modality is suspect; and, when

17 In retrospect, it is difficult to see these comments as anything but an early call for multidimensional and integrated societal responses—CCRs—yet in many areas, including Canada, it is as least a decade before CCRs formalize.
18 “Socially bonded” was not the term used by Berk et al (1992) to describe offenders for whom there was a positive effect. Berk et al (1992) describe these offenders as those who “have a lot to lose by being arrested” (p. 170) or those with a “stake in conformity” (p. 160). Socially bonded is the contemporary term.
conducting research on treatment modalities one needs to control for pre-arrest risk. These two concepts were not well-understood in these early studies.

Berk et al (1992) end their paper with a discussion of the policy implications of their research. They raise the issue of different responses for offenders based on risk and suggest that those who are at a higher risk to re-offend be subject to stricter judicial restraints (Berk et al, 1992). Further, they suggest making victims less vulnerable by, for example, encouraging them to use local women’s shelters\(^{19}\). They also call for further research with respect to determining what factors, other than employment, separate offenders into a high-risk or low-risk category. Finally, they acknowledge that even if these other issues are resolved, it will be a challenge to find a way for police officers to assess this risk in practice.

Miami (Dade County), Florida

This study was conducted in Dade County (Miami), Florida. Like the Colorado Springs experiment, it was different than the original Sherman & Berk (1984) study in that its main focus was not just the effect of arrest on recidivism but the differential effect of arrest on those socially bonded as measured by marital status and employment status (Pate & Hamilton, 1992). It was also different in that it explicitly set out stricter eligibility guidelines for qualifying cases (Pate & Hamilton, 1992). For example, in addition to the occurrence having to be for misdemeanor domestic violence, both the victim and suspect had to be on scene on police attendance, the victim could not be in imminent danger, the police officer could not be assaulted during the response and there could not be any warrants or other court conditions for either the complainant or suspect (Pate & Hamilton, 1992). This was explicitly laid out at the start of the study whereas in the Minneapolis study these were the factors that removed certain incidents from the Minneapolis study (and skewed the results). The recidivism data used were victim reports and official police reports (Pate & Hamilton, 1992). The time frame, as with the majority of the studies, was six months after the precipitous incident (Pate & Hamilton, 1992). The Dade County replication tried to determine if the effect of arrest was greatest among those who were employed, those who were married or those who were both employed and married. Put another way, they asked: is the effect of arrest greatest on those with the highest level of social commitment?

Pate and Hamilton (1992) found no overall effect of arrest. However, when Pate and Hamilton (1992) controlled for employment status, they found that arrest had a positive effect on those who were employed and a negative effect on the unemployed; that is, those who were arrested and employed committed fewer new offences (about half as many) against the same partner as those who were unemployed (Pate & Hamilton, 1992, p. 675). The overall result of no effect of arrest was due to these two opposing effects offsetting each other (Pate & Hamilton, 1992).

\(^{19}\) The author appreciates that these suggestions might be a bit naive, and even patriarchal, but they are brought up here in order to show origins of CCRs.
There was a moderate effect of arrest on those who were both employed and married but this was due to their employment status (Pate & Hamilton, 1992).

**Milwaukee, Wisconsin**

This study examined the effects of three randomly assigned treatments for domestic violence offenders who were eligible for arrest subsequent to a misdemeanor offence (Sherman et al, 1992). The three options were: a standard arrest and subsequent release on $250 cash bail; a standard arrest with an expedited release on the offender’s own recognizance; and, a standard police warning in place of arrest (Sherman et al, 1992). The most significant difference between the arrest treatments was the time an offender spent in custody. In the standard arrest and cash bail offenders were in custody for 11 hours or more whereas on the expedited release the average in custody time was only three hours (Sherman et al, 1992, p. 149). The majority (98%) of the cases received the assigned random treatment which was in contrast to other studies where officers followed their assigned random treatment much less often (Sherman et al, 1992, p. 147-148).

Sherman et al (1992) concluded that there was some evidence to suggest that in the short term arrest decreased recidivism; no evidence to support a long term effect of arrest on recidivism; and, some evidence to support an escalation in recidivism in the long term. In addition to these overall conclusions, these authors also analyzed recidivists based on “individual characteristics” such as the presence of a prior arrest record, employment status and relationship status. One of their main conclusions from this analysis was that there was a positive effect of arrest (both types) in comparison to a warning being issued on offenders who were socially bonded (Sherman et al, 1992). However, for those with a low stake in conformity (i.e. those who were not socially bonded) arrest did not have a positive effect on recidivism—arrest of either type did no better than issuing a warning in preventing another offence (Sherman et al, 1992). Interesting about this finding (and for the purposes of this paper) is that these individual characteristics re-surface in literature as risk factors; and, risk factor analysis and determining their ability to predict recidivism becomes an independent and significant branch of research in the following decades. Sherman et al (1992) conclude that their study “…suggests a need for other approaches to control domestic violence among marginal persons, such as greater investment in battered women's shelters…” (p. 169). This study therefore can be seen as suggesting other avenues of research (such as risk factor analysis) and other societal responses to domestic violence (such as CCRs).

**SUMMARY**

The original findings from each of these sites were mixed and these mixed findings resulted in numerous papers, re-analyses and meta-analyses of theses original data (Garner et al, 1995; Hilton et al, 2007; Maxwell et al, 2001 & 2002). However, as with the original findings, the results of these later analyses have also been mixed (Hilton et al, 2007; Hoffart and Clarke, 2004a). Researchers have found arrest to have a positive effect on recidivism, no overall effect
on recidivism, a decreasing effect on select offenders and an escalating effect on others (Garner et al, 1995). Maxwell et al (2001), noting that the original studies had already been subject to seven meta-analyses, conducted a more recent meta-analysis in which they controlled for offender characteristics. They concluded, contrary to the original authors, that arrest had a positive effect on recidivism (Maxwell et al, 2001; Maxwell et al, 2002). However, as Hilton et al (2007) note “the effects of arrest on wife assault recidivism remain unknown” (p. 1335). The debate continues. 20

3.3 UNCOORDINATED RESPONSES

In part due to the lack of clear evidence of arrest as a specific deterrent to domestic violence, a number of jurisdictions began looking at the effect that other criminal justice system components had on recidivism. Emphasizing a criminal justice response was also consistent with the growing societal view that domestic violence was a criminal matter, not a private one, and that offenders should be held to account.

Research that examined one or more criminal justice responses to domestic violence included studies that assessed whether women pursuing a civil restraining order experienced less violence than those who did not. Also studied was the effect that pursuing criminal charges had on the level of repeat violence experienced by women. Tolman and Weisz (1995) studied the effects of arrest and prosecution on the reoccurrence of domestic violence while controlling for recidivism risk factors. Murphy et al (1998) studied the effects that successful prosecution, probation, offender monitoring and court ordered counseling had on recidivism rates. However, similar to the earlier arrest studies, uncoordinated criminal justice intentions had mixed results with some studies showing a positive overall effect (decreased recidivism) while others showed no effect.

**Positive Effect**

Due to the mixed results from the SARP studies Richard Tolman and Arlene Weisz (1995) examined the combined effect of arrest and prosecution for domestic violence in Dupage County, Illinois. Tolman and Weisz reviewed all domestic violence incidents reported to police over three-month period that involved a male offender and female victim. They tracked the offenders over the next 18 months. Logistic analysis regression showed that arrest significantly deterred subsequent domestic violence calls for service. Further, the effect was more pronounced for offenders who had a previous history of domestic violence. This study’s findings were directly opposed to other similar studies, all the original SARP results and all the meta-analyses of the SARP data.

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20 As a serving Canadian police officer, I see the debate on whether arrest deters further violence as moot—arrest in a Canadian legal context is not intended to indeterminably deter future violence. It is authorized under s. 495 of the Criminal Code for the purpose of establishing identity, securing evidence, compelling an individual to court and preventing repetition of the offence (in the immediate or near future). Under Canadian law, arrest is not equated to punishment and therefore asking the question, as Berk and others did, of whether the punishment of arrest deters further violence, is simply the wrong question. I suspect most Canadian police officers would hold a similar view.
In January 2001 McFarlane et al (2004) studied the efficacy of women seeking protection orders in preventing future incidents of domestic violence in Houston Texas.21 This study was conducted specifically because recent similar studies of protection orders had mixed results—some studies showed a positive effect (domestic violence incidents decreased) while others showed that the act of pursuing a protection order actually increased incidents of domestic violence (McFarlane et al, 2004). The authors identified a number of methodological issues with these previous studies including low response rates, short follow-up times and no comparison groups and their study was designed to correct for these shortcomings (McFarlane et al, 2004).

McFarlane et al (2004) followed 150 women over a period of 18 months who had filed for protection orders. They found that those who filed, regardless of whether the order was granted or not, experienced significantly less violence than those who did not file. Violence was assessed through victim reports and physical assault, harassment and workplace harassment were considered new incidents. McFarlane et al (2004) also conducted statistical analyses to determine if the women who sought orders were significantly different from those who did not seek orders. They determined that the women did not differ with respect to age, employment status or relationship status with the abuser. McFarlane et al (2004) attributed the decrease in violence to the action of the women having moved, by virtue of filing a protection order, the violence from the private domain to a public one; it was not the involvement of the justice system that was the cause of the decreased violence experienced by some of these women. Another possibility is that the act of pursuing a protection order was empowering and introduced a sense of control in the lives of these women which had the effect of increasing their safety, a proposition advanced recently by some researchers, such as Jane Ursel (Tutty et al, 2008; Ursel, 1998).

In 2009 the US Department of Justice commissioned a report to review what domestic violence field practitioners and researchers were saying about the domestic violence. The report focused on criminal justice responses. Significant findings in this report include the finding that specialized police domestic violence units are more likely to collect sufficient evidence to prosecute and convict offenders (Klein, 2009). Specialized police response is also more likely to result in the victim leaving the abuser sooner and results in a higher reporting of re-abuse if that occurs (Klein, 2009). The odds of a domestic violent offender re-abusing if his case was handled by a specialized unit was roughly half of those being handled by a non-specialized unit (p. 34) notwithstanding that the cases investigated by the specialized unit were more severe and the offenders had more significant risk factors (Klein, 2009). Interestingly, Klein (2009) also found that victim satisfaction with the criminal justice system was related not to whether the victim had advocacy support but rather to concrete law enforcement activities such as issuing a warrant, arrest or a protection order being issued. Victim dissatisfaction resulted from such things as: the victim being arrested; child protection agencies being called; the police making assumptions or

21 A protection order is the US a civil process similar to what in Canada would be called a restraint order, granted under section 810 of the Criminal Code.
not listening to the victim; the police taking sides against the victim; and, the criminal justice system doing nothing (i.e. no strong court sanction) (Klein, 2009). This is important because victim confidence in the police response can lead to greater reporting whereas victims who believe the criminal justice response was poor or endangered them, were less likely to report subsequent victimizations (Klein, 2009). Victim satisfaction (and engagement) with the criminal justice response (including police response) is critical to a successful domestic violence intervention as Ursel argues (Tutty et al, 2008; Ursel, 1998).

**No Effect**

In large part due to perceived methodological issues published in previous papers (including Tolman and Weisz’s study (1995) discussed above) Davis, Smith and Nickles (1998) conducted a study using a large dataset from Milwaukee County, Wisconsin on the effect that arrest and prosecution had on domestic violence recidivism. Davis et al (1998) randomly sampled domestic violence court cases approved for prosecution (n=669) and those not approved for prosecution (n=464) (p. 437-438). In order to control for pre-arrest recidivism risk, Davis et al (1998) used logistic regression based on criminal history, demographics and index offence information variables. They used a six month follow-up period and police reports for recidivism data. Davis et al (1998) found no evidence that prosecution outcomes affected recidivism rates for misdemeanor domestic violence cases; that is, it did not matter if the court case ended in a dismissal of charges, probation or ordering the offender to a batterer’s intervention program (Davis et al, 1998).

In 2003 Peterson published a report for the New York City Criminal Justice Agency which evaluated a mandatory arrest and charge policy against a non-mandatory charge policy in misdemeanor cases of domestic violence. The study’s goal was to determine whether case outcomes and criminal sanctions, such as conviction and jail sentences, affected re-arrest rates. Peterson (2003) drew his data from the New York criminal justice database over a three-month period in 1998. His first hypothesis was that domestic violence offenders who were subject to more severe criminal sanctions would have lower recidivism rates as measured by re-arrest (Peterson, 2003). The second hypothesis was the inverse of the first: offenders whose cases were not prosecuted would have higher recidivism rates (Peterson, 2003). Peterson (2003) found no support for the first hypothesis—recidivism rates were actually higher for defendants whose cases had more severe outcomes. He also found little support for the second hypothesis. What Peterson (2003) did find was that weak community ties and serious criminal history were factors in recidivism rates. One of Peterson’s (2003) suggested policy implications was tailoring different criminal justice interventions for different types of offenders.

Citing the need for continued research on the efficacy judicial monitoring for deterring further domestic violence offences, Rempel, Labriola and Davis (2008) conducted a study in the Bronx Misdemeanor Domestic Violence Court. This court deals with an extremely high volume of cases which are predominantly intimate partner violence cases but also cases involving friends and family (about one-fifth) (Rempel et al, 2008, p. 189). The court has specially trained
judges, prosecutors and case management staff (Rempel et al, 2008). This study was a quasi-experimental design that sampled offenders from 2002 - 2003 who were convicted and sentenced to a conditional discharge (Rempel et al, 2008). The experimental group had a judicial monitoring component whereas the control group did not (Rempel et al, 2008). All offenders were convicted of a similar charge and were contemporaneous; the total sample size was just over 1000 (Rempel et al, 2008). In order to control for pre-intervention recidivism factors, Rempel et al (2008) recorded a number of demographic, criminal history and situational factors, compared the two groups and found that they were not significantly different. Rempel et al (2008) followed the offenders for one year post-conviction and used arrest (from police records) as a recidivism measure. They found that judicial monitoring did not reduce the likelihood of re-arrest for a domestic violence, or any other, offence nor did it result in a longer “survival times” (the length of time before a new occurrence) for a domestic violence, or other, arrest (Rempel et al, 2008).

In a study conducted in Baltimore, Murphy, Musser and Maton (1998) examined the cumulative effects of a criminal justice response on male domestic violence offenders. This study separated the individual effects of the prosecution and post-prosecution elements of the response. And, because each element of the criminal justice system response was first considered separately, researchers were able to determine the individual effects of various the elements and the cumulative effect of the response. This was very informative when considering the progress from the early arrest studies to contemporary CCRs.

This research was conducted to test the hypothesis that individual criminal justice sanctions each have a small effect on an offender’s behaviour but when combined together, the effects are cumulative (Murphy et al, 1998). Murphy et al’s (1998) concept was that each component of a criminal justice response might affect each offender differently but having several components opens the possibility of impact for these different offenders. For example, a socially-bonded offender might respond to arrest, conviction and a period of probation as this is impactful given his background. However, an offender with a more significant criminal history might not respond to a simple conviction but may also need the arrest, conviction, jail, probation, judicial monitoring and court-order counseling. Further, should the more seasoned offender breach his conditions, he would need to see immediate and meaningful consequences. Essentially, Murphy et al (1998) hypothesized that the greater the intervention of the system, the more likely that the offender will see that his actions are socially unacceptable.

The progressive sanctions in this study were as follows: a guilty finding in court; a suspended jail sentence; monitoring by a probation officer; a non-contact order; and, court ordered domestic violence counseling (Murphy et al, 1998). Cases were selected from the Maryland’s District Attorney’s office with 235 cases that met the researchers’ selection criteria (Murphy et al, 1998, p. 268). Recidivism was measured at 12 to 18 months depending on the age of the case (Murphy et al, 1998). Multiple regressions were conducted to control for offence severity and offender background variables (Murphy et al, 1998). Murphy et al (1998) found that lower recidivism
rates were correlated with the cumulative effects of successful prosecution, probation/monitoring, court ordered counseling, attending the counseling intake session, and completion of counseling. The more involvement an individual had with these interventions, the lower the recidivism rates: those successfully prosecuted had slightly lower recidivism rates than those who were not; further decreases in recidivism were seen for those who were sentenced to probation; and, those who were sentenced to and completed counseling did not re-offend at all (Murphy et al, 1998).

**Summary**

In the last two decades there have been countless studies examining the efficacy of criminal justice interventions aimed at reducing domestic violence. However, similar to the arrest studies, debate continues on the how effective criminal justice responses have been as a specific deterrent. Also similar to the ongoing arrest debate, evaluating the efficacy of criminal justice responses to domestic violence is complicated by a number of methodological issues. Indeed, there are few studies that have methodologies that have not been criticized.

Pederson (2008) argues that conviction and jail sentences are generally ineffective; no-drop prosecution policies and post disposition judicial monitoring do not deter offenders; and, the effects of specialized domestic violence courts are mixed. Pence and McDonnell (1999) argue that arrest and no-drop policies fail because they ultimately hinge on the victim and, in failing, make the victim the problem. Further, structural problems with the criminal justice system make prosecution of domestic violence offences difficult—cases are slow to process; victims are placed in an adversarial position to offenders; systems and agencies frame domestic violence and responses on a single incident basis; and, scripts and silos exist among the various legal system actors (Pence & McDonnell, 1999). Hoffart and Clarke (2004a) concluded that there is no strong link in the literature between prosecution and recidivism.

Ursel (1998) presents perhaps the most enlightened and well-developed view of criminal justice responses. She notes that critics argue mandatory charging will never work but also points out that mandatory charging cannot be viewed in isolation—it has to be viewed within the entire context of the criminal justice [and social] response. She also argues that the historic criminal justice view of success is one-dimensional and single incident driven. She compares this historic view to a surgical intervention—the surgeon conducts the procedure and sews up the patient after which time the illness is gone. However, she argues that domestic violence is a much more complex problem and defining success in terms of arrests and/or convictions for single incidents misses the broader context of domestic violence; the traditional view ignores the victim. “For many, the roots of their victimization lie deep within their personal histories, their family histories, and certainly, our culture of violence” (Ursel, 1998, p. 76). A single criminal justice or social response will not miraculously extricate a woman from the complex web of love, fear, dependency and intimidation that is the context of her life (Ursel, 1998). She argues that these definitions of success must change in order for these women to see justice (Ursel, 1998).
Ursel (1998) argues that the criminal justice system needs to see the paradox in family violence intervention: a criminal justice response (an arrest or bail denial for example) may solve an imminent threat but the response may be limited. This one response cannot stop the cycle of violence so the criminal justice system cannot define itself on the success of this one intervention or it will fail (Ursel, 1998). Instead, it needs to see itself as redressing complex power imbalances for abused women and it might then be a useful intervention for at-risk women (Ursel, 1998). In this sense the whole issue of “success” needs to be framed as a process rather than an event as framing the issue in the latter context leads it up for failure (Ursel, 1998).

The foregoing discussion notwithstanding, there is, on the balance, evidence that criminal justice system responses that include prosecution and offender monitoring have at least some effect on recidivism, although perhaps not a definitive one. For example, The Murphy et al study (1998) does lend support to the theory that it is the cumulative effect of responses that will keep women safe (and prevent men from re-offending). It is this theory that is the premise of contemporary CCRs—that is, the cumulative effect of criminal justice sanctions, offender treatment and enveloping the victim in support and services will keep women safe. This idea also places uncoordinated criminal justice responses in middle of the societal-responses-to-domestic-violence narrative.

3.4 COMMUNITY COORDINATED RESPONSES

CCRs are a relatively new development (Hoffart & Clarke, 2004a). They were developed in response to a perceived lack of service coordination for victims and because neither the criminal justice system nor community groups were successful at addressing the problems on their own (Hoffart & Clarke, 2004a). Research suggests that the more services available to women the more likely she is to break the cycle of violence and leave her abusive partner (Ad Hoc Federal-Provincial-Territorial Working Group [FPT Working Group], 2002; Hoffart & Clarke, 2004a). The first CCR, and in many ways the Gold Standard, was the Duluth Model.

CONTEMPORARY CCR THEORY

The Duluth Model

Prior to the 1980s, many victims of domestic violence received little support from the legal system as the provisions available to them were seldom enforced by the criminal courts, the civil courts or the police (Shepard & Pence, 1999). In fact, advocates felt that the legal system often created barriers for or caused harm to women rather than representing or empowering them, particularly those of low socioeconomic status and minorities (Shepard & Pence, 1999). Frequently, the legal system did more harm than good such as arresting women or coercing them to court (Shepard & Pence, 1999). So, in 1975, women’s advocates in Minnesota, wanting to provide help and support to women who were victims of domestic abuse, gathered in Duluth to address these concerns and in 1980, the Domestic Abuse Intervention Programs (DAIP) emerged.
DAIP sponsored two forms of advocacy, individual advocacy and institutional advocacy. Individual advocacy consisted of trained individuals supporting a battered woman to pursue her interests and choices in the legal system (Shepard & Pence, 1999). The advocate was trained to support regardless of whether she agreed with the choices a woman made so long as it was ethical to do so (Shepard & Pence, 1999). DAIP’s advocates supported battered women by helping them with their financial issues, legal issues, health issues and meeting their emotional needs (Shepard & Pence, 1999). Institutional advocacy was collective action aimed to change institutions (Shepard & Pence, 1999). Over the past 30 years DAIP-type models have been adapted throughout the US, Canada and other Western democracies (Shepard & Pence, 1999). The model that DAIP founded is now commonly known as the Duluth Model and is widely considered to be the Gold Standard in CCRs.

There are eight key elements in the Duluth Model. The first is a coherent philosophy centered on victim safety—successful intervention frameworks require a common and cohesive vision (Shepard & Pence, 1999). This vision must have the goals of victim safety, offender accountability and changing the social climate of violence against women as its core (Shepard & Pence, 1999). However, creating a coherent philosophy, as Pence (1999) notes, can be challenging as different advocates can have different views. Pence (1999) uses the term “texts” to describe the scripts that actors from the various agencies follow. These texts were produced for, are propagated by and become the standard for the individuals in the organization (Pence, 1999). The Duluth Model holds that the key to institutional change is to infuse the idea of women’s safety into these texts (Pence, 1999).

The second component of the Duluth model is developing best practices for each of the contributing agencies. Pence and McDonnell (1999) point out that in domestic violence cases there can be many people involved in between the time a woman calls for police assistance to the time that the file is concluded. Pence and McDonnell (1999) argue that, given the complexity of the situation and the variety of agencies involved, there must be clear protocols in place. Duluth’s major accomplishment in this regard has been to get community service agencies, government agencies, police, Crown and judges (in a limited role) working together and consistently focusing on women’s safety (Pence & McDonnell, 1999). However, they caution that coordination must not be the primary goal—it is a means to an end with the ultimate goal being victim safety, holding offenders to account and changing societal tolerance for IPV (Pence & McDonnell, 1999).

The third component of the Duluth Model is enhanced networking among partner agencies. The lack of coordination among justice system actors has resulted in numerous tragedies over the past three decades (Gamache & Asmus, 1999). DAIP’s strategy was to take the lead in coordinating a response by proactively networking with all relevant agencies (Gamache & Asmus, 1999). DAIP also recognized that networking is a dynamic process and built feedback loops into the Duluth

22 Programs in Canada, like the EVA and CCWS, fill both roles.
Model (Gamache & Asmus, 1999). DAIP asked for commitment from the heads of each partner organization but for a worker charged with service-delivery duties to be the interagency contact (Gamache & Asmus, 1999). DAIP then worked with that worker (Gamache & Asmus, 1999). DAIP held quarterly agency-head meetings but relies heavily on informal communications, meeting between individuals at the service-delivery level and group training (Gamache & Asmus, 1999). In the Duluth model, all agencies share information (Gamache & Asmus, 1999). DAIP also monitors the various agencies’ adherence to policy and has agreements to change how other agencies are following their own protocols (Gamache & Asmus, 1999). Gamache and Asmus (1999) note that although conflicts and tensions are inevitable, it is the shared successes that build teams and relationships. They also argue that this is imperative for project evaluation, which DAIP conducts continuously (Gamache & Asmus, 1999).

The next component in the Duluth Model is building monitoring and tracking systems. This is tracking how individual cases (the micro level) and the system (the macro level) respond to women and their cases; and, how these cases proceed as measured by established program goals (outputs) (Falk & Helgeson, 1999). In a fragmented legal system no one person tracks a case from the 911 call through court disposition and beyond. In this sense, the “file” becomes a proxy for a woman’s voice (Falk & Helgeson, 1999). Falk and Helgeson (1999) describe it as “a new kind of silence [that] is rooted in the institutional methods of processing these cases” (p. 90). In this context, creating systems, procedures, protocols, hardware and software for information collecting, storing and sharing provides accountability and facilitates information sharing (Falk & Helgeson, 1999). DAIP (quite remarkably) built its own database system to which all agencies (sheriffs, civil court, probation, etc) contribute and have access (Falk & Helgeson, 1999). Falk and Helgeson (1999) set out three key elements in information management—information must be recorded and submitted in a consistent form (accuracy); it must be received and filed (file management); and, it must be retrievable by those who need it (information sharing). The information sharing component of the Duluth Model is directly related to the key recommendation in Honouring Christian Lee, Marie Turpel-Lafond’s report (2009) tabled in the BC legislature in 2009 and was the precipitous factor in the creation of the N.O. ICAT.

The next two components concern providing services for battered women and their children. The Duluth Model refers to these components as: Advocacy for Battered Women and Undoing the Harm to Children. Both these components centre on ensuring that support services are available for women and their children. These services include such things as income support and safe housing (Shepard, 1999a). Duluth provides access to a legal advocate from the community, not one from the legal system who may have different goals (Shepard, 1999a). Duluth also has a child visitation centre that helps alleviate the problem created by a legal system that frequently sees mother and child as separate entities and tacitly facilitates offenders using their children as a power tool (McMahon, Neville-Sorvilles & Schubert, 1999; Turpel-Lafond, 2009).
Holding offenders to account is another key principle in the Duluth Model. It is also a critical component of ICAT but where Duluth focuses on their Batter Intervention Program (BIP) for offender accountability, ICAT (who also has a treatment component) rely more on the criminal justice system (Mederos, 1999). 23

The final component of the Duluth Model is program evaluation. DAIP staff evaluate overall effectiveness as measured by the impact the program has on women’s lives; to determine if policies and procedures are being followed; to assess if program goals are being met; and, to help address resource allocation in an environment of scarce resources (Shepard, 1999b). Shepard (1999b) argues that domestic violence programs have an ethical obligation to evaluate the impact of their actions but cautions that women’s confidentiality and safety must be the priority. To meet both these objectives DAIP uses consent forms and has policies and processes to minimize the risk that evaluation poses (Shepard, 1999b). DAIP’s cautious approach results in lower victim response rates (low victim response rates are a common challenge to evaluators) but finds the ethical balance between collecting information to make better programs and minimizing negative consequences to clients (Shepard, 1999b). In regards to the actual practice of evaluation Shepard (1999b) notes that the evaluator must have a good idea of what each component does and that “evaluators need the expertise of practitioners in the field to develop questionnaires, instruments, and measurement procedures that truly reflect the phenomenon being studied” (p 187). She also notes that one can evaluate the components of the CCR or the entire effective although the latter is more difficult (Shepard, 1999b). Because victim safety (as measured by recidivism) and offender accountability are central to any CCR, Shepard (1999b) considers quasi-experimental and mixed methods research designs best. The four sources of data that should be considered are direct observation; service records; data from service providers; and, information from program participants (clients and professionals) (Shepard, 1999b).

The BC Government Coordination Framework
In 2010 (the same year VAWIR was published) the MPSSG and VSCPD published the “Framework” for community coordination. The Framework is intended to assist local-level community groups in enhancing their response to IPV. The introductory sections of the Framework set out best-practices and core principles for contemporary CCRs. These include: using a cross-sectoral response; ensuring that the response is client-centered and focused on women and children’s safety; and, advocating a locally developed response in order to reflect the needs and resources of local communities and cultures (VSCPD, 2010).

The Framework lists eight key principles central to any contemporary CCR. The first principle is that responders should focus on the safety of women and their children and consider risk assessment and safety planning (VSCPD, 2010). They should also communicate risk and use well-tested and recognized risk assessment tools to guide their judgment (VSCPD, 2010). The

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23 There is an ongoing and acrimonious debate regarding the efficacy of offender treatment programs (Babcock, Green & Robie, 2004; Dutton 2006 & 2007; Feder, Austin and Wilson, 2008; Gondolf, 1999 & 2007).
second principle is that responders should apply a gender lens when developing and implementing responses (VSCPD, 2010). This is a primary aggressor policy that recognizes the dynamics of IPV; that it is a power-based crime. Promoting coordination as a best practice—with the justice system, health care, child protection, social services, education systems and victim services as key components—is the next core principle (VSCPD, 2010). The fourth principle is to promote that services are timely, proactive, empowering and respectful as timeliness is important to maintain the willingness of the victim and advocacy empowers her (VSCPD, 2010). Information sharing is the fifth identified principle (VSCPD, 2010). Information sharing has been identified in numerous studies and publications as a key element in victim safety and empowerment (VSCPD, 2010). Addressing barriers to victims’ participation in the criminal justice system is also a key requirement in an effective CCR (VSCPD, 2010). Women’s reluctance to participate in the criminal justice system often revolves around fears of the legal system and the CCR needs to address these fears and support women as they move through the process (VSCPD, 2010). Focusing on prevention—which can include youth education strategies, primary prevention strategies, early intervention strategies, recidivism reduction strategies such as safety planning, public awareness and working with offenders—is the seventh principle (VSCPD, 2010). The last principle is to build monitoring, evaluation, and accountability into all IPV responses (VSCPD, 2010). New initiatives should include this from the start and it should be built into the operating programs (VSCPD, 2010).

CCR STUDIES AND PROGRAM EVALUATIONS

Over the past two decades, researchers have conducted countless studies to determine the efficacy of domestic violence interventions. Many of these studies were rooted in the SARP and built upon the uncoordinated criminal justice studies that followed SARP. Like SARP, many of these studies and evaluations were specifically established to test reproducibility, used comparison communities and were funded by the US Federal government. In this way, these studies can be seen as part of the narrative that has been societal responses to IPV.

Pre-2000

Syers and Edleson (1992) compared arrested offenders assigned to batterers’ treatment to non-arrested offenders who were not assigned to batterer's treatment and interpreted the lower recidivism rate for the arrested group as support for a coordinated approach (the Duluth Model). Both groups of victims received support from advocacy groups. Syers and Edleson (1992) also found that better educated men were less likely to recidivate.

Tolman and Weisz (1995) examined the deterrent effect of arrest and prosecution by analyzing all domestic violence cases reported to police in a three month period in Dupage County, Illinois. Their follow-up period was 18 months and they used logistic regression to control for pre-arrest risk (Tolman & Weisz, 1995). Tolman and Weisz (1995) found a significant relationship between arrest and the deterrence of subsequent domestic violence offence but not between
prosecution and and deterrence of subsequent domestic violence offence (Tolman and Weisz, 1995). They interpreted success as a result of a coordinated response (Tolman & Weisz, 1995).

Orchowsky (1999) evaluated a coordinated response in Alexandria, Virginia, and found an increased use of arrest but that arrest was not associated with reduced offending; he made no conclusions with respect to the efficacy of coordination (Garner & Maxwell, 2008).

Babcock and Steiner (1999) assessed the effect of arrest plus a CCR consisting of court-ordered BIP and/or substance abuse treatment, probation, and a specialized police response unit. Treatment completers were compared with non-completers (drop-outs) and those who were incarcerated instead of treated (Babcock & Steiner, 1999). Recidivism was considered as the existence of another domestic violence offence over a two-year period according to police records (Babcock & Steiner, 1999). After controlling for prior criminal record and demographics, Babcock and Steiner (1999) concluded that their study “…provides suggestive evidence that the coordinated domestic violence intervention may have a statistically significant but small impact on reducing domestic violence” (p. 46).

However, as with the arrest and uncoordinated criminal justice system responses early CCRs studies were criticized for methodological issues. Garner and Maxwell (2008) criticize these studies for not having used comparison sites, having used a variety of standards for success, using small sample sizes and not having delineated or measured “coordination”. They argue that that these studies should not be considered for testing the “…crime-control effect of coordinated responses” (Garner & Maxwell, 2008, p. 528). In a policy essay, Peterson (2008) also concludes, in relation to these four studies, that “…the new policies and practices [criminal justice interventions] have not been effective at “specific deterrence,” that is, deterring IPV offenders from committing new IPV offenses” (p. 537).

Post-2000 Studies
The STOP (Service Training, Officers, and Prosecutors) Violence against Women Formal Grant Program is a US federally funded program aimed at promoting a collaborative response between criminal and civil justice systems and victim services (Burt et al, 2001). STOP was a massive US program having funded more than 9,000 sub-grantees between 1995 and 2000 for a total of over $440M USD (Burt et al, 2001, p. viii). The 2001 STOP report concluded that funding for coordinator and specialized criminal justice positions and trust and equality between collaborative agencies are the critical elements to building effective community-wide collaborations (Burt et al, 2001). Survey results of partner agency staff combined with site visits found that STOP collaboration vastly improved the ability of partner agencies to meet the needs of women who were victims of domestic violence (Burt et al, 2001). Agency partners who were surveyed and had been working in programs both pre- and post- STOP funding noted the dramatic increase in their ability to respond to women’s needs (Burt et al, 2001).
The Greenbook Initiative

In the 1999, the Family Violence Department of the (US) National Council of Juvenile and Family Court Judges published “Effective Intervention in Domestic Violence & Child Maltreatment Cases: Guidelines for Policy and Practice” (1999); or, as it is commonly known, the “Greenbook” (Edleson & Malik, 2008; The Greenbook Initiative [the Greenbook], 2009). The Greenbook is the result of meetings between these judges and child welfare experts who met to discuss best practices and procedures concerning child maltreatment in domestic violence situations (Edleson & Malik, 2008; The Greenbook, 2009).

Over the next five years, the US government funded a six-site demonstration project to implement the Greenbook’s principles and recommendations (Banks, Dutch & Wang, 2008; Edleson & Malik, 2008). This US demonstration-site project gave $350K over five years to six different sites to create a collaborative framework and system to work with families that were co-affected by domestic violence and child maltreatment (Banks, Dutch & Wang, 2008, p. 880). The money was provided only for the collaborative work—training, planning, policy development, etc (Banks, Dutch & Wang, 2008). The actual service delivery was to come out of normal operating costs of the individual agencies (Banks, Dutch & Wang, 2008). An evaluation of this project was completed by two groups, both led by Banks, and it resulted in two papers both published in the same issue of the Journal of Interpersonal Violence in July 2008. One study focused on case reviews (Banks, Landsverk & Wang, 2008) while the other focused on inter-agency collaboration (Banks, Dutch & Wang, 2008). In regards to inter-agency collaboration, the evaluation focused on three questions: what did these sites do to make the collaboration work? What facilitated and what challenged collaboration? What changes did they introduce?

The interagency collaboration research was conducted by sampling a variety of stakeholders at the six sites using surveys and structured interviews at the start of the project and during annual site visits (Banks, Dutch & Wang, 2008). Many of the respondents had previous collaborative experience and they represented a cross-section of agencies and levels within each agency (Banks, Dutch & Wang, 2008). Banks, Dutch and Wang (2008) grouped their findings as obstacles to collaboration and facilitators of collaboration. Top-rated obstacles to collaboration were conflicting cultures and scarcity of resources (Banks, Dutch & Wang, 2008). Other challenges to collaboration that were indentified included: that collaborations require change between and within agencies at multiple levels; the philosophical differences between organizations; the lack of clear roles and responsibilities between agencies; poor support from management, poor information sharing, inadequate resources and lack of ongoing training opportunities; and, negative professional stereotypes and lack of trust (Banks, Dutch & Wang, 2008). All these things slow the collaborative process (Banks, Dutch & Wang, 2008). Top rated facilitators of collaboration were having the right people at the table and in leadership positions as well as having solid and trustworthy interpersonal relationships between the service providers (Banks, Dutch & Wang, 2008). Other facilitators of collaboration that were identified included:
shared and adequate resources including administrative staff and the time to do the work; recruiting staff with the right skill set; joint training; appropriate team building, support and supervision; and, monitoring and evaluation of services (Banks, Dutch & Wang, 2008). Collaborations also needed well-defined roles and responsibilities, commitment from senior and front-line staff, strong leadership, and a multi-agency steering committee (Banks, Dutch & Wang, 2008). Finally, they required effective communication structures across and between agencies (Banks, Dutch & Wang, 2008).

Banks, Dutch & Wang (2008) also identified a number of best practices to collaboration such as the use of shadowing programs and cross training which enhanced institutional empathy—the understanding of another agency’s culture, limits and roles. Front-line workers also attended meetings (Banks, Dutch & Wang, 2008). To combat the power imbalance that often develops between agencies—those that are government funded, such as child welfare, tend to have more power than those that rely on donations or volunteer workers such as advocacy groups—cross-system dialogue, better integration between the governing body and advisory boards and co-location were encouraged (Banks, Dutch & Wang, 2008). Various sites also engaged other stakeholders in addition to their formal partners (Banks, Dutch & Wang, 2008). Co-location of services also helped to bridge the gap between partners with different histories, focuses and cultures (Banks, Dutch & Wang, 2008). The Banks group found that constant attention and investment of energy was required for effective collaboration but that the benefits included improved service delivery and fewer inter-agency barriers (Banks, Dutch & Wang, 2008). Inter-agency information sharing and agency partners putting the needs of the woman and children at the forefront of their work were also benefits of collaboration (Banks, Dutch & Wang, 2008).

The Judicial Oversight Demonstration

In the late 1990s the US funded a large project mandated to build on previous criminal justice and community intervention models to IPV (Visher et al, 2008). Similar to the SARP studies almost a decade earlier, one of the project’s goals was to test the feasibility and expandability of the program (Visher et al, 2008). The program was a coordinated response to IPV centered on offender accountability—the courts, and specifically judges, were to decrease offender recidivism by holding offenders to account through stricter monitoring, sanctions and treatment requirements (Visher et al, 2008). Another specific goal of the project was to better integrate community partners with the criminal justice system actors (Visher et al, 2008). The project was known as the Judicial Oversight Demonstration or JOD; and, it was a major ($22M USD) study (Pederson, 2008, p. 539).

JOD was implemented in three locations: Dorchester, Massachusetts; Milwaukee County, Wisconsin; and, Washtenaw County (Ann Arbor), Michigan; each JOD site had a corresponding control site (Visher et al, 2008). The key components at each JOD site were: consistent initial

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Note that this was a post-adjudication study.
police response to domestic violence occurrences; pro-arrest and primary aggressor\textsuperscript{25} policies; coordinated responses by law enforcement; coordinated victim advocacy including individualized safety plans; and, strong offender accountability including referral to BIPs, intensive offender supervision and strong sanctions for breaches (Visher et al, 2008). The JOD was a longitudinal study (11 months) that used victim interviews, offender interviews and criminal records as data (Visher et al, 2008). Researchers used inverse probability weighting to correct for selection bias/potential selection bias and multivariate models to correct for case characteristics (individual and relationship risk factors) (Visher et al, 2008).

The results of the JOD were mixed. JOD received positive support from justice system agencies, service providers, and victims (Visher et al, 2008). Results also showed that there was a relationship between the JOD-site victims and the likelihood that these victims would contact the criminal justice system and community service agencies (Visher et al, 2008). JOD also found an impact in certain subgroups of offenders—those who were young for example and where the initial occurrence was a less serious physical assault (Visher et al, 2008). Improvements were made in offender monitoring, consistent sanctioning and increased supervision; however, these positive results did not translate into reductions of repeat offences or victim perceptions of their own safety (Visher et al, 2008). JOD’s major finding was that:

“Improvements were made in offender monitoring, consistent sanctioning, and increased supervision. However, these changes did not translate into gains in victim perceptions of their safety or into reductions in repeat violence in all sites” (Visher et al, 2008 p. 496).

Further, there was no significant difference between JOD sites for serious threats/intimidation or serious physical assaults (Visher et al, 2008).

\textit{Centre for Disease Control}

In 1995 the US Congress allocated funding to non-profit organizations to establish collaborative partnerships coordinating local IPV prevention strategies (Post et al, 2010). By 2000, the Centre for Disease Control and Prevention (CDC) founded 10 CCRs in different communities across the US (Post et al, 2010). The purpose of these CCRs was to enhance community-based primary and secondary IPV prevention strategies and programs (Post et al, 2010).\textsuperscript{26} The CDC-sponsored programs included providing victim support such as housing, counseling, social service support and legal assistance (Post et al, 2010). CCR projects also sponsored training, workshops and conferences to improve criminal justice policies and practices and to promote collaboration (Post et al, 2010). The community-based response was in addition to and in collaboration with an enhanced criminal justice response which included pro-arrest and prosecution policies, strict

\textsuperscript{25} Primary aggressor policies were a response to situations where police arrest both parties at a domestic violence incident. The policies require police to determine and arrest only the primary aggressor in an incident. Primary aggressor determination is made by reviewing all the situational and contextual factors of the incident within the context of domestic violence and the cycle of abuse.

\textsuperscript{26} Primary prevention is preventing IPV in the first instance and secondary is preventing recidivism.
offender monitoring and court-mandated treatment programs (Post et al, 2010). Primary intervention strategies included school-based programs and public information campaigns (Post et al, 2010). Although each community delivered support in different ways, the overall philosophy of the programs was consistent (Post et al, 2010). The goals of these projects were: to change the beliefs, attitudes, and knowledge of citizens in regards to IPV; to increase citizens’ knowledge of the services available for IPV victims; and, to decrease the overall prevalence of IPV (Post et al, 2010).

As the CDC-sponsored programs ran, CDC coordinators and researchers were fully aware of the lack of IPV prevention seen in the published JOD findings (Post et al, 2010). They were also aware of some of the design and implementation challenges inherent in the JOD study and explicitly set out to address these methodological issues by using a more rigorous design and evaluation approach (Post et al, 2010). In order to evaluate the impact that CCRs had on the knowledge, behaviours and attitudes that adults held in relation to IPV and IPV services, CDC researchers used stratified random sampling to identify 600 adults in each of the 20 sites (Post et al, p. 80, 2010). Participants were then interviewed by telephone and asked about their knowledge of IPV, IPV supports and their exposure to IPV both before and after implementation of the coordinated program in their community (Post et al, 2010). After controlling for age, gender, ethnicity, income, and education level researchers found that “…that CCRs do not affect knowledge, beliefs, or attitudes of IPV, knowledge and use of available IPV services, nor risk of exposure to IPV…” (Post et al, 2010, p. 76). In fact, women who lived in communities that had 6-year old CCRs were actually less likely to report aggression than those who lived in communities with a CCR that had been running for only three years (Post et al, 2010).

In discussing these findings, Post et al (2010) noted that the participants were not randomly assigned and that the demographic factors for which they controlled may not have affected IPV rates. Further they suggested that, the effort taken to ensure program consistency notwithstanding, programs were community-developed and may not have been the comparable (Post et al, 2010). Or, similar IPV strategies may have been taken place in the “control” communities (Post et al, 2010). Also noted was that exposure to the CCR was not measured and that it was possible that subgroups of participants were affected but that this effect was masked (Post et al, 2010).

Multi-Agency Risk Assessment Conferences
Supported by legislation, a coordinated approach to domestic violence was well-established in the United Kingdom (UK) when, in 2002, the South Wales Police piloted a risk assessment tool for their front-line police to complete on all domestic violence calls (Robinson, 2006). South Wales’ risk assessment tool was developed by reviewing 47 domestic homicides, identifying relevant research and drawing on professional expertise (Robinson, 2006). It has 15 yes-no questions, has a section for officers’ narratives and was designed to be used by first responders (Robinson, 2006). It was a natural evolution to combine the use of this risk assessment tool with
Multi-Agency Risk Assessment Conferences, or MARACs (Robinson, 2006). The first MARAC was held in April 2003 and had 16 statutory and non-statutory agencies including police, probation, housing and women’s aid and support groups (Robinson, 2006). MARAC initially had monthly meetings but have increased the frequency to bi-weekly due to demand (Robinson, 2006). The meetings provide a forum for information sharing and safety planning for women and children, a process very similar to ICAT (Robinson, 2006). MARAC is a one-stop support centre for women who were victims of domestic violence (Robinson, 2006).

Between October 2003 and January 2005 MARAC was evaluated in two linked studies. The first was authored by Robinson in 2006 and the second by Robinson and Jasmin Tregidga in 2007. Both evaluations were similar in their primary focus and assessed women’s safety using recidivism as a measure. The studies differed, however, in their secondary focus: the first examined overall operations of MARACs—interagency cooperation, collaboration and information sharing—while the second study explored the perceptions of women at high-risk of being re-victimized in regards to service delivery (Robinson, 2006; Robinson & Tregidga, 2007). These two studies are similar to the envisioned of ICAT evaluation.

MARAC evaluators surveyed the representatives from the partner agencies, attended MARAC meetings, conducted structured interviews with the women who had been deemed high-risk but were violence free and analyzed recidivism (Robinson 2006; Robinson & Tregidga, 2007). In the first study MARAC evaluators looked at 146 cases and in the second 102 files (Robinson, 2006, p. 769; Robinson & Tregidga, 2007, p. 1137). Of the 102 files that were identified in the second study only nine women were interviewed (Robinson & Tregidga, 2007, p. 1137). Police reports were used for recidivism data. Major limitations of these studies are that they did not use comparator groups and they had small sample sizes.

Major findings from these studies included a reduction in violence towards these women—about two-thirds of women in the first study (p. 781) and two-fifths in the second (p. 1141) reported no further violence (Robinson 2006; Robinson & Tregidga, 2007). The authors argue that these results, given the elevated risk that these women faced, should be seen as a success but without comparison groups, this is a difficult position to support. 28

Other major findings from these studies were that MARACs increased the workload of the individual agency representatives substantially (Robinson, 2006). This was largely due to the time required to gather database information and attending the MARACs (Robinson, 2006). So time consuming was the work that some contributors were concerned that their involvement

27 Client response rates, as discussed in several sections of the paper, are a common challenge to domestic violence researchers. But, as many researchers correctly point out, given the dynamics of domestic violence and ethical considerations, client response rates will always be a challenge
28 Although a definite base-line recidivism rate is difficult to establish, most studies show recidivism rates in the 20-40% range with near 30% being a common value.
might be stopped by their supervisors as the MARAC work cut into their other duties (Robinson, 2006). Respondents were unambiguous that the primary output of MARAC was information sharing—this was seen as the key ingredient needed to keep high-risk victims safe (Robinson, 2006). Common views held by the agency representatives were that: it takes a MARAC structure and culture to share information; and, that it is the formal protocols, informal relationships and trust that make MARAC work (Robinson & Tregidga, 2007). From the structured-client interviews all women noted that it was positive to have the agencies working together as each agency knew a woman’s needs (Robinson & Tregidga, 2007). Women also felt that being aware of each agency’s role also increased their feelings of safety (Robinson & Tregidga, 2007). One point of concern for women was child custody access issues which often left women in positions where they were vulnerable and had to relinquish some of the power that they had reclaimed (Robinson & Tregidga, 2007). They also reported that partners used child access to harass (Robinson & Tregidga, 2007). When women were asked for the critical element that ended their violence, they answered that it was their own strength and determination and then the availability of the support system (Robinson & Tregidga, 2007). These women felt that they first had to choose to end the violence, but once that choice is made a system needs to be in place upon which they could rely (Robinson & Tregidga, 2007).

The last finding speaks to the absolute requirement of any domestic violence response to be woman centered—it is a matter of empowerment. Programs that intend to protect and serve women must focus on this aspect of service delivery. Numerous papers in the literature either indirectly or directly raise this issue. The National Institute of Justice (NIJ) looks at the issue indirectly. It found that if women felt that the criminal just system endangered them or had a poor response, they would not report violence; conversely, victim confidence in the police response can lead to greater reporting (Klein, 2009). This is an indirect measure of empowerment—women are reluctant to give up control of their lives and safety if they lack confidence in the system. Tutty et al (2008) also found that one of the principal reasons women do not call the police and are reluctant participants in the criminal justice system is a lack of faith in the police response and the legal system. In fact, a sense of empowerment was more important to women than what the police or courts actually did (Tutty et al, 2008). Ursel (1998) puts it directly—“if a woman can leave an abusive relationship without calling police she will do exactly that...women avoid the criminal courts whenever alternatives are available” (p. 73). Ursel (1998) describes the change in perspective required of the criminal justice system as a shift from a heroic rescue response to a slow process of empowerment.

**HomeFront**

HomeFront is a non-profit organization established to collaborate with criminal justice and community policing partners to reduce domestic violence in the Calgary area (HomeFront, 2013). HomeFront was conceived in 1990 when a variety of agencies from the domestic violence sector
came together to form the Mayor’s Task Force on Community and Family Violence (HomeFront, 2013). The task force combined with the Calgary Domestic Violence Collective and, in 2000, a four-year pilot project was launched with the primary goal of creating a specialized domestic violence court; a year and a half later, it was running (HomeFront, 2013).

Initially conceived as a demonstration project, HomeFront had, from the start, evaluation as an integral component—it was designed around evaluation (Hoffart & Clarke, 2004b). HomeFront’s goals were: to increase victims’ safety through advocacy and facilitating their involvement in the criminal justice system; to hold offenders accountable and provide them with treatment options; to increase access to the justice system for diverse groups; through coordination and collaboration, to decrease service delivery gaps and avoid duplication; and, to increase public confidence in the criminal justice system (Hoffart & Clarke, 2004b). Of these five goals only the first four were evaluated as measuring public confidence in the criminal justice system was deemed beyond the scope of the evaluation (Hoffart & Clarke, 2004b). Recently, HomeFront has added early intervention, outreach and partner support programs (HomeFront, 2013). In this past year, it has also added a high-risk domestic violence component (HomeFront, 2013). Currently HomeFront has dozens of partners including First Nations, various criminal justice agencies (courts, probation, corrections etc), community and advocacy groups, groups representing minority community members, a number of provincial bodies and departments and agencies from the City of Calgary (HomeFront, 2013). HomeFront attributes its success to inter-agency information sharing and communication and identifying and addressing service delivery gaps (HomeFront, 2013). In terms of scope and size, HomeFront is the arguably the preeminent Canadian CCR.

In its current form, HomeFront delivers three principle programs: a domestic conflict response team; a specialized domestic violence court; and, a partner support and high-risk management initiative (HomeFront, 2013). HomeFront’s domestic conflict response team provides collaborative assessment and intervention in cases where a call of domestic violence has been made to police but where charges are not laid (HomeFront, 2013). This program connects individuals to support groups in an attempt to prevent further domestic-related calls for police service (HomeFront, 2013). HomeFront’s domestic violence court is the founding piece of their CCR and its partners include the Calgary and Area Child and Family Service Authority, Crown counsel, the Calgary Police Service, defence counsel, Legal Aid and probation officers (HomeFront, 2013). HomeFront’s partner support program is a post-adjudication program that provides ongoing support to victims of domestic violence (HomeFront, 2013). Their high-risk management initiative provides risk assessment and management for victims at critical points in the court process which are associated to a higher risk of repeat violence (HomeFront, 2013).

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29 The evaluation results from these later additions to HomeFront were not available.
Major differences between HomeFront and ICAT are that: ICAT has no domestic violent court component whereas this was the central reason for HomeFront; ICAT referrals come from the community, any partner agency, the police or anyone else while HomeFront referrals come through the Calgary Police Service; and, HomeFront, in its initial manifestation did not have a high-risk team (it does now) but ICAT was developed specifically for that purpose. These dissimilarities notwithstanding, an examination of HomeFront in relation to ICAT is important for a number of reasons. First, HomeFront is one of only a few well-established, large scale, Canadian CCRs with a track record—it was been running since 2000. Second, HomeFront has completed a comprehensive evaluation. In fact, it was designed as a demonstration project and had evaluation built into its design. Finally, although HomeFront’s evaluation was more focused on individual components than on overall program effect (like the proposed ICAT evaluation), HomeFront is Canadian and shares many components with ICAT.

HomeFront’s evaluation was completed by the Synergy Research Group with Irene Hoffart and Mary Clarke (2004a&b) as the lead authors. The Homefront evaluation is lengthy, over 500 pages in total, and split up into two documents. One document is titled “Final Report” and sets out the evaluation results while the second document is titled “Companion Document” and contains the literature review, various assessment tools and data tables.

In their Final Report Hoffart and Clarke (2004b) set out the important features for a program evaluation of this kind. Those that are germane to the ICAT evaluation include a focus on victim safety and an analysis of component parts and how they work together (Hoffart & Clarke, 2004b). Hoffart and Clarke (2004b) also underline the importance of using both qualitative and quantitative data and controlling for offender characteristics when assessing recidivism (they used multivariate analysis). Collecting stakeholder satisfaction information is also an important aspect in a program evaluation of this nature (Hoffart and Clarke, 2004b). HomeFront’s evaluation included face-to-face interviews and surveys (both individually and in small focus groups) with their agency partners (Hoffart & Clarke, 2004b).

Challenges relevant to an ICAT evaluation that were discussed by Hoffart and Clarke (2004b) include defining recidivism, the most important measure for HomeFront. HomeFront defined recidivism as any domestic violence incident that came to the attention of police whether they were convicted of the offence or not (Hoffart & Clark, 2004b). Hoffart and Clarke (2004b) argue that the reason for using any domestic violence incident reported to police is that the literature shows that this is a good risk indicator and most studies do not require a conviction or a charge to count the occurrence (as would be the case if one just counted criminal convictions). This rationale reflects the discussion in this paper in the Terminology section under the subheading “Domestic Violence”. Hoffart and Clarke (2004b) considered files that were two-and-a-half years old but set 18 months for the time frame for overall recidivism. They also considered a control group and elected to use a pre-post design deciding on eight months pre-program implementation to establish their baseline statistics (Hoffart & Clarke, 2004b).
Hoffart and Clarke (2004b) also found that not being able to contact victims was a significant challenge which had consequences in the criminal justice process (Hoffart & Clarke, 2004b). The reasons for this problem included the worker’s heavy caseload, a lack of current victim contact information and victim reluctance and transiency (Hoffart & Clarke, 2004b). Some stakeholders thought that there was duplication of services and/or too much contact with victims because of this duplication (Hoffart & Clarke, 2004b). Best practices identified by Hoffart and Clarke (2004b) included involving a broad range of community partners, building comprehensive networks based on established policies and procedures, and, as always, making victim safety paramount. Hoffart and Clarke (2004b) also noted that these principles are echoed in the literature but that clashing cultures, objectives and expectations are real challenges. Other hurdles identified by Hoffart and Clarke (2004b) were: complexity—CCRs involve the participation of multiple community and criminal justice players; funding; and, the size of the task—operationally understanding, involving and coordinating these various components is a monumental job and all of these challenges are documented in the literature (Hoffart & Clarke, 2004b).

Hoffart and Clarke’s (2004b) overall findings focused on: recidivism as a measure of victim safety; the domestic violence court times from court process initiation to conclusion; and, interagency collaboration and cooperation. Of these only the first and the last are directly relevant to ICAT (which lacks domestic violence court component). However, as it is widely believed by those who investigate and prosecute domestic violence crimes, time to adjudication and adjournments are valid proxies for safety because it is clear that the longer a case is in the court process, the less likely there is to be a conviction. Although ICAT does not have a domestic violence court, it is possible that a victim’s involvement with ICAT and ICAT’s involvement with the investigation could affect court times; therefore, HomeFront’s court processing times are discussed here. ICAT’s court processing times are identified for evaluation in Appendix “B”.

In terms of recidivism, Hoffart and Clarke (2004b) found that the HomeFront accused persons committed fewer offences, were involved in fewer no-charge incidents and breached conditions less often than non-HomeFront accused persons. However, HomeFront did have higher Peace Bond breach charges but this may be indicative of better monitoring; or, I would suggest, better relationships or feelings of empowerment on the part of the women which could have translated into greater reporting. In relation to the HomeFront domestic violence court, HomeFront’s goals were early case resolution and quick referral of offenders to treatment (Hoffart and Clarke, 2004b). HomeFront reported that they were successful in both areas (Hoffart and Clarke, 2004b). In regards to interagency collaboration, Hoffart and Clarke (2004b) note that this was a very important part of implementing HomeFront but that communication among partners was challenging. To address this issue HomeFront included leaders from each partner agency on the
board of directors and evaluated communication and collaboration separately over the term of the pilot project (Hoffart and Clarke, 2004b).

One positive inter-agency collaboration related outcome of HomeFront that Hoffart and Clarke (2004b) noted was the cultural shifts among partners in regards to their definitions of success. For criminal justice actors success had been defined as only when an offender was arrested and convicted whereas post-HomeFront the focus of success had shifted to victim safety and engagement (Hoffart & Clarke, 2004b). And, as Ursel (1998) argued, in order to assist women who are victims of domestic violence, one needs to redress the complex power imbalances for abused women. In this sense, the HomeFront evaluation finding of improved Crown counsel and police responsiveness to victims’ wishes is a significant.

SUMMARY
Contemporary CCR theory can be found on advocacy and program websites, in government sponsored publications and in the literature review sections of numerous studies and program evaluations. In all cases, it has its roots in the societal responses to domestic violence that predate CCRs—advocacy work in the 1960s and 1970s, the arrest studies of the 1980s, the uncoordinated criminal justice response of the 1990s and the perennial work of countless community, social and advocacy groups.

The first and arguably best-known contemporary CCR is the Duluth Model. It is still considered the Gold Standard of CCRs but it, like other contemporary CCRs, has evolved in large measure due to the numerous studies, program evaluations, inquests and reports published on the subject of domestic violence. Also emerging from studies and evaluations of modern CCRs are a set of well-agreed upon philosophies and best-practices. These philosophies include client-centered service delivery, women’s advocacy, women and children’s safety, holding offenders to account and women empowerment which must transcend societal responses. Best-practices identified in the literature include networking, collaboration, information sharing, creating an evaluation component and risk assessment.

Much of the secondary literature of CCRs (government publications and websites for example) categorizes CCR research as unequivocally supportive of this approach; however, if one closely examines the empirical research this is not the case (Garner & Maxwell, 2008). Much like the arrest and uncoordinated criminal justice studies that pre-date them, CCRs evaluations have been criticized by researchers for methodological shortcomings including: having no comparison groups (a pre-intervention sample or comparison community), small sample sizes, a lack of measures to indicate coordination and other reasons (Garner & Maxwell, 2008; Peterson, 2008). Garner & Maxwell (2008) do not argue, however, that we should stop using CCRs but rather that more rigorous evaluations are necessary. Post-2000, there have been a number of rigorous large-scale evaluations including the JOD, STOP and HomeFront, many of which have shown clear
benefits in a number of areas including coordination, collaboration, information sharing and holding offenders to account. And, although recidivism effects have been mixed, there is evidence in the more rigorous studies to show that CCRs have a positive effect on recidivism. This supports the underlying premise of CCRs—that it is the cumulative effect of a number of response avenues that will effectively address IPV. It also places CCRs at the end of the ongoing narrative that is societal responses to domestic violence.

3.6 INQUIRIES, INQUESTS AND REPORTS
Various government sponsored, judicial and quasi-judicial inquires have been primary drivers of domestic violence policy and responses, including the N.O. ICAT. These inquiries can take a number of forms including Public Inquiries, Coroner’s Inquests and reviews commissioned by a government and/or a police service. It would not be possible in this paper to review all the significant inquiries of the past decade nor all the inquiries that have resulted in changes to VAWIR or contributed to the ICAT protocol. Therefore, the documents reviewed below have been selected for their significance or direct and traceable impact on VAWIR, ICAT or the proposed ICAT evaluation.

The Vernon Tragedy
The Wood Inquiry (1998) that examines the 1996 Vernon tragedy is a good example of how an inquiry can drive policy change.

On April 5th, 1996, Marc Chahal drove to the home of his former in-laws in Vernon, British Columbia; Rajwar Gakhal had left her marriage with Chahal to live with her parents almost a year prior (Wood, 1998). When Chahal arrived, the Gakhal family was preparing for a wedding—Rajwar Gakhal’s sister was getting married (Wood, 1998). Chahal walked up the driveway, shot his former father-in-law then entered the home where he shot to death Rajwar Gakhal, her sister (the bride) and six relatives (Wood, 1998). Two others were wounded. Chahal then drove to a motel room where he killed himself (Wood, 1998).

On April 30, 1996, RCMP Assistant Commissioner Brown asked Josiah Wood, Q.C, to conduct a review of this incident. Wood (1998) surfaced a troubling timeline of events that led up to the Vernon tragedy:

- In December 1993, Chahal made an application for a firearm’s license to Vernon RCMP;
- In April 1994, Chahal and Gakhal were married—they separated a few months later on December 25, 1994;
- In January 1995, Rajwar Gakhal made a complaint to the Vernon RCMP Detachment of domestic violence;
• Three days later, Gakhal filed for divorce in the Supreme Court of British Columbia (BC) citing 17 incidents of abuse (not previously disclosed to the Vernon RCMP) at the hands of Chahal including making threats to kill her and in regards to buying a handgun; and,
• By June 1995, Chahal had two restricted weapon (handgun) registration certificates issued by Vernon RCMP; and,
• It would be these guns with which he would later kill nine people.

Wood (1998) completed his inquiry and made a number of policy recommendations. As a result, “E” Division RCMP made dramatic changes to its domestic violence policy which included: linking RCMP policy to VAWIR; setting out the dynamics of spousal abuse in RCMP policy; and, introducing the concept of a collaborative response to domestic abuse including the use of community-based support groups (this was also recommended by The Coroner’s Inquest into the murders) (Wood, 1998). Further, “E” Division RCMP developed and implemented a three-day mandatory training course for all Regular Members which included training in all aspects of Wood’s recommendations (RCMP, 2000).

**Coroner’s Inquests**
Coroner’s Inquests have been drivers of number of specific policy changes in BC and across Canada. For example, the inquests in relation to the deaths of Arlene May and Gillian Hadley have been cited many times as examples of systems that fail women with tragic consequences and identifiable drivers of Hilton et al.’s (2004) creation of ODARA. These inquests also both make recommendations in relation to collaboration, coordination, information sharing and safety planning.

**Arlene May**
Randy Iles was on his third marriage when he began an intimate relationship with Arlene May (the cousin of his third wife) (“Inquest into the Deaths of Arlene May”, 1998 [Arlene May Inquest]). Arlene became pregnant which is when the abuse started (Arlene May Inquest, 1998). By this time, Iles already had a long criminal history including child abduction, threats with weapon, breach of probation and stalking (Arlene May Inquest, 1998). Arlene went to a women’s shelter where staff encouraged her to report the matter to police which she did (Arlene May Inquest, 1998). Iles was arrested and released on a no-go condition, a no-contact and a condition to surrender his firearm’s licence (Arlene May Inquest, 1998). However, Iles continued to contact and threaten Arlene and he did not surrender his firearm’s licence (Arlene May Inquest, 1998). Further, at the time when he was released for the domestic violence offence against Arlene, he had an outstanding warrant in a neighboring jurisdiction (Arlene May Inquest, 1998). And, by the time that Iles bought a gun and ammunition (under the firearm’s licence that he should have surrendered) there was also an outstanding warrant for breaching his conditions related to the offence against Arlene (Arlene May Inquest, 1998). Iles went to Arlene’s house,
waited for her, briefly held her children hostage before releasing them and then shooting Arlene and then himself (Arlene May Inquest, 1998).

The Coroner’s jury in this case made dozens of recommendations to police, corrections and government. Part of their rationale included the following:

“A 'patchwork' of Victim Services have been formed throughout Ontario due to a lack of communication, co-operation and co-ordination. In order to provide a seamless programme, it would be best if the private and public sectors worked not as competing interests, but together as partners. Their joint efforts would better coordinate all financial and human resources in the common goal of stopping domestic violence, which is at epidemic proportions. A Steering Committee would accomplish this.” (Arlene May Inquest, 1998, p. 7)

Notable jury recommendations and those relevant to ICAT were the following:

- A steering made up of committee members and government in equal numbers should be established to, among other things, ensure seamless service delivery to victims of domestic violence;
- Police should use risk assessments and safety planning. This should be universal;
- It is vitally important that there be victim assistance everywhere and that it be independent from the criminal justice system (community based) to help women make decisions about what is best for them and their children;
- Due to the nature of domestic violence, victims have ongoing relationships with the accused (dealing with property, child access and support issues etc). It is therefore imperative that the victims have a strong voice in the criminal justice system and there should be strong protections between the communications of women and their advocates and lawyers. A study was recommended to see how this could work; and,
- Community-based children’s services, police, medical and child protection services have to work cooperatively and develop consistent protocols (Arlene May Inquest, 1998).

Gillian Mary Hadley

Gillian and Ralph Hadley, 35 and 34 respectively at the time of their deaths, had known each other since public school (“Inquest Touching the Deaths of Gillian Mary Hadley”, 2002 [Gillian Hadley Inquest]). Their parents were, and remain, friends.

Gillian was first married in 1987 and had two children born in 1992 and 1993 (Gillian Hadley Inquest, 2002). Her second child was severely physically challenged and required constant care. In 1996 Gillian and her first husband separated (Gillian Hadley Inquest, 2002).
Since high school Randy had wanted to date Gillian but she refused; after her separation Gillian and Randy began dating (Gillian Hadley Inquest, 2002). Gillian, her two children and Ralph moved in together shortly after and, in 1997, they bought a house together with Ralph’s cousin (Gillian Hadley Inquest, 2002). Gillian, Ralph and the children lived on the main floor while Ralph’s cousin lived in the basement. In the fall of 1997 Gillian and Ralph were married (Gillian Hadley Inquest, 2002).

Gillian’s child required frequent medical care and during one of these appointments bruises were noted on the child (Gillian Hadley Inquest, 2002). A subsequent investigation was inconclusive but a second allegation resulted in the child being apprehended, placed in the custody of his biological father and Ralph charged with Criminal Negligence Causing Bodily Harm (Gillian Hadley Inquest, 2002). Gillian, who initially stood by Ralph, was pregnant with his child at the time (Gillian Hadley Inquest, 2002).

In June 1999 Gillian gave birth to her third child and Ralph had supervised access only owing to the criminal negligence charges (Gillian Hadley Inquest, 2002). Gillian sought counseling as a result of the stress and Ralph agreed to a peace bond to resolve the criminal negligence charges (Gillian Hadley Inquest, 2002). In December 1999 Gillian no longer wanted to be in the marriage (Gillian Hadley Inquest, 2002).

In January 2000 Gillian began a new relationship (Gillian Hadley Inquest, 2002). Ralph found out, assaulted her and was charged with assault, breach and released with no-go and no-contact conditions (Gillian Hadley Inquest, 2002). However, Ralph continued to breach over the next few months and was finally arrested and charged on February 25, 2000 for criminal harassment and breach (Gillian Hadley Inquest, 2002). He was held for a bail hearing but released on February 28, 2000 on strict conditions including a surety (Gillian Hadley Inquest, 2002). It was later learned that he breached these conditions (without the knowledge of the surety) (Gillian Hadley Inquest, 2002).

For the next several months Ralph attended anger management but did not admit that he had a problem (Gillian Hadley Inquest, 2002). He was also getting information about Gillian’s activities from family and close co-workers said that shooting Gillian would solve his problems (Gillian Hadley Inquest, 2002). Gillian was trying to get temporary housing but needed special accommodations for her physically challenged child and proximity to schools; consequently she was put on a waitlist (Gillian Hadley Inquest, 2002).

On June 19, 2000 Ralph called in sick but went to work, cleaned out his locker and paid off his debts (Gillian Hadley Inquest, 2002). The next day Ralph took a cab and went to Gillian’s house (their prior matrimonial home) with a hostage kit and broke in (Gillian Hadley Inquest, 2002). At one point during the incident, Gillian escaped and ran down the street naked but was unable to
get away (Gillian Hadley Inquest, 2002). Neighbours called the police and went to Gillian’s door (Gillian Hadley Inquest, 2002). They were met at the door by Ralph who was holding a gun and had Gillian, who was holding her baby, hostage (Gillian Hadley Inquest, 2002). Gillian tried to escape but Ralph prevented it (Gillian Hadley Inquest, 2002). One of the neighbours managed to grab the youngest child (Gillian Hadley Inquest, 2002). A short time later there was one and then a second gunshot, both Gillian and Ralph were shot in the head (Gillian Hadley Inquest, 2002).

The Coroner’s jury in this case made dozens of recommendations to police, corrections and government. Their opening remarks included:

“Domestic Violence is a crime that is different from other crimes in two ways: The likelihood of repeat violence is common and at most times predictable; [and,] The victim is known in advance.” (Gillian Hadley Inquest, 2002, p. 5)

Notable jury recommendations and those relevant to ICAT were the following:

- That the Attorney General look at ways to shorten the time from offence to trial thereby “...reducing the risk to victims of intimate partner abuse” (Recommendation 18; p. 8);
- That family court cases be expedited where abuse or exposure to violence by the children is indicated. And, that a process of coordination be instituted between the family and criminal court systems with the criminal orders taking precedent over the civil ones;
- That there be second-stage housing, financial support and counseling available for victims of domestic violence and that it be adequate for women and children with disabilities;
- That the Government of Ontario review privacy legislation to determine if agencies can share information on victims in cases of domestic violence;
- That there is coordination of victim services and advocacy within the justice system to avoid duplication of work and confusion of agency roles.
- That coordinating committees be created with a view to coordinating services for all victims of domestic violence for those involved the criminal justice system and those not involved;
- That the Government of Ontario coordinate conferences and symposia on domestic violence; and,
- That the Government of Ontario fund research and program evaluation (Gillian Hadley Inquest, 2002).

Final Report of the Ad Hoc Federal-Provincial-Territorial Working Group
In September of 2000 the federal, provincial and territorial Ministers responsible for Justice established an ad hoc working group to review the policies, legislation and research around domestic violence in Canada (Ad Hoc Federal-Provincial-Territorial Working Group [FPT
Working Group], 2002). The Working Group published a 140-page report in which they outlined a number of findings directly related to ICAT. Three of these are:

- Individual initiatives to address domestic will continue to have a limited effect. A coordinated response across sectors is required. The justice system cannot, and should not, address this problem on its own;
- Uncoordinated efforts will continue to result in inefficient resource use, duplication of effort, disillusionment of staff working within systems, unmet public expectations and compromised victim safety; and,
- Canadian evaluation data suggest that coordinated responses have a positive effect on criminal justice system performance (FPT Working Group, 2002).

The FPT Working Group (2002) made dozens of recommendations many of which were directly relevant to ICAT. Some of those are as follows:

- That jurisdictions support and strengthen at the most senior levels coordination of initiatives responding to domestic violence;
- Referrals are made to a range of accessible supporting agencies and services to meet the multiplicity of victim needs;
- Victims are provided emotional support and crisis intervention;
- Risk assessments and safety planning are conducted;
- Victims services organizations collaborate and coordinate their actions with clear roles between criminal justice based and community support agencies; and,
- Effective information sharing and communication mechanisms exist among actors within, and external to, the justice system (FPT Working Group, 2002).

Domestic Violence Death Review Committee
The Domestic Violence Death Review Committee is a multi-disciplinary panel of domestic violence specialists established in 2003 in response to two major inquests—the inquests into the deaths of Arlene May/Randy Iles and Gillian and Ralph Hadley. It conducts yearly reviews of domestic violence related deaths and makes recommendations to government and other agencies in regards to their findings.

In 2010 a total of 18 cases involving 36 deaths (24 victims and 12 suicides by the offender) were reviewed (Lucas, 2010). All offenders were male and the common cause of death for victims and offenders was stabbing (Lucas, 2010). Common themes in the reviewed cases relevant to ICAT were that:

- Domestic violence can impact the workplace;
- Offenders use information and communication technologies to harass victims of domestic violence;
• There is an increased risk to victims while separating or ending a relationship (Lucas, 2010);
• Because victims and offenders encounter a number of service providers as they interact with the criminal justice system it is critical that these agencies work collaboratively; and,
• Collaborating agencies and ministries often have barriers to sharing information; therefore, information sharing agreements are required to facilitate the sharing of information (Lucas, 2010).

Also recommended was that risk assessment and safety planning should be mandatory for all policing agencies (Lucas, 2010).

_Honouring Christian Lee_
All of the above inquiries and reports have had a direct or indirect influence on domestic violence policy and response in Canada, BC and on the N.O. ICAT. However, Mary Ellen Turpel-Lafond’s report, Honouring Christian Lee (2009), was the precipitous factor in the implementation of ICAT.

In September 2007 Peter Lee broke into what had been the family home in Oak Bay, BC and murdered his son Christian, his estranged wife Sunny Park and his in-laws (Turpel-Lafond, 2009). He then killed himself (Turpel-Lafond, 2009). At the time of the murders, Lee was on a court order not to go to the family home or business (a restaurant in downtown Victoria), not to have any contact with Sunny and not to possess any weapons (Turpel-Lafond, 2009). These conditions were a result of Lee having, several weeks prior, intentionally crashed his vehicle into a hydro pole in an attempt to injure his wife who was also in the vehicle (Turpel-Lafond, 2009). Sunny received severe injuries from the collision including a fractured arm, which required surgery to repair, and significant facial injuries (Turpel-Lafond, 2009). At the time of the murders Lee was also before the courts on forcible confinement and assault charges stemming from an incident with a former employee (Turpel-Lafond, 2009). From the time of the car crash to the time of the murders Lee also stalked Sunny at the family’s dentist office, the family home (when Sunny was not present) and Sunny’s lawyer’s office (Turpel-Lafond, 2009). On more than one occasion this information was reported to Crown counsel, probation and/or the police but was not acted upon (Turpel-Lafond, 2009). Police and other service providers were also aware (at different times) of the Lee’s history of violence and abuse: Lee had assaulted Sunny, psychologically abused and threatened to kill her and forced her to have sex (Turpel-Lafond, 2009). Sunny said that the abuse had been going on for years and she believed that Lee would kill her which she told to a number of different people (Turpel-Lafond, 2009). Lee had had also been a suspect in an arson that had occurred at the family restaurant and had threatened suicide (Turpel-Lafond, 2009). Sunny feared for her life as did other around her (Turpel-Lafond, 2009). Sunny also had a number of barriers to support (Turpel-Lafond, 2009).
As with many other cases of homicide violence and domestic homicide, Sunny and Lee had had significant contact with various government, community and private agencies in the time leading up to this tragedy. These agencies included police from three jurisdictions, a lawyer who was a family friend, medical personnel, child and family services, probation, Crown counsel and certified counselors (Turpel-Lafond, 2009). In the weeks leading up to the murder, individuals and agencies received pieces of information that, when considered together, set out a frightening situation for Sunny and her family. Information that, had any single agency or all the agencies, processed, may have compelled them to take action. However, there was little to no sharing of information between these professionals and no specific information sharing protocols at the time of this tragedy (Turpel-Lafond, 2009).

Noting the specifics in this case, circumstances that had been repeated in many other domestic homicides, suicides and cases of domestic violence, Turpel-Lafond’s report (2009) found an uncoordinated response and a lack of communication and collaboration between agencies at the centre of this tragedy (Turpel-Lafond, 2009). Further, there was no risk assessment or any joint safety plan for Sunny. And, Christian was not safe because his mother was not safe (Turpel-Lafond, 2009). Turpel-Lafond (2009) wrote that:

“The lack of a system-wide domestic violence response across criminal law, child welfare and family justice sectors, and the absence of a thorough and fully informed assessment of the risk of harm and lethality posed by Peter Lee placed Christian Lee and Sunny Park in grave danger without an adequate safety plan.” (p. 33)

Turpel-Lafond (2009) also found a lack of consistent policies and tools across agencies for responding to domestic violence cases.

Turpel-Lafond (2009) made a number of specific recommendations in her report. She called for the Ministry of Public Safety and Solicitor General to lead an initiative that focused on creating a coordinated response to domestic violence in BC. She also called for formalized and coordinated safety planning in domestic violence situations (Turpel-Lafond, 2009). Safety planning was to be collaborative and include risk assessment—Turpel-Lafond (2009) referenced structured tools for this process specifically naming SARA and ODARA (discussed below). ICAT was created to specifically address these recommendations in high-risk domestic violence cases.

SUMMARY
Advocacy coalitions were the initial drivers of domestic violence in Canada and other Western democracies. They added to the discourse that resulted in the various responses and studies of the past few decades and elements of their work remain components in contemporary CCRs. They continue to guide domestic violence policy, directly and indirectly. However, the drivers that one can directly link to contemporary CCRs and to ICAT are the various forms of inquiries, inquests and reviews conducted by the courts or on behalf of government bodies. Sadly, these studies are
autopsies of systems that failed to protect women and their children but their reports have driven the significant positive changes in societal responses to domestic violence over the past decade and, in the case of Turpel-Lafond’s report (2009), resulted in the expeditious implementation of the N.O. ICAT.

In reviewing these inquests and reviews in the context of the domestic violence narrative, it is difficult not to wonder how we could have not arrived sooner at collaboration and coordination of action to combat domestic violence. Why did systems first need to fail women and children, in so many similar circumstances, and for those circumstances to be so closely examined and detailed recommendations made, before we got to where we are now? If one looks at the cumulative evidence from the early arrest studies, prosecution studies, early CCRs and other non-criminal justice system responses, there was more than sufficient information to work towards a more coordinated and collaborative response during the last thirty years. A coordinated (even integrated) response was suggested by many researchers throughout the last two decades, a conclusion that was shouted by advocacy groups. Although the intent of this paper is not to judge societal response to domestic violence, it is also difficult to consider the totality of those responses and not consider this question.

3.7 RISK ASSESSMENT

Risk assessment is important to ICAT for a number of reasons. First, women’s safety is at the centre of ICAT and therefore assessing risk is critical to ICAT’s primary function. Also, in order to increase a woman’s safety, one must mitigate her risk and step-one in mitigating risk is to identify relevant risk factors. Therefore, domestic violence determinants are an integral part of risk assessment. Assessing risk is also important from a legal perspective as it is the “high-risk” designation that allows information sharing between agency partners. Finally, from an evaluation perspective, assessing risk is important so that one can compare an intervention’s effect for individuals or groups who have a similar risk of recidivism.

THEORY

Risk can be defined as the probability, or chance, that some later event will occur and in the context of domestic violence, a definition of risk assessment would be the method of evaluating or estimating the likelihood that recidivism will occur (Hilton et al, 2010). An important consideration in determining the probability that violence will re-occur is the difference between a predictor of recidivism and a cause (Hilton et al, 2010). For example, the number of children and whether they are from a previous relationship does not cause interpersonal violence but they are associated to recidivism and therefore a risk factor; that is, that the children are a good predictor of recidivism is independent of “why” they are a good predictor (Hilton et al, 2010). While risk in theory can be defined as the likelihood that violence will occur (or re-occur), in practice risk assessment is broader than simple probability (Kropp, 2008). Risk assessment in practice has to include the imminence of violence, its nature, frequency and severity in addition
to the likelihood that it will occur (Kropp, 2008). Domestic violence risk assessment in practice has consequences for safety planning and research often misses these aspects (Kropp, 2008).

The literature that identifies and examines domestic violence risk determinants is extensive and domestic violence risk factors are well-defined, well-agreed upon and unlikely to change (Brown, 2011; Hilton & Harris, 2005). Which risk factors should be included in an assessment tool and what weight to assign each risk factor, however, are questions that researchers continue to examine (Brown, 2011). Some argue that commonly used risk factors are not overly predictive and some risk factors, such as patriarchal attitudes or suicidal ideation, are difficult to measure empirically (Brown, 2011). Risk assessment around lethality also remains difficult as murder is a statistically rare event and examining it retroactively introduces recall bias (Hilton & Harris, 2005). To empirically determine the risk of lethality would require samples of several thousands of offenders or potential offenders and would require researchers to track them longitudinally for domestic homicide (Hilton & Harris, 2005).

There are three types of risk assessment: unstructured professional judgment, structured professional judgment and actuarial. Unstructured professional, or clinical, judgment has been widely criticized for lacking reliability, validity and accountability (Brown, 2011; Kropp, 2008). It is not highly recommended and professionals are moving away from it (Brown, 2011; Kropp, 2008). Structured clinical or professional judgment is similar to an actuarial approach in that it is a systemic process but the overall conclusion is left to the practitioner (Brown, 2011). The primary focus of structured professional judgment is to prevent violence by managing risk factors (Kropp, 2008). Structured professional judgment tools (like the one used by ICAT) allow for safety plans tailored for the individual, specific to the identified risk factors and preserve professional opinion which are all important considerations for ICAT (Brown, 2011; Kropp, 2008). The challenge with professional judgment is that the assessment depends on the skill of the assessor (Brown, 2011).

Actuarial assessments calculate a risk score based on combining and weighing risk factors (Millar, 2008). They were developed by identifying risk factors from police and victim reports and running multivariate analysis (Brown, 2011). This determined the relative contribution that each risk factor contributed to the risk of re-assault or lethality (Brown, 2011). The scores were then weighted and added to the scale if they were shown to increase the tool’s predictive ability (Brown, 2011). Actuarial assessments provide a probability assessment of recidivism and the score can be compared to other offenders with the same score (Brown, 2011). They are considered to have better predictive ability than professional judgment assessments, better inter-rater reliability and therefore improved accuracy (Brown, 2011).

The question of which approach, actuarial or structured professional judgment, is “best” depends on the reason for the assessment (Brown, 2011). Kropp (2008) argues that the most viable options are either a structured professional judgment approach or an actuarial procedure but Hilton et al (2007) say that actuarial tools are consistently found to be more valid than other
approaches. Brown (2011) notes that much of the research suggests having more than one source of data as the best approach. In the end, it matters why you are doing the assessment. For example, ICAT uses a structured professional judgment approach that is based on the B-SAFER tool (discussed further below). This has significant advantages in the ICAT context as ICAT is not just concerned with assessing risk but also planning to mitigate it, something that a tool like the Ontario Domestic Assault Recidivism Assessment (ODARA), an actuarial assessment, does not easily lend itself to. However, ODARA can be used to assist in communicating risk and controlling for pre-arrest risk (also discussed below) in program evaluations. Therefore, the intended use of a risk assessment tool guides the decision on what tool is best suited for the purpose.

Risk assessment tools are assessed on two aspects: reliability and validity. Reliability refers to the consistency or repeatability of a tool (Brown, 2011). Test-retest and inter-rater reliability are the two predominant reliability criteria in risk assessment tools (Brown, 2011). The validity of a tool is its accuracy or the correctness of its result; and, as with reliability, there are a number of types of validity (Brown, 2011). Construct validity is a measure of how well a tool includes items that are known risk factors; convergent validity speaks to correlation between the results a tool and other risk assessment tools; and, criterion validity is how well a tool can predict concrete variables or, outcomes such as re-assault (Brown, 2011). Predictive validity is a form of criterion validity and is assessed retrospectively—the tool is applied to a sample where the re-assault levels are already known and then the tool is assessed at how well it would have predicted the outcomes (Brown, 2011).

Effect size of a risk assessment tool is another important aspect of risk assessment tools that one finds in the literature. Effect size is often expressed as the area under the Receiver Operating Characteristic (ROC) curve. This is a measure of the sensitivity of a tool (ability to predict true positives) in relation to a tool’s specificity (ability to avoid false positives) (Brown, 2011). The ROC varies between 0.0 and 1.0 where 1.0 is perfectly predictive, 0.5 represents not predictive and 0.0 is inversely predictive (Brown, 2011). Kropp (2008) explained it like this: for an ROC of .60, “if a recidivist and nonrecidivist were randomly chosen from their respective groups, the probability would be .60 that the recidivist would have a higher [risk assessment] score” (p. 209). However, it should also be noted that ROCs are not perfectly consistent within the same risk assessment tool—depending on the data set, researchers have calculated slightly different ROCs for the same tool (Brown, 2011).

Although many Canadian jurisdictions have expressed an interest in developing and implementing standardized practices across the country, a wide variety of risk assessment tools, investigative checklists, interagency protocols, or case management tools are currently in use in Canada (Millar, 2008). Listed below are a number of the common risk assessment tools used in Canada as well as those commonly discussed in the literature.
**RISK ASSESSMENT TOOLS**

*Lethality Tools*

The Danger Assessment (DA) is a validated tool designed to assess the likelihood of lethality or near lethality occurring in a domestic violence situation (Brown, 2011; Danger Assessment, 2013). The lead author, Jacquelyn Campbell, developed the DA in 1995 in conjunction with law enforcement, advocacy groups and other experts by analyzing risk factors from spousal or near homicides cases (Kropp, 2008). The DA has two parts: a diary/time-line for the woman to complete on the frequency and severity of abuse and 20 yes/no questions (Brown, 2011). It has an ROC of .69—the best of the lethality tests (Brown, 2011, p. 30). It is available for use by anyone who completes the on-line or in-person DA training.

The Assessment of Domestic Violence Situations or Domestic Violence Method (DV-MOSAIC) is a computer-assisted method developed by DeBecker & Associates in 2000 (Brown, 2011). The DV-MOSAIC calculates a lethality risk score of 1–10 from the responses to 46 items on risk and protective factors (Brown, 2011). It was designed to be used by criminal justice professionals and relies on criminal justice records including victim interviews (Brown, 2011). It has an ROC of .65 (Brown, 2011, p. 31). It has been found better at predicting severe assault than recidivism (Brown, 2011).

*Re-assault Tools*

The HCR-20 was developed by Christopher Webster (Ph.D.), Kevin Douglas (LLB, Ph.D.), Derek Eaves (M.D.) and Stephen Hart (Ph.D.) (Millar, 2008). The HCR-20 is a broad-based violence risk assessment tool that is also applicable to domestic violence (Millar, 2008). It has 20 items in three categories—historical, clinical and risk factors (Millar, 2008). It is relied upon in Canada by specialized units and currently used by a threat assessment unit in Alberta, the Domestic Violence and Criminal Harassment Unit of the Vancouver Police Department and “E” Division RCMP Behavioural Sciences (Millar, 2008).

The Stalking Assessment and Management tool (SAM) was developed by Randall Kropp (Ph.D.), Stephen Hart (Ph.D.) and David Lyon (Ph.D.) (Millar, 2008). Hart is one of two prominent Canadian researchers (the other is N. Zoe Hilton) and has worked with the RCMP in developing risk assessment tools, advising and teaching domestic violence courses. SAM is based on structured professional guidelines for assessing stalking and includes a number of assessment items in three categories—the nature of stalking, the offender’s risk factors and the victim’s vulnerability factors (Millar, 2008). The Domestic Violence and Criminal Harassment Unit of the Vancouver Police Department and “E” Division Behavioural Sciences use SAM (Millar, 2008).
The Spousal Assault Risk Assessment Guide (SARA) was also developed by Randall Kropp (Ph.D.), Stephen Hart (also a Canadian researcher), Christopher Webster (Ph.D.) and Derek Eaves (M.D.) (Millar, 2008). SARA consists of a 20-item checklist, scored 0-2, that covers criminal history, psychological functioning, and current social adjustment (Brown, 2011; Millar, 2008). It is designed to guide professionals to use their professional judgement in assessing the risk of recidivism in adult male offenders and to help plan for and mitigate that risk (Kropp, 2008; Millar, 2008). It is often used as a risk scale but it was not designed for this use (Brown, 2011; Kropp, 2008). SARA has moderate levels of internal consistency, inter-rater reliability for individual items and significantly discriminates between domestic violence recidivists and non-recidivists (discriminant validity) with an ROC of .64 and it widely used across Canada (Hilton & Harris, 2005, p. 8; Kropp, 2008; Millar, 2008).

B-Safer was developed collaboratively by the BC Institute against Family Violence, Kropp, Hart, Henrik Belfrage and the Department of Justice Canada (Kropp, 2008). It was developed specifically for law enforcement use—one of two Canadian tools developed specifically for law enforcement use with the other being ODARA (Brown, 2011). B-Safer is an abbreviated SARA and includes 10 items derived by factor analysis from SARA, a narrative section and a risk planning section (Brown, 2011; Kropp, 2008; Millar, 2008). B-Safer’s risk factors are grouped into two categories (five items each)—IPV history and psychological and social adjustment problems (Millar, 2008). B-Safer is currently used in “E” Division, municipal DV units in BC and in New Brunswick by both the RCMP and municipal departments (Millar, 2008). B-Safer is also the basis for the ICAT assessment tool.

The Ontario Domestic Assault Risk Assessment (ODARA) was developed by the Ontario Provincial Police (OPP) and the Ontario Mental Health Centre (Millar, 2008). ODARA’s lead author, N. Zoe Hilton, is a Canadian researcher. ODARA was the first actuarial risk assessment tool designed specifically for front-line police but it is also available for use by other individuals after an individual completes the validation process (Millar, 2008). ODARA does not assess lethality but a correlation has been found between higher ODARA scores and more severe assaults in the future (Millar, 2008). It is used by Canadian police departments in Ontario, the Northwest Territories, Nova Scotia and in corrections and probation services across the country (Millar, 2008). ODARA has an ROC of .77 which is the highest of any tool that does not use the Psychotherapy checklist (which is a diagnostic tool for clinicians) (Hilton et al, 2004, p. 272).

ODARA contains items that were identified through empirical analysis (Hilton et al, 2004). Actuarial assessments are well-understood and have been used for years in the insurance and health-care industries (Hilton et al, 2007). ODARA uses a 13-item dichotomous checklist. Hilton et al (2007) knew that each contributed differently to the overall risk of recidivism but decided not to incorporate weighting items in their tool because predictive accuracy was not sufficiently increased to warrant the added complexity (Hilton et al, 2010). The 13 items were chosen from among dozens of risk factors examined (Hilton & Harris p. 8, 2005). Each of the 13 ODARA
items added incremental predictive value to ODARA whereas the other 60 risk factors tested—all of which were identified from the literature—did not and were consequently excluded from the tool (Hilton et al, 2007). An individual’s ODARA score indicates his likelihood of recidivism and how he ranks among other domestic violence offenders (Hilton et al, 2007). Therefore, an ODARA score can provide an independent assessment of recidivism risk independent of any criminal justice intervention.

Researchers largely agree that no one assessment tool is “the best” (Brown, 2011). The choice of tool must be determined on the basis of its intended use (Brown, 2011). The risk assessment tool that ICAT uses, for example, is a modified B-SAFER tool. ICAT uses the modified B-SAFER instrument because B-SAFER is the risk assessment tool mandated in VAWIR and because ICAT’s mandate is not simply to assess risk but to plan and take actions to mitigate that risk. This requires a thorough review of all the risk factors that pertain to the victim, the offender and the situation. ICAT’s B-SAFER-based assessment tool facilitates this review.

It should also be noted that adopting a statistically valid tool does not ensure fail-safe prediction of lethality or reassault (Brown, 2011). Kropp (2008) cautions that risk assessment must be undertaken with a risk management plan. Kropp (2008) is also a strong advocate of collaboration. Additional cautions related to the use of risk assessments found in the literature are that: risk assessments need to be well-planned and resourced; the accuracy of risk assessment is directly related to skills of the assessor; assessors must be well-trained; risk assessment must be accompanied by good information management and communication; risk assessment information must be communicated; changing/altering a risk assessment tool is a concern as an altered tool no longer possess the validity and reliability it had when it was developed; and, risk assessment must be accompanied by risk management (Brown, 2011; Kropp, 2008). Researchers are also calling for continued assessment of the various tools, including ODARA (Brown, 2011; Kropp, 2008).

**ODARA to Control for Pre-intervention Risk**

Offenders vary in their pre-intervention risk of recidivism. The studies made no attempts to control for this are largely discounted in the literature. To evaluate the efficacy of a particular intervention (such as arrest), one must control for pre-intervention recidivism risk (Hilton et al, 2007). Various researchers have approached this problem differently. The SARP studies, for example, attempted to randomly assign offenders to different treatments but as many researchers have pointed out, the treatment assignment in the SARP studies often fell short of random. Additionally, it is no longer possible, due to ethical and legal considerations, to randomly assign offenders to different treatments from the criminal justice system or victims to different support systems or programs.

To control for pre-intervention risk, the majority of contemporary domestic violence intervention studies use comparison groups and statistical methods to assess an individual’s risk of recidivism
based on established risk factors. To establish comparison groups, many studies, such as HomeFront, have used a pre-post design. Other studies have used comparison communities or neighborhoods such as the large US studies discussed above. Both of these designs have advantages and limitations. For example, when comparing similar communities or neighbourhoods, one challenge is finding a community with similar demographics and characteristics. Or, when comparing pre- and post- groups, one limitation is that within the same jurisdiction the pre- group may have a lower base-recidivism rate because any jurisdiction considering a CCR, or other innovation, is likely already proactive in addressing domestic violence and may have lower base recidivism rates. In addition to matching groups of offenders, contemporary researchers control for pre-intervention recidivism risk using various statistical means such as multiple regression or logistic regression. In 2007, Hilton & Harris used ODARA.

Hilton et al (2007) examined the effect of arrest controlling for pre-arrest recidivism risk using ODARA. They used the same data set from which they developed ODADA and asked: was arrest of the offender related to his pre-arrest recidivism risk as judged by the ODARA score? And, did arrest reduce recidivism? In their 2007 study they found (as have other researchers): that police officers tended to arrest those with a greater risk of recidivism (higher pre-arrest risk); that arrest was associated with higher recidivism; and, that the higher recidivism rates were entirely related to a higher pre-arrest recidivism risk as indicated by the offender’s ODARA score (Hilton et al, 2007). In this sense, Hilton et al (2007) also validated using ODARA as a means to control for pre-intervention risk. The proposed ICAT program evaluation will also use ODARA for this purpose.

**Summary**
Risk assessment is a central component of ICAT—a “high-risk” designation gives it the legislative authority to share personal information between agency partners; and, it is intricately linked to ICAT’s safety planning process. Risk assessment is also a significant subject in the domestic violence literature and there are a number of risk assessment tools currently used in Canada. Although there is no one “best” tool and research continues on risk assessment tool validity and reliability, the use of a recognized structured risk assessment tool in any contemporary CCR is well-agreed upon.

ODARA is an actuarial risk assessment tool that has shown to have predictive validity and reliability. It was developed by Canadian researchers, in a Canadian legal context using male offenders and female victims. It has been validated as a means of assessing pre-intervention risk. It a dichotomous 13-item checklist that was designed for use by front line police and therefore relies on information routinely available in police files. For these reasons it is an ideal means of determining pre-intervention risk in a proposed ICAT program evaluation.
4.0 FINDINGS

EARLY RESPONSES
A review of domestic violence literature appropriately starts with the SARP studies. The SARP studies and subsequent meta-analyses of their data are noteworthy for a number of reasons. First, they identify recidivism as the principal measure of program effectiveness. And although other measures emerged, such as offender accountability and collaboration, recidivism rates remained a key measure in assessing a program or response’s success. Second, the SARP studies gave impetus to the study of other criminal justice system responses to domestic violence such as prosecution policies. The SARP studies focused attention on the importance of the individual, relationship and societal determinants of domestic violence and the need to account for them in evaluations, although it was not until about a decade later when this was fully appreciated. From the need to account for domestic violence determinants flowed the branch of research that is concerned with risk assessment and the various tools that would be developed for this purpose. One could argue that the Sherman & Berk study (1984) engendered much of the primary literature on societal responses to domestic violence. In this sense, the Minneapolis police experiment can be seen as the starting point of the societal-responses-to-domestic-violence narrative which began with police arrest, moved through uncoordinated responses and is presently at community coordinated responses. For these reasons, early societal responses to domestic violence are important to consider in the context of program evaluation design.

UNCOORDINATED RESPONSES
In reviewing the uncoordinated criminal justice responses of the past two decades one sees the evolution of more rigorous research designs and researchers identifying and controlling for pre-intervention risk factors using various statistical methods. However, similar to the arrest studies, the results of these studies were not unambiguous—some studies showed no effect on domestic violence recidivism while others showed a positive effect. Further, researchers’ efforts to combat same notwithstanding, few studies had methodologies which have not been criticized and debate continues on how effective criminal justice responses have been as a specific deterrent to domestic violence. In the uncoordinated criminal justice responses one also sees the emergence of the idea that although criminal justice sanctions are insufficient to keep women safe, interventions can have a cumulative effect on women’s safety. This concept is the premise of contemporary CCRs; that is, the cumulative effect of criminal justice sanctions, offender treatment and enveloping the victim in support and services will keep women safe. Uncoordinated criminal justice responses formalized controlling for pre-intervention recidivism risk for the individual offender and they were a step along the path to coordinated responses. They are therefore important to consider in the context of domestic violence and the program evaluation literature.

CCRs
In CCRs one finds the convergence of feminist theory, advocacy work, criminal justice responses and government agency work and community support. According to the Duluth
Model, which can be seen as the first formal CCR as is still viewed by many as the Gold Standard in coordinated responses, there are eight key components. These components are:

- Creating a coherent philosophy with victim safety at the centre;
- Developing best practices for contribution agencies;
- Enhancing networking among partner agencies;
- Building the management functions of monitoring and tracking into the system;
- Ensuring a supportive community infrastructure in the community;
- Providing sanctions and rehabilitation to offenders;
- Undoing the harm of IPV to women and children; and,
- Evaluating the CCR from the perspective of victim safety (Shepard & Pence, 1999).

Many other CCRs throughout North America have built upon and adapted the principles of the Duluth Model including the BC Government as set out in its Framework document and VAWIR policy. The BC Government Framework document sets out the core principles of: using a cross-sectoral response; ensuring that the response is client-centered and focused on women and children’s safety; and, advocating a locally developed response in order to reflect the needs and resources of local communities and cultures (VSCPD, 2010). It also echoes and builds on the core principles of the Duluth Model setting out that:

- Responders must focus on women and their children’s safety and consider risk assessment and safety planning;
- Responders should apply a gender lens when developing and implementing responses (primary aggressor policies);
- Key agencies should operate in coordination (justice, health, child protection, social services, education, victim services);
- Services must be timely, proactive and empowering;
- Programs must address barriers to victims’ participation in the criminal justice system;
- Agencies must share information;
- There must be a focusing on prevention (primary intervention);
- Monitoring, evaluation, and accountability needs be included in all IPV responses. New initiatives should include this from the start; it should be built into the operating programs (VSCPD, 2010).

The Framework’s key philosophies and key principles are echoed in VAWIR.

In the past decade one also finds the development of sophisticated evaluations and the full realization that the effects of different but coordinated efforts can be cumulative. For example, HomeFront, a sophisticated and modern Canadian CCR designed with evaluation as a key component, benefited from much of the research that preceded it and has shown to have a
significant impact on recidivism and offender accountability. Further, Homefront identified coordination and collaboration best practices and helped re-frame the single incident criminal justice definition of success to a broader woman’s safety and empowerment focus in its community. Evaluations like HomeFront and MARAC rely on a mixed-methods approach and use recidivism data, client surveys, agency surveys, focus groups and a control group of offender’s (a pre-post design in HomeFront’s case). Evaluations such as HomeFront are important to an ICAT-type program evaluation because they establish an evaluation methodology and template—one that has benefited from the previous research and is reflective of contemporary CCR theory.

**INQUESTS, INQUIRIES AND REPORTS**

The various inquest, inquiries and reviews affirm much of the contemporary CCR theory and underline the importance of the issues raised by advocacy groups by reviewing tragic incidents where systems failed. Further, it was the Turpel-Lafond report (2009) that resulted in the expeditious implementation of the N.O. ICAT.

These reports have identified, as critical to a coordinated response, information sharing and collaboration between criminal justice actors, police, advocacy groups and government and community support agencies. The recommendations of these reports are manifest in the philosophies that underpin the structure and functioning of the N.O. ICAT model. The N.O. ICAT’s logic model, developed for this paper, is a reflection of the recommendations in many of these reports. For these reasons, these reports are important to consider in an ICAT program evaluation literature and concepts.

**RISK ASSESSMENT**

Risk assessment is critical to ICAT’s primary function, women’s safety, and the “high-risk” designation that authorizes information sharing between agency partners; therefore, a review of the risk assessment literature is important to this paper. Further, from an evaluation perspective, the topic of pre-intervention recidivism risk is important because in order to conduct an evaluation, one needs to compare the intervention effects for individuals or groups of individuals who have a similar risk of recidivism, a lack of accounting for same being a major criticism of the early criminal justice response evaluations. In terms a future ICAT program evaluation, the literature sets out a number of ways that one might control for pre-intervention risk. These include research designs, using various statistical methods and/or using ODARA. These issues are central to the design of the N.O. ICAT evaluation.
5.0 RECOMMENDATIONS AND CONCLUSIONS

In Shepard and Pence’s book (1999), *Coordinating Community Responses to Domestic Violence: Lessons from Duluth and Beyond*, Shepard (1999b) authors a chapter on program evaluation in which she sets out a number of reasons why program evaluation is important. Those relevant to the N.O. ICAT include: staff can use evaluation results to monitor overall program effectiveness; staff can use an evaluation to determine if policies and procedures are clear and being followed; evaluations can assess if program goals are being met; and, domestic violence programs have an ethical obligation to evaluate the impact of their actions on domestic violence (Shepard, 1999b). Shepard (1999b) also discusses a number of key principles of evaluation relevant to the N.O. ICAT. These include that: the definition of program success needs to reflect the goals of the project; that evaluations should focus on these program goals and outcomes; and, because victim safety and offender accountability are key to a CCR, they must be central to the evaluation (Shepard, 1999b). Shepard (1999b) also notes that the evaluator must have a good idea of what each component does and that evaluation must be done collaboratively—this permits the evaluator to identify problems that prevent components from operating like they should.

“Evaluators need the expertise of practitioners in the field to develop questionnaires, instruments, and measurement procedures that truly reflect the phenomenon being studied” (Shepard, 1999b, p. 187).

In terms of conducting evaluation work, Shepard (1999b) advises that evaluators have to collect information whether policies and procedures are being implemented as intended. Further, they should also use different sources of data including direct observation, service records, data from service providers and information from program participants (clients and professionals) (Shepard, 1999b). Shepard (1999b) also recommends quasi-experimental designs. She cautions evaluators that contact and surveying clients may endanger the women and one must have systems in place to minimize risk and use consent forms (Shepard, 1999b). This results in lower response rates but is required to ensure that the information (which is important) is collected without negative consequences to the women (Shepard, 1999b). Shepard (1999b) also discusses some potential frustrations inherent in evaluations as “evaluators” and “activists” can have different mindsets when it comes to these processes—evaluators often coming from a scientific or social science (rigid) perspective while activists may be fearful of the evaluation results.

Another general theme emerging from the literature is that modern CCRs are sophisticated entities and their program evaluations are complex and time consuming. For example the Sherman and Berk (1984) paper was published three years after the Minneapolis police experiment. HomeFront’s pilot project lasted four years, was evaluated by a team of researchers and the results published in two separate documents which totaled over 500 pages.
5.1 RECOMMENDATIONS

FIGURE 2. N.O. ICAT EVALUATION PROJECT MAP

Quasi Experimental Design
(Pre-ICAT / Post-ICAT)

Mixed Methods Approach

Quantitative Data
(As identified in the literature)

Qualitative Data
(As identified in the literature)

Pre-ICAT Group
ODARA
Offender Accountability
Recidivism

Post-ICAT Group
ODARA
Offender Accountability
Recidivism

Client Interviews
Safety
Service Delivery and Support
Offender
Empowerment and Engagement

Agency Partner Surveys
Information Sharing
Collaboration
NOICAT Processes
Open-ended Responses

Analysis and Evaluation Report
RECOMMENDATION 1 (PROJECT STRUCTURE)

It is recommended that: the N.O. ICAT program evaluation be completed in two parts the first being project design and instrument development and the second the evaluation and evaluation report.

Although not originally intended, this evaluation, due to resource constraints and the size and complexity of the task, should be completed in two parts, similar to HomeFront’s evaluation. The first part consists of this literature review in support of the program evaluation, the development of the N.O. ICAT the logic model (copy attached as Appendix “A”), and the completion of a research design proposal and draft evaluation instruments. Part I will constitute my MPA Capstone and its rigorous elaboration of key underpinnings to the components and linkages of the logic model. The second should be running the program evaluation and completing a separate evaluation report.

RECOMMENDATION 2 (RESEARCH DESIGN)

It is recommended that: the N.O. ICAT evaluation use a quasi-experimental design (Pre-/ Post) and a mixed-methods approach (quantitative recidivism data and qualitative client and agency partner data).

The N.O. ICAT is a complex organization with many component parts. One of the first decisions that an evaluator and client must make is the goal of the evaluation. In a CCR the choice (as evidenced from the literature) is to do an evaluation of the component parts or to evaluate the overall response. The N.O. ICAT has requested an “overall effect” evaluation: safety as measured by recidivism; and, information sharing and collaboration, and service delivery, the identified outputs and outcomes of N.O. ICAT as shown on the logic model.

Women’s safety in the literature is universally measured by recidivism, the definition of which is discussed in the introductory sections of this paper. When assessing recidivism one must control for pre-intervention risk, as seen in the more rigorous studies of the past two decades. There are two common means of doing this: using a comparison (or control) group and/or using statistical techniques (as randomized controlled trials pose numerous ethical and legal issues).

In terms of identifying a comparison group, the literature shows that there are two common options here—a comparison community (one without an ICAT but with similar demographics) or a pre-post design. Both are quasi-experimental research designs and the strengths and limitations of each have been discussed in this paper. For the N.O. ICAT it is suggested that a pre-post-design be used in order to facilitate data access—it is simply much easier to identify cases that would have made it to the N.O. ICAT table in Vernon than it would be in another community. Data access in Vernon is also much easier. The data will come from police databases and be de-indentified in any report. “E” Division RCMP Legal Services has, in principle, approved this approach.
The proposed sample is 50 pre-ICAT files and the first 50 post-ICAT files. 50 files were chosen because it is the largest number of post-ICAT files that we would allow a reasonable window of post-ICAT intervention time to assess recidivism. 50 Pre-ICAT files were chosen to get a matched sample. The pre-ICAT files were selected based on their file content—a Vernon RCMP Criminal Analyst reviewed and selected 50 pre-ICAT domestic violence files from the North Okanagan Region that would have made it to the ICAT table had the N.O. ICAT existed at the time. The data from each files should be initially recorded on a recidivism sheet (draft copy attached, Appendix “B”, with one per file). All data will be de-identified for the final report—only statistics will be reported.

Collaboration, coordination, information sharing and service delivery are commonly assessed through qualitative data (surveys to the agency partners and clients). This approach is also well-represented in the literature (See Recommendations 4 and 5).

RECOMMENDATION 3 (THE SPECIFIC METHODOLOGY OF MEASURING RECIDIVISM RATES)

It is recommended that: ODARA be used as a means to assess and control for pre-intervention recidivism risk and that the risk assessment sheets be used to score each of the 100 files.

As noted in Recommendation 2, when assessing recidivism one must control for pre-intervention risk. There are two steps in this process the first is using a comparison group, also discussed in Recommendation 2. The second step is assessing and controlling for pre-intervention recidivism risk levels using statistical techniques (as randomized controlled trials pose numerous ethical and legal issues).

To control for individual pre-intervention risk, there are various statistical methods but these require large datasets (with information not readily available in police or ICAT files) and significant training in statistical techniques and the software to run these tests; I have none of these.

ODARA has a number of advantages:

- Hilton and Harris’ research shows that front-line police can reliably use ODARA;
- When scored by a trained assessor, an ODARA score will only rarely (5% of the time) be misclassified by one group (Hilton et al, 2010);
- ODARA tool is validated to assess risk based on information from police records and criminal histories;
- ODARA had a large effect size for predicting a dichotomous outcome with an ROC area of .77 and also predicted the number of recidivist offences, time until first recidivist offence, injury caused and severity of new assaults (Hilton et al, 2004, p. 77);
- I am ODARA certified;
• ODARA data is available to score the 100 files as it was designed for front-line police use; and,
• Hilton et al (2007) have validated ODARA’s use in this capacity.

RECOMMENDATION 4 (AGENCY PARTNER DATA)

It is recommended that: agency partner data are gathered by using email surveys.

Studies assessing coordination, collaboration and information sharing use some method of engaging the agency partners. In the literature, this has been accomplished by conducting agency partner surveys, focus groups, interviews and/or case studies. For the N.O. ICAT evaluation, team members discussed these options and for practical reasons suggest conducting email surveys which will be sent to all the participating agency representatives.

The survey document, draft copy attached as Appendix “C” includes a cover letter which sets out the reason for the survey and requests participation. The survey document is then divided into five sections: Tombstone information; Information Sharing; Collaboration; N.O. ICAT Processes; and, Overall Comments. The last four sections focus on the overall goals of the N.O. ICAT as represented in its logic model. The individual items in each section reflect the information from the literature review and discussed in this paper. The survey uses a 5-point Likert Scale and open-ended responses. Individual questions explore aspects of the N.O. ICAT’s goals and outputs. Each item has been reviewed by the client team.

Overall the agency partner survey reflects the logic model and mirrors much of the client structured interview. The result is that the information obtained from the agency partners will reflect key activities, outputs and outcomes identified in the logic model. And, when combined with the information from the client structured interviews, many of the same questions will be answered from the perspectives of both service provider and recipient. This should result in useful information for the client group.

RECOMMENDATION 5 (CLIENT DATA)

It is recommended that: client data are captured using a structured interview to be conducted by a senior advocacy worker.

Studies assessing service delivery, safety, perceptions of safety, victims’ perceptions of engagement and empowerment and recidivism routinely use client surveys, interviews and/or case studies. The N.O. ICAT team feels strongly that client input is important to an evaluation but this must not compromise victim safety and empowerment. Therefore, client information is only being considered for current clients of the N.O. ICAT (and/or its partner agencies as permitted by their policy). The N.O. ICAT has safety protocols in place for client contacts on

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30 I have also confirmed with Professor Hilton the validity of using her tool in this capacity.
which the interviewer(s) will rely. The interviews are planned to be conducted by senior staff who will also rely on their safety protocols. Women will continue to have to the full support of the ICAT team and all the resources for their safety, as per RCMP and ICAT protocols. As with other studies (most in fact) it is anticipated that the response rates will be low.

Team members discussed the various options for client input and prefer a structured interview by an established client worker. The client structured interview document starts with a cover letter which sets out the reason for the interview and contains a consent form. It then has a brief section for tombstone data\textsuperscript{31}. The structured interview has five sections: Service Delivery and Support; Engagement and Empowerment; Offender Accountability; Safety; and, an additional comments section. The individual items in each section reflect the information from the literature review and discussed in this paper and focus on the overall goals of the N.O. ICAT as represented in its logic model. The structured interview has an emphasis on open-ended responses. Each question has been reviewed by the client team.

Overall, the client structured interview reflects the logic model and mirrors much of the agency partner survey. The result is that the information obtained from the agency partners will reflect key activities, outputs and outcomes identified in the logic model and, when combined with the information from the agency partner surveys, the same questions will be answered from the perspectives of both recipient and service provider. This should result in useful information for the clients.

**RECOMMENDATION 6 (DATA ANALYSIS AND EVALUATION REPORT)**

It is recommended that: the data analysis of the evaluation be compiled into a second report with an anticipated due date of the late fall of 2014.

**Recidivism Analysis**

The comparison group of offenders (or files) was chosen in a similar way to how the ICAT files were chosen. To further establish the comparability of the two groups, we propose to use ODARA. Once the ODARA scores have been calculated, a t-test would be the next step in controlling for risk (Hilton, personal communication, Nov 20, 2013). If a t-test shows the pre-ICAT and post-ICAT offenders do not significantly differ on the ODARA score then we are in good shape. Confidence intervals can also be used to compare the two groups to see whether they have comparable risk levels (Hilton, personal communication, Nov 20, 2013). If they do not, we can compare across ODARA categories but these will likely need to be grouped into just two or three categories based on the ODARA norms (e.g., 0-3 vs 4-13) or based on the sample distribution (e.g., above or below the mean ODARA score) because of the small number of files (Hilton, personal communication, Nov 20, 2013).

---

\textsuperscript{31} All information will be de-identified in the final report but for recidivism scoring it has to be initially included.
Agency Partner and Client Data
The proposed agency partner survey and client structured interview assess the key areas of ICAT. Both have a 5-point scale (“Don’t Know” replaces the neutral response) with the addition of a “Not Applicable” option and open-ended responses. The partner agency survey relies more on scale responses while the client interview relies more on open-ended responses. A five-point scale was chosen because it allows straightforward recoding of data. The not-applicable option was added because with the range of agencies in ICAT and the diversity of the clients, all items will not be universally applicable. This is also how HomeFront surveys were formatted. Correlation can then examined between such things as feelings of safety and actual recidivism with a Chi-square test or Pearson correlation (Hilton, personal communication, Nov 20, 2013).

Evaluation Report
Once the above-noted analyses have been completed, the results will be compiled into a second report. This report will focus on recidivism as a measure of the reduction of the risk of violence to women, summarize the findings from the survey instruments and review the correlation between actual recidivism and feelings of safety. Other data analysis will also be possible.

5.2 CONCLUSIONS

LITERATURE REVIEW AND FINDINGS
In the decades prior to the 1980s domestic violence was seen as private or family matter but in the past three decades this paradigm has shifted and it is now seen as a significant social problem and criminal justice matter. The literature reflects this paradigm shift and since the early 1980s domestic violence literature has grown in breadth and volume. Early domestic violence studies were focused on arrest and the effect that this had on recidivism, the seminal study being the 1981 Minneapolis Police arrest experiment by Sherman and Berk (1984). The Sherman and Berk (1984) paper was initially believed to support arrest as a specific deterrent to domestic violence and resulted in broad adoption of pro-arrest policies across the US (Dixon, 2009). It also resulted in a number of studies, collectively known as SARP, which tried to replicate the deterrent effect of arrest found by Sherman and Berk (1984) (Maxwell et al, 2001). However, SARP had mixed results and brought into question the original findings of the Sherman and Berk (1984) paper. From the early studies, researchers learned that not all offenders were equally likely to re-offend—individual, relationship and societal factors influenced recidivism rates—and, these factors needed to be considered in evaluating a particular response or program. These early studies also established recidivism as the primary measure of intervention effectiveness.

Based on the lack of clear evidence of arrest as a specific deterrent to domestic violence, a number of researchers began studying the effects other criminal justice system components on recidivism. Focusing on uncoordinated criminal justice responses was also consistent with the growing societal view that domestic violence was a criminal matter and not a private one; and, that offenders should be held to account. Studies examined whether women pursuing a civil
restraining order experienced less violence than those who did not, the effect that pursuing
criminal charges had on the level of violence experienced by women and the effect that
successful prosecution, probation, offender monitoring and court ordered counseling had on
recidivism rates. One also sees in these studies the emergence of researchers controlling for
recidivism risk. However, like the arrest studies, uncoordinated criminal justice interventions had
mixed results with some studies showing a positive overall effect (decreased recidivism) while
others showed no overall effect. Further, many were still criticized for methodological issues.
As the number of studies of uncoordinated responses increased and expanded in focus from
criminal-justice-only studies to studies of community, treatment and other interventions, the
theory evolved that the cumulative effect of criminal justice sanctions, offender treatment and
victim support would keep women safe. This was the theoretical foundation of CCRs.

The first CCR, and in many ways the Gold Standard, was the Duluth Model. The Duluth Model,
and its many manifestations, centered on a few key principles and philosophies including:
responders must focus on safety of women and their children, consider risk assessment and
safety planning; CCRs should have a cohesive vision, apply a gender lens when developing and
implementing responses and promote coordination between the various service providers and the
criminal justice system; CCR service delivery should be timely, proactive, empowering and
respectful; that information sharing and addressing barriers to victims’ participation in the
criminal justice system are required in an effective CCR; and, that offenders must be held to
account.

As CCRs became more sophisticated, their evaluations became more complex. Some early CCRs
studies were criticized for methodological issues and others had mixed results such as no change
in recidivism rates but a positive effect in holding offenders to account. More recent (and very
sophisticated and complex) evaluations however, such as HomeFront, have shown statistically
significant decreases in recidivism and increases in coordination and collaboration. Evaluation
research is ongoing with evaluation being a key principle of modern CCR theory. Domestic
violence research is now being conducted by criminologists, the judiciary, legal professionals,
physiologists, health care professionals and social scientists. Research topics include criminal
justice responses, societal responses, feminist perspectives, cultural determinants, risk factors
and risk factor analysis.

A review of the literature relevant to the N.O ICAT would not be complete without reviewing
the various government-sponsored, judicial and quasi-judicial inquires that have been significant
drivers of domestic violence policy generally and of the N.O. ICAT specifically. These studies
are post-tragedy reviews of systems that failed to protect women. Their reports have driven the
significant positive changes in societal responses to domestic violence over the past decade in
regards to Turpel-Lafond’s report (2009), resulted in the expeditious implementation of the N.O.
ICAT. The principle findings in these studies were that information sharing, inter-agency
collaboration and coordination of services are central to women’s safety—the same theory that is
echoed in modern CCRs.
Risk assessment and the related tools are the last area of literature reviewed for this report. They are important because women’s safety is at the centre of ICAT and assessing risk is the first step in mitigating it, ICAT’s primary function. Assessing risk is also important for ICAT from a legal perspective as it is the “high-risk” designation that allows information sharing between agency partners. From an evaluation perspective, assessing risk is important so that one can compare the intervention effects for individuals or groups who have a similar risk of recidivism. There are a number of risk assessment tools used in Canada. No one tool can be considered “the best” because the most appropriate tool is dependent on the reason for the assessment. ODARA, an actuarial risk assessment tool, can be used to assess, communicate and control for risk in an evaluations, is one of the tools.

RECOMMENDATIONS
Although not the original intent, this project should be completed in two phases—the first being this review and the second being the actual evaluation. It is too large for a single project and the timeframes too strict. As much of the literature illustrates, contemporary CCR evaluations are complex tasks.

It is recommended that the evaluation use a pre-post design and rely on quantitative data from police databases and qualitative data from surveys and interviews. Recidivism rates are the key measure. In order to control for pre-intervention risk ODARA is a straight forward tool that has been validated for this use in the past and for which data is readily available. Recidivism data can be correlated with women’s feelings of safety, empowerment and engagement. Further, agency partner data can be compared to client survey data on overlapping issues. The remaining qualitative data, including the open-ended responses, should be reviewed and summarized for consideration in the future operations of the N.O. ICAT.

LOOKING FORWARD
In the spring of 2012, when I was first approached to consider completing a program evaluation of the N.O. ICAT, it had been functioning for about three years and was the model upon which other coordinated responses in “E” Division were being structured. The invitation to complete a program evaluation was broad with assessment parameters only discussed in general terms. My program evaluation experience being limited, I turned to the literature to answer questions around the design of a program evaluation and its instruments. These questions included: how and where does an ICAT-type response fit into the domestic violence literature? What are the contemporary issues related to assessing societal responses to domestic violence? And, how might this inform the structure of an N.O. ICAT program evaluation? I also needed to understand at the N.O. ICAT at the service-delivery level through and its theoretical foundations.

This project reviewed and summarized the literature relevant to the ICAT approach. It set out the factors that emerged from the literature on violence against women that might be considered when constructing a program evaluation of a CCR, such as the N.O. ICAT. It also reviewed the
societal responses that have been employed to address violence against women in the last 30 years, the evaluation of CCRs, their theory and contemporary drivers. My initial intent for this project had been to complete a program evaluation but this proved too complicated. Therefore, following the advice of my advisor, the project was scaled back to completing the literature review, creating a program logic model and proposing a research design and instruments for a future program evaluation.

Since the start of this project a number of circumstances have changed including the scope of the project being limited. The time required for this work, even just for this report, has been much longer than originally anticipated. Due to the timeframe other changes have occurred including my transfer to another division, from “E” Division to the “G” Division (the North West Territories). “G” Division does not currently have an ICAT-type response.

At the start of this project a number of agencies and departments needed to come together including the N.O. ICAT (supported by executive of the CCWS), the North Okanagan RCMP (as represented by Sgt Daly), “E” Division OSB (as represented by Dr Eli Sopow), my immediate supervisor (Staff Sergeant Craig Peterson) and “E” RCMP Legal Services (Mr. Kyle Friesen). The reason that these agencies and departments needed to come together was for privacy issues and the related database access. At the start of this project, authorizations and permissions were obtained as required; however, given the time delay and resulting change in circumstances, I would suggest that these be refreshed as follows:

- Support from the N.O. ICAT and “E” Division OSB based on completion of this paper;
- Approval from the CCWS through Ms. Hamilton, a CCWS Regional Coordinator;
- Approval from “E” Division Legal services, Mr. Kyle Friesen; and,
- Approval from my current supervisor and the “G” Division Commanding Officer (for use of “G” Division hardware and software for database access).32

Once these approvals are obtained I would suggest:

- Case file analysis (which have already been identified) and recidivism checks;
- Sending out the agency partner surveys and the client interview process;
- Data analysis with a final report (all identification information removed) contemplated for the fall of 2014 to CCWS, “E” Division OSB and others as requested and authorized.

This approach has a number of advantages. First, it will firm up support and refresh authorities/permissions. Second, it will result in a process that creates an evaluation template for other ICAT-type programs in “E” Division, should evaluation be desired. Third, it will permit the evaluation component to be conducted by a larger team than a single researcher, as such an

32 “G” Division does not currently have an ICAT; however, on learning of this project and reading a draft report the Operations NCO i/c at Yellowknife Detachment (my current boss) has suggested bringing this idea forward. I will do this in the coming weeks.
endeavor is too large for a single researcher/author. Finally, it allows the completion of this project within the MPA program time constraints.
6.0 REFERENCES


Community Coordination for Women's Safety. (2012). *Working collaboratively to identify and respond to risk.* Unpublished manuscript.


McMahon, M., Neville-Sorvilles, J., & Schubert, L. (1999). Undoing harm to children: The Duluth family visitation centre. In M. Shepard, & E. Pence (Eds.), *Coordinating community* [80]


[82]


[83]


[84]
7.0 APPENDICES

APPENDIX “A” – THE N.O. ICAT LOGIC MODEL
### North Okanagan Integrated Case Assessment Team Logic Model

**Inputs**
- Community Corrections
- Correctional Service of Canada
- BC Forensic Psychiatry
- Ministry of Social Development
- Interior Health Authority
- Ministry of Children & Family Development
- Police (RCMP)
- Transition House
- Victim Services

**Activities**
- Bail supervision & liaise with offender
- Provide offender case history & program information
- Provide information on treatment program
- Provide information on offender treatment options
- Recommend psych. evaluations
- Provide crisis funds (to offender and victim) to help implement safety plan
- Provide information on substance abuse and mental health issues
- Enforce provisions of the CFCSA (child safety, information collection & enforce safety plan)
- Records management & disclosure
- Enforcement - arrest and recommend charge(s) and/or detention
- Provide offender criminal history
- Provide safe shelter, outreach victim support & information on victimization, impact of trauma and victim vulnerability factors
- Trial preparation, update on appearances & liaise with crown

**Outputs**
- Risk Factor Evaluations
- Safety Plans
- Reports to Crown Counsel
- Contacts with Domestic Violence Victims
- Safety Plan Reviews and Updates
- File Reviews and Updates
- Training and Education Seminars

**Outcomes**

**Short**
- Better service delivery for women
- Hold offenders accountable

**Medium**
- Decrease women’s risk of domestic violence
- Increase women’s awareness of domestic violence
- Decrease risk of domestic violence to women’s family, friends and co-workers
- Increase women’s ability to keep themselves safe from domestic violence
- Have Crown Counsel rely on ICAT materials
- Build understanding & relationships between contributing agencies & individuals
- Increase knowledge of ICAT in the region & in the criminal justice system
- Increase job satisfaction and engagement among individuals from contributing agencies

**Long**
- Reduce risk of death or grievous bodily due to domestic violence for women in the North Okanagan Region
APPENDIX “B” – RECIDIVISM SHEET (DRAFT)
Tombstone Data

N.O. ICAT File Number: ________________________________

Police File Number: ________________________________

Offence Date: ________________________________

Offender: ________________________________

Victim(s): ________________________________

ODARA Assessment

**Index Assault:** the most recent police-reported incident of male violence against a female domestic intimate partner. The male violence must include physical contact with the victim or a credible threat of death with a weapon in hand and in the victim’s presence. A domestic partner is a to whom the offender is married or with whom he has or is co-habiting.¹²

Date: ____________________________________________

Place: ____________________________________________

Agency File Number: ____________________________________________

---

¹ P. 151, Zoe’s book
² This should be the incident that brought the woman to the N.O. ICAT. If it is not, I may have to exclude the case because I may not have enough data.
## ODARA Score

<table>
<thead>
<tr>
<th>Factor</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prior domestic incident</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prior non-domestic incident</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prior custodial sentence of 30 days or more</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Failure on prior conditional release</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Threat to harm or kill at index offence(^3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Confinement of the partner at index assault</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Victim concern</td>
<td></td>
<td></td>
</tr>
<tr>
<td>More than one child</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Victim’s biological child from a previous partner</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Violence against others</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Substance abuse</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assault on victim when pregnant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Barriers to victim support</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total score</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## ODARA Recidivism Risk

<table>
<thead>
<tr>
<th>ODARA Score</th>
<th>Recidivism Risk (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>7</td>
</tr>
<tr>
<td>1</td>
<td>17</td>
</tr>
<tr>
<td>2</td>
<td>22</td>
</tr>
<tr>
<td>3</td>
<td>34</td>
</tr>
<tr>
<td>4</td>
<td>39</td>
</tr>
<tr>
<td>5 – 6</td>
<td>53</td>
</tr>
<tr>
<td>7 - 13</td>
<td>74</td>
</tr>
</tbody>
</table>
## Offender Accountability

### Arrest

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arrested (y/n) &amp; Date</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Police Released</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Judicial Release</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Detained</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

### Release Conditions

<table>
<thead>
<tr>
<th>Condition</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Contact</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No-Go</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Report as and when required</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No Firearms</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No drugs/alcohol</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Weapons Prohibition</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Curfew</td>
<td></td>
<td></td>
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<tr>
<td>Other:</td>
<td></td>
<td></td>
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</tbody>
</table>

### Monitoring (while on bail)

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dual Charges</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Victim Recant</td>
<td>Y/N</td>
<td></td>
</tr>
</tbody>
</table>

Agency: ____________________________________________________________

Frequency: ________________________________________________________
### Monitoring (while on bail)

<table>
<thead>
<tr>
<th>Breach(es) Reported (Y/N &amp; date)</th>
<th>Y/N</th>
<th>Date</th>
</tr>
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<tbody>
<tr>
<td></td>
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<th>Date</th>
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<th>Date</th>
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<tr>
<th>Date</th>
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### Arrested

<table>
<thead>
<tr>
<th>Y/N</th>
<th>Date</th>
</tr>
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<tr>
<th>Date</th>
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### Detained (Y/N & total days in custody)

<table>
<thead>
<tr>
<th>Y/N</th>
<th>Days</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

### Conditions Stricter

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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</table>

### List additional Court appearances excluding any bail matters.

<table>
<thead>
<tr>
<th>First Appearance Date</th>
</tr>
</thead>
<tbody>
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<td></td>
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<table>
<thead>
<tr>
<th>Second Appearance Date</th>
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</thead>
<tbody>
<tr>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Third Appearance Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

### Additional Appearance Dates (if any)

<table>
<thead>
<tr>
<th>Y/N</th>
<th>Date</th>
</tr>
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<tbody>
<tr>
<td></td>
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</table>

### Trial Date (Y/N & Date)

<table>
<thead>
<tr>
<th>Y/N</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

### Time to trial (days)

### Disposition

- Pled guilty
- Found guilty
- Acquitted
- Dismissed
- Peace bond

---

4 Court appearances excluding any bail matters.
## Sentencing

<table>
<thead>
<tr>
<th>Custody</th>
<th>Y/N</th>
<th>Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Treatment</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

## Recidivism\(^5\)

### New Offence(s)

<table>
<thead>
<tr>
<th>Offender Against Same Partner (y/n and dates)</th>
<th>Y/N</th>
<th>Date</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Offender Against New Partner (y/n and dates)</th>
<th>Y/N</th>
<th>Date</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Victim from a Different Partner (y/n and dates)</th>
<th>Y/N</th>
<th>Date</th>
</tr>
</thead>
</table>

## Notes

---

\(^5\) VAWIR defined and post adjudication.
APPENDIX “C” – PARTNER AGENCY SURVEY (DRAFT)
Dear Colleague:

We are writing to invite you to participate in an evaluation of the North Okanagan Integrated Case Assessment Team (N.O. ICAT).

Jay Buckner, a University of Victoria graduate student and regular Member of the Royal Canadian Mounted Police (RCMP), has volunteered to conduct this evaluation as partial fulfillment of the requirements for the degree of Master of Public Administration (MPA). This research is being conducted in conjunction with the N.O. ICAT and the “E” Division Operations Strategy Branch (OSB) of the RCMP. “E” Division OSB is responsible for RCMP policy research in the province of British Columbia (BC).

Jay is being guided in this project by professor Catherine Althaus, PhD, of the University of Victoria and Eli Sopow, PhD, of “E” Division OSB. Also collaborating on the evaluation are: Brooke McLardy, Program Coordinator, North Okanagan Transition House; Debby Hamilton, Regional Coordinator Community Coordination for Women’s Safety Program; Constable Lisa McMullin, Domestic Violence Unit Coordinator, Vernon RCMP; and Sergeant Robb Daly, non-commissioned officer in charge of the RCMP Detachment in Armstrong, BC.

This evaluation has several components one of which is a process piece the purpose of which is to evaluate and document interagency collaboration, information sharing and to identify areas of strengths and challenges. We are asking for your participation in this evaluation by completing the enclosed questionnaire. Your participation is completely voluntary. The benefit of the evaluation is having a mechanism through which to voice your opinions regarding the operations and needed adaptations of the N.O ICAT and to contribute to the development of this model throughout “E” Division.

This questionnaire, including the introduction, has 13 pages and will take about 20 minutes to complete. The results of this questionnaire are confidential. Only the evaluator will have access to your completed questionnaires. Should the information from the questionnaire be used in any report or publication, all identifying information will be removed so that you will not be personally identifiable in any way.

You will have the ability to access the results of the questionnaire through any members of the evaluation team. The final results and evaluation will also be made available to you.

Your decision to complete and return this questionnaire will be interpreted as an indication of your consent to participate.

If you have any questions regarding this questionnaire or evaluation, please contact Jay via email at jay.buckner@rcmp-grc.gc.ca.
SECTION 1: About Your Organization and N.O ICAT Membership

1. Which of the following categories best describes the organization that you represent when participating or interacting with the N.O. ICAT? (Check all that apply)

- [ ] Community Corrections
- [ ] Correctional Service Of Canada
- [ ] BC Forensic Psychiatry
- [ ] Ministry of Social Development
- [ ] Ministry of Children & Family Development
- [ ] Interior Heath
- [ ] RCMP
- [ ] Transition House
- [ ] Community Victim Services
- [ ] Police Victim Services
- [ ] Other (please specify):

2. Why is it important for your organization to interact with the N.O. ICAT? (Check all that apply)

- [ ] To ensure collaboration between criminal justice and treatment systems
- [ ] To provide better service to clients
- [ ] To improve justice responses to domestic violence
- [ ] To collaborate with other organizations represented on the N.O ICAT
- [ ] To ensure collaboration between justice and victim services
- [ ] To ensure that cultural sensitivity practices result in full and equitable access to services for diverse groups
- [ ] To provide information with respect to the offender
- [ ] To provide information with respect to the victim and her dependants
- [ ] To ensure collaboration between criminal justice and victim support services
- [ ] Other (please specify):
3. Are there additional organizations that need to be represented on the N.O ICAT?

- [ ] No
- [ ] Don’t Know
- [ ] Yes (please specify):

4. I have been an agency representative with the N.O. ICAT for:

- [ ] More than 1 year
- [ ] Less than 1 year
- [ ] Since its inception

SECTION 2: Information Sharing

Please consider each of the following statements and mark the response that comes closest to what you think about that statement.

<table>
<thead>
<tr>
<th>Policy</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Don’t Know</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>My organization’s policies on information sharing and confidentiality in relation to the N.O. ICAT are clear to me.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O. ICAT’s policy on information sharing and confidentiality are clear me.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I understand the policy on information sharing and confidentiality of my partner agencies in the N.O. ICAT.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>N.O. ICAT policy and my organization’s policy are congruent.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Processes</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Don’t Know</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>The N.O. ICAT members are prepared when they attend the case conferences.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O. ICAT partners share the information that I need to help the client.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>Statement</td>
<td>Strongly Agree</td>
<td>Agree</td>
<td>Disagree</td>
<td>Strongly Disagree</td>
<td>Don't Know</td>
<td>Not Applicable</td>
</tr>
<tr>
<td>--------------------------------------------------------------------------</td>
<td>----------------</td>
<td>-------</td>
<td>----------</td>
<td>-------------------</td>
<td>------------</td>
<td>----------------</td>
</tr>
<tr>
<td>The information sharing process at N.O. ICAT meetings is efficient.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>Information sharing outside structured N.O. ICAT meetings is timely and</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>efficient—updates are provided as required.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>N.O. ICAT partners informally share appropriate information.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>N.O. ICAT partners share all relevant information—there are no information “silos”.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>Agency partners not in attendance at the N.O. ICAT meetings are kept</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>informed of developments.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Information shared at N.O. ICAT meetings is appropriately documented and</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>stored.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have full and complete confidence and trust sharing sensitive</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>information with my N.O. ICAT partners.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The information that I provide to the N.O. ICAT is welcomed and</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>important.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Information gathered at N.O. ICAT meetings regarding client safety is</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>shared with her and/or others whose safety may be impacted.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Updates on the offender’s court process are communicated to me in a</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>timely and efficient manner.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Information from Crown is relayed in a timely and efficient manner.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
</tbody>
</table>

**Safety**

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Don't Know</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>The information shared in the N.O. ICAT meetings helps me evaluate the</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>risk to the victim.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The information shared in the N.O. ICAT process helps develop safety</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>plan(s).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Results**

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Don't Know</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Information sharing has resulted in greater trust between N.O. ICAT</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>partners.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sharing information within the N.O. ICAT has resulted in stronger relationships between me and my N.O. ICAT partners.</td>
<td>Strongly Agree</td>
<td>Agree</td>
<td>Disagree</td>
<td>Strongly Disagree</td>
<td>Don’t Know</td>
<td>Not Applicable</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>I have a better understanding of the roles and responsibilities of the N.O. ICAT partner agencies as a result of information sharing.</td>
<td>Strongly Agree</td>
<td>Agree</td>
<td>Disagree</td>
<td>Strongly Disagree</td>
<td>Don’t Know</td>
<td>Not Applicable</td>
</tr>
<tr>
<td>Information developed from the N.O. ICAT that is shared with women increases their ability to keep themselves safe.</td>
<td>Strongly Agree</td>
<td>Agree</td>
<td>Disagree</td>
<td>Strongly Disagree</td>
<td>Don’t Know</td>
<td>Not Applicable</td>
</tr>
<tr>
<td>Information shared at the N.O. ICAT helps me provide better service to my clients.</td>
<td>Strongly Agree</td>
<td>Agree</td>
<td>Disagree</td>
<td>Strongly Disagree</td>
<td>Don’t Know</td>
<td>Not Applicable</td>
</tr>
<tr>
<td>Information shared at the N.O. ICAT helps hold offenders accountable.</td>
<td>Strongly Agree</td>
<td>Agree</td>
<td>Disagree</td>
<td>Strongly Disagree</td>
<td>Don’t Know</td>
<td>Not Applicable</td>
</tr>
<tr>
<td>The information shared at the N.O. ICAT meetings helps reduce the risk of violence to my clients.</td>
<td>Strongly Agree</td>
<td>Agree</td>
<td>Disagree</td>
<td>Strongly Disagree</td>
<td>Don’t Know</td>
<td>Not Applicable</td>
</tr>
</tbody>
</table>

a. Are there any barriers to information sharing (please specify):

________________________________________  
________________________________________  
________________________________________  
________________________________________  
________________________________________  

b. Other Comments:

________________________________________  
________________________________________  
________________________________________  
________________________________________  
________________________________________
SECTION 2: Collaboration

Please consider each of the following statements and mark the response that comes closest to what you think about that statement.

<table>
<thead>
<tr>
<th>Partnerships</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Don’t Know</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>The N.O. ICAT members understand each other’s roles and responsibilities.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I have good relationships with the other N.O. ICAT partners.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>Collaboration among the N.O. ICAT partners has strengthened during my tenure</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I enjoy my work with the N.O. ICAT.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>My participation in the N.O. ICAT has increased my contact with others involved in addressing domestic violence.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O. ICAT has improved communication between organizations involved in reducing the risk of domestic violence.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O ICAT has helped other organizations addressing domestic violence increase their influence in service coordination.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Workload</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Don’t Know</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>My workload (specific to high-risk domestic violence clients) has decreased since my agency’s involvement in the N.O. ICAT.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>My files move through the system faster since my agency’s involvement in the N.O. ICAT.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>My agency provides me with sufficient time to complete my N.O. ICAT responsibilities.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>My skills are used effectively in the N.O. ICAT.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>My time is well-spent participating in the N.O. ICAT.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
</tbody>
</table>
## Service Delivery

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Don’t Know</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>N.O. ICAT activities are collaborative and cooperative.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O. ICAT reduces duplication of services.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O. ICAT has gaps in service delivery.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I provide better service to my clients now than prior to the N.O. ICAT being established.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>Clients have seamless access to the services provided by the N.O. ICAT agencies.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>Clients expressed concerns about barriers or challenges about obtaining my agency’s services.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>Clients expressed concerns about barriers or challenges about obtaining partner agency’s services.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>Clients have access to the funds needed to implement their safety plan.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O. ICAT clients have experienced improved service delivery.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>Client involvement in the N.O ICAT has resulted in cases moving through the system faster.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
</tbody>
</table>

## Community Linkages

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Don’t Know</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>The N.O. ICAT has a strong commitment from the decision-making level of my organization.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O. ICAT has strong support from the criminal justice system.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O. ICAT has strong support from the community.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O. ICAT works with community leaders and allies.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O. ICAT is responsive to the needs of women from diverse communities.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
</tbody>
</table>
North Okanagan High Risk Domestic Violence Team Integrated Case Assessment Team
Cover Letter & Partner Survey

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Don’t Know</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>N.O. ICAT regularly shares information with its agency partners.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
</tr>
<tr>
<td>N.O. ICAT regularly shares appropriate information with the public including diverse communities.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
</tr>
</tbody>
</table>

**Results**

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Don’t Know</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>My role in the N.O. ICAT helps empower victims of domestic violence.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
</tr>
<tr>
<td>My work with the N.O. ICAT helps keep women keep themselves safe.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
</tr>
<tr>
<td>My work with the N.O. ICAT helps hold offenders accountable.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
</tr>
</tbody>
</table>

**a.** Are there any barriers to collaboration or activities that might increase partner agency collaboration?

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

**b.** Additional comments:

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
SECTION 4: N.O ICAT Processes

Please consider each of the following statements and mark the response that comes closest to what you think about that statement.

<table>
<thead>
<tr>
<th>Safety</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Don’t Know</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safety plans are updated or changed when needed.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>N.O ICAT safety plans are keeping women and children safer.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Structure &amp; Roles</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Don’t Know</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>The roles and responsibilities of the partner agencies in the N.O. ICAT are clear to me.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I have a good understanding of all the N.O. ICAT’s partner organizations.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I have a good understanding of the overall structure of the N.O. ICAT.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I am aware of the procedures to follow if I have any concerns about the N.O. ICAT actions.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Connections &amp; Communication</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Don’t Know</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Crown counsel relies upon the information that the N.O. ICAT discloses.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I have seen communication between partner agencies improve over my time with the N.O. ICAT.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O ICAT is ICAT sharing/updating the broader community partners on its success (for example agencies that were invited to the roll-out).</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I have seen a greater awareness of domestic violence and the N.O. ICAT broader in the broader community over my time with the N.O. ICAT.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O. ICAT increases the awareness of high-risk domestic violence issues in the criminal justice system.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>My working relationships with the N.O. ICAT partners have improved during my time with the N.O. ICAT.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
</tbody>
</table>
North Okanagan High Risk Domestic Violence Team Integrated Case Assessment Team
Cover Letter & Partner Survey

### Learning

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Don’t Know</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>My personal relationships with the N.O. ICAT partners have improved during my time with the N.O. ICAT.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O. ICAT provides opportunities for me to learn more about the agencies involved in addressing domestic violence.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>My involvement with the N.O. ICAT has increased my knowledge of the available resources for reducing the impact of domestic violence.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>My involvement with the N.O. ICAT has increased my skills and knowledge in regards to reducing the risk of harm due to domestic violence.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I feel included in the N.O. ICAT’s efforts to educate other communities in reducing the risk in high-risk domestic violence cases.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I am kept informed on the program mentoring that the N.O. ICAT is doing throughout the province.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O. ICAT maintains communication with programs that it has sponsored.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
</tbody>
</table>

### Inclusion and Process

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Don’t Know</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>The N.O. ICAT meeting format is effective and appropriate.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O. ICAT encourages open discussion on key issues.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>People are encouraged to speak openly at N.O. ICAT meetings.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O. ICAT welcomes everyone’s opinion.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
</tbody>
</table>

### Vision and Stability

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Don’t Know</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>The N.O. ICAT members have a common sense of purpose.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O. ICAT is stable regardless of committee members changing.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
</tbody>
</table>
The N.O. ICAT sets measurable and achievable goals.

<table>
<thead>
<tr>
<th>Strongly Agree (SA)</th>
<th>Agree (A)</th>
<th>Disagree (D)</th>
<th>Strongly Disagree (SD)</th>
<th>Don’t Know (DK)</th>
<th>Not Applicable (NA)</th>
</tr>
</thead>
</table>

**SECTION 5: Overall Comments**

a. Describe the successes and challenges of collaboration.

____________________________________________________________________________________________________________________________________________________
____________________________________________________________________________________________________________________________________________________
____________________________________________________________________________________________________________________________________________________
____________________________________________________________________________________________________________________________________________________

b. What is your satisfaction level with the collaboration—has it changed and why?

____________________________________________________________________________________________________________________________________________________
____________________________________________________________________________________________________________________________________________________
____________________________________________________________________________________________________________________________________________________
____________________________________________________________________________________________________________________________________________________

b. What is your satisfaction level with how disputes are surfaced and resolved?

____________________________________________________________________________________________________________________________________________________
____________________________________________________________________________________________________________________________________________________
____________________________________________________________________________________________________________________________________________________
____________________________________________________________________________________________________________________________________________________
d. What are N.O. ICAT’s greatest strengths/weaknesses?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

e. Where can the N.O. ICAT be improved?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

f. Does ICAT keep as its primary goal as its primary goal reducing the risk of death or grievous bodily harm due to domestic for women of the North Okanagan?
g. Please add any additional comments:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Thank you for your help 😊!

Brooke, Debby, Lisa, Robb and Jay
APPENDIX “D” – STRUCTURED CLIENT INTERVIEW (DRAFT)
Introduction

The North Okanagan Integrated Case Assessment Team (N.O. ICAT) is conducting an evaluation of their program. Some details of this program evaluation are as follows:

- The evaluation is being conducted jointly by:
  - Brooke McLardy, Program Coordinator, North Okanagan Transition House;
  - Debby Hamilton, Regional Coordinator Community Coordination for Women’s Safety Program;
  - Constable Lisa McMullin, Domestic Violence Unit Coordinator, Vernon RCMP;
  - Sergeant Robb Daly, non-commissioned officer in charge, Armstrong RCMP; and,
  - Jay Buckner, a University of Victoria graduate student and RCMP officer.

- The purpose of the evaluation is to:
  - Assess how well the N.O. ICAT agencies work together;
  - Identify the strengths of the N.O. ICAT as well as its weaknesses; and,
  - Find out if the N.O. ICAT is meeting the needs of the women it serves.

- Components in this evaluation are:
  - Surveying the N.O. ICAT government and non-government agency staff;
  - Reviewing police reports for data on incidents of domestic violence involving former N.O ICAT clients; and,
  - Conducting Structured interviews of N.O ICAT clients—women who have been helped by the N.O. ICAT.

- Your participation is requested in a structured interview which will take approximately 45 minutes to complete.

- The benefit of your participation is that:
  - It gives you a way to voice your opinions regarding how the N.O. ICAT operates and how it may be improved;
  - Your comments and suggestions may also help develop how similar programs are run throughout BC; and,
  - Your participation can help other women who have experienced some of difficulties that you have gone through.
Consent

- Your participation in this evaluation is completely voluntary and you may withdraw your consent at any time.

- Your specific answers are confidential. Only Jay, the primary evaluator, and the two research assistants conducting this interview will have access to your completed questionnaires.

- Should the information from the questionnaire be used in any report or publication, all identifying information will be removed so that you will not be personally identifiable in any way.

- If you have any questions regarding this questionnaire or evaluation, please contact Jay via email at jay.buckner@rcmp-grc.gc.ca

I, ____________________, consent to participate in the N.O. ICAT’s structured interview for the purpose of this program evaluation. I also consent to the use of my answers as described above.

______________________________  ______________________________
Signature                                      Witness

______________________________  ______________________________
Date                                      Date
## File Information

<table>
<thead>
<tr>
<th>N.O ICAT File Number:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Police File Number:</td>
<td></td>
</tr>
<tr>
<td>Offence Date:</td>
<td></td>
</tr>
<tr>
<td>Offender:</td>
<td></td>
</tr>
<tr>
<td>Victim(s):</td>
<td></td>
</tr>
<tr>
<td>With Partner:</td>
<td>☐ Yes ☐ No</td>
</tr>
</tbody>
</table>

## SECTION 1: Service Delivery & Support

Please consider each of the following statements and tell me which response comes closest to what you think about that statement.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Don’t Know</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>My N.O. ICAT contact(s) gave me all the information I needed about available services.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>My N.O. ICAT contact understood my unique situation and circumstances.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I was comfortable contacting my N.O. ICAT contact about services.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>Getting a hold of my N.O. ICAT contact(s) was easy.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I could easily access all the services that I needed for myself and my children.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>In comparison to my previous experience with the service agencies, my experience coordinated by the N.O. ICAT is better.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I understood what the N.O. ICAT could do for me.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I understood the criminal justice process and how the N.O ICAT could help me.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I was able to get the money I needed to make myself and/or my children safe.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>Agree</td>
<td>Disagree</td>
<td>Strongly Disagree</td>
<td>Don’t Know</td>
<td>Not Applicable</td>
<td></td>
</tr>
<tr>
<td>----------------</td>
<td>-------</td>
<td>----------</td>
<td>-------------------</td>
<td>-----------</td>
<td>----------------</td>
<td></td>
</tr>
</tbody>
</table>

I was happy with community support aspects of the N.O. ICAT’s response.

a. What N.O. ICAT services and/or support did you use?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

b. How would you describe your relationship with your N.O. ICAT worker(s)?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Page 4
c. How was it to get a hold of the different services providers?


d. If there were some services that you had trouble accessing, which were they? What would have helped you get services these more easily?


e. What relationship do currently you have, if any, with the man who assaulted you?
f. How did the N.O. ICAT influence that? Did they help? Could they have helped more and, if so, what could they have done? Did working with the N.O. ICAT make it worse?

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

__________________________________________________________________________


g. Do you have any additional comments about your N.O. ICAT contact, the service provider representatives or the N.O. ICAT overall?
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
SECTION 2: Engagement & Empowerment

Please consider each of the following statements and tell me the response that comes closest to what you think about that statement.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Don’t Know</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>I felt safe working with the N.O. ICAT.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I felt connected to my N.O. ICAT case worker.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I felt connected to my service providers.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I received all the information about victimization that I needed.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The information that I received about victimization help me to keep myself and/or my children safe.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I helped develop the safety plan for myself and/or my children.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I was supported by the N.O. ICAT even when they did not agree with my choices.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>My relationship with my N.O. ICAT contact(s) influenced my decision to participate in the criminal justice system.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>My involvement with the N.O. ICAT helped me feel in control of my life.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I was well-informed about the progress of the criminal court case.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I felt prepared when I had to attend court.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>My safety plan worked.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>My safety plan was updated or changed when needed.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
</tbody>
</table>

a. If you did not participate in the N.O. ICAT process, what were the reasons for this? What would have changed your mind?
b. If you did not connect with your N.O. ICAT contact, what would have helped you to?
c. If you did not participate in the criminal justice process (that is working with the police, Crown counsel and/or going to court), why was that? What would have changed your mind?

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________________________________________________________________________

d. Do you have anything that you would like to add in regards to how you felt about the participating in the N.O. ICAT process?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
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SECTION 3: Offender Accountability

Please consider each of the following statements and tell me the response that comes closest to what you think about that statement.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Don’t Know</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>I was informed of my partner/former partner’s release.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>My partner/former partner’s conditions were fully explained to me.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>Changes (if any) to my partner/former partner’s conditions were explained to me.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>My partner/former partner was supervised while on conditions.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O. ICAT helped me get the conditions on my partner/former partner that I needed against to keep my family, friends, colleagues and me safe.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>My partner/former partner’s conditions were strong enough to make me and and/or my children safe.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>My partner/former partner’s conditions were strong enough to protect my friends and family.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O. ICAT responded to my concerns about my partner/former partner.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O. ICAT took my report(s) of my partner/former partner breaching his conditions seriously.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O. ICAT acted immediately to my report(s) of my partner/former partner breaching his conditions.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I was happy with the criminal justice aspect of the N.O. ICAT’s response.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
</tbody>
</table>
a. If your partner/former partner was not on the conditions that you needed to keep yourself, your family and/or your friends and colleagues safe, what would have been helped?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

b. Do you have anything that you would like to add in regards to how you felt about the participating in the process?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
SECTION 4: Safety

Please consider each of the following statements and tell me the response that comes closest to what you think about that statement.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Don’t Know</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>The N.O. ICAT did everything they could to make me safe.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>The N.O. ICAT’s primary focus is my safety and/or that of my children.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>Information regarding the offender that was relevant to my safety was shared with me.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I understood the safety measures that were required for my children.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I felt a real sense of support for me and/or my children from the N.O. ICAT.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
<tr>
<td>I felt safe through the court process.</td>
<td>SA</td>
<td>A</td>
<td>D</td>
<td>SD</td>
<td>DK</td>
<td>NA</td>
</tr>
</tbody>
</table>

a. How would you compare how you felt about your safety (and that of your family and/or friends) before and after working with the N.O. ICAT?
b. How did you feel about the N.O. ICAT safety plan? Did you feel in control of how it developed?

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c. Was there anything specific that the N.O. ICAT did to help increase your safety? What else could we have done?

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SECTION 5: Additional Comments

a. Please add any additional comments or concerns that you have in regards to your involvement with the N.O. ICAT.

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