R.E.M.
REFUGES' EVALUATION MODELLING

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Looking into women's experiences in refuges

DEVELOPING A MODEL FOR OUTCOME EVALUATION IN WOMEN'S REFUGES
IN IRELAND, PORTUGAL AND SCOTLAND

This report was prepared by the Project's transnational team: CESIS – Centro de Estudos para a Intervenção Social (PT), National Network of Women's Refuges and Support Services (IRL), and Scottish Women's Aid (UK).

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Table of contents

1. Introduction

This report describes the process to create a model for evaluating the effectiveness of women's refuges in the European Union. With funding from the DAPHNE Initiative, a transnational team from Ireland, Portugal and Scotland developed and pilot tested a model for outcome evaluation in women's refuges across their three countries.

The decision to develop an outcome evaluation model for women's refuges resulted from a number of factors. First, in 2004, the three partner countries (along with Denmark, France and Slovenia) were involved in another Daphne Project – Shelters@net – which aimed at promoting, sharing and disseminating knowledge and experiences regarding refuge intervention practices among the different countries in the project[1]. Although outcome evaluation was not an intended focus of that project, it emerged as an important unmet need across the six countries. None of the countries participating in the project was engaged in systematically evaluating the work of refuges, largely because of a lack of resources and expertise.

Another factor driving the need for outcome evaluation of refuges in some European countries has been the increasing demand by funders for evidence that services are making a difference in the lives of women and children who use the refuges. In response to this growing pressure in Scotland, Scottish Women's Aid had begun engaging in preliminary outcome evaluation work with refuges, and exploring whether such efforts were occurring elsewhere. SWA found that a great deal of outcome evaluation of domestic violence services has been undertaken in the United States, some of which was transferable to the European Union context, but some was not.

The final driving force for creating an outcome evaluation model for women's refuges came from the desire from refuges themselves to understand the impact of their work on women and children. Refuges have been in existence across many European countries for 25 years or more, and refuge workers felt a need to examine what was working and what might need to be improved.

As a result of all these factors, the three partners of the transnational team decided to develop and test an outcome evaluation model for women's refuges that could eventually be modified and disseminated throughout other European countries.

Following this introduction, Section 2 of the report will describe the context that led to the development of project; sections 3 and 4 will describe the procedures used to develop and test the model; sections 5 and 6 will provide preliminary evidence that the model will be useful; and section 7 will present recommendations for next steps.

We hope the report will be useful to refuge organisations, national women's organisations' networks or services, funders and policy makers.

2. Domestic Violence Services and the Need for Outcome Evaluation

Over the past 35 years, services for women with abusive partners have expanded dramatically across Europe, driven largely by the Women's Liberation Movement. The earliest women's

[1] Comprehensive information on the Project and its outputs is available at http://www.shelters-net.com/

refuges in Europe were founded in the 1970s, although the growth in the provision of services in this area occurred during the 1980s. In Denmark, for example, *"The crisis centres were established in their present form between the years of 1979 and 2001, hereof most of them in the beginning of the 80's."* (Koch-Nielsen and Caceres, 2004: 29).

Service development patterns in different European countries seem to differ according to the major launching periods of refuge provision. In those countries where the first refuges date back to the 1970s, the specific pattern of service development was characterised by the opening of refuges in a first phase, with an expansion of support and counselling services in a second and more recent phase.

"It is impossible to separate the development of refuge accommodation from the development of Women's Aid groups (in Scotland) *because they are intrinsically linked."* (Okroj, McAvoy and Edgar, 2004: 15)

In countries such as Portugal and Slovenia, where the launching decade for refuge provision was two decades later in the 1990s, there was a different pattern of service development; non-governmental organisations and feminist organisations started developing counselling and support services, and SOS lines, for women experiencing domestic violence prior to the development of refuge accommodation support.

Although there are different evolution patterns and organisational models for refuge provision services across Europe, it has been possible to identify a growing concern among organisations, funders and workers about the need to evaluate how services are or are not working for women and their children.

During 2004, the three partner countries[2] of this project were involved in another Daphne Project – Shelters@net – which aimed at promoting, sharing and disseminating knowledge and experiences regarding refuge intervention practices among six European countries[3]. One of the main findings of that project was that there was an overall lack of systematic outcome evaluation across countries, although the presence of process evaluation procedures was common. In addition, the project identified a growing awareness of the importance of engaging in outcome evaluation:

> *"All countries have reported that most services providing refuge accommodation for women and children experiencing domestic violence are aware of the importance of undertaking – in a regular and systematised way – evaluation procedures, but such work is often prevented by the lack of resources, but also by the lack of agreed and effective evaluation mechanisms.*
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> *In such a context, most refuges have developed some sort of internal evaluation procedures that allow them to have some feedback on the results of their working practices and on the levels of satisfaction experienced by the women and children." (CESIS (coord), 2004: 40)*

What is outcome evaluation? While process evaluation documents programme activities (e.g., who is receiving services, what specifically people are receiving, and how much they are receiving), outcome evaluation assesses change that occurs as a direct result of the

[2] The Project involved three other partner countries: Denmark, France and Slovenia.
[3] Comprehensive information on the Project and its outputs is available at http://www.shelters-net.com/

programme. Specifically, an outcome is a change in clients' knowledge, attitudes, skills, behaviour, expectations, emotional status, or life circumstances *due to the service being provided to them.* Outcomes must be specific, measurable, and directly tied to programme activities.

The need for outcome evaluation in the area of domestic violence services has been recognized internationally. One of the 15 recommendations issued by the World Health Organisation's report *"Multi-country Study on Women's Health and Domestic Violence against Women"* (WHO, 2005) is that:-

> *"Research aimed at informing the design and delivery of interventions where these do not exist needs to be accompanied by evaluation research on the short and long term effects of programmes to prevent and respond to partner violence (…)"* (p97).

Significant work has been done in the United States since the late 1990s to evaluate the impact of domestic violence programmes. As federal funding for U.S. programmes has increased, so has the scrutiny of such programmes by funders. In response to this external pressure, a number of tools, manuals and workshops were developed in the U.S. for domestic violence service programmes (e.g., Lyon & Sullivan, 2007; Riger et al., 2002; Sullivan, 1998, 2007; Sullivan & Coats, 2000).

Although the extensive work that has been done in the U.S. was seen as a useful starting point in creating an outcome evaluation model for Europe, the project team was committed to designing a model that was specific to the European context. To that end, the team applied for and received funds from the European Commission's Daphne II Programme to Combat Violence Against Children, Young People and Women, in order to design an outcome evaluation model for European refuges. The following section will describe the procedures used to develop and test that model.

3. Methodology

3.1. The Project Team

Three partner organisations representing Portugal, Ireland and Scotland collaborated on this project. CESIS (Centro de Estudos para a Intervenção Social) is a non-profit independent organisation of researchers in Portugal concerned with promoting evidence-based, policy-relevant research. They were the lead agency for the project. The National Network of Women's Refuges and Support Services (NNWRSS) is the leading national organisation in Ireland representing refuges and support services working in the area of domestic violence against women and their children. Scottish Women's Aid is the umbrella organisation for the network of women's aid groups in Scotland. The project also benefited from the support of Dr. Cris Sullivan, a highly experienced evaluator of domestic violence programmes in the United States.

3.2. The Shared Principles Underlying the Work

The diversity of expertise and working practices within the partners' organisations, combined with the different social contexts in the three countries, led to the establishment of shared principles that underpinned our field work and helped us to make the most of our expertise.

Three main principles, therefore, informed and guided our work, interactions, direction and, ultimately, the outputs of the project.

- To work from a strengths-based approach when considering women who had experienced domestic violence
  In our initial discussions on service provision across the three European partner countries, we identified two universal dynamics in the area of Domestic Violence:
    - to inadvertently blame women for the domestic violence or hold them responsible for ending it;
    - to assume women were lacking certain skills or abilities that would help them deal with the domestic violence; alternatively, there could be an assumption that all women were emotionally damaged or deficient in some way because of their experiences of domestic violence.

  We therefore decided to be clear that we were not working from those assumptions and that we did not want to replicate inadvertently those belief systems in the evaluation tools that we developed. We agreed that, although women may be emotionally affected by their experiences, we would work from the assumption that women were innately skilled survivors.

- Women's experience is central to the development of services, but is often not translated into research
  Next, we agreed that while women's experiences were often central to the development of services, there were very few examples of women's experiences of domestic violence directly influencing the development of research. We therefore decided to ensure that we would involve women who had experienced domestic violence and women who had used services as much as we could in the development of the evaluation tools. We also worked to centralise our own experience of working directly with women in all our discussions about the development of the project. This often meant, for example, prioritising the 'voice of the woman' from those within the working group who had experience of directly supporting women.

- The experiential knowledge of women and workers is a vital source of knowledge for the project
  Building on the first two principles, we then discussed the importance of centralising in the work of the project the experiential knowledge of women who use domestic violence services and that of the workers who support them. Our discussions were based on the shared belief that workers often have a wealth of expertise and knowledge from listening to and supporting women who have experienced domestic violence. This is especially true if we understand women to be skilled and innate 'survivors' of such violence.

These three principles informed and guided our choice of working tools, which were designed to capture the experiential knowledge of women and workers. Thus, a variety of research methods was used: self-administered questionnaires, focus groups, extensive exploratory interviews and advisory groups.

4. Documentation of the Process

The development of the outcome evaluation model occurred in five phases:

1. An initial analysis of outcome evaluation needs and concerns by country;
2. Construction of outcome indicators;
3. Initial creation of a model of outcome evaluation;

4. Implementation of the pilot study;
5. Adaptation of the model based on pilot study findings.

At the beginning of the project, the three national teams established advisory groups in their own countries. Their formation was easier in the countries where there were already links to the partner organisations (members of both SWA and NNWRSS). However, the advisory group in Portugal had to be formed from the root up and institutional links had to be established beforehand[4].

The advisory groups played an important role during all phases of the project. Their role as an "external interested eye" on the model's development was essential.

Phase 1 – Initial Analysis

The three partners each independently developed a country-focused analysis of issues directly relevant to outcome evaluation, including:

1. legal and policy dispositions affecting evaluation procedures in refuges;
2. refuges' organisational profiles and capacity for participating in outcome evaluation;
3. refuge staff's expectation of outcomes of their work;
4. anticipated obstacles, benefits and challenges that may arise from implementing outcome evaluation procedures.

Data were gathered for the country-focused analysis using three methods:

a) Desk research, which included reviewing policy and legislative frameworks, and examining organizational records of refuges;
b) Questionnaires aimed at gathering more specific and updated information from refuge staff; and
c) A qualitative approach, to obtain more comprehensive data from refuge staff and from survivors themselves. This approach included the use of workshops (Scotland), focus groups (Portugal) and extensive interviews (Ireland). In Scotland, the workshops were run with members of 20 different Women's Aid Groups; in Portugal, the focus groups (one in Lisbon and one in Porto) were run with the co-ordinators of 19 different refuges; and in Ireland, detailed telephone interviews were held with the Manager/Co-ordinator of 18 refuges. In Portugal, three exploratory interviews were also conducted with women in refuges; the objective of this approach was to obtain the perspectives of the women themselves on their experience in the refuges, particularly regarding initial expectations and changes felt at different levels during their stay in refuge.

These methods helped inform the initial creation of outcome indicators and tools, which will be described in more detail below.

Phase 2 – Construction of Outcome Indicators

The outcome indicators were built from a strengths-based perspective that appreciated and highlighted the strategies and resistances women have when they come to refuge. Safety, information and empowerment were the three major outcomes identified in the three countries; it was agreed that they were the most relevant, and they informed the building up of the tools.

The process that led to the identification of the three major outcome factors involved several key contributions: hearing directly from women themselves about their needs and experiences as

[4] This limited their possibility to contribute in the first phase of the project.

service users; developing nation-specific structured questionnaires to identify key aims and objectives of refuges; discussing with refuge workers what they considered relevant outcomes; learning from team members' expertise, both as practitioners and researchers, about women's needs and expected outcomes; sharing and discussing prior research findings on similar processes for determining outcome indicators that were relevant to evaluating the effectiveness of refuges.

In relation to safety, two indicators were agreed to be significant: immediate physical safety and safety planning (building skills to find the best way to deal with domestic violence), which lead also to knowledge and awareness. In relation to information, it was agreed that outcomes would focus on issues related to knowledge and awareness, i.e. awareness of options and knowledge of access to resources. It was considered that indicators relating to the impact produced by the intervention in refuges were important in assessing changes in the ability of women to take their own decisions and changes in restoration and emotional healing. In addition, it was agreed that assessment would also focus on whether women in refuges are being cared for, respected, listened to and supported, and on whether their strengths are acknowledged.

Phase 3 – Initial Creation of a Model of Outcome Evaluation

After agreeing the outcome indicators, we chose a model for gathering information that would be simple, easy to use and easy to analyse. Our model entails pre and post-assessment of service provision by using two self-assessment questionnaires.

Several factors influenced our decision to use this type of model:

- the use of questionnaires had been field-tested with domestic abuse services previously and found to be a successful methodology (Sullivan, 1998, 2001, 2005; Riger et al, 2002);
- time restrictions limited our ability to test alternative methods, especially those that would require extensive training of refuge-based services providers (e.g., focus groups, in-person or telephone interviews, creative techniques);
- self-administered questionnaires would be safer and more private for service users than face-to-face or telephone interviews;
- focus groups are a useful approach for exploring experiences, but are less effective for assessing outcomes for individual service users;
- the use of self-administered questionnaires was a technique familiar to most refuge-based organisations in the three countries, which meant that it could be incorporated in current evaluation structures or easily added to administrative systems where formal evaluation structures do not exist ;
- the self-administered questionnaires were regarded as more feasible for long-term implementation because of resource implications, as noted above.

The two forms[5] were designed to be used at different times: Form 1 would be used during the first week of the woman's stay in the refuge; and Form 2 would be administered when the woman was preparing to leave the refuge. The questionnaires were provided together with an individual envelope in order to ensure total confidentiality for the women's responses.

The questionnaires were initially written in English, but group members from Portugal translated them into Portuguese and those from Scotland had them translated into six different languages:

[5] Questionnaires included in annex.

Arabic, Bengali, Cantonese, Hindi, Punjabi and Urdu. In the three partner countries, the questionnaires were reviewed by service providers to ensure that language, style and content were appropriate and relevant.

Form 1 was designed to enable us to learn more about what women felt they needed from refuge services. It has two sections:

- Section 1 asks the woman to indicate, by ticking relevant boxes, what types of things she thinks she will need help and support with while in refuge.
- Section 2 asks the woman to answer a series of questions on how she found out about refuge; her length of stay in refuge; whether she had been in refuge before; and what she would have done if she had not gone into refuge. There is also a series of demographic questions on her age range, ethnicity (the Portuguese form does not include the latter information because collecting information on ethnic origin is not allowed in Portugal), and additional support needs.

Form 2 focuses on actual changes experienced by women while in refuge. It was anticipated that women's support needs might change after they had been in refuge for several weeks and had had a chance to deal with immediate concerns for themselves and their children - if any - and an opportunity to contemplate plans for their future. Therefore, Form 2 has four sections:

- Section 1 asks women to indicate, on a scale of 1 to 3, whether they got all the support or help they needed on a range of issues; for example, staying safe, understanding domestic abuse and getting health care.
- Section 2 asks women to indicate, on a scale of 1 to 3, the difference that the help or support they received in refuge made to different aspects of their lives; for example, safety, confidence in making decisions and having needs met.
- Section 3 asks women to rate, on a scale of 1 to 3, how they felt they were treated by refuge workers.
- Section 4 asks women to complete a series of general questions similar to those described in Form 1.

Phase 4 – Implementation of the Pilot Study

The refuges were selected nationally according to common criteria: – a mix of rural/urban locations; a refuge's capacity to engage fully in the project; a commitment to participate; and a good geographical spread. A total of 15 refuges participated across the three countries.

The model was piloted in these refuges for 10 weeks. A training period took place just prior to the start of the pilot phase. The training sessions were designed to improve the workers' knowledge of the main objectives of outcome evaluation and to introduce them to the tools and implementation procedures. The three partner countries developed a common type of training session: brief presentation of the project; practicalities of the pilot implementation; presentation and discussion of the evaluation tools; and an attempt to pre-empt and resolve any issues. Different strategies were adopted: one training session in a central location (Ireland and Scotland); four training sessions in the refuges (Portugal). A total of 54 workers received training across the three countries.

An information pack was then distributed that contained forms 1 and 2, envelopes identifying the project, instructions on how to invite women to complete the questionnaires, a data collection checklist and large envelopes for returning the questionnaires. In Scotland and Ireland, leaflets and posters were also included.

All refuges designated one contact person responsible for liaising with the Project team in each country. The three partners maintained weekly contact with refuges by phone.

Given the pilot nature of the project and the time constraints, a decision was made that Form 2 should also be filled in by all women who were still in refuge by the end of the implementation stage, excluding new admissions during that period who would fill only Form 1.

By the end of the pilot stage, a total of 224 Forms (95 of Form 1 and 129 of Form 2) were returned. Refuges also gathered and returned information on the collection procedure, namely: the total number of women in refuge at the start of the pilot; number of admissions and discharges; and total number of women still in refuge at the end of the pilot. Reasons given by women for not wanting to fill in the forms were also collected as far as possible.

Phase 5 - Adaptation Of The Model Based On Pilot Study Findings

The information collected through the forms was analysed by the national teams. This analysis had a dual objective: to check the consistency and validity of the data; and to enable us to ascertain how the information collected could be used to provide feedback to the pilot groups so that they could check how useful it was for their work. Although the results *per se* were not considered important to this project, they were an essential way of validating the process.

The implementation process itself was scrutinised from a comparative perspective and relevant adaptations were agreed. The following section will highlight the major lessons that were learned throughout the development of the Project, from wider challenges related to nation-specific contexts, to concrete suggestions on the materials and tools produced.

5. Lessons Learned

In order to determine whether the pilot had been successfully implemented, we agreed on two major criteria that needed to be checked: 1) whether the forms worked; 2) whether the information gathered was useful and relevant for service development.

In order to assess whether these two criteria had been met, we resorted to different strategies: 1) weekly contacts with all the pilot refuges in order to check whether the implementation of the forms was being successful (willingness of women to participate, obstacles arisen, support needed); 2) focus group with the refuge workers immediately after the end of the pilot to assess implementation issues (effectiveness of the training, usefulness of the information pack, interaction with the women, impact on work and workers, impact on organisation); 3) analysis of the consistency and validity of the data in all countries; 4) a second focus group with the refuges in order to assess the usefulness of the information collected for service development.

The first important piece of evidence to emerge was that the model worked. General feedback from workers regarding the implementation process was very positive in the three countries. During the project's development, the organisations expressed some relevant evidence for assessing how well the model worked:

- Instructions were clear and good support was provided by the three national teams during the whole process;
- In general, women willingly agreed to participate in the process;
- Women and workers found the questionnaires easy to fill in;

- Workers gained a more in-depth understanding of women's needs and an extra opportunity to reflect upon their work;
- Organisations became more aware of areas where services can be improved;
- The refuges/organisations found the findings relevant to their work;
- The organisations clearly expressed a willingness and interest in engaging in such a process in the future.

The following paragraphs present a detailed analysis of the main lessons learned during the whole process, discuss relevant issues that arose during the project's development and recommend changes for improving procedures in the future.

Lesson 1: Variation across partner countries regarding outcome evaluation demand and the capacity of refuges to engage in evaluation.

Ireland, Portugal and Scotland are in different positions[6] regarding the demand for evidence-based practice as a potential key driver for the development of outcome evaluation in refuges.

In Scotland, there is a consistent and increasing external demand for evidence-based practice as a way to demonstrate good-quality service provision and evaluate changes in the lives of women and children. In contrast, there are no requirements in Ireland and Portugal for evidence-based practice in the sense of demonstrating that the services are making a difference in the lives of clients, although there is growing discussion in Ireland of the issue by National Funders. The need for outcome evaluation is felt in different degrees by organisations providing refuge and support services, but there is no actual pressure yet to put in place such procedures.

On the other hand, legislation, policy and funding requirements are at different stages of development in the three countries, which seems to have a direct impact on shaping the provision of refuge services and on the acceptance and dissemination potential of any outcome evaluation model.

In Ireland and Portugal, legislation, policy and funding requirements mainly focus on the delivery of services, i.e., on the demonstration that refuge services are being provided to the clients and the extent to which those services are being provided and utilised. Thus, the challenge for the organisations providing refuge accommodation in these two countries is to provide data on the delivery of those services, namely on the number and demography of the service users and the type of services, among other process data. Accordingly, organisational procedures regarding evaluation mainly concentrate on process evaluation.

In Scotland, service providers are being challenged by national standards and regulations to provide information on the quality of the services provided and, more recently, on the impact of those services on service users. Thus, outcome evaluation procedures are increasingly being required and acknowledged as essential for this stage of the development of refuges and support services in the area of domestic violence.

This insight into the different realities of refuge provision across the three partner countries is relevant both for the immediate purpose of designing a model of outcome evaluation for refuges and for designing an analytical framework for interpreting the realities of refuge provision in other European countries.

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[6] A more detailed analysis on this issue is available in the Project's interim report "R*.E.M. Refuges' Evaluation Modelling: Developing a model for outcome evaluation in women's refuges comparing practices and perceptions across three European Countries"*.

Lesson 2: Tool development.

Women found the questionnaires very easy or easy to fill in. In all countries, there was a good return of completed forms.

As tools designed to hear the voice of the women, the questionnaires were scrutinised during the implementation stage, and changes are now suggested:

Form 1:

- Ask whether women have children up to age 18 they are responsible for and whether they are living with them in refuge.
- Add a question about abuse perpetrated by other family members, including relatives in extended family models;
- Give women the opportunity to refer to different ways that they actually found out about refuge (more than one option);
- Reformulate question 4c, deleting the example in parentheses because it may have induced some women to respond to where they would have GONE rather than to what they would have DONE;
- Delete the question on the additional support needs, since the results suggest that it may have been confusing.

Form 2:

- Add a question about abuse perpetrated by other family members, including relatives in extended family models;
- On question 3, insert the option “this doesn’t apply to me”;
- Give women the opportunity to refer to different ways that they actually found out about refuge (more than one option);
- When asking how long women have been in refuge, add ___ years, ___ months, ___ days.
- Further thought needs to be given to question 3g on discrimination on the grounds of sexual orientation. On the one hand, it made some women uncomfortable and it would be useful only if women were asked in the demographic section to identify themselves as heterosexual, bisexual, or lesbian. On the other hand, it was felt in some countries, (e.g., Portugal) that bisexual and lesbian women might not self-identify on the survey, yet it could be important for them to be asked if they felt respected, regardless of whether or not they would tick the box honestly.
- Reformulate question 4c, deleting the example in parentheses because it may have induced some women to respond to where they would have GONE rather than to what they would have DONE; keeping it in Form 2 should be carefully considered.
- Remove redundant questions (e.g. on question 3i, include a line asking the woman to identify what the need was, and then remove question 4h)

Other considerations were expressed by refuge workers relating to the relevance of the tools. Form 1 was seen as a potential basis for support work and as an awareness tool for women, which might capture their attention on issues such as the impact or effects of domestic violence on them and their children.

Lesson 3: Training and materials.

The training was considered to be effective in all participating refuges.

Improvements are needed, however, in several areas:

- development of a more structured format for the training in order to allow its replication by others
- intensify role-playing techniques, and introduce practice discussion on "worst case scenarios" and how to deal with them
- provide training to each refuge, ideally within the refuges, in order to increase `buy in` from staff.

The idea of "Training for Trainers" sessions was discussed by the team as a possible future orientation. This would enable all workers to get trained in the refuge within an individualised programme for each organisation.

The information pack (posters and leaflets) was considered very helpful and should therefore be used. A log sheet should be added to the pack in order to facilitate the collection of information that documents how many women were in refuge, how many were offered forms, how many completed forms, and how many did not complete forms and why. This would help overcome some of the difficulties workers had in collecting the requested data.

Lesson 4: The process itself.

It was considered that the times chosen to administer both forms were appropriate; i.e., asking women about their needs on entering the refuge (Form 1); and asking women about actual changes and experiences on leaving the refuge (Form 2).

However, some complications arose regarding the timing for Form 1. Refuges were asked to invite women to complete the form during the first week, but strategies differed in practice: some workers asked women to complete the form with other paperwork when they entered refuge; other workers waited up to 7 days; and some even wanted a 10 to 14-day window instead of 7 days. A longer piloting period would probably be useful to clarify the pros and cons of different procedures.

It is important to give women time and space to fill in the forms and, where possible, designate a support room for that. Workers should allocate time to ask women to fill in the forms, particularly if there are literacy problems.

Using the sealed envelopes worked well across all countries. Some refuges even put some blank envelopes in a box so women would not feel their questionnaire was the only one in the box. In Scotland, some refuges suggested giving women the option of having a stamped envelope to mail back at their convenience, but this was not piloted.

Weekly phone contacts proved effective, particularly in the first two weeks, as a way of discussing any queries that arose. After this first period, there was a gradual fading out of reporting or discussing relevant issues, and the phone contacts became a way of registering the number of forms given out.

Weekly contacts were felt to be too frequent in Ireland and Scotland, but were valued in Portugal as a way of helping workers feel supported throughout the process.

It is important to take into account the organisational context in the individual country before engaging in any of the contact procedures mentioned above. In Portugal – where little or no support is given to refuge workers in their daily practice and where no national network or federation exists – the possibility of getting support and feeling that "someone was available" on a regular basis was highly valued by workers.

The existence of a focal point (either an umbrella organisation or an external support team) responsible for the development and implementation of the outcome evaluation process seems to be an important added value, even though each refuge could engage in running the process by itself. Refuges participating in the pilot study valued the good support and dialogue throughout the pilot, up to the delivery and discussion of the results.

Lesson 5: Interaction with the women.

Asking women escaping domestic violence to evaluate outcomes of the services that helped them during their process is a sensitive subject.
Two key lessons should be taken into consideration:

- Women should never feel under pressure to complete the questionnaire;
- Valuing the woman's contribution to the process.

Other important issues should also be considered such as who, when and how to ask. One strategy was to try to involve different workers in the questioning process, particularly workers who were not directly working with the woman. However, during our pilot, this was not possible in some refuges and some workers reported that this strategy affected their interaction and relationship with the women.

Time is a key factor in asking women to evaluate services. In making the decision as to when to ask, workers should:

- Always consider that the woman's immediate needs come first and that she might not be in a position to engage in the evaluation process;
- Explain clearly to the woman the project and outcome evaluation process before asking her;
- Flag up future completion of forms to the woman if the time is not right;
- Make a judgement call when they think it is not a good idea to ask a woman to complete the form.

Other interaction challenges identified relate to:

- Not having the time/energy to help women needing a lot of support because of literacy or language difficulties;
- Sensitive balance between encouragement to participate and coerciveness/inducing responses;
- Dealing with unrealistic expectations (questions in Form 1) about availability of services that refuge cannot provide.

Planning seems to be vital for successfully facing these challenges.

Engaging in the piloting process influenced the workers' perceptions of, and interactions with, the women in several positive ways: some workers said they became more aware of the circumstances under which women left refuge because of the need to ask women to complete Form 2; implementing the tools was seen as thought provoking for workers and therefore beneficial to their relationships with women; some workers used the forms as a basis for the

support work or to deepen their support work with women; and others felt it was a learning tool for the woman, helping bring her attention to issues such as the effects and causes of domestic violence and the effects on her children.

Lesson 6: Impact of the process on the workers.

Workers did see the value of participating in the evaluation model implementation; it helped them question service provision and the focus of their work, and it gave them a more in-depth understanding of what women want and where services can be improved. Some workers also found that they took a more proactive role in their interactions with women

The impact of the process on the refuges' daily routines was experienced differently: for some workers, the evaluation procedures interacted quite well with their daily working routine; for others, it was felt to be an extra load.

Three important lessons were learned regarding the need to ensure a better and more widespread commitment to the process, namely:

1) Organisations need to decide how and when they will use the model and who will be responsible for implementing it;
2) Everyone involved with the implementation needs training;
3) It is essential to monitor continually how well the implementation process is working.

Lesson 7: Impact of the process on the organisations.

Evaluation findings can clearly express what women expect and what services are actually delivered. Evaluation findings can therefore help to improve services and can be used as part of strategic planning by the organisations.

In Ireland and Scotland, workers referred to the potential impact of the process on funding. Results can be used as a lobbying tool for funders, namely to assist with negotiations for funding increases.

In Portugal, the impact was mainly seen as a way to build up the organisations' critical capacity and start re-think their procedures, namely targeting issues that strengthen the process of empowering women.

The involvement of the organisation at different levels - from the board, to all the staff - and at different phases was identified as an area to be reinforced and reinvested in future processes.

Lesson 8: National issues.

The implementation of the pilot model in three countries with different social contexts raised some important national issues.

In countries where a national structure is in place – Ireland and Scotland – the project is seen as a great opportunity at different levels:

- Consolidating evaluation work already in place;
- Enhancing the ability of networks to go forward in this area;
- Giving a wider picture of refuges' work (local and national overview);
- Contributing to existing requirements for national authorities (annual statistics, quality requirements, funding requirements);

- Lobbying for funding.

In Portugal, as in other European countries, refuge provision has a different organisational structure and no umbrella organisations currently exist. Thus, different national issues have arisen from the outcome evaluation pilot:

- Opportunity for capacity building within organisations;
- Opportunity for refuges to share and debate ideas and working practices;
- Opportunity to engage in systematic gathering of information and to have an "external eye" analyse the results of their work and, potentially, of refuges' work at a national level;
- Need to think carefully about the use of outcome evaluation results by the State (as the major funder), for purposes of withdrawing funding to services.

6. Listening to women and gaining insights: evidence from data analysis

The tools developed (Form 1 and Form 2) allowed us to collect a range of potentially useful information for the development of refuge services.

This section will briefly present some of the most relevant data obtained, which is based on a very small sample (224 forms completed) of refuges and service users across the three countries. Given the pilot nature of the project and the size of the sample, the data presented here should therefore not be generalized.

Thus, the aim of this presentation is to illustrate the type of information that the tools can capture and their potential for informing the practice of refuges and providing data about service effectiveness and needs.

Given the different purposes of the two forms, the presentation of the data will be mainly structured around the two tools, and presented globally for the three countries[7]. However, since Form 1 and Form 2 also capture some similar background information (e.g. age, time in refuge, ethnic origin, additional support needs), the final part of this section will focus on that data.

6.1. Form 1 - Learning more about women's needs

Form 1 allowed us to identify what women need help and support with when they first enter refuge. This information can be particularly useful for determining how to develop support services that will meet the needs of women new to refuge.

We received a total of 95 forms from the three countries.

[7] National reports were prepared by the three partner countries and the national data was presented and discussed with the refuges participating in the implementation of the pilot.

Figure 1. Help and support you may need while you are in refuge

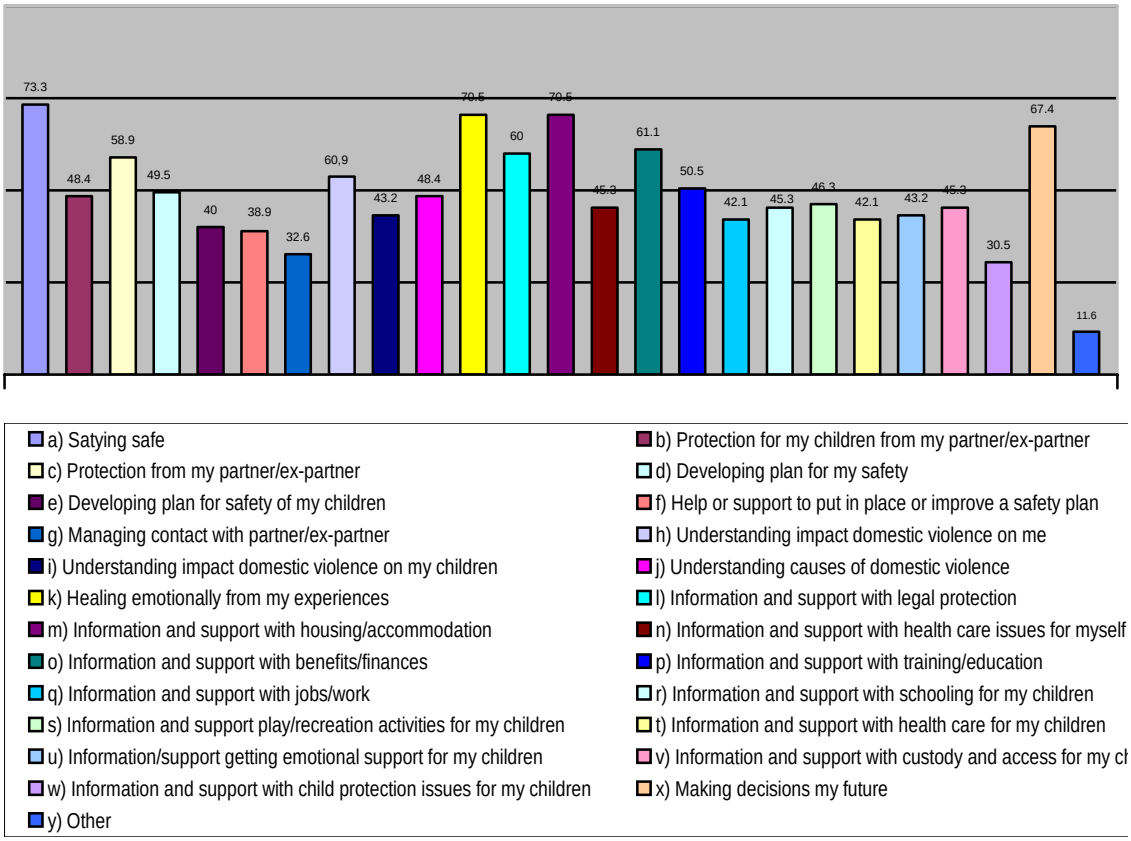

Figure 1 presents a summary of the responses women gave when asked to identify the help and support they would need while in refuge. The three most picked options regarding **help and support that women feel they need** while in refuge are *Staying safe* (73.3%), *Healing emotionally from my experiences* and *Information and support with housing/accommodation* (70.5% each).

At the other end, the least picked options are *Information and support with child protection issues for my children* (30.5%) and managing *contact with my partner/ex-partner* (32.6%).

It is important to note that the options involving children must be read carefully since the questionnaire did not allow us to identify whether women had children. Therefore, the low percentages obtained may be related to the fact that we are considering all women and not only those who are mothers. One of the recommendations made regarding the forms[8] is precisely the introduction of a question on whether women had children or not, in order to obtain a more accurate picture of these specific needs

At the end of Section 1, there was a comment box that was filled in by almost one in three women. Most comments focused on refuge conditions, and staff were pictured in a very positive and thankful way – "*I feel that (refuge) has really helped me a lot and has made a huge difference to my life".*

[8] See Chapter 5, lesson 2: tool development.

Section 2 of the form enabled us to learn more about women's knowledge and use of refuge services (previous as well as current use).

- More than one in three women (35.8%) found out about refuge through friends or relatives and less than one in four women found out through social work. Woman's Aid groups were referred to by 13% of the respondents and the police by 10%. The least mentioned options were the helpline and the housing services: only two women found the refuge via either of these services.

- More than half the women (53%) responding to Form 1 were in refuge for the first time. The remaining group had used refuge at least once before. Among this group, almost half had been in refuge before one or two times, while three women reported having been in refuge 20 or more times.

In addition, we were able to learn more about women's alternatives to going into refuge. Table 1 illustrates the range of responses women gave when asked what they would have done if they had not been able to come into refuge.

Table 1. Type of actions women would have done if they had not come to refuge

Description	No.	%
Stayed at home	16	17
Stay with friends or family	14	15
Slept on streets	13	14
Nowhere to Go	13	14
Don't Know	12	13
Gone homeless	6	6
Killed myself	5	5
Other	6	6

Coming to refuges was an important decision in women's lives. Asked what they would have done if they had not been able to come into refuge, sixteen women clearly stated that they would have stayed at home, fourteen would have gone to friends/family houses and thirteen would have slept on the streets. This latter situation might even be increased by the other thirteen women who clearly state that other than refuge they would have nowhere to go. Five women say they would have killed themselves.

A closer look at the data allows us to perceive the impact of refuge accommodation as an alternative to an extreme situation: more than one in three women would have become homeless (homeless, slept on the streets, nowhere to go) if they had not been able to go to refuge.

Another interesting output from the data is that going into homelessness or sleeping on the streets is considered more often by women living in Ireland or Scotland, whereas "killed myself" is a situation referred to only by women living in Portugal. Cultural issues and the organisation of responses linked to homelessness services in the different countries would help explain these different types of answers. That analysis is not, however, within the scope of the present report.

6.2. Form 2 – Finding out about changes and interaction

We received a total of 129 Form 2s from the three partner countries. The women's responses are presented in table 2 and summarised below.

Table 2. Women needing help and support according to the kind of help and support received

	WHO NEEDED		WHO RECEIVED					
			ALL THE HELP		SOME OF THE HELP		NONE OF THE HELP	
	No.	%	No.	%	No.	%	No.	%
Staying safe	119	92	105	88	14	12	-	-
Protection for my children from my partner/ex-partner	90	70	77	86	12	13	1	1
Protection from my partner/ex-partner	107	83	91	85	16	15	-	-
Developing a plan for my safety	105	81	74	70	26	25	5	5
Developing a plan for the safety of my children	91	71	67	74	19	21	5	5
Help or support to put in place or improve a safety plan	102	79	74	73	23	23	5	5
Managing contact with my partner/ex-partner	71	55	43	61	17	24	11	15
Understanding the impact of domestic abuse on me	104	81	71	68	27	26	6	6
Understanding the impact of domestic abuse on my children	94	73	60	81	25	27	9	10
Understanding the causes of domestic abuse	103	80	68	66	28	27	7	7
Healing emotionally from my experiences	113	88	66	58	37	33	10	9
Information and support with legal protection	101	78	75	74	21	21	5	5
Information and support with housing/accommodation	112	87	84	75	19	17	9	8
Information and support with health care issues for myself	112	87	76	68	31	28	5	5
Information and support with benefits/finances	101	67	73	72	21	21	7	7
Information and support with training/education	85	66	52	61	19	22	14	16
Information and support with jobs/work	73	57	38	52	23	32	12	16
Information and support with schooling for my children	73	57	57	78	11	15	5	7
Information and support with play/recreation activities for my children	98	65	56	57	22	22	6	6
Information and support with health care for my children	84	65	63	75	14	17	7	8
Information and support getting emotional support for my children	69	54	39	57	22	32	8	12
Information and support with custody and access for my children	76	59	48	63	19	25	9	12
Information and support with child protection issues for my children	69	53	47	68	18	26	4	6
Making decisions about my future	109	85	64	59	38	35	7	6

Women leaving refuge or those who were still staying there by the end of the pilot evidence the same type of needs identified by those who filled in Form 1 at arrival: s*taying safe* (92%), *healing emotionally* (88%) and *information and support with housing*. They also indicated they needed *information and support with legal protection* (78%).

Overall, the data shows a positive evaluation by women of the help received while in refuge: in all the areas considered, around 90% of the answers are concentrated on both “received all the help I needed” and “some of the help I needed”. The option “I received none of the help I needed” is referred to significantly less.

However, more in-depth analysis of women’s responses enabled us to examine the different ways women responded to individual areas of need identified. S*taying safe* is the area where more women said they got all the help they needed, and no one said they got none of the help needed. Similar results are obtained regarding *protection from my partner/ex-partner.*

At the other end, *Information and support with training/education*, *Information and support with jobs/work* and *Managing contact with my partner/ex-partner* were the three domains where there are more negative answers.

A closer look at two items -- *Healing emotionally from my experiences* and *making decisions about my future* -- highlights interesting findings. The first item was the second most referred to in terms of help needed. More than half the women (58%) indicate they got all the help they needed and 9% say they did not get any help. The second item is also at the top end of the "needs list", and, again, around 60% of the women got all the help needed, 35% got some of the help and seven women got none of the help needed.

Women's words in the comments box give a qualitative insight into the figures above:

> *"I do think women's refuges provide all true support you need. I certainly have become a stronger woman."*
>
> *"I think you have made my life happier (Child). I agree (mum)."*

This information can be used by refuge service providers to monitor how well they are meeting women's needs.

Form 2 tried to identify actual changes women experienced as a result of the help and support received while in refuge. Overall, positive changes were experienced in all areas and the percentage of "no changes experienced" answers is very low across all the items. Table 3 summarises the information obtained.

Table 3. Women experiencing change according to the extent of change

	CHANGES EXPERIENCED						
	TO WHOM IT APPLIED (No.)	A LOT		SOME		NONE	
		No.	%	No.	%	No.	%
I am safer.	121	103	85	17	14	1	1
I am more protected from my partner/ex-partner's abuse.	113	92	81	17	15	4	4
My children are more protected from my partner/ex-partner's abuse.	89	73	82	13	15	3	3
I am better able to manage contact with my partner/ex-partner.	80	50	63	17	21	13	16
I am more confident about making decisions.	119	73	61	40	34	6	5
I am better able to get what I need for myself	121	82	68	35	29	4	3
I am more able to get what I need for my children	96	73	76	21	22	2	2
I have more information that will help me	122	76	62	40	33	6	5
I have more ways to keep myself safer	116	77	66	34	30	5	4
I have more ways to keep my children safer	97	69	71	23	24	5	5
I understand more about the causes of domestic abuse	114	74	65	33	29	7	6
I understand more about how domestic abuse affects me	118	79	67	30	25	9	8
I understand more about how domestic abuse affects my children	100	66	66	26	26	8	8
I am better able to deal/handle/cope with the impact of domestic abuse on me	119	73	61	38	32	8	7

Refuges do have an important positive impact on the safety and protection of women. More than four in every five women (85%) felt a lot safer and 81% felt much more protected from the abuser.

Less positive are those changes related to *managing contact with my partner/ex-partner or handling/coping with the impact of domestic abuse on me*, or even *understanding more about domestic abuse causes and effects.*

The actual impact of some of those changes is best captured by women's own words. Once again, the box comments open up that possibility:

> *"Being so far away from the place of abuse I can see more clearly how it affected us all as a family. I feel so much more able to cope as a mother now."*
>
> *"Now I could put a name to what I went through for 2.5 years."*

Interaction between women and workers within refuge is another important dimension in evaluating how services are or are not working for women and their children. The following paragraphs provide an illustrative insight into the data collected on this issue.

Overall, women evaluate positively the interaction established with the workers during their stay in refuge: over 80% of the women felt the workers supported them a lot, listened to them a lot and respected their privacy a lot.

Less positive is the evaluation made around issues such as "respecting my decision, in terms of my relationship with my partner/ex-partner", and respecting women, in terms of additional support needs, sexual orientation and religious beliefs. The issue of "time" is also significant; when questioned about whether workers spent enough time with them, more women (20.9%) answered "somewhat" compared with the other items.

Women's comments on the quality of interactions are particularly enlightening about the overall results:

> *"Every worker I have met has been so caring and helpful. Both with practical and emotional support. Nothing has been a bother to them."*
>
> *"I feel very fortunate to have the support worker that I have. She has been excellent support to me, in every situation that I have had to deal with. Thank you."*
>
> *"I felt the workers didn't listen to me or the others as much as they could have due to a heavy workload, due to meetings and their SVQ's[9]".*

Social work services, and friends and relatives are the two major sources of information women refer to when asked about how they found out about refuge (23% each).

Woman's Aid groups and the police are each mentioned by 12% of the respondents. The least mentioned options are the housing services and adverts.

Two in five women responding to Form 2 had been in refuge before, but for the majority of the respondents (56%) it was their first stay in refuge. Among the former group, 40% had been in refuge one or two times before and the remaining 60% had used refuge services three or more times. Particularly striking is the fact that 3 women indicated that they had been in refuge 20 or more times before.

[9] SVQ means Scottish Vocational Qualification.

Similar to what was indicated previously regarding the "alternatives" women had, other than coming to refuge, the decision and the opportunity to come to refuge for this group of women was important in their lives. Around 30% of women responding to Form 2 would have remained at home, 16% say they do not know, and 11% would have gone to friends/family houses. One in every four women would have become homeless (gone homeless, slept on the streets or nowhere to go).

The comments and ideas voiced by women should be an important input for refuges and staff when critically examining what might be improved. The suggestions made by women are either directly related to the refuge or offer a wider perspective. Overall, they can be clustered into 6 categories: no improvements needed; emotional support; physical conditions; working staff; state support; and other. Here are some illustrative examples:

> *"Although you do provide a lot of help and support in a needy situation which I'm grateful for, you could do a bit more to interact formally and socially and spend more time when we come to speak to you."*
>
> *"Bigger space, big open park where kids could play. Children being believed and not being pushed aside. Bigger space for the women."*
>
> *"By getting more funding from government and councils."*
>
> *"The refuge building is excellent (very high standard of living and cleanliness) but the refuge staff is very rude. It would help if you train them to be polite, respectful and professional towards clients."*

6.3. Background information: different timings, similar findings

The largest portion of our sample, in both forms 1 and 2, was women aged between 26 and 35 years (around 40%), which was followed by the age group 36 to 45 years (representing around 27%). Women aged 16 to 25 represent around 20% in each group of respondents.

A high percentage of women (83.1%) answered Form 1 within their first week at the refuge; seventeen women answered on the day of their arrival; and two women answered on their 80th and 90th day of staying, respectively.

Most women answering Form 2 (38.8%) had been in refuge for between 1 and 6 months. However, seven women had been in refuge for over 365 days.

Over 80% of all the women responding to either Form 1 or 2 found the questionnaire easy or very easy to answer. Only one woman considered Form 1 very hard/difficult to answer (same result in Form 2). Not surprisingly, a higher number of women (16) said that Form 2 was hard to answer.

6.4. How to use the information gathered?

The overview presented above was merely illustrative of the potentialities of the data collected through the evaluation tools that were developed. However, the nature of the results can already give us interesting insights into the usefulness of engaging in this process.

Information on the women's needs and on the way they were responded to can inform the practice of local refuges and enhance a systematic evaluation of both the services provided inside the refuge and the services provided by the larger community. Inter-agency working on specific areas can be improved on the basis of this information.

The "alternatives" to refuge can be a powerful element in raising awareness among local and national authorities about why services exist and what would be the actual human costs of not investing in this type of response. The same point applies to the strength behind some of the comments voiced by women in the questionnaires. Funding issues are necessarily linked to this, and the information collected may be used to justify and reinforce funding.

Understanding what changes actually occurred and where women feel the main gaps are across the different dimensions will also feed internal discussion within refuges and women's organisations and discussion between them and other actors in the community.

At the present moment, the three partner countries have already engaged in different initiatives in order to make the best out of the information collected through the pilot.

In Portugal, the results of the Portuguese analysis have been discussed with all the refuges involved and will now be presented and discussed individually with each refuge. In addition, the national body responsible for most of the funding of refuges in Portugal has engaged in promoting a series of workshops with refuge organisations to debate the importance of doing outcome evaluation and to gain a better understanding of the capacity of organisations to engage in it.

Scotland produced an individual report for each pilot group and these were circulated and discussed at the final focus group. The pilot groups recommended that Scottish Womens' Aid investigate the feasibility of rolling out the pilot to all members and providing training and/or producing a guide on implementing the process and on data input and analysis. A further suggestion was that groups provide an annual return of their analyses to SWA to produce a national report.

Ireland gave feedback to all the refuges who participated in the pilot project. They are preparing a detailed report on the pilot phase and the lessons learned. The NNWRSS is formulating plans to roll out the model to all refuges in Ireland in 2008. They also plan to adapt the model for use in DV Support Services and to pilot the application of this model in 2008. This will then be rolled out to all Support Services in 2009.

7. After R.E.M – Discussing future Perspectives

The REM Project created a model for evaluating the effectiveness of refuges in the European Union in order to respond to an important unmet need identified in several European countries[10].

In this section, we will offer recommendations for the next steps that we believe are needed to improve refuge services across Europe.

One important lesson to retain from this project is that European countries are at different stages regarding the demand for outcome evaluation, and the capacity of organisations to engage in evaluation and funders to understand its actual relevance. Thus, some countries are already very motivated to engage in outcome evaluation and will be extremely interested in seeing this model (e.g. Denmark), while others may not yet be thinking about outcome evaluation (e.g. Slovenia).

The following recommendations should therefore be read in the light of this diversity, and any further developments in this area will have to deal with it:

Development

- Create a European Reference Group to develop the model and the support materials further;
- Develop a larger pilot in additional countries to examine similarities and differences, and test the tool's potential for generalisation;
- Create and pilot a model of outcome evaluation of other domestic violence support services;
- Map different levels of organisational capacity to engage in outcome evaluation in order to adapt dissemination/development strategies.

Dissemination

- Produce a brief paper targeted at EU refuges to alert them to the increasing pressure for outcome evaluation, encourage them to see the value of evaluation, and inform them about the process, the model developed and contacts for further information;

- Use WAVE newsletter and email list for this first level of dissemination.

Training

- Create a training manual and resource pack to be shared with other countries, including tools and recommendations for collecting, analysing and using the data (in different languages);
- Create a Train the Trainers training package to be delivered to different countries;
- Validate the training and the manual in the three REM countries and in other European countries;
- Develop a dissemination strategy in different stages: 1) targeting neighbouring countries (e.g. Wales, England, Northern Ireland and Spain); 2) targeting particular regions (e.g. Scandinavian countries). Focusing on "blocks" of countries could make

[10] See Shelters@net project results available at http://www.shelters-net.com/

things easier in terms of communication, transportation, similar challenges/issues, and bridging into bordering countries.

These recommendations stem directly from the Project's development during the past twelve months. However, they do not represent a commitment from the Project to engage in these additional steps;rather, they affirm that these are necessary and useful steps for responding to the growing need among refuge workers to critically examine the impact of their work on women and children.

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ANNEXES