

# Types of program referrals

*When considering referrals to support behaviour change for people using family violence, there are several common types of referrals for specialist perpetrator interventions explained below.*

When referring, it is important to consider the identity and context of the person using violence and whether there are tailored services available. Some programs provide specialised services for people identifying as LGBTQI+ or who are from specific cultural or linguistic backgrounds. Aboriginal Community Controlled Organisations offer programs with a greater focus on healing and culturally appropriate support, and it is important to provide the option of these referrals to any Aboriginal and Torres Strait Islander people using family violence.

| Program  | Conversation prompts   |
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| <p><b>Men’s Behaviour Change Programs (MBCP)</b></p> <p>A common referral is to a Men’s Behaviour Change Program (MBCP). This is a group program which is generally similar in operation and regulated by minimum standards. The program involves:</p> <ul style="list-style-type: none"> <li>• Two facilitators, generally one male and one female, through a facilitated groupwork process guide men to understand their use of violence and support them to take responsibility for their use of violence.</li> <li>• Weekly 2-hour sessions for a minimum of twenty weeks.</li> <li>• Groups of approximately 14 men (some may be court mandated and others may be referred as a voluntary process).</li> <li>• All MBCPs must have a Family Safety Contact aspect where workers offer support to impacted family members to assess their safety, discuss concerns, and where support needs are addressed during this time. This includes risk assessments with adult and child victim-survivors and supporting referrals and safety planning to specialist victim-survivor services</li> <li>• Fees may apply for this service and can depend on income.</li> </ul> | <p><i>“the program can help you relate to your family in positive ways”</i></p> <p><i>“lots of men want to understand their behaviour better, in a group you have the chance to learn together and from each other”</i></p> <p><i>“staff will contact your family because it’s important to understand how they are experiencing your [name behaviour], they may need some support themselves”</i></p> |

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| <p><b>Case management</b></p> <p>People who use violence are not a homogenous group, and not all people who use violence are ready or suitable to participate in a group environment. Separate case management services might also be offered to people who require individual support to stabilise their situation before they are suitable to participate in a group program.</p> <p>This may include support to address immediate needs around housing and homelessness, drug and alcohol misuse, or mental health concerns, while engaging in individual work to manage immediate risk and to prepare the man for a group program.</p> <p>Some MBCPs have case management programs available for participants, to provide additional support for individual needs and accountability building during their engagement in the MBCP.</p>   | <p><i>“a case manager can work together with you to identify your goals. They can help you link in with different services, while supporting you to change the behaviour you want to be different.”</i></p>   |
| <p><b>Parenting programs</b></p> <p>For parents who have exposed their children/children in their care to family violence, specialised parenting interventions can help them understand the impact of their behaviour, the importance of child-centred parenting, and how to be a non-abusive co-parent. These programs often include a mix of group and individual support.</p> <p>Many parents who have used family violence complete a MBCP in addition to a parenting program as these interventions complement each other.</p> <p>Parenting as a motivation for change is not appropriate for everyone, including where parenting is being used as an extension of controlling behaviour or where no contact with children is allowed. If possible, consult with the program prior to referral to determine if this is an appropriate referral for the person using violence that you are working with.</p> | <p><i>“I can hear you’re worried about how your behaviour might be impacting the relationship with your child/ren. This program can support you to make positive changes”</i></p> <p><i>“the service will help you think more about what is important for your child/ren and learn how to be a father who is responsive to their needs”</i></p> |
| <p><b>The Orange Door</b></p> <p>The Orange Door is an entry point to access child and family services and family violence services, including services working with people using family violence. This service is being rolled out across Victoria and all areas will be covered by the Orange Door access point.</p> <p>In the regions where it is currently operational, the Orange Door is an access point for people using violence to be</p>   | <p><i>“they will discuss what’s happening for you at the moment, including asking about your relationships. They can provide support around the best local services for you to link in with”</i></p>  |

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| engaged, assessed and provided with appropriate risk management support through referrals to services and local programs. |  |
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Individual program responses may also include:

- AOD services
- Mental Health services

See NTV website for full list of specialist referral options by location:

<https://ntv.org.au/sector-resources/referral-pathways/>