



WomanACT
WOMAN ABUSE COUNCIL OF TORONTO

Literature Review: Information Sharing and Intimate Partner Violence in Ontario



ABOUT WOMANACT

Woman Abuse Council of Toronto (WomanACT) envisions a world where all women are safe and have access to equal opportunities. We work collaboratively to eradicate violence against women through community mobilization, research, policy, and education.

The organization has been operating as a community-based coalition since 1991 and became a registered charity in 2010. Working closely with the violence against women sector, governments, industry leaders, communities and survivors, we strive to promote knowledge sharing, build capacity and generate public discussion in order to advance women's safety and gender equity. The aim of our research is to promote public dialogue, transform practice and shape policy to advance women's safety and gender equity.

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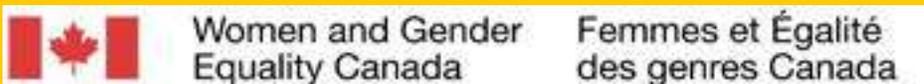


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INTRODUCTION

This literature review is part of WomanACT's project looking at multi-agency responses to high risk domestic violence. WomanACT is undertaking a four-year initiative that will adapt, test and evaluate the Multi-Agency Risk Assessment Conference (MARAC) model in three communities in Ontario.

MARAC is a multi-agency meeting that brings together community agencies from across sectors to share case knowledge and professional expertise on high risk domestic violence cases. The role of MARAC is to facilitate effective information sharing in order to develop and implement immediate and effective safety plans with the aim of reducing high risk domestic violence. Developed in Wales in 2003, MARAC is now in place in over 270 communities across the United Kingdom and has been adopted in communities in Finland, Switzerland and Australia (Safelives, 2014).

The MARAC model has proven to reduce repeat victimization, increase victim safety and connect victims with the support and services they need to effectively flee domestic violence and establish safety. Within the scope of this project, WomanACT will aim to adapt the MARAC model to the Canadian context and test the model in two communities. In addition, the project will identify promising practices, develop protocols, and advocate for policy change that will support MARAC's function across Canada.

The purpose of this literature review is to analyze literature on information sharing amongst service providers in relation to intimate partner violence in Canada. Information sharing is a critical component of the MARAC model and this review of literature will help us better understand current practices, identify challenges and document promising practices. In addition, this review will help inform the development of information sharing policy and practice for MARAC operation in Canada.

METHODOLOGY

The approach to this literature review consisted of manual searches on Google, government and organizational websites, and journal portals. The scope of this review focused primarily on the barriers to and opportunities for information sharing between service providers.

The following research questions guided the literature review:

1. What are the current practices of information sharing in relation to intimate partner violence in Canada?
2. What are the opportunities for and challenges to information sharing in relation to intimate partner violence in Canada?
3. What are the identified promising practices?

The following terms were searched in conjunction with each other to support with the review:

- Information sharing
- Intimate partner violence
- Violence against women
- Intimate partner homicide
- Domestic violence
- Risk assessment
- Consent*
- Privacy
- Confidentiality
- Multi-agency
- MARAC

The geographical scope of the review was confined to Canada although some of the literature reviewed included information sharing practice outside of Canada, mainly in the context of MARAC operation in the United Kingdom. The scope of this review is confined to literature published between 1995 and 2020.

The literature review is not exhaustive and does not purport to be a complete reflection of the challenges, practices and policies related to information sharing and intimate partner violence in Canada.

LIMITATIONS

Lack of research

Within a Canadian context, there are a limited number of peer reviewed and published journal articles which speak directly to information sharing and intimate partner violence. Instead, this review was drawn primarily on government documents, policies, publications and general research on information sharing practices. This suggests that there is a gap in data in this area and that it is an underexplored area of research.

Age of data

There are articles within this literature review that have been published over ten years ago. As a result, there may be elements of this information that are no longer relevant to the current state of violence against women services and response systems. The information used within this literature review is mindful of these changes and again suggests the need for further research in this underexplored area.

*Within this literature review, consent refers to service providers obtaining consent from their clients to share their personal data and information with other service providers.

BACKGROUND

Multi-agency collaboration has been recognized as an approach that increases the effectiveness of services in responding to and reducing intimate partner violence (Shorey, Tirone and Stuart, 2014). The United Nations recommends that countries establish a coordinated and integrated response across agencies in confronting the risks faced by victims of intimate partner violence. This recommendation further suggests that a coordinated response requires the development of formal partnership arrangements and information sharing protocols (UN Women, 2012). This practice has been adopted by the Multi-Agency Risk Assessment Conference (MARAC) model.

The MARAC model was first developed in Wales in 2003 in response to a need for systematic risk assessment and information sharing about victims amongst agencies responding to domestic violence (Robinson and Tredigda, 2005). MARACs are multi-agency meetings where representatives from different agencies come together to share information about high-risk domestic violence cases in order to develop a coordinated plan to increase the victim's safety (Steel, Blakeborough and Nicholas, 2011). The MARAC meeting is attended by representatives from different agencies including police, probation, housing, child protection, violence against women and other agencies. At a MARAC meeting, information on specific case are shared, allowing for the different representatives to develop a safety plan of action that utilizes the resources and expertise of the various agencies at the table. At the "heart of a MARAC is the working assumption that no single agency or individual can see the complete picture of the life of a victim, but all may have insights that are crucial to their safety" (SafeLives, 2014). Key to this process of collaboration is a practice of safe and effective information sharing and evaluations of MARAC have shown that information sharing is essential to reducing repeat victimization (Robinson, 2006).

Domestic Violence Death Review Committees, bodies tasked to review intimate partner homicides within a select number of provinces in Canada, have also endorsed multi-agency collaboration. As part of their work, the committees provide recommendations for organizations and services to avoid future occurrences of intimate partner homicide. The Ontario Domestic Violence Death Review Committee recommends inter-agency collaboration in almost 30% of their cases (Office of the Chief Coroner of Ontario, 2009) and have specifically called for information sharing between service agencies serving clients experiencing intimate partner violence (Office of the Chief Coroner of Ontario, 2002). In 2005, the Ontario Domestic Violence Death Review Committee called on criminal justice systems, specifically the Ministry of Community Safety and Correctional Services, to "develop a stand-alone model to manage high risk domestic violence cases, or include domestic violence in the current standard that addresses high-risk cases" (Office of the Chief Coroner of Ontario, 2005).

BENEFITS TO INFORMATION SHARING

This section will explore the benefits of information sharing practices between service providers.

Clearer understanding of risk

Many studies have documented the benefits of information sharing across agencies in reducing risk related to intimate partner violence (Hague and Malos, 1998). The sharing of information between different sectors, especially between justice and community partners has been proved to increase early identification and intervention (Shepard, 2005). Sharing information on cases of domestic violence can provide a fuller picture of each case which can lead to a more informed and complete safety plan (Steel, Blakeborough and Nicholas, 2011). It can also reduce the fragmentation of knowledge that can lead to confusion about or the leaving out of information that is crucial to developing effective safety plans (Robinson and Tredigda, 2007).

Improved accuracy of risk assessments

When the risk assessment and safety planning process includes information sharing between practitioners with different areas of expertise, the assessment of risk is more likely to be accurate (Robinson, 2006). An approach to risk assessment that involves multiple sources of information is considered a promising practice (Toivonen and Backhouse, 2018). The perception of risk by victims is considered a critical component of a collaborative information sharing and risk assessment process (Campbell, 2004).

Resource distribution

Literature shows that a multi-agency approach to information sharing can help organizations share resources (Hague and Malos, 1998) and can reduce the duplication of services and processes (Toivonen and Backhouse, 2018). Furthermore, information sharing across agencies can help victims receive comprehensive supports which may be difficult to navigate independently, and can increase victim's access to resources they may not have been aware of if engaging with just one or two agencies (Shorey, Tirone and Stuart, 2014).

Obtaining consent and trauma informed approaches

Obtaining consent is viewed as trauma informed approach to information sharing practices. When practitioners seek to obtain consent to share information, they are allowing her to make her own decisions while providing an opportunity for practitioners to explain the options available to survivors (UN Women, 2019). Additionally, in seeking consent, practitioners may alleviate the pressure clients may feel in disclosing case related information they may otherwise want to keep private (UN Women, 2019b). The process of consent enables survivors to be at the center and in control of what information is shared, and what decisions are being made with the information they choose to provide (Vann, 2004).

CHALLENGES TO INFORMATION SHARING & PROMISING PRACTICES

This section explores common challenges in multi-agency information sharing and promising practices to reduce these barriers.

Obtaining and documenting consent

Regulations protecting personal and identifiable information ensure that service practitioners must first seek to obtain the consent of the individual to whom the information belongs before it is shared. The process of obtaining and documenting consent may be time consuming and can place constraints on time when managing high-risk and complex cases which often require immediate action. Regulations enforcing principles of consent require practitioners to document in detail, client consent and demonstrate that they have explained the process of consent to their client (Ruebsaat and Hamilton, 2015). Further, if service agencies wish to share information on their clients with other agencies, they must obtain written and signed documentation indicating what information their client has willingly consented to share, to whom and for how long such information may be shared (McCammon, 2018). Such expectations on practitioners can result in service agencies engaging in lengthy documentation processes, thus reducing the amount of direct client care (Robinson, 2004).

Promising practices: obtaining and documenting consent

1. Engage victims in multi-agency information sharing practices

Including victims in case management processes, where their personal information is shared, is an effective way to reducing the bureaucratic burden of collecting consent. Engaging the victim in information sharing processes also provides critical insight into the risks. In addition, research shows that engaging the victim in risk assessment and safety planning with different agencies will increase the likelihood of the victims engaging with the service agencies involved (Campbell, 2004).

2. Establish a protocol for obtaining and documenting consent

The process of documenting consent can be a difficult and time-consuming practice. The development of a protocol for obtaining and documenting consent can help provide clear and standardized guidelines for practitioners. This is particularly useful in cases in which the victim is not a part of the risk assessment and case management practice. A protocol can make the process easier and provide practitioners with greater confidence in what can be a complicated process. An example of a protocol for obtaining and documenting consent can be found in the Dufferin/Caledon Domestic Assault Review Team (DART) (Hillman, 2006).

Sharing information without consent

In some cases, victims of intimate partner violence may not give their consent for their personal information to be shared. Victims may fear that the sharing of personal information may lead to greater harm (Ruebsaat and Hamilton, 2015), involvement of child protective services or a loss of control in an already stressful situation (Campbell, Hilton, Kropp, Dawson, Jaffe, 2016). While research shows that survivors are aware of the risks they face, some can underestimate the risk of harm from a partner (Campbell, 2004).

Community agencies face barriers because privacy legislation is restrictive when consent is not obtained (Critical Components Project Team, 2008). Personal information may only be shared with the consent of the individual to whom the information belongs unless the risk outweighs the privacy concerns (Department of Justice, 2013). In Canada, there is a lack of protocol for cases in which survivors do not wish to participate in formal risk assessment and safety planning (CREVAWC, 2011).

Promising practices: Sharing information without consent

1. British Columbia: Preservation of life trumps the right to privacy

An intimate partner violence intervention team from British Columbia, Canada known as the Interagency Case Assessment Team (ICAT) follows the principle in which the preservation of life trumps the right to privacy. In cases where serious harm is imminent, ICAT tables leverage federal and provincial legislation to share confidential information without client consent between service providers. The implementation of this practice is decided on a case by case basis and details on the reason for the disclosure, information to be disclosed and to what recipients is properly documented. Reasons for disclosure are properly documented. ICAT tables follow a specially drafted protocol which provides guidance on the documentation and on using legislation to share information without client consent (Ruebsaat and Hamilton, 2015)

2. Ontario: Four Filter Approach

In Ontario, unless serious harm is imminent, obtaining consent must be the first priority in information sharing activities. In cases where consent cannot be obtained and information must be shared to protect a life, practitioners can follow the Four Filter Approach (Ministry of the Solicitor General, 2018). The Four Filter Approach is a method designed by the Ministry of the Solicitor General to assist organizations in sharing information to reduce the imminent risk of serious harm or death while limiting the amount of confidential data shared (Ministry of the Solicitor General, 2018). The process is designed to support service providers in their decision to share information without consent and guide these practitioners through a documentation process. Once case information is shared with multiple agencies, the Four Filter Approach provides further guidance on how to ensure the information shared is minimized.

Fear of sharing information

The complexity of privacy legislation can make it difficult for practitioners to navigate and apply this legislation to their work. In addition to legislation, practitioners often operate under professional policies which govern their participation in inter-agency work. Practitioners are at times concerned that information sharing may breach their client's rights. This liability can be a barrier to sharing information across agencies (Campbell, 2010) because if there is a mishandling of confidential data, service providers could be held responsible for the infringement of their client's rights. In addition, a lack of trust between individuals, organizations and systems has been identified as a possible barrier to information sharing as well (CREVAWC, 2011).

Promising practices: fear to share information

1. Refer to professional ethical guidelines to share information

There are several types of practitioners who may engage with women experiencing intimate partner violence including health professionals, police officers, lawyers and social workers. These professions often have guidelines and ethical standards which direct and support practitioners to navigate information sharing activities (Martinson and Jackson, 2016). For example, the Ontario College of Social Workers and Social Service Workers (2005) has developed a privacy toolkit to help practitioners better understand and navigate the privacy legislation they operate under and how to ensure they uphold client confidentiality. Similarly, under the College of Occupational Therapists of Ontario, occupational therapists adhere to the Standards of Consent, a guide which includes established practices to ensure all therapists adhere to a standard of client information sharing (College of Occupational Therapists of Ontario, 2016). Professional guidelines can act as a means to support practitioners and standardize practices.

2. Provide training and education on information sharing and risk assessment

Training and education is required on proportional information sharing* to educate practitioners on how they may share information between service providers and work collaboratively to reduce risk (Campbell, 2010). This training and education can enable practitioners to feel confident in undertaking information sharing practices in relation to managing and reducing risk.

3. Build trust between individuals and systems

Multi-agency collaboration can build trust and communication between sectors. Evaluation of the MARAC model has found that through ongoing multi-agency collaboration on risk assessment and safety planning, trust has improved working relationships between agencies (Robinson, 2004). The increased trust has led to increased information sharing and a more timely response to victims (Robinson, 2006). Engaging women in the multi-agency information process can also help to build trust between women and services (Campbell, 2010).

4. Develop a memorandum of understanding between agencies

The establishment of a memorandum of understanding between agencies can help form consistent information sharing practice and responsibilities between those parties involved (Campbell, 2010). This is particularly useful when sharing information between different sectors, such as community agencies and justice partners. The Police Services Act allows the sharing of information with other police forces or others engaged in the protection of the public in cases where disclosure is necessary for the public safety. Disclosures can be made to agencies who are not directly involved in the protection of public through a memorandum of understanding between the agency and the police (Cross, 2011).

*In Ontario, proportional information sharing is a promising practice. When practitioners deem the sharing of confidential information outweighs the risk for client safety, practitioners must only share information that will address the risk of bodily harm or death and is relative to a client's or community member's risk to either. All other confidential information that is not relevant to protecting safety must be concealed

A lack of formalized procedures and practices

The high-risk nature of intimate partner violence cases require immediate intervention and service agencies must be prepared to respond promptly (Jaffe, Dawson and Campbell, 2013). Timely and collaborative interventions are slowed by the lack and unfamiliarity with information sharing processes (Robinson, 2004). Agencies can shy away from collaborative intervention on cases due to the urgent nature and a lack of process and guidance in regards to information sharing within these contexts.

Resource intensive

Inter-agency coordination is often not funded and many agencies struggle to allocate resources to multi-agency initiatives. The research indicates that inter-agency collaboration requires resources, including financial resources and time (Hague and Malos, 1998).

Promising practices: lack of formalized procedures and practices & intensive resource demands

1. Standardization of language and tools

A shared language between agencies in practitioner tools, referral processes and safety planning can increase the efficiency and effectiveness of inter-agency communication (Toivonen and Backhouse, 2018). Standardized language and tools could also help agencies communicate risk and case information in time-sensitive cases.

2. Formalized inter-agency protocols for information sharing

Inter-agency protocols are documents which govern the working relationships between agencies by setting clear terms for collaboration. Formalized agreements for partnerships and information sharing, including clear roles and responsibilities, increase the likelihood and improve inter-agency responses to intimate partner violence, allowing practitioners to work more effectively (Albuquerque et al., 2013). Protocols that provide guidance, including standard processes, to sharing confidential information between agencies allows practitioners to quickly navigate bureaucratic hurdles to provide timely service to victims (Robinson, 2004). Safelives (2017b) has provided guidance on the key components of an information sharing protocol.

3. Practicing proportional information sharing

Proportional information sharing, sometimes referred to as data minimization, is a common component of data sharing policy and processes. This principle emphasizes the responsibility of practitioners to minimize the sharing of personal information and respecting the right to privacy to the individuals to which the information belongs. Practices of inter-agency information sharing purport that service practitioners cannot disclose more information than what is necessary for the specified purpose (Beamish, 2018). Within the MARAC model in the UK, practitioners only disclose personal information about victims and perpetrators that is deemed relevant and proportionate to the risks identified (SafeLives, 2017).

4. Establishing a central point to oversee multi-agency initiatives

The practice of information sharing becomes a difficult process when there is no coordination to ensure agencies are participating in such practices lawfully. Research has found that successful inter-agency information sharing processes require the designation of a central coordinator who can convene with and support all parties. The role is meant to support participating agencies in understanding legislation as well as help ensure appropriate practices and guidelines are met (Martinson and Jackson, 2016).

5. Engaging appropriate staff persons in multi-agency collaboration

Effective inter-agency information sharing is effective for risk management when practitioners can speak to the risks at hand as well as commit and share organizational resources. It is good practice if practitioners engaged have access to personal information as well as the authority to commit resources on behalf of their organizations (Robbins et al., 2014). Within the MARAC model in the UK, it is important that those attending multi-agency meetings have the authority to make decisions related to safety plans to ensure that meetings are action-oriented (Robinson and Tregidga, 2007).

CONCLUSION

The purpose of this literature review was to analyze literature on information sharing practices amongst agencies serving victims of intimate partner violence in Canada. Information sharing is an essential component of a multi-agency risk assessment management approach, including within the MARAC model. The MARAC model has shown information sharing has directly led to a reduction in violence. In order to effectively adapt the MARAC model for use in Canada, it is important that we understand the current realities, challenges and opportunities surrounding information sharing.

Literature widely supports the use of information sharing in cases of intimate partner violence where there is a high risk of harm, especially lethality. Information sharing can help generate a more comprehensive risk assessment and safety plan. It can help increase the effectiveness of services and has shown to increase trust and support working relationships between practitioners across sectors.

Legal and professional obligations support the need and ability to share information when working to prevent ongoing or future harm. Information that is pertinent to a victim's safety can and should be shared across agencies that can support victims. However, there are many challenges to information sharing as identified in policy and practice. Professionals may be unclear of legal or policy information sharing directives and may fear violating a client's privacy. This is increasingly difficult for professionals to navigate if consent has not been received.

Establishing policies and procedures can help make the process clear and standardised across agencies. In addition, a formalized working agreement across agencies, especially those with different mandates, can help create lines of communication and processes for information sharing. This is particularly relevant between community agencies and public protection agencies. The province of British Columbia has begun to pave the way on information sharing legislation and practice in Canada with encouragement in existing models and policy for information sharing across different sector agencies. This suggests that there may be opportunities to improve legislation as well as a need for further education and training related to how to share information under existing law.

Lastly, across literature, it is clear that the engagement of victims is not only important but is effective in promoting the sharing of critical information. Information can and should be shared to reduce any risk(s) of intimate partner homicide. This literature review suggests that there are promising practices that can be used and built upon to conduct information sharing activities. Further, improving practice requires sector agencies and victims to work together in streamlining this practice.

Next steps

This literature review provided a high-level assessment of key themes of information sharing amongst violence against women service providers. The findings demonstrate the need to explore in greater detail the barriers facing practitioners, challenges and solutions of promising practices. This document provides as a starting point for WomanACT in developing further research on this topic.

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