

NSW Engagement and Support Program (ESP)



Referral form

Overview of the NSW ESP

The NSW Department of Communities and Justice's Engagement and Support Program (ESP) is an intervention program within NSW's countering violent extremism strategy.

A voluntary program, the ESP aims to assist individuals make positive behavioural changes to limit their risk of participating in violent extremism. The program includes a detailed risk assessment process which informs eligibility and development of a support program tailored to the individual's needs.

The Program is supported by many government agencies who provide expertise from various disciplines. This includes specialists from various divisions across the Department of Communities and Justice in the areas of Child Protection, Corrective Services, Community Corrections, Youth Justice as well as NSW Police, the Department of Education, NSW Health, and the Australian Federal Police.

The program employs a holistic case management approach to working with individuals to address identified needs, risks and strengthen protective factors. Caseworkers take a strengths-based and trauma-informed approach to their work, helping to divert people who are vulnerable to violent extremism, others that support or advocate violent extremism, and others who have engaged in violent extremism.

If you believe there is an individual who may be suitable for the program and could benefit from interventions, please complete the following referral form.

It is important that you provide accurate and detailed information to support us in deciding suitability and eligibility for the referred individual. If you have questions about this referral form or need advice, please contact us now via:

- Email: esp@dcj.nsw.gov.au
- Phone: **1800 203 966**
- Web: https://www.dcj.nsw.gov.au/resources/engagement-and-support-program.html

Please email the completed form below to esp@dcj.nsw.gov.au

We will be in touch to speak to you and provide feedback about your referral.

Referral Date:

Referrer Details

Full Name:	Phone:		
Position:			
Organisation:			
Email:			
Relationship to Participant:			
Participant personal information:			
Surname:	First Name:		
Other names:	Date of birth:		
Caregiver's name and relationship (minors):			
Address:			
Contact number:	Email:		
Family Context:			
Cultural background:			
Aboriginal or Torres Strait Islander (YES / NO):			
Gender identity:			
Background information:			

Information on the individual's risk factors:

se select (tick) any ler information for	y relevant <u>general risk factors</u> below and provide those selected:
Socio-economic vulnerabilities	
Physical wellbeing challenges	
Violent behaviour	
Anti-social behaviour	
Experience of victimisation	
School or work challenges	
Family challenges	
Peer challenges	
Other	
	y relevant <u>violent extremism risk factors</u> from below, on for those selected:
Social context issues	
Historical concerns	
Capability factors	
Other	

Please select (tick) relevant <u>protective factors</u> you believe the individual has, providing information for those selected:		
	Safe and secure living environment	
	Access to a community space open to diversity	
	Education	
	Employment	
	Skills or qualifications	
	Stable and supportive social or family networks	
	Health care	
	Positive role models	
	Complex understanding of religion or society	
	Positive outlook or worldview	
	Personal resilience to adversity	
	Openness to difference or diversity	
	Other	

NSW GOVERNMENT

Additional information: