Filling the Support Gap: Respondent-focused Case Management Through the CARE Model at Monash University

Jacqueline Huttley
Monash University

Abstract

Established in 2022, the CARE (Coordination, Assessment, Referral, Evaluation) Service at Monash University delivers person-centred case management to both students and staff navigating complex personal and academic challenges. These include experiences of family violence, sexual harm, mental ill-health, and academic distress. Available to the entire university community, CARE offers tailored support that is independent, confidential, and embedded within broader institutional systems of well-being and risk management.

Modelled on successful frameworks in United States higher education, CARE plays a pivotal role in helping individuals manage personal crises and navigate university processes, particularly in cases involving gender-based violence. While traditional institutional responses have primarily focused on supporting complainants, CARE addresses a long-standing gap by offering structured, compassionate support to respondents, ensuring they are treated fairly, without undermining accountability or safety.

As Australian universities prepare to adopt the National Higher Education Code to Prevent and Respond to Gender-based Violence, CARE stands as an example of best practice in aligning compliance, procedural fairness, and student well-being. This article examines the CARE model and its capacity to promote academic continuity and behavioural change. Drawing on referral trends and sector insights, it highlights CARE's emerging influence in shaping institutional policy, enhancing support equity, and reducing systemic risk across the higher education sector.

Keywords

CARE Service; Monash University; Trauma-informed practice; Case management; Respondent support; Disciplinary processes; Gender-based violence prevention; Procedural fairness; Student safety; National Higher Education Code; Higher education policy.

Introduction

Universities today are expected to do more than deliver academic content; they are also responsible for fostering environments where students feel safe, supported, and able to thrive. In Australia, this dual responsibility is underpinned by national frameworks such as the *Tertiary Education Quality and Standards Agency Act 2011* (Cth) and *Higher Education Standards Framework (Threshold Standards) 2021* (Cth), which require institutions to safeguard student well-being; uphold academic integrity; and ensure fair, transparent processes for managing misconduct.

Disciplinary processes are a crucial part of this equation. They uphold institutional values and community standards but must also accommodate the complex realities that shape student behaviour, such as mental health challenges, trauma, neurodivergence, cultural displacement, or socio-economic marginalisation. As the *Australian Universities Accord Final Report* (Department of Education, 2024) notes, the support provided to students experiencing vulnerability or facing disciplinary action is central to ensuring equity, continuity of learning, and system-wide integrity.

While considerable progress has been made in supporting complainants in cases involving harm or misconduct, far less attention has been given to respondents—students alleged to have breached university policies. Historically, institutional approaches have lacked consistency or transparency in how respondents are supported, often resulting in disengagement, emotional distress, or procedural confusion. Yet emerging research shows that when respondents receive timely, structured, and

trauma-informed support, they are more likely to remain engaged in their studies, understand and accept responsibility, and demonstrate long-term behavioural change (Eisenberg et al., 2012; Grimmer et al., 2021).

Supporting respondents is not about excusing misconduct; rather, it is about ensuring fairness, reducing harm, and maintaining the integrity of disciplinary systems. It also plays a critical role in institutional risk management. Poorly supported or unsupported respondents may pose an ongoing risk to others, struggle to meet academic requirements, or disengage entirely. These outcomes can affect both individual futures and campus safety.

At Monash University, the CARE (Coordination, Assessment, Referral, Evaluation) Service exemplifies an inclusive, person-centred approach that bridges this critical gap. Established in 2022, CARE provides structured case management to students and staff experiencing complex, high-risk, or sensitive circumstances, including those engaged in formal disciplinary proceedings. Unlike many support models that focus solely on complainants, CARE extends its services to respondents, recognising that procedural fairness, emotional support, and educational continuity are foundational to both justice and student development.

The CARE Service supports a range of individuals involved in complex or high-risk university matters, including complainants, respondents, and persons of concern. Complainants are those who report harm or misconduct and respondents are individuals alleged to have breached university policy. A person of concern refers to an individual whose behaviour may pose a risk to themselves or others but who may not be directly involved in a formal complaint or misconduct process. CARE's involvement in such cases reflects its preventative and risk mitigation mandate, offering support that prioritises safety, engagement, and well-being for all parties involved.

This article explores the evolving role of the CARE Service in student conduct matters, with a focus on how its wraparound model enhances procedural fairness, supports academic retention, and mitigates institutional risk. It highlights how supporting respondents is not only ethically and legally necessary but strategically wise for universities striving to meet their compliance obligations while upholding their educational mission.

Background and establishment

The concept of the CARE Service at Monash University was inspired by student support frameworks developed in the United States, particularly at Virginia Tech (VT) and the Massachusetts Institute of Technology (MIT). These universities pioneered integrated case management models aimed at supporting students facing complex personal, academic, or conduct-related challenges. The models emphasised early intervention, holistic care, and trauma-informed engagement, principles that have since become foundational in modern student affairs practice. For example, VT's CARE Team has been recognised nationally for its ability to identify at-risk students and provide coordinated, compassionate responses to safeguard their well-being (Virginia Tech, n.d.).

Recognising the need for a more coordinated and compassionate response to student distress and misconduct, Monash University launched the CARE Service pilot in 2022. Initially, the service focused on supporting student complainants and those experiencing acute personal or academic challenges. Using a person-centred approach, the CARE Service assisted individuals navigating mental health crises, safety concerns, and complex disciplinary processes.

As the pilot progressed, it became evident that student respondents alleged to have breached university policies were navigating these processes alone, without adequate guidance or support. In response, the CARE Service expanded to provide structured case management for respondents, aiming to ensure procedural fairness, reduce harm, and promote engagement with behavioural

change. This inclusive approach was later extended to university staff, offering coordinated, independent support in cases involving interpersonal conflict, multiple parties, or emotionally charged situations. By assigning separate case managers to each individual involved, CARE promotes balanced, safe, and equitable outcomes, ensuring all voices are respected throughout both formal and informal resolution pathways.

The effectiveness of the pilot was evident through consistent informal feedback, with students frequently reporting feeling more informed about their rights and better supported during often distressing processes. Observations from case documentation and a noticeable rise in referrals further underscored the demand for such support. Although not formally evaluated, these recurring themes provided informal evidence and feedback indicating the service's value. These insights formed the basis for a business case that led to the establishment of a full-time CARE Coordinator role and the transition of the pilot into a permanent, expanded service.

Originally known as the Student CARE Service, the program was created to address a significant gap in university support by offering sustained, integrated case management to students facing intersecting challenges, including mental health crises, disciplinary action, and safety concerns. Unlike conventional student services that provide short-term counselling or academic accommodations, CARE offers long-term, coordinated support that helps individuals navigate institutional systems and connect with appropriate internal and external resources.

As the service matured, it became apparent that many staff, in particular those affected by workplace sexual harassment, family violence, or vicarious trauma, also faced complex, unmet support needs. In response, the CARE model was formally expanded in 2024 to include staff, ensuring that both students and employees have access to independent, person-centred support.

Expansion of the CARE model to include staff

The formal expansion of the CARE Service in 2024 to include staff required a number of deliberate structural and operational adaptations. While the core case management framework remained consistent, service delivery was modified to reflect staff-specific contexts, governance arrangements, and risk considerations. Referral pathways were adjusted to integrate Workplace Relations, Human Resources, and Safer Community Unit (SCU) processes, ensuring alignment with employment frameworks, industrial obligations, and confidentiality requirements. Unlike student matters, which are largely governed by academic and conduct policies, staff cases often sit within complex employment and industrial relations contexts, requiring careful coordination across multiple institutional units.

Service practices were also adapted to account for staff experiences of workplace sexual harassment, family violence, bullying, and vicarious trauma. Case management for staff places greater emphasis on clarifying procedural options; supporting engagement with internal processes; and facilitating access to external legal, health, and advocacy services where appropriate. In cases involving staff–student interactions or multi-party matters, additional safeguards were implemented, including the allocation of separate case managers and enhanced information-sharing protocols to manage power dynamics and mitigate risk.

Importantly, the expansion maintained CARE's independence from investigative and decision-making functions. This separation preserves trust, supports procedural fairness, and enables staff to engage with the service without fear of adverse employment consequences. By adapting referral mechanisms, governance interfaces, and support practices, CARE successfully extended its respondent-focused, person-centred case management model to staff while remaining embedded within Monash University's broader safety and well-being infrastructure.

Scope and remit of the CARE Service

Unlike general university support services, which often offer short-term assistance such as counselling, academic accommodations, or referrals, CARE provides sustained, wraparound support embedded within the university's broader systems through coordinated case management. It is uniquely positioned to help individuals remain engaged in their education or employment while managing challenges such as mental ill-health, family violence, sexual harm, interpersonal conflict, or disciplinary matters.

CARE is not a clinical or emergency service and does not replace therapeutic support offered by university services such as Counselling and Psychological Services (CAPS) or external providers. Instead, it complements these by coordinating across academic, well-being, conduct, and safety domains to ensure consistent, informed, and compassionate support. A defining feature of the CARE model is its focus on procedural clarity, dignity, and engagement, particularly in cases where individuals risk falling through institutional gaps due to the complexity of their circumstances.

CARE is situated within Monash University's SCU, which manages and investigates disclosures of concerning, threatening, or inappropriate behaviour, including sexual harm, family violence, and stalking. The SCU provides confidential, impartial support to students and staff, helps assess risk, and facilitates access to relevant university and external services (Monash University, n.d.). By embedding CARE within SCU, Monash University ensures that case management is seamlessly integrated into broader institutional safety and conduct infrastructure.

Referrals to CARE are typically made through the SCU, which conducts triage and risk assessment to connect individuals with appropriate supports. Other referral sources include Monash Residential Services (MRS), Student Conduct and Complaints (SCC), CAPS, and Monash Security. Self-referrals are not accepted, allowing the service to maintain a focus on complex, high-risk cases within a framework of institutional oversight.

CARE also plays a critical coordination role in cases involving multiple stakeholders or conflicting needs, such as matters involving both complainants and respondents or staff–student conflicts. Independent case managers are assigned to each party to ensure balanced, safe, and equitable support. By bridging service gaps and reinforcing procedural fairness and well-being, CARE has become an integral component of Monash University's support ecosystem, emerging as a leading model within Australian higher education.

To provide a structured overview of the CARE Service's operational scope, the tables below summarise its core areas of support and key procedural functions. Table 1 outlines the primary domains in which CARE delivers coordinated, non-clinical assistance to students and staff experiencing complex or high-risk circumstances. Table 2 complements this by detailing the procedural and systems-based functions that underpin CARE's case management model, illustrating how support is enacted through assessment, coordination, and institutional integration. Together, these tables highlight the breadth of CARE's remit and its role in bridging wellbeing, safety, and conduct processes within the university context.

Table 1

The Core Areas of Support Provided Through the CARE Service

Area	Description
Family Violence Support	Support for students and staff experiencing family violence, including safety planning, legal referrals, and coordinated risk management.
Sexual Harm and Harassment Response	Confidential support, reporting guidance, and therapeutic and legal referrals.
Personal Safety and Risk Management	Safety planning; SCU liaison; and risk monitoring for family violence, sexual harm, and stalking.
Mental Health and Emotional Support	Non-clinical support, emotional guidance, and referral to counselling.
Support Through University Disciplinary Matters	Guidance and structured support for students navigating misconduct or complaints processes, including hearing preparation, liaison with SCC, and reintegration planning.
Academic Support and Special Consideration	Help with Special Consideration, Disability Support Services registration, and faculty liaison.
Housing and Financial Hardship	Referrals for emergency accommodation and financial assistance.
Service Navigation and Referrals	Warm/cold referrals and coordination to prevent service gaps.

Table 2

An Overview of the Procedural Support Functions of the CARE Service

Function	Example Activities
Assessment and Coordination	Holistic intake, needs assessment, and service planning.
Process Navigation	Misconduct/complaint support and SCC liaison.
Communication Support	Interpretation of policy and procedural documents.
Ongoing Monitoring	Regular check-ins, escalation tracking, and early risk detection.
Systems Integration	Collaboration with Behavioural Risk Management Group and governance teams.

While grounded in trauma-informed principles, the CARE model is described in the sections that follow using varied terminology to emphasise its procedural, developmental, and relational dimensions.

Disciplinary processes

To better understand how CARE's service model operates within institutional contexts, it is important to explore the structure and pressures of university disciplinary processes, particularly as they relate to gender-based violence. Disciplinary proceedings can be overwhelming, complex, and emotionally taxing for students, particularly when compounded by mental health challenges, academic pressures, or social stigma. Research highlights that students undergoing disciplinary proceedings often feel isolated, uncertain, and overwhelmed, and that structured support minimises these challenges (Eisenberg et al., 2012). Further, evidence suggests that enhanced respondent support serves multiple institutional objectives: improving risk management, fulfilling educational responsibilities, promoting procedural fairness, and creating a safer campus environment for all community members (Eisenberg et al., 2012).

Effective case management has emerged as a critical tool in higher education, involving structured support systems that assess individual needs, coordinate appropriate services, and advocate for the rights and welfare of students. Drawing on Kitzrow's (2003) work, student learning and academic achievement are closely linked to the extent to which institutions respond to their psychological and emotional needs. The CARE Service aligns with the *National Higher Education Code to Prevent and respond to Gender-based Violence* (Department of Education, 2025) by ensuring universities meet their obligations to support students involved in gender-based violence cases—both complainants and respondents—through:

- Trauma-informed support: Offering wraparound assistance to students navigating gender-based violence-related disciplinary matters.
- Procedural fairness and accountability: Ensuring respondents receive clear guidance on expectations and fair treatment throughout misconduct investigations.
- Integrated case management: Helping students understand their rights, access resources, and engage with university processes confidently.
- Collaboration with external services: Partnering with legal advocacy, crisis support, and mental health services to provide comprehensive assistance beyond university structures.
- Education and prevention initiatives: Embedding restorative practices, behaviour change programs, and consent education into respondent support frameworks.

Central to the CARE model is its explicit focus on supporting respondents, students alleged to have breached Student Conduct policies, including in gender-based violence-related cases. The following section outlines how CARE addresses this historically underserved need.

Focus on supporting respondents in disciplinary settings

One of the most significant gaps identified during the pilot phase of the CARE Service was the absence of structured, empathetic support for respondents navigating university disciplinary processes. Students alleged to have breached conduct policies frequently enter these systems under considerable emotional and academic strain. Disciplinary proceedings are often formalised, procedurally complex, and unfamiliar. This can heighten anxiety, confusion, and isolation, particularly for students already managing mental health challenges, trauma histories, or cultural and structural disadvantage.

The CARE Service addresses these challenges through a case management approach that deliberately balances institutional procedural requirements with the individual's emotional, academic, and developmental needs. Rather than functioning solely as a procedural guide, CARE provides holistic support that integrates policy literacy with relational engagement. Case managers assist respondents in understanding each stage of the process; clarifying expectations and potential outcomes; and preparing them for interviews, hearings, or panel reviews. This approach aligns with sector-wide commitments to procedural fairness, dignity, and transparency reflected in institutional frameworks such as UNSW Sydney's Complaints Management and Investigations Policy, which emphasises minimising negative impacts on students' academic progress and well-being throughout misconduct proceedings (UNSW Sydney, 2025).

CARE also recognises the significant emotional toll of disciplinary involvement. Without structured support, respondents facing serious allegations frequently experience heightened distress, catastrophic thinking about their academic or professional futures, and disengagement from their studies. Research indicates that students undergoing disciplinary processes commonly report isolation, uncertainty, and emotional overwhelm, and that timely, structured support can mitigate

these effects and improve engagement (Eisenberg et al., 2012). In response, CARE provides consistent emotional containment through regular check-ins, monitoring distress levels, and facilitating referrals to counselling and mental health services where appropriate. This support helps students remain psychologically stable while navigating processes that may otherwise increase risk or lead to disengagement.

Maintaining academic continuity is a further core element of CARE's respondent-focused work. Disciplinary matters often unfold over extended periods, during which students may struggle to meet coursework, assessment, or attendance requirements. CARE supports respondents to remain academically engaged by liaising with faculties, assisting with special consideration and adjusted study arrangements, and, where necessary, developing structured reintegration or return-to-study plans. This emphasis on continuity reflects growing recognition across the sector that effective disciplinary systems must safeguard educational participation alongside accountability. This principle is reinforced in national-level initiatives such as the National Student Ombudsman, which provides confidential assistance and advocacy for students navigating institutional processes (Commonwealth Ombudsman, n.d.).

In addition to procedural and academic support, CARE foregrounds restorative and educative responses that encourage insight, accountability, and behavioural change. Respondents are supported to engage in reflective learning activities, behaviour change programs, and restorative practices where appropriate. These interventions are framed not as leniency but as essential components of risk reduction and learning-oriented disciplinary responses. This approach is consistent with recommendations emerging from institutional reviews, including the Australian National University's Student Disciplinary Framework Review, which emphasises the importance of fair, transparent, and supportive processes for all students involved in disciplinary matters (Australian National University, 2025).

Through this integrated, respondent-centred approach, the CARE Service reframes support as a cornerstone of effective disciplinary systems rather than an ancillary measure. By ensuring respondents are informed, emotionally supported, academically engaged, and developmentally challenged, CARE enhances procedural integrity while contributing to safer campus environments. In doing so, it reflects an evolving consensus within Australian higher education that compassionate, structured respondent support strengthens accountability, reduces institutional risk, and reinforces the educational purpose of university disciplinary processes.

Monash University disciplinary procedures and CARE Service involvement

Disciplinary processes at Monash University serve a dual purpose: maintaining a safe and respectful learning environment and supporting students to engage in personal development and behavioural change. These processes are underpinned by the principles of procedural fairness, accountability, and student welfare. Cases managed through these pathways often intersect with broader well-being issues such as mental health, cultural adjustment, and trauma. The CARE Service plays a critical role in supporting students through these processes, particularly when the outcomes involve structured interventions like Conditional Enrolments, General Misconduct findings, or Conduct Reviews.

General Misconduct

General Misconduct refers to behaviour that breaches Monash University's *Student Code of Conduct* (2024a), which may include threatening or aggressive conduct, sexual harassment, academic dishonesty, or breaches of community standards. When a report of misconduct is made, an investigation may be initiated by SCC, often involving interviews, evidence review, and panel

hearings. Outcomes can include formal warnings, conditions, suspensions, or exclusions, depending on the severity and nature of the breach (Monash University, 2024a).

The CARE Service provides critical support throughout this process by helping students understand their rights and responsibilities, prepare responses, and access appropriate well-being services. This support aligns with sector-wide emphasis on procedural fairness and student well-being (Commonwealth Ombudsman, n.d.; UNSW Sydney, 2025).

Conditional Enrolment

Conditional Enrolment is a formal outcome that allows a student to continue their studies under specific conditions designed to manage risk and promote behavioural change. These conditions may include requirements such as attending counselling, completing educational programs, avoiding particular individuals or locations (e.g., through no-contact directives), or engaging in regular check-ins (Monash University, 2024b).

Conditional enrolment is often applied where concerning behaviour has been identified but can be managed with supportive intervention. The CARE Service assists students to comply with these conditions, liaise with academic staff, and stay engaged in their studies while promoting behavioural insight and accountability.

Conduct Reviews

A Conduct Review is typically initiated when concerns about a student's behaviour are complex, recurring, or do not neatly fall within a single policy domain. These reviews may be recommended when a student has come to the attention of multiple university services (e.g., SCU, faculties, MRS) and aims to determine the most appropriate ongoing response. Conduct Reviews at Monash University involve evaluating a student's behaviour across various domains and may lead to a range of outcomes. These may include behavioural conditions, referrals for further assessment or support services, and other risk management strategies aimed at promoting student well-being and maintaining community safety (Monash University, 2025).

In these cases, the CARE Service plays a central coordination role, collaborating with key stakeholders to ensure consistent support, mitigate risk, and uphold the student's right to a fair and transparent process.

Workplace Relations

CARE's model extends beyond student conduct to include support for staff involved in Workplace Relations matters. These cases may arise from allegations of harassment, discrimination, bullying, or other behaviours that undermine safety and well-being in the workplace. CARE assists staff by clarifying procedures, liaising with Monash Human Resources, and connecting individuals with external legal or health providers where needed. This ensures staff navigating formal processes are supported with dignity, fairness, and care.

Conditions of Residency

For students living on campus, breaches of residential expectations may lead to a Conditions of Residency review through MRS. Such cases are typically triggered by concerning behaviour that impacts the safety or well-being of the residential community. CARE supports affected students by building procedural literacy, offering emotional reassurance, and working with MRS and other services to encourage accountability and constructive behavioural change.

Across both Workplace Relations and Conditions of Residency pathways, CARE ensures that individuals are not left to face complex and intimidating systems alone. By providing clarity, procedural literacy, and compassionate support while reinforcing accountability and community

safety, CARE strengthens Monash University's commitment to evidence-based, compassionate practice. This approach aligns with national and international literature emphasising the value of integrated responses to disciplinary matters in higher education (Carello & Thompson, 2022; Eisenberg et al., 2012).

Reintegration and support for respondents

Support for students does not end with the conclusion of disciplinary proceedings. Reintegration into the university community is a pivotal stage, especially for respondents returning under suspension conditions, behavioural contracts, or while experiencing emotional vulnerability. These students often require sustained assistance to re-engage with their academic and social environments.

The CARE Service plays a central role during this transition. Respondents frequently return with conditions such as participation in behavioural change programs, anger management counselling, or mandated check-ins. CARE case managers support students in understanding and fulfilling these requirements, liaising with academic staff, and coordinating access to relevant support services to promote successful reintegration.

This extended engagement recognises that students' conduct may be shaped by prior trauma, mental health challenges, or systemic disadvantage. According to the Substance Abuse and Mental Health Services Administration (2014), trauma-informed approaches prioritise safety, empowerment, peer support, and cultural responsiveness. CARE applies these principles by offering personalised referrals, regular well-being monitoring, and close collaboration with university stakeholders.

Importantly, CARE's approach to reintegration is not limited to procedural compliance. A core aim of structured case management is to prevent long-term adverse outcomes such as disengagement, reputational harm, or withdrawal from university. These risks are particularly prevalent among respondents, who may experience isolation, shame, or confusion about their rights and responsibilities (Eisenberg et al., 2012). Through academic adjustments, emotional support, and structured care, CARE enables students to remain academically connected while navigating institutional processes.

Providing post-disciplinary support is both an ethical obligation and a strategic necessity. Research shows that universities adopting inclusive, supportive approaches for all parties in misconduct matters are more effective at reducing recidivism, fostering behavioural change, and preventing crisis escalation (Kitzrow, 2003; Universities Australia, 2022). Maintaining student engagement also aligns with the university's duty of care and contributes to improved retention; reduced grievances; and a safer, more connected campus community.

Crucially, CARE frames reintegration as a process of education and personal development. Restorative practices, reflective learning activities, and behaviour change programs are used to cultivate accountability, deepen self-awareness, and build interpersonal insight. According to Carello and Thompson (2022), effective trauma-informed practice in universities involves integrating responsibility and accountability with supportive responses that promote students' growth and healing. By treating reintegration not as a return but as a supported re-engagement, CARE fosters safer and more inclusive environments. Students re-enter with increased self-knowledge, emotional scaffolding, and a clearer understanding of expectations. This developmental approach reflects best practice in the sector, as highlighted in the Australian National University's Student Disciplinary Framework Review (2025), which emphasises the importance of fair, transparent, and compassionate processes for all students.

CARE in action: Service data trends

Broader service data highlight how the CARE model has evolved in response to growing and changing needs across the university. Referral data from 2022 to 2025 (as shown in Tables 3 and 4) show a service that has not only scaled rapidly but also adapted strategically to shifts in case types and institutional priorities.

Table 3

CARE Service Referral Summary by Year (2022–2024)

Year	Total Referrals	Complainants	Respondents	Persons of Concern	Formal Proceedings
2022 (Pilot)	41	21	7	12	–
2023	107	46	19	42	32
2024	90	33	20	37	28
2025 (to end of Q3 Jan–Sept)	84	46	10	28	16

Note. Formal proceedings include General Misconduct, Conditional Enrolments, Conduct Reviews, and Workplace Relations matters.

Table 4

Key Referral Categories by Year (Top 4 per Year)

Year	Mental Health and Welfare	Sexual Harm	Family Violence	Behaviours of Concern
2022	10	11	10	10
2023	33	32	12	30
2024	33	15	17	20
2025 (to end of Q3 Jan–Sept)	39	11	22	12

Analysis of referral trends and strategic insights

Referral data from 2022 to 2025 reveal clear patterns that continue to inform the strategic direction of the CARE Service.

1. Growth and recognition (2022–2023):

Referrals more than doubled between the pilot year (41 in 2022) and full implementation in 2023 (107). This sharp increase demonstrated both the demand for a holistic and integrated case management and the value of providing equitable support across complex cases. Notably, respondent referrals nearly tripled between 2022 and 2023 (from 7 to 19), underscoring the institutional recognition of a long-standing support gap in disciplinary contexts.

2. Stabilisation and category shifts in 2024:

Referrals declined modestly in 2024 (90), but the proportion of respondents remained stable. This stability reflects the continued importance of disciplinary case management while also highlighting new areas of need, such as the rise in family violence cases (from 12 to 17) following CARE's expansion to staff. Rather than a decrease in relevance, this shift demonstrates the service's capacity to respond flexibly to emerging risks.

3. Mental health and welfare as dominant themes:

Across all four years, mental health and welfare emerged as the most common referral category. This trend underscores the persistent emotional distress faced by many students, both within and

beyond misconduct matters, and reinforces the value of CARE's integrated, non-clinical case management in promoting academic retention and well-being. Referral numbers (84 up to the end of Q3, September 2025) suggest a steady, sustainable demand as the service becomes embedded. Respondent referrals fell slightly (20 in 2024 to 10 up to the end of Q3 2025), while complainant referrals rose (from 33 in 2024 to 46 up to the end of Q3 2025), reflecting an increased reliance on CARE in supporting those impacted by harm. Family violence (22 cases) and mental health (39 cases) were the leading categories in 2025 (up to the end of Q3), reinforcing CARE's role in managing highly complex, multi-layered matters across both student and staff cohorts.

4. Formal disciplinary matters remain a consistent area of need:

Although formal proceedings fluctuated (32 in 2023, 28 in 2024, and 16 to Q3 2025), they continue to represent a significant share of referrals and CARE's workload. This confirms that a supportive case management model of support remains essential for both complainants and respondents in misconduct processes, ensuring procedural fairness and reducing risks of disengagement.

Implications for service development

The data trends from 2022 to 2025 validate the continued need for an integrated case management model. They point to three priority areas for ongoing development:

- **Respondent reintegration strategies** that balance accountability with long-term educational outcomes.
- **Staff-focused support frameworks**, particularly for family violence and sexual harm matters.
- **Enhanced mental health-informed case management**, recognising the persistent dominance of mental health-related referrals.

CARE's ability to respond to shifting needs demonstrates agility and sector relevance, positioning it as a model for replication in other higher education contexts.

In response to these patterns, CARE has adapted its strategic focus to strengthen compassionate, evidence-based engagement and align more closely with national reforms, particularly the *National Higher Education Code to Prevent and Respond to Gender-based Violence*. These refinements reflect a maturing model that is data-responsive, sector-aligned, and institutionally impactful.

Strategic focus and milestones

Since its establishment, the CARE Service has evolved from a small pilot into an embedded, institution-wide model of best practice. Its strategic focus has continually adapted to meet emerging needs, respond to national policy shifts, and strengthen Monash University's commitment to safe, respectful, and person-centred practice. Across its lifespan, CARE's milestones reflect a trajectory of consolidation, innovation, and cultural influence.

1. Building institutional literacy and trauma-informed capability

From the outset, CARE has contributed to strengthening trauma-informed awareness and procedural understanding across the Monash University community. Through cross-university consultations, information sessions, and collaborative engagement with key service areas, CARE has helped build consistency and confidence in managing complex student and staff matters. A key focus has been collaborating with faculties to strengthen student support networks, ensuring academic and personal well-being, and ensuring that staff are equipped to coordinate timely, informed responses for individuals experiencing distress or disciplinary action. These partnerships

have embedded CARE's principles of safety, fairness, and respect across diverse academic contexts.

2. Integrating systems and enhancing coordination

A key milestone was the integration of CARE within the SCU, ensuring case management is aligned with broader university safety and conduct frameworks. Over time, enhanced referral pathways and interdepartmental coordination have allowed earlier intervention, clearer process navigation, and stronger monitoring of student and staff well-being. CARE's role as a central liaison point between units such as SCC, MRS, and CAPS has reduced fragmentation and improved case continuity.

3. Expanding scope to include staff and complex interpersonal cases

Recognising similar support gaps for staff, CARE extended its remit beyond students to include employees experiencing family violence, workplace harassment, or vicarious trauma. This expansion marked a pivotal milestone in embedding coordinated case management across the entire university community and positioned Monash University as a leader in whole-of-community well-being response.

4. Professionalising case management and data-driven practice

As the service matured, CARE has focused on refining its data collection processes to gain deeper insights into referral patterns, pathways, and outcomes. By improving the way case information is captured and analysed, CARE is enhancing its ability to understand student/staff journeys, identify systemic barriers, and inform continuous improvement in service design and delivery. These refinements also ensure the service remains aligned with emerging national policy priorities, including the *National Higher Education Code to Prevent and Respond to Gender-based Violence*. A stronger evidence base enables CARE to advocate effectively within institutional governance structures and contribute to sector-wide learning on equitable and structured case management.

5. Embedding restorative and educational approaches

CARE has also played a role in shaping how the university conceptualises disciplinary response. Through collaboration with SCC, CARE has promoted the integration of restorative and educative practices, focusing on behavioural insight, personal accountability, and reintegration rather than punitive exclusion. This shift represents a cultural milestone in embedding fairness and compassion into institutional processes.

6. Strengthening partnerships and sector influence

CARE's ongoing alignment with the *National Higher Education Code to Prevent and Respond to Gender-based Violence* reflects its readiness to influence sector-wide reform. By sharing insights through networks and professional associations, CARE contributes to the national conversation on equitable, person-centred responses in higher education. Its model continues to inform other institutions seeking to close the respondent support gap.

Together, these milestones demonstrate CARE's evolution from a pilot project to a sustained framework driving systemic change. The service has moved beyond responding to crises; it now actively shapes prevention, policy, and practice. Its adaptive, evidence-informed approach ensures that as the higher education sector evolves, CARE remains at the forefront of promoting safety, fairness, and well-being across the Monash University community.

Conclusion

The CARE Service at Monash University has emerged as a vital, adaptive component of the institution's well-being and conduct response framework. By offering structured and person-centred case management, it ensures that students and staff facing complex challenges, whether related to misconduct, gender-based violence, mental health, or personal safety, receive timely, coordinated, and compassionate support.

Service trends from 2022 to 2025 highlight both the growth and consolidation of the CARE Service. Referrals more than doubled between the pilot year and 2023, with respondent cases nearly tripling, confirming an unmet institutional need for equitable support in disciplinary processes. In 2024, overall referrals stabilised, but family violence and mental health cases remained prominent, reflecting the service's broadened remit to staff and the ongoing impact of emotional distress on student engagement. By 2025 (to Q3), referrals remained steady (84), with a noticeable rise in complainant cases and further growth in family violence matters, while respondent referrals declined. This shift suggests increasing confidence in CARE as a pathway for those impacted by harm, alongside more consistent management of misconduct cases. Across the four years, the sustained volume of students engaged in formal disciplinary processes confirms the service's essential role in safeguarding fairness, reducing disengagement, and supporting both accountability and well-being in high-risk situations.

These patterns reflect not only demand but the CARE model's strategic value. In disciplinary contexts, where students often face emotional distress, procedural confusion, and academic disruption, CARE bridges institutional systems and individual needs. Its trauma-informed approach empowers students to stay academically engaged while accepting responsibility and participating in restorative or developmental interventions. The service mitigates risks of reputational damage, recidivism, and student attrition, contributing to both educational justice and community safety.

This model signals a broader shift in the higher education sector: from punitive, compliance-driven frameworks to more humane, balanced, and educative approaches. Supporting respondents does not diminish accountability; it reinforces it through clarity, compassion, and continuity of care.

Through integrated partnerships with faculties, Student Conduct, MRS, and external agencies, CARE delivers a wraparound response that is both ethically grounded and operationally effective. By embedding trauma-informed principles into the conduct process, Monash University has created a replicable model of support that meets the needs of both complainants and respondents.

Looking forward, the CARE Service is well positioned to inform national best practice, particularly as universities prepare to implement the *National Higher Education Code to Prevent and Respond to Gender-based Violence*. Its alignment with this reform agenda, combined with demonstrated demand and measurable impact, offers an evidence-informed framework that other institutions can adopt to strengthen well-being and conduct systems.

In doing so, CARE exemplifies how institutions can uphold accountability while actively supporting students' personal growth and educational continuity. As Monash University continues to prioritise student safety, equity, and inclusion, the CARE Service stands as a leading example of how coordinated, person-centred practices can advance institutional integrity and student success.

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The author may be contacted via:

Jacqueline Huttley — jacqueline.huttley@monash.edu

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