

Community Safety Commission

BRIEFING DATE : Monday 29th October 2018
BRIEFING TITLE : Violence Against Women and Girls
BRIEFING AUTHOR : Sharon Ogden, Safer Communities Team Manager

1. Key areas for briefing

1.1 This briefing covers the following;

- Background on Domestic Abuse
- VAWG governance arrangements
- Council Commissioned Domestic Abuse Services and Violence Against Girls (VAWG) provision
- Key areas of development
- Development of VAWG Strategy

2. Background

2.1 Domestic abuse (DA) is defined as any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members, regardless of gender or sexuality. The abuse can encompass, but is not limited to: psychological, physical, sexual, financial, and emotional.

Service need

- Southwark has one of the highest volumes of DA in London. In 2017-18 there were 3,128 incidents recorded by the Police in Southwark, an increase of 8.5% on the previous year
 - Southwark had a rate of 19 reported incidents per 1,000 population, the 10th highest in London
 - With the exception of financial year 2017/18 the level of Police recorded DA incidents for Southwark have remained relatively static over the last 4 years. Our DA service however has seen significant year on year increases in number of referrals over the same period; from 1,453 in 2013/14 to 2,351 in 2017/18 an increase of 62%.
- 2.2 The council and its partners have recognised domestic abuse (DA) as a priority for many years and it is one of the council's Fairer Future Promises. In March 2015 Cabinet agreed the council's Domestic Abuse Strategy (DAS) 2015-2020. Actions arising from the recommendations are set out in the strategy's delivery plan, (appendix 1). The Strategy principles are:
- To stop the normalisation of DA
 - A clear statement of intent that abuse is not acceptable
 - To support to those who need it, in the settings where they feel most comfortable to seek it
 - Take tough action on those who perpetrate abuse

3. VAWG Governance Arrangements

- 3.1 Domestic Abuse and its long-term effects is a shared priority for the Health and Wellbeing Board, the Southwark Safeguarding Adults Board and the Southwark Safeguarding Childrens Board, with a specific focus on supporting vulnerable parents and children.
- 3.2 Progress on the DA strategy is reported quarterly at the multi agency VAWG Delivery Group, chaired by NHS Southwark Clinical Commissioning Group Director of Quality & Chief Nurse. Reporting is made on exception basis to the Safer Communities Delivery Group. Periodically VAWG related issues are discussed in a joint Safeguarding Children and Safeguarding Adults Board meeting.
- 3.3 Council officers have focused on developing and implementing a collaborative, outcomes-based commissioning approach to reconfigure DA services in the borough. This led to a new three year DA service contract being awarded in July 2015. This service, known as Southwark Advocacy and Support Service (SASS) is delivered by Solace Women's Aid (SWA). This approach is a co-ordinated community response, with an emphasis on prevention and breaking the cycle of abuse rather than only managing immediate risks. A diagram of domestic abuse provision in Southwark is set out in appendix 2.

4. Council Commissioned Domestic Abuse Services

- 4.1 Southwark Advocacy and Support Service, (SASS) is the most comprehensive DA service that the council has commissioned to date. The outcomes based service started in July 2015 delivered by Solace Women's Aid. The approach is a co-ordinated community response, with an emphasis based service is instrumental in helping the council deliver the DAS. The service delivers:
- Advocacy: emotional and practical support, risk assessment, safety planning, support plans, advice on benefits, signposting, refuge accommodation searches, tenancy retention, income maximisation
 - Sanctuary: safety measures to allow people to remain safely in their home
 - Comprehensive awareness and resilience-building programmes for survivors of DA to support them in ending the cycle of abuse
 - Specialist counselling: one-to-one counselling session to support women to recover from depression, reduce levels of anxiety and recover from other experiences associated with domestic abuse
 - Legal support: qualified solicitors provide advice and representation on non molestation orders, residency orders, occupation orders, child contact, etc.
 - Comprehensive training for professionals, community organisations and community volunteers
 - Children's therapeutic intervention: one-to-one play and arts based therapeutic intervention
 - Perpetrator intervention: 26 week programme aimed at individuals who want to address their behaviour
 - GP based intervention: a nationally recognised intervention called IRIS
 - Peer supporter's programme
 - Women's Voices group, to shape service development
 - A Domestic Abuse community Awareness programme
 - Independent Domestic Violence Advocates, co-located with key partners such as housing, MASH, and the Police. Since February 2018 an IDVA (Independent

Domestic Violence Advocate) has been based within the Housing Solutions service (funded by Housing) 5 days a week providing independent housing advice and advocacy for customers fleeing DA

- 4.2 Joint working protocols in place between SASS and key service areas including Housing and Children's Social Care, in order to ensure co-ordinated working practices and a focus on safety and managing risk. In order to ensure officers and practitioners are fully equipped to deal appropriately with presenting signs of abuse there is a comprehensive training offer in place.
- 4.3 687 people have attended the half-day DA awareness training sessions. An additional 282 have completed a three-day intensive DA champion's programme; this includes 42 from the community. In financial year 2018/19, training delivery was revised with SOLACE being responsible now for much more targeted and focussed training and awareness sessions. In Q1 and Q2 of this financial year, a total of 49 individuals have participated in awareness training; 37 from the community and 12 professionals.
- 4.4 Since its launch in 2013 10,051 people have been referred, of which 8,156 clients have been supported through the DA service with 85% (figures collected since FY 2015/16) achieving reduced risk of harm within 3 months of engaging with the service. The increase in referrals and clients engaging with the service provides an indication of the impact of the work the council and its partners have done in implementing the DA strategy. More people are accessing the help they need and achieving positive outcomes.
- 4.5 It is recognised that statistics don't show the full impact a service may have on a client. It is therefore important to review a client's journey through case studies. Appendix 3. Includes a couple of case studies; one from a survivor and one from a perpetrator who have engaged with services.
- 4.6 The current DA service contract with Solace Women's Aid is due to end in October 2019. Procurement of a new DA service will take place during FY 2018/19

5. Other Violence Against Women and Girls Provision

- 5.1 The council commissions a number of other DA and violence against women and girls related programmes outside the main DA service. These include:
 - **YUVA** - service for young people using or experiencing violence in close relationships
 - **SHER** - A safe and healthy relationships programme delivered in schools
 - **Refuge** - accommodation provision for victim fleeing domestic abuse. This consists of 24 units for women and their children spread across four safe houses over three sites. 6 of the units are self-contained flats, 4 are wheelchair accessible and 20 are shared accommodation. The service employs four full time specialist refuge workers and a part time service manager
 - **Project Mia** – working with hard to engage and high risk DA survivors (those with children on a child protection plan (funded by Home Office)
 - **Perpetrator Programme** – Development of a systematic approach working with most prolific perpetrators of DA (Police Operation Dauntless) (funded by Home Office)
- 5.2 In addition there are a number of other programmes commissioned by other organisations outside of the council which are available to Southwark residents. These include:

- **Victim Support** provides a DA service across Southwark funded through the Mayor Office for Policing & Crime, (MOPAC). They provide both an IDVA and Independent Sexual Violence Advocate (ISVA) service for clients in the borough.
- **Bede** runs the Starfish project which supports people that are experiencing domestic abuse. Support is provided by two qualified IDVAs and one support worker. Bede also deliver the SHER (Safe, Healthy and Equal Relationships) programme in schools in the borough
- **Hospital Based DA IDVA provision:**
- Two Victim Support IDVA's are co-located five days a week at Kings College Hospital Foundation Trust.
- REACH provide IDVA provision at St Thomas's A&E and MOZAIC are a service based in Guys and St Thomas' Foundation Trust maternity services. They provide support, advice and risk assessment for maternity service users and also training around DV and how to respond and refer victims to support services.
- Solace provide 4 youth IDVAs (seconded to Redthread) in the four major trauma centres across London; St George's Hospital, St Marys Hospital, Royal London Hospital, Kings College Hospital Foundation Trust.
- **Housing** - Pan London reciprocal agreement. Agreement with other boroughs to house victims of DA on a reciprocal basis

6. Multi Agency Risk Assessment Conference (MARAC)

- 6.1 The Domestic Abuse MARAC is a forum where information relating to high-risk domestic abuse victims (those at risk of murder or serious harm) is shared between local agencies to minimise risk. By bringing relevant agencies together at the MARAC, a risk-focused, co-ordinated safety plan can be drawn up to support the victim. In Southwark the MARAC meets fortnightly, is chaired by the local Detective Inspector of the local Community Safety Unit. It is well attended by partner agencies.
- 6.2 Table 1 below outlines MARAC performance data. The borough has seen an overall increase in referrals over the last four years and also an increase in repeat referrals*. In terms of this increase this is a trend which is being seen nationally.

Table 1

Financial Year	Total number of cases discussed	Total number of Repeat* cases
14/15	387	128
15/16	458	124
16/17	517	187
17/18	480	146

*Southwark's definition of repeat referrals is anyone who has previously been discussed at a MARAC.

- 6.3 SafeLives also have a repeat referral recommended range which is between 28-40%. Current 18/19 figures for Southwark illustrate the MARAC is operating in this range.

7. Key areas of development

- 7.1 Over the last two years good progress has been made against the implementation of the DA strategy and associated delivery plan, particularly in awareness raising and early identification of DA victims. This includes raising awareness of early signs of abuse, educating young people, tackling perpetrator behaviour, building community capacity and leadership, increasing the opportunities for disclosure and appropriate responses and building survivors resilience. However in many cases the first contact

that a victim of DA will have with support agencies is still at point of crisis. For example the need for emergency housing.

- 7.2 There is a need to develop a new cross partnership early action/intervention approach to DA, not only to identify individuals (including young people) and families at risk of, or experiencing DA at an earlier point, but to also improve how services engage and support individuals and groups at the first point of coming to notice to services. This new approach will have a change in focus, directed towards three areas;
- 7.3 *A more family orientated approach engaging and working with families and young people experiencing DA at an earlier stage.* Young people are particularly vulnerable to DA. Witnessing or experiencing domestic abuse as a young person can have a negative effect on the emotional state and psychological development of the individual, Children who grow up in abusive homes are also likely to mirror behaviour and use it in their own interpersonal relationships. These behaviours can also become normalised and children or young people may grow up to become victims or perpetrators of domestic abuse.
- 7.4 *Review and improve how frontline services engage and deal with low to medium cases of DA (where there is not an immediate safeguarding risk), what referral mechanisms are in place.*
- 7.5 *How we can work with perpetrators more effectively, within and outside the family environment.* This also includes a more robust approach to perpetrators as seen in the recently formed domestic abuse tenancy panel (see below).

DA Tenancy Panel

- 7.6 The majority of DA cases brought to the attention of Housing whether it be Resident Services or Housing Solutions are a request for the victim to be rehoused. This is largely in response to safety considerations, and the wishes of the victim to leave the property, not wanting to remain at the address with the perpetrator. The Housing Solutions service receives approximately 180 homeless applications each year from victims fleeing DA of these approximately 72 will require immediate emergency temporary accommodation.
- 7.7 However there are occasions whereby the victim does wish to remain in the property; children may be settled and established in schools, and leaving the property will have a detrimental impact on the victim and/or family.
- 7.8 To take this work forward a multi-agency panel has been formed to review council tenancies whereby domestic abuse occurs, and make recommendations for appropriate action in our position as a landlord based on legal advice. The outcomes being improved support to victims, a more robust approach to perpetrators, and reduced pressure on temporary accommodation.
- 7.9 Since its inception the panel has received a total of 15 referrals for consideration. 2 cases have been closed with no further action. 5 cases have legal action being pursued including 1 on the basis of rent arrears. 8 cases are at the intelligence gathering stage. 2 new cases are due for discussion at the next panel meeting at the end of October.

8. VAWG Strategy

Background

- 8.1 Southwark developed a 5 year Domestic Abuse Strategy in 2015. Progress against this strategy is near completion with only a few areas remaining requiring attention. Although this strategy is still valid until 2020, there is a need to develop a wider VAWG strategy to ensure that we are delivering a strategic partnership response to all areas of

gender based violence not only domestic abuse. These include harmful practices such as FGM and Honour Based Violence as well as sexual harassment and stalking. DA will still form a key part of this strategy with any remaining actions from the existing DA strategy subsumed into the new VAWG strategy.

- 8.2 The Home Office and MOPAC have both recently developed VAWG strategies and Southwark needs to respond to the changing landscape in VAWG delivery both regionally and nationally.
- 8.3 The strategy will last five years (2019/20 – 2023/24) and be accompanied with a 2 year action plan. A further action plan taking into account learning from 2019/20 – 2020/21 will be developed for years 3, 4, & 5 (2021/22 - 2023/24)
- 8.4 In line with the MOPAC Strategy, the following areas of VAWG will be considered for inclusion within the strategy:
- Domestic abuse
 - Coercive control
 - Child sexual exploitation (CSE)
 - Harmful practices including female genital mutilation, forced marriage and honour based violence
 - Image based sexual offending
 - Sexual harassment
 - Prostitution
 - Misogyny
 - Sexual violence and rape
 - Stalking
 - Trafficking
 - Perpetrators

Approach

- 8.5 In developing the strategy and action plan the following approach will be taken:
- *Desktop research and literature review* - a full review of current local authority, regional and national VAWG strategies, best practice approaches in areas under the VAWG umbrella.
 - *Equalities impact assessment* - a full impact assessment encompassing all equality strands will be undertaken alongside the development of the strategy
 - *Analysis of existing local data, action plans and strategies* - existing Southwark strategies and action plans which have an interface with the VAWG strategy will be reviewed and incorporated or referenced as appropriate
 - *Needs analysis* - a domestic abuse needs assessment was undertaken in 2017. This will be refreshed to take account of any recent trends/developments. Other areas of VAWG which have not previously been the subject of a needs analysis approach will be analysed as part of the strategy development
 - *Consultation with internal and external stakeholders (professionals, elected members and community members)* - this will include a range of consultation methods from large stakeholder events to 1-2-1 interviews and will take place throughout the development of the strategy. Key experts will be identified for membership of the steering group and will be consulted at regular intervals as the strategy is developed.
A number of community events will be delivered to ensure that all sections of Southwark's diverse communities have an opportunity to participate in the strategy development
 - *Focus groups with service users/survivors* - Small focus groups will be arranged with survivors to seek their views on the strategy objectives and planned

activities. 1-2-1 interviews and anonymous questionnaires will also be used if appropriate

- *Online survey* - an online survey will be developed to seek the views of Southwark Council employees, residents and other interested individuals

Key stakeholders

8.6 Key stakeholders include (but are not limited to):

- Southwark Council – Children’s and adults social care, Housing, SASBU, Public Health, Environment and Leisure, Elected Members, Youth Services, Communities
- Metropolitan Police Service
- NHS Southwark Clinical Commissioning Group
- Guys and St Thomas’s NHS Trust
- South London and Maudsley Foundation Trust (SLaM)
- Domestic Abuse Providers (including SOLACE, Victim Support Southwark (VSS) and Bede)
- Local voluntary sector organisations
- Community groups
- Education providers
- National Probation Service (NPS)
- Community Rehabilitation Company (CRC)
- Change, Grow, Live (CGL) – commissioned substance misuse provider
- Supported Housing Providers
- Local business partnerships

Governance

8.7 The identified Project Team includes officers from the following departments/organisations (not all team members will be involved at all stages of the project):

- Project Manager: Lisa Negi, Community Safety Officer, CSPS
- Project Support: Tim Calver, Community Safety Support Officer, CSPS
- Needs and data analysis: Javier Montoya, NHS Southwark Clinical Commissioning Group
- Public Health
- Community engagement
- Communications (including Design Team)

8.8 The nominated project sponsor is Sharon Ogden (Safe Communities Team Manager) and represented on the Steering Group will be:

- VAWG Delivery Group Chair (and NHS Southwark Clinical Commissioning Group Representative)
- Community Safety and Partnerships
- Additional Health representative (Secondary Care, Public Health)
- Children’s Social Care
- Adults’ Social Care
- Metropolitan Police Service
- Domestic Abuse Provider
- Southwark Housing

Time scales and project plan

8.9 An initial time line (see appendix 4.) has been developed which includes the core activities involved in the development of the strategy and action plan. It is estimated that the Strategy will be signed off by partners at the end of February 2019 for launch by end March 2019.

Southwark Domestic Abuse Strategy 2015-2020



Domestic abuse affects thousands of people in Southwark every year. It is often hidden but its impact spans generations. Despite the successful work already undertaken in Southwark, there is a strong case for change and there is evidence that we can do better, using a wider range of support in the health and community sector.

Definition

The definition of domestic abuse is: *any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members, regardless of gender or sexuality.*

The abuse can include, but is not limited to:

- psychological
- physical
- sexual
- financial
- emotional

Our strategy's key principles are:

- A clear statement of intent that abuse is not acceptable
- Challenging the normalisation of domestic abuse
- Ensuring that those who have experienced abuse can take control of their lives by providing support for those who need it, in the settings where they feel most comfortable seeking it
- Taking tough action on those who perpetrate abuse
- Ensure agencies work together to get it right first time

Why we need a domestic abuse strategy

- The development of a domestic abuse strategy is one of the Fairer Future commitments of the council
- Southwark has one of the highest levels of reported domestic abuse to the police in London, with an average 2,200 - 2,400 recorded incidents a year
- Women in intimate partner relationships are significantly the highest proportion of victims and male partners, ex partners or boyfriends the highest proportion of perpetrators, however abuse can also affect men and be perpetrated by women
- People who have experienced domestic abuse are more likely to have long term health problems, including mental health, depression and suicidal tendencies
- Two out of three people who have experiences of domestic abuse had children living with them that regularly witnessed the abuse. Children exposed to domestic abuse are more likely to develop long term health problems such as depression and carry out violence themselves in adolescence and adulthood
- For many people the emotionally abusive or controlling acts have the most long term impact and accounts for 50 per cent of abuse experienced by those accessing our main support service
- Those experiencing or witnessing domestic abuse on a daily basis see it as something that is normal, in some cases a part of a "loving" relationship
- The number of people aged 16 to 18 or 71 or older accessing our main support service has increased.

The law

Domestic abuse is not a criminal offence; it is an aggravating factor for other types of crime. However the Home Secretary recently announced plans to create a new domestic abuse offence of coercive and controlling behaviour. The maximum penalty will be five years imprisonment and a fine. The new law will help protect people by outlawing sustained patterns of behaviour that stop short of serious physical violence, but amount to extreme psychological and emotional abuse.

The strategy's key recommendations include

Prevention and awareness

- 1 Aim to "get it right first time" by providing support and clear referral pathways for friends and families, including the expansion of existing Domestic Abuse Champions in community, faith and work based settings
- 2 Establish a wide ranging education and support programme for young people
- 3 Greater support for the LGBT community, people with disabilities and those from the diverse range of communities in the borough, through an awareness raising programme.

Early identification and support

- 4 Achieve a greater balance between criminal justice, health and community support by establishing a health based intervention model
- 5 Establish an integrated support service for complex cases of domestic abuse
- 6 Work with the Mayors Office for Policing and Crime to establish a consistent pan-London approach to addressing domestic abuse.

Enforcement

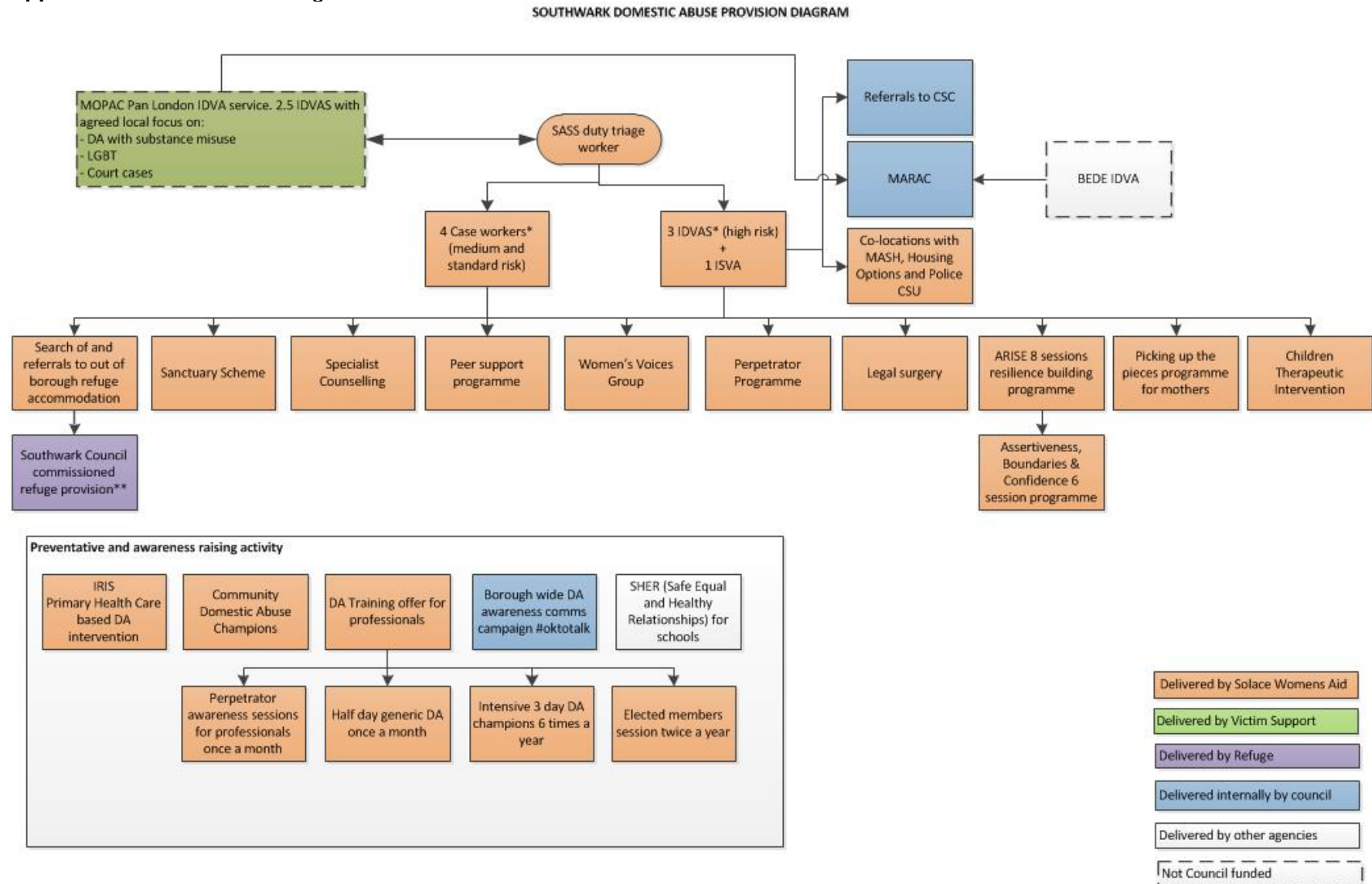
- 7 Take action against persistent perpetrators by establishing a multi agency enforcement approach
- 8 Improving the criminal justice process including, lobbying for a domestic abuse specialist court in Southwark
- 9 Carry out an annual needs assessment review of domestic abuse.

Accessing services

To view the full strategy or if you are seeking advice or help on domestic abuse, there is more information on the services and support available at www.southwark.gov.uk/domesticabuse



Appendix 2: DA Provision diagram



*IDVA/ISVA (Independent Domestic/Sexual Violence Advocate) and case workers: Risk assessments, safety planning, advocacy, emotional support, practical advice on housing, benefits and referrals onto other appropriate services. Preventative programmes and all other interventions are delivered by additional staff so that IDVAs/ISVAs and case workers can focus solely on case work.

**26 units across three borough based safe houses. For safety reasons this service accommodates mostly non Southwark residents. For safety reasons Southwark residents fleeing DA are mostly placed in refuges out of borough

Appendix 3 Case Studies (all names have been changed)

Survivor case study

Josie was first referred to Solace in late 2015 after a serious physical assault from her husband where he broke one of her ribs. Josie was an Irish Traveller; she had been experiencing long term domestic abuse and was drinking large amounts of alcohol as a coping mechanism. Josie's three children were on a child protection plan and her drinking was impacting her ability to care for the children appropriately. Josie was unable to read or write and stated that she drank before meetings or appointments as she felt she had no confidence unless she had been drinking.

SASS worked with Josie to support her to leave the relationship, obtain a non-molestation order and access support for her alcohol use. Josie's drinking improved and social services were pleased with the progress Josie was making. Unfortunately in June 2016 Josie had a relapse and her children were removed from her care and placed in foster care. During this time professionals also had concerns that Josie was still having contact with the perpetrator; after one incident Josie disclosed that her husband had assaulted her and she was referred to MARAC.

SASS continued to work with Josie following her children's removal; initially Josie was struggling a lot with the loss of her children, her drinking was continuing and she didn't feel ready to attend any groups or counselling. SASS continued to support Josie and worked with her to manage contact with her children and access detox and rehab; Josie moved in to residential detox in December 2016.

In June 2017 Josie graduated from residential rehab. Josie is no longer drinking and feeling much more positive and confident. She is attending ARISE and has felt confident enough to stand up and speak in front of the group. Josie is also attending AA meetings and has started swimming and attending an art group. She has remained separated from the perpetrator and has reported no further injuries or incidents of abuse. Josie continues to work with SASS and is committed to meeting all the targets on her child protection plan with the aim of having her children returned to her care in the future.

Perpetrator case study

Hassan was referred to the perpetrator programme by social services following a long history of abuse towards his wife Ozlem. Ozlem and Hassan were separated however Hassan still had contact with their son facilitated by Ozlem. Social Care made the referral as they were concerned that he had not addressed his abusive behaviour. Ozlem had been known to SASS since 2015; the children had formerly been on a CP plan but this had recently been downgraded to a CIN plan following separation. Hassan was continuing to use contact to verbally and psychologically abuse Ozlem, often in front of their son.

During initial assessment Hassan disclosed various forms of abuse including:

- incidents of physical abuse (their son had been in the same or next room for these at least five times)
- regular verbal abuse which their son had witnessed including shouting and screaming at Ozlem
- trying to stop Ozlem from seeing family and friends
- criticising Ozlem's parenting
- blaming Ozlem for his problems

Hassan was accepted onto the programme and began to attend sessions. During the group he explored ideas around masculinity, the importance of being accountable and not blaming Ozlem for his actions, and issues around supporting Ozlem as the primary parent. After attending the group for a few months, Hassan disclosed that there had been an incident where he had been upset with

Ozlem for taking her son swimming when they should have been having contact. Hassan stated that where he would have previously verbally abused Ozlem by screaming at her over the phone, he decided to stay calm and had a calm conversation about it with her when he went to collect his son the next day which resolved the issue.

After being on the programme for a few months, social services closed the case and support of the family was continued via TAC meetings facilitated by Solace. Hassan completed the perpetrator programme in March 2017 and has now been referred on to parenting courses. Regular contact facilitated by Ozlem has continued with no further abusive incidents. Social services and other professionals continue to have no concerns about Hassan's behaviour.

Appendix 4. VAWG Strategy Timeline

Activity Name	Lead Officers	Estimated start	Estimated finish	03/09/2018	10/09/2018	17/09/2018	24/09/2018	01/10/2018	08/10/2018	15/10/2018	22/10/2018	29/10/2018	05/11/2018	12/11/2018	19/11/2018	26/11/2018	03/12/2018	10/12/2018	17/12/2018	24/12/2018	31/12/2018	07/01/2019	14/01/2019	21/01/2019	28/01/2019	03/02/2019	10/02/2019	17/02/2019	
				Develop Project Brief and Project Plan		01/09/2018	17/02/2018	█	█																				
Project Sponsor and Steering Group Members confirmed					█	█																							
Project Team confirmed					█	█																							
Literature review							█	█																					
Needs assessment - 1st draft								█	█	█																			
Consultation development												█	█																
Consultation session - VAWG Delivery Group													█																
Consultation session - 1st stakeholder event (key themes)														█															
Consultation session - Service users															█														
Consultation session - Community focus																█													
1st draft Strategy developed														█	█														
Needs assessment - additional areas																	█	█											
Additional stakeholder event(s)																			█										
2nd draft strategy completed																			█	█									
Equalities impact assessment																				█	█								
Management review																					█	█							
Foreward draft completed																						█	█						
Final amendments																							█	█					
Final draft completed																									█	█			
Comms Strategy completed																											█	█	
Action plan completed																												█	█
Strategy launched																													█