REPORT FOR: HEALTH AND WELLBEING BOARD

Date of Meeting: 11th September 2014

Subject: INFORMATION REPORT

Domestic and Sexual Violence

Strategy

Responsible Officer: Alex Dewsnap – Divisional Director, Strategic

Commissioning

Exempt: No

Wards affected: All

Enclosures: Appendix 1 Domestic and Sexual Violence

Strategy 2014-2017

Appendix 2- Equality Impact Assessment

Section 1 – Summary

This report sets out the Domestic and Sexual Violence Strategy 2014-17 and proposals for the £200K investment as agreed by Cabinet in July to support the Administration's pledge to 'Invest an extra £1m to tackle domestic violence, support carers and stand up for those in need.

FOR INFORMATION



Section 2 - Report

Introduction

- The Domestic and Sexual Violence strategy 2014-17 builds on the Domestic and Sexual Violence Strategic Framework & Action Plan 2011-13 to expand its focus to include all forms of violence affecting women and girls as well as Domestic Violence. This includes forced marriage, Female Genital Mutilation (FGM), honour-based violence, sexual exploitation, trafficking, prostitution, stalking & harassment, and domestic and sexual violence.
- 2. The strategy commits the council and other public bodies, in partnership with the voluntary sector, to developing policies and services that appropriately address the full range of forms of violence.
- 3. The Strategy consolidates the activities undertaken by the Council and its key partners in addressing violence against women and girls by promoting joint planning and implementation, raising awareness of the issues, promoting safeguarding processes and delivering support. The Strategy is also a partnership document and reflects the partnership's commitment to addressing violence.
- 4. The Council's Corporate Plan includes a commitment to 'Invest an extra £1m to tackle domestic violence, support carers and stand up for those in need.' The Council has committed an additional £200K to tackle domestic violence. This report recommends how best to allocate this funding in ways that support the Strategy.

Options considered

- 5. Do not have a Strategy. This would result in fragmented service planning between partners, duplication, lack of focus and inefficient use of scarce resources by all of the key partners engaged in reducing violence against women and girls.
- 6. Do not agree this strategy but ask for a different strategy with different priorities. This strategy has been prepared in close consultation with all of the Councils major partners engaged in reducing violence. As such it represents a shared platform of joint priorities that best reflect the way to maximise cross sector and organisational impact. The data collected does not appear to support an alternative strategy.
- 7. Options considered for the £200K spend is as follows and in accordance with the Strategy 2014-17 key priorities:
 - 7.1 .The investment options proposed are based on priorities within the Strategy which are:
 - Secure the services we have and improve them if possible;
 - Develop and run community awareness raising campaigns around Forced Marriage, Honour-based Violence and Female genital Mutilation; and

- Equip all front-line professionals with the knowledge and confidence to recognise and refer victims.
- 7.2 The spending recommendations are based on the following assumptions:
 - The Home Office specific grant of £20k per annum currently made to Hestia will be renewed and paid to the successful contractor for the integrated violence contract; and
 - Training/events for front line professionals will be supported by other organisations by including Violence content within their existing training programmes and running joint events where these would be useful.
- 7.3 The spending recommendations are set out at the end of this report in a table.

Background

- 8. The Government's Violence Against Women and Girls Strategic Narrative and Action Plan produced in 2010/11 adopts the core vision of "a society in which no woman should live in fear of violence, no man should think it acceptable to perpetrate violence against women and no child/ren should grow up in a home where violence is an everyday occurrence." It encompasses the four priorities of Prevention, Provision, Partnership and Perpetrators which are also embedded in the Government's Strategic Narrative.
- 9. The Process for developing the Council's strategy

The stages are outlined as follows:

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Stage 1 – Planning
Stage 2 – Intelligence building & needs analysis
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Data: In order to scope the extent of violence locally, information was gathered using statistics from all available sources. Where no local statistics were available on specific issues, information was extrapolated from national data.

Focus groups: Further scoping was undertaken through focus groups for those violence areas where little statistical information was available in the borough. These included:

- Female Genital Mutilation.
- Forced Marriage and Honour-Based Violence,
- · Sexual exploitation, trafficking and prostitution; and
- Stalking and harassment.

¹ Call to End VAWG, HM Government Nov 2010

The focus groups were also asked to provide feedback on gaps in service, service accessibility and approach and contribute to the overall strategic direction.

Stage 3 – Collate responses/findings

The recommended priorities flow from the collated data and have been endorsed by the multi-agency Strategy Group and Partnership Groups including Safer Harrow which is responsible for taking agreed action forward. If adopted, actions to implement the Strategy will be developed by the Strategy Group.

The Strategy Group will need to incorporate in the detailed planning a better integration of health concerns and capacity such as the role of GP practices and their inclusion in the decision making pathway, the role of maternity services and the links with Safeguarding. The Strategy Group will also need to recognise the links with Mental Health services, North West London Hospitals and the Integrated Care Organisation. Finally, the Group will need to take account of the extent of older people and violence and any other issues that are identified through the remaining parts of the consultation exercise around the Strategy.

Current situation

- 10. Details of the current provision in Harrow is set out from page 20 onwards of the Strategy. In summary, this comprises:
 - 3.5 Independent Domestic Violence Advisers who provide advice and support to victims at high risk of further violence;
 - 1 Independent Sexual Violence Advocate:
 - Part time Multi Agency Risk Assessment Conference (MARAC) Coordinator to manage submission of high risk cases for consideration:
 - Young Person's Violence Adviser based in the Early Intervention Service in Children's and Families
 - A Community Groups Programme at Children's Centres;
 - A 6 place refuge and floating support for victims of domestic violence:
 - The Harrow Shield Project working on reduction and prevention of violence against young women and girls;
 - Access to detached services in Harrow provided by the West London Rape Crisis Centre
- 11. The Strategy and Action Plan is based on the four strategic objectives: Prevention Early Intervention; Provision for at risk victims; Partnership Multi-agency responses and Perpetrators.
- 12. The Strategy looks at what current provision can be easily extended, what is manageable but the focus is not only on where cross-overs exist between the VAWG areas. This means that, for example, where specialist services are required they are not merely attached to existing mainstream services but developed separately..

Section 3 Further Information

Why a change is needed

13. National estimates provided by the British Crime Survey self completion module on domestic abuse, suggest that 1.2 million females and 800,000 male victims have experienced domestic abuse in the last year². The Ready Reckoner Tool (Home Office)³ and the census population for Harrow in 2011 (239,100) provides the estimated prevalence of domestic violence, sexual violence and stalking in Harrow. The estimates indicate that in Harrow:

- 5,617 women and girls aged 16-59 have been a victim of domestic abuse in the past year;
- 5,019 women and girls aged 16-59 have been a victim of a sexual assault in the past year;
- 9,940 women and girls aged 16-59 have been a victim of stalking in the past year.

14. The previous strategy focused almost exclusively on Domestic Violence. Despite this focus, and the large volume of casework and support provided by a range of organisations, Domestic Violence reported locally is continuing to rise. While this can be considered to be a good thing if it is an indication of rising confidence to report violence and an expectation that this will result in action and a good outcome, it could also be as a result of increased prevalence. What can be said with confidence is that Domestic Violence (wounding with injury in a domestic setting) is the only crime type in Harrow with a current significant increase (20.6% in 2013/14 compared with the previous period. For this reason, the strategy cannot ignore Domestic Violence but also needs to take account of other forms of violence.

15. There is little data about the prevalence of other forms of violence but national research suggests that Forced Marriage, Honour-based Violence and Female Genital Mutilation are most commonly practiced in communities with links to particular countries and that these communities make up a significant proportion of Harrow's population. The Strategy therefore proposes action on these areas of violence.

16. The Strategy will be considered by Cabinet on 18th September 2014. The CCG now has a nominated representative on the Domestic and Sexual Violence Strategy Group – a group of senior representatives that oversees strategy development. The CCG representative is now fully informed. The spending proposal includes the provision of an IDVA at Northwick Park Hospital. Conversations are being held with surrounding boroughs for supporting funding for this.

² Britton A, *Intimate violence: 2010/11 BCS Supplementary Volume to Crime England & Wales*, 2012

³ Home Office. Violence Against Women & Girls Ready Reckoner Tool

Section 4 - Financial Implications

17. In July, Cabinet approved savings of £1.601m for in year (2014/15) with half of this saving being vired into the Transforming Priorities Initiatives Fund (TPIF). Cabinet also agreed that £200k of the TPIF be allocated for tackling domestic violence and this report recommends a spending plan for the £200k. Details of the spending proposals are set out in a table with notes at the end of this report.

Section 5 - Equalities implications

- 18. Before adopting the Strategy, the Council must have due regard to the need to eliminate unlawful conduct under the Equality Act 2010, the need to advance equality of opportunity and the need to foster good relations between persons who share a protected characteristic and those who don't. The Equality Impact Assessment in Appendix 2 provides information relevant to these considerations.
- 19. Some of the actions proposed as part of the Strategy are specifically targeted at women and girls. This is reflective of the evidence available to the Council, which is reported in the Equality Impact Assessment that a significant proportion of victims are female. Section 158 of the Equality Act 2010 permits a limited range of positive action. This section applies where:
- Persons who share a protective characteristic (such as gender) suffer a disadvantage connected to the characteristic
- Persons who share a protected characteristic have needs that are different from the needs of persons who do not share it or
- Participation in an activity by persons who share a protected characteristic is disproportionately low.
- 20. In those circumstances action may be permitted which is a proportionate means of
- Enabling or encouraging persons who share a protected characteristic to overcome or minimise that disadvantage
- Meeting those needs, or
- Enabling or encouraging persons who share a protected characteristic to participate in that activity.
- 21. Some of the actions proposed as part of the Strategy may not be specifically targeted at persons who share a protected characteristic (such as gender) but may in fact result in services being delivered in a way that benefits such people (e.g. Women and girls). Such indirect discrimination would not be unlawful if it is a proportionate means of achieving a legitimate aim. There is a good argument that a) combating violence against women and girls is a legitimate aim for reasons set out in the report; and b) that the actions proposed in the action plan are a proportionate means of achieving that aim.
- 22 The Equality Impact Assessment in Appendix 2 sets out how the protected characteristics identified in the Equality Act 2010 have been

taken into account in formulating the Strategy. This has led to some action being targeted in ways which may affect persons who share specific characteristic. In each instance the proposed measures are considered to be proportionate means of combatting violence against women and girls. Overall the Equality Impact Assessment concludes that the impacts of the strategy by way reference to the protected characteristics will be positive.

Section 6 - Council Priorities

23. Delivering the Strategy incorporating early intervention and prevention will help to prevent/reduce the number of victims of violence against women and girls. The proposed use of the £200K investment is in keeping with these objectives. This will deliver the administration's priorities of making a difference for the vulnerable, making a difference for communities and making a difference for families helping to create safer and inclusive communities.

Statutory Officer Clearance

Council and Joint Reports

Name: Dawn Calvert. Date: 19 th August 2014	V	on behalf of the Chief Financial Officer	
Ward Councillors notifi	ed:	NO	

Section 7 - Contact Details and Background Papers

Contact: Mike Howes, Senior Policy Officer Ext 5637

Background Papers:

Domestic and Sexual Violence Strategic Framework & Action Plan 2011-13

Investment in Domestic and other Violence reduction and prevention services

The Council has pledged an additional one-off £200,000 investment to tackle domestic violence during this administration. The investment options proposed have been developed in consultation with Council directorates, key partners and stakeholders and are based on the priorities within the draft VAWG Strategy which are:

- 1. Secure the services we have and improve if possible;
- 2. Develop and run community awareness raising campaigns around Domestic Violence, Forced Marriage, Honour-based Violence, and FGM; and
- 3. Equip all front-line professionals with the knowledge and confidence to recognise and refer victims.

Assumptions:

- Home Office specific Grant of £20k per annum currently made to Hestia will be renewed and will be paid to the successful contractor for the integrated DV contract.
- Training/events for front line professionals will be delivered by other organisations by including VAWG content within their existing training programmes and running joint events where possible and useful.
- Current funding streams continue (i.e. MOPAC grants, DV Commissioning budgets in Strategic Commissioning, Supporting People, Children's and Families budgets) (1)
- Whilst we have notionally profiled the investment across the 4 years of the administration, these are intended to be a guide as to when we would expect to draw down on the investment rather than an absolute, so long as the £200k is spent by the end of the administration.

Proposal

No	Proposal	Cost 2014/15	Annual Cost	Total Cost
			2015/16 – 17/18	
1	Uplift contract sum for IDVA commissioning (2)	Nil	25,000	75,000
2	Increase MARAC Co-ordinator funding (3)	4,000	9,000	31,000
3	Increase MASH IDVA to full time (4)	20,000	Nil	20,000
4	New IDVA located at Northwick Park (5)	20,000	Nil	20,000
5	Training/events for staff, both profession specific and mixed groups (6)	2,000	1,000	5,000
6	Community Awareness Raising (7)	3,000	2,000	9,000
7	Family Domestic Violence Project (8)	20,000	20,000	40,000
	Total	84,000		200,000

Notes

- (1) Despite our best intentions to protect DV budgets within the Council from cuts, given this is a key pledge for the administration, certain proposals may come forward in the commissioning panels, in order to give Members choices, which will potentially contradict with the direction of travel set by the Members. We will need to be clear about where these issues arise and flag the risk to members so they are fully aware of the implications.
- (2) The Policy Team plans to recommission the IDVA Services (currently provided by Victim Support and Hestia, with effect from 1st April 2015. The current contracts do not include cost/inflation increases and there have therefore been concerns that the voluntary organisations would cut IDVA hours to compensate for this. This has been prevented to date by the use of underspends to support the existing staffing levels, but this is not a sustainable option. It is therefore felt that the most essential action is to maintain the current minimum level of IDVA cover by uplifting the contract sum for IDVA commissioning. Whilst this proposal is using the investment to support existing revenue streams, the new contracts will run in conjunction with the electoral cycle and will therefore give any new administration in 2018 an option to review expenditure.
- (3) MARAC Co-ordination is provided by Hestia. Currently, the Council funds 0.2 of a post to undertake this function. The number of referrals to MARAC has increased year on year although it is still below the range that CAADA recommend based on the Borough's population. CAADA recommends that a full time Co-ordinator can cope with a workload of 400 MARAC cases a year. In 2012/13, Harrow MARAC dealt with 211 cases. To fulfil the existing workload and to allow for some anticipated growth in the MARAC referral rate, some of the investment should be used to increase the MARAC Co-ordination post to a half-time post.
- (4) There is half time IDVA commissioned to work in the MASH. The individual advises Children's and Families about the impact of domestic violence in individual referrals received via the Front Door and carries a caseload arising from those referrals. The caseload exceeds the capacity of a half-time post. The proposal is to make this post full time with the Investment Fund meeting the additional costs for the first year but Children's and Families taking on the costs thereafter.
- (5) The IDVA services that the Council commissions are severely overstretched. Additional IDVA Support is needed in a number of settings including Court, Accident and Emergency and Maternity wards. Of these, the most vital appears to be at our local hospital. The investment proposal is to fund a new post for the remainder of the current financial year while discussions continue with Children's and Family Services, the Clinical Commissioning Group, the NHS Trust and a neighbouring authority about sustainable funding for the post. These discussions may be completed by the time of the Cabinet's meeting in September.

- (6) Our ambition is to equip all front line professionals with the ability to recognise and refer victims of violence requires the addition of specific modules into existing training programmes and courses. Appropriate training is arranged by the Local Safeguarding Boards, and through professional development within the various appropriate services. Effort in the first year would be devoted to developing modules including assessing materials from national and specialist organisations and tailoring them to Harrow's circumstances and infrastructure and agreeing with employers and training providers how to incorporate them into existing provision. Work would also be devoted to helping training commissioners specify appropriate material for future bespoke courses. Subsequent year funding would pay for printing and distribution.
- (7) The idea of community awareness raising around all of the violence agenda but specifically around Forced Marriage, Honour-based Violence and Female Genital Mutilation is to develop a preventative climate of opinion around these subjects. Current interventions are almost entirely related to post—violence investigation/prosecution rather than designed to prevent violence happening in the first place. As there is no reliable way of identifying with any precision those at risk, changing accepted/tolerated norms seems to be the most effective way of influencing behaviour.

This work, which will be about equipping voluntary and community groups, staff and supporters to hold specific conversations with communities identified from national statistics and other intelligence whose members are at risk of perpetrating and/or being a victim of these crimes. Community organisations will be funded to hold events through which these agreed messages can be disseminated and reinforced.

- (8) The Family Domestic Violence Programme idea is based on work taking place in America and includes within early interventions and targeted responses:
- Working with communities to raise awareness and developing a zero tolerance approach to violence. Creating two part-time posts
 (reflective of the community) who will work alongside social workers, undertaking joint visits and work with those women most
 vulnerable including new arrivals to the UK, where there is a language and social barrier and assisting in developing community
 mentors.
- Using therapeutic interventions to work on the impact of exposure to domestic violence on the child aimed at reducing the long term consequences including abuse in adulthood.
- Using key proven methodologies to work with the family as a whole including the use of social learning theory, work to include the impact on the child and victim
- Reducing risk through the exploration of the triggers for violence.

The 'family' approach aims to make victims and perpetrators of domestic violence part of the process that leads to sustainable changes which aim to reduce the prevalence of violence in current and future relationships for the adults and children involved.

Social learning theory suggests that domestic violence is a learned behavior and that perpetrators are more likely than not to have had fathers who were violent. Understanding the trauma of exposure to chronic violence is key to assisting perpetrators of violence to change what are often entrenched behaviors resulting from early exposure to violence in childhood.

Outcomes:

- Through the use of a domestic violence preventative strategy, work with communities will result in a better awareness of the cultural and societal norms that can lead to domestic violence. The buy-in from faith organizations and the development of community mentors would be key to the success of this strategy.
- Targeted therapeutic interventions for children and work with the family as a whole will lead to a reduction in the risk of future violence and will create a platform for developing healthier relationships.

The suggested expenditure would fund the recruitment of 2 part-time domestic violence workers representative of the community in Harrow for 1 year. One of the workers would also work with men where violent traits have been identified. At the end of the one-year trial if it is felt it would be beneficial to continue with the project, it is hoped that these staff can be brought within the funding arrangements for the Families First programme (the Harrow name for the Government's Troubled Families Initiative) which is expected, by then, to include domestic violence as a key criterion for inclusion in the programme. These workers would be supported by a part-time clinician to work specifically with children subject to Child Protection Plans who are exposed to domestic violence. It is thought that this input could be provided at no extra cost via the Council's contract with Morning Lane.

(8) A further idea, based on experience in Lancashire, is to increase access to IDVAs to 24 hours a day, 365 days a year. The experience in Lancashire suggests that this approach increased the conviction rate for DV perpetrators significantly through supporting witnesses/victims. We will explore this further with Lancashire to fully understand the costs and benefits of moving to such as approach.