



THE HAVEN WOLVERHAMPTON

The Haven Wolverhampton's written Response to The HM Government Consultation Paper – ‘*Together we can end Violence against women and girls*’

Introduction

The Haven Wolverhampton has been providing services for women and children escaping Domestic Violence since 1973. The Haven currently supports 46 women and their children in emergency accommodation, and 80 women and their children who are living in the community. (Over 50 are currently supported by Advocacy).

Women and children who are in refuge accommodation and those receiving Floating Support are also able to access other Haven support services such as counselling, and Advocacy.

Haven Statistics 2008-2009

- 1056 total referrals to refuge accommodation;
- 246 women and 245 children admitted to accommodation services;
- 280 women supported by the Floating Support Team; (541 children involved)
- 310 Women, supported by Advocacy Services
- 2 women with no recourse to public funds

310 women were helped by our Advocacy service, which offers advice to women on the legal and non-legal means which they may employ in order to increase their safety in their own homes. The Counselling Service provided 1,559 hours of specialized counselling for victims of Domestic Violence.

The Haven has a joint international project ('Life Without Fear') with the Women's Crisis Centre Ekaterina, Russia, has provided DV training to 425 legal professionals in the Sverdlovsk Area, Russia. Links also continue with organisations helping women and children in Uzbekistan.

We continue to support strategic developments in Housing, Move on Accommodation, Children, and the City of Wolverhampton Domestic Violence Strategy – the resourcing of this is a challenge to the organisation.

This is The Haven Wolverhampton's response to the consultation paper:

1. How should schools encourage young men to treat women and girls with respect, and not to resort to violent behaviour?

- *What are your views on the role of schools in helping children and young people to develop the values and skills that they need as they grow into adulthood, including mutual respect, rights and responsibilities, gender equality, and the ability to manage their feelings and emotions*
- *Should schools supplement this broader development by explicitly helping young people to understand issues such as domestic violence and sexual violence against women and girls?*
- *What teaching works on this already?*
- *How should this responsibility be shared between parents and schools?*
- *How well is sexual bullying being tackled in schools? Is the necessary support provided to schools to do this?*
- *What more could be done to help young women and young men to challenge negative perceptions or behaviours among their peers?*

In Wolverhampton the Haven has contributed to training teachers, nurses, midwives and police officers, on DV issues. The Haven is accredited to deliver Open College Network Training on Domestic Violence. The education of children has been very ad hoc in Wolverhampton and around the country. Funding reductions in Wolverhampton has resulted in the loss of this provision which was initially provided through the Wolverhampton DV Forum. Other boroughs are known to be providing resources for schools and able to deliver talks and discussions in the schools. Therefore there is no consistency across the boroughs, and what awareness children have is dependent on what area children live. Domestic Violence awareness should be compulsory and included in the PHSE/Citizenship curriculum.

The Haven supports that the importance of social relationships should be taught in schools but also believes that this should extend to awareness on Domestic Violence. Society needs to teach children how to have healthy relationships, and how to deal with anger and insecurity in a non-threatening and non-violent way. Teachers should have compulsory awareness on Domestic Violence issues and how to deal with a disclosure.

The Haven believes that specialist staff should be appointed to deal with these issues, and all teachers should have appropriate training by those working with DV survivors.

School Advisory groups should include specialist DV expert members.

There should be more emphasis on Male Role Models – who will speak up for Domestic Violence in Schools and Public Meetings, the Haven believes that Domestic Violence is not just a women’s issue.

Schools often approach The Haven to deliver talks on domestic violence to children. Talks last for up to 45 minutes and are delivered to different age groups. We deliver talks on a regular basis and we believe this subject should be incorporated into the curriculum. DV talks in schools should be delivered by women organisations that work with victims and understand the circle of abuse. This area of work requires resourcing and women’s organisations should be commissioned to do so.

Schools are public bodies and are subject to the Gender Equality Duty. They should develop Gender Equality Schemes and address inequalities within their environment.

There is an important role here for Safeguarding Boards and Children’s Trusts to shape and direct the delivery of training and awareness-raising in schools and to encourage the release or pooling of funds to help this to come about.

2. How do social attitudes towards girls and women affect the problem of violence against women?

- *How can we best challenge the perceptions that allow people to stay silent on violence against women and for it to be accepted in various sectors of society?*
- *How can we challenge cultural beliefs which promote forced marriage, crimes committed in the name of ‘honour’ and female genital mutilation?*
- *Is there a link between sexualised images, perceptions and actual violence?*
- *How could we help women and girls to achieve greater confidence in their lives?*
- *How can we encourage peer-to-peer support to challenge violence against women and girls?*
- *How could we introduce self-defence training for all women and girls?*

The Haven believes that the responsibility for changing young people’s attitudes, beliefs and behaviour, treating each other with respect should start with changing the attitude of the teachers and parents. They need to learn how to respect young people and teach by example.

Although the responsibility should be shared, the training and counselling should be done by external agencies getting young people involved in the training programme and training them to develop further training. Most young people listen more attentively to peers and to those personalities they admire not to teachers or parents. Famous people should be identified and approached to join

the campaign, including footballers, boxers, RnB musicians etc. This should include men opposing abuse against women and girls, from all races and religions and should challenge men and women's traditional roles in society.

One of the consequences of violence and abuse can be the erosion of women's sense of self-worth, self-respect and confidence. Counselling helps women to deal with the pernicious short and long-term effects of abuse and domestic violence.

VAW is a cause and consequence of gender inequality. Greater promotion and enforcement of the Gender Equality Duty in all areas is essential to endorse the rights of women. Local authorities should report on the progress of their gender schemes, collect and report gender statistics and implement gender budgeting. GED must become a powerful tool to achieve greater equality of women.

At the same time GED is often misinterpreted by public bodies, resulting in the promotion of gender neutral services at the expense of specialist services for women. Funding for women's organizations should be secured. Women's organizations are in a better position to understand women's needs and put them on the agenda. Women's organisations should be involved in the development of the gender impact assessment process. VAW needs assessment should take place in the framework of gender equality policies. LAs who fail to provide adequate support and protection for women may be in breach of their legal obligation under GED. EHRC should start using their power to take actions against those who breach GED.

3. Are we doing enough to protect and support children affected by adult violence? Who's looking out for them and what do they need?

- *What are your views on whether staff in all services that work with children and families have the knowledge and skills to identify, assess and refer children who are affected by adult violence?*
- *Are these staff working together effectively (both within and across organisations) to protect and support children?*
- *What types of support services are most effective and what should be done differently?*
- *Where are the main gaps in current provision?*

This consultation concerns violence against women and girls, it is therefore inevitable that a strong response will be forthcoming from women's refuges, where limited funding comes from the Supporting People budget. Refuges are the last resort for children whose mothers are escaping domestic violence. Figures from Women's Aid indicate that refuges in England provide a total of 23,000 spaces for children and accommodate 110,000 children a year. There is a distinct absence of money available for children. Consequently, the Government

has relinquished moral and financial responsibility for children living in refuges and escaping DV. This lack of funding can be found across the children's services in general within refuges across the length and breadth of the country. Effective support should begin with a commitment to provide proper funding for children who are rescued in refuge.

The current funding is mainly for adult victims (eg Supporting People) thus limiting support for their children. This results in the lack of specialist services for children, e.g. counseling. Refuges are forced to search for additional independent funding for children's services which is often short-term and comes in small pots. Valuable expertise and the ability to work with children victims of DV is often lost due to shortfalls in funding. Local authorities should commission a range of services to include children services in line with national and international standards (see also question 7).

4. How can we all better pick up on, and respond to, early signs of violence?

- *How could public service providers play a stronger role in identifying and responding to the early signs of violence against women and girls?*
- *How would you like to access information (and what would you need to know) on how to support a friend, colleague or partner if they told you that they had been a victim of violence?*
- *How can Government better help supporters of victims?*

There is an abundance of research that shows that social isolation as the result of DV is a vulnerability factor to further abuse. Services (including social gatherings) that support women after they have left abusive partners would combat social isolation. They would also act as a preventative measure against further abuse, (which is often suffered by women who go back to an abusive relationship or engage in a new one).

Preventative work and counselling at very important in particular during the early stages for women and children. There is a statement within the document that states: "*The government is committed to providing victims with the support they need to help their recovery.*" Only practical and emotional support mentioned and funding for this is continuously cut yearly by Local Authorities. There is not enough funding for psychological and counselling support. With the exception of the Haven, there aren't any other DV counselling services for women and children in Wolverhampton. Our funding for these services is from the Big Lottery fund not the Local Authority.

With regard to women with no recourse to public funds there is no support in Wolverhampton to support these women fleeing abuse from their families.

Although the Domestic Violence, Crime and Victims Act 2004 is cited as the first piece of legislation to address domestic violence in 30 years, the reality is that it does not grant protection to those minority women in this country who are subject to Domestic Violence, immigration control and no recourse to public funds. The 'domestic violence rule' introduced into immigration law in 2002 allows a person who can provide evidence that they are subject to domestic violence, leave to remain in the UK indefinitely. However the amount of evidence required is huge, and incredibly intrusive. Due to the fear of being disowned by their relatives and bringing shame on their families, compounded with the reality of facing destitution, many women are unable to leave their violent relationships. The Government does not provide adequate funds to service providers to enable all survivors of Domestic Violence to access refuge accommodation. Many women who have the courage to escape are often turned away from refuge providers as they do not have the funds to support them, this is due to many local authorities including Wolverhampton refusing to offer financial support to women with no recourse and the organisations who wish to support them.

The Haven has affiliated to a huge campaign that is bringing together key women's organisations to highlight the devastating impact of no recourse to public funds on the lives of minority women subject to DV in the context of the Marriage, Employment and Trafficking.

The Haven believes that organisations supporting women with no recourse to public funding, need more financial help to provide safe accommodation such as refuges to support them.

Women who have a history of suffering from sexual abuse are more vulnerable to further abuse, counselling can help those women to overcome their traumatic experiences and therefore prevent re-victimization.

Resources are poured into the criminal justice system even though most victims don't report to the police. At initial stages women are more likely to refer to health services and women's only services. However health services have proved to be difficult to engage with. VAW should be addressed in health strategies to ensure that women receive adequate support.

5. How best can we keep track of the most serious offenders, and reduce the risks those individuals pose?

- *What new powers would help the police to control serial perpetrators?*
- *There are already programmes for perpetrators of some forms of violence against women; how can their effectiveness be measured?*
- *What interventions would help perpetrators of all forms of violence against women to change their behaviour?*

●● *Not all perpetrators come to the attention of the criminal justice system – are there other services that should be developing work with perpetrators to change their behaviour?*

Additional powers for the police to control the activities of perpetrators should include excluding perpetrator from their home for a number of days or permanently. A review of the perpetrators programmes should take place with regard to the true effectiveness of them.

Much of the Domestic Violence legislation also punishes the women, Legislation and its need to protect children has resulted in mothers losing their children even when they had left or agreed to leave their violent partners. Victims are blame and punish again for been abused. This is not in the interest of the children and more should be done for children to stay with their mothers. The family court takes too long to resolve these issues, badly affecting the children.

The introduction of a flagging system on PNC (Police National Computer) that highlights a warning on an address. More effective evidence gathering in order to achieve realistic chance of prosecution or CPS to lessen charge threshold in order to ensure more cases are heard through the CJS (serial perpetrators portray themselves as untouchable to vulnerable survivors this can then be reinforced when cases require no further action.

Counselling can also help women to have the courage to report crimes against them and support women through a criminal proceedings prosecution.

The perpetrator programme adopted by West Midlands Probation Service refers to the IDAP programme which can be served as part of community order sentence. There is currently no measure as to its effectiveness as a deterrent and the current waiting list for the programme is 9 months. For effective monitoring to take place further funding needs to be made readily available to the programme (case workers/monitoring purposes.)

The majority of perpetrators do not come to the attention of the criminal justice system. The Haven believes that there must be other financial support for services that should be developing work with perpetrators to change their behaviour. Unfortunately change is not possible unless the perpetrator recognizes the need for change.

6. What kind of services should you expect to receive from the health service and/or social services if you were a victim of violence?

- *What would form a range of high-quality services for victims of violence against women in every local area? How should these services be commissioned?*
- *How could existing services improve their response to victims of violence against women?*
- *Are there specific services that should take a leading role? Women who have a history of sexual abuse are more vulnerable to further abuse, counselling can help those women to overcome their traumatic experiences and therefore prevent re victimisation.*

More recognition should be given to specialist services already established, Wolverhampton has a long history of DV services and was one of the pioneering cities to have a DV court. This recognition has been lost and the funds coming into the city for specialized DV work is reducing. Training and specialist work should be given to the specialist providers, instead of the cheapest tender.

Counselling services help women to overcome their traumatic experiences by dealing with issues like self-blame, guilt, shame and feeling sorry for abuser. Such counselling often enables the survivor to break from the abusive relationship for good. There should be more government funding for this kind of service.

Research is urgently needed into the long-term effects of domestic violence and the effectiveness of interventions. Much is made of the statistics for domestic violence with the figures of 1-4 being the most familiar. However, there is scope to effectively assess the true impact of domestic violence on the lives of women and children by referring to known conditions such as depression, attempted suicide, self harming and substance and alcohol abuse which can often be attributed to a response mechanisms or coping strategy for women living with domestic violence. The true morbidity rate for domestic violence is largely unknown.

There is no consistent effective support and protection for women with no recourse to public funding. Nor is there funding for counseling or psychotherapy services for women and children, or for therapeutic and educational activities for survivors and their children. The Haven also believes that perpetrators programmes should be independent of the court (this works effectively in Hull).

There is extremely good work going on in the community. However more funds are needed to enable DV services to focus on the difficulty in reaching domestic violence victims and survivors from middle class backgrounds, as well as from the diversity of cultures and disabilities.

Mental health services need to be trained to recognize that the majority of women suffering from depression, eating disorders and other psychological

problems have a history of abuse. When making a diagnosis they need to be aware of the effects of DV on women.

There is no or little funding for resettlement and long-term after-care support. Up-to-date research is urgently needed into the long term effects of domestic violence and the effectiveness of interventions.

There are few SARCs (Sexual Assault Referral Centres), none of which are in Wolverhampton.

The Haven is supported by the Supporting People contract, for our refuge provision and floating support services. Supporting People has brought much bureaucracy to the voluntary sector, ultimately forcing merger or severe down scaling of provision. The recommendation of the figure of 1 unit per 10,000 of population originated in 1986, 21 years ago when women did not come forward as they do now due to increased understanding of agencies, police and the public, is still being used by some authorities to reduce their provision where refuge provision is in excess of this benchmark whilst other areas are trying unsuccessfully to establish new provision. This service has always been based on needs at a point of crisis and should continue with this principle.

Given that the Haven can only accommodate just over a third of its referrals this proposal is of great concern and we are lobbying the team to review its plans. In the period 2006-2007 Wolverhampton receives 7.9 million in SP funds whereas Newcastle-Up-On-Tyne receives 14.1 million even though there is a similar level of population, poverty and deprivation and unemployment.. This demonstrates the inconsistent and unjust distribution of public resources for disadvantaged people in Wolverhampton. We have ensured our MPs and City Councillors are aware of our concerns. The Wolverhampton Homelessness strategy for 2007-2019 also plans to reduce its hostel accommodation by 50% which is a major concern and will also impact on the number of women and children we will have to turn away.

Recent consultations have highlighted concerns about the Supporting People tendering process. Wolverhampton was not given the opportunity to be graded any higher than C in the Quality Assessment Framework. Organisations outside of Wolverhampton were able to be graded to B or A this will give other competing for the same tender an unfair advantage.

Services for children are provided at The Haven but SP and many other mainstream funding does not allocate funds to children's services.

On average women are waiting longer to be re-housed and are now waiting between 9 to 12 months. Single women often have to wait longer, those with complex needs wait even longer.

Women are not accessing private rented accommodation and there is a reduction on those applying to Housing associations. In 2007 The Haven was involved in a pilot scheme called Move on Plan Protocol (MOPP) Project which attempted to address the move on problem in Wolverhampton. The findings of this pilot was available in 2008 and the report is available from Wolverhampton Local Authority. The MOPP was seen as good practice and became a full working group in 2009, it has now developed a 'Mini – MOPP coordinated by services users.

Sanctuary Scheme does exist in Wolverhampton and has been piloted for the last 12 months. The LA coordinate this with support from DV Forum and the Haven. The scheme cannot make a woman safe alone, it should be in conjunction with all other DV support services, Floating Support, IDVA's and should not be used in isolation. The choice to move to alternative safe accommodation should be paramount.

Research indicates that VAW costs £1.2 billion a year for physical injuries and further £176 millions for mental health support. However, the Department of Health has no reference to VAW in their strategic plans (Map of Gaps report). The PCT should be involved in commissioning services for women and children victims of violence. Cases of disclosures should be flagged and service users have to have access to appropriate support. We recommend employing specialist DV advocates to work in hospitals and surgeries to support women (for example, the WORTH project). Health professionals should receive specialist DV training. At least part of this training should be delivered by organizations working with victims.

7. How can central government, local government and other service providers best work together to promote better consistency and quality of provision in services for victims of violence against women across England?

- *What are the barriers to sustainable delivery of and funding for services for victims of violence against women at present?*
- *What are the barriers to providing a wide range of quality services for victims of violence against women?*
- *What are the barriers to partnership working to tackle violence against women?*
- *How best can providers of local services reflect in their local priorities the needs of women and girls who are victims of gender-based violence?*
- *How should local bodies and service providers work together to ensure that the longer-term impacts of violence against women are acknowledged (for example, impacts on mental and physical health or child welfare)?*

- *What can be done to place the provision and delivery of services for victims of violence against women on a more sustainable basis?*
- *What can be done to ensure that local bodies work together to ensure the provision of all forms of services for victims of violence against women in your local area?*
- *What can be done to ensure that the needs of victims of violence against women are accounted for in Local Strategic Partnerships in your local area?*
- *What can be done to drive delivery of services for victims of violence against women through the Local Performance Framework? How could this be monitored?*
- *What can be done to encourage commissioners of local services (for example, local health providers and local authorities) to work together to support women and girls who are victims of gender-based violence?*

There is a good approach to multi-agency partnerships in Wolverhampton, mainly due to the existence of the DV court and the MARAC's. Representatives from the Haven attend the Local Domestic Violence Forum, the South Staff's Forum (The Haven was instrumental in its establishment), the Local safe guarding Children Board, Supporting People Providers Forum and the MARAC's.

The Haven has an established training team who are involved in delivering local Domestic Violence awareness training to its own staff and other professionals. The training is accredited by the Open College Network. The Haven receives payment for this when training external agencies. The Haven has partnered with The Local Domestic Violence Forum to deliver some areas of training.

There is a mechanism for monitoring the implementation of the National Domestic Violence Delivery Plan in Wolverhampton and it is the role the Local DV forum and Local safety Partnership forum to coordinate.

Adherence to the Government's Voluntary Sector Compact is patchy in Wolverhampton.. During consultation with various agencies it does appear that 'compact' knowledge and implementation ranges from little knowledge through to being used as tool to ensure the local authority engages with the voluntary sector. The mere fact that some organisations are still unclear as to what the compact is demonstrates that the relationship between the government and voluntary and community sector has some way to go.

The Haven believes that Co-located Teams need to be positively promoted as multi-agency working. 'Multi agency Working', 'support services' and 'Information sharing' were the three consistent failures revealed in all DV homicides.

Safeguarding Children's Boards should have a major role to play in the implementation of strategic plans impacting on children and DV. IDVA should be working with all A&E departments (for a good illustration fo this refer to the 'Worth' research). We tried to encourage New Cross Hospital in Wolverhampton to work with us in 2008 but were unable to engage their support.

A research report was done in 2007 on Family Justice centres (appendix 1). The report provides a brief overview of the development of Family Justice Centres and their role in ensuring protection and safety for domestic violence victims by bringing professionals who provide services together under one roof. The report proposes to carry out research into the feasibility of this model for Wolverhampton.

The Map of Gaps report by EVAW showed that 1 in 4 local authority areas don't have specialised violence against women support services. Nearly 1 in 3 local authorities have no domestic violence services. Local authorities can choose not to prioritize VAW as a local need. In England Women's Organisations are seriously under represented on Local Strategic Partnerships (less than 2% of members) and the decisions are made by those who lack understating of the role of specialist services. Many valuable services are closing down due to lack of funding. Smaller women-only providers are struggling to compete against larger generic services. It is important to implement:

- A national funding strategy to fill the gaps and ensure that specialized services are available to women in all parts of Britain.
- Local authorities must ensure that there is dedicated funding for specialist women only services.
- A relevant National Indicator(s) (standards, risk and outcome based) should be adopted in every region. Best Value Performance Indicator 225 has been withdrawn but was not replaced with a satisfactory measure.
- The range of services should confirm to agreed standards. In November 2008 the Council of Europe published the minimum standards for services provision which included standards for the distribution of services by population and region.
- Funding should be for a minimum of 3 years to ensure sustainability and consistency.
- Transparent processes of awarding contracts or grants.
- Women's Organisations should be represented at all LSPs.
- Specilist services should be accessible for all women, included those with no recourse to public funds and those in employment (currently they often cannot afford to pay rent in a hostel).

8. How can we improve women's confidence that the criminal justice system is working to protect them?

- *What more can be done to increase confidence and deliver a victim-focused service?*
- *How best could we assess the support, safety and satisfaction of women victims within the criminal justice system?*
- *How could police community support officers build on their relationship with the community and reassure victims of violence?*

Women's reports on the police response to DV incidents are not generic and seem to depend on which officer attends the incident. Some officers give information on DV services others do not. It has been reported by women that police often do not arrest the perpetrator unless he threatens the police. Reportedly awareness of DV issues amongst the police can range from sensitively and sympathy to complete desensitization, this inevitably leads to every situation being treated differently. However police response to DV has generally improved over the past few years. In relation to the police helping increase the safety of survivors; we would encourage police to always refer the survivor to appropriate agencies. There needs to be a quicker response time to incidents. The Haven has had reports from women that when they have presented themselves at a police station in an attempt to escape and report the violence they are often faced with hours waiting to be seen. There appears to be a lack of urgency around what the women are reporting. In relation to police practice over the past 2 or 3 years there has been some improvement. It has been reported by women and our IDVA' that the police officers once involved always complete a risk assessment, and are very much involved in MARAC's. The Haven Wolverhampton launched the Crisis Intervention Service in Wolverhampton in conjunction with West Midlands Police, Wolverhampton PCT and Wolverhampton Domestic Violence Forum. The service involved distributing advice cards with The Haven's contact details on, by police officers to Domestic Violence victims when responding to a dispute. The aim of the service is to encourage women to seek help in the time period between reporting her case and the case going to court.

The vast improvements have been generated through the implementation of Wolverhampton's Specialist DV court. The Haven has given input to the MARACs and therefore has regular meetings with the police to discuss ongoing cases/referrals; however there is no strategic liaison.

The Haven does attend the MARACs in Wolverhampton but does not receive any funding directly for this work. It is our opinion that MARACs greatly increase the survivors' safety. In 2008 there were a reported 23 repeats which is 12% current DV repeat rate for Wolverhampton as a whole is 30% which demonstrates the effectiveness of the MARAC in the reduction of repeat offences.

Due to the nature of the MARACs there are many people involved and this can contribute to the women feeling very disempowered. The Haven employs 3 IDVAs and Wolverhampton DV forum employs another one. The IDVAs are hugely effective in supporting survivors and improving their safety. Funding these posts is a concern and at any meeting locally or nationally the subject of funding these posts is an area of concern. There needs to be serious consideration given to funding these posts which are generally funded through voluntary sector organisation.

It has been reported that initial police response has improved and maybe as a result of Wolverhampton having a DV court charging/prosecution process has also improved. There are problems around survivors being subpoenaed to court and having to face the perpetrator. Those being sentenced are still not receiving adequate time. The process of going to court is no less intimidating from any previous court experience.

Before 1st July 2007 when a Non Molestation Order - which carried a power of arrest - was breached, the offender would be held on remand until a court appearance was arranged and the relevant solicitor notified. Since July 1st 2007 the breach of a Non Molestation Order became a criminal offence. The Haven has since been made aware of cases whereby the offender has either been arrested and allowed out on bail without the woman or the solicitor being made aware or informed or the offender has not been arrested at all and remained at large. The Haven has spoken to the DAU but is still awaiting clarification of how the police have been advised to respond and local solicitors are also awaiting some form of direction.

The Haven has concerns about the increased use of mediation services with DV cases. The increase appears to be due to solicitors not understanding the complexities of DV cases. In cases where IDVAs have sat within the same room as the woman in mediation (at her request), it has been a very intimidating experience for the woman to be expected to sit in the same room as her perpetrator. The Haven cannot comment on family courts or CAFCASS, this is another area of concern as IDVAs are not allowed to support the woman in a closed court.

The continued increase in CAADA trained IDVA Services within the voluntary sector and availability of more sustainable funding in order to ensure victim-focused services are readily available to survivors.

More direct contact with victims by the CPS prosecutors pre and post case questionnaire to ascertain the satisfaction of the victim.

There needs to be greater publicity of the role of police community support officers in order to raise the public's knowledge of their availability. Police community support officers should conduct open surgeries at designated times

and bases. In addition, they should receive relevant training with regard to sign posting to appropriate services.

Multi-agency work helps criminal justice workers to support the holistic needs of victims and their children. Implementation of the co-located teams supports better information-sharing and better use of the expertise. The co-located teams should be set up in locations accessible for women and children (not in Police stations!) and have representatives from various agencies involved.

It is important to improve the flagging of VAW crimes in order to make the data more reliable.

9. What would make your journey at night safer?

- How do you choose which route you are going to take home?
- What makes your route home safe or unsafe?
- What would help you be and feel safer on your journey home at night?
- How can we help particularly vulnerable groups of women, such as those from black, Asian, minority ethnic and refugee communities, older people or those from rural areas, to feel confident in getting home safely?

How do you think local ●● partnerships could better work together to improve the safety of your journeys?

- What makes you feel unsafe in car parks?
- How useful would you find an interactive website that allowed you to report where and why you felt either safe or unsafe?
- If you would use this website, which features do you think would be useful?

- The establishment of more community panic buttons.
- Contact details for neighborhood policing teams more publicized.
- Contact details for the local authority and other bodies such as the CDRP. Contact details for third sector organisations such as Neighborhood Watch.
- Links to websites with more information about how to get involved in tackling crime in your local area.
- Public Women's general safety in Wolverhampton (Wardens on Taxi Ranks – this no longer happens).
- Transport should be made safer, cameras are not a deterrent and are of poor quality, there is a lack of intervention from staff (bus drivers).

“Haven Your Say” questionnaires distributed to women in Wolverhampton by WOW (Women of Wolverhampton network) revealed that 24% of women are concerned with public safety and particular safety on public transport. They believe that the following simple measures can improve the situation:

- a greater Police presence;
- more street lighting;
- buses should run later at night and be on time; more buses at night;
- 'women only taxi service' should be available following a successful scheme in Birmingham;
- More activities for young people to keep them off the street;

The Haven believes that there should be more publicity about the role of police community support officers in order to raise the public's knowledge of availability. Police community support officers to conduct open surgery designated time/designated base. Police community support officers should receive relevant training regarding sign posting to appropriate services. They should be more visible in the community.

10. Following completion of the consultation period, the Government will issue a strategy in order to ensure that coordinated activity is undertaken across government to reduce and prevent violence against women.

- *How should the strategy be delivered?*
- *Who should lead it locally?*
- *How should progress on the strategy be measured and assessed? Who should do this?*
- *Should the strategy include any specific measures on equality and diversity? What further equalities issues should the violence against women strategy take into account (for example on race, age, gender, ethnicity, sexuality, disability, socioeconomic background or geographical location)?*
- *Are there any other matters we should be considering?*

The Haven believes that the strategy should be cascaded down to a local level, and each Local authority should be responsible for developing the strategy at a grassroots level. The Haven would like to see the BVPI reinstated as a target as the LAA targets do not address DV appropriately. This will further be affected when the ringfence from Supporting People fund in 2010 is removed.

The Haven believes that there should be a nominated Champion for DV to ensure the strategy is realised. The CAF model works very well and this model could be used to develop this. Support for a collocated team would also lead the strategy.

There is some scepticism on the value of the strategy as several pieces of legislation have been introduced, the Home Affairs Committee conducted an enquiry in 2008 into the effectiveness of the 2004 DV act, it appears that the recommendations that came out of the report have not been acted upon. The Gender Equality schemes in Wolverhampton need to be enforced for women as that also has been slow at being progressed fully.

The Haven believes that the strategy needs Performance Indicators or checklist to measure the impact of the strategy and also hold LA accountable to enforcement.

Other areas we believe should be considered:

- Wolverhampton – long history of Domestic Violence awareness – needs to be brought up to date with these provisions – Domestic Violence, NRPF – needs to fund these areas
- Local Authority needs to be made more aware and their attendance at Domestic Violence Forum Meetings required.
- Local Consultation Meetings – these issues need to be raised with Local Authority (Local Authority lost direction)
- Not many Women’s organisations are left and it is they who speak up for Domestic Violence/funds
- Gender Equality scheme should be enforced
- The Women’s sector needs to be strengthened
- Too many people taking the lead will take away the specialism, all training to come from Specialist Providers.
- Stream-lining funding – core people, quality of service
- Recognising what the voluntary sector can offer and how it complements the statutory sector, with Domestic Violence organisations
- Consider the barriers to sustainable delivery.

LSP can lead on delivering the strategy but they should consist of properly elected individuals including those from the women’s sector. Gender equality indicators should be developed and implemented including VAW indicators, decision making, health, etc.

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APPENDIX 1

The Haven Wolverhampton **Research Proposal: Family Justice Centres**

“...the statistics pretty conclusively prove now that domestic violence-homicide is completely preventable.”
(Casey Gwinn, San Diego District Attorney, 2003)

Introduction

The report provides a brief overview to the development of Family Justice Centres and their role in ensuring protection and safety for domestic violence

victims by bringing professionals who provide services together under one roof. The report proposes to carry out research into feasibility of this model for Wolverhampton.

First International Family Justice Centre in Europe

The Croydon Family Justice Centre (FJC) opened in December 2005. It hosted 32 agencies and was designed to assist 14,000 children and 7,000 adults each year. Since the Centre was opened there has been no domestic violence-related murders or child deaths in Croydon – this compares to five adults and three children murdered in domestic violence-related incidents in 2004-5. Professionals at the Family Justice Centre include an on-call duty and assessment Social Work service, Advocates, Police, Solicitors, Housing Officers, Women's Aid, Victim Support, Debt and Benefits Advisers, and Probation staff. Staff are employed and managed by their own organisations, using existing resources.

A partnership between Croydon's Council, Police and Primary Care Trust, the centre is the first of its kind in Europe and was inspired by the US projects. The Croydon FJC was set up, with the help of the San Diego and New York FJCs. It utilises world-wide standards of best practice and maintains strong links with its US partners. It was envisaged that the future role would involve Croydon FJC acting as a pilot site and technical assistance provider (consultant) to other areas. The Centre in Croydon has to date received enquiries from several London Boroughs, Liverpool, Manchester, Birmingham, Kent, Surrey, Northern Ireland, Stockholm, Berlin and Paris.

Historical Development of FJC in US

The first FJC (The San Diego FJC) opened in 2002. Tangible results from studies of the San Diego FJC showed that more support is provided to DV victims and their children, case management is improved (through a more fluid exchange of information and resources), the quality of Police investigations is improved, convictions of DV perpetrators increased, DV recidivism and child abuse rates reduced substantially. Over the three years 2003-2006 (since the inception of the San Diego FJC, there were no repeat incidents and no deaths related to DV. This pioneering FJC has provided a template for the creation of 15 other FJCs across the USA, with Federal funds, as part of the President's FJC Initiative.

Joint agency collaboration historically take form of coalitions, umbrella organisations set up for co-operation purposes, DV Forums, DV response team etc. This co-ordination varied between being initiated by statutory agencies and those from the non-statutory sector. In some areas, a non-profit agencies which had been co-ordinating services for DV victims became the organisation implementing the FJC grant; in other areas, existing groupings of agencies, the District Attorney's office, the Criminal Justice agencies, or individuals drove the organisation of the FJC.

Problems with current services and future directions

The victims in our community often seek help from a fragmented, disjointed system of separate agencies that offer related but frequently uncoordinated services. Victims often must travel to several different places to get help, telling their stories many times to various people. Survivors get frustrated, exacerbating their trauma, and may never actually access the range of critical services they need.

Croydon example shows how these problems can be overcome. 'There is no comparison between the level of protection you can offer with a place like this and a system based on inter-agency meetings,' says Chief Supt Mark Gore, Croydon's Borough Commander. 'You don't have to wait a fortnight to call a case conference: you can call one immediately. If someone walks through the door this morning, the civil solicitors will have a non-molestation order in place by tonight, and if it's breached, we'll arrest.'

Finance

The total cost of domestic violence to UK services (Criminal Justice System, health, social services, housing, civil legal) amounts to £3.1 billion, while the loss to the economy is £2.7 billion. This amounts to over £5.7 billion a year. An additional element is the human and emotional cost. Domestic violence leads to pain and suffering that is not counted in the cost of services. This amounts to over £17 billion a year (S. Walby, 2004). In the UK, there are an average of 150 murders a year due to intimate partner violence, costing a total of £165 million (WORTH, 2005).

Croydon's funding is at £246,000 (Guardian, May 2007). Funding for FJCs in America ranges from \$906,670 (£456,871) to \$1,500,000 (£758,688) per year. It comes from a mixture of sources – national and local government, grants, donations, partner agencies, the community and business.

In contrast to the already existing costs of domestic violence, FJC costs are minimal. When comparing to the financial impact on the business community and the health care system, a Centre, becomes an overwhelmingly cost-efficient model.

Research proposal

"The development of 'one-stop-shops' should be encouraged", underlines the Home Office Research Study 290: Tackling Domestic Violence: Effective Interventions and Approaches (2005). Baroness Scotland also supports the idea of 'one-stop-shop': 'We are trying to encourage other areas to co-locate'.

Wolverhampton historically was at the forefront of tackling DV. Wolverhampton was one of the six cities in England and Wales to first operate a SDVC. Coupled with the success of this initiative (now being rolled out nationwide) is the wide-ranging work of The Haven Wolverhampton (THW), one of the largest DV

organisations in the UK. THW provides a broad range of DV services – encompassing Hostel Accommodation, Floating Support, Counselling, Independent DV Advocates, and Children’s Services. Local organisations, statutory and non-statutory, have had experience of multi-agency working methods when tackling DV. The Wolverhampton Domestic Violence Forum aims to establish a DV Unit, along the lines of the Cardiff WSU, in order to help victims of DV. The natural next step in this process would be to combine the activities of this unit with the provision of services not directly linked to the CJS or police, allowing victims of DV easy, speedy access to the services that they feel to be most appropriate to them.

The Haven would like to research the pioneering initiative of FJC in order to assess the feasibility of the development of a FJC in Wolverhampton. The Haven planned a visit to the Croydon FJC which will provide an insight in the day-to-day work of the Centre and will offer an opportunity to meet with the many professionals involved with the planning and implementation of the domestic violence responses and strategies.

Under the European Convention on Human Rights (ECHR), victims of DV should benefit from the positive obligations placed on public bodies, including the requirements to offer effective deterrence against violence and to maintain a proper and effective system for the investigation of crime. It must never be forgotten that a more effective model of protecting DV victims means that far, far less victims need lose their lives because of this horrific crime.

**Report originated by: Elvira Wilson
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