



**Brighton & Hove
City Council**

**Report of the Scrutiny Panel into Support Services for
Victims of Sexual Violence**

June 2010

Volume One: The Recommendations

Panel Members:

Councillor David Watkins (Chairman)
Councillor Juliet McCaffery (Deputy Chairman)
Councillor Averil Older
Councillor Alex Phillips

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1. CHAIRMAN'S INTRODUCTION

Sexual violence is mostly experienced by women and girls and can be considered one of the main causes and consequences of gender inequality. Sexual violence represents a significant violation of women's and girls' fundamental human rights. It is estimated that, in the UK, as many as one in four women have experienced some form of sexual violence. Whilst sexual violence is disproportionately experienced by women and girls, the smaller number but significant proportion of men and boys who have also experienced sexual violence should not be ignored.

The impact of sexual violence on an individual is wide-ranging and long-lasting. The impact of sexual violence on families, communities, and society in general is extremely damaging. Those who experience a sexual violation require a large amount of long-term support and care to aid them in their journeys to recovery.

There is concern about the level of support available in Brighton and Hove for those who have experienced rape, sexual assault, sexual abuse or other forms of sexual violence. As a result of these concerns, the issue of support for victims of sexual violence was referred to Scrutiny. Over the last six months the panel has spoken with representatives from some of the city's statutory services as well as with organisations which offer independent support services in the city. The purpose of this report is to highlight the panel's conclusions and recommendations as a result of these discussions. The panel's recommendations are based on the evidence heard from local experts working in this field; however, a significant number of similar recommendations have also been made by recent national reviews and research on this issue.

In Brighton and Hove, there are a number of organisations offering support services to individuals who have experienced sexual violence and abuse. The panel found that these support services do an outstanding job of supporting and advising those affected by sexual violence as they embark on their journeys to recovery. The panel was frequently impressed by the dedication, commitment, and resilience of the organisations that directly support and empower survivors. However, the panel were also extremely concerned by the many difficulties faced by these organisations and the challenges which exist to independent support services in being able to continue to deliver their services and support some of the most vulnerable women, men, and children in the city.

The evidence heard by the panel clearly highlighted the urgent need for co-ordinated joint strategic commissioning arrangements to be put in place to ensure the future stability and funding of these support services in the city for those affected by sexual violence. What was also clear from the evidence was the need for further development of, and assistance to, partnership bodies to undertake the strategic and operational development of services for those who have experienced sexual violence. The evidence heard by the panel demonstrated that statutory services in the city need to take a more integrated

and co-ordinated approach to its interactions with the independent support services and take a more holistic approach to understanding the ways that sexual violence impacts on individuals and their families and the complex needs that victims may have. The city particularly needs to develop a more robust understanding of the relationships which exist between sexual and domestic violence as well as the impact of other factors such as the night-time economy, and alcohol and substance use.

The panel believes that the council and its partners need to place supporting those who have experienced sexual violence at the very heart of the city's strategic and budget plans for the future. Work on early intervention and prevention, including rolling out a programme of education also needs to be prioritised. Additionally, the expertise of those delivering the independent support services in the city need to be fully utilised in order to ensure that the needs of survivors are met. It is only through taking a wide-ranging and far-reaching approach to tackling sexual violence and supporting those who have experienced it, that the city will be able to meet the needs of some of its most vulnerable residents.

My thanks on behalf of the panel go to all the witnesses who gave their time to attend meetings and contribute evidence and their expertise to this review. I am also grateful to Councillors Juliet McCaffery, Averil Older and Alex Phillips for their work as panel members.

A handwritten signature in black ink that reads "David Watkins". The signature is written in a cursive style with a long horizontal line underneath the name.

Councillor David Watkins

2. EXECUTIVE SUMMARY

- 2.1 This section provides a brief summary of the panel's report and lists the panel's recommendations.
- 2.2 Firstly, a brief note on terminology. Sexual violence as a term covers a wide range of experiences which can take place in a variety of contexts and circumstances. This report uses the term sexual violence to cover rape, sexual assault, and sexual abuse, whether in a domestic or non-domestic setting. Sexual violence as a term also covers sexual harassment, sexual exploitation, trafficking, sex work, and prostitution. This definition of sexual violence is also used by central government in its strategies and action plans.

Background

- 2.3 There are a number of high risk factors which increase the likelihood of an individual experiencing some form of sexual violence. Those at particular risk in Brighton and Hove include; young people aged 16 – 24, those who are single or co-habiting, those who live in private rented accommodation, LGBT individuals, sex workers, refugees and migrants. Drug and alcohol use, as well as level of participation in the night-time economy are also risk factors.¹
- 2.4 There are high levels of under-reporting of sexual offences, both nationally and locally, and many incidents do not come to the attention of services. A Home Office Ready Reckoner Tool estimates that there have been 4,235 women and girls aged 16 – 59 who have been the victim of a sexual assault in Brighton and Hove, in the last year.² In 2008/09 in Brighton and Hove, Sussex Police recorded 328 sexual offences taking place in the city.³
- 2.5 Women, men and children are all affected by sexual violence. However, sexual violence disproportionately affects women and girls, so much so that it is now considered a cause and consequence of gender inequality and a significant violation of women's and girls' fundamental human rights.⁴
- 2.6 Sexual violence is often experienced within the context of other forms of violence such as physical and emotional violence. For example, those that experience partner rape are likely to experience this alongside other forms of abuse and violence. The impact of sexual violence within the context of domestic violence needs to be better understood.⁵
- 2.7 Children and young people are also the victims of sexual violence and abuse. It has been estimated that one-third of those who sexually abuse children are just children themselves and about one-third of

¹ Information provided at panel's private meeting, 05/03/2010

² Information provided at panel's private meeting, 05/03/2010

³ Police data provided at panel's private meeting, 05/03/2010

⁴ Butler, minutes of the panel's public meeting, 15/04/2010

⁵ Information provided at private meeting, 12/04/2010

children who display sexually harmful behaviour were probably sexually abused themselves.⁶

- 2.8 There are a number of groups of adults who may be particularly vulnerable to experiencing sexual violence. These include LGBT individuals, vulnerable adults, those with physical or learning disabilities, BME groups, refugees and migrants, and sex workers. All of these groups will also face additional and particular barriers to reporting the sexual violence they have experienced.⁷
- 2.9 Sexual violence and abuse has a devastating impact on an individual, an individual's family, friends, and on wider society. Indeed sexual offences are recognised as being one of the most traumatic crimes an individual can experience with the physical, sexual, and mental health impacts being severe and long lasting.⁸
- 2.10 As well as the emotional cost, the economic cost to society of sexual offences is significant. Much of the cost is estimated to be on lost economic output and the costs to health services for treating long-term health issues.⁹ Based on Home Office data, and adjusting for under-reporting, the economic and social cost of sexual offences in Brighton and Hove was estimated to approach £60 million in the year 2007/08, far exceeding the costs of all other types of crime in the city.¹⁰
- 2.11 Sexual violence occurs in a wide range of different contexts and circumstances with the most vulnerable in society being disproportionately affected. Those that are vulnerable and powerless are often the victims of sexual offences and those that are victimised in childhood will often become a victim again as an adult.¹¹
- 2.12 Tackling sexual violence is recognised as a priority within Brighton and Hove's new Sustainable Community Strategy and Local Area Agreement, 2008-11. The Partnership Community Safety Team also sees it as a priority in the Brighton and Hove Community Safety, Crime Reduction and Drugs Strategy 2008-11 which contains a Sexual Violence and Abuse Action Plan and a Domestic Violence Action Plan.¹² The Community Safety Partnership has recommended that a local 'Violence Against Women and Girls Strategy' be developed and put in place by March 2011.¹³

⁶ BBC Report, 17 March 2010, *Hidden problem of children sexually abusing children*, <http://news.bbc.co.uk/1/hi/programmes/newsnight/8569219.stm>

⁷ See scrutiny panel's scoping paper and section 5.2 of this report

⁸ Home Office, 2007, *Cross Government Action Plan on Sexual Violence and Abuse*

⁹ Home Office, 2007, *Cross Government Action Plan on Sexual Violence and Abuse*

¹⁰ Information provided at panel's private meeting, 05/03/2010

¹¹ Baroness Stern, March 2010, *The Stern Review: How Rape Complaints are Handled by Public Authorities in England and Wales*

¹² See www.brighton-hove.gov.uk for copies of these strategies

¹³ Safe in the City Partnership, agenda item 4.5: Brighton and Hove's strategy to end violence against women and girls, 26/03/2010

Key issues and findings

- 2.13 The panel identified a number of key gaps which exist in current local service provision for women, men and children who have been affected by sexual violence.
- 2.14 The police data covering the period 2008 and 2009 indicated that 45% of recorded sexual offences were against young women aged 15 – 24¹⁴. As young women are one of the groups most at risk of experiencing sexual violence the panel are very concerned that currently an independent dedicated programme of support is not available to young women who, if they are not supported to deal with their experiences are likely to develop serious mental health issues later in life.
- 2.15 Group counselling is not currently a service which is available to men accessing services at Mankind. This is a concern as the most benefit for the client is achieved from being able to offer clients both one-to-one counselling as well as group meetings.¹⁵
- 2.16 In 2009/10 and with the support of the Senior Officer Strategy Group of the Community Safety Partnership, RISE received funding from the Ministry of Justice to pilot a Health Independent Domestic Violence Advocacy (HIDVA) worker to operate from the Accident and Emergency department at Sussex County Hospital. This co-location of an independent support service with medical services meant that women who had been abused and then admitted into hospital for treatment could have immediate referral and access to a women's independent advocacy worker. RISE had hoped that this pilot project would be mainstreamed.¹⁶ The PCT have just confirmed that further funding is available.
- 2.17 The panel are concerned that there is not the required amount of specialist therapeutic support services available in the city for children affected by sexual violence and as a result the needs of these children are not being met. The Panel consider that this may create further problems as these children could grow up to become vulnerable adults with mental health needs.¹⁷
- 2.18 There may also be gaps in local service provision for children who display sexually harmful behaviours. Children who engage in such behaviour need very particular support services and, if their behaviours are not addressed and managed, will be at risk of becoming offenders.¹⁸ Police data on recorded sexual offences in 2008 and 2009 indicate that the largest age group of offenders committing sexual offences against under 16s in Brighton and Hove were those aged 10-19, with an average age of 15.¹⁹

¹⁴ Police data provided at panel's private meeting, 05/03/2010

¹⁵ Sullivan, minutes of the panel's public meeting, 29/03/2010

¹⁶ Gray, minutes of the panel's public meeting, 15/04/2010

¹⁷ See section 6.2.5 of this report for more information

¹⁸ Information provided at the panel's private meeting, 05/03/2010

¹⁹ Police data provided at panel's private meeting, 05/03/2010

- 2.19 From the evidence gathered at the panel's public meetings it is evident that there are a number of areas where current services could be strengthened in order to offer better support to those affected by sexual violence.
- 2.20 There is a huge amount of demand within the city for Independent Sexual Violence Advisors and other support services for those who have experienced sexual violence which, due to a lack of capacity within the independent support services, is currently not being met. The Survivors Network, Mankind, and the Brighton Women's Centre all reported having long waiting lists for access to their services.²⁰ As a result, there is likely to be a significant number of vulnerable individuals which, as they are unable to access support, are likely to be experiencing emotional turmoil, be feeling extremely isolated, and have a range of mental health needs.
- 2.21 The Partnership Community Safety Team and the other statutory agencies which manage the SARC are working hard to ensure that a seamless service is available to clients who access the SARC.²¹ Whilst the panel recognises that the SARC is still a developing service and is doing a lot of very good work already, the panel feels that the SARC's referral pathways need to be strengthened and the capacity of the SARC to take 24 hour self-referrals needs to be developed as a matter of urgency. An Operations Group is now established and is working across all Sussex services.
- 2.22 There is no independent 24 hour specialist support service, either nationally or locally, for those who experience rape or sexual assault. This means that if an individual does not wish to report a rape or sexual assault to the police, and many prefer not to, then there is nowhere and no-one that victims can turn to at any time of the day or night to receive the specialised independent emotional support, and advice and information that they need.
- 2.23 There are current weaknesses in the way that children's services work with families where sexual or domestic violence has been experienced. Some of the women involved in the Women's National Commission's consultations perceived social services were not currently meeting the needs of victims.²² Whilst the panel recognises that children's services have a very particular remit to protect children, the panel feels that more needs to be done by children's services to develop a holistic approach to working with children and women from families where domestic or sexual violence has been experienced.
- 2.24 Concerns were raised about how professionals and frontline workers recognise and respond to cases of sexual violence. In particular GPs, health visitors, school nurses, midwives, and social workers were

²⁰ See section 6.3.3 to section 6.3.6 for more information

²¹ Information provided at the panel's private meeting, 05/03/2010

²² Butler, minutes of the panel's public meeting, 15/04/210

identified as requiring training and support to help them to recognise and respond to cases of sexual violence.²³ A number of weaknesses were also identified in the way that sexual violence is monitored by services in the city.²⁴

- 2.25 There is a need for preventative work to be undertaken in the city's schools, with young people, as well as with local communities to raise awareness about what healthy relationships are, and what they should or should not involve. Such work will hopefully help to promote positive perspectives of masculinity and femininity and gender relations and reduce the level of violence in local communities.²⁵
- 2.26 A number of potential weaknesses in the current partnership support arrangements were identified by the panel.
- 2.27 While Sussex wide joint commissioning arrangements are firmly in place within which the Community Safety Partnership fully participates (as well as within a Rape Steering Group), Brighton & Hove has yet to fully establish partnership structures which bring together all organisations which provide support services to victims of sexual violence. Much local joint work proceeds within the existing multi-agency working arrangements for domestic violence and Women's Strategic Network, as well as within the Sussex wide arrangements. However, it is considered that there is not yet adequate mechanisms through which support services working with those affected by sexual violence can bring issues to the table and interact with statutory agencies and other independent support services involved in providing and delivering services.²⁶
- 2.28 Included in Brighton and Hove's Local Area Agreement, 2008-11, as a local indicator is National Indicator 26: the provision of specialised support to victims of sexual offences. However, as this indicator has still yet to be defined by the government, work to collect information and measure progress on this indicator cannot be undertaken. The Community Safety Partnership has therefore a proxy indicator which is the number of police recorded sexual offences, the number of detections, charges and convictions. The panel wishes to recommend however, that the city should agree a method and process for monitoring and measuring the National Indicator.
- 2.29 Within the city there are a number of organisations that represent groups of vulnerable adults. Some of whom may be more likely to experience sexual violence and face additional barriers in reporting incidents. These organisations and the specialised support services in the city need to form links with each other to ensure that those who are affected by sexual or domestic violence are properly supported by both

²³ Butler, minutes of the panel's public meeting, 15/04/2010

²⁴ See section 6.3.11 of this report for more information

²⁵ See section 6.3.12 of this report for more information

²⁶ See section 6.4.2 of this report for more information

specialised support services and the organisations which represents them.²⁷

- 2.30 The Women's Services Strategic Network (WSSN) needs to be invested in and is currently struggling as it does not have sustainable funding or resources. Mechanisms need to be found to ensure that members of the WSSN are able to participate in the partnership.²⁸
- 2.31 From the evidence provided at the panel's public meetings a number of issues have emerged with the way that the local independent support services are funded.
- 2.32 It is very difficult for the independent support services in the city to effectively plan medium and long-term service provision for vulnerable women, men and children, when there is no stability in the funding that they receive²⁹.
- 2.33 Most of the independent support services are struggling to find funding to deliver their support services. One of the main reasons is that many funders believe that the services being provided are services which it is the responsibility for statutory agencies to fund³⁰. The panel feels that the statutory agencies in the city need to resource far more of these services to offer stability to the organisations and to ensure that the needs of some of the most vulnerable women, men and children in the city are met.³¹
- 2.34 Health agencies in the city regularly make referrals to independent local support services yet they are currently not funding many of the services. This is despite the fact that many of those who seek support to deal with their experiences of sexual violence have acute mental health needs.³²
- 2.35 As a general principle the panel strongly support the requirement that those offering support services for women are women. Evidence received highlighted that this is vital to ensure victims feel able to access support services.

Conclusions and recommendations

- 2.36 Based on the evidence heard by the panel and the issues highlighted in this report it is evident that a more co-ordinated approach to funding local independent support services is required and that the impact of sexual violence on women, men and children needs to be considered at a more strategic level within the city.

²⁷ See section 6.4.4 of this report for more information

²⁸ Dando, minutes of the panel's public meeting, 29/03/2010

²⁹ See section 6.5.2 of this report for more information

³⁰ Gray, minutes of the panel's public meeting, 15/04/2010

³¹ See section 6.5.3 of this report for more information

³² See section 6.5.4 of this report for more information

- 2.37 The Stern Review, like most of the recent national research undertaken in this area, concluded that sexual violence is not just a matter for the criminal justice system and that the health and social implications of sexual violence is so substantial that other public sector agencies need to be involved in supporting victims.³³
- 2.38 The panel agree with this assessment and believes that because violence itself is not experienced in silos but in a range of contexts, a much wider and integrated approach is needed in the city to tackling sexual violence and to supporting those who are affected by sexual violence.
- 2.39 **Commissioning Recommendation A: The panel recommends that strategic commissioning arrangements be put in place for sexual violence support services and that alongside these commissioning arrangements the commissioning of domestic violence support services should also be considered and undertaken.**
- 2.40 **Commissioning Recommendation B: The panel recommends that the strategic commissioning arrangements put in place are undertaken jointly by Brighton and Hove City Council, the CYPT, the police, and the health agencies in the city, and that where necessary other agencies are also included in these strategic commissioning arrangements.**
- 2.41 **Commissioning Recommendation C: The panel recommends that all statutory agencies in the city contribute funding to the strategic commissioning process for support services for victims of sexual violence as all statutory agencies benefit from victims being properly supported.**
- 2.42 **Commissioning Recommendation D: The panel recommends that a single lead commissioner be responsible for overseeing the integrated strategic commissioning of support services for victims of sexual and domestic violence.**
- 2.43 The panel has made a number of additional recommendations throughout its main report which, in the event of a strategic commissioning exercise, are recommended to commissioners as a guide for the commissioning process. The additional recommendations made by the panel are:

Recommendation 1: The panel recommends that a dedicated programme of support services for young women aged 16 to 25 is developed and funded as a matter of high priority.

³³ Baroness Stern, March 2010, *The Stern Review: How Rape Complaints are Handled by Public Authorities in England and Wales*

Recommendation 2: The panel recommends that consideration is given to funding group counselling services for men who have had unwanted sexual experiences.

Recommendation 3: The panel recommends that consideration is given to funding a HIDVA worker in the Accident and Emergency department at the Sussex County Hospital, and that this is funded from within mainstream budgets.

Recommendation 4: The panel recommends that the specialised therapeutic support services for children and young people who have been affected by sexual violence be reviewed as a matter of high priority in order to ensure that the needs of children and young people affected by sexual violence are being met.

Recommendation 5: The panel recommends that the specialised support services for children who display sexually harmful behaviour be reviewed as a matter of high priority to ensure that the needs of these children and young people are being met.

Recommendation 6: The panel recommends that the capacity of the local independent support services be greatly strengthened so that the needs of all of those in the city that have experienced sexual violence can be addressed.

Recommendation 7: The panel recommends that the operations of the SARC and its referral pathways are strengthened as a matter of high priority.

Recommendation 8: The panel recommends the commissioning of a feasibility study considering the introduction and funding of an independent 24 hour signposting and support service.

Recommendation 9: The panel recommends that children's services reviews and considers how it responds to and supports children and women from families where domestic and sexual violence has taken place in order to ensure that a holistic approach to such cases is taken.

Recommendation 10: The panel recommends that all frontline staff and professionals within the city are trained to enable them to respond appropriately to cases of sexual violence.

Recommendation 11: The panel recommends that all women who come into contact with frontline staff and professionals are informed about the independent women-only specialist support services available in the city.

Recommendation 12: The panel recommends that the monitoring and recording of cases of sexual violence be standardised across the city to ensure clear and consistent recording and monitoring.

Recommendation 13: The panel recommends that a much greater emphasis be placed on positive perspectives of masculinity to be promoted to young people.

Recommendation 14: The panel recommends that a programme of prevention and early intervention work be developed to meet the needs of a range of individuals in a range of different contexts. As part of this programme, education and awareness raising programmes about what healthy relationships are and consist of should also be undertaken.

Recommendation 15: The panel recommends that partnership structures which involve all statutory agencies and independent support services are further developed to ensure the strategic development of services for those affected by sexual violence.

Recommendation 16: The panel recommends that steps are taken locally to agree a method and process for monitoring and measuring NI 26. In order to facilitate this process the panel recommends that a copy of this scrutiny report be taken to a future Community Safety Partnership and Local Strategic Partnership Meeting.

Recommendation 17: The panel recommends that support is given to both the independent support services and the organisations representing groups of vulnerable adults to enable them to work together to develop services which meet their clients' needs.

Recommendation 18: The panel recommends that mechanisms are found to support the continued development of networks and partnerships between third sector service providers.

Recommendation 19: The panel recommends that all statutory agencies, when funding independent local support services in the city should award funding for a three to five year period.

Recommendation 20: The panel recommends that all statutory agencies in the city consider how they can support and offer mainstream funding to the independent support services in the city for those affected by sexual violence and domestic violence.

Recommendation 21: The panel strongly recommends that the city recognises sexual violence and abuse as being a major public health issue. In light of this commitment, health agencies in the city should review what independent support services they are currently funding to support those affected by sexual violence. In order to facilitate this a copy of this scrutiny report should be taken to a future meeting of the Local Strategic Partnership and to the Healthy City Partnership.

3. INTRODUCTION

- 3.1 On the 8 October 2009, Council considered a Notice of Motion calling for a review of the current support services available to those who have experienced rape or sexual assault, and how these support services are funded. Council agreed to ask the Environment and Community Safety Overview and Scrutiny Committee (ECSOSC) to consider carrying out a review into the issues raised in the Notice of Motion including; the outcomes for men and women, the extent of support available to residents and the possible benefits of a 24-hour hotline.
- 3.2 At its meeting on the 9 November 2009, the ECSOSC agreed to set up a Scrutiny Panel to investigate what services there are in the city which offer support to those affected by rape and sexual assault.
- 3.3 There are a number of national action plans and strategies which have been adopted by Government to tackle sexual violence that provide a context for the scrutiny review into local support services. In April 2007, the government published its 'Cross Government Action Plan on Sexual Violence and Abuse' which detailed the actions they would be taking to reduce sex crimes, support victims, and improve the criminal justice system's response to sexual violence. The plan was intended to offer a more strategic and holistic approach to addressing the problem of sexual violence and abuse.³⁴
- 3.4 In November 2009, Government published its 'End Violence Against Women and Girls: A Strategy' which set out a cross-departmental co-ordinated approach to ending all forms of physical, emotional and sexual violence against women and girls. The strategy includes a range of actions for the police, local authorities, the NHS, education, housing, equalities, and transport departments, as well as the criminal justice system to take in three main areas: prevention, provision, and protection. Local areas are required to respond to the actions in this strategy and develop their own responses to ending all forms of violence against women and girls by March 2011.³⁵
- 3.5 Additionally, in 2009/10 the Women's National Commission, the official independent advisory body to the Government on women's issues, undertook extensive consultation with 579 women and girls from across England who had been affected by sexual violence. The consultation identified the gaps in current service provision and the support needs of women and girls who experience violence.³⁶ The work undertaken by the Women's National Commission provides invaluable evidence of what is required in future service planning and provision.

³⁴ Home Office, 2007, *Cross Government Action Plan on Sexual Violence and Abuse*

³⁵ Home Office, 2009, *End Violence Against Women and Girls: A Strategy*

³⁶ Butler, minutes of the panel's public meeting, 15/04/2010

4. METHODOLOGY

- 4.1 Members of the scrutiny panel included: Councillors David Watkins (Chairman), Juliet McCaffery (Deputy Chairman), Averil Older and Alex Phillips. The panel met for the first time on the 18 January 2010 to scope the review.
- 4.2 The panel agreed the following terms of reference for the review:
- To gain an understanding of the nature and prevalence of sexual violence, particularly in the Brighton and Hove context
 - To identify what support services for victims of sexual violence are already available to Brighton and Hove residents
 - To identify where there are gaps in the provision of support services
 - To identify what referral routes and pathways between different statutory agencies and support services currently exist, and how these can be developed further to increase support to victims of sexual violence
 - To investigate ways to encourage a co-ordinated and holistic approach to the provision of support services for victims of sexual violence
 - To investigate ways to encourage a more strategic and integrated approach to planning and commissioning support services
 - To identify ways to ensure that support services can be sustainably resourced
 - To identify ways to consult with service users about the support services they are accessing
- 4.3 At its scoping meeting on 18 January 2010, the panel agreed to hold an additional private meeting to further scope the scrutiny review.
- 4.4 The panel invited representatives from statutory agencies to attend its additional private meeting on 05 March 2010 to aid the panel in clarifying some issues around this topic. Due to the sensitivity of some of the discussions which took place at this meeting the minutes from the meeting are not publicly available.
- 4.5 The panel agreed to hold three public meetings and invite a number of representatives from local organisations providing independent support services to attend to give evidence to the panel.
- 4.6 The panel also agreed that if any experts attending the panel's public meetings or any service users who contacted the panel to give evidence wished to give their evidence in private then due to the sensitive nature of this topic they would be supported to do so.
- 4.7 Private evidence-gathering sessions were also undertaken with two service areas considered important to this review but which were unable to be accommodated in the panel's public meetings. Due to the sensitivity of some of the discussions which took place at these meetings the minutes from these meetings are not publicly available.

Evidence-gathering process

- 4.8 The panel held a private meeting on 05 March and its public meetings on 15 March, 29 March and 15 April 2010. Private evidence-gathering sessions were also undertaken on 12 April and 20 April 2010. In total, the panel heard evidence from 24 witnesses drawn from the following departments, organisations, and groups:
- Partnership Community Safety Team, Brighton and Hove City Council
 - Sussex Police
 - PCT (Sexual Health)
 - Child Protection, Brighton and Hove City Council
 - City Councillors
 - Survivors' Network
 - Adult Social Care, Brighton and Hove City Council
 - Brighton Women's Centre
 - Stopover Project
 - Mankind
 - Brighton Oasis Project
 - Lesbian, Gay, Bisexual and Transgendered (LGBT) Domestic Violence and Abuse (DV&A) Working Group
 - Sussex Central YMCA
 - Women's National Commission
 - Domestic Violence Forum
 - RISE (Refuge, Information, Support and Education)
 - Threshold
 - Housing, Brighton and Hove City Council
- 4.9 Additionally, all elected members were emailed and invited to submit their opinions and comments to the panel for their consideration.
- 4.10 A press release on the scrutiny panel was issued after the panel's private meeting on 05 March 2010 inviting organisations and individuals who wished to give evidence to contact the panel.
- 4.11 The panel wish to thank all those who attended its public and private meetings to give evidence to the panel. Whilst the panel has tried to take all of the views expressed and information provided during the evidence-gathering process into account when making their recommendations, the recommendations do, however, remain those of the panel.
- 4.12 This scrutiny review has been undertaken at a time when there has also been a large amount of national research and reviews being undertaken and published on this topic. Appendix 8 of this paper lists a number of reports that are particularly relevant to this scrutiny review.

5. BACKGROUND INFORMATION

5.1 Sexual violence: The data

- 5.1.1 There are a number of high risk factors which increase the likelihood of an individual experiencing some form of sexual violence. These include an individual's gender, disability status, age, marital status, level of participation in the night-time economy, and type of housing tenure. Other high risk categories include refugees and migrants entering the UK and sex workers.³⁷
- 5.1.2 There is a significant population within Brighton and Hove that fall into these high risk categories and that are affected by these risk factors; in particular young people aged between 16 and 24, those who are single or co-habiting, and those who live in private rented accommodation are all at greater risk. The city also has a large LGBT community and a sex worker community both of whom are particularly vulnerable to experiencing sexual violence. Drug and alcohol use is also a related risk factor.³⁸
- 5.1.3 There are high levels of under-reporting of sexual offences, and many incidents do not come to the attention of services. Under-reporting is further complicated by the fact that some groups are even less likely to report a violent experience; for example those with disabilities or those from Black Minority Ethnic (BME) Groups. The British Crime Survey shows that nationally there are very significant levels of under-reporting of serious sexual offences. Just 11% of victims in the survey who had experienced serious sexual assault since the age of 16 had reported their most recent experience to the police; 40% of victims had told no-one about their experience.³⁹
- 5.1.4 As an indication of the possible levels of under-reporting of sexual offences in Brighton and Hove, in 2008 and 2009 the police recorded 328 sexual offences taking place in the city.⁴⁰ In contrast, a Home Office 'Ready Reckoner Tool' estimates that there were 4,235 women and girls aged 16 – 59 who were the victim of a sexual assault in the same time period in Brighton and Hove.⁴¹
- 5.1.5 Local police data on recorded sexual offences in 2008 and 2009 show that 89% of victims of police recorded sexual offences were female and 11% were male. The police data from 2008 and 2009 indicates that 27% of female victims were aged 15-19 and 18% were aged 20-24. Most male victims of police recorded sexual offences in the same year were aged 20-24. The police data from 2008 and 2009 also shows that 45% of all sexual offences against females occurred in a dwelling, and 25% occurred in the street. 56% of police recorded sexual offences against men in 2008 and 2009 occurred in the dwelling and 17% on the

³⁷ Information provided at panel's private meeting, 05/03/2010

³⁸ Information provided at panel's private meeting, 05/03/2010

³⁹ Information provided at panel's private meeting, 05/03/2010

⁴⁰ Police data provided at panel's private meeting, 05/03/2010

⁴¹ Information provided at panel's private meeting, 05/03/2010

street. Based on the police data for recorded sexual offences in 2008 and 2009 42% of sexual offences were committed by strangers to the victim, and 47% by known perpetrators (32% by acquaintances, 7% by intimate partners and 8% by family members). 8% of all recorded sexual offences in 2008 and 2009 were also recorded as incidences of domestic violence.⁴²

- 5.1.6 National research indicates that those who experience violence or abuse at the hands of a partner or family member are the least likely to report it.⁴³ Studies have shown that between a third and a half of women experiencing physical abuse are also raped by their partners at least once (Bergen, 1996; Browne, 1993; Campbell, 1989). Researchers have estimated that between 10 – 14% of married women experience rape in marriage (Finkelhor and Yllo, 1985; Russell, 1990). When researchers have examined the prevalence of different types of rape they have found partner rape accounts for approximately 25% of all rapes (Randall and Haskall, 1995; Resnick, Kilpatrick, Walsh and Vernon, 1991). Partner rape needs to be recognised as a distinct problem which requires distinct solutions. Those that experience partner rape are likely to experience this alongside other forms of abuse and violence. The impact of sexual violence within the context of domestic violence needs to be better understood.⁴⁴
- 5.1.7 20% of all sexual offences committed in Brighton and Hove in 2008 and 2009 were committed against children under 16. If historical reports of abuse are also included, then this figure rises to 25% of all sexual offences. Of the children aged under 16, 88% were female and 12% were male. 46% of the sexual offences committed against under 16s in Brighton and Hove in 2008 and 2009 were committed by an acquaintance, 23% by strangers, and 14% by family members.⁴⁵
- 5.1.8 94% of all sexual offences committed against children under 16 in Brighton and Hove in 2008 and 2009 were committed by a male. The largest age group of offenders committing crimes against under 16s in Brighton and Hove in 2008 and 2009 were those aged 10-19, with an average age of 15. The second largest age group were those aged 40-49.⁴⁶ National research estimates that about a third of those who sexually abuse children are just children themselves. About a third of the children who display 'sexually harmful behaviour', which is the preferred clinical terminology, were sexually abused.⁴⁷
- 5.1.9 It is estimated that 15% of the population in Brighton and Hove identify as LGBT. Data collected for the Count Me In (2000) project suggests that of those who participated in the project 40% of women and 32% of men had felt that in their lifetime they had been pressured or forced to

⁴² Police data provided at panel's private meeting, 05/03/2010

⁴³ Information provided at panel's private meeting, 05/03/2010

⁴⁴ Information provided at private meeting, 12/04/2010

⁴⁵ Police data provided at panel's private meeting, 05/03/2010

⁴⁶ Police data provided at panel's private meeting, 05/03/2010

⁴⁷ BBC Report, 17 March 2010, *Hidden problem of children sexually abusing children*, <http://news.bbc.co.uk/1/hi/programmes/newsnight/8569219.stm>

have sex against their will. 92% of those affected by sexual violence did not report the incident(s) to the police. Data from the Count Me In Too (2007) project suggests that out of those who responded, in the last 5 years 3% of lesbians, 4% of gay men, 3% of bisexuals and 9% of trans people had experienced sexual assault. The Brighton and Hove LGBT Switchboard (2008-10) reported that 15% of their counselling clients had disclosed some form of sexual violence.⁴⁸

5.1.10 In 2008 and 2009, amongst older people and adults with disabilities eight investigations took place into alleged incidents of sexual abuse. Between 2007 and 2009 there were 21 reports of sexual incidents involving adults with learning disabilities.⁴⁹ Vulnerable adults and those with disabilities face particular difficulties in reporting sexual abuse.

5.1.11 There is not a clear picture as to the number of refugees and migrants affected by sexual violence in Brighton and Hove. However, sexual violence is likely to fit into the experience of many refugees and migrants. Victimisation for these individuals can occur at various stages; either prior to an individual's arrival in the UK; during their long and complex journeys to the UK where they may have to exchange sex for safe passage or have been affected by sexual violence on route; or once in the UK, refugees and migrants fall into the categories of those most at risk of being affected by sexual violence as they are more likely to be poor, vulnerable, and living on their own in rented accommodation. Those refugees or migrants who are refused asylum to stay in the UK can be particularly vulnerable to experiencing sexual violence as they will not have recourse to public funds and may be made destitute.⁵⁰

5.1.12 Sexual violence and abuse has a devastating impact on an individual, an individual's family, friends, and on wider society. Indeed, sexual offences are recognised as being one of the most traumatic crimes an individual can experience.⁵¹ Women who have sought support to deal with the impacts of a sexual violence from the Survivors' Network often feel isolated, suffer with depression, experience anxiety, post-traumatic stress disorder, flash backs and nightmares, have high levels of panic and anxiety, and mental health issues caused by their trauma which could include the inclination to self-harm or self-injure, embark on substance misuse or eating disorders. There is a high level of 'suicide idealisation' amongst the client group.⁵²

5.1.13 As well as the emotional cost, the economic cost of sexual offences is significant. In 2003/04 the Home Office estimated that the cost of all sexual offences was £8.5 billion. It also calculated that sexual offences are the most costly type of crimes, being 50% more costly than the

⁴⁸ Law, minutes of the panel's public meeting, 29/03/2010

⁴⁹ Farrelly, minutes of the panel's public meeting, 15/03/2010

⁵⁰ Bryson, minutes of the panel's public meeting, 15/03/2010

⁵¹ Home Office, 2007, *Cross Government Action Plan on Sexual Violence and Abuse*

⁵² Mason, minutes of the panel's public meeting, 15/03/2010

next offence group.⁵³ Each rape is estimated to cost £76,000; much of this cost is estimated based on lost economic output and the costs to health services for treating long-term health issues.⁵⁴ Based on Home Office data, and adjusting for under-reporting, the economic and social cost of sexual offences in Brighton and Hove was estimated to approach £60 million in the year 2007/08 far exceeding the costs of all other types of crime in the city.⁵⁵

5.1.14 The Stern Review reported in March 2010 on the way that rape complaints have been handled by public authorities in England and Wales. It concluded that rape takes place within wide social contexts and many of its victims are already vulnerable children or adults. The Stern Review noted that vulnerable and powerless people are often the victims of sex crimes as they are identified by perpetrators as easy targets. The Stern Review also noted that having been a victim of rape in childhood makes it more likely that the person will be a victim again. Many of those who are particularly vulnerable will not be one-off victims. Repeat victims may have mental health problems, learning disabilities or a whole history of abuse. Young people are particularly vulnerable to rape and exploitation, as are those in care homes, and those involved in gang culture.⁵⁶

5.1.15 Sexual violence, sexual offence and sexual exploitation is much more prevalent within our society than levels of reporting would indicate. The impact of sexual violence on an individual is devastating and the impact on wider society is costly. Those who are already vulnerable may be more likely to experience sexual violence and there are a range of risk factors and risk categories associated with the likelihood of experiencing sexual violence.

5.2 Local strategies, action plans, and partnership structures to tackle sexual violence

5.2.1 Tackling sexual violence is a priority within the city's Sustainable Community Strategy. Under the theme 'Reducing Crime and Improving Safety' the city has made a pledge to reduce domestic and sexual violence, including rape and assaults within relationships as well as stranger assaults, honour based violence, forced marriage and trafficking.⁵⁷

5.2.2 The city's Local Area Agreement 2008-11 includes in the top 35 indicators, National Indicator 32: 'seeking to reduce repeat incidents of domestic violence'. National Indicator 26: 'the provision of specialised support to victims of sexual offences' is also a local indicator in the

⁵³ Home Office, 2003/04, *Online report 30/05: The Economic and Social Costs of Crime Against Individuals and Households*

⁵⁴ Home Office, 200, *Cross Government Action Plan on Sexual Violence and Abuse*

⁵⁵ Information provided at panel's private meeting, 05/03/2010

⁵⁶ Baroness Stern, March 2010, *The Stern Review: How Rape Complaints are Handled by Public Authorities in England and Wales*

⁵⁷ Brighton and Hove Sustainable Community Strategy, Third edition

Local Area Agreement.⁵⁸ However, National Indicator 26 is still yet to be defined by the government.

5.2.3 The Partnership Community Safety Team recognises tackling both domestic violence and sexual violence as a priority area in the Brighton and Hove Community Safety Strategy, 2008-11. Included within the strategy are a Sexual Violence and Abuse Action Plan, and a Domestic Violence Action Plan.⁵⁹ The Partnership Community Safety Team recognises tackling sexual violence as a key priority and leads on this agenda for the council.

5.2.4 Currently, the Partnership Community Safety Team is developing a local 'Violence Against Women and Girls Strategy'. A strategic assessment for the wider topic of 'Violence Against Women and Girls' has already been undertaken.⁶⁰

5.2.5 Work dealing with rape and sexual offences, is led by Sussex Police and the local authority is represented through the Partnership Community Safety Team on the Sussex-wide Rape and Sexual Assault Steering Group. This group has three sub-groups which focus on; prevention, intelligence and investigation. There also exists a sex workers steering group which develops and delivers the action plan developed to meet the needs of sex workers. The city has a comprehensive domestic violence programme which is overseen and delivered through several partnerships; some of these partnerships are also responsible for delivering the Sexual Violence and Abuse Action Plan.⁶¹

5.2.6 The Partnership Community Safety Team is working hard to support the women's specialised services which operate in the city and to build the capacity of these organisations to become frontline service providers and services which can support the SARC. The Partnership Community Safety Team has supported the Women's Services Strategic Network (WSSN), a partnership group bringing together the main women's third sector organisations in the city, to successfully bid for funding from the Ministry of Justice to undertake some work in the city to support female offenders.⁶²

5.3 Statutory services available to support those who have experienced sexual violence

5.3.1 Sussex Police supports victims of sexual violence through the courts and conviction processes. The police have targets to meet in regard to increasing the number of offenders convicted of sexual offences. If an individual reports a sexual offence to the police a specially trained Sexual Offences Liaison Officer (SOLO), (available 24 hours a day) will

⁵⁸ Brighton and Hove Local Area Agreement 2008-11

⁵⁹ Brighton and Hove Community Safety, Crime Reduction and Drugs Strategy 2008-11

⁶⁰ Safe in the City Partnership, agenda item 4.5: Brighton and Hove's strategy to end violence against women and girls, 26/03/2010

⁶¹ Information provided at panel's private meeting, 05/03/2010

⁶² Information provided at panel's private meeting, 05/03/2010

take the victim to the Sexual Assault Referral Centre and stay with them whilst they receive any medical treatment they may require and forensic information is collected. The SOLO will then take the victim home after their visit to the SARC is over.⁶³

- 5.3.2 Sussex Police in conjunction with the Partnership Community Safety Team is working to offer sex workers, a high risk group for experiencing sexual violence, routes out of poverty and sex work. The sex workers strategy group which is led by the Partnership Community Safety Team and Sussex Police oversees this work.⁶⁴
- 5.3.3 All men and women aged over 14 who report a sexual offence will be taken to the Sexual Assault Referral Centre (SARC) in Crawley. The SARC was opened in September 2008 and is an excellent facility that offers a level of comfort to very vulnerable and distressed people. At the SARC clients will be offered any medical treatment they may need, the choice of having forensic information collected, as well as some initial emotional support and advice. Clients will then be referred on to local counselling services which are accredited providers to the SARC and work to the criteria set by the SARC Management Board.⁶⁵
- 5.3.4 The SARC is funded through contributions from a range of statutory partners across Sussex, including the Police, Crime and Disorder Partnerships (the Partnership Community safety Team), the Primary Care Trust (PCT) and other healthcare agencies. These statutory organisations work in partnership to manage and commission services on behalf of the SARC through the SARC Operational Group and the SARC Management Board. The SARC Operational Group is working hard to develop the referral pathways from the SARC into local counselling services. The Survivors' Network (the city's rape crisis service provider) will soon be joining the meetings of the SARC Operational Group.⁶⁶
- 5.3.5 Between Sep 2008 and Dec 2009 there have been 97 Brighton & Hove clients seen (26% of all SARC clients), of which 89 (92%) were referrals from the police.⁶⁷
- 5.3.6 The Clermont Child Protection Unit offers some limited specialist therapeutic support to those children who have experienced traumas such as sexual violence. The Clermont Unit also undertakes some work with suspected adult perpetrators of sexual violence through the Risk Assessment and Group Treatment Programme. The adults involved in this programme have often not been convicted as there is not enough evidence to convict, or they may deny perpetrating sexual violence but there may be concerns about their behaviour. The programme also works with the partners of perpetrators.⁶⁸ The

⁶³ Information provided at panel's private meeting, 05/03/2010

⁶⁴ Information provided at panel's private meeting, 05/03/2010

⁶⁵ Information provided at panel's private meeting, 05/03/2010

⁶⁶ Information provided at panel's private meeting, 05/03/2010

⁶⁷ Information provided at panel's private meeting, 05/03/2010

⁶⁸ Information provided at panel's private meeting, 05/03/2010

Clermont Unit also coordinates the child witness support service. The child witness support service supports any child aged 17 or under to give evidence in court. The workers support the child witness before the trial process as well as after. This service does not replace the benefits of therapeutic interventions for a distressed child but can offer support to those children who are called upon to give evidence in court, which will hopefully increase convictions for a range of offences including violence and sexual offences.⁶⁹

5.3.7 The housing directorate has responded both strategically and operationally to cases of sexual and domestic violence. A number of housing strategies include specific goals and responses to domestic and sexual violence. Housing participates in and is represented on the domestic violence partnership bodies, and there is also a Housing and Domestic Violence Working Group set up to improve partnership working and monitor and update the domestic violence strategy actions that relate to housing. Within the council's Housing Options Service there is a Crisis Intervention Team which exists to prevent homelessness. Within this team are three full-time dedicated officers that specialise in domestic violence cases. This team also has a LGBT Housing Options Officer and an officer specialised in supporting vulnerable women. The Domestic Violence Housing Options Officers work very closely with workers from RISE and undertake a work shadowing programme between RISE and housing officers to facilitate learning and knowledge. They also plan to deliver a joint-training programme on housing and domestic violence issues.

5.4 Independent support services available to support those who have experienced sexual violence

5.4.1 The Survivors' Network is the city's only specialised independent support service dedicated to supporting women who have experienced sexual violence. The network provides emotional support and practical information to women in the aftermath of sexual violence, as well as services for those who have experienced historical sexual abuse. The Survivors' Network offers a number of services including, a telephone service which is open two nights a week for a total of four hours, an email service, one-to-one support, a limited advocacy programme, a drop-in service and a quarterly newsletter.⁷⁰ The Network has just been awarded funding from the Home Office for two part-time Independent Sexual Violence Advisors (ISVAs), one to work with adults and one to work with those aged 16-25.⁷¹

5.4.2 Mankind provides the city's only specialised independent support service for men who have had an unwanted sexual experience either in their childhood or as an adult. The services offered by Mankind consist mainly of one-to-one counselling for male victims of sexual violence as well as one-to-one support for the partners and families of a victim.

⁶⁹ Information provided by Shelagh Mayo via email

⁷⁰ Mason, minutes of the panel's public meeting, 15/03/2010

⁷¹ Survivors' Network Annual Monitoring and Evaluation Return for 2009/10

Mankind is based in Newhaven and 60-70% of their clients are Brighton and Hove residents. It is estimated that 400,000 to 600,000 men in the South East Region of England may have experienced some form of sexual violence.⁷²

- 5.4.3 RISE (Refuge, Information, Support and Education), provides crisis support as well as long-term support services to women, children and young people up to the age of 25, who have been affected by domestic and sexual violence. RISE provides refuge services for those in crisis and is able to accept women with mental health and substance misuse issues and dependent boys up to the age of 18. RISE operates a helpline service several days a week and has an Independent Domestic Violence Advocate to support victims in navigating the criminal justice system and other support agencies. RISE supports high risk cases of domestic violence onto the Multi-Agency Risk Assessment Conferences (MARACs). RISE also runs children and young people therapy services and offers preventative education programmes in local schools and undertakes community outreach and support services.⁷³
- 5.4.4 The Brighton Women's Centre offers a range of both generic and specialised support services to women. Specialised services include a 12 week course of one-to-one rape and sexual assault counselling, and a 12 week course of one-to-one counselling for women affected by domestic violence. (The Brighton Women's Centre is set up to take referrals from the SARC.) The centre also provides a range of services to empower, support and provide information and advice to vulnerable women. These services include women only drop-ins, advice, guidance and signposting to other services; access to a range of training; self-development courses incorporating creative, educational and employment opportunities; self-esteem courses which are offered in partnership with the Family Intervention Project; and holistic therapies. The centre also offers an Ofsted registered pre-school. Women who use the centre often access it for a specific service but end up using a number of services on offer there in order that they may deal with the inter-related issues which many of them face.⁷⁴
- 5.4.5 The Brighton Housing Trust (BHT) comes into contact with both men and women who have had their situations breakdown and as a result have lost their housing. Through the hostels managed by the BHT, the BHT is able to focus on the particular needs of their clients and provide counselling services to meet their clients' needs. The BHT has women-only supported housing which houses women who require mental health support and tenancy support, often after having experienced some form of abuse. Threshold provides a mental health support service to these women which includes; one-to-one counselling, group work, and a crèche service. Some of the women which Threshold works with have a history of abuse which is often the trigger for their

⁷² Sullivan, minutes of the panel's public meeting, 29/03/2010

⁷³ Gray, minutes of the panel's public meeting, 15/04/2010

⁷⁴ Mercy, minutes of the panel's public meeting, 29/03/2010

mental health problems, housing needs, and their need for support to cope with daily living. BHT also has a legal immigration service, which RISE sometimes uses, which works with refugees and asylum seekers many of which have been victims of sexual violence and have experienced rape as a weapon of war or form of torture.⁷⁵

- 5.4.6 The Brighton Oasis Project is a women only drug and alcohol service which also offers therapeutic services for children affected by familial substance misuse, a crèche, and services for women working in the sex industry. Oasis delivers their drug treatment services in partnership with the NHS and CRI. Oasis also provides services for those who offend in relation to substance misuse, and outreach work with sex workers primarily to improve health outcomes for these women. There is a high level of childhood sexual abuse amongst the sex workers which Oasis has contact with and they often revert to substance misuse to cope with the experiences they have had.⁷⁶
- 5.4.7 Sussex Central YMCA primarily offers services for families and young people aged up to 25. The majority of services offered are housing related or offered through the YMCA's youth advice services. The YMCA has a number of young men and women who disclose historical sexual violence through their counselling services. Sussex Central YMCA has a lot of contact with mothers and young women who have experienced sexual violence within the context of an abusive relationship or as part of domestic violence. The YMCA works in partnership with the police, Red Cross and other organisations to deliver the Safe Space project. This project offers support and assistance to vulnerable people involved in the night-time economy. Through this project the YMCA has come across people who have experienced historical sexual abuse. Sussex Central YMCA has just secured funding for a Young Person's Sexual Exploitation Worker to work with vulnerable young people who access services because they are homeless and who have been exchanging sexual favours for somewhere to stay. The worker will be responsible for providing information about the sexual exploitation of young people in the city, particularly LGBT and BME individuals and how pathways can be improved for these young people being exploited. The worker will also undertake some awareness raising and education work with young people to enable them to understand what sexual exploitation is.⁷⁷
- 5.4.8 The Stopover Project provides supported housing for young women aged 16 – 24 many of whom have issues with mental health, drug or alcohol misuse, or have been through a family breakdown. The project offers two housing projects. One is a high support housing project which is staffed 24 hrs a day where clients can stay for a maximum of nine months. The other housing project, Stopover Two, provides less support and is staffed only during office hours. Women can stay in this housing for up to two years and play an active role in managing the

⁷⁵ Seymour, minutes of the panel' public meeting, 15/04/2010

⁷⁶ Welsh, minutes of the panel's public meeting, 29/03/2010

⁷⁷ Brett, minutes of the panel's public meeting, 15/04/2010

safety of the house and their tenancy. Amongst the women whom Stopover has contact with experiences of domestic or sexual violence are often disclosed, although the women who disclose violence often do not perceive themselves to have been the victim of abuse.⁷⁸

- 5.4.9 There are a variety of independent support services available in the city to support those affected by sexual violence. Indeed the diversity and individual specialisations of the services available locally are a real strength for the city.

⁷⁸ Gosling, minutes of the panel's public meeting, 29/03/2010

6. ISSUES AND FINDINGS

6.1.1 This section highlights the key issues and findings of the panel including 21 detailed recommendations. However there are four overarching recommendations the panel wish to make summarising the clear themes that have come out during the course of the review.

Commissioning Recommendation A: The panel recommends that strategic commissioning arrangements be put in place for sexual violence support services and that alongside these commissioning arrangements the commissioning of domestic violence support services should also be considered and undertaken.

Commissioning Recommendation B: The panel recommends that the strategic commissioning arrangements put in place are undertaken jointly by Brighton and Hove City Council the CYPT, the police, and the health agencies in the city, and that where necessary other agencies are also included in these strategic commissioning arrangements.

Commissioning Recommendation C: The panel recommends that all statutory agencies in the city contribute funding to the strategic commissioning process for support services for victims of sexual violence as all statutory agencies benefit from victims being properly supported.

Commissioning Recommendation D: The panel recommends that a single lead commissioner be responsible for overseeing the integrated strategic commissioning of support services for victims of sexual and domestic violence.

6.2 Gaps in current service provision

6.2.1 The panel identified a number of key gaps which exist in current local service provision for women, men and children who have been affected by sexual violence.

6.2.2 The Survivors' Network used to run a dedicated service, known as Space Two, for young women aged 16 – 25 who had been affected by sexual violence. However, this service was only funded in the short-term (2007/08) by the Equalities and Human Rights Commission and as new funding was not received the programme had to be suspended.⁷⁹ Whilst the Survivors' Network has just received funding for an Independent Sexual Violence Advocate (ISVA) to work part-time with this age group, one part-time worker is unlikely to meet the need of this age group within the city. The police data from 2008 and 2009 indicated that 45% of recorded sexual offences were against young women aged 15 – 24⁸⁰. As young women are one of the groups most at risk of experiencing sexual violence the panel are very concerned that currently a dedicated programme of support is not available to young women who, if they are not supported to deal with their

⁷⁹ Mason, minutes of the panel's public meeting, 15/03/2010

⁸⁰ Police data provided at panel's private meeting, 05/03/2010

experiences are likely to develop serious mental health issues later in life.

Recommendation 1: The panel recommends that a dedicated programme of support services for young women aged 16 to 25 is developed and funded as a matter of high priority.

6.2.3 Mankind used to offer group counselling for men who have had unwanted sexual experiences. However, the funding for this service was not continued and further funding could not be found so this service is not currently being delivered. This is problematic as most benefits are achieved from being able to offer clients both one-to-one counselling as well as group meetings. Such a programme of support enables a client to explore their experiences in private as well as in a group context where their experience becomes 'normalised' as they meet others who have also experienced sexual violence. Currently this peer support is unavailable to men who use Mankind.⁸¹ The panel are concerned that men are not currently able to access the full breadth of support which they need to start their routes to recovery.

Recommendation 2: The panel recommends that consideration is given to funding group counselling services for men who have had unwanted sexual experiences.

6.2.4 In 2009/10, RISE piloted a Health Independent Domestic Violence Advocacy (HIDVA) worker to operate from the Accident and Emergency department at Sussex County Hospital. This co-location of an independent support service with medical services meant that women who had been abused and then admitted into hospital for treatment could have immediate referral and access to a women's independent advocacy worker. RISE had hoped that this pilot project would be mainstreamed and that health agencies would pick up funding for this service. This has not happened.⁸² Many women who have experienced domestic or sexual violence will attend Accident and Emergency to seek treatment for their physical injuries. Having a HIDVA located in an Accident and Emergency unit enables women to have immediate access to independent advocacy. In 2009/10, the HIDVA was receiving about 10 calls a month for suspected cases of domestic violence and by being located in the hospital the HIDVA was able to support some very complex and serious cases of abuse. The HIDVA was also training hospital staff on how to undertake sensitive routine enquires, how to deal with complicated abuse scenarios, as well as developing effective pathways to support victims.⁸³

Recommendation 3: The panel recommends that consideration is given to funding a HIDVA worker in the Accident and Emergency department at the Sussex County Hospital, and that this is funded from within mainstream budgets.

⁸¹ Sullivan, minutes of the panel's public meeting, 29/03/2010

⁸² Gray, minutes of the panel's public meeting, 15/04/2010

⁸³ Information provided at private meeting, 12/04/2010

6.2.5 There are not many specialised therapeutic support services in the city for children and young people who have witnessed or been affected by sexual or domestic violence.⁸⁴ It is felt that there may be a number of children that, rather than being given specialist therapeutic support, are being managed and held in frontline services which, due to the very particular trauma which they have experienced, will be unlikely to meet their special needs. A child who does not resolve a trauma and is unable to recover is far more likely to develop adult mental health problems.⁸⁵ The panel are deeply concerned that there is not the required amount of specialist therapeutic support services available in the city for children affected by sexual violence and as a result the needs of these children are not being met. This means that these children are likely to grow up to become vulnerable adults with severe mental health needs.

Recommendation 4: The panel recommends that the specialised therapeutic support services for children and young people who have been affected by sexual violence be reviewed as a matter of high priority in order to ensure that the needs of children and young people affected by sexual violence are being met.

6.2.6 Services for children who display sexually harmful behaviours. Children who engage in such behaviour need very particular support services and, if their behaviours are not addressed and managed, will be at risk of becoming offenders.⁸⁶ National research has estimated that one-third of those who sexually abuse children are just children themselves, and that one-third of children who display sexually harmful behaviour were also abused themselves⁸⁷. A BBC investigation in March 2010 into the issue of children who engage in sexually harmful behaviour highlighted that the systems in place in the UK all too often fail to either recognise or deal with the abuse being carried out by children. National research also indicates that children who engage in sexually harmful behaviour may have to wait on average as long as four and a half years before they are seen by the experts they need.⁸⁸ The panel are concerned that the needs of children who display sexually harmful behaviour may not be being met within the city.

Recommendation 5: The panel recommends that the specialised support services for children who display sexually harmful behaviour be reviewed as a matter of high priority to ensure that the needs of these children and young people are being met.

⁸⁴ Gray, minutes of the panel's public meeting, 15/04/2010

⁸⁵ Information provided at the panel's private meeting, 05/03/2010

⁸⁶ Information provided at the panel's private meeting, 05/03/2010

⁸⁷ BBC Report, 17 March 2010, *Hidden problem of children sexually abusing children*, <http://news.bbc.co.uk/1/hi/programmes/newsnight/8569219.stm>

⁸⁸ BBC Report, 17 March 2010, *Hidden problem of children sexually abusing children*, <http://news.bbc.co.uk/1/hi/programmes/newsnight/8569219.stm>

6.3 Weaknesses in current service provision

- 6.3.1 From the evidence gathered at the panel's public meetings it is evident that there are a number of areas around which current services could be strengthened in order to offer better support to those affected by sexual violence.
- 6.3.2 Firstly, there is a huge amount of demand within the city for independent support services for those who have experienced sexual violence which, due to a lack of capacity within the independent support services, is currently not being met.
- 6.3.3 As a general principle the panel strongly support the requirement that those offering support services for women are women. Evidence received highlighted that this is vital to ensure victims feel able to access support services.
- 6.3.4 In 2008 and 2009 the Survivors' Network logged 400 calls to its helpline and of these only 88 were able to be answered⁸⁹. In 2009/10 the Survivors' Network logged 887 calls to its helpline and of these only 249 were able to be answered. This means that just 27.8% of callers to the Network's helpline received the advice and support that they needed. In 2009/10 the Survivors' Network also received 85 e-mails to its e-mail service and saw 168 women at its drop-in.⁹⁰ Also, in 2009/10 the Network was receiving on average 10 referrals a week from various agencies and self-referrals.⁹¹ In 2009/10, the Survivors' Network had a 50.9% increase in women accessing their services in comparison to 2008/09. Some of the increase in the numbers of women accessing the Network's services is due to better advertising of the Network's services and an increased profile in the city.⁹² As a result, however, there is currently a six month waiting list for the support services provided by the Survivors' Network.⁹³ From May 2010, the Survivors' Network hopes to start taking referrals from the SARC which may mean a total of 90 to 100 women being referred into the Network's services on top of the other referrals already being made.⁹⁴
- 6.3.5 In 2008/09 Mankind had a 55% increase in the number of men accessing their services, probably as a result of a local media advertising campaign about their services. There is currently an 8 – 12 week waiting list for Mankind's counselling services.⁹⁵
- 6.3.6 In 2009/10 over half of the 167 clients referred to the Brighton Women's Centre's counselling services were dealing with either sexual abuse or domestic violence, and over half of the 104 women who

⁸⁹ Mason, minutes of the panel's public meeting, 15/03/2010

⁹⁰ Survivors' Network Annual Monitoring and Evaluation Return for 2009/10

⁹¹ Mason, minutes of the panel's public meeting, 15/03/2010

⁹² Survivors' Network Annual Monitoring and Evaluation Return for 2009/10

⁹³ Mason, minutes of the panel's public meeting, 15/03/2010

⁹⁴ Survivors' Network Annual Monitoring and Evaluation Return for 2009/10

⁹⁵ Sullivan, minutes of the panel's public meeting, 29/03/2010

directly accessed the centre's counselling services were dealing with either sexual or domestic violence. There is currently a waiting list for the centre's counselling services of between 2 – 3 months.⁹⁶

6.3.7 There is a very clear demand within the city for support services for women and men. This demand is not currently being met as the support services do not have the capacity to cope with the level of need in the city. As a result there is likely to be a significant number of vulnerable individuals who either have to wait to access the support that they need, or are not even able to gain access to the support services they require. These individuals are likely to be experiencing emotional turmoil, be feeling extremely isolated, and have a range of mental health needs.

Recommendation 6: The panel recommends that the capacity of the local independent support services be greatly strengthened so that the needs of all of those in the city that have experienced sexual violence can be addressed.

6.3.8 The Sexual Assault Referral Centre (SARC), located in Crawley, is a relatively new service which is rapidly trying to develop and strengthen its operations and referral pathways. The Partnership Community Safety Team and the other statutory agencies which manage the SARC are working hard to ensure that a seamless service is available to clients who access the SARC and are then referred on to local support services.⁹⁷ However, some concerns were raised about the SARC by those attending the panel's public meetings. These concerns included the ineffectiveness of some of the referral pathways and in particular problems with some clients not being referred on to the right local support services⁹⁸. Additionally, currently the SARC is only available 24 hours a day to those men and women who report a sexual offence to the police. Those who wish to self-refer to the SARC's services currently have to call ahead between 9.00 am and 5.00 pm to make an appointment⁹⁹. Some work is being undertaken with the local support services to enable the services to support individuals to self-refer to the SARC¹⁰⁰. Whilst the panel recognises that the SARC is still a developing service and is doing a lot of very good work already, the panel feels that the SARC's referral pathways need to be strengthened and the capacity of the SARC to take 24 hour self-referrals needs to be developed as a matter of urgency.

Recommendation 7: The panel recommends that the operations of the SARC and its referral pathways are strengthened as a matter of high priority.

⁹⁶ Mercy, minutes of the panel's public meeting, 29/03/2010

⁹⁷ Information provided at the panel's private meeting, 05/03/2010

⁹⁸ Sullivan, minutes of the panel's public meeting, 29/03/2010

⁹⁹ Mason, minutes of the panel's public meeting, 15/03/2010

¹⁰⁰ Information provided at the panel's private meeting, 05/03/2010

6.3.9 Since November 2009 the Survivors' Network has provided a rape crisis service alongside their existing services. However, whilst the city now has a rape crisis service, there is still no independent 24 hour specialist support service, either nationally or locally, for those who experience rape or sexual assault. This means that if an individual does not wish to report a rape or sexual assault to the police, and many prefer not to, then there is nowhere and no-one that victims can turn to at any time of the day or night to receive the specialised independent emotional support, and advice and information that they need. There are two local helplines which can provide this support, the Survivors' Network helpline and RISE's helpline, however, neither of these are open 24 hours. The Network operates a helpline for survivors, which is open two nights a week for a total of four hours, whilst RISE's helpline operates during office hours Monday to Friday. Evidence has shown that there is a clear need for a more comprehensive service.

Recommendation 8: The panel recommends the commissioning of a feasibility study considering the introduction and funding of an independent 24 hour signposting and support service.

6.3.10 There are current weaknesses in the way that children's services work with families where sexual or domestic violence has been experienced. Some of the women involved in the Women's National Commission's consultations perceived social services as being particularly unsympathetic towards women. The women felt that they were often blamed for their children's situations despite the fact that they had been the victim of abuse. Women also felt that children's services were unable to consider a woman and her child/children's situations together. The women felt that children's services needed to take a more holistic approach towards supporting women and children when cases of abuse arise and be better at responding to and recognising complex cases of domestic and sexual violence. The women also spoke of their concern over the lack of safe child contact facilities in the city and their fears that nothing was being done in response to allegations of ongoing sexual abuse during contact visits.¹⁰¹ The issue of custody and visitation rights to children when a mother has been sexually assaulted or abused by her partner or the father of her children needs to be better considered to ensure that the potential of further harm to a child is appropriately managed.¹⁰² Whilst the panel recognises that children's services has a very particular remit to protect children, the panel feels that more needs to be done by children's services to develop a holistic approach to working with children and women from families where domestic or sexual violence has been experienced.

Recommendation 9: The panel recommends that children's services reviews and considers how it responds to and supports children and women from families where domestic and sexual violence has taken place in order to ensure that a holistic approach to such cases is taken.

¹⁰¹ Butler, minutes of the panel's public meeting, 15/04/210

¹⁰² Schaframn, January-February 2010, *Risk Assessment and intimate partner sexual abuse: the hidden dimension of domestic violence*, *Judicature*, vol 93.4

6.3.11 A number of weaknesses were identified about how professionals and frontline workers recognise and respond to cases of sexual violence. In particular GPs, health visitors, school nurses and midwives, and social workers were identified as requiring training and support to help them to recognise and respond to cases of sexual violence.¹⁰³ Whilst there are pockets of good practice and some use of appropriate assessment tools, the panel felt that more should be done to ensure that frontline staff are trained to respond confidently to individuals who have experienced sexual violence¹⁰⁴.

Recommendation 10: The panel recommends that all frontline staff and professionals within the city are trained to enable them to respond appropriately to cases of sexual violence.

Recommendation 11: The panel recommends that all women who come into contact with frontline staff and professionals are informed about the independent women-only specialist support services available in the city.

6.3.12 A number of weaknesses were also identified in the way that sexual violence is monitored by services in the city. At the moment sexual violence does not tend to be recorded and therefore it is not known currently whether women, for example, accessing housing options are fleeing sexual violence. There is the added difficulty that due to the close links between domestic and sexual violence there are complications over how such cases should be counted. For example, if sexual violence is perpetrated by an acquaintance or within the family this could be classified as either sexual or domestic violence. The city needs to be clear and consistent about how it records and monitors both sexual and domestic violence.¹⁰⁵ The variety of contexts in which sexual violence is experienced needs to be adequately reflected in the monitoring and recording of incidents of sexual violence.

Recommendation 12: The panel recommends that the monitoring and recording of cases of sexual violence be standardised across the city to ensure clear and consistent recording and monitoring.

6.3.13 A number of speakers attending the panel's public meetings identified the importance of undertaking preventive work to ensure early intervention in cases of sexual and domestic violence.¹⁰⁶ This preventative work needs to be undertaken in a range of contexts. Education and awareness raising needs to be undertaken in schools to promote healthy relationships and to ensure that children and young people know what should and should not happen in healthy relationships.¹⁰⁷ Targeted education and preventative work also needs to be undertaken with young women to enable them to understand

¹⁰³ Butler, minutes of the panel's public meeting, 15/04/2010

¹⁰⁴ Dando, minutes of the panel's public meeting, 29/03/2010

¹⁰⁵ Mason, minutes of the panel's public meeting, 15/03/2010

¹⁰⁶ Dando, minutes of the panel's public meeting, 29/03/2010

¹⁰⁷ Gray, minutes of the panel's public meeting, 15/04/2010

what sexual abuse and violence is and how to prevent it; and to encourage a greater understanding of what kind of behaviours are appropriate and not appropriate in relationships.¹⁰⁸ Preventative work and community outreach also needs to be undertaken in communities with men, boys, women and girls, in order to increase awareness and resilience amongst communities as to what sexual violence and abuse is and what healthy relationships should look like.¹⁰⁹ Such work will hopefully help to promote positive perspectives of masculinity and femininity and gender relations and reduce the level of violence in local communities.

Recommendation 13: The panel recommends that a much greater emphasis be placed on positive perspectives of masculinity to be promoted to young people.

6.3.14 There is a need for preventative work to be undertaken in the city's schools, with young people: particularly with young women, as well as with local communities to raise awareness about what healthy relationships are, and what they should or should not involve. Such work will hopefully help to promote positive perspectives of masculinity and femininity and gender relations and reduce the level of violence in local communities.

Recommendation 14: The panel recommends that a programme of prevention and early intervention work be developed to meet the needs of a range of individuals in a range of different contexts. As part of this programme, education and awareness raising programmes about what healthy relationships are and consist of should also be undertaken.

6.4 Weaknesses in current partnership arrangements

6.4.1 A number of weaknesses in the current partnership support arrangements were identified by the panel.

6.4.2 There are a number of partnership structures which have been set up to guide the citywide strategic development of services for those affected by domestic violence. Representatives from the domestic violence support services are strategically placed to influence decisions as they sit on the forums and partnership bodies in the city. There is not, however, adequate partnership structures set up for organisations which provide support services to victims of sexual violence. This means that there is not an adequate mechanism through which support services working with those affected by sexual violence can bring issues to the table and interact with statutory agencies and other independent support services involved in providing and delivering services. Having a forum of this kind would be an extremely useful and low-cost way of starting to co-ordinate sexual violence support services across the city, raise the profile of this issue, and also link independent

¹⁰⁸ Gosling, minutes of the panel's public meeting, 29/03/2010

¹⁰⁹ Gray, minutes of the panel's public meeting, 15/04/2010

support services into the strategic decisions taken in the city.¹¹⁰ Currently, it is the Pan Sussex arrangements and Domestic Violence Senior Officer Strategy Group on Domestic Violence which facilitates some of the delivery of the Sexual Violence and Abuse Plan.¹¹¹ The panel believes that there has been a historical strategic bias towards tackling and providing services for those affected by domestic violence and that this balance needs to be re-addressed whilst ensuring that services and support for those affected by domestic violence are not unintentionally or negatively impacted upon.

Recommendation 15: The panel recommends that more partnership structures which involve all statutory agencies and independent support services are put in place to ensure the strategic development of services for those affected by sexual violence.

6.4.3 Included in Brighton and Hove's Local Area Agreement, 2008-11, as a local indicator is National Indicator 26: 'the provision of specialised support to victims of sexual offences'. However, as this indicator has still yet to be defined by the government, work to collect information and measure progress on this indicator cannot be undertaken. Whilst the panel recognises the difficulties that this presents, the panel feels that the city should in the mean time agree a method and process for monitoring and measuring this indicator. In order to better facilitate this process, a copy of this scrutiny report could be considered at a future Local Strategic Partnership meeting.

Recommendation 16: The panel recommends that steps are taken locally to agree a method and process for monitoring and measuring NI 26. In order to facilitate this process the panel recommends that a copy of this scrutiny report be taken to a future Community Safety Partnership and Local Strategic Partnership Meeting.

6.4.4 There are a number of vulnerable adults who may be at higher risk of experiencing sexual violence and be even more unlikely to report an incident or seek support to deal with their experiences. These vulnerable adults include LGBT individuals, adults with physical or learning disabilities, BME groups, and refugees and migrants.¹¹² Within the city there are a number of organisations which represent these groups of vulnerable adults. These organisations and the specialised support services in the city need to form links with each other to ensure that those who are affected by sexual or domestic violence are properly supported by both specialised support services and the organisations which represent them. The panel is acutely aware that such links and partnership working requires more out of already stretched organisations and service providers, and therefore extra resources need to be made available to support this partnership working.

¹¹⁰ Mason, minutes of the panel's public meeting, 15/03/2010

¹¹¹ Information provided at a private meeting, 12/04/2010

¹¹² See scrutiny panel's scoping paper and section 5.2 of this report

Recommendation 17: The panel recommends that support is given to both the independent support services and the organisations representing groups of vulnerable adults to enable them to work together to develop services which meet their clients' needs.

6.4.5 A Women's Services Strategic Network (WSSN) has been set up and includes representatives from the city's women-only independent support services; these are the Survivors' Network, the Brighton Women's Centre, RISE, Threshold, and the Brighton Oasis Project. This network is supported by the Partnership Community Safety Team and has successfully won a funding bid to deliver support to women offenders in the city through the Inspire Project. The WSSN offers a vehicle through which, in partnership, the strategic and operational development of women-only support services can be developed, funded, and delivered. However, the partnership needs to be invested in and is currently struggling as it does not have sustainable funding or resources. A development worker is needed to support members of the WSSN to participate in the partnership.¹¹³ The WSSN may be a key mechanism through which representation of the women's sector can be reached at a strategic level within the city.

Recommendation 18: The panel recommends that mechanisms are found to support the continued development of networks and partnerships between third sector service providers.

6.5 Issues with funding

6.5.1 From the evidence provided at the panel's public meetings a number of issues have emerged with the way that the local independent support services are funded.

6.5.2 It is very difficult for the independent support services in the city to effectively plan medium and long-term service provision for vulnerable women, men and children, when there is no stability in the funding that they receive. Service development takes time and it takes time to put services into place and current funding cycles do not take this into account.¹¹⁴ As a result of mostly receiving one-off yearly funding, many of the organisations which the panel heard evidence from felt that they had to spend far too much time finding funding for services than delivering and developing services and undertaking strategic and long-term service planning. The lack of stability for organisations is particularly problematic as women accessing many of these services will do so for a long-time; up to eight years.¹¹⁵ Unless organisations are sustainably funded and have some stability women accessing their services will not feel secure in doing so.¹¹⁶

¹¹³ Dando, minutes of the panel's public meeting, 29/03/2010

¹¹⁴ Dando, minutes of the panel's public meeting, 29/03/2010

¹¹⁵ Mason, minutes of the panel's public meeting, 15/03/2010

¹¹⁶ Dando, minutes of the panel's public meeting, 29/03/2010

Recommendation 19: The panel recommends that all statutory agencies when funding the independent local support services in the city should award pots of money for a three to five year period.

6.5.3 Most of the independent support services informed the panel they were struggling to find funding to deliver their services. One of the main reasons cited was that many funders believed that services being provided by the local independent providers are those that it is the responsibility for statutory agencies to fund¹¹⁷.

6.5.4 However, because many local independent support services have previously received funding from central government and other grant funders, local statutory agencies have tended not to fund these organisations. The panel feels that because of the combination of reduced central government funding and grant funders not willing to fund services, the statutory agencies in the city should fund services to offer stability and ensure that some of the needs are met.

6.5.5 The Panel also believes that, as many of the independent organisations in the city work with those who have experienced both sexual violence and/or domestic violence, that consideration of the resourcing of support services for those affected by both problems should be made in tandem by statutory agencies.

Recommendation 20: The panel recommends that all statutory agencies in the city consider how they can support and offer mainstream funding to the independent support services in the city for those affected by sexual violence and domestic violence.

6.5.4 One particular area of frustration for many of the independent support services is that health agencies regularly made referrals to their services, but did not contribute funding.

6.5.5 For example the Survivors' Network receives referrals from mental health agencies, substance misuse workers, Mill View Hospital, midwives, health visitors, GPs, and the Accident and Emergency department at the Sussex County. However the Network receives no funding from the PCT at all.¹¹⁸

6.5.6 The Women's Brighton Centre, despite working with some very vulnerable women is not funded by the PCT.

Recommendation 21: The panel strongly recommends that the city recognises sexual violence and abuse as being a major public health issue. In light of this commitment that health agencies in the city should review what independent support services they are currently funding to support those affected by sexual violence. In order to facilitate this, a copy of this scrutiny report should be taken to a future meeting of the Local Strategic Partnership and to the Healthy City Partnership.

¹¹⁷ Gray, minutes of the panel's public meeting, 15/04/2010

¹¹⁸ Mason, minutes of the panel's public meeting, 15/03/2010

7. CONCLUSIONS AND RECOMMENDATIONS

- 7.1 Based on the evidence heard by the panel and the issues highlighted in this report it is evident that a more co-ordinated approach to funding local independent support services is needed and that the impact of sexual violence on women, men and children needs to be considered at a more strategic level within the city.
- 7.2 The Stern Review, like most of the recent national research undertaken in this area, concluded that sexual violence is not just a matter for the criminal justice system and that as the health and social implications of sexual violence is so substantial other public sector agencies need to be involved in supporting victims.¹¹⁹
- 7.3 The panel agree with this assessment and believes that, just as violence is not experienced in silos but in a range of contexts, a much wider and integrated approach is needed in the city to tackling sexual violence and to supporting those who are affected by sexual violence.
- 7.4 **The panel recommends that strategic commissioning arrangements be put in place for sexual violence support services and that alongside these commissioning arrangements the commissioning of domestic violence support services should also be considered and undertaken.**
- 7.5 **The panel recommends that the strategic commissioning arrangements put in place are undertaken jointly by Brighton and Hove City Council the CYPT, the police, and the health agencies in the city, and that where necessary other agencies are also included in these strategic commissioning arrangements.**
- 7.6 **The panel recommends that all statutory agencies in the city contribute funding to the strategic commissioning process for support services for victims of sexual violence as all statutory agencies benefit from victims being properly supported.**
- 7.6 **The panel recommends that a single lead commissioner be responsible for overseeing the integrated strategic commissioning of support services for victims of sexual and domestic violence.**
- 7.7 Other detailed recommendations can be found within the body of the report.

¹¹⁹ Baroness Stern, March 2010, *The Stern Review: How Rape Complaints are Handled by Public Authorities in England and Wales*