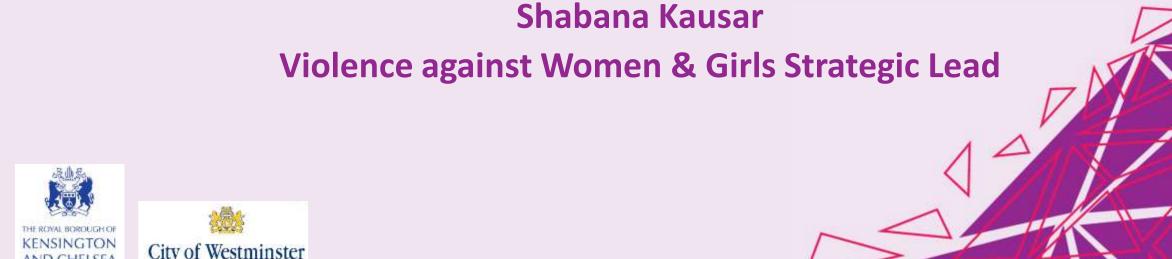
Developing a Strategic Approach to Ending Violence against Women & Girls



Why do we need a strategic response?

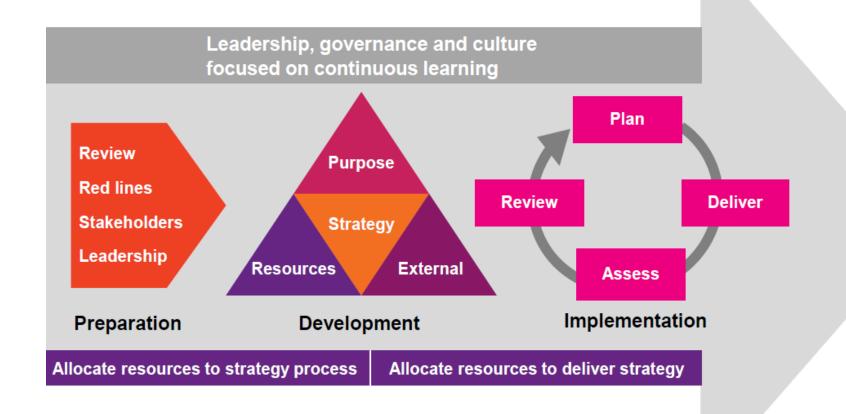
A strategy is about asking yourself vital questions.

What are we trying to achieve? What is the external situation and how can we address it? Are we effective? How can we convince others of this?

The process is as important as the product:

- Strategy should be developed and owned by those who will take it forward. Engaging staff, trustees, survivors, and stakeholders in the process helps ensure that they are part of the plan for realising your strategy.
- Strategy should get to the heart of what the partnership is about. Creating space for important or difficult conversations results in a more robust and meaningful strategy.
- Strategy should combine analysis with imagination. Strategy development is structured—but structure is not necessarily the enemy of creativity.
- Strategy must be lived—not a dusty document filed on a shelf. Good strategy should be emergent—setting a direction of travel but adapting along the way. Effective partnerships regularly review their strategy as they learn more about what works in practice.

What is the Strategy Process?









Questions to ask:

What is your core purpose?

What change do you want to make? What concrete things do you want to achieve?

What are your top priorities; what activities deliver these?

How can you add most value? Do stakeholders agree?

Key elements of developing a strategy:



Questions to ask:

What needs are you addressing now? And what are the future trends in needs?

How is society changing? Eg, demographics, technology

What is the policy environment and what risks does it pose?

What opportunities and threats exist?

Who is doing what and where you you fit?

Questions to ask:

Is your leadership up to delivering change and embedding a strategy?

How will you develop your strategy and decide between options?

How will you make your strategy happen?

What has worked in the past?



Questions to ask:

What are you good at and what makes you distinctive?

What evidence do you have of your impact (overall and at programme or project level)?

Do you have the right skills and experience to achieve your aims? How does your board contribute?

What resources do you have? Do you use resources efficiently?



What we did:

Stakeholder workshops with professionals

Consultation with survivors

Survey with residents

Theory of Change development workshops

Sessions with VAWG Strategic Board and Operational Groups



Overview of our Strategy:



- Introduction
- What is VAWG?
- Experts through experience
- The local picture: Data
- Our approach
- Our objectives
- Journey of a survivor
- Strategy delivery
- The way forward
- Conclusion

What is VAWG?

Cultural Factors

Sexist views and the idea that men can have more power over women and children, results in abuse being used to maintain this power. Gender stereotypes reinforce this inequality and creates an acceptance of violence and abuse.

Legal Factors

Although abuse is illegal, sadly we see many victims blamed for the abuse and low sentences for abusers. This results in low reporting and abuse being allowed to continue.

Political Factors

The under-representation of women and minority groups in power and politics means they have fewer opportunities to shape the discussion and to affect changes in policy, or to adopt measures to end VAWG.

For example:

the belief that men must be tough, strong, and always in control can result in them exerting control over a partner. These attitudes are harmful to all genders.

For example:

rape convictions remain low and have got worse in recent years, with only 1.6 per cent leading to conviction in 2020. Survivors have told us that this can send a terrible message that rapists can evade justice.

For example:

rape in marriage only became a criminal offense in 1991 and coercive control only became an offense in 2015 in the UK. Both happened because of lobbying by women's groups.



Source: Council of Europe 2021: What causes gender-based violence?



What experts through experience told us:

- Asking the Question
- Training for Professionals
- Sustainability of Support
- Responding to Children



Training and awareness need to be raised amongst professionals but also more widely, so everyone understands the issue



We need to make sure professionals, friends and family can identify abuse and understand how to ask and respond.



The needs of children and young people must be recognised within the strategic response. Their voices must be heard and shape provision.

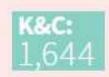


Support needs to be long-term, intersectional and needs led. Professionals need to work together so that the right support is in place.



Data: what do we already know?

It is estimated that the following number of women have undergone Female Genital Mutilation in our boroughs.



wcc: 2,619

If 1 in 5 women (16+) will experience stalking or harassment at some time in their lives the following have experienced this:



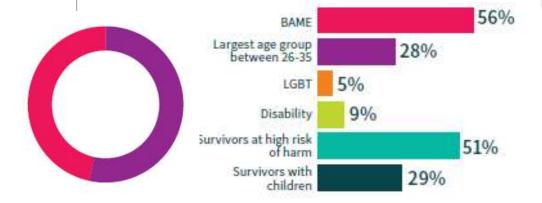
If 3 in 10 women (16+) will experience domestic abuse at some time in their lives the following have experienced this:



Referrals into Angelou Partnership Service:







Personal experience of street harassment:



How safe do you feel at night?







Our approach to ending VAWG:







7. Journey of a survivor

The following map shows the journey of Sarah.

1. Sarah grew up in care and met Mark when she was 17 years old. Mark is 15 years older than her.



2. Mark coerces Sarah into selling sex to finance his drug addiction. Sarah feels tired and anxious. She starts using drugs to cope.



 Sarah becomes homeless and starts to sofa surf. Her social worker is able to eventually get her into a hostel.

8. Sarah feels isolated in the hostel and begins to suffer from depression. Mark continues to contact her and supply her with drugs, making her sell sex to cover the costs.

The hostel can make links with local specialist services and run support groups for women.

Hospital

Police

The hospital has the opportunity to ask about abuse and refer to the hospital domestic abuse advocate.



hanging around outside and call the

police. Sarah is too scared to speak

to the police and the case is closed.

Hostel

9. The hostel regularly see Mark

 Sarah's social worker makes a referral into a specialist service.

Specialist

Service

Partners linking up with each other and making referrals into specialist services can ensure support it available earlier and at the right time.

Opportunities and Improving our Response

It is a case study based on the lived experience of a survivor. The map highlights the challenges Sarah faces, but also shows the various services that come into contact with Sarah and the opportunities for improvements if we work collaboratively as part of our coordinated community response:

 Mark blames Sarah when there is not enough money for drugs. The neighbours call the police after hearing Sarah being attacked. The police have the opportunity to offer support and make a referral to specialist service

4. As she is in residential accommodation, Sarah has a social worker who provides her with support. However, she doesn't talk to him about Mark because she is worried about the consequences.

Police

6. Mark becomes increasingly violent and on one occasion breaks her arm and she has to go to hospital. She is afraid to go home after.

5. To earn more money, Mark tells Sarah to have sex without a condom. Sarah gets pregnant and goes to the GP for an abortion.



GP Visit

The GP has the opportunity to ask about abuse and offer support.

She is nervous with the specialist service worker and worries she will be judged if she shares her experience. She tells the worker she is only doing this to make her social worker happy. She engages as she wants to find a method of contraception. An assessment is done with Sarah and an appointment made a few days later to discuss contraception options.

Sarah feels listened to and is surprised by the quick turnaround for an appointment. Sarah continues to engage with the service and over the course of 12 months, she is offered therapeutic support, access to a substance use support service, financial management and a volunteering opportunity. Sarah has now enrolled onto a college course and is building a new friendship circle. She continues to receive support from the specialist service.

Our Objectives

Our vision is to end violence against women and girls through our coordinated community response approach.

Our theory of change shows how we expect to meet this goal through the following four outcomes.

Our theory of change also shows the problem and barriers we want to address in achieving our goal. Goal

To End Violence against Women and Girls

through our Coordinated Goal Community Response

Outcomes

VAWG is prevented

Survivors are supported Partnership working to end VAWG Abusers are held to account

Outputs -

- Increased knowledge and understanding across communities
- Awareness raised through campaigns and activities
- Stakeholders understand their role in responding and ending VAWG
- Partners follow duties and best practice
- · Referrals are made
- Trauma-informed and intersectional support is in place
- All agencies see ending VAWG as core 'business'
- A shared understanding of need and response
- Increased knowledge, skills and capacity in responding
- Professionals safely challenge abusers
- Abusers will be provided support to reform
- Root causes of abuse tackled

Barriers

Barriers to prevention:

- Lack of understanding of the social and economic impact of VAWG
- Sexism and gender inequality
- Victim blaming

Barriers to support:

- Lack of awareness of VAWG and intersectionality
- Risk prioritised over need
- Victim blaming

Barriers to partnership:

- Competing priorities
- Limited resource and capacity
- ·Clash in cultural approaches
- Victim blaming

Barriers to accountability:

- Limited funding for programmes
- Lack of established best practice model
- Victim blaming and abuser invisibility

Problem

Violence against women and girls (VAWG) and the threat of such violence, exercised through individuals, communities and institutions in both formal and informal ways, violates women and girls' human rights, constrains their choices and agency, and has a negative impact on their health and their ability to participate in, contribute to and benefit from development.

Our Governance Structure:







Action Plan and Next Steps

- This is an ambitious vision which will be realised through a robust action plan.
- We are working closely with residents, survivors, and multi-agency partners to develop the action plan to address our four strategic priorities.
- This action plan will be published in early 2022.
- Initial conversations suggest that these actions will include:
 - Work with schools in a preventative capacity
 - Projects focused on increasing street safety
 - Focused work with survivors from minoritised backgrounds and those who experience multiple disadvantage
 - Work in changing perpetrator behaviour
 - A focus on improving systems and referral pathways.



Thank You

Link to the strategy: https://www.rbkc.gov.uk/community-and-local-life/community-safety/domestic-abuse-and-violence-against-women-and-girls#our-strategic-response-to-vawg

