

legal, policy and financial frameworks for support services for victims of violence against women and domestic violence – meeting the requirements of the Istanbul Convention and sharing promising practices

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In this paper I look at some of the promising practices in the UK that provide support to victims of violence against women and domestic violence. Evidence from research is increasingly showing the crucial importance of specialist support to victims of sexual and domestic violence, and that specialist services are often best placed to cater for the particular needs of minoritised groups such as women from refugee or immigrant communities.

1. Specialist advocacy and support increases victim and children's safety and reduces violence

Since the 1970s there have been specialist NGOs in the UK in the form of shelters (with outreach), advocacy and rape crisis centres. Since the mid-late 2000s such advocacy and support has been augmented by Independent Domestic Violence Advisors (IDVAs), and Independent Sexual Violence Advisors (ISVAs) who may help victims to navigate the criminal justice system and/or provide links to other agencies and support. Successive research studies have found that specialist advocate support for domestic and sexual violence makes women and children safer:

- The Howarth *et al* (2009) study across England and Wales found evidence that the work of IDVAs with mothers had a positive impact on the safety of their children; and the Donovan *et al* (2010) study in Gateshead/Cumbria found that mothers valued the work done by IDVAs with children.
- Donovan *et al* (2010) found a decrease in re-referrals to IDVAs and domestic violence support services as a result of their intervention, and that staff and service users reported increased perceptions of safety for the women, reduced risk, and greater confidence in seeking help.
- Howarth *et al* (2009) found a reduction in domestic violence experiences by victims-survivors across the period of the IDVA intervention, especially in physical abuse, with a smaller reduction in other abuse such as stalking and harassment. There was a clear relationship between intensity of intervention and reduction in domestic violence, with 67% of the victim/survivors receiving intensive support achieving an overall cessation in abuse compared to 44% of those victim/survivors receiving limited support.
- This picture is confirmed by recent data from the national charity Safelives: 53% of IDVA clients reported no abuse in the past month after receiving support from an IDVA; 84% reported feeling safer, 83% that their quality of life had improved, and 89% that they felt confident to access support in the future (Safelives, 2017).

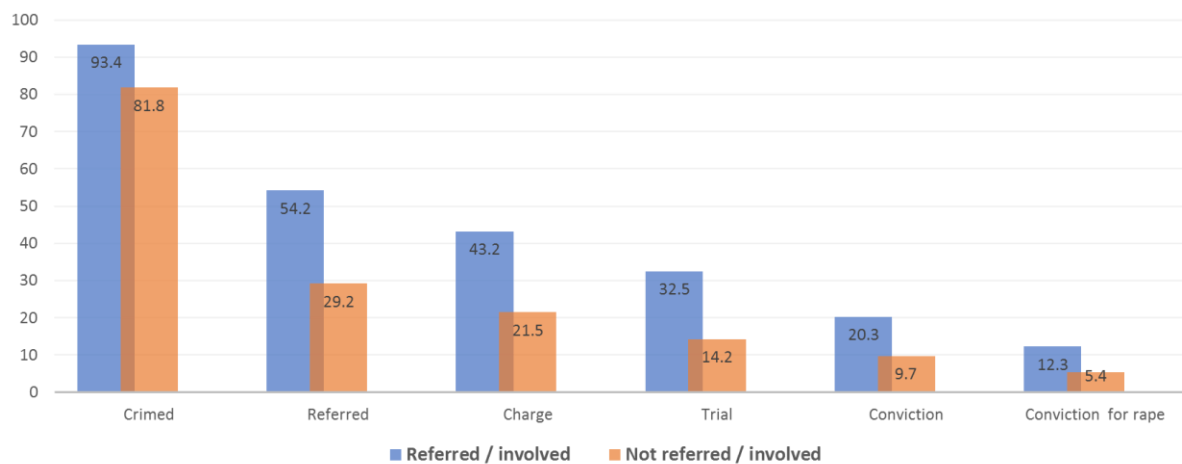
2. Specialist advocacy and support improves criminal justice outcomes for victims/survivors

Sexual violence

- Findings from the recently completed *Justice Inequality and GBV* Project (Justice Project) reveal a significant association between the involvement of specialist sexual violence support services (e.g. Rape Crisis or an Independent Sexual Violence Advisor (ISVA)), and criminal justice

outcomes for victims/survivors (Lilley-Walker *et al*, 2018, *in press*; Hester *et al*. <http://www.bristol.ac.uk/sps/research/projects/current/justiceinequality>).

- Analysis from the Justice Project of 585 cases of rape reported to the police in two English forces in 2010 and 2014 shows that over one-third (36%) had support from a specialist sexual violence service. The chart below shows that, where victims/survivors were either referred to or were already receiving support from a specialist sexual violence support service, the incident was significantly more likely to be seen as crime, and then significantly more likely to progress at every stage of the CJS process, including charge and conviction for rape.



Domestic violence and abuse

Similar analysis in the Justice Project was conducted for 400 cases of domestic violence reported to the police for the same project. Incidents in which the victim/survivor was referred to /supported by a specialist domestic violence advocate (either via Victim Support, from an IDVA, or another specialist DV agency), were significantly more likely to be crimed (48% compared with 32% without such support, significant at $p < 0.001$), and there was significantly more likely to be an arrest made (44% compared with 25% without such support, significant at $p < 0.01$). These cases were slightly more likely to have a charge brought in the case (13% compared with 10% for those without specialist DV advocacy support), and for there to be a conviction (11% compared with 6%).

3. Victims say the strength of specialist support and advocacy is emotional and practical support, and empowerment

In successive studies in the UK, victims have reported that they most value the emotional and practical support offered by specialist advocates:

- Donovan *et al* (2010) found that emotional support provided by IDVAs was the most cited form of support accessed by domestic violence victims/survivors, and was identified by the victims/survivors interviewed as the most important type of support received.
- Hester and Lilley (2017) found that, for some victims, 'justice' or a positive outcome from reporting sexual violence can often relate to being able to move forward with their life, thus linked more to their emotional well-being and 'recovery' than a court outcome. Thus, ISVA and/or IDVA support can lead to 'success' in terms of helping victims/survivors acquire the emotional support they need to recover, delivering an alternative or broader type of justice that goes beyond the formal criminal justice system.
- The strength of ISVAs is their flexibility and ability to target specific needs as and when required, using the skills of 'enabler', 'holder', and 'mender'. This is underpinned by ISVAs' detailed knowledge and understanding of the specific impacts of sexual violence and how sexual violence

impacts individuals and families, combined with a range of skills and roles within and across services, and the possibility of quick referral between them (Hester and Lilley, 2017).

- Victims/survivors of DV and SV interviewed for the Justice Project (Hester et al, <http://www.bristol.ac.uk/sps/research/projects/current/justiceinequality>) reported emotional and practical support and empowerment as key to the value of advocacy:
 - “[the IDVA] accompanied me and stayed with me during that time. I couldn’t have done it without her. So I mean that was absolutely vital. I know there was a major concern that depending on the outcome of the trial and even having to give evidence, because of my PTSD that I would you know end up committing suicide either during the trial or afterwards depending on the verdict. So I know that you know there was a lot of support put in place. I did have access to [sexual violence service] as well at that time. Not for counselling, but it was more you know just being able to pick up the phone” (victim/survivor 001)
 - “Oh God it was so val- ... it was validating. You know I dealt with women, there were no swabs or anything, you know it was very much after the fact. [...] you know [Rape Crisis] ... they believed me, they validated me, they sent me information about what the process was, about what I was experiencing. You know everything that I was going through was validated by them. And they heard me, they brought me in, they pushed me through quite quickly because it was ... you know I had the evidence ... well I had the statement, I needed their support at the time ... and there was something they could do with it” (victim/survivor 149)
 - “[specialist service] has helped me to regain my identity, which I had totally and completely lost. They’ve helped me regain my identity because I had totally forgot who I was. I stopped looking in the mirror and thinking ‘Oh My God, are you really a hippo, are you really that ugly?...I now live my life for me and do things for myself. [specialist service] has helped me regain my identity” (victim/survivor 187)
 - “through [SEXUAL ASSAULT CENTRE] I’d been allocated a ISVA, so she was brilliant in the lead up to it. Sort of took me through a visit to the court beforehand, sort of a few days before. Sort of went down to the police station to re-watch my video.. So yeah, I do sort of feel a bit more empowered” (victim/survivor 138)
 - “I had support from [dv service] so I had support from them, initially it was just sort of outreach stuff. ..Sort of counselling. And then they eventually ... they did a MARAC referral as well I think and they put me in touch with the solicitor that I’d then got which helped a lot. In fact [dv service] were fantastic, if I hadn’t have had them, there’s loads of ... I was going mad trying to find the right kind of solicitor who would know how to deal with these kind of people” (victim/survivor 033)

4. The role of institutional advocacy

Studies also show that specialist advocates and specialist NGOs play an important organisational role, in co-ordinating other services for the victim/survivor, and in joining up other services to respond to domestic and sexual violence:

- Hester (2012) found that a key element in the effectiveness of DV advocates was that they ensured multi-agency working.
- Donovan et al (2010) found that domestic violence victims/survivors accessing IDVA support typically received support from between 3 to 5 partner agencies, and found that multi-agency working was positively correlated with risk reduction for the victim.
- Coy and Kelly (2011) found that specialist domestic abuse advocates played an important “institutional advocacy” role in educating other agencies about the dynamics of domestic abuse.

5. Migrant women

Migrant women – whether refugees or recent immigrants - have **specific needs, which are often best served by specialist services**. Those with No Recourse to Public Funds are especially vulnerable:

- They are particularly vulnerable to specific forms of abuse and considerably more migrant women reported experiencing FGM, forced marriage or honour-based violence. (Hester et al, <http://www.bristol.ac.uk/sps/research/projects/current/justiceinequality>)
- Migrant women face particular barriers of conceptualisation, shame, language, and cultural understandings. They require culturally-sensitive support to disclose and access help (Gangoli, Bates and Hester, forthcoming)
- Migrant women are often more at risk of poverty and destitution. Additionally, a higher proportion were homeless or in refuge, whereas fewer were council tenants or homeowners. Data from Women's Aid services shows that BME women form a much higher proportion of the refuge population (42%) than of the general population (16%), and are thus particularly reliant on such specialist support services. Hester et al., <http://www.bristol.ac.uk/sps/research/projects/current/justiceinequality>

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