



Violence Against Women and Girls

Wolverhampton's
Multi-Agency Strategy
2016 - 2019

Foreword

Violence Against Women and Girls (VAWG) has been cited as being perhaps the most pervasive violation of human rights across the globe and continues to have devastating consequences for millions of victims and children.

Too many families are blighted by the long term effects of these violent crimes in all its forms, which have cross-cutting implications; they are crimes and community safety issues, public health issues, vulnerable adult and child protection issues, as well as societal issues in terms of community tolerance.

The Safer Wolverhampton Partnership (SWP) is leading our local response to VAWG. SWP is determined to work towards eliminating these unacceptable practices in our city and adopting a zero tolerance approach where they are perpetrated. We will do this by working closely with other boards where there are shared responsibilities, empowering our communities with facts and help-seeking pathways, training our front line staff in effective responses, holding perpetrators and offenders to account, and safeguarding and supporting victims, survivors, and children.

SWP will be working collaboratively with Wolverhampton Domestic Violence Forum (WDVF) to inform and drive forward implementation of this strategy. WDVF is a

long-standing partnership organisation that brings together specialist services to shape VAWG strategic responses and coordinate multi-agency delivery. The board develops, implements, monitors, and reports on multi-agency working towards preventing VAWG. The Forum's aims align directly with the strategy outcomes, namely to reduce serious harm from VAWG including homicide prevention, reduce the prevalence and repeat rate of VAWG, and to increase the number of offenders brought to justice.

We recognise that the success of this strategy will lie not only with a strengthened agency response, negotiating revised approaches with our partners to achieve improved frontline practice, but also by changing the culture of acceptance within our communities. By working within those communities where there is a heightened risk we can increase confidence in reporting traditionally 'hidden' crimes, stem the cycle of abuse, sometimes spanning generations, and reduce vulnerability.



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This is the second such strategy in Wolverhampton, and we recognise the significant progress that has already been achieved by close partnership working over recent years. We all have a part to play in building on this success, mobilising our communities, as well as using a range of partners' resources and powers. We will develop more effective ways of working.

This will include implementing a multi-agency safeguarding hub (MASH) in the city in order to achieve our shared outcomes of reducing the prevalence of VAWG, reducing repeat victimisation, bringing more offenders to justice and reducing serious harm.

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Cover photo: This was part of the '**Orange the World' 16 Days of Activism Against Gender-Based Violence** campaign: www.unwomen.org/en/what-we-do/ending-violence-against-women/take-action/16-days-of-activism

Introduction

The Safer Wolverhampton Partnership (SWP) has the strategic lead for addressing Violence Against Women and Girls in Wolverhampton. The Partnership is committed to addressing the root causes of VAWG, challenging perpetrators and holding them to account, and safeguarding and alleviating the wide ranging effects of all forms of VAWG on victims, survivors, their children, and our communities.

Whilst the Violence Against Women and Girls Strategy name acknowledges the gendered nature of domestic and sexual violence, in that the majority of victims are female, it cannot be over-emphasised that the national and local strategies recognise that there are both female and male victims and perpetrators and therefore encompass work around women and girls, and also men and boys.

The Violence Against Women and Girls term covers five key themes. These are:

- Domestic violence (DV)
- Sexual violence (SV)
- Female genital mutilation (FGM)
- Honour-based violence (HBV), and
- Forced marriage (FM)

These crimes are cross-cutting issues, requiring robust responses around child protection and safeguarding children and adults, as well as sector specific support such as from education and health. Consequently there are a number of shared responsibilities for VAWG across a range of boards in the city, in particular the Safeguarding Children and Adult Boards.

Building on the significant progress made against the previous strategy, this refreshed strategy raises numerous challenges for our partnership approach; partners continue to review their core operations, managing budgetary constraints and organisational restructures against a backdrop of increasing

demand. A greater collaborative effort is therefore needed in the commissioning and delivery of services in order to realise efficiencies, mitigate risk, address potential gaps in service, and shape new approaches.

Wolverhampton is making fundamental changes to its model of safeguarding children and adults in line with emerging good practice. The current plans include establishing a multi-agency safeguarding hub (MASH) for children early in 2016, with provision extended to include adults later in the year. This will further strengthen our response to assessing and responding to the city's safeguarding needs.

SWP will work with partner boards to develop an integrated response to VAWG through well-informed policies, systems, and leadership. The partnership response will similarly place the safeguarding of survivors and their children as paramount, with development of risk-based responses.

Perpetrators will be held to account, and their behaviours challenged through effective perpetrator and offender management processes. A risk-based stepped model response to dealing with perpetrators and offenders will be deployed, recognising those who are ready to address their behaviours, and those for whom enforcement is required.

The burden of progressing criminal proceedings has traditionally been placed on victims and survivors, even in our specialist domestic violence courts. In our drive to



reduce repeat victimisation, and in line with national policies, we will seek to deliver an effective criminal justice system that places the burden of responsibility on offenders.

The Partnership also acknowledges the critical role that our communities need to play in addressing VAWG in all its forms. The strategy addresses the importance of our communities having a shared perspective that all VAWG is unacceptable, and for communities to be conversant in accessing help, seeking advice and understanding reporting pathways.

It is important that our local approach is aligned to regional and national efforts to address VAWG if our local impact and opportunities for joint working are to be maximised. This local strategy is strengthened by both national and regional policies which will support delivery and aid the development of innovative approaches.

National Context

In 2010 the Government launched its objectives for addressing VAWG, followed by the national 'Call to End Violence' and development of a national VAWG Strategy in 2012 and subsequent action plans.

The declaration included in the national strategy enshrines women's rights to live without the fear of violence and abuse and demonstrates the UK's ratification of the 'UN Convention on the Elimination of all Forms of Discrimination against Women'.

The national and local VAWG Strategy upholds this declaration, encompassing domestic violence and abuse, sexual violence and abuse, honour based violence, forced marriage, and female genital mutilation.

Recent years have seen a significant shift in government policy to aid local delivery against VAWG. This has been supported by the introduction of new legislation requiring domestic homicide reviews to be undertaken

with a view to learning lessons where a domestic violence death has occurred; a range of new tools and powers including DV, FM and FGM protection orders, a national DV disclosure scheme, the criminalisation of FM and FGM and mandatory reporting of FGM by registered teaching, social care and health practitioners.

Regional Context

Across the West Midlands a multi-agency response to tackling VAWG has also gained momentum in recent years as efficiencies of cross-border working are realised. The seven local authority areas spanning the West Midlands metropolitan area have a strong established history of collaborative working, covering not just the Community Safety Partnerships (CSPs), but also encompassing local authority leads, safeguarding boards and the work of the West Midlands Police & Crime Commissioner (PCC).

The PCC has committed to improving services for victims of crime, including provision of a regional victims' service and establishment of an independent Victims' Commission to inform a wide range of provision across the West Midlands. The PCC's Strategic Police & Crime Plan also highlights the commitment to protect people from harm, tackling hidden crimes including FGM, HBV and FM. Similarly, through the work of the Preventing Violence Against Vulnerable People Programme, new approaches are being developed with a view to sharing best practice with local areas. This includes establishing an FGM task force following a review of FGM practice across the region and commissioning a pan-West Midlands DV perpetrator programme.


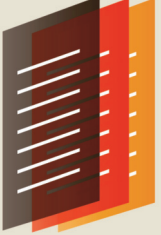

There are already positive examples of joint working that can be cited across the West Midlands. West Midlands DV minimum standards were approved by all seven areas in 2014, setting out eleven key principles of working. Wolverhampton is developing plans to meet these standards. In 2014, research funded by the PCC to identify strategic learning from Domestic Homicide Reviews (DHRs) was disseminated to West Midlands' strategic partners and forums. Opportunities for future cross-border working will continue to be identified during the life of our refreshed VAWG strategy.



VAWG Strategy (2012-2015) Successes

Since Wolverhampton's VAWG Strategy (2012-2015) partnership working has significantly strengthened. SWP and safeguarding boards' member organisations have adopted and implemented an Overarching Domestic Violence Protocol, new legislation has been implemented and the business case for evidencing joint working across the partnership is influencing mainstreaming resource allocation and joint commissioning opportunities; for example, a specialist Independent Domestic Violence Adviser post based at our local hospital emergency department, has now been mainstreamed following a successful pilot.

A summary of some of the successes from the 2012-15 VAWG strategy is detailed below.

		
Processes	Policy	Partnership working
<ul style="list-style-type: none"> • MARAC (Multi Agency Risk Assessment Conference - manages high-risk cases) process reviewed and improved • MARAC coordinator employed • Mainstreaming of services, ie, IDVA post in A & E • Set-up and completion of a two-year non-mandated DV perpetrator programme • Continuation of critical processes, eg, specialist domestic violence court, MARAC and co-located team safety planning meetings, Barnardo's Joint (multi-agency) Screening meetings of children and pregnant women affected by DV 	<ul style="list-style-type: none"> • Overarching Domestic Violence Protocol adopted and implemented • MARAC Protocol implemented • Development and launch of the first UK multi-agency joint adult and child Forced Marriage and Honour-Based Violence Protocol • Safeguarding board organisations have put in place policies around DV 	<ul style="list-style-type: none"> • WDVF Multi-Agency Executive Board continuing focus on DV • Two conferences, media publicity, local events, literature, and campaigns to raise awareness of the newer VAWG subject areas of forced marriage, honour-based violence, and female genital mutilation • Regional Domestic Homicide Review learning event • Closer links with key boards across the city, ie, safeguarding boards

Facing our Challenges in Partnership

It is now widely recognised that VAWG impacts widely on a range of partners and both the individual and collective service response. In local authorities, DV is a key contributor towards families in need; included as a specific criteria within phase two of the Troubled Families programme since April 2015, of the 468 families eligible for the programme, almost half have been identified as meeting the DV/abuse criteria.

DV is recognised by many sources as a key predictor for looked-after children (LAC), as well as throughout the child in need and child protection population. Indeed, alongside substance misuse and mental health problems, domestic violence is one of the three factors that are viewed, individually and collectively, as indicators of increased risk of harm to children and young people. Local and national evidence demonstrates that there is a significant cross-over of children becoming looked after where their parent(s) were a past or current victim of DV or where they have experienced and/or witnessed domestic violence.

Whilst the crime types span all age groups, there are a number, where cultural practice within certain communities places children and young people at a significantly higher risk of harm. Young girls within recognised communities are particularly vulnerable to FGM; the Forced Marriage Unit suggests young people aged 16-25 are most at risk of being forced into marriage, whilst reported cases of HBV involved victims aged 16-17. Local levels of risk within the city are currently being assessed.

VAWG issues are not widely understood by practitioners on the frontline, yet there is an expectation that partners must play an increased role in identifying risk and responding effectively. There is often a lack of awareness across agencies, especially amongst those operating on the frontline, and an increased need for training to raise awareness and develop the capacity and confidence of staff to respond.

The Keeping Children Safe in Education guidance issued to schools in 2015 sets out clear expectations of schools and individual staff in identifying risks associated with FGM, alongside other safeguarding responsibilities. Practical support is still needed, however, to ensure schools are appropriately equipped with age-appropriate resources with staff up-skilled to fulfil these new requirements. The strategy will continue to work closely with schools on their responsibilities for promoting safe relationships amongst young people.

With an escalation in the numbers of victims seeking support, any expectation that partners can purely respond by allocating increased resources needs to be managed. Despite improvements made in the partnership approach to respond to VAWG, an effective city-wide response must be developed with a shift in focus from crisis management to prevention, to stem the growing demand for high risk VAWG support

services; maintaining the status quo is not an option. As a partnership, we need to move towards a position where we are preventing the cycle of abuse, identifying and supporting victims at a much earlier point to stem the escalation towards crisis and addressing abusive behaviours with perpetrators.

This required shift in practice has already been recognised by some partners; organisational restructures are taking account of the growing need to target vulnerability. The underlying principle of developing a MASH is aimed at improved sharing of information allowing for a speedier identification of individuals and swift access to the relevant multi-agency support. Similarly, West Midlands Police has reorganised its Public Protection Unit and increased internal staff capacity to cater for demand; since 2013, Operation Sentinel has raised the profile of vulnerability across a number of crime types to galvanise partner support.

Partners' commitments have been reflected in organisational pledges made against delivery of VAWG outcomes. Also required is an integration of the VAWG response within the core business of our partners; informing future commissioning intentions and developing innovative approaches to this growing demand.



VAWG Strategy 2016-2019 Outcomes

VAWG Strategy Objectives, Outcomes and Principles

Our Objectives

Increase the early identification of and intervention with victims of VAWG by utilising all points of contact with front line professionals

Build cross-agency skills and capability to provide effective VAWG advice and support services

Improve the criminal justice response to VAWG

Support victims through the criminal justice system and manage perpetrators to reduce risk



Outcomes

- Reduce serious harm resulting from VAWG including homicide prevention
- Reduce the prevalence of VAWG
- Reduce the rate of repeat incidents for domestic violence
- Increase the rate of reported VAWG offences brought to justice

Our Principles

Survivors/victims and perpetrators have access to services without discrimination due to disability, sexual orientation, race, religion/faith, culture, age or income group. Women-only services will be supported as will ensuring men's access to other services.

Services to survivors/victims and perpetrators will be designed and proportionate to the level of risk they face or pose.

We are committed to providing quality services and will draw on national and international best practice and standards

Although our response to the growing challenges of VAWG, whether addressing high volume crimes such as DV and SV or low/nil reporting for FGM, HBV will vary depending on the crime type, all will require a partnership approach to deliver effectively. Each of the VAWG strands is detailed below, outlining our current position and areas of early focus.

Domestic Violence

Domestic violence is defined as ‘any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence, or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass but is not limited to psychological, physical, sexual, financial, & emotional abuse’.

Legislation such as the Domestic Violence, Crime & Victims Act, 2004 has extended partnership response capability. Domestic Violence Protection Orders, introduced in 2014 permit the police to apply to court for a short term exclusion of the perpetrator from the victim's home; the Domestic Violence Disclosure Scheme (Clare's Law) allows police to disclose information, under the right circumstances, about a partner's previous abusive and violent history.

The number of recorded domestic abuse incidents recorded as crimes and non-crimes by the police rose by 27% in 2014/15. This increase in reporting is in part attributable to more accurate recording on police systems, an increase in incidents reported in public places that have been witnessed and reported by third parties and public confidence in reporting. DV is known to have the highest repeat rate of any crime and to escalate in frequency and severity over time, so it is important to monitor repeated reports of DV as an indicator of increasing risk, and the need to focus on managing that risk.

Despite this increase, the British Crime Survey recognises that ‘the under-reporting of crime to the police is known to be particularly acute for intimate violence offences’. At present, Wolverhampton has insufficient specialist capacity to manage

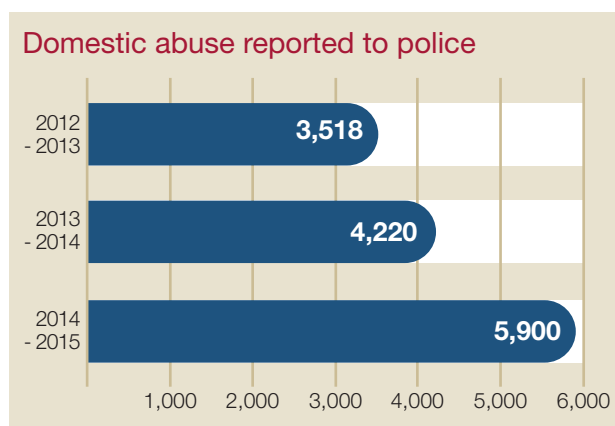
standard and medium risk cases within the city; with an increase in the number of cases escalating to high risk.

The increasing volume of domestic incident reports is impacting on existing services and the number of high-risk cases taken to Multi-Agency Risk Assessment Conference (MARAC), has doubled in 2014/15 compared to the previous year.

Four deaths deemed domestic-related in Wolverhampton have met the criteria for a Domestic Homicide Review (DHR) since 2011. Of these, one was not taken forward due to the nature of the case and three have been completed and published. Learning from these reviews has aided the move towards integrated partnership working.

Areas of Early Focus

- A review of collective resources across partners is required if we are to meet the growing demand for services.
- More effective management of low-medium risk cases through safety planning to avoid escalation of risk.
- Greater emphasis needed on reducing repeat victimisation.
- Improved provision for the management of complex cases.
- Development of a stepped risk model for managing offenders and perpetrators to shift the focus of responsibility and accountability from the victim to the offender.
- Direct preventative work in schools and other settings around positive relationships and protective behaviours.
- Embedding learning from DHRs.



Female Genital Mutilation

Female genital mutilation refers to all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons. The Female Genital Mutilation Act (2003) makes it illegal to practice FGM in the UK, to take abroad British nationals or permanent UK residents for FGM, and to aid FGM being conducted abroad.

Wolverhampton has long rejoiced in being a well-integrated multi-cultural city, currently with a 35.5% non-white British population. Alongside the advantages of our diversity, the city is home to residents who are from communities where forced marriage, honour-based violence, and female genital mutilation are prevalent, yet of significant concern is the fact that we have received few or no such reports over the period of the previous strategy. As these crimes are often perpetrated by family members, there is an understandable reluctance for victims to report to police or seek support. Unicef data¹ estimates the majority of FGM practice is carried out on girls under 14, with the majority cut before the age of five, closely followed by those aged five to nine.

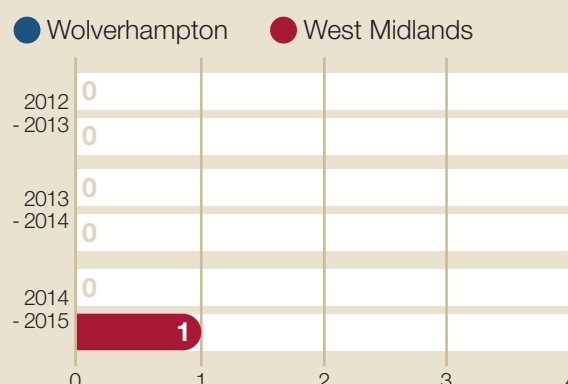
There is a need to address significant knowledge gaps and challenge accepted practice within our communities and amongst young people to dispel myths, and present the legal and medical facts, and consequences of these crimes to make it easier for victims to report with confidence. We also need to train our front line staff in identifying risk of FGM and how to respond appropriately using the full range of powers available to the partnership.

Areas of Early Focus

- Develop an improved understanding of settled communities where there are high rates of FGM prevalence within countries of origin and how to reach them.
- Raise awareness within targeted communities to emphasise the full legal, health and safeguarding implications of FGM.
- Seek feedback from survivors to shape future services to meet the needs of our diverse communities.
- Raise awareness of FGM amongst frontline practitioners and increase understanding of mandatory reporting requirements.

Female genital mutilation

FGM across the West Midlands is significantly under reported given known vulnerable communities reside in the area.



¹UNICEF FGM prevalence data female populations 2013

Forced Marriage

A forced marriage is a marriage in which one or both spouses do not (or in the case of some adults with learning or physical disabilities, cannot) consent to the marriage and duress is involved. Duress can include physical, psychological, financial, sexual and emotional pressure. Coercion is likely to have been used with one or both spouses; by family members, friends and the wider community. This may include: threats of violence, being held against their will, emotional threats and harassment, such as not being allowed to go anywhere unaccompanied. The practice of forced marriage is not confined to one culture or religious group and can happen regardless of ethnicity, culture, religion, disability, age, gender and sexuality.

A forced marriage is different from an arranged marriage which is a respected tradition in many cultures where both parties give their consent.

FM is now a specific offence under s121 of the Anti-Social Behaviour, Crime and Policing Act 2014 which came into force in June 2014. Section 1 of The Forced Marriage (Civil Protection) Act 2007 inserted provisions into the Family Law Act 1996 enabling the courts to make Forced Marriage Protection Orders to prevent forced marriages from occurring and to protect those who have already been forced into marriage. The order can include prohibitions, restrictions or requirements to protect a victim from a spouse, family member or anyone else involved. Involvement can include aiding, abetting, counselling, procuring, encouraging, or assisting another person to force or attempt to force a person to marry.

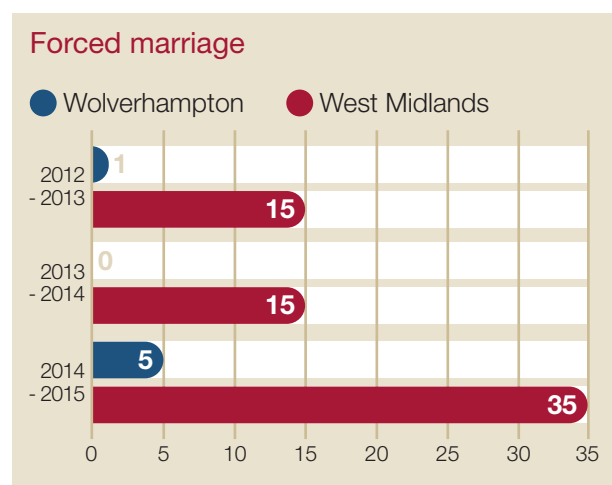
The Mental Capacity Act 2005 starts from the basis that all adults, (unless proved otherwise), have the capacity to make decisions. There is

no legal basis on which someone can agree to marriage, civil partnerships or sexual relations on behalf of someone who lacks the capacity to make these decisions independently. However, in some instances, families may believe they do have the right to make decisions regarding marriage on behalf of their relative.

There were 35 recorded FMs across the West Midlands during 2014/15; of these, five related to Wolverhampton. It is accepted, however, that this is not an accurate reflection of the scale of this practice. Third sector reporting such as the self-referrals received by the national specialist organisation, Karma Nirvana, provide a clearer indication of support needs; the organisation recorded 42 self referrals relating to FM and HBV from Wolverhampton residents during 2014.

Areas of Early Focus

- Refresh of the Wolverhampton FM and HBV protocol for frontline practitioners.
- Raise awareness of FM amongst frontline practitioners.
- Raise awareness across communities of the illegality of FM.
- Support schools to deliver key messages regards FM within the curriculum.



Honour-Based Violence

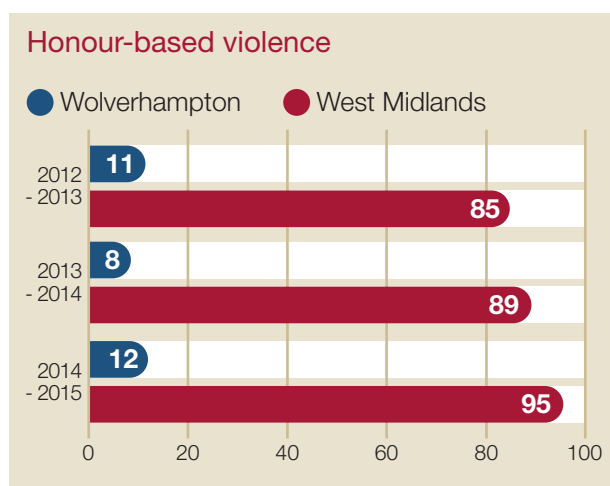
Honour-based violence is defined as 'a crime or incident, which has or may have been committed to protect or defend the honour of the family and/or community'.

There is no specific offence of 'honour-based crime'. It is an umbrella term to encompass various offences covered by existing legislation. HBV can be described as a collection of practices, which are used to control behaviour within families or other social groups to protect perceived cultural and religious beliefs and/or honour. Such violence can occur when perpetrators perceive that a relative has shamed the family and/or community by breaking their honour code. Punishment can be imposed because of a belief, actual or perceived, that a person has not been properly 'controlled' and is failing to conform to family or community expectations. Linked offences can include threats, theft (eg, passport), assault – physical or sexual, kidnap, abduction, imprisonment or rape.

Police levels of recorded crimes linked to HBV show an increase in reporting; there were 12 associated crimes recorded during 2014/15; 2015/16 has seen 14 such crimes reported during the first half of the year.

Areas of Early Focus

- Refresh of the Wolverhampton FM and HBV protocol for frontline practitioners
- Raise awareness of HBV amongst frontline practitioners
- Raise awareness across communities of the illegality of HBV-related crimes and engage communities to challenge cultural norms
- Support schools to deliver key messages regards HBV within the curriculum.



Sexual Violence

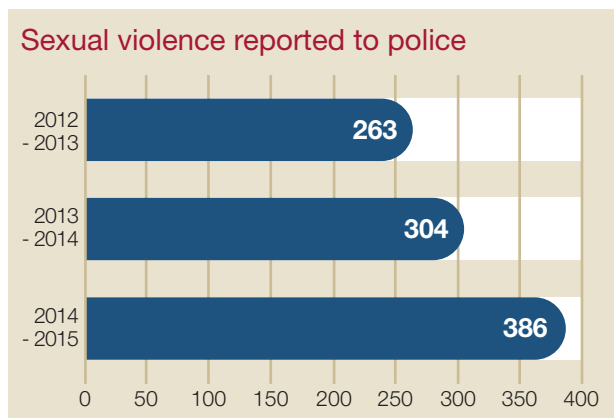
Sexual violence is defined as 'any behaviour perceived to be of a sexual nature, which is unwanted and takes place without consent or understanding'. The Sexual Offences Act 2003 protects individuals from abuse and exploitation, and is designed to be fair and non-discriminatory. Recorded sexual violence offences have increased 17% in 2014/15 compared to the previous year with 256 crimes recorded. As an under-reported crime, this trend is viewed as indication of an increased confidence in reporting. At a national level, historic reporting of sexual violence increased following a series of high profile sexual abuse scandals and publication of the Lampard report in Feb 2015; a trend which is reflected in local reporting.

The quality of services for victims of sexual assaults has been improved by a West Midlands Sexual Assault Referral Centre (SARC), with local Independent Sexual Violence Advisor (ISVA) services providing specialist advice and support.

Areas of Early Focus

- Promotion of reporting and care pathways including to/from the SARC.
- Promoting with frontline staff, the links to child sexual exploitation (CSE).

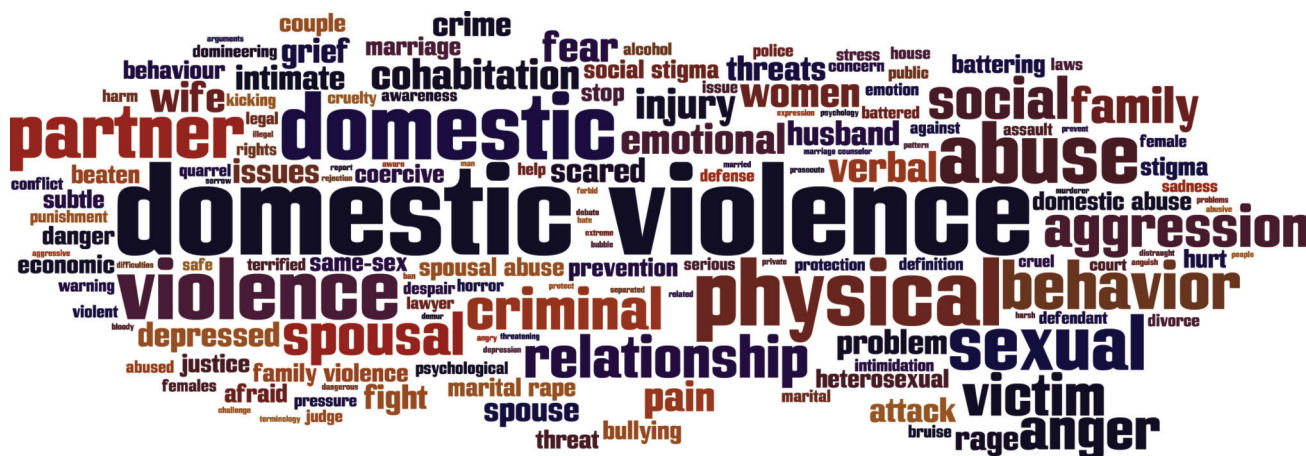
- Strengthen care pathways for specialist adult and child provision.



In addition to bespoke delivery around each of the VAWG strands, there will be more generic activity spanning all strands:

- Deploy all powers available through the partnership to protect victims and manage offenders/perpetrators.
- Embed risk-based decisions and responses across frontline practice.

- Develop and apply robust criminal and civil justice responses.
- Develop systematic data monitoring and analysis.
- Embed learning from homicide reviews & serious case reviews, and evidence changed practice.
- Strengthen governance and reporting arrangements.
- Develop clear referral pathways which are understood by communities and organisations.
- Develop a programme of staff training.
- Develop robust, cross-agency policies and procedures.
- Support schools to cascade key messaging to pupils.



Delivery

Underpinning the strategy will be an action plan, WDVF Multi-Agency Executive Board will develop and monitor a VAWG Multi-Agency Action Plan, the purpose of which is to set out the main actions that will move us closer to achieving our strategy objectives and outcomes.

The action plan also acknowledges that work against the newer strands of its work will be at an earlier stage of multi-agency understanding, and the actions will reflect the need to initially concentrate on addressing these training and awareness raising needs.

It is well documented that VAWG increases in severity and frequency if left unchecked, and that early intervention is critical to prevent this escalation. Unfortunately, despite high reporting numbers, research confirms that domestic and sexual violence remains severely under-reported by approximately 90%. The strategy and action plan requires a commitment from partners to review their delivery contributions against objectives. Alongside this will be active approaches to seek funding from external sources available through voluntary sector bids to foundation trusts and other grant providing sources.

The key themes of the action plan are **Prevention, Provision, Protection & Justice, and Performance.**



The action plan will be monitored through WDVF's Executive Board, and elements reported to the Safeguarding Children and Adult Boards and SWP Local Police and Crime Board on a quarterly basis. The action plan will be reviewed annually.

There are clear links and overlaps between VAWG and other high profile issues including CSE, gang and youth violence and modern day slavery. In particular familial domestic violence is a common feature in many known CSE cases and gang-related abuse. All involve perpetrators who abuse power and control, and many feature some, if not all of the following – physical violence, emotional blackmail, financial pressure such as keeping someone indebted, misuse of substances as a control mechanism, and isolation from support networks to aid the manipulation and grooming of their victims. All are highly under-reported crimes. This strategy will ensure that work is cross-referenced across these subject areas.

Education and awareness raising are key strands in our response to VAWG. We will continue to promote healthy relationships and protective behaviours work in schools and other settings as part of our prevention strategy.

The VAWG strategy and action plan do not sit in isolation; VAWG cuts across a number of other national, regional, and local strategies. There are well-established relationships with Wolverhampton's various strategic boards in relation to some of the shared areas of responsibility for these cross-cutting issues.

Delivering in Partnership

A variety of stakeholders were engaged as part of the VAWG strategy development, and pledges made in support of strategy delivery. These pledges continue to be further developed with partners to contribute towards delivery of strategy outcomes.

A full commitment to the development and implementation of the strategy has been made by members of SWP, WDVF, and Adult and Children's Safeguarding Boards. A full list of organisational membership is provided in Appendix 1.

Model of Delivery

The UK national model of best practice in dealing effectively with violence against women and girls is that of a coordinated community response model.

This coordinated community response model relies upon communities sharing a perspective and agreed approach to counter VAWG; for those who work in the public, voluntary, or private sector, and those who are relatives, friends, or colleagues of anyone experiencing VAWG. This model requires a broad community ownership, so it becomes everybody's business whether you are a police officer, social worker, health visitor, GP, magistrate, housing officer, teacher, neighbour, friend, colleague, brother, employer, etc. It requires a collective response advocating that VAWG is not acceptable, will not be tolerated, and that it will be dealt with appropriately by holding perpetrators to account and safeguarding victims/survivors and their children.

In order to achieve a coordinated community response to VAWG in Wolverhampton underpinning our strategy outcomes, the action plan focuses on achieving the following fundamental building blocks:



The Safer Wolverhampton Partnership is actively seeking and capturing the views of our communities and our service users in developing the VAWG action plan to ensure that we take into account their needs and experiences. This engagement will utilise existing consultation methods and be further developed through arrangements with our partner boards and their member organisations.

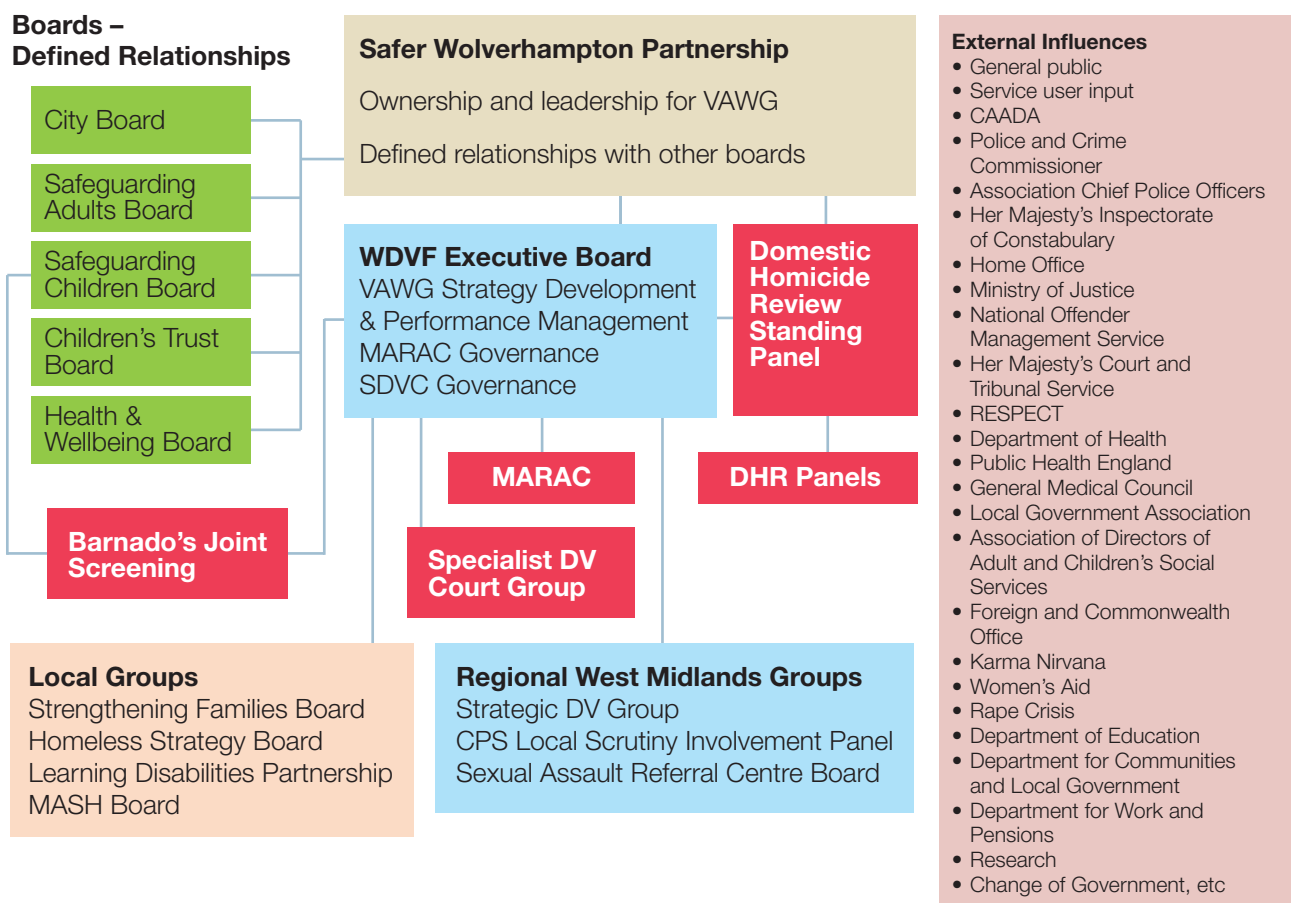
The Wolverhampton Overarching Domestic Violence Protocol 2013 provides the framework for organisations to contribute to the coordinated community response. The Safer Wolverhampton Partnership Board, and the Safeguarding Children and Adult Boards have endorsed this protocol, and member organisations are working towards complying with the eight organisational requirements included in the protocol (Appendix 2). This protocol has been incorporated into a West Midlands Domestic Violence Standards document which is being integrated into partners' core business.

Equality and Diversity

It is fundamentally important to emphasise that the national strategy name is an acknowledgement of the gendered nature of domestic and sexual violence and abuse, in that the majority of victims are female.

The strategy also acknowledges and aims to address the additional barriers to seeking help for particular groups including male victims, our black, Asian, minority ethnic, and refugee communities, survivors with disabilities, older victims, victims under 18 years, lesbian, gay, bisexual, transsexual, and transgender communities, those with no recourse to public funding, and those with complex needs including mental ill-health and substance misuse issues. One of the 11 West Midlands Domestic Violence Standards specifically covers issues of equality and diversity. There are specific cultural aspects of DV, some of which have arisen in DHRs, and recommendations in respect of these are being progressed within the VAWG strategy implementation. A full equalities analysis has been completed to inform our approach.

VAWG Governance and Inter-Relation Diagram



Appendices

Appendix 1

Membership list of Safer Wolverhampton Partnership, Wolverhampton Domestic Violence Forum Membership, Wolverhampton Safeguarding Adults/Children Boards Membership:

- Aspiring Futures
- Black Country Partnership Foundation Trust
- Business Sector representative
- Care Quality Commission
- Child and Family Court Advisory & Support Service
- City of Wolverhampton College
- City of Wolverhampton Council
- Clinical Commissioning Group
- Community Rehabilitation Company
- General Practitioner representative
- HM Prison Service
- Lesbian, Gay and Bi-sexual Transgender Network
- National Probation Service
- Office for Policing & Crime
- Recovery Near You
- Resident Representatives
- Royal Wolverhampton Trust
- Schools representatives
- Service User Involvement Team
- The Haven Wolverhampton
- Third Sector representatives
- West Midlands Ambulance Service
- West Midlands Fire Service
- West Midlands Police
- Wolverhampton Domestic Violence Forum
- Wolverhampton Homes
- Women of Wolverhampton

Appendix 2

Overarching Domestic Violence Protocol 2013 - 8 organisation requirements:

- Domestic violence policy for service users.
- Domestic violence workplace policy.
- Include a routine question about domestic violence on service user referral forms.
- Train staff in domestic violence to an appropriate level depending on their role.
- When domestic violence is disclosed, to undertake a DASHH risk assessment or have an agreed referral pathway for a DASHH risk assessment to be undertaken.
- Where the risk assessment identifies high risk of serious harm or homicide, to have a referral pathway to Multi-Agency Risk Assessment Conferences (MARAC).
- Maintain contact details of appropriate local help, information and leaflets to signpost victims to specialist support agencies.
- Commitment to participating at and learning from domestic homicide reviews.

Appendix 3

Glossary of Terms

CSE

Child sexual exploitation

CSP

Community Safety Partnership

DHR

Domestic Homicide Review

DASHH

Domestic abuse, stalking, harassment and honour-based violence risk assessment

DV

Domestic violence

FGM

Female genital mutilation

FM

Forced marriage

HBV

Honour-based violence

ISVA

Independent Sexual Violence Advisor

IDVA

Independent Domestic Violence Advisor

LAC

Looked-after children

MARAC

Multi-Agency Risk Assessment Conference

MASH

Multi-agency safeguarding hub

PCC

Police and Crime Commissioner

SARC

Sexual Assault Referral Centre

SV

Sexual violence

SWP

Safer Wolverhampton Partnership

VAWG

Violence Against Women and Girls

WDVF

Wolverhampton Domestic Violence Forum