

Equality Impact Assessment Form (Page 1 of 2)

Title of EIA/ DDM: Commissioning of Domestic and Sexual Violence Service

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Department: Strategy & Resources

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Service Area: Commissioning

Strategic Budget EIA Y/N (please underline)

Author (assigned to Pentana):

Brief description of proposal / policy / service being assessed:

The Crime and Drugs Partnership (CDP) is commissioning Domestic and Sexual Violence Services (DSVA) on behalf of the DSVA Joint Commissioning Group (JCG). The Partners include Nottingham City Council (NCC), including Public Health, the Office of the Police and Crime Commissioner and Greater Notts Clinical Commissioning Group. The contracts will be for an initial period of 3 years with possible extensions of up to a further six years. The aim of these services will be to support survivors and victims of domestic and sexual violence to safety and or recovery from abuse and violence. These services compliments other provision within the DSVA pathway.

In summary the proposals are as follows:

Domestic Violence Service for Female Survivors: This service will bring together four services, which are being run separately. The four existing services are the core independent domestic violence advocate, teen advocate, RISE outreach service and the Stronger Families service. The rationale for bringing these four services together was that it would deliver greater value for money as it would eliminate some duplication across all four services and lower the management costs. All four services are currently being provided by Women's Aid. The DSV JCG have made the decision to go out to tender for this new service. This approach will also provide greater flexibility to the successful provider in meeting the needs of the female survivors. The costs saved in management is being reinvested into direct provision for female survivors. The service will:

- Support female survivors and children to safety in their home and outside of the home
- Support female survivors and children techniques to protect themselves when faced with domestic and sexual violence incidents
- Support female survivors and children in court when they are seeking safety from the perpetrator
- The service aims to reduce costs associated with DSVA by empowering female survivors and children.

Independent Domestic Violence Advocate for Male Survivors: This service is specifically for male survivors of DSVA. The proposal is to award Equation a contract rather than go out to tender. The rationale was that this would avoid confusion and uncertainty amongst service users and provide stability of the service. This was seen as important as this cohort is known to be reluctant to access appropriate support. The review identified the need for a different type of support and expertise, which is required for this cohort, and potential risk of safety amongst female survivors accessing support. Analysis and research has shown that male survivor's needs are different to the needs of female survivors. It also showed that around half of males seeking to access survivor support are subsequently found to be the primary perpetrators of domestic and sexual violence towards female survivors accessing support. From a safeguarding perspective, it was important to separate the female and male survivor support services. The service will:

- Support male survivors to safety in and out of their home
- Support male survivors with any legal process that they may need to follow
- Support male survivors to access appropriate services, which will support them to recovery as well as moving away from an unsafe environment.

Refuge Provision (three are being procured):

Refuge provision is an important part of the Council delivering its statutory duty under the Housing Act 1996, Care Act 2014 and the Children and Social Work Act 2017. Refuges provide a temporary safe and secure environment for some of the most vulnerable women and children fleeing domestic and sexual violence. The proposal is to award this contract to the current providers. The rationale for this is that a procurement process in sourcing both accommodation and support would be unlikely to secure suitable accommodation and support. This rationale is based on previous experience of NCC officers and the experience of other Councils. One of the refuges has been set up to meet the needs of Black, Asian, ethnic minority (BME) female survivors, and their children of DSVAs. The accommodation is set up in such a way that it allows flexibility in meeting the needs of BME survivors. There is also a different expertise required within the staff team to meet the needs of its citizens (understanding cultural pressures, dealing with issues such as female genital mutilation, honour based crime, immigration issues etc.). This service is key to:

- Securing a place of safety for female survivors and children fleeing DSVAs
- Supporting women and children to have the space to recover from their trauma
- Supporting women and children to access appropriate services
- Supporting women and children with legal processes (for example, securing an injunction, pursuing criminal charges against the perpetrator etc.).

Domestic Helpline Service (24 hour Freephone): This service is available to all survivors of DSVAs (male, female and children). The proposal is to award a grant to Women's Aid. The rationale for this is that CDP contributes a financial contribution to the overall cost of running the helpline. It does not meet the full cost of running a helpline. The current provider has successfully fund raised monies for this service. The CDP would not be able to commission a Domestic Helpline Service on its current contribution. Professionals and previous users of the service have confidence within this service also recognise the number. The number belongs to the current provider and would not be transferrable to a new provider. The helpline is aligned to the Council's Homeless Gateway for referrals into refuge provision and is a key part of the national network of access to refuge provision for survivors and children. The service aims to:

- Support survivors of DSVAs to consider all the options available to them
- Support them to access the most appropriate service
- Link survivors to key professionals when this is appropriate
- Act as an emergency service when a survivor is at risk by contacting the most appropriate service.

Information used to analyse the effects on equality:

The draft DSV Joint Strategic Needs Assessment 2018 has identified that an estimated 1.9 million adults aged 16-59 experienced domestic abuse in the UK in the last year, 1.2 million women and 713,000 men (ONS, 2017). This equates to around 5% of the adult population, or 1 in 20. The police recorded 1.1 million domestic abuse-related incidents and crimes in the year ending March 2017 and of these, 46% were recorded as domestic abuse-related crimes; domestic abuse-related crimes recorded by the police accounted for 32% of violent crimes. Domestic abuse is often a hidden crime, which is not reported to the police; hence, the estimated prevalence of domestic abuse is higher than the reported incidence of domestic abuse.

Domestic violence and abuse is a gendered crime, with women much more likely to experience DVA than men. Estimated 4.6m women (28% of the adult population) have experienced domestic abuse at some point since the age of 16 (ONS, 2014). Women are also much more likely to experience high-risk domestic violence. The majority of victims of domestic homicides recorded between April 2013 and March 2016 were females (70%), over three-quarters of female victims of domestic homicide were killed by a male partner or ex-partner.

Women are also more likely to experience Sexual Assault. An estimated 20% of women and 4% of men have experienced some type of sexual assault since the age of 16, equivalent to an estimated 3.4 million female victims and 631,000 male victims (ONS, 2018).

This national picture is reflected locally extrapolations based on the Crime Survey for England and Wales (ONS 2017) indicate that around 15,500 Nottingham City residents are likely to experience some form of domestic abuse each year, almost 8000 (62%) of these women and 5000 (38%) men (aged 16-59). This equates to

7% of the adult population (aged 16-59), 1 in every 14 adults. However, local analysis based on prevalence of risk factors for domestic violence in Nottingham City has estimated the prevalence to be much higher than those from ONS extrapolations. It is also worth noting the way ONS capture incidences of domestic violence; each survivor is capped at having 5 incidences of DV within a year, we know for many survivors this will not be the case and in reality, this may be much higher.

The draft domestic and sexual violence chapter within the Joint Strategic Needs Assessment (JSNA) has concluded that there is still a need for domestic violence services in the city and for some services, this need is increasing. It concluded that the current configuration of service provision overall is effective in meeting that need but that it may not be sufficient in terms of meeting demand. For example, demand for the helpline is increasing and the need for refuge provision is expected to increase. The conclusions were based on consultation with previous users of the services outlined in this report, frontline staff supporting survivors, current providers, data analysis, national and local research and policy papers. The JCG did consider how best to meet this growing need on services. It concluded that budget pressures on public sector organisations were such that it was not able to secure additional funding from core budgets (for example, NCC has to secure £20 million for this financial year alone). However, the partnership has been successful in the past in securing funding opportunities as well as supporting the providers to access other funding. The partnership are creating the option for a longer term contract with all of these services as this will allow providers to put forward a confident business plan when applying for funding from other sources.

Key findings in relation to equalities impacts area as follows:

Age: Survivors of domestic violence tend to be a younger age demographic than perpetrators, with 42% of survivors aged 18-29 and 38% of offenders aged 18-29. These services compliment the work that is happening elsewhere with young people. For example, education currently a healthy relationship as part of secondary school curriculum where they ensure young people are aware of these services. There is also a close working relationship with local universities and the services being commissioned as female students are at a greater risk of sexual assault. The University of Nottingham is working with professionals and survivors of DSV to understand the needs of survivors.

Ethnicity- 42% of DV survivors in services were Black Minority Ethnic in 16-17, this is an over-representation when compared to the BME population in Nottingham (35%). 58% were White British (CDP, 2018). Both professionals and frontline staff are trained in understanding the different challenges that BME survivors of DSV are faced with. The specialist BME refuge service caters specifically for this cohort. Other services within the pathway tackle issues such as female genital mutilation, stalking, honour based crime and these services being procured are aligned and work alongside these services.

Disability- Of survivors who disclosed they had a disability 49% had a disability. Of this who disclosed what their disability was, mental health was most commonly cited, 39% of those asked cited this. This shows over-representation of disability in the domestic abuse survivor population, as 18% of Nottingham's population has a long term limiting illness (Census 2011, 2017). Nationally disabled women are twice as likely to experience domestic abuse than non-disabled women (Women's Aid, 2018)

Mental Health: Local experience shows that a high percentage of survivors suffer from some form of mental health in particular trauma (as outlined above). The current pathway of accessing services do not necessarily meet the needs of this cohort. Currently the JCG are working with NHS Greater Notts to see how primary care in particular can most suitably support survivors and how the services being commissioned can be aligned to the most appropriate services.

Lesbian, gay or bisexual people: Currently there is not a clear picture regarding the number of lesbian, gay, bisexual and trans people affected by DSV. All the services being commissioned will be required to meet the needs of this cohort. Under the new contracts there will a greater focus on capturing this data and ensuring the services being commissioned do effectively meet the needs of this cohort.

screentip-sectionD	Could particularly benefit X	May adversely impact X
People from different ethnic groups.	<input type="checkbox"/>	<input type="checkbox"/>
Men	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Women	<input type="checkbox"/>	<input type="checkbox"/>
Trans	<input type="checkbox"/>	<input type="checkbox"/>
Disabled people or carers.	<input type="checkbox"/>	<input type="checkbox"/>
Pregnancy/ Maternity	<input type="checkbox"/>	<input type="checkbox"/>
People of different faiths/ beliefs and those with none.	<input type="checkbox"/>	<input type="checkbox"/>
Lesbian, gay or bisexual people.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Older	<input type="checkbox"/>	<input type="checkbox"/>
Younger	<input type="checkbox"/>	<input type="checkbox"/>
Other (e.g. marriage/ civil partnership, looked after children, cohesion/ good relations, vulnerable children/ adults).	<input type="checkbox"/>	<input type="checkbox"/>
<i>Please underline the group(s) /issue more adversely affected or which benefits.</i>		

How different groups could be affected (Summary of impacts)	Details of actions to reduce negative or increase positive impact (or why action isn't possible)
<p><u>Domestic Violence Service for Female Survivors:</u> Men are excluded from accessing this service.</p> <p><u>Independent Domestic Violence Advocate for Male Survivors:</u> Women are excluded from accessing this service.</p> <p><u>Refuge Provision:</u> Men are excluded from accessing refuge provision. The partnership made the decision to commission refuge provision for female survivors and their children. This was based on data (as outlined above) that shows that a greater number of women are</p>	<p>The partnership is commissioning male survivors services separately in order to meet their needs more effectively.</p> <p>The partnership is commissioning a separate Domestic Violence Service for female survivors.</p> <p>The male specific support that is being commissioned for male survivors will continue to support male survivors in accessing appropriate accommodation.</p>

affected by DSVAs. A decision was made that to meet the need of female survivors there was a need to commission a greater number of services for this cohort.

Lesbian, gay, bisexual or Trans people:

Though the services above are all designed to support survivors no matter what their sexual orientation there is a need to gather more intelligence on how these communities are affected and understand whether the current services support them effectively.

Outcomes and outputs will be designed to collect relevant data that will focus on gathering intelligence on the needs of these communities. The contracts will be written in a way that will enable variations. The quarterly monitoring of the data will allow the JCG to implement variations to the contract that can respond to the needs of these communities more effectively.

Has consultation been done or planned for this proposal? •Completed •Planned

Has human rights legislation been considered in this proposal? •Yes •No

Outcome(s) of equality impact assessment:

- No major change needed
- Adjust the policy/proposal
- Adverse impact but continue
- Stop and remove the policy/proposal

Arrangements for future monitoring of equality impact of this proposal / policy / service:

The equalities impact assessment will be reviewed quarterly based in light of monitoring information supplied by the commissioned service providers. It will also be reviewed on an annual basis as part of the data review undertaken by the

Approved by (manager signature):

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Date sent to equality team for publishing:

Monday 25th of June 2018
Send document or link to:
equalityanddiversityteam@nottinghamcity.gov.uk

Before you send your EIA to the Equality and Community Relations Team for scrutiny, have you:

1. Read the guidance and good practice EIA's
<http://gossweb.nottinghamcity.gov.uk/nccextranet/index.aspx?articleid=9770>
2. Clearly summarised your proposal/ policy/ service to be assessed.
3. Hyperlinked to the appropriate documents.
4. Written in clear user friendly language, free from all jargon (spelling out acronyms).
5. Included appropriate data.
6. Consulted the relevant groups or citizens or stated clearly when this is going to happen.
7. Clearly cross referenced your impacts with SMART actions.