



## A monthly newsletter brought to you by the Cambridgeshire Domestic Abuse & Sexual Violence Partnership

**November 2015**

Dear Partners

November is a key month for domestic abuse awareness as it includes the UN Day of Elimination of Violence against Women. We have been raising awareness via our social media pages and our colleagues in Fenland are organising four public events – see page 6 for more details.

Huge congratulations to our partners at Cambridge Rape Crisis Centre who have been selected as the regional winner of the Lloyds Bank Foundation Outstanding Impact award and have also secured funding from BBC Children in Need to deliver a children and young people's counselling service. Read more on Page 7.

Remember that our free Basic Awareness **Domestic Abuse elearning module** is now live and available to all agencies. It can be accessed at [http://www.cambsdasv.org.uk/website/elearning\\_module/92616](http://www.cambsdasv.org.uk/website/elearning_module/92616)

The Training pages on our website have also been updated to include training at all four levels [http://www.cambsdasv.org.uk/website/training\\_1/86050](http://www.cambsdasv.org.uk/website/training_1/86050)

I hope you enjoy the newsletter and remember that you can submit articles to [Amanda.warburton@cambridgeshire.gov.uk](mailto:Amanda.warburton@cambridgeshire.gov.uk)

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## Upcoming Training

The dates and venues for the 1.5 day Introduction to Domestic Abuse training are below, to book visit <http://www.cambridgeshire.gov.uk/learntogether/social>

Tues & Wed	8-9 December 2015	All Saints Church, Hartford
Wed & Thurs	20-21 January 2016	CPDC, Trumpington
Tues & Wed	23-24 February 2016	March Town Hall
Wed & Thurs	16-17 March 2016	Stanton House, Huntingdon
Tues & Wed	19-20 April 2016	CPDC, Trumpington
Wed & Thurs	18-19 May 2016	Stanton House, Huntingdon
Tues & Wed	14-15 June 2016	Stanton House, Huntingdon
Wed & Thurs	13-14 July 2016	Stanton House, Huntingdon

The pilot of the new Managing Offenders in the Context of Crime training, introduced as part of the Domestic Abuse Training Offer, was well received and will be running again in 2016. When dates are agreed you will be able to book via the Learn Together site (link above).

Details of all four levels of domestic abuse training offered in Cambridgeshire are now available on our website [http://www.cambsdasv.org.uk/website/training\\_1/86050](http://www.cambsdasv.org.uk/website/training_1/86050)

## Cambs Police strengthen response to domestic abuse

Peterborough have launched a dedicated Domestic Abuse Response Team (DART). This is a team of dedicated officers who will aim to attend the majority of Domestic Abuse Incidents in the first instance and collect evidence in the Golden Hour. The aspiration is to professionalise and standardise the initial response to maximise evidential opportunities and provide consistent safeguarding to our victims.

The other Districts in Cambs have all appointed Domestic Abuse Champions who will seek to scrutinise the District response to Domestic Abuse incidents – again to improve the initial response. Standardise it, increasing the quality.

DART Team and DA Champions undertook a day's training on 2/11/15 at Peterborough. Force outlined their expectations around initial attendance based upon the new College of Policing APP. Various Partner agencies also attended to discuss their role within Domestic Abuse and what they could offer Police and likewise, how the Police attendance could enhance the level of service that they provided to either victims or perpetrators.

## **Relate's response to Domestic Violence & Abuse**

### **4 steps:**

#### **Bridging to Safety:**

#### **Bridging to Change:**

#### **Prevention:**

#### **Recovery:**

Relate is the UK's largest provider of relationship counselling and sex therapy. Violent and abusive behaviours such as threats, violence, intimidation or control are issues for 30% of the 150,000 people who contact Relate Centres each year. These abusive behaviours are not acceptable within healthy couple or family relationships and where these behaviours are present couple or family counselling is not safe or suitable. In these situations Relate provides one to one sessions with an experienced counsellor who has received additional specialist training so as to:-

- Increase the safety of the vulnerable person and their children.
- Help their partner face what they are doing and choose to change.
- Identify the need for additional support from other agencies.

### **Bridging to Safety**

Relate provides a place where someone who is in a dangerous relationship

- Can safely tell their counsellor what is really happening to them
- Will be listened to, heard and believed
- Be supported and helped to connect with the resources they need.
- Be helped to take action to increase their safety.

Also, some people who experience threats, violence, intimidation or control from their partner may think such behaviours are acceptable and have to be tolerated as part of a normal relationship. A Relate counsellor will enable clients to understand what is happening to them is not ok.

In Relate we understand the interconnection between protecting and supporting children who witness domestic violence and the need to support and protect their vulnerable parent. We work with a multi-agency approach providing a model of empowerment so as to enable access to the help that is needed.

### **Bridging to Change**

People who have been abusive or violent to their partners ask Relate to help them stop. Relate helps them face what they have been doing, encourages their motivation to change and helps them to connect with a specialist agency through Respect.

### **Prevention – early intervention.**

If there is no pattern of violence or abuse and no current abuse, coercion or threat and each partner wants to have counselling together, then they may be offered a couple approach which is carefully structured and focused on safety.

## **Prevention – strengthening equality**

Relationship work can strengthen equality and develop elements such as respect, trust, support, negotiation and fairness – conditions that counter those common to abusive relationships.

## **Recovery**

Relate provides individual counselling and sex therapy for those who leave abusive or violent relationships to help them come to terms with:

- Loss of years of investment in a relationship.
- Trauma of sexual assault
- Loss of sexual relationship
- Re-discovery of sexual identity

Relate provides individual and family counselling for children and young people who have witnessed domestic violence to help them:

- Deal with the loss of a parental relationship.
- Adjust to a new way of being a family.

Relate helps many adults who witnessed domestic violence in their childhood cope with the impact it is having on their current relationship or sex life.

In addition to the services outlined above, Relate Cambridge is planning to introduce a new intervention next year that will offer individual sessions to each partner in a couple where domestic violence or abuse has been disclosed but who are not yet ready for couple work.

## **A curriculum for life: the case for statutory PSHE education**

*“PSHE requires improvement in 40% of schools. The situation appears to have worsened over time. This must change, and we accept the argument that statutory status is needed”* – Commons Education Committee

*“There is much more to be done by the Government to deliver ‘a curriculum for life’. By making it a statutory entitlement, we believe that schools would re-prioritise PSHE education”* – Young People’s Select Committee

Personal, Social, Health and Economic (PSHE) education is the subject in which pupils learn how to keep safe, stay physically and emotionally healthy, and develop key skills and attributes for work and life. Yet standards of teaching are not good enough and statutory status is needed to increase rigour and consistency of provision.

## **Research shows that PSHE education has the potential to have significant impacts**

□ *Pupil safety:* recent child sexual exploitation inquiries have recommended PSHE education to keep pupils safe. Pupils who receive these lessons are more likely to report abuse, have consenting relationships and use contraception. They are also less likely to have unplanned pregnancies.

□ *Physical and emotional health:* Pupils who receive health education lessons as part of a whole school approach are more likely to eat healthily, exercise more and are less likely to smoke, while the emergency first aid component of PSHE education

could have major impacts on cardiac arrest survival rates. Universal programmes like PSHE improve pupils' mental health and self-image.

□ *Academic success:* social and emotional skills programmes run through PSHE education are shown to improve attitudes and behaviour and raise academic achievement by 11%. The Education Endowment Foundation recommends such programmes to improve the attainment of disadvantaged pupils. There is a strong correlation between quality PSHE education and outstanding Ofsted ratings.

□ *The skills and character to succeed in school and the workplace:* Nobel Prize winning economist James Heckman, who advocates for the importance of non-cognitive skills, has shown that these skills can be taught in schools. Employer organisations consistently urge schools to focus on developing these non-academic skills, which could have huge economic value for the country.

### **Yet this potential is not being fulfilled – non-statutory status means provision is not good enough**

As the only non-statutory, non-examined subject, PSHE education is in a uniquely vulnerable position. Ofsted's 2013 report into PSHE education found that provision was 'not good enough', with lessons often delivered by poorly-trained teachers and in inadequate curriculum time. According to the Commons Education Committee, the picture appears to be deteriorating, with surveys suggesting a reduction in planned provision of 11% in 2013 and 14% in 2014. The PSHE Association 2014 annual survey of local authority leads covering 4,000 schools suggested provision had decreased in over two-thirds of schools. This is an unacceptable position.

### **The need for statutory status**

We should have the highest expectations for all parts of our children's schooling, including PSHE education. As set out by the Commons Education Committee, statutory status would send a clear message to schools about the importance of the subject and ensure every pupil receives regular lessons from trained teachers.

Statutory status for PSHE education has the support of:

- 90% of parents and leading parenting bodies like Mumsnet and the National Governors Association
- 92% of pupils and has been a campaign priority for the UK Youth Parliament four years running
- 88% of teachers as well as five leading teaching and education unions, including the NUT and NAHT
- 85% of business leaders support statutory PSHE education according to a YouGov survey
- 100 leading organisations including six royal medical colleges, the NSPCC and the British Red Cross
- Parliamentarians across the political spectrum including the Commons Education Committee and Home Affairs Committee, the Chair of the Health Committee and a range of former Ministers.

## FGM Duty to Report

A duty on all teachers, doctors, nurses and social workers to report child cases of female genital mutilation (FGM) to the police came into force on 31<sup>st</sup> October.

New legislation announced earlier this year make such disclosures mandatory and professionals who fail to report the illegal practice in under-18s could face the sack.

Under the new law, health and social-care professionals and teachers in England and Wales will be obliged to report all cases of known FGM in under-18s, whether it is disclosed by the victim or seen by the professional.

Failure to report cases within a month, unless there are “exceptional” safeguarding issues, could result in the professionals facing internal disciplinary action or referral to regulators, which could bar them from practice.

Figures published by the Department of Health (DH) last month showed 1,000 newly recorded cases at hospitals between April and June. The figure is expected to rise this month, because of a separate but related duty on GPs and mental health trusts to record any adult woman with FGM for the DH.

However, this second duty, for GPs, mental health trusts and hospitals to record FGM in any adult woman who goes to see a doctor or nurse for any reason, has caused concern among some medical professionals. A number of senior clinicians, including three involved in treating FGM survivors, have written a letter to the British Medical Journal warning that a requirement on them to record every female patient with FGM and pass their data to the DH was counter-productive and would hinder strategies to eradicate the practice.

Brenda Kelly, consultant obstetrician and one of the signatories of the BMJ Letter, said she fears the data could be used to aid a prosecution in the future. Kelly, the director of the Oxford Rose Clinic, which sees 6-10 FGM survivors a month, said the requirement would erode one of the founding principles of the clinic – that it was as a safe space for women to talk. The DH says the data collected will be anonymised and that personal information is needed to avoid duplicate counting.

<https://www.gov.uk/government/publications/mandatory-reporting-of-female-genital-mutilation-procedural-information>

## Fenland awareness events

Our colleagues at Fenland Community Safety Partnership are holding a series of events to raise awareness of domestic abuse.

Details of dates and venues are below:

16 <sup>th</sup> November	10.00 - 14.00	March Sainsbury's
19 <sup>th</sup> November	10.00 – 14.00	Wisbech Market Place
23 <sup>rd</sup> November	10.00 – 13.30	Chatteris Furrowfields
26 <sup>th</sup> November	10.00 – 14.00	Whittlesey Market Place

## **Cambridge Rape Crisis Centre to offer specialist sexual violence counselling for children and young people in Cambridgeshire**

CRCC has successfully secured funding from BBC Children in Need to deliver a children and young people's counselling service. The service will provide counselling for children and young people aged 5 – 19 years old who have experienced or are at risk of experiencing child sexual abuse (CSA) or child sexual exploitation (CSE). Cambridgeshire has seen the second largest percentage increase, at 168.2%, in the UK of disclosures of child sexual abuse (2011 - 14), and the need for specialist support services for children and young people is paramount. CRCC will launch the service at the beginning of December 2015, so more information to follow.

## **Cambridge Rape Crisis Centre - Charity Achievement Awards Winner 2015**



Cambridge Rape Crisis Centre has been selected from charities across the eastern region as the regional winner of the Lloyds Bank Foundation Outstanding Impact award. They received a prize of £1000.

The Charity Achievement Awards have been created to recognise the amazing, life changing work of small and medium sized charities.

Chief Executive of the Foundation, Paul Streets OBE, said of the awards: *'We are delighted to celebrate the winners of our Charity Achievement Awards. Cambridge Rape Crisis Centre has demonstrated excellent and inspiring practice, and have set the standard high; not just surviving in these tough times, but thriving, delivering vital services and literally transforming lives. For over 30 years the Foundation has supported thousands of such small and medium sized charities to tackle disadvantage in communities right across the East region and we look forward to doing much more in the years to come.'*

## **Extended opening times for telephone helpline for survivors of sexual violence**

Cambridge Rape Crisis are delighted to announce that as of week beginning 2nd November 2015, thanks to our dedicated team of volunteers, our telephone helpline will now be open for an extra shift each week on Thursday evening.

Our new helpline opening days and hours are:

Wednesday 19.00-21.30

Thursday 19.00-21.30

Saturday 15.00-17.30

Sunday 10.00-12.30

Our helpline number is 01223 245888 and calls are charged at a local rate. Our service is confidential and we support women and girls of all ages who have survived rape, child sexual abuse and sexual violence.

<h3><b>Chelsea's Choice – Up-date October 2015</b></h3>
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Performances in East Cambs and Fenland and Hunts are now complete. Attended by approx. 2,700 young people and 80-100 adults.

We have a number of evaluations going on/planned to gauge knowledge and awareness; impact and general feedback on the production.

The interest from local organisations working on issues around CSE has been really positive and generous but we are not aware of any schools/settings taking up the offer of support for follow up work. If anyone has been involved in follow up work with schools or others we would like to hear about it or if you have any comments about the production/your involvement we'd like to hear that too.

The app for young people can be accessed using a QR code if you have an android phone – I can send to anyone interested; or it can be accessed at [www.advicechainapp.wordpress.com](http://www.advicechainapp.wordpress.com)

We would welcome your comments or comments from young people. If information about your service is incorrect or missing please let me know. Similarly the resources site for professionals can be accessed at [www.advicechain.wordpress.com](http://www.advicechain.wordpress.com) if you have any comments then let me know.

We hope to book performances for SCCC at the beginning of November. These are likely to be in spring 2016. We hope to book a 3 week tour and to include performances in all secondary schools; some special schools and some community performances. We want to learn from previous work so please let us know how we can improve all aspects of the tour

For more information contact [Gill.hanby@cambridgeshire.gov.uk](mailto:Gill.hanby@cambridgeshire.gov.uk)



## **EU Violence Against Women Survey**

The FRA survey on violence against women is based on face-to-face interviews with 42,000 women, aged 18-74, across the EU. The survey was carried out between March and September 2012 and presents the most comprehensive survey worldwide on women's experiences of violence.

The survey responds to a request for data on violence against women from the European Parliament, which was reiterated by the Council of the EU in its Conclusions on the Eradication of Violence against Women in the EU.

The survey asked women about their experiences of physical, sexual and psychological violence, including domestic violence, since the age of 15 and over the 12 months before the interview. Questions were also asked about incidents of stalking, sexual harassment, and the role played by new technologies in women's experiences of abuse. In addition, the survey asked about respondents' experiences of violence in childhood.

Some key statistics from the survey:

- Women who have experienced physical violence from a partner - 20%
- Women who have experienced psychological violence from a partner – 43%
- Women contacting the police as a result of the most serious incident of physical violence – 14%
- Women who know women in their circle of friends/family that have experienced domestic abuse – 39%

You can see the full results at this link <http://fra.europa.eu/en/vaw-survey-results>

## **Cambs Police rape data released**

The national Rape Monitoring group published statistics on rape from 42 police forces in November

The data for Cambridgeshire shows that recorded adult rapes have increased from 127 in 2010/11 to 236 in 2014/15. Recorded child rapes have increased from 85-135 in the same period.

The rate recorded as 'No Crime' for adult rapes by the force has decreased from 17% in 2009 to 10% in 2013.

The full data set for Cambridgeshire can be viewed at this link <http://www.justiceinspectorates.gov.uk/hmic/wp-content/uploads/2014/01/cambridgeshire-rmg-adult-and-child-rape-data-2012-13.pdf>

## **Launch of report: *'Hear me. Believe me. Respect me. A survey of adult survivors of child sexual abuse and their experiences of support services'***

The study was led by the University Campus Suffolk and carried out with the charity Survivors in Transition. The research was undertaken in the context of a severe lack of evidence about the support needs of adult survivors of childhood sexual abuse (CSA) in the UK. A national survey of nearly 400 survivors, it is believed to be among the most comprehensive surveys of victims' experiences of support services in the UK.

### **Key findings include:**

- New insights into the nature of 'typical' childhood sexual abuse in the UK. 70% of abuse happens within families. 51% of survivors were abused by more than one person. The focus of high profile cases (e.g. the Government's independent inquiry, the Jimmy Savile scandal and the Rotherham inquiry) is on less typical examples of abuse. This risks skewing strategic responses to sex abuse in the UK.
- Services need to be more vigilant in identifying whether service users have experienced abuse. Only 20% of survivors disclosed because they were asked – in most cases, in order to make disclosures, survivors had to bring up the subject themselves. Disclosing is traumatic for survivors and they do not receive the help they need for an average of 12 years after disclosing.
- Poor experience of one service can put survivors off from getting the help they need from other services for many years. Survivors were least satisfied with social services and A&E and hospital services. Less than half of survivors felt that they had been listened to, believed or respected by these services.
- There is a sharp distinction in service satisfaction: survivors were less satisfied with statutory services and more satisfied with voluntary sector services. Over 80% said that they had a good service from voluntary sector counselling. To build on strengths, voluntary sector organisations need to have the lead role in future strategies to support survivors of childhood sexual abuse.

For a copy of the full report or executive summary follow the link below:  
<http://www.ucs.ac.uk/Faculties-and-Centres/Faculty-of-Arts,-Business-and-Applied-Social-Science/Department-of-Psychology,Sociology-and-Social-Work/Focus-on-survivors-report.aspx>

## **Survivors Rights: briefing on the UK's new legal responsibilities to provide specialist support for women and girls who have experienced violence**

The End Violence Against Women Coalition has published a new Briefing Paper on the rights of women and girls to specialist support when they have suffered or are at risk of abuse, and has written to the Communities Secretary Greg Clark MP calling on the UK Government to act to make these rights a reality.

The Briefing Paper summarises existing and new rights to access a specialist support service when suffering domestic violence or rape, when at risk of forced marriage or FGM, when trafficked or subject to abuse related to prostitution, and all other forms of gender based violence.

The Briefing Paper, '*Survivors' Rights*', cites two imminent and very significant new legal obligations on the UK: the EU Victims Directive (Directive 2012/29/EU) which will come into force in the UK in November 2015 and the Istanbul Convention (the 'European Convention on Violence Against Women and Domestic Violence') which the UK has signed and is committed to ratifying soon. Both of these clearly identify the right to receive specialist support, and both require states to report on meeting this obligation.

For a copy of the briefing paper use the link below:

<http://www.endviolenceagainstwomen.org.uk/resources/72/survivors-rights>

## **Do teenagers understand sex and consent?**

To find out, a group of 16-18-year-olds were shown a specially written drama about an incident to see if they could work out if it was consensual sex or whether a crime had been committed.

The teenagers watch a dramatised house party in which a sexual encounter takes place. They debate whether they think the female character, Gemma, consented to that encounter, and then vote on what happened. They were then asked to consider the scenario from Tom's point of view – did he think he had consent? The results were interesting:

Did Gemma consent?	Yes – 13%	No – 54%	Don't know – 33%
Did Tom have consent?	Yes – 54%	No – 30%	Don't know – 16%
Was Gemma Raped?	Yes – 87%	No – 4%	Don't know – 9%

BBC 3 aired a programme about the experiment – it can be downloaded on the BBC iplayer <http://www.bbc.co.uk/news/magazine-34470205>



## Brief Advice Training

### Course aim:

To help staff identify people they are caring for who may be misusing alcohol, and give them the skills and confidence to help them in addressing their alcohol misuse.

### Learning outcomes:

By the end of the session, participants will:

- ☐ be able to identify those drinking above lower risk levels
- ☐ give simple brief advice
- ☐ be able to make referrals to appropriate services

The training uses internationally recognised and simple to use Alcohol Identification and Brief Advice tools approved by NICE (National Institute of Clinical Excellence).

### Who is the event for?

All staff working in Adult Social Care and any organisation in Cambridgeshire who may come into contact with people who may be drinking alcohol at levels harmful to their health. Training is provided **FREE OF CHARGE**, but online booking is required.

### Date / Venues:

04/02/16 Stanton House, Huntingdon 10:00 - 13:00  
19/04/16 CPDC, Cambridge 14:00 - 17:00  
21/06/16 Young people March, March 14:00 - 17:00  
29/09/16 CPDC, Cambridge 14:00 - 17:00  
28/11/16 Young people March March 10:00 - 13:00

### Trainer/s:

Joseph Keegan

Alcohol Strategic Lead - Cambridgeshire Safer Communities Partnership Team

E-learning module is also available. Please note the e-learning is not tailored to local adult social care training needs in Cambridgeshire. Just follow the link below:

<http://www.alcohollearningcentre.org.uk/eLearning/IBA/>