

Agenda Alliance Representation Comprehensive Spending Review (CSR)

About Agenda

Agenda, the alliance for women and girls at risk, is working to build a society where women and girls are able to live their lives free from inequality, poverty and violence. We campaign for women and girls facing abuse, poverty, poor mental health, addiction and homelessness to get the support and protection they need.

Women and girls facing multiple disadvantage

Women and girls facing multiple disadvantage experience a combination of complex and overlapping problems including homelessness, violence and abuse, substance misuse, mental ill health, poverty and contact with the criminal justice system.

For many women and girls, their experiences of disadvantage are often underpinned by a history of extensive violence and abuse. One in 20 women have experienced extensive physical and sexual abuse during their lives, and women are ten times as likely as men to have had these kind of experiences of extensive violence as both children and adults. That's 1.2 million women in England alone.

Of this group of women, more than half have a common mental health condition, one in three have attempted suicide, nearly half are in the lowest income bracket, a quarter have been homeless and a third have an alcohol problem. The Covid-19 pandemic and response to it has had a disproportionate impact on the most marginalised women and girls. Many of the challenges women and girls face have intensified during lockdown, compounded by lack of access to services, and making women and girls more vulnerable to the virus.

Specialist women's services (in particular Women's Centres and services led 'by and for' women from minoritised communities, such as LBTIQ, disabled and Black, Asian and minoritised ethnic women) are expertly placed to support women facing multiple disadvantage. Support from government must specifically target this group of services, who are not just responding to an increase in demand now, but anticipate increased demand for services in the long-term, as the impacts of the intensification of the problems they face play out. Investing in these vital services takes money into local communities, helps generate employment and decreases pressure on wider public service by preventing need and women from reaching crisis point. Investing in local specialist services must be understood as central to our economic recovery, not as discretionary.



Policy Recommendations:

- 1) To strengthen the UK's economic recovery from Covid-19 and reduce regional inequalities, value and invest in specialist women and girls' services. Prioritise:
 - a) Economic inclusion of women and girls
 - b) Long-term investment in women and girls' services
 - c) Digital innovation and levelling up
 - d) Data collection
- 2) To improve outcomes in public services and relieve pressure on the NHS, introduce a statutory duty on public services to ensure relevant staff are making trained enquiries about domestic abuse and other forms of violence against women and girls (VAWG).
 - a) Support this duty through appropriate training and funding so that staff are equipped to ask the question, and to ensure services are available and ready to support survivors when they do disclose.
 - b) Accompany the duty with robust data collection and training standards, which allow regulation and reporting of the success of the policy.
- 3) To ensure government departments are delivering on their commitments and not working in a siloed way, embed the VAWG strategy across government departments and ensure a whole-system response to VAWG across different public services.
 - a) Greater cross-departmental coordination should be accompanied with a single focused fund, drawn from the budgets of a number of government departments, to ensure properly funded and commissioned gender-specific and trauma-informed services for women experiencing VAWG. This should include provision of specialist services for women from minoritised communities.
 - b) To end violence against women and girls, we believe that in addition to the £2.2bn that has been estimated as necessary to tackle domestic abuse alone in this spending period, further spending pledges are needed of at least £102.7m annually to ensure specialist sexual violence and abuse services are available for victim and survivors; and £57m annually to ensure that the existing highly specialist support services for Black, Asian and minoritised ethnic (BAME) women are sustainable.





Full representation:

Covid-19 Strategy and Funding

CSR Priorities:

- Strengthening the UK's economic recovery from COVID-19 by prioritising jobs and skills.
- Levelling up economic opportunity across all nations and regions of the country by investing in infrastructure, innovation and people – thus closing the gap with our competitors by spreading opportunity, maximising productivity and improving the value add of each hour worked.

Agenda's Voices from Lockdown research:

In April 2020, Agenda received funding from the Pilgrim Trust to conduct research aimed at bringing to light the voices of women and girls, both during the lockdown period and as we emerge to begin to rebuild.

In the first stage of the research, we collected data on the experiences of women and girls most at risk, and the services that support them in the first three months of lockdown. We compiled data from a survey in June of 72 geographically representative voluntary sector organisations providing support to women across a number of areas of need. A further eight semi structured interviews with organisations and three with experts by experience were conducted over the phone or a digital video-calling platform. The full interim report can be read here: >> https://weareagenda.org/wp-content/uploads/2020/08/Voices-From-Lockdown-A-Chance-For-Change-v2.pdf

This research is ongoing, with a second iteration of the research taking place at the end of the year. We welcome future opportunities to share this intelligence to inform the Government's Covid-19 strategy.





Policy recommendation:

- 1) Value and invest in specialist women and girls' services to ensure the economic and digital inclusion of the most marginalised women and girls across the UK. Prioritise:
- a) Economic inclusion of women and girls: Specialist voluntary sector women's and girls' services should be included as part of driving forward plans to ensure economic prosperity and to level up regional opportunities beyond the crisis. This should be included in the Treasury's 'Plan for Jobs', as well as regional plans delivered through local authorities and businesses to improve access and opportunities for skills and employment. These organisations are ideally placed to support women and girls into work and skills development opportunities, and should receive targeted funding to develop partnerships with employers and education and training providers to do so. This should have a particular focus on early intervention and supporting young women aged 16-24 to reduce the risk of long-term unemployment and future poverty.

Agenda research¹ (2016) shows that women are ten times as likely as men to have experienced extensive physical and sexual abuse during their lives, with one in 20 women affected. Consequently, the VAWG- and trauma-aware approach adopted by specialist services is most effective in supporting women to recover and start rebuilding their lives, and provide them with the skills to re-enter the job market.

b) Long-term investment in women and girls' services: While crisis funding has been impactful and filled immediate need, it has not been accessible to all organisations working with the most marginalised women and girls, and has not addressed a looming longer-term funding challenge for the sector. The next stage in government funding must include a ring-fenced fund for specialist services that are designed and delivered 'by and for' the users and communities they aim to serve. This can include, for example, services led by and for women and girls from minoritised communities. For smaller, specialist services to be able to access this funding, and for this funding to be valuable to them, government departments should have make applications processes less opaque – with clear timelines, should broaden eligibility criteria, avoid short deadlines which exclude small organisations with reduced bidding capacity, and allow the funding to cover core costs.

Agenda's research *Voices from Lockdown: A Chance for Change*³ found that nearly half (46%) of organisations supporting women facing multiple disadvantage reported

¹ https://weareagenda.org/wp-content/uploads/2015/11/Hidden-Hurt-full-report1.pdf

² This term is used to describe groups of people who are discursively constructed as 'minorities' through processes of marginalisation and exclusion; for example, Black, Asian and minoritised ethnic (BAME) women, LBTIQ women, disabled women and migrant women.

³ https://weareagenda.org/wp-content/uploads/2020/08/Voices-From-Lockdown-A-Chance-For-Change-v2.pdf



that their financial position during the lockdown had worsened. Of those organisations that saw their financial position worsen, 30% were small providers, supporting less than 25 women a month, with an income of less than £50,000. This was most frequently reported by services supporting refugee and migrant communities, and those supporting girls and young women. The research also showed that smaller organisations earning less than £100,000 were least likely to have accessed any emergency funding from government, trusts and foundations or other forms of emergency funding.

In an interview, one service-provider at a larger organisation reflected: "Whilst we have been successful in accessing funds the deadlines have been very short and we have had to draw on all of our resources to write bids including using freelance bid writers who we have worked with previously. I cannot imagine how a smaller organisation could realistically cope with the speed required to apply for funding."

These smaller, specialist organisations and 'by and for' organisations are essential to meet the needs of the most marginalised communities, most of which do not present at mainstream and public services. For example, Imkaan's research⁴ (2018) found BAME women and girls often report dissatisfaction with the responses from statutory services, and report an overwhelming preference for specialist, BAME-led women's services.

These specialist organisations play a vital role in boosting local economies by providing tailored support to women and girls who are furthest from the support of public services, and disproportionately likely to be experiencing poverty, contact with the criminal justice system, substance misuse problems and homelessness. These organisations are best placed to support minoritised women and girls in overcoming the unique barriers to support that they face, such as discrimination, stigma following disclosure, service accessibility, lack of trust in and experience of poor policing responses, and gaps in sustainable service provision. Without them, these women are more likely to go on to face a range of other complex challenges, inevitably leading to additional social and economic costs to the state.

Costs and savings

Investing in these vital, gender-responsive services has been shown to produce significant savings. For example, Home Office research published last year estimated the economic and social cost of domestic abuse alone at £66 billion every year. In



contrast, the NHS saves over £357 million per year alone from the specialist provision offered by VAWG organisations.⁵

In order to be effective, it is essential that investment in support services is ringfenced for gender-responsive services. For example, women who have experienced domestic and sexual abuse are three times more likely to be substance dependent than non-abused women. ⁶ Substance misuse services are predominantly male, and so can be an intimidating or even an unsafe place for women. Despite this, investment in substance misuse treatment has been cut by 25% since 2013⁷, and the Recovery Partnership's State of the Sector 2017 report highlights the impacts this is having, with a move towards commissioning generic substance misuse services, rather than gender-specific specialist services. This is a problem because it means women do not feel they can safely access services, and services do not address the underlying causes of their dependencies.

Women's specialist services are cost-effective because they address the root of issues that women and girls experience. For example, 87% women in prison are there for non-violent crimes, meaning the majority (62%) serve short sentences of less than six months, leaving little opportunity for meaningful rehabilitative work. Ministry of Justice analysis shows a statistically significant reduction in re-offending rates for those who receive support from women's centres. 9 Women's centres can help tackle the disadvantage which often lies behind women's crimes. 10 Economic modelling suggests that investing £18 million per year in women's centres could save almost £1 billion over 5 years. 11

Without gender-responsive services, women can fall through the cracks in support. Women often find themselves bounced between services or excluded because of the complexity of issues they face. Without support problems can spiral with devastating consequences for them, their families and the community - and increased costs and pressure on public services.

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⁵ This is a conservative estimate, cited from "Value of the Women's Voluntary and Community Sector Delivering Health Services" 2017. Supporting women in these settings avoids repeat A&E attendance and burden on GPs, for example.

⁶ https://www.researchgate.net/publication/232055542 Coexisting_Problems_of_Mental_Health_and_Substance_Misuse_'Dual_Diagnosis'_A_Review_of_Relev ant_Literature

https://www.collectivevoice.org.uk/blog/tackling-domestic-abuse-and-substance-misuse/

http://www.recovery-partnership.org/uploads/5/1/8/2/51822429/state_of_the_sector_2017_-_beyond_the_tipping_point.pdf

⁹https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file /427388/womens-centres-report.pdf

10 http://www.anawim.co.uk/documents/Custody-Pilot-Project.pdf

http://www.revolving-doors.org.uk/file/1793/download?token=_uhAj6qr



Women's specialist services are best placed to reach the most marginalised and 'hidden' women, who often do not present at mainstream services, as they do not meet the gendered and often complex needs of women. Crisis anticipate that if 40,000 people are prevented from becoming homeless for one year in England it would save the public purse £370 million. 12 In 2012 the cost of homelessness in England was reported as being up to £1 billion (gross) a year. 13 Research on women's experience of homelessness suggests heavier reliance on informal, 'hidden' and often exploitative living arrangements, such as sofa surfing and 'sex for rent', rather than use of homelessness services – which tend to be male-dominated environments that can be intimidating and unsafe for women. 14 This could mean women's homelessness has lower immediate financial costs to the public sector, but that potentially high levels of individual need among women who are homeless are not being recognised or met, and could end up being more financially expensive for the state in the longer-term. 15 16 Women's specialist services can provide traumaand gender-informed support to women who are homeless, and support them into appropriate, women-only temporary and move-on accommodation, as well as providing holistic, wraparound support.

c) Digital innovation and levelling up: Following the remarkable transition many women and girls' organisations have made to providing online services during lockdown, central government should consider how they could support the future of digital. Agenda's research *Voices from Lockdown: A Chance for Change* (2020) found that in the first three months of lockdown, 44% of services supporting women and girls facing multiple disadvantage moved some services online. Positive outcomes in adapted service delivery led 80% of organisations to report that they anticipated retaining changes after lockdown eased. Of this group, 91% anticipate these changes will include offering a blend of face-to-face and online services and giving staff more flexibility to work remotely in future.

 $^{12} \ \underline{\text{https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/cost-of-homelessness/}$

¹³ https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/7596/2200485.pd

¹⁴ https://www.crisis.org.uk/media/237022/costsofhomelessness_finalweb.pdf

¹⁵ A report by the University of Exeter found that women are almost <u>twice as likely as men</u> to have lost their job during the pandemic – with 7 per cent of women made redundant during the <u>lockdown</u> in comparison with 4 per cent of men.

https://www.independent.co.uk/news/uk/home-news/eviction-ban-ends-women-homelessness-rent-childcare-landlords-coronavirus-b485673.html

¹⁶ Many women who are homeless have extensive experiences of violence, abuse and trauma. Violence and abuse is both a cause and consequence of women and girls' homelessness: <u>St Mungo's reports</u> that 54% of their female clients that slept rough have experienced abuse from a partner or family member, and <u>Crisis calculate</u> that 28% of women who are homeless have formed an unwanted sexual partnership to get a roof over their heads.



As well as funding services to continue digitally up-skilling staff and service-users, central government funds should review their processes to enable organisations to apply for capital costs like equipment, where they are not currently able to support this type of cost. Welcome initial donations of digital equipment at the start of lockdown from businesses should transition to longer-term sustainable plans to ensure a growth in safe digital access and inclusion of women and girls.

Boosting digital innovation and connectivity is particularly valuable to women and girls living in rural communities, who may have to travel considerable distances to access vital services. Equally, increased online activity means that organisations, particularly those that are small and based remotely, are able to join area-wide or national meetings, something that had not previously been possible due to travel time and costs.

d) Data collection: There needs to be a clear message and requirement, set out at a senior level in government, for data about the impact of Covid-19 to be disaggregated across all protected characteristics, in particular gender, age, race and ethnicity. This should be directed to all local and national government, arms-length bodies and researchers, to ensure public policy and funding priorities are made with an understanding of the differential and intersecting impact of the crisis. This data must be made publically available and accessibly presented, to allow voluntary sector organisations and advocacy groups to analyse it. Analysis must include data on gender and violence and abuse, those in and being released from custody and detention, homelessness, unemployment, benefits claims, mental health problems, self-harm and suicide rates. This is an opportunity to identify regional inequalities and those women with protected characteristics who fall through the nets of current services, and to innovatively design swift and effective responses.

VAWG Strategy and Domestic Abuse Bill:

Home Office research published last year estimated the economic and social cost of domestic abuse alone at £66 billion every year, with direct costs to the exchequer totalling over £5 billion annually – including £2.3 billion in health services, £1.3 billion in police costs, £550 million in housing costs, £476 million in criminal and civil legal costs, and £724 million for services for victims; and a staggering £14 billion in lost working days. Costings are under-developed for sexual violence and abuse, but one Home Office assessment looking at the costs of rape and sexual offences to society and the victim, estimated the cost of rape and other sexual offences to the UK would be £12.2 billion per year. ¹⁷ Investing in prevention and early intervention measures can help to significantly bring down these costs, and prevent further harm.

 $[\]frac{17}{https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/732110/the-economic-and-social-costs-of-crime-horr99.pdf$



CSR Priorities:

- Improving outcomes in public services, including supporting the NHS and taking steps to cut crime and ensure every young person receives a superb education.
- Improving the management and delivery of our commitments, ensuring that all departments have the appropriate structures and processes in place to deliver their outcomes and commitments on time and within budget.

Policy recommendation:

- 2) Introduce a statutory duty on public services to ensure relevant staff are making trained enquiries about domestic abuse and other forms of VAWG.
 - a) Support this duty through appropriate training and funding so that staff are equipped to ask the question, and to ensure services are available and ready to support survivors when they do disclose.
 - b) Accompany the duty with robust data collection and training standards, which allow regulation and reporting of the success of the policy.

Policy rationale:

The final report of the National Commission on Domestic and Sexual Violence and Multiple Disadvantage¹⁸, by Agenda and AVA (Against Violence and Abuse), has shown that survivors of domestic abuse and other forms of VAWG are likely to come into contact with a range of public services, from the health system to social services, as a result of both the current and historic violence and abuse they have experienced throughout their lives. The impact of abuse on the lives of survivors will mean that they are frequently in contact with multiple public services. Research by SafeLives shows that while four out of five victims never call the police, many will visit their GP because of the abuse they experience.¹⁹

Yet despite this robust evidence, Agenda's research has found that public services are failing to pick up domestic abuse and respond appropriately. This means many survivors are passed from service to service before finally getting the support they need, causing years of preventable hurt and even putting lives at risk.

¹⁸ https://weareagenda.org/wp-content/uploads/2019/02/Breaking-down-the-Barriers-full-report-FINAL.ndf

¹⁹ https://safelives.org.uk/sites/default/files/resources/SAFJ4993 Themis report WEBcorrect.pdf



Agenda's report, Ask and Take Action: Why public services must ask about domestic abuse²⁰, found staff in mental health services across England are failing women by not asking about experiences of domestic abuse – despite this being recommended by NICE guidance.

In line with this guidance, routine enquiry - whereby trained practitioners routinely ask patients about experiences of abuse — should be taking place in services including mental health, drug and alcohol treatment, and maternity.

Yet Agenda's research found that this often doesn't happen in practice:

- Of 42 mental health trusts that responded to a Freedom of Information (FOI) request by Agenda, 15 had no policies on routine enquiry about domestic abuse. 25 trusts which responded had a policy on routine enquiry.
- Where trusts do have policies on routine enquiry the effectiveness of these
 policies varies considerably with one trust asking just 3% of patients about
 experiences of domestic abuse when they should be asking everyone.
- The vast majority of trusts had no policies on offering proactive support
 within their services to patients who disclose domestic abuse with many
 depending on the support of specialist domestic and sexual abuse services in
 the voluntary sector to respond to patients identified as having experienced
 domestic abuse.

Costs and savings:

Agenda anticipates the cost of this policy to be £3.6 million.²¹ This cost is based on the cost of a Train the Trainer model, with VAWG specialists training local trainers at senior management level within a public service, who then deliver training to a critical mass of 75% of frontline staff. This cost is minimal considering the UK Government estimates the social and economic costs of domestic abuse to be £66 billion.²²

Furthermore, an evaluation of the IRIS (Identification and Referral to Improve Safety) programme, a training and support intervention delivered in primary care to improve the service-level response to disclosure of abuse, found that the number of referrals to domestic violence agencies made by clinicians in practices where IRIS was in place was six times greater than those made in the practices where IRIS was not implemented.²³ The programme has been evaluated to produce societal cost

https://pubmed.ncbi.nlm.nih.gov/22000683/

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²⁰ https://weareagenda.org/wp-content/uploads/2019/08/Agenda-report-Ask-and-Take-Action.pdf

²¹ As cited in the Guardian: https://www.theguardian.com/society/2020/jul/06/uk-government-accused-endangering-lives-migrant-women-domestic-abuse-bill. A full breakdown of the methodology and details of the training programme is available upon request.

https://www.gov.uk/government/publications/the-economic-and-social-costs-of-domestic-abuse



savings of £37 per woman registered in a general practice.²⁴

Deliverability:

As well as IRIS, Agenda builds on other existing examples of good practice that shows that ensuring frontline staff ask about violence and abuse is possible.

For example, 'Ask and Act' in Wales, a duty introduced to implement the Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015, has resulted in over 3,300 frontline services professionals being trained to ask about domestic abuse.²⁵

This campaign builds on evidence from the Citizen's Advice ASK programme which provides training and support to local advisers to enquire about domestic abuse. An evaluation of the programme found that 86% of 957 clients were satisfied or very satisfied about being asked the question, and the recorded disclosure rate of domestic violence increased from under 0.5% before the programme, to 24% in the final quarter of the evaluation. Women were nearly twice as likely to make disclosures than men.²⁶

2) Embed the VAWG strategy across Government departments to ensure a whole-system response to VAWG across different public services.

- a. Greater cross-departmental coordination should be accompanied with a single focused fund, drawn from the budgets of a number of government departments, to ensure properly funded and commissioned gender-specific and trauma-informed services for women experiencing VAWG. This should include provision of specialist services for women from minoritised communities.
- b. To end violence against women and girls, we believe that in addition to the £2.2bn that has been estimated as necessary to tackle domestic abuse alone in this spending period (Safe Lives, 2020²⁷), further spending pledges are needed of at least £102.7m²⁸ annually to ensure specialist sexual violence and abuse services are available for victim and survivors; and £57m annually to ensure that the existing highly specialist support services for Black, Asian and minoritised ethnic (BAME) women are sustainable.

https://gov.wales/sites/default/files/publications/2019-07/violence-against-women-domestic-

²⁸ £52 million is required annually to support accredited Rape Crisis member Centres. £107.2m is required to support all recipients of the Rape and Sexual Abuse Support Fund.

²⁴ https://pubmed.ncbi.nlm.nih.gov/22730555/

abuse-and-sexual-violence-report-2018-2019.pdf
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https://www.academia.edu/40699018/Citizens_Advice_ASK_Routine_Enquiry_in_Gender_Based_Vi olence_and_Abuse_Programme_Independent_Research_Evaluation_Final_Report_by_Lancaster_Uni versity
https://safelives.org.uk/node/1837