Violence against Women and Girls Strategy 2021–2026





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1. Introduction

Violence against Women and Girls (VAWG) is a fundamental human rights violation, which harms the lives of millions.

It is recognised as a worldwide issue of epidemic proportions. Nationally we know that on average two women are killed every week by a current or former partner and one in five women have experienced some form of sexual violence since the age of 16¹. But VAWG is also something that is happening here in Westminster and Kensington & Chelsea, estimated to be affecting around one in three women and girls at some point in their lifetime.

In many instances VAWG remains hidden and under-reported, but it is not inevitable and collectively we can end it. This strategy sets out the role we can all play in ending VAWG as part our coordinated community response.

This partnership strategy has been co-produced by partners, including survivors, residents, and local businesses, and sets out our strategic vision to make our boroughs safe for anyone who is living, working, visiting, and travelling in Westminster and Kensington and Chelsea.

- * This strategy builds on the nationally recognised best practice work that has been happening across our boroughs since the launch of our first VAWG strategy in 2015.
- * This strategy will be accompanied by a robust action plan which will outline the steps we will take as a partnership to achieve our objectives. Our approach will use this strong foundation to continue our priority to end VAWG.

1 https://www.endviolenceagainstwomen.org.uk/about/data-on-violence-against-women-and-girls/ (Last accessed 1 Dec 21)



2. What is violence against women and girls?

What is violence against women and girls?

Locally and nationally, we have adopted the United Nations definition of Violence Against Women and Girls (VAWG), which defines VAWG as:

"Any act of gender-based violence that results in, or is likely to result in, physical, sexual, or mental harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life."

> What about Violence against men and boys?

VAWG is the umbrella term used to describe a range of violent and abusive acts and behaviours, which are predominantly, but not exclusively, directed against women and girls. This term is used to describe abuse against all genders but highlights the disproportionate impact on women and girls.

There are multiple forms of VAWG, whether physical, sexual, psychological, or economic. This can include violence in public places, such as sexual harassment, or in private such as intimate partner violence, which can at the extreme lead to homicide.

Some forms of violence are technology based, such as internet stalking, or driven by economic factors such as international trafficking of women and girls. Others take place as the result of harmful practices, such as Female Genital Mutilation and Forced Marriage. These abuses can differ in how they are experienced, but all are the result of the misuse of power and control. Further definitions are provided below:

Type of Abuse	What does this mean?
Domestic abuse (including coercive control)	This is when a partner or family member has power and control over their victims and uses abuse to maintain it. Abuse can be physical, emotional, economic, psychological and/or sexual.
Rape and sexual violence	Rape is sex without consent. This means that rape isn't just people being physically forced into a sexual act, it also includes pressure that makes someone feel like they have no choice but to have sex or a sexual act.

Type of Abuse	What
Female genital mutilation	This is female
Early and Forced marriage	This is cases of reduce as they them t
So called "honour" based violence	This is order t the fan
Spiritual abuse	This is system a patte within
Sexual harassment	This is which someo humilia enviror
Stalking	This is attenti scared
Modern Slavery	This is servitu contro gains f
Forced prostitution/sexual exploitation	This is into se

does this mean?

the partial or total removal of external e genitalia for non-medical reasons.

where one or both people do not (or in of people with learning disabilities or ed capacity, cannot) consent to the marriage y are pressurised, or abuse is used, to force to do so.

abuse and violence which is carried out in to protect or defend perceived "honour" of mily and/or community.

abuse which uses religion and faith ns to control and abuse a victim. It is often ern of coercive or controlling behaviour a religious context.

s unwanted behaviour of a sexual nature violates someone's dignity, makes one feel intimidated, degraded, or iated and/or creates a hostile or offensive onment.

a pattern of persistent and unwanted ion that makes someone feel pestered, d, anxious or harassed.

s an umbrella term for human trafficking and ude. It is used when somebody is forced or olled to do something, and another person from this.

where someone is being coerced or forced elling sex or sexual acts.

What causes VAWG?

Many different reasons are given as to why VAWG happens. These include substance use, mental ill health, anger issues, growing up in an abusive household, cultural practices, and/or stress.

These issues might have an effect, but none of these CAUSE violence or abuse.

Instead, evidence has shown that gender inequality is a key driver of VAWG.³

The Council of Europe gives three factors which lie at the root of the problem:

Cultural Factors	Legal Factors	Political Factors
Sexist views and the idea that men can have more power over women and children, results in abuse being used to maintain this power. Gender stereotypes reinforce this inequality and creates an acceptance of violence and abuse.	Although abuse is illegal, sadly we see many victims blamed for the abuse and low sentences for abusers. This results in low reporting and abuse being allowed to continue.	The under-representation of women and minority groups in power and politics means they have fewer opportunities to shape the discussion and to affect changes in policy, or to adopt measures to end VAWG.
For example: the belief that men must be tough, strong, and always in control can result in them exerting control over a partner. These attitudes are harmful to all genders.	For example: rape convictions remain low and have got worse in recent years, with only 1.6 per cent leading to conviction in 2020. Survivors have told us that this can send a terrible message that rapists can evade justice.	For example: rape in marriage only became a criminal offense in 1991 and coercive control only became an offense in 2015 in the UK. Both happened because of lobbying by women's groups.

Source: Council of Europe 2021: What causes gender-based violence?

VAWG is universal and cuts across race, class, age, sexuality, and disability, We do know, however, that experiences of racism, classism, ageism, homophobia, transphobia, and discrimination against disabled people can make people more vulnerable to abuse because they face additional barriers in accessing support.⁴ Our strategy recognises the need to understand the barriers people face and how they connect with each other and with their experienced of abuse. This approach is called Intersectionality.

What are some of the common myths about VAWG?

Myth

To stay safe, women should not go out late at night.

Fact

Women should not have to restrict their lives to be safe. We need to tell abusers to stop the abuse, not tell women to restrict their freedoms. Telling this to women is victim blaming. It is important to note that staying at home doesn't necessarily mean women will be safe either.

Statistically, women are more likely to be harmed in the home than on the street. Telling women to change behaviour does not address the root cause of abuse and will not result in change.

Myth

Violence against women and girls only affects certain groups of women.

Fact

Research has repeatedly shown violence can affect women from all social, economic, cultural, and family backgrounds.

There is no evidence to suggest that violence is more prevalent in some communities more than others. Instead, barriers to accessing support can increase vulnerability. Experiencing racism, ableism, or homophobia can influence someone reaching for support. This is why an intersectional approach is important.

Myth

Abuse is the result of an anger problem, use of substances or mental ill-health.

Fact

There is no research to support this. Abuse and violence are about power and control. Abusers often choose when they abuse, often where there are no witnesses.

We know that substances or mental ill health do not cause abuse as many people who use substances or have a mental health condition do not abuse. However, they can make existing abuse worse.

It's important to offer abusers wider support, but there is no excuse for abuse.

³ UN, 1992: General Recommendation 19, Committee on the Elimination of Discrimination Against Women.

⁴ HM Government (2011): Call to End Violence Against Women and Girls, Equality Impact Assessment.

Myth

Women involved in prostitution can not be raped or sexually assaulted.

Fact

Women involved in prostitution can and do experience rape and sexual assault.

Women involved in prostitution face discrimination and are often blamed for the abuse.

This is not acceptable, and we believe everyone should be supported.

Myth

Leaving an abusive relationship sees an automatic end to the abuse.

Fact

There can be many barriers to leaving an abusive relationship, and access to support and resources plays a role. Even after leaving, survivors can still be at risk.

Survivors recall abusers continuing to stalk them and even using institutions, such as the family courts, to continue abuse. Support for survivors must therefore always be long-term.

Myth

Forced marriage only happens in South Asian communities.

Fact

Forced marriage affects a wide range of communities from different cultural backgrounds. It affects men and women all over the world, regardless of race, ethnicity, or religion.

Stereotyping it as a problem for 'certain' communities risks the reduction of support being accessible to all. .

Myth

There is nothing we can do to stop violence against women and girls.

Fact

VAWG is the product of learned attitudes and behaviour.

By eliminating gender stereotypes and promoting a culture of respect and equality at home, at work, in communities, and across society we can work together to end VAWG.

Myth

VAWG is mainly about physical violence.

Fact

VAWG extends beyond just physical violence. Instead, VAWG is about the different ways that victims are controlled, intimidated, humiliated, or threatened.

VAWG is about being denied human rights, which can include, but is not limited to physical violence.

Myth

Sexual violence is more likely to be committed by a stranger.

Fact

At least two thirds of sexual assaults are committed by someone known to the survivor.

According to research only 2% of abusers are complete strangers. 97% of women who contacted Rape Crisis said they knew the person who raped them.



Violence against women and girls is an issue that only concerns women and girls.

Fact

It is important to note that men, boys, and non-binary people also experience the types of abuse set out in this strategy.

Although we recognise that VAWG disproportionately affect women and girls, abuse can affect anyone, and our approach will be inclusive of everyone who needs support. Men and boys also play an important role in ending VAWG.



COVID-19 has caused violence against women and girls.



It is important to recognise that COVID-19 doesn't cause VAWG. VAWG is the result of the misuse of power and control and has long been considered a hidden pandemic.

COVID-19 has shone a light on VAWG and had an impact on how people have experienced it.

3. What experts through experience told us

Hearing directly from survivors from a range of backgrounds, with different experiences, is important in shaping this strategy and our direction. In developing this strategy, we spoke to survivors, who are experts through experience, about what they felt was important in developing our approach for the next five years. Their thoughts covered four main areas:

Asking the Question:

- * Survivors told us that professionals need to be curious about abuse.
- * Victims should not be stereotyped as there is no 'type' of survivor.
- * The right response is also important. They want to be believed and supported. They don't want to have to prove themselves.
- * Support should be made available sooner, not when survivors reach crisis.
- * It can take a while for abuse to be identified.

We need to make sure professionals, friends and family can identify abuse and understand how to ask and respond.

Training for Professionals:

- * Survivors emphasised the need for widespread training so that awareness could be raised on a range of VAWG issues.
- * Training must include key messages on not blaming victims for the abuse and on holding perpetrators to account.
- * Understanding coercive control, and abuse beyond physical violence, is key. Survivors felt there should not be a hierarchy of types of abuse.

Training and awareness need to be raised amongst professionals but also more widely, so everyone understands the issue.

Sustainability of support:

- There needs to be long-term support, not just a response to crisis.
- * There should be awareness of the increased risk after separating.
- * Services need to work together better so that survivors don't have to keep telling their story.
- Services need to see the whole person and meet wider equality needs.
- * There needs to be understanding of the links between experiencing abuse, using substance to cope and impact on mental health.

Support needs to be long-term, intersectional and needs led. Professionals need to work together so that the right support is in place.

Responding to children:

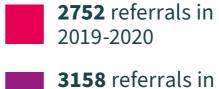
- * Survivors felt it was a priority to educate children about abusive behaviours and recognise where they are victims of abuse. They need a voice for themselves.
- * They wanted boys to learn about empathy and opportunities for them to see what a healthy relationship looks like.
- * Schools and education settings need to be part of the coordinated community response to VAWG.

The needs of children and young people must be recognised within the strategic response. Their voices must be heard and shape provision.

4. The local picture: what we already know

The difficulty of capturing an accurate statistical picture of VAWG is nationally recognised. This is for a range of reasons including the hidden nature and underreporting of VAWG issues, alongside inconsistent approaches to data collection across organisations. Estimations are based on national research.⁵ Our data picture is therefore only the tip of the iceberg:

Referrals into Angelou Partnership Service:



2020-2021

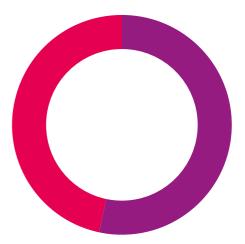


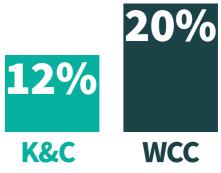
It is estimated that the following number of women have undergone Female Genital Mutilation in our boroughs.



Per cent of Domestic Abuse referrals into **Children's Services** 2020-2021:

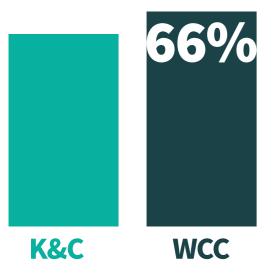






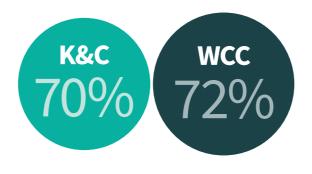
In addition, we undertook a residents' survey to understand concerns and need in our boroughs. From the 257 responses, the following was highlighted which this strategy will address:

Personal experience of street harassment:

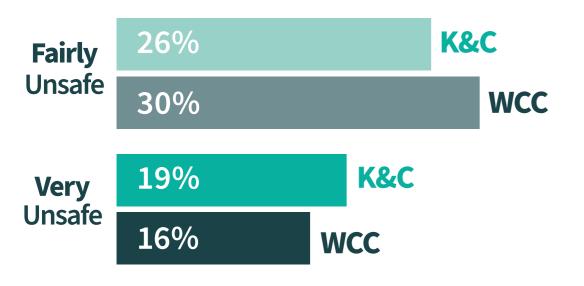


What should be our priorities?

Per cent who agreed 'support for those who need it, when they need it and for how ever long they need it' should be a priority.



How safe do you feel at night?



5. What is our approach to ending VAWG?

The Coordinated Community Response:

We recognise that real change in responding to and ending VAWG can only be achieved when all agencies, residents, and communities work effectively together.

On a survivor's journey, they are likely to encounter a number of services, organisations, and individuals. Each will hold vital information and can help build a picture of what support is needed so survivors do not have to navigate services to get the help they need. Ensuring everyone knows the role they play in responding to VAWG and how they work with each other is a process known as the Coordinated Community Response (CCR). Our CCR approach ensures a whole system response to a whole person. The following diagram shows some of the different agencies and groups who may need to be involved in the response

The Ecological Model:

Our approach to VAWG is also based on the ecological model on violence prevention. The ecological model looks at developing interventions across multiple levels – the individual, the community, the institutional and societal. When working closely across these levels, we are able to address the wider context in which VAWG happens and make wider cultural change.

The ecological model explains how improving responses across communities, institutions, and wider society, can better support individuals. By understanding the challenges that an individual faces at these levels, we are also able to respond to survivor's needs. Change requires an enabling environment where VAWG is increasingly unacceptable. Understanding what this looks like on different levels ensures that everyone plays their part in changing the culture in which VAWG happens. Across this strategy, we will look at how we can meet our objectives by understanding the actions individuals, communities, institutions, and society can take to meet our aim to end VAWG.



Whole Society

Whole Institutions

Whole Communities

> Whole Individual

6.Our **To End Violence against Women and Girls** Goal **Objectives** Our vision is to end **VAWG** is Survivors are violence against women Outcomes

and girls through our coordinated community response approach.

Our theory of change shows how we expect to meet this goal through the following four outcomes.

Our theory of change also shows the problem and barriers we want to address in achieving our goal.



Abusers are held to account

challenge abusers •Abusers will be provided support to reform

Professionals safely

Root causes of abuse tackled

Barriers to accountability:

 Limited funding for programmes Lack of established best practice model •Victim blaming and abuser invisibility

Objective One: Violence against women and girls is prevented

Prevention of VAWG must always be our first priority. In order to prevent VAWG we must address the root causes of the problem. As VAWG is the result of gender inequality and discrimination, we will work collaboratively with agencies and communities in tackling the harmful behaviours and attitudes that underpin abuse.

This approach must include challenging sexist and misogynistic attitudes. We want to build confidence across our boroughs in creating a culture change and a zero-tolerance approach to abuse in all its forms. The behaviours and beliefs that can lead to violence against women and girls are often manifested in early years.

We will work preventatively with children and young people in schools and other settings to promote healthy relationships, gender equality and respect. This work is important, but our response must be wider – working with adults, both professionals and residents is key. This also includes prevention work in a range of settings, including making our streets, our offices, and our homes safe for women and girls, as well as work with schools..

We want to support people to be allies in ending abuse and be active in improving our response to VAWG.

What survivors have told us about why this objective is needed:



What does this outcome look like across the coordinated community response?

Our theory of change shows how we will do this:

End \	/AWG through our (CCR Approach	Whole Socie
Objective	How will we achieve our outcome?	What difference will this make?	Whole Institut
One	Increased knowledge and understanding across communities through	Residents and professionals are supported to better identify and respond to	Whole Communitie
VAWG is	training and events. Awareness raised through campaigns and activities.	VAWG. Communities can come together to challenge harmful attitudes.	Whole Individual
Prevented	Preventative work with young.	Everyone understands their role in responding and ending VAWG.	

"I asked my doctor for support. I was given a leaflet but there needs to be more knowledge and awareness.

Zero-tolerance approach to VAWG.
Funding is allocated for preventative
responses.
The root causes of VAWG are identified.

Zero-tolerance approach to VAWG Policies and procedures in place. Emphasis on early intervention and identification. Support and referrals are made at early stage.

Communities are resilient against VAWG.

Posters and literature clearly displayed. Harmful attitudes are safely

challenged.

Training and awareness to understand what is abusive behaviour.

Knowledge of support services. Understanding of how to support family and friends.

Spotlight on best practice:

Healthy School Partnership

A key aspect of preventing VAWG is working with young people in educational settings to raise awareness of healthy relationships. The bi-borough Domestic Abuse Prevention in Schools Programme helps schools to develop a whole school approach to domestic abuse prevention.

The programme is free to educational settings and includes training and capacity building, support for all school staff to improve their knowledge about coercive control and its impact, equipping them with skills in facilitating disclosures safely, and to raise their confidence levels in using resources to create lesson plans and run classroom activities.

Through this Programme, schools can access resources and support around policy development, staff wellbeing, local referral pathways and support services.

"The training helped in having conversations around this issue with parents. It also clarified what support and pathways are available, and the appropriate next steps in these cases."

Soho Angels

Prevention work must happen in a range of settings to end VAWG. This includes ensuring our public places are safe for women, especially at night.

The Soho Angels is a project which looks to make the West End of Westminster safer by providing on street visible presence on Friday nights, raising awareness of how to support someone, and providing on the spot support for anyone who needs it. Soho Angels, who are volunteers, wear a high vis pink vest uniform, to be highly recognisable and distinguishable from Police, Ambulance or Council staff.

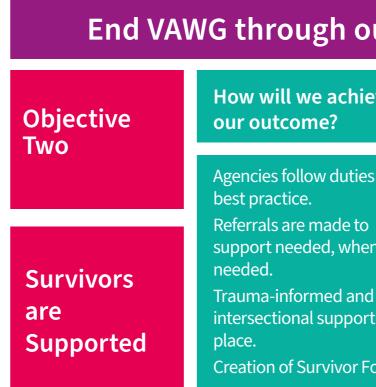
At its peak the project had over 70 Soho Angels working at least one shift a month. On a typical shift the service would support over 30 people, 70% of whom were women. This initiative highlights the role of a coordinated community response and helps create a zero-tolerance approach to abuse.

Objective Two: Survivors are supported

We recognise that survivors need a range of support at different stages of their journey. We understand that survivors not only need specialist support for the abuse they have experienced, but may also need support with housing, mental health, substance use, child care or immigration.

We are determined to create a joined-up approach with services working together, so that survivors are provided the right support at the right time. The aim is that this is led by the needs of survivors, be provided immediately and be long-term, holistic, and intersectional. a b th a T jo t t

Our theory of change shows how we will do this:



Survivors have told us that they want to be asked about their experiences in a non-judgmental way, be informed as to what support is available, and they want therapeutic support, not just a focus on a crisis response..

They state that long-term support is vital for their journey towards recovery. This includes access to training and employment, support groups, and opportunities for wider development

Survivors are experts through experience, and they have said that they need safe spaces where they can talk to other survivors and to "give back."

ur CCR Approach	
eve	What difference will this make?
s and	Abuse is identified and support is offered. A joined-up approach is
n	created with agencies working together.
d t is in	Survivor' holistic needs are met.
orums.	Survivors' voices are heard and shape responses.

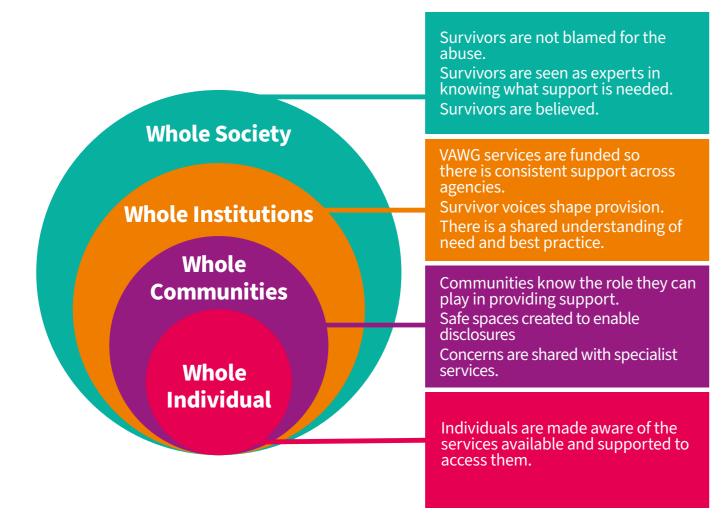
What survivors have told us about why this objective is needed:

You should not have to tell your story repeatedly.

The stereotype of a 'victim' needs to be challenged - especially if a survivor 'looks okay'.

They should be asking about and making the connections between trauma, substance use and mental ill-health.

What does this outcome look like across the coordinated community response?



Spotlight on best practice:

Al-Hasaniya

Aliya (not her real name) was referred to Al-Hasaniya Women's Centre after experiencing abuse from her husband. She has two young children, and her husband was furloughed due to COVID-19.

He would regularly check her phone, would not allow her to leave the house alone, and was verbally abusive. He would shout at the children if they made any noise and blame her if the children made too much noise.

Due to concerns about the emotional impact of the abuse, Al-Hasaniya made a referral to Social Services, explaining to Aliya what this meant.

Aliya was only able to speak to her advocate if her husband left the house to run errands. The advocate altered her way of working due to Aliya's limited ability to speak. For example, undertaking a risk assessment was spread out over several calls. The advocate created a safety plan with Aliya. When Aliya felt she could no longer stay in the home because of the increase in risk, the advocate made a referral to a refuge.

Social services paid for a taxi to collect Aliya from her flat when her husband was out on an errand. The night before, as agreed with the advocate, Aliya had hidden prepared items she would take and ensured they were ready. Aliya and her children were supported on her journey to the refuge. Support was provided until Aliya had settled in the refuge and her advocate regularly liaised with the refuge worker to ensure her needs were understood. Aliya's needs ranged from support to apply for benefits, seeking legal advice around her immigration status, through to her child's home schooling.

"Thank you so much for listening to me and helping me. Now I feel better and emotionally better...I don't feel so alone in this country with your presence...thank you again."



What support do survivors of abuse need?

24

Objective Three: Partnership Working

We will use our CCR model to bring together services, including health, housing, social care, education, criminal justice, and communities, to ensure local systems a) keep survivors safe, b) hold abusers to account, and c) prevent abuse.

Our CCR approach addresses prevention, early intervention, crisis responses, and long-term recovery and safety – all whilst working with a wide range of services, pathways, and systems. There are always challenges to working effectively in a partnership, such as facing limited resources and capacity, differing working cultures, and competing priorities.

However, this coordinated local partnership model led by local partners to tackle and ultimately prevent VAWG has already been effective.

A successful partnership will have good working relationships and respect between agencies, but the key measure is the effect it has on improving support to survivors and their families.

An effective partnership will have robust ways to ensure it is meeting its objectives and a shared understanding of what best practice looks like.

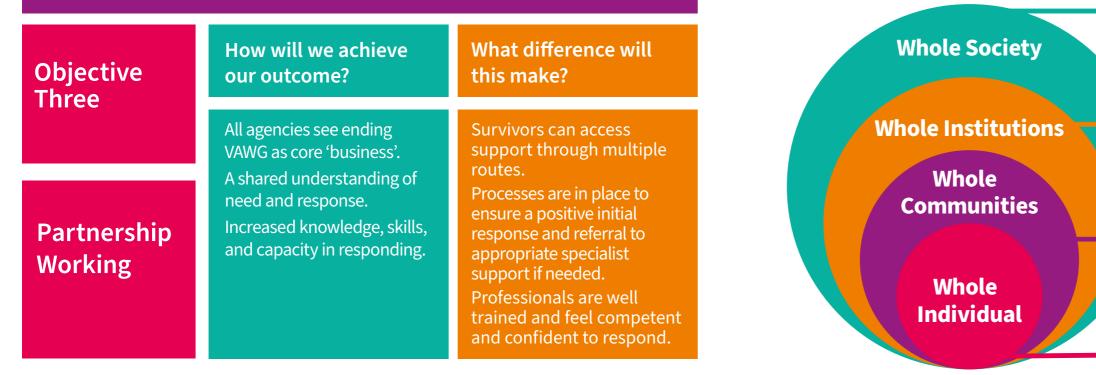
What survivors have told us about why this objective is needed:



What does this outcome look like across the coordinated community response?

Our theory of change shows how we will do this:

End VAWG through our CCR Approach



Services follow see bruises not when seeing coercion.

Sometimes people don't look like us and don't speak our language and don't understand our needs. We don't want to feel judged; we want to be helped.

Recognition and prioritisation of VAWG across all sectors of society. Coordination across government departments.

Institutions work collaboratively and have a shared approach. Grassroots organisations and specialist services are fully embedded in all responses.

Community groups and organisations are included in partnership approaches. Communities share concerns and insights with VAWG agencies.

Individuals work within partnership agreements and protocols. A recognition that no one person/ agency can end VAWG and collaboration is needed.

Spotlight on best practice:

A Whole Health Approach to Domestic Abuse:

Survivors have often told us about the negative impact experiencing VAWG has had on their physical and mental health. Indeed, evidence tells us that 80% of women experiencing domestic abuse seek help from health services and these are often their first, or only, point of contact.⁶

In order to meet the needs of survivors, a partnership approach was established to improve responses to domestic abuse across the health economy.

Westminster and Kensington & Chelsea became a pilot site for the delivery of the 'Pathfinder Project' – a project which looked to improve the responses in mental health services, GP surgeries, and Acute Services. A steering group was set up which included domestic abuse charities, local authority representatives and health partners. Over 18 months, the partnership trained a range of health professionals, our health partners held conferences and events to raise awareness, we placed domestic abuse experts in GP surgeries to provide on-the-spot support for survivors, and health partners developed policies to make sure their whole organisation understood the role they play.

The project trained 180 NHS staff on domestic abuse and resulted in the recruitment of 60 domestic abuse ambassadors, a new domestic abuse coordinator in mental health, and 20 GP surgeries receiving training. This saw an increase in referrals, particularly from older women, who may not have come to the attention of domestic abuse services.

The success of the project led to us setting up a health focused operational group to continue this work going forward.

6 Department of Health (2010) Responding to Violence against women and children – the role of the NHS. www. health.org.uk/sites/default/files/RespondingtoViolenceAgainstWomenAndChildrenTheRoleofTheNHS_guide.pdf

Objective Four: Abusers are held to account :

Ending violence against women and girls can only happen if perpetrators stop their abuse. Our strategy recognises that we must address the root causes of VAWG. This involves holding abusers to account and providing intervention and support for them to change their behaviour.

Holding abusers to account must happen across the board. Abusers may have contact with multiple services and professionals must be trained in identifying abusers, assessing the risk they pose to others and challenge their behaviour safely.

Employers also have a responsibility to challenge any sexist or abusive behaviour amongst employees.

Our theory of change shows how we will do this:

End VAWG through o	
Objective Four	How will we achie our outcome?
FOUI	Professionals are confi in holding abusers to
Abusers are held to account	account. Abusers will be provide support to reform. Root causes of abuse tackled.

Organisations need policies and procedures in place to deal with any employee identified as an abuser, using the appropriate disciplinary action where required and sharing information as appropriate to ensure the safety of others.

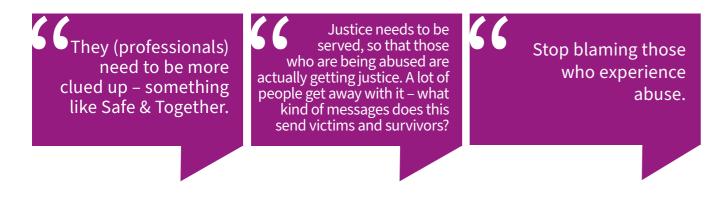
Our response also means having a fit-for purpose criminal justice system which holds abusers to account. Victims of abuse deserve justice and it is important that this is reflected in an increase in prosecutions and convictions. However, justice is wider than just the criminal justice system.

Abusers must be held to account by all sections of society, by the services working with them and within the systems that govern us.

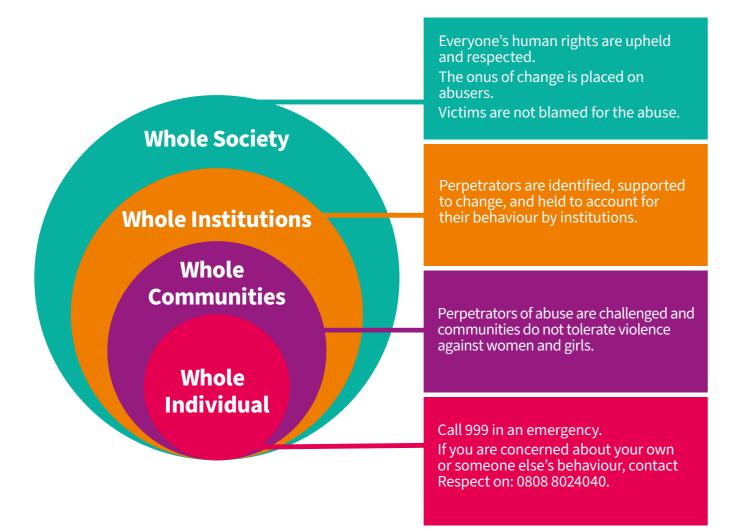
ur CCR Approach

ve	What difference will this make?
dent	Justice for survivors. Abusers know that their behaviour will not be
ed	tolerated. Abusers will change their behaviour reducing harm to others. Everyone's equal human rights are upheld.
	rights are upheld.

What survivors have told us about why this objective is needed:



What does this outcome look like across the coordinated community response?



Spotlight on best practice:

Safe and Together Model

Safe and Together is a child-centred model, providing a framework for working with domestic abuse survivors and intervening with perpetrators to enhance the safety and wellbeing of children.

It does so by promoting partnership with the non-abusive parent and holding the abusive parent accountable for their abuse which is framed as a parenting choice.

The model includes providing training to social work staff and Family & Children teams in order to build confidence in identifying a perpetrator's pattern of behaviour, to 'partner' with the survivor and to hold perpetrators to account.

As one Social Worker noted in the feedback following the training:

"The training has aided me in putting a framework around how I approach the cases I work with. It has specifically helped me to consider how I prepare for discussions with perpetrators, how I order my thinking when presented with assessing harm, and how to take a strengths-based approach when working alongside survivors."

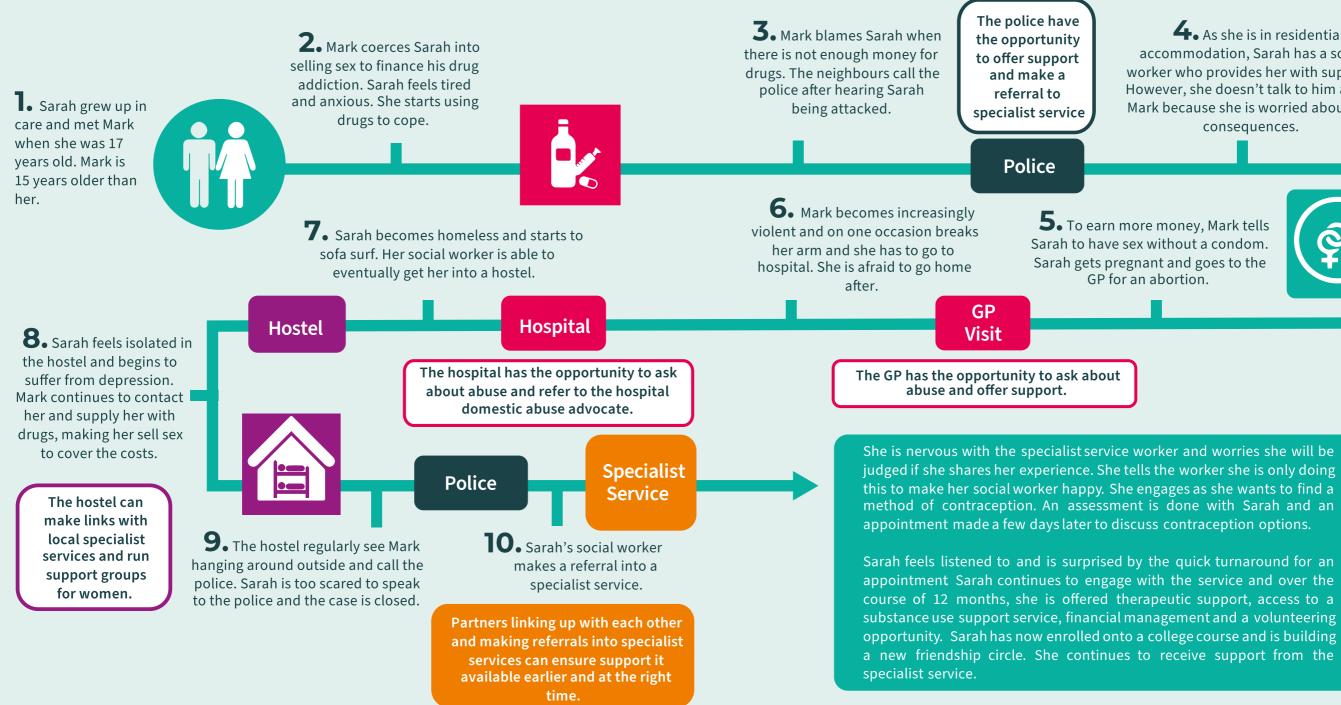
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7. Journey of a survivor

The following map shows the journey of Sarah.

Opportunities and Improving our Response

It is a case study based on the lived experience of a survivor. The map highlights the challenges Sarah faces, but also shows the various services that come into contact with Sarah and the opportunities for improvements if we work collaboratively as part of our coordinated community response:



4. As she is in residential accommodation, Sarah has a social worker who provides her with support. However, she doesn't talk to him about Mark because she is worried about the consequences.

Sarah to have sex without a condom. Sarah gets pregnant and goes to the GP for an abortion.



8. Putting the Strategy into operation

This strategy will be implemented through our coordinated community response where everyone plays their part in responding and ending VAWG.

The strategy will be reviewed, monitored, and adjusted as needed by the VAWG Strategic Board which was set up in 2014 and is attended by senior representation from voluntary, statutory and community organisations working to tackle VAWG across the boroughs.

The Board will be influenced by 6 Operational Groups that each have a coordinator and a chairperson and work to implement detailed action plans based on our strategic objectives.

The governance structure will include dedicated spaces for specialist services and survivors who are experts through experience.

This will ensure the strategy and its implementation are meeting best practice and addressing identified need.

Opposite is our VAWG partnership structure which will oversee and support the delivery of our strategy:

Overseen by this governance structure, our coordinated community response, ecological model, and theory of change will focus on creating local system change.

This approach will focus on improving data sharing to inform policy and commissioning; co-production with experts through experience, multi-agency working, and workforce development to embed more effective responses to VAWG.

To ensure success for the strategy in order to achieve its four objectives, it is important that we have funding in place.

Westminster and Kensington & Chelsea commit to commissioning specialist VAWG services to support survivors. Our partnership will continue to identify needs and apply for funding to meet this need.

We will also work collaboratively through joint commissioning to ensure the right support is available to prevent abuse, support survivors and their children, and to hold abusers to account.

VAWG partnership structure



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SPECIALIST SERVICES GROUP

STRATEGIC PARTNERSHIP BOARD

Health and Wellbeing Board

Community Safety Programme Board

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Local Safeguarding Children's Partnership

9. The Way Forward: A Call to Action

This strategy sets out our vision for ending violence against women and girls.

This is an ambitious vision which will be realised through a robust action plan. We are working closely with residents, survivors, and multi-agency partners to develop this in order to address our four strategic objectives:

- Objective One: Violence against women and girls is prevented
- Objective Two: Survivors are supported
- Objective Three: Partnership working
- Objective Four: Abusers are held to account

An action plan will be published in early 2022 setting out the steps to be taken. Initial conversations suggest that these actions will include:

- work with schools in a preventative capacity, projects helping to make our streets safe,
- focused work with survivors from minoritised backgrounds and those who experience multiple disadvantage,
- work in changing perpetrator behaviour,
- and a focus on improving systems and referral pathways.

The emphasis of the action plan will be on our coordinated community response and the role we can all play in ending VAWG.

The action plan will also build on best practice work that we have been delivering across the boroughs.

This includes: commissioning commended services such as the **Angelou Partnership**, a partnership of ten agencies who provide a single front door of support for survivors of abuse; the delivery of initiatives such as **Westminster Women's Safe Space**, which looks to meet the needs of rough sleeping women affected by domestic abuse and multiple disadvantage; and work happening in Kensington & Chelsea to support women involved in prostitution, in partnership with **Rahab charity** and the Metropolitan police.

This strategy and action plan will link up with and support other strategic priorities to increase safety, including ending serious youth violence, promoting safeguarding, addressing Modern Slavery, and embedding equality, diversity, and intersectionality.

10. Conclusion

Together we can end violence against women and girls

We are determined to end violence against women and girls and believe that partnership working in a coordinated community response can help us achieve this.

This strategy sets out the role we can all play in responding to and ending VAWG. We welcome professionals, residents, and survivors to join us in achieving our four objectives.

Together, we can work to make our boroughs safer for anyone who is living, studying, working, visiting, and travelling in Westminster and Kensington and Chelsea.



For further information please contact: **Shabana Kausar Strategic Lead: Violence against Women** and Girls

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English

Information from this document can be made available in alternative formats and in different languages. If you require further assistance please use the contact details below.

Arabic

يمكن توفير المعلومات التي وردت في هذا المستند بصيغ بديلة ولغات اخرى. إذا كنت في حاجة إلى مزيد من المساعدة، الرجاء استخدام بيانات الاتصال الواردة أدناه.

Farsi

اطلاعات حاوی در این مدارک به صورتهای دیگر و به زبانهای مختلف در دسترس می باشد. در صورت نیاز به کمک بیشترلطفا از جزئیات تماس ذکر شده در ذیل استفاده کنید.

French

Les informations présentées dans ce document peuvent vous être fournies dans d'autres formats et d'autres langues. Si vous avez besoin d'une aide complémentaire, veuillez utiliser les coordonnées ci-dessous.

Portuguese

A informação presente neste documento pode ser disponibilizada em formatos alternativos e em línguas diferentes. Se desejar mais assistência, use por favor os contactos fornecidos abaixo.

Tagalog

Ang impormasyon sa dokumentong ito ay maaaring makuha sa iba't-ibang format at wika. Kung kailangan niyo ng karagdagang tulong, mangyari lamang na kontakin kami gamit ang mga detalye sa ibaba.

Spanish

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Visit www.rbkc.gov.uk/community-and-local-life/community-safety/ domestic-abuse-and-violence-against-women-and-girls for more details.

