

Domestic and Sexual Abuse Services Mapping Exercise

West Yorkshire Combined Authority and Violence Reduction Unit

Report from RedQuadrant

March 2023

Contents

Introduction	3
Summary of findings	4
Recommendations	7
Methodology and limitations of our work.....	9
Context in West Yorkshire	12
What service provision is currently available for victims of domestic abuse?	14
Are there resources or services currently available to support practitioners in challenging domestic abuse behaviours?	20
What are the current referral routes for domestic abuse services in West Yorkshire?	22
To what extent do domestic abuse services in West Yorkshire deliver holistic and multi-agency support?	24
Conclusion.....	28

Introduction

- 1.1 West Yorkshire Combined Authority and the West Yorkshire Violence Reduction Unit commissioned RedQuadrant to undertake a mapping exercise to identify all:
 - Domestic abuse support and services (including adult, child, ethnic minority and LGBTQIA+ services)
 - Domestic abuse perpetrator programmes and support (including adult, child, ethnic minority and LGBTQIA+ services)
 - Adult sexual violence services (including male, female, ethnic minority and LGBTQIA+ services)
 - Child sexual exploitation and abuse services.
- 1.2 The aim of this research is to explore;
 - What service provision is currently available for victims of domestic abuse?
 - Are there resources or services currently available to support practitioners in challenging domestic abuse behaviours?
 - What are the current referral routes for domestic abuse services in West Yorkshire?
 - To what extent do domestic abuse services in West Yorkshire deliver holistic and multiagency support?
- 1.3 This research will focus on victim-survivor services and programmes and is accompanied by a further paper exploring responses to perpetrators. As such the two papers should be read in parallel.
- 1.4 The findings of this exercise are to support the West Yorkshire Combined Authority (WYCA) and the West Yorkshire Violence Reduction Unit (VRU) when commissioning future services, to assist those organisations providing services when seeking future funding, and of course, to ensure that survivors, victims and perpetrators have the most up to date and helpful information when seeking or being sign-posted to help.

Summary of findings

1.5 Below, we outline our summary of findings. More detail can be found in each relevant chapter.

1.6 *What service provision is currently available for victims of domestic abuse?* We identified 70 services working on issues relating to domestic and sexual violence. We were able to analyse data from 65 victim-survivors services. 19 of these services completed questionnaires relating to their services.

1.7 The table below details the services we were able to find for each local authority area. Some of these services worked across a number of local authority areas.

Area	Services	Population
Bradford	24	547,000 ¹ ,
Calderdale	4	206,600 ²
Kirklees	5	433,300 ³
Leeds	19	812,000 ⁴
Wakefield	14	353,300 ⁵
West Yorkshire Wide	11	154,0200

1.8 There were 60 services across West Yorkshire for victim-survivors of domestic abuse, 39 for victim-survivors of sexual violence and 28 for victim-survivors of child sexual exploitation. However, knowledge of these services by referring agencies was somewhat patchy.

1.9 In our analysis we identified gaps in terms of provision for LGBTQIA+ communities, by and for services for ethnic minority groups, children and young people and those with experience of child sexual exploitation. We were also only able to identify one SARC service to cover the whole of West Yorkshire.

¹ <https://ubd.bradford.gov.uk/about-us/population/>

² <https://www.calderdale.gov.uk/v2/residents/health-and-social-care/joint-strategic-needs-assessment/calderdale-demographic-information>

³ <https://www.ons.gov.uk/visualisations/censuspopulationchange/E08000034/>

⁴ <https://www.ons.gov.uk/visualisations/censuspopulationchange/E08000035/>

⁵ <https://www.ons.gov.uk/visualisations/censuspopulationchange/E08000036/>

- 1.10 *Are there resources or services currently available to support practitioners in challenging domestic abuse behaviours?* In our analysis we found that 16 of the 65 services provided training and 44 noted they shared resources online.
- 1.11 We found that there are a multitude of agencies across the five districts who can provide training to all services working with victim-survivors (beyond specific domestic abuse and sexual violence services), the gap however, is how able services are to access these resources and the types of training offered.
- 1.12 *What are the current referral routes for domestic abuse services in West Yorkshire?* In our analysis, we found that 35 services accepted referrals from statutory agencies and third sector groups, (with 27 unknowns) and 34 accepted self-referrals (with 26 unknowns). Self-referrals tended to be taken online or through helpline contact.
- 1.13 We found that referral routes seem to be working fairly well between services. Some referring agencies shared reflections on; information sharing between services, comments around which services are involved and whether this is appropriate for all victim-survivors, capacity for services to deliver support particularly around accommodation, and the need for quick and easy referral practice and processes for professionals.
- 1.14 *To what extent do domestic abuse services in West Yorkshire deliver holistic and multi-agency support?* When exploring holistic and multi-agency support, we identified a number of inter-related themes. These were; awareness of and ability to respond to intersectional identities, service user engagement and by and for services, partnership working, and funding.
- 1.15 We found that there is a need for services to be able to communicate across sectors, to reflect on how services can best deliver support for different communities and who is best placed to do this work, and to reflect on how current funding arrangements impact on service's ability to provide more holistic partnership working across the five districts.
- 1.16 Finally, we found that of the services we were able to analyse, 21 of the services had funding in place for one year or less (32%) and 18 had funding in place for three years or less (27%). This means that 59% of services do not currently have funding in place for more than three years. 15 services had secured accreditation, and 13 had been evaluated.

- 1.17 Research tells us that funding for Black, Asian and racialised communities tends to be less than funding available for other services⁶. As such, WYCA may wish to consider ways in which to support funding for specialist services working with communities experiencing racial inequality.
- 1.18 We invite West Yorkshire Combined Authority to continue to work with services to complete their information to build a robust picture of what services exists, who they can serve, their capacity to deliver and to explore with services how to strengthen collaboration and communication across and within the districts.

⁶ <https://baringfoundation.org.uk/wp-content/uploads/2015/07/Funding-for-BAME-VCOs-Report-July-2015-V4CE-II.pdf>

Please see here for note on language used <https://www.centreformentalhealth.org.uk/guide-race-and-ethnicity-terminology>

Recommendations

Recommendation 1: Sustainable funding. 59% of services we analysed currently do not have more than three years of funding in place. Most services also reported multiple, short-term funding streams. Many have not been able to evaluate their services. WYCA should explore ways in which to support sustainable funding for services to enhance their ability to recruit, retain and train staff, deliver services, and undertake evaluations. Further, WYCA could explore with Black, Asian and ethnic minority groups across the local authority areas how to develop funding streams within an anti-racist framework to ensure minoritized groups are able to access available funding⁷.

Recommendation 2: Consistent service provision. We found patchy service provision across the five regions, with Kirklees only having five identified services, despite having the third biggest population in the Combined Authority area. We also only identified eight services as being able to provide accommodation support, and 15 as providing preventative programmes. We found only one SARC for the whole of West Yorkshire. WYCA and the five local authority areas should explore ways in which to ensure the needs of victim-survivors across the combined authority area are met. This could take place through building on needs assessments, increasing engagement with community groups to explore victim-survivors' journeys through services and developing a strategic approach across the five local authority areas to ensure better coverage of service provision.

Recommendation 3: Training and resources: Whilst there are a number of services that can provide training and online resources, this is somewhat patchy. There are currently no training standards for all services delivering support across the five local authority areas. It could be beneficial for WYCA to explore the development of consistent training standards as has been progressed in other local authority areas⁸. This could cover specialist provision, intersectional identities and resulting support needs and awareness of gender and coercive control.

Recommendation 4: Partnership working and communication. Whilst services working within the field tended to speak positively of partnerships and referral routes, we found some gaps between those working directly within the domestic and sexual violence field, and those working in other third-sector or statutory agencies such as youth work and peri and post-natal services. WYCA should explore ways in which to enhance knowledge and communication between all services working with people, through the dissemination of this work, and providing an easy-to-access and up-to-date database of what services exist and where.

Recommendation 5: Responding to intersectional identities: Whilst many organisations did express that they were able to provide support for all equalities groups, few were by and for services, and few expressly noted service user involvement or participation. WYCA should support organisations to explore ways in which services can provide support around

⁷ An example of anti-racist commissioning principles can be found here <https://www.ivar.org.uk/blog/anti-racist-commissioning-principles/>

⁸ For example, https://www.bathnes.gov.uk/sites/default/files/da_learning.pdf

multiple identities and enhance service user engagement and participation, and by and for service development.

Recommendation 6: Collaboration: As within our review of perpetrator services, we recommend that commissioners across West Yorkshire consider putting in place a “One front Door” (either at a local authority level or West Yorkshire wide level). This would ensure that individuals seeking help, or agencies seeking help on behalf of service-users, have one telephone number or one website/ portal to access. Other services should then link and refer to the One Front Door to ensure sufficient join up. This could also build on ideas shared by referring agencies around a physical one front door, with co-location and skills sharing.

Methodology and limitations of our work

- 1.19 In this section, we outline how we approached this report and our response to some of the challenges we faced in recording accurate information.
- 1.20 We undertook a mixed methodology approach to this work to ensure our findings were accurate and robust. This included desk-based research, anonymous surveys, questionnaires and interviews to initially map the services available for victim-survivors.
- 1.21 We then took a two-pronged approach in exploring holistic referral routes in speaking with both service providers and referring agencies across West Yorkshire. Referring agencies included housing providers, LGBTQIA+ organisations, youth groups, peri-natal and post-natal groups and Universities and colleges. We undertook this part of the research via surveys and interviews. 22 people from referring agencies responded.
- 1.22 Referring services who responded to the survey were based across West Yorkshire, with 68% of respondents from Bradford, 23% from Leeds, 14% from Wakefield, and 45% responding from Calderdale. The types of services they delivered are detailed in the table below:

Service delivery	Response rate
Other	59%
Mental health support	23%
Housing and homelessness	18%
Substance misuse work	14%
Working with older adults	14%
Sexual health	14%
Community health	13%
Community development	9%
Youth work	9%
Race equality	5%
Gender equality	5%

Working with people with disabilities	5%
Arts and culture	0%
Business	0%
Employability	0%

- 1.23 Those who responded 'other' were predominately involved in probation, adult and child social care and family services including perinatal support and family counselling.
- 1.24 Whilst our desk-based research and anonymous surveys enabled us to undertake an initial mapping of services, we wished to sense check our findings with organisations to ensure details were up-to-date and relevant.
- 1.25 As such we sought to host focus groups and interviews with both referring agencies and domestic and sexual violence services. Six organisations engaged in deeper questions through either one-to-one interviews or email correspondence.
- 1.26 We wished to combine these findings with a more detailed questionnaire to domestic and sexual violence services to ensure our findings were robust.
- 1.27 We had initially hoped for services to complete questionnaires detailing their service provision, however, we found that engagement was more of a challenge than we had anticipated, with less than 20 services completing the questionnaire. To increase engagement, we used our desk-based analysis to partially complete the questionnaires and then sent them to services for checking and completion. We received 31 completed questionnaires. We also sought the assistance of the Combined Authority and Local Authority domestic abuse leads to encourage services to provide the required information.
- 1.28 Of the 99 services we initially identified for victim-survivors and perpetrators of harm, we were thereafter able to find and analyse feedback and information on 70, as some services were no longer delivering, and some did not provide contact information. This was particularly true for organisations working in the arts, culture and business fields, for example Leeds Festival, Safe Gigs for Women and training for taxi drivers around domestic abuse and sexual violence. Some services provided information relating to their overall provision, and others provided detailed information where they offered multiple programmes.
- 1.29 As such, we can provide insights around what the current service provision is, where the gaps are, and what relationships exist between and within services to offer holistic and multi-agency support. We encourage WYCA and the VRU to continue to invite

programmes to complete their missing information after our involvement to ensure all services are properly represented.

- 1.30 On analysing our findings, unless the service explicitly mentioned in either their questionnaire returns or through our desk review that the programme had a) an established service user involvement pathway, b) training for professionals, or c) identifies as a by and for organisation, we have noted that this is not an approach used by the organisation. In practice, it is likely that some of these services do use a participatory approach, that they may provide training and support for professionals, and that they are by and for services. However, we were unable to find data to support this within their online presence or through returned questionnaires.
- 1.31 Within this report we provide a narrative around our findings. In additional papers we provide an excel spreadsheet detailing our findings as well as a further paper with details we gathered from all services. These additional submissions can be updated should more information be gathered from services in the future.

Context in West Yorkshire

- 1.32 We have included information in this section relating to the prevalence of harm and the demographics of the region, as this will be helpful in exploring where best resources should be allocated.
- 1.33 Whilst it is hard to quantify the exact numbers of people experiencing domestic abuse in England, in West Yorkshire, 84,282 domestic-abuse related incidents and crimes were recorded in the year ending March 2022, as well as 17,486 domestic abuse-related stalking and harassment offences⁹
- 1.34 However, it is important to note that Police statistics only represent a small number of likely incidences and experiences of domestic abuse¹⁰ due to chronic under-reporting.¹¹ It is estimated that around 1 in 5 women and girls in the UK have experienced sexual or physical abuse¹².
- 1.35 According to data from the Mayor of West Yorkshire's Safety of Women and Girls Strategy: *'A survey conducted in 2021 within an area of West Yorkshire, with over 1300 responses from women, highlighted the following key issues: 45 per cent had been followed or stalked and 21 per cent had suffered sexual assault or rape. 97% believe that 'being a woman' affects their personal safety. Looking at West Yorkshire Police data for the 12 months between September 2021 and 2022 there have been: 92,859 crimes where we have a female victim aged 10+, this includes females as perpetrators as per the Home Office definition. That is a 15% increase on the previous 12 months. Nearly 1 in 5 of recorded VAWG offences are committed in a public space.'*¹³
- 1.36 Data taken from the 2021 census shows that the population in West Yorkshire is predominantly white (76.6%), with 15.9% of the population identifying as Asian, and 3% identifying as black'¹⁴
- 1.37 According to the mid-year 2021 census, each local authority area had experienced a population rise. The current population of each area is detailed below:

⁹ <https://www.westyorks-ca.gov.uk/policing-and-crime-news/deputy-mayor-for-policing-and-crime-responds-to-ons-domestic-abuse-stats/#:~:text=In%20West%20Yorkshire%2C%2084%2C282%20domestic,related%20stalking%20and%20harassment%20offences.>

¹⁰ <https://www.endviolenceagainstwomen.org.uk/wp-content/uploads/EVAW-snapshot-report-FINAL-030322.pdf>

¹¹ <https://fra.europa.eu/en/publication/2014/violence-against-women-eu-wide-survey-main-results-report>

¹² <https://icchange.co.uk/statistics-on-violence-against-women-and-girls-in-the-uk/>

¹³ <https://www.westyorks-ca.gov.uk/media/9463/the-safety-of-women-and-girls-strategy.pdf>

¹⁴ <https://www.varbes.com/demographics/west-yorkshire-demographics>

Area	Population
Bradford	547,000 ¹⁵ ,
Calderdale	206,600 ¹⁶
Kirklees	433,300 ¹⁷
Leeds	812,000 ¹⁸
Wakefield	353,300 ¹⁹
West Yorkshire Wide	2352200

¹⁵ <https://ubd.bradford.gov.uk/about-us/population/>

¹⁶ <https://www.calderdale.gov.uk/v2/residents/health-and-social-care/joint-strategic-needs-assessment/calderdale-demographic-information>

¹⁷ <https://www.ons.gov.uk/visualisations/censuspopulationchange/E08000034/>

¹⁸ <https://www.ons.gov.uk/visualisations/censuspopulationchange/E08000035/>

¹⁹ <https://www.ons.gov.uk/visualisations/censuspopulationchange/E08000036/>

What service provision is currently available for victims of domestic abuse?

1.38 Of the 70 programmes and services providing support or interventions around domestic and sexual abuse and violence, we identified 65 services for victim-survivors across West Yorkshire. 17 services worked with both victim-survivors and perpetrators of harm. We have detailed where they operate in the table below:

Area	Services
Bradford	24
Calderdale	4
Kirklees	5
Leeds	18
Wakefield	14
West Yorkshire Wide	11

- 1.39 Within our analysis, we found that many services offered multiple programmes, working with communities, perpetrators, delivering prevention activities as well as support and accommodation. 17 services also offered services to perpetrators and 17 noted that they provided services for the community (this included advice, support or training to friends, family and community members).
- 1.40 Eight services noted that they provided support for high-risk/high-harm victim survivors, with most of these services providing support via referrals from MARACs, Police or Health. 11 services noted support for medium risk and 12 services responded that their service was focused on low risk/low harm. The question was originally asked in the context of perpetrator programmes, however, interestingly many service providers (often those working closely with, or delivering, perpetrator programmes) did note risk in their response.
- 1.41 Of the total 65 programmes and services, 60 focused on domestic abuse, 39 on sexual violence and only 28 focused on child sexual exploitation.
- 1.42 59 services provided support, 15 services delivered preventative work, and 8 provided accommodation. The types of support delivered included; helpline's, 1:1 support, group work, peer support, ISVA and IDVA support, advocacy and counselling. Accommodation included dispersed units as well as refuge support, where victim-

survivors could also access other supports around benefits, employment and therapeutic support.

1.43 In terms of specialist support, we have detailed our findings in the table below:

Type of specialist service	Service response		
	<i>Yes</i>	<i>No</i>	<i>unknown</i> ²⁰
LGBTQIA+ services	21	13	30
Black and ethnic minority services	29	10	25
Children and Young people	30	12	22

1.44 Whilst the table above indicates a range of specialist services for different equalities groups, only one programme noted in their narrative that they offered specialist support to LGBTQIA+ people. Similarly, only one organisation noted that they were able to provide specialist support to children with disabilities.

1.45 Six services ran programmes and support specifically for men and boys, and many other services offered to support to both male and female victim-survivors.

1.46 We identified some private practices, particularly in relation to counselling and arts-based programmes, whereby funding was secured via private payments and commissioning of services. However, most services offered support free at the point of contact.

1.47 *Awareness of services:* In our survey to referring agencies, we asked organisations to tell us if they were aware of the variety of services available. This is detailed in the table below and highlights that there is fairly good awareness around direct support and accommodation, with less awareness of services working with children and young people and community-based interventions.

²⁰ Some services responded n/a and as such these are not included here

Type of service	Awareness of respondents
Direct support for victim-survivors	90%
Direct support/programmes for people who use harm	50%
Advocating for people with experience of abuse	65%
Accommodation	75%
Workshops with children and young people	45%
Delivery of community based interventions (restorative justice, bystander programmes)	45%

1.48 This was further broken down into the types of services clients could access, with 19% of respondents reporting that they were unaware of services for any equalities groups, and only 4.7% responding that they knew of services that could provide support around intersectional identities.

Service provision	Awareness
Young people	57%
Black and Ethnic minority groups	33%
LGBTQIA+ people	29%
Older adults	24%
People with disabilities (including mental and physical health)	19%
Intersectional identities (e.g for older South Asian adults, LGBTQI young people etc)	5%
None of the above	19%
Something else (please describe)	19%

- 1.49 Those who responded “something else” detailed awareness of national specialist agencies and services for men.
- 1.50 Whilst 21 support services and programmes did report to us that they could provide services for LGBTQIA+ and 29 said they do provide services for black and ethnic minority groups, only a third or less of referring agencies reported awareness of this provision.
- 1.51 By and for: By and for services; ‘are specialist domestic abuse or VAWG services *“run by and for the users and communities they aim to serve”*²¹ Within our questionnaire to sexual violence and domestic abuse services, only four reported they were “by and for”. Indeed, within our questionnaire to referring agencies, one responded;
- ‘There is little in the way of by and for services. I believe this may mean that although there is support available not all victims, survivors, perpetrators will feel these services meet their needs’.*
- 1.52 In our interviews with referring agencies, one interviewee shared that;
- ‘if someone wanted a specialist service I don’t know where I would go to. If there is one, I don’t know what it is’.*
- 1.53 None of the services we identified were based within specific, specialist support services for the LGBTQIA+ community, older adults, gypsy traveller community or for those with disabilities. Services we had initially identified as potentially providing support around domestic and sexual violence who worked with people with disabilities reported to us that they provided no services for their client group in response to violence and abuse.
- 1.54 We also struggled to engage with ethnic minority groups within this research, with many of our requests for information unanswered. This highlights a potential gap in relationships between WYCA and those organisations, as these groups may not have the capacity to prioritise engaging with this research.
- 1.55 *Community work:* Similarly, whilst in our initial desk review, we identified some community-based support services (such as active upstander training, Leeds festival support spaces, Safe Gigs for Women, training for hairdressers and taxi drivers and

²¹ For more information, see Survival, recovery and justice: specialist services for survivors of domestic abuse, EHRC (2020)

faith based support) we were unable to explore more deeply what this looks like in practice, with incomplete information online and uncertain contact details.

- 1.56 By and for services and community-based initiatives to support victim-survivors after they disclose can be an important part of a comprehensive approach to service provision. Both working in the night-time economy and developing positive relationships with by and for providers embedded in racialised communities is particularly important as '*1 in 5 recorded VAWG offences are committed in a public space*'²² and 18% of the population in West Yorkshire identifies as Black or Asian.
- 1.57 *Accreditation and sustainability:* A further important gap we identified was that only six services reported that they had more than three years funding in place, none of these services were specialist services for racialised communities. 59% reported less than three years funding. Similarly, few services had either been accredited (15) or evaluated (13). This is likely to be linked to lack of funding to invest in ongoing evaluations and accreditation standards.
- 1.58 In summary, we identified gaps in terms of provision for LGBTQIA+ communities, by and for services for other minoritised groups, children and young people and those with experience of child sexual exploitation. We were also only able to identify one SARC service to cover the whole of West Yorkshire.

Recommendation 1: Sustainable funding. 59% of services we analysed currently do not have more than three years of funding in place. Most services also reported multiple, short-term funding streams. Many have not been able to evaluate their services. WYCA should explore ways in which to support sustainable funding for services to enhance their ability to recruit, retain and train staff, deliver services, and undertake evaluations. Further, WYCA could explore with Black, Asian and ethnic minority groups across the local authority areas how to develop funding streams within an anti-racist framework to ensure minoritized groups are able to access available funding²³.

Recommendation 2: Consistent service provision. We found patchy service provision across the five regions, with Kirklees only having five identified services, despite having the third biggest population in the combined authority area. We also only identified eight services as being able to provide accommodation support, and 15 as providing preventative programmes. We found only one SARC for the whole of West Yorkshire. WYCA and the five local authority areas should explore ways in which to ensure the needs of victim-survivors across the combined authority area are met. This could take place through building on needs assessments, increasing engagement with community groups to explore victim-

²² <https://www.westyorks-ca.gov.uk/media/9463/the-safety-of-women-and-girls-strategy.pdf>

²³ Further information on anti-racist commissioning principles can be found here <https://www.ivar.org.uk/blog/anti-racist-commissioning-principles/>

survivors' journeys through services and developing a strategic approach across the five local authority areas to ensure better coverage of service provision.

Are there resources or services currently available to support practitioners in challenging domestic abuse behaviours?

- 1.59 In our analysis, we found that 16 of the 65 services provided training and 44 noted they shared resources online.
- 1.60 We were only able to identify 15 services that specifically worked with professionals, highlighting a potential gap in practitioners' knowledge outside of domestic abuse and sexual violence services and a potential workforce development need.
- 1.61 In our survey of organisations that may refer to domestic abuse and sexual violence services, we asked if referring agencies are familiar with training and resources for those working with victim-survivors and perpetrators. Their responses are detailed in the table below:

Type of resource to support professionals	Awareness
Online resources/guides	65%
Training for professionals including the Police, Social Work, Education, Youth work and Health care.	50%
Awareness raising	45%
Change making; including lobbying for/campaigning for long term structural change around the causes of harm	15%

- 1.62 Whilst 50% of respondents were aware of training, 50% were not. Our findings indicate that a large proportion of services do provide online resources and guides, however, there seems to be less resource around training for practitioners not working directly within domestic and sexual violence services. This knowledge and skill gap could contribute to referrers understanding of the dynamics of harm, victim blaming, support available and supporting people experiencing abuse who hold multiple equalities identities.
- 1.63 Similarly, supporting domestic and sexual violence organisations to access training held by referring agencies could support better partnership working and increase awareness around what specialist provision could look like (beyond provision for all), and how intersecting identities impact on help-seeking behaviour, support and recovery needs.

- 1.64 Further, there are currently no training standards for all services delivering support. This could cover specialist provision, intersectional identities and resulting support needs and awareness of gender and coercive control. It could be beneficial for WYCA to explore the development of consistent training standards across the 5 local authority areas as has been progressed in other local authority areas²⁴.
- 1.65 In summary then, there are agencies across the 5 areas who can provide training to all services working with victim-survivors (beyond specific domestic abuse and sexual violence services), the gap however, is how able services can access these resources and how consistent standards are across training providers.

Recommendation 3: Training and resources: Whilst there are several services that can provide training and online resources, this is somewhat patchy. There are currently no training standards for all services delivering support across the five local authority areas. It could be beneficial for WYCA to explore the development of consistent training standards as has been progressed in other local authority areas. This could cover specialist provision, intersectional identities and resulting support needs and awareness of gender and coercive control.

²⁴ Resources used by other local authority areas could be useful here for developing training with providers for referring agencies. For example, Essex Local Authority <https://www.essexsab.org.uk/media/1807/minimum-domestic-abuse-training-standards.pdf> and Bath and Somerset Local Authority https://www.bathnes.gov.uk/sites/default/files/da_learning.pdf

What are the current referral routes for domestic abuse services in West Yorkshire?

- 1.66 In our analysis, we found that 35 services accepted referrals from statutory agencies and third sector groups, and 34 accepted self-referrals. Self-referrals tended to be taken online or through helpline contact. Some of these services provided victim-survivors support through their existing perpetrator intervention programmes.
- 1.67 When we asked referring agencies how the referring process works for them as practitioners as well as their clients, there was a generally positive response around partnership working. 72% of respondents to our anonymous survey had referred people to specific domestic and sexual violence services, those who hadn't referred tended to work in management roles, and so were not involved in client work. 36% of those who had referred a client noted that referral routes worked well, and that there was *'good collaboration'*.
- 1.68 One respondent to our interview questions told us;
- 'I think the referral process so far for me has been smooth and easy to navigate. Only issue I have had reported from supported people, is sometimes they struggle to get through to [service] on the phone – I'm aware they are very busy and may not always be able to answer there and then – they always call back'.*
- 1.69 The capacity of support spaces was also flagged in relation to referring into accommodation spaces with one referring agency respondent commenting;
- 'My main experience with DV services has been decline/rejection of referrals! - Lack of spaces for refuges in the Leeds area is a recurring issue'.*
- 1.70 Some noted that they would welcome more information sharing around the referral process, and what happened after a referral was made. One shared;
- 'Referral routes need to be simple, quick and provide feedback as to whether or not the person referred in accessed support. A lot of professionals are really time poor so need a system that does not require large amounts of time spent filling in forms, there needs to be some flexibility. Otherwise, the temptation is to simply signpost services users to support services that once they leave the building, they are unlikely/unable to contact themselves'.*
- 1.71 Others noted that there existed challenges in working with referring agencies, with one sharing concerns specifically around Police involvement. They said; *'Police are a key part of the service, and they're not great, terrible with women's disclosures so*

they're even worse with trans women and gay men'. This concern was also raised in relation to women who are at risk of deportation. Whilst this was shared by one interviewee, the relationship between minoritised and vulnerable communities and the Police, and other statutory agencies, could be further explored by WYCA.

1.72 One interview respondent noted that in supporting a service user through the referral process *'it wasn't clear what support is provided'* and that this resulted in clients disengaging and cases being closed.

1.73 In summary, referral routes seem to be working fairly well between services, with room to explore; information sharing between services, reflections on which services are involved and whether this is appropriate for all victim-survivors, what services are available, spaces for accommodation and the need for quick and easy referral practice and processes for professionals.

Recommendation 4: Partnership working and communication. Whilst services working within the field tended to speak positively of partnerships and referral routes, we found some gaps between those working directly within the domestic and sexual violence field, and those working in other third-sector or statutory agencies such as youth work and peri and post-natal services. WYCA should explore ways in which to enhance knowledge and communication between all services working with people, through the dissemination of this work, and providing an easy-to-access and up-to-date database of what services exist and where.

To what extent do domestic abuse services in West Yorkshire deliver holistic and multi-agency support?

- 1.74 In our review of services, we found that several of the domestic abuse leads within the five local authority areas were undertaking their own mapping exercise of services, to enhance their understanding of what services exist in their areas and how they interact with each other. As such, there is not currently a clear picture on what holistic services look like within and across the five local authority areas.
- 1.75 However, through our interviews, surveys and desk review we were able to gain insights into how the services who engaged with this project understand holistic support and multi-agency working.
- 1.76 Within this section, we have defined holistic support as support that is people-centred, addressing the needs and strengths of each individual. This means understanding how mental, physical, spiritual, cultural and social aspects of a person are impacted on by sexual violence and domestic abuse and taking a trauma-informed approach to substance and alcohol misuse, parenting, homelessness, and engaging in criminal behaviour. Part of this then, is to understand how intersectional identities impact on people's ability to seek and receive help, the type of support they receive, how service users are engaged in service delivery, and how other agencies relate to each other.
- 1.77 Below, we highlight inter-related themes that we were able to identify around how services can deliver holistic support and partnership working. These are; awareness of and ability to respond to intersectional identities, service user engagement and by and for services, partnership working, and funding.
- 1.78 *Intersectional identities:* When talking with referring agencies, some commented on how services themselves are designed to respond to only part of someone's identity, rather than to meet the needs of the whole person. For example, service users have to access multiple services to meet their multiple needs.
- 1.79 Some also noted the negative influence of current national conversations around trans identity, women only spaces, and immigration, and how there may be concerns in referring vulnerable clients to services that do not have specialist support in place for these communities for fear of how those services may respond.
- 1.80 *By and for:* As noted above in section 6, whilst many services did note that they could provide services for everyone, few were specialist services that delivered by and for services for specific groups. This was found across equalities groups. For example, for children and young people with experience of CSE, 28 programmes worked with survivors of CSE. Of these, 18 worked directly with children and young people, and two

noted that they were by and for services. How children and young people with experience of CSE are engaging in co-developing services then, is not clear.

- 1.81 One interviewee commented on the difficulty in using a feminist framework within their work due to a local resistance around this approach. However, much of the work of feminist organisations in establishing victim-survivors services historically has been focused on the delivery of “by and for” services. Whilst some women’s organisations may indeed continue to use this approach, it was not visible in our analysis. Therefore, there may be many more by and for services than we were able to analyse due to a reluctance to publicly share a feminist analysis, rather than because this approach does not exist.

Recommendation 5: Responding to intersectional identities: Whilst many organisations did express that they were able to provide support for all equalities groups, few were by and for services, and few expressly noted service user involvement or participation. WYCA should support organisations to explore ways in which services can provide support around multiple identities and enhance service user engagement and participation and by and for service development.

- 1.82 *Partnership working:* Whilst many of the domestic abuse and sexual violence services reported working in partnership with each other- Staying Safe, Women’s Centre, PETALS, for example, there was less of a sense of partnership working from some of the referring agencies that we engaged with reporting that they were unclear ‘*who does what*’.

- 1.83 Feedback from the anonymous survey also included reflections around communication and multi-agency working with one sharing;

‘I think agencies [need] to understand what each other do and for there to be clear guidance of who should be referred to who’

- 1.84 One respondent working in Bradford noted that they perceived;

‘no support for child/young people living in a DV home...no one to one DV support for people who can't attend groups’.

- 1.85 However, in our mapping exercise, we found there to be several programmes within the area that young people could work with. Lack of communication between services working in youth work, health, housing and across third sector agencies could contribute to this lack of knowledge around who does what.

Recommendation 6. Collaboration: As within our review of perpetrator services, we recommend that commissioners across West Yorkshire consider putting in place a “One front Door” (either at a local authority level or West Yorkshire wide level). This would ensure that individuals seeking help, or agencies seeking help on behalf of service-users

have one telephone number or one website/ portal to access. Other services should then link and refer to the One Front Door to ensure sufficient join up. This could also build on ideas shared by referring agencies around a physical one front door, with co-location and skills sharing.

1.86 *Funding:* Some of this lack of knowledge across services can be attributed to a lack of resource for domestic and sexual violence services to build partnerships with other groups, with one interviewee commenting that;

‘Services are guarded because of the market environment of competing tendering. [so no one feels comfortable collaborating]’.

1.87 Currently, 59% of victim-survivor services do not at this time have sustainable, long-term funding, (beyond three years) and so it could be possible that this lack of funding within a competitive funding environment is restricting the development of multi-agency working outside of the domestic abuse and sexual violence field with other agencies delivering by and for, community, and specific services around mental health, homelessness, substance misuse and youth work.

1.88 It is also useful to reflect on how structural racism within funding bodies and philanthropic trusts²⁵ interacts with Black and Asian organisations' ability to deliver services and engage with research such as this. Black and Asian organisations tended to be underfunded compared to their white counterparts pre-pandemic²⁶ with many at risk of closure throughout the UK. As noted in Recommendation 1 it could be useful for WYCA to explore what anti-racist commissioning looks like across West Yorkshire drawing on work developed in other areas.

1.89 Currently, of the services we analysed, we found that most received a variety of funding from a variety of sources. These tended to be; West Yorkshire Combined Authority, their own local authority, the Ministry of Justice, the National Lottery, Children in Need, NHS and philanthropic trusts. Most organisations reported more than two funding streams.

1.90 Within our interviews, participants were hopeful that there are many opportunities to support holistic and multi-agency support. One commented that there is much learning to be gathered from other services working with young people as;

‘if we look at services for young people, adult services could learn a lot from young people’s provision in the voluntary sector, there’s huge amounts to do across the agenda, service user voice, inclusion, intersectionality’

²⁵ <https://tenyearstime.com/wp-content/uploads/2022/08/Racial-Justice-and-Social-Transformation-2.pdf>

²⁶ <https://www.ubele.org/assets/documents/REPORT-Impact-of-COVID-19--on-the-BAME-Community-and-voluntary-sector---A-Follow-Up.pdf>

- 1.91 Other suggestions on how services could support multi-agency working and holistic support included reflections on the benefits of co-location, skills sharing across sectors through training and mapping victim-survivors' journeys through accessing different services, as noted in Recommendation 6.
- 1.92 In summary then, there is a need for services to be able to communicate across sectors, to reflect on how services can best deliver support for different communities and who is best placed to do this work, and to reflect on how current funding arrangements impact on service's ability to provide more holistic partnership working across the five districts as noted in Recommendation 1.

Conclusion

- 1.93 We analysed and assessed information relating to 65 services providing support for survivors of domestic or sexual abuse, and as such we have been able to identify recurring themes for WYCA, the VRU and local authorities to explore further. These include:
- Sustainable funding; as noted, 59% of services we analysed currently do not have more than three years of funding in place. Most services also reported multiple, short-term funding streams. The lack of sustainable funding could potentially limit services' ability to recruit and retain highly skilled staff, their capacity to train, deliver, evaluate, gain accreditation and scale services as well as their ability to collaborate.
 - We also found patchy service provision across the five regions, with Kirklees only having five identified services, despite having the third biggest population in the combined authority area. We also only identified eight services as being able to provide accommodation support, and 15 as providing preventative programmes.
 - Services working within the field tended to speak positively of partnerships and referral routes, with some gaps between those working directly within the domestic and sexual violence field, and those working in other third-sector or statutory agencies such as youth work and peri and post-natal services.
 - Whilst many services did note they are able to support all victim-survivors, there were very few by and for services for all equalities groups, particularly those from LGBTQAI+ communities, gypsy travellers, people with disabilities and older adults.
- 1.94 As such, exploring the barriers and opportunities for collaboration between specialist agencies and general providers may be useful for West Yorkshire Combined Authority. This could include developing a strategic approach to meet the needs of all victim-survivors and preventative work, conversations around intersectional identities and how those holding multiple identities feel able to engage with statutory and third sector partners, exploring sustainable, anti-racist funding options, enhancing workforce development opportunities around the needs of intersectional and equalities groups, co-location and skills sharing, and building on community engagement with specialist services.
- 1.95 Finally, we would encourage West Yorkshire Combined Authority to *continue to work with service providers* to complete their information to provide a robust picture of all services working across the five regions.