DRAFT Northamptonshire Domestic Abuse and Sexual Violence Strategy 2019-2022

Working Together to Make Northamptonshire Safer
Who is this document for?

Reducing domestic abuse and sexual violence is everyone’s business.

This strategy sets out our shared ambitions for Northamptonshire and our commitment to doing everything we can to prevent, tackle and reduce domestic abuse and sexual violence and the impact it has on the children, adults and families in our county.

Developed at the request of Northamptonshire’s Community Safety Board, this Strategy reflects the Board’s priorities of improving support to vulnerable people and ensuring that, wherever possible, people receive early help and support in order to prevent any escalation of harm.

This Strategy is designed to improve the co-ordination of local services that prevent and respond to domestic abuse and sexual violence, to enable everyone to understand the contribution that they can make as individuals and organisations, and improve how we work together to keep people safe and improve the life chances of children, young people and adults who are affected by domestic abuse and sexual violence.
Table of Contents

Who is this document for?................................................................. 2
Table of Contents.............................................................................. 3
1. Foreword ....................................................................................... 4
2. What do we mean by ‘domestic abuse’ and ‘sexual violence’? ......................................................... 6
3. Who are the victims of domestic abuse and sexual violence? ........................................................... 8
4. Understanding the national and local context .............................................................................. 12
5. Our strategic objectives.................................................................. 17
6. Governance.................................................................................... 20
7. Definitions used within this document ....................................................................................... 21
1. **Foreword**

Domestic Abuse and Sexual Violence are some of society’s most despicable crimes. They alter the course of lives and bring with them a trauma which is hard to comprehend.

This Northamptonshire Domestic Abuse and Sexual Violence strategy will set out the vision we have in Northamptonshire for ensuring that everyone has the chance to live safely without the fear of being harmed by domestic or sexual violence.

The strategy will bring together the efforts of statutory, non-statutory and specialist agencies in the county under one framework enabling access to specialist support, greater accountability and the opportunity to join together efforts to educate and support Northamptonshire residents to be free of fear.

It will look to enable the delivery of the new powers set out in the draft Domestic Abuse Bill published in January 2019, designed to offer greater support to victims and their families and deal more swiftly with offenders.

With much media coverage in the last few years around historical sexual abuse and the #MeToo movement it is right that this strategy also provides a strategic home for sexual violence and coercive behaviours to be tackled.

The nature and complexity of domestic abuse and sexual violence mean that much is still hidden or unknown about victims in Northamptonshire. However by enabling our collective efforts to be overseen in partnership through this strategy we will create a strong basis for robustly tackling them in the most effective ways possible.

**Martin Hammond**

*Chair of the Community Safety Board.*
Our ambition for Northamptonshire is that everyone can live safely and experience healthy relationships without the threat of domestic abuse or sexual violence.
2. What do we mean by ‘domestic abuse’ and ‘sexual violence’?

Domestic abuse

People often associate domestic abuse with physical assault – a black eye, bruises, pulled hair or physical injury – and yet, in many abusive relationships, controlling behaviour and emotional abuse are a prominent feature. Survivors describe it as being like “walking on eggshells”.

Domestic abuse is “Any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality”. The abuse may be psychological, physical, sexual, financial or emotional and can happen alongside physical attacks or in isolation and can go on for years.

Controlling behaviour is a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

Whilst the government definition of domestic violence applies to young people aged 16 and above, it is critical to acknowledge that domestic abuse can have far reaching impacts on children and young people under 16 who are often caught up in abuse carried out in the household.

Sexual violence

Sexual violence is “Any behaviour (physical, psychological, verbal, virtual or online) that is perceived to be of a sexual nature which is controlling, coercive, exploitative, harmful, or unwanted that is inflicted on anyone (irrespective of age, ethnicity, religion, gender, gender identity, sexual orientation or any form of disability)”. Sexual violence is any unwanted sexual act or activity. There are many different kinds, including: rape, sexual abuse (including in childhood), sexual assault, sexual harassment, forced marriage, so-called honour-based violence, female genital mutilation (FGM), trafficking, sexual exploitation (including child sexual exploitation).

Sexual violence can be perpetrated by a stranger, or by someone known and even trusted, like a friend, colleague, family member, partner or ex-partner. Sexual violence can happen to anyone and no one ever deserves or asks for it to happen.

Sexual violence is often talked about in relation to an individual’s ability to consent. Consent is defined in section 74 of the Sexual Offences Act 2003 as someone engaging in sexual activity if they agree by choice and they have the freedom and capacity to make that choice.
Consent to sexual activity may be given to one sort of sexual activity but not another, e.g. vaginal but not anal sex or penetration with conditions, such as wearing a condom. Consent can be withdrawn at any time during sexual activity and each time activity occurs. Consent cannot be given if an individual is:

- scared or threatened
- bullied
- very drunk or under the influence of drugs
- asleep

100% of the responsibility for sexual violence lies with its perpetrator(s). There is no excuse for sexual violence; it can never be justified or explained away.

**Coercive Behaviour**

Coercive behaviour is an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim. This definition includes “honour” based violence, female genital mutilation (FGM) and forced marriage, and it is clear that victims are not confined to one gender or ethnic group.

**Stalking**

Stalking is defined as ‘a pattern of fixated and obsessive behaviour which is repeated, persistent, intrusive and causes fear of violence or engenders alarm and distress in the victim.’

Stalking can consist of any type of behaviour such as regularly sending flowers or gifts, making unwanted or malicious communication, damaging property and physical or sexual assault. If the behaviour is persistent and clearly unwanted, causing fear, distress or anxiety then it is stalking. Stalkers may be known to their victim and be linked to offending such as domestic abuse or sexual violence or be a stranger who has become fixated with the individual they choose to pursue.
3. **Who are the victims of domestic abuse and sexual violence?**

Anyone can be a victim of Domestic Abuse, Sexual Violence or Coercive Behaviour and anyone can perpetrate it.

Victims are female and male, and may be in heterosexual, same sex or non-intimate relationships. Abuse may occur amongst all groups regardless of protected characteristics, including age, religion, race, disability, education or economic status. Sexual Violence may also be perpetrated by strangers who are not known to victims (although this is less likely).

Domestic abuse and acts of sexual violence are largely invisible crimes. Although abuse affects both men and women, there are a disproportionate number of female victims compared to male victims, and women are more likely to experience repeat incidents. It is often difficult to measure the national picture accurately as victims are often reluctant or afraid to report it to the police. Many abused victims find it difficult to function in their daily lives because of the effects of abuse. Absences from work due to injuries or visits to the doctor often cause them to lose their jobs, making them less able to leave their abusive situations.

The abuse experienced by victims who are Black, Asian or from a minority ethnic group as well as those who have been refugees can be further complicated by other relevant abusive factors such as forced marriage. Women from Black, Asian or minority ethnic communities are likely to face additional barriers to receiving the help that they need; the most profound barrier being communication for non-English speakers.

Research shows that 1 in 4 Lesbian, Gay and Bi-sexual people will experience domestic abuse along with 80% of the Trans community. Nationally LGBT reporting to the Police is underrepresented due to a number of barriers that include a reluctance to report, confidence in being taken seriously and responses that are insensitive to same sex partners.

Regardless of the age at which the abuse occurred or whether the perpetrator was known to the victim or not, the violation, shame and stigma will have an impact on health and wellbeing and feeling able to seek support for the effects may be a process that can take months or years.

**Domestic Abuse**

More than 30% of domestic abuse starts in pregnancy and existing abuse may get worse during pregnancy or after giving birth. It can result in a wide range of impacts on mother and baby including miscarriage, preterm labour, low birthweight, and long-lasting physical disability. The impact on the mother includes physical harm, depression, anxiety and post-traumatic stress disorder.
Male victims of domestic abuse can often find it difficult to admit what is really happening to them. Many abused men believe that experiencing abuse in some way affects their masculinity or that they are not “real men” if they are suffering. However, men have exactly the same rights as women to be safe in their own homes and statutory services have a duty to provide services to all, irrespective of gender.

Sexual assault and rape often occur as part of the domestic abuse in a relationship. Although the perpetrator may be an acquaintance – a colleague, a friend, a neighbour; it is less likely that they are a complete stranger. For many adults getting support may take years particularly if the abuse took place when they were children. Whether the perpetrator is well known to the victim or not, the violation, shame and stigma will have an impact on their health and wellbeing. Feeling able to seek support for the after-effects may be a process that takes many months or years.

The experiences we have as children – especially when a parent or carer is abusive – can affect our future behaviour. While there is no inevitable ‘cycle of abuse’ and thousands of children who live with domestic abuse do not go on to become victims or perpetrators, adverse childhood experiences can impact on behaviours which then develop into patterns of behaviour in adulthood.

Children who live with domestic abuse are at an increased risk of behavioural problems, emotional trauma and mental health difficulties in adult life. Not all children who live with domestic abuse will exhibit problems or difficulties either immediately or later in life, but all will be affected in some way.

**Sexual Violence**

Rape and sexual assault can happen to anyone at any age, from the very young to the very old. It may be part of domestic abuse perpetrated by a partner or carried out by someone a victim knows. However it can be perpetrated by a stranger unknown to the victim although this is less likely.

Individuals who have been raped or sexually abused or assaulted are often required to undergo medical examination at their local Sexual Assault Referral Centre (SARC) to preserve evidence and access specialist physical and emotional support. Support can be accessed without having reported the offence to the police and regardless of time passed since the offence took place.

The last few years has seen more attention placed on sexual assault and rape due to the Independent Inquiry into Child Sexual Abuse and the #Me Too movement. This has seen a surge in historic sexual abuse cases being reported and supported through health and criminal justice pathways. However sexual violence remains under reported and a continued area of concern for the public and professionals.
Coercive Behaviour

FGM is an area of coercion which is currently under reported and which little is known about the real numbers of at risk girls in the UK.

The World Health Organisation (WHO) categorises FGM in to 4 categories.

I. Clitoridectomy: partial or total removal of the clitoris (a small sensitive and erectile part of the female genitals) and, in very rare cases, only the prepuce (the fold of skin surrounding the clitoris).

II. Excision: partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora (the labia are “the lips” that surround the vagina).

III. Infibulation: narrowing of the vaginal opening through the creation of a covering seal. The seal is formed by cutting and repositioning the inner, or outer, labia, with or without removal of the clitoris.

IV. Other: all other harmful procedures to the female genitalia for non-medical purpose, e.g. pricking, piercing, incising, scraping and cauterizing the genital area.

The WHO assert that this practise takes place in 29 African counties and some areas of Asia and the Middle East; carried out predominately on young girls between infancy and 15 years of age, though occasionally on adult women. The causes of FGM include a mixture of cultural, religious and social factors which change between community and social group but the main themes include coming of age, marriageability, purity and fidelity. FGM has no health benefits and it is known to cause a number of health concerns both in the short and long term.

FGM was made a crime in 2003 by the FGM Act and was amended by the Serious Crime Act 2015 which brought in mandatory reporting for healthcare, social care and teaching professionals. The first successful FGM prosecution in the UK was achieved in 2019.

Honour based violence

Honour based violence (HBV) is a violent crime or incident which may have been committed to protect or defend the honour of the family or community.

It is often linked to family members or acquaintances who mistakenly believe someone has brought shame to their family or community by doing something that is not in keeping with the traditional beliefs of their culture. For example, honour based violence might be committed against people who:
• become involved with a boyfriend or girlfriend from a different culture or religion
• want to get out of an arranged marriage
• want to get out of a forced marriage
• wear clothes or take part in activities that might not be considered traditional within a particular culture

Women and girls are the most common victims of honour based violence however it can also affect men and boys. Crimes of ‘honour’ do not always include violence. Crimes committed in the name of ‘honour’ might include:

• domestic abuse
• threats of violence
• sexual or psychological abuse
• forced marriage
• being held against your will or taken somewhere you don’t want to go
• assault

A forced marriage is one that is carried out without the consent of both people. This is very different to an arranged marriage, which both people will have agreed to. There is no religion that says it is right to force you into a marriage and you are not betraying your faith by refusing such a marriage.

**Stalking**

Stalking is defined as “a pattern of fixated and obsessive behaviour which is repeated, persistent, intrusive and causes fear of violence or engenders alarm and distress in the victim.”

It was entered into legislation in 2012 under amendments to the Protection from Harassment Act making it a specific offence in England and Wales for the first time.

An example of example behaviours consider under this legislation are: following, contacting/attempting to contact, publishing statements or material about the victim, monitoring the victim (including online), loitering in a public or private place, interfering with property, watching or spying. This is a non-exhaustive list which means that behaviour which is not described above may also be seen as stalking. A course of conduct is seen as 2 or more incidents.
4. Understanding the national and local context

National Context

Unlike many other crimes, Domestic Abuse and Sexual Violence are often not a single time limited event. Victims are often repeatedly subjected to abusive behaviours which can make it extremely difficult to measure the exact number of incidents involved. In the year ending 31 March 2018, there were 599,549 Domestic Abuse-related crimes recorded by the Police in England and Wales and a further 598,545 incidents not subsequently recorded as crimes (Office for National Statistics, 2018).

The number of police recorded crimes increased (by 23%) in the year ending 31 March 2018, while the number of incidents has declined, illustrating that recording of Domestic Abuse, Sexual Violence and coercive behaviour continues to rise. However, much of the crime that takes place does not come to the attention of the police and there remains a gap between the level of abuse measured by the Crime Survey for England and Wales and the level of abuse recorded by the police. It is estimated that around one in six of domestic abuse victims report their abuse to the police (Office for National Statistics, 2018), therefore it is clear that much of the extent and impact of abuse therefore remains hidden.

Preventing Domestic and Sexual Abuse is still a national priority against the backdrop of austerity. In January 2019 the government published its draft Domestic Abuse Bill (1) and this has been considered throughout the development of our local strategy.

<table>
<thead>
<tr>
<th>Key statistics – Domestic Abuse</th>
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<tbody>
<tr>
<td>Domestic abuse accounts for 1 in 5 of all violent crimes.</td>
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<tr>
<td>One in four women and one in six men endure violence from a partner, ex-partner / family member during their adult life in England and Wales which is equivalent to approximately 1.2 million women and over 704,000 men aged 16-59 years. Between six and ten percent of women suffer domestic violence in a given year.¹</td>
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<tr>
<td>On average, victims experience 50 incidents of abuse before receiving effective support.</td>
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</table>

¹ Council of Europe, 2002
Every minute, police in the UK receive a domestic assistance call – yet only 35% of domestic violence incidents are reported to the police.²

Victims of domestic violence are more likely to experience repeat victimisation than victims of any other type of crime.

Two women are killed every week in England and Wales by a current or former partner.³

Domestic abuse commonly takes place in households with children and young people. We know that witnessing domestic abuse can be particularly traumatic for children. A minimum of 750,000 British children and young people a year (around 6.5%) are witnesses to domestic abuse and around 30% of domestic abuse begins or escalates during pregnancy.⁴

85% of victims sought help on average five times from professionals in the year before they got effective help to stop the abuse.⁵

<table>
<thead>
<tr>
<th>Key statistics – Sexual Violence</th>
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<tr>
<td>Approximately 700,000 people aged 16 to 59 years were victims of a sexual assault in the last year.⁶</td>
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<td>Less than one in five (17%) victims of rape or assault by penetration reported their experience to the police.⁷</td>
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<td>However Police recorded sexual offences are at their highest volume since the introduction of the National Crime Recording. These increases are largely thought to reflect improvements in police recording and more victims being willing to report.⁸</td>
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² Stanko, 2000 & Home Office, 2002  
³ Homicide Statistics, 1998  
⁴ Home Office, 2010  
⁶ Crime survey for England and Wales, 2018  
⁷ Crime survey for England and Wales, 2018  
⁸ Crime survey for England and Wales, 2018
The number of offences recorded by the police remains well below the number of victims. Of the offences that do come to the attention of the police, many don’t progress further through the criminal justice system (53% of rapes do not proceed through the CJS)\(^9\)

One in five women in England and Wales has experienced some form of sexual violence since the age of 16 \(^{10}\)

Women are nearly five times as likely to have experienced sexual assault as men \(^{11}\)

### Key statistics – Coercive Behaviours

It is estimated that 137,000 women and girls who have migrated to England and Wales are living with the consequences of FGM and 144,000 girls are at risk of FGM in England and Wales.\(^{12}\)

The NHS reported that there were 6,195 individual women and girls who had an attendance where FGM was identified or a procedure related to FGM was undertaken in the period April 2017 to March 2018. These accounted for 9,490 attendances reported at NHS trusts and GP practices where FGM was identified or a procedure related to FGM was undertaken.\(^{13}\)

Data from the latest Crime Survey for England and Wales shows that 13,909 stalking incidents were reported to the police in the year to March 2018.\(^{14}\)

Office for National Statistics (2013) stated 1 in 6 women and 1 in 12 men were victims of stalking.\(^{15}\)

CPS data for 2017-18, outlines that 1,616 prosecutions were started for stalking offences, up from 959 in 2016-17, an increase of 68.5 per cent. Over 17,000 prosecutions were begun for breaches of restraining orders, the highest volume ever recorded.\(^{16}\)

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\(^{9}\) Crime survey for England and Wales, 2018  
\(^{10}\) ONS Crime Survey for England and Wales, January 2013  
\(^{11}\) ONS Crime Survey for England and Wales, March 2016  
\(^{13}\) Female Genital Mutilation (FGM) - April 2017 to March 2018, Annual Report, Experimental Statistics Report  
\(^{14}\) Crime survey for England and Wales, 2018  
\(^{15}\) ONS Crime Survey for England and Wales, January 2013  
\(^{16}\) CPS annual VAWG report 2018
Local Context

Domestic Abuse

Using the most recent information made available from Northants Police, we know that Domestic Abuse and Sexual Violence continues to be a major concern within our county.

Offences involving violence against the person accounted for the majority of Domestic Abuse offences with 80.5% which equates to 36.0% of all recorded violent crimes (Northants Police, May 2019). Those acts of violence without injury including stalking and harassment continue to account for 2 out of every 3 domestic violence offences.

Northamptonshire Police have identified an increasing trend in the repeat victimisation rate for victims of Domestic Abuse within the last 12 months. In April 2019 Police data identified that 39.3% of domestic crime recorded involved a repeat victim, as did 45% of all domestic related crime and non-crime incidents. The victims identified within the last 12 months were predominantly white females between the ages of 25 and 34.

Between September 2017 and September 2018 a total of 16,139 incidents were recorded by Northamptonshire Police, in 14,425 of these cases children were found to have been present. The impact that such exposure to abuse can have upon a child has been subject to significant research and it is known that adverse childhood experiences may impact significantly on all areas of a child’s development.

Sexual Violence

Sexual offences within Northamptonshire in the last year have been increasing however this is a national trend and Northamptonshire is not an outlier. In July 2019 Northamptonshire Police data indicated that sexual violence made up 3.78% of all crime in the last year and during this period the Force saw an 18% increase in reported rapes and 17.3% increase in reported other sexual offences. However conviction rates for sexual offences in the county are lower than our regional peers.

Coercive Behaviour

FGM

Local data on FGM within Northamptonshire is scant with no local criminal prosecutions. The recent Ofsted inspection report of Children Services at Northamptonshire County Council published in July 2019 stated “Where a risk of female genital mutilation is identified, the local
authority and partners take appropriate action in a timely way to prevent and protect children at risk. This includes application for court orders for the local authority to acquire parental responsibility, enabling them to make the right decisions for children.” 17

Research from Macfarlane and Dorkenoo estimated that 137,000 women and girls with FGM, born in countries where FGM is practised, were permanently resident in England and Wales in 2011. Prevalance rates from the research place London as having by far the highest prevalence at 21.0 per 1,000 population with rural areas in contrast having prevalence’s well below 1 per 1,000, but above zero. However Northampton was one of eight authority areas with a rate of over 7 per 1,000 population. 18

Latest Data from the NHS on FGM Jan-March 19 put new cases in the Midlands and East of England at 390 cases where women and girls had FGM identified or a procedure related to FGM had been undertaken. 19

Honour Based Violence

Data on honour based violence in Northamptonshire has resulted in 39 crimes being recorded with an HBV flag attached in the last 12 months. Latest figures from the Home Office released in May 19 put forced marriage cases at 69 crimes across the East Midlands. Little further data currently exists to map need in the county.

Stalking

In the latest data available from Northamptonshire Police 257 incidents of stalking were reported in the county in the last 12 months. Little further data currently exists to map need in the county.

17 Ofsted Northamptonshire County Council July 19
19 NHS Female Genital Mutilation January-March 2019: The Female Genital Mutilation (FGM) Enhanced Dataset (SCC1 2026)
5. Our strategic objectives.

Domestic abuse, sexual violence and coercive behaviours cause significant harm to those people affected within our communities. In order to reduce the level of abuse, we need to prioritise prevention, provision and protection methods at the earliest opportunity.

Our strategy has five strategic objectives and by 2022 our ambition will be that we have:

**Developed targeted prevention and intervention initiatives** that evidence can demonstrate have impact and deliver the outcomes that are required. We will work as a partnership to review current services and commission based on need and outcomes.

**Improved everyone’s responses to people affected by Domestic Abuse, Sexual Violence and Coercive Behaviour** by ensuring that appropriate awareness raising is undertaken, training is delivered to those in our organisations and communities and everyone knows how to recognise signs, be responsive to these signs, respond appropriately to disclosure and know which service they need to support the victim to access.

**Ensured appropriate access to services for children, young people and adults affected by Domestic Abuse, Sexual Violence and Coercive Behaviour** by developing and embedding clear referral and service pathways that can effectively support service users regardless of their gender, race, ethnicity and sexuality.

**Developed safe and appropriate accommodation options** for those who are victim of abuse. We will adopt a new approach to supporting victims, where possible keeping them safe in their own homes using a range of interventions or facilitating access to alternative housing such as social housing and refuge.

**Appropriate civil and criminal justice response to Domestic Abuse, Sexual Violence and Coercive Behaviour incidents that** ensures perpetrators are dealt with effectively by adopting a case management approach within the criminal justice system that is seamless and utilises all available disposals including the new Conditional Caution and Perpetrators programme. In addition victims will have been supported in utilising the appropriate Civil Court Orders to prevent re-victimisation.

We are confident our strategic objectives will improve outcomes for victims and their families. We will embed strong foundations to enable continuous year on year improvement as we continue to develop our local response.
<table>
<thead>
<tr>
<th>Strategic objective</th>
<th>Success will mean that:</th>
<th>Lead Coordinator</th>
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</thead>
</table>
| 1 Developing targeted prevention and intervention initiatives | Commissioning services will be based on a clear evidence base which focuses on positive outcomes for victims and their families  
There is increased awareness of services available including services and access to meet diverse needs across the county.  
Access is easily available to the best possible advice and assistance to victims of domestic and sexual abuse, their families and perpetrators.  
Voluntary, community and private sector organisations are supported to provide services as part of local pathways.  
The criminal justice, safeguarding and health and social care processes are more effectively working together and that the pathways for victims, their families and perpetrators are understood. | Northamptonshire County Council         |
| 2 Improving everyone’s responses to people affected by domestic abuse, sexual violence and coercive behaviour | There is an increased diversity of referring agencies to MARAC and other processes identified through action plans  
More organisations or communities will be involved in engagement/raising awareness activity as targeted through action plans  
That a high level of confidence will be reported from attendees of training that they know how to deal with a DA, SV or Coercive disclosure  
Service users who have received services will report they are more confident.  
Repeat victimisation /offending is reduced. | Clinical Commissioning Group             |
<table>
<thead>
<tr>
<th>Strategic objective</th>
<th>Success will mean that:</th>
<th>Lead Coordinator</th>
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</thead>
<tbody>
<tr>
<td>3</td>
<td>Ensuring appropriate access to services for children, young people and adults affected by domestic abuse, sexual violence and coercive behaviour.</td>
<td>Lead Coordinator: Districts &amp; Boroughs</td>
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<td></td>
<td>We will have ensured that regardless of where people live in the county, they are able to receive the same high standard of care and support and there will be equality of access to services, including accommodation.</td>
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<td></td>
<td>We will have developed and embedded a clear pathway for victims of abuse and recognised the needs of diverse groups in the range of services commissioned and provided.</td>
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<tr>
<td>4</td>
<td>Developing safe and appropriate accommodation options</td>
<td>Lead Coordinator: Northampton Borough Council</td>
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<td></td>
<td>We will have developed a countywide housing pathway for victims of domestic abuse and sexual violence – our ‘safe accommodation offer’ – that is applied consistently (by all housing authorities and housing providers) in Northamptonshire.</td>
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<tr>
<td>5</td>
<td>Ensuring an appropriate civil and criminal justice response to domestic abuse, sexual violence and coercive incidents.</td>
<td>Lead Coordinator: Police</td>
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<td></td>
<td>Perpetrators are dealt with effectively by adopting a seamless approach to case management within the criminal justice system.</td>
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<td></td>
<td>Victims will have been supported in utilising the appropriate Civil Court Orders to prevent re-victimisation.</td>
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6. Governance

Northamptonshire Community Safety Board currently identifies Domestic Abuse and Sexual Violence as being one of its three priorities. There is an expectation that the Community Safety Board will take lead on the governance for the Domestic Abuse and Sexual Violence Strategy for Northamptonshire 2019-2022 and that the Health and Wellbeing, Safeguarding Adults and Safeguarding Children’s board will all contribute to this. The importance of effective communications between partners is clear and responsibilities for this are explicit. The Community Safety Board will identify a lead co-ordinator responsible for having oversight of each strategic objective and be able to report progress to the Board. Appendix A outlines the proposed membership of the strategic group.
Definitions used within this document

ABE – Achieving Best Evidence
CCG – Clinical Commissioning Group
CHISVA – Children’s Independent Sexual Violence Advocate
DA – Domestic Abuse
FGM – Female Genital Mutilation
IDVA – Independent Domestic Violence Advocate
ISAC – Independent Stalking Advocate
ISVA – Independent Sexual Violence Advocate
MARAC – Multi Agency Risk Assessment Conference
NDAS – Northamptonshire Domestic Abuse Service
<table>
<thead>
<tr>
<th>Support Provider</th>
<th>Contact Details</th>
<th>Services Available</th>
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<tbody>
<tr>
<td>The Sunflower Centre</td>
<td>01604 888211</td>
<td>Sunflower Centre provides support across Northamptonshire for those experiencing domestic abuse. We can offer telephone or face to face support helping you with understanding what domestic abuse is; Giving advice on how to keep safe; Liaising with agencies such as housing and the police; Supporting you through the criminal justice system; Practical interventions such as security assessments and civil advice.</td>
</tr>
<tr>
<td>VOICE for Victims and witnesses</td>
<td>0300 303 1965</td>
<td>Support for those assessed as standard and medium risk on the DASH.</td>
</tr>
<tr>
<td>EVE</td>
<td>01604 230311</td>
<td>Eve’s services include; Refuge, a place of safety for women and children fleeing domestic abuse; Community Support Service for women and families living in their own accommodation, Long term therapeutic rehabilitation and recovery programme, Occupational Therapy services; Children’s services; Perpetrator programme.</td>
</tr>
<tr>
<td>Northampton Domestic Abuse Service</td>
<td>0300 012 0154</td>
<td>Specialist Women’s refuge for those with Substance Misuse Issues which is funded by Health until October 2020. Specialist Men’s refuge unit (3 spaces). 4 x Women’s refuge units across Northamptonshire offering 20 spaces for women and children. Free phone advice line open 24/7 funded by NBC. Advice service / no appointment necessary drop in on Monday to Friday between 9am and 3pm. Limited Community work available with weekly sessions at Towcester, Rushden and Thrapston funded by South and East Northants Council. Delivery of Freedom Programme.</td>
</tr>
<tr>
<td>SERENITY (Sexual Assault Referral Centre)</td>
<td>01604 745005</td>
<td>Forensic Medical Examinations including health needs analysis (contraception/ antibiotics/ PEPP), Sexual Health Follow up, 24 hour advice line, ISVA and ChiISVA support, Self-referral, anon intelligence, anon samples. If required refers victim for specific counselling for both adults and children</td>
</tr>
<tr>
<td>Mankind</td>
<td>01823 334 244</td>
<td>Support for male victims of domestic abuse. Refuge referrals.</td>
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</table>
Proposed Membership of DV/SV Steering Group

- 2 Clinical Commissioning Groups (CCGs)
- Community Safety Partnerships – representation on behalf of all the districts and boroughs
- Community Rehabilitation Company (CRC)
- Voice for Victims and Witnesses – Sunflower (IDVA)/Medium DV case support/ISVA (Victims service from OPFCC)
- Crown Prosecution Service
- Northamptonshire Police
- Northamptonshire County Council:
  - Adult Services /Children’s Services/ Public Health/Supporting Troubled Families Programme
  - Northamptonshire Safeguarding Adults’ Board – NSAB
  - Northamptonshire Safeguarding Children’s Board – NSCB
- Housing – representation on behalf of all the districts and boroughs
- Northamptonshire Police, Fire and Crime Commissioner
- National Probation Service
- Chair of Northamptonshire Against Domestic Abuse and Sexual Abuse (NADASA) and other proposed providers representatives from county
- NHS England – SARC
<table>
<thead>
<tr>
<th>Strat theme</th>
<th>Area</th>
<th>What</th>
<th>How</th>
<th>Who</th>
</tr>
</thead>
<tbody>
<tr>
<td>Developing targeted prevention and intervention initiatives</td>
<td>ALL</td>
<td>Data analysis</td>
<td>What do we know? Establishing what data is currently available in the county that builds a picture of need and demand.</td>
<td>Northamptonshire County Council – strategic lead- action plan lead to be identified</td>
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<td></td>
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<td></td>
<td>What can be shared? Info sharing agreements created/updated.</td>
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<td></td>
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<td></td>
<td>Repository created. Possibly on E-Cins.</td>
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<td></td>
<td>Help address unmet need – consider urban bias and look what the rural offer is.</td>
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<tr>
<td></td>
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<td></td>
<td>Develop county commissioning intentions based on what we know. Communicate this to market.</td>
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<tr>
<td>DA</td>
<td>Domestic Incidents Project</td>
<td>Project to explore how support to victims of domestic incidents can be delivered within the county via victims support agencies and early help pathways. Prevention of domestic incidents becoming domestic crimes.</td>
<td></td>
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</tr>
<tr>
<td>ALL</td>
<td>Healthy Relationships</td>
<td>Development of programmes to better equip young people to support themselves and their friends in managing intimate relationships.</td>
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</tbody>
</table>
| ALL | Development of funding opportunities in line with county commissioning intentions. | Seed funding opportunities.  
Commissioning within the county. |
| Improving everyone’s responses to people affected by domestic abuse, sexual violence and coercive behaviour | DA | Secure funding and delivery for IDVA services (Sunflower) | Secure longer term funding arrangements for IDVA services |
| | SV | Secure funding and delivery for ISVA/CHISVA services for more than one year. | Secure longer term funding arrangements for ISVA services |
| | CC- Stalking | Consider introduction of Independent Stalking Advocacy Caseworkers (ISACs) | Consider further ISAC’s (1 member of Sunflower currently trained) being introduced to current victim service delivery in the county. |
| ALL | Training needs assessment | Identify what training is already available within the county  
What we are lacking in the county.  
Look to enable partnership training guide. |
| ALL | Healthy Relationships – Young People | Improved provision of information, advice and support about relationships and intimate relationships for young people. |
This information needs to include:

a. guidance about how to recognise controlling and coercive behaviour
b. practical advice about how to deal with all types of unhealthy behaviour experienced in relationships and how to access support services
c. practical advice about how to leave a relationship, how to reduce fear of repercussions and how to access the most appropriate help and support
d. guidance about how and when to report to the police.

### Development of resources available for parents and carers.

Developed with children and young people, providing information as to how to support children and young people with negative experiences in intimate relationships.

<table>
<thead>
<tr>
<th>ALL</th>
<th>Bystander programmes</th>
<th>Exploration of Bystander Programmes with the university.</th>
<th>OPFCC</th>
</tr>
</thead>
<tbody>
<tr>
<td>DA/SV</td>
<td>Training for front line professionals</td>
<td>Stalking awareness training from specialist sector such as Suzy Lamplugh Trust or Palladin</td>
<td>Clinical Commissioning Group – strategic lead-action plan lead to be identified</td>
</tr>
<tr>
<td>CC - Stalking</td>
<td>Funding for national Stalking helpline</td>
<td>OPFCC to commit to funding for national stalking helpline and subsequent promotion.</td>
<td>OPFCC</td>
</tr>
<tr>
<td>Ensuring appropriate access to services for children, young people and adults affected by domestic abuse, sexual violence and coercive behaviour.</td>
<td>ALL</td>
<td>Guidance for all frontline practitioners</td>
<td>Promotion of guidance materials which outlines a. ‘controlling and coercive behaviour’ b. how to identify unhealthy, negative, controlling and coercive behaviours in relationships and the most appropriate action to take.</td>
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<tr>
<td>Developing safe and appropriate accommodation options</td>
<td>DA</td>
<td>Countywide housing pathway outlining ‘safe accommodation’ options available in the county.</td>
<td>Establish and communicate current housing pathway and how it is being utilised in each borough and district. Develop and communicate a housing pathway that is effective, sustainable and sufficiently flexible to be used consistently throughout the county.</td>
</tr>
<tr>
<td>Target Hardening</td>
<td></td>
<td>Review the range of help and support (including target hardening) that is available to enable victims of domestic abuse to safely remain in, or return to, their existing homes. Work with social landlords, the crime prevention team and local housing authorities to agree new funding arrangements to support the delivery of a cost effective and sustainable countywide target hardening scheme.</td>
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<tr>
<td>Refuges</td>
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| Agree on the role that the refuges will play (as a ‘safe accommodation’ option within the housing pathway) and how they will be funded.  
Review and amend borough and district housing allocations schemes to improve move-on from the refuges. | 
| Ensuring an appropriate civil and criminal justice response to domestic abuse, sexual violence and coercive incidents. | 
| DA | 
| The Multi-Agency Tasking and Coordination (MATAC) Project approach | 
| Explore the use of MATAC approach within Northants Police to deal with serial perpetrators of domestic violence in the county. Objective are to:  
• Prevent further domestic abuse related offending  
• Improve victim safety  
• Improve Criminal Justice Service (CJS) outcomes  
• Improve partnership engagement  
• Improve offender behaviour  
Build on RFG scoring the Force have begun for serial perps. | 
| Police/OPFCC—strategic lead– action plan lead to be identified | 
| Out of court disposals for DV offenders | 
| Project PIPA – (Preventing Intimate Partner Violence) being delivered in the county as part of diversionary/rehabilitative options offered to offenders in the county. | 
| ALL | 
| Robust and swift justice | 
| Justice and child protection responses to DV, SV or Coercive Behaviours are robust, swift, consistent and coordinated |
Those who seek to or carry out DV, SV or Coercive Behaviours are identified early and held to account by the criminal justice system