

# **Rapid evidence review: Interventions to prevent and reduce domestic abuse and sexual violence**

# Introduction

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# The project

Crest Advisory were commissioned by the Home Office in 2022 to work with all 43 police force areas in England and Wales to support the implementation of and provide ongoing support for the Serious Violence Duty (the Duty). The first phase of this work was assessing an areas readiness to implement the Duty. **Leicester, Leicestershire and Rutland (LLR) was assessed to be mature, demonstrating best practice in its ability to meet the requirements of the Duty.** The second phase of this work is providing tailored support to areas around the Duty. As Leicester, Leicestershire and Rutland have **recently changed their definition of serious violence to include domestic abuse and sexual violence**, we are **providing support to commission domestic abuse (DA) and sexual violence (SV) interventions in line with this new definition.**

This literature review is intended to support Leicester, Leicestershire and Rutland with commissioning domestic abuse and sexual violence interventions, through providing an understanding of what works to tackle both domestic abuse and sexual violence.

Through this rapid evidence review, alongside a local alignment workshop, we intend to achieve:

- a. A better understanding of what works to tackle DA and SV at different level of prevention, and for different cohorts
- b. Guidance for effective commissioning of interventions to reduce DA and SV
- c. A tailored set of recommendations for Leicester, Leicestershire and Rutland to take forward to ensure effective commissioning of interventions to tackle DA and SV.

# Background

# What is the scale of the problem?

# Domestic abuse and sexual violence is a wide-reaching, significant national issue, with domestic abuse and sexual violence disproportionately affecting women and girls

**VAWG crimes, including domestic abuse and sexual violence, are an epidemic, which requires a 'radical and bold shift' in how to tackle these crimes ([HMICFRS, 2021](#))**

**1 in 4 women have been raped or sexually assaulted as an adult** ([Rape Crisis England and Wales](#))

**1 in 4 women in England and Wales will experience domestic abuse in her lifetime** ([Refuge](#))

VAWG-related crimes represent at least **16% of all recorded crime** ([NPCC, 2023](#)). **However, there is considerable underreporting of VAWG crime**, with only 16% of those experiencing rape reporting it to the police ([ONS, 2021](#)).

Domestic abuse and sexual violence do not exist in a discrete silo. There are **[clear links](#) between domestic abuse and sexual violence, and they should not be considered separately.**

Girls who are sexually abused are more likely to suffer from physical violence and sexual victimization as adults, and between **[40-45% of women](#)** in abusive relationships will also be sexually assaulted during the course of the relationship.

# Domestic abuse and sexual violence disproportionately impacts certain groups. This must be considered when tailoring approaches to tackle DA and SV

Anyone can be a victim of DA and SV. However, certain individuals are more likely to be victims. These intersectionalities must be understood in order to provide effective services that support all those that are affected and are tailored to the specific needs of certain groups.

**Gender:** women are much more likely than men to be victims of domestic abuse and sexual violence. 6.9% of women experienced DA in the year ending March 2022 DA, compared to 3% of men. Further, 3.3% of women were victims of sexual assault in the year ending March 2022, compared to 1.2% of men.

**Age:** younger groups are more likely to experience domestic abuse and sexual violence. In the year ending March 2022, those age 20-24 were more likely to be victims of domestic abuse than any other age group. Individuals age 16 to 24 were more likely than any other age group to experience sexual assault.

**Disability:** those with a disability are significantly more likely to be victims of domestic abuse and sexual assault. Disabled women are twice as likely to experience domestic abuse, and almost twice as likely to have experienced sexual assault compared to non-disabled women.

**Ethnicity:** Black and Black British individuals are more likely to experience sexual assault compared to other ethnicities, and those of mixed ethnicity are more likely to experience DA ([ONS, 2021](#)). 7.6% of those of mixed ethnicity experienced DA between March 2019-March 2020, compared to 5.5% of all women ([ONS, 2020](#))

**Income:** women in poverty are more likely to experience abuse in their lifetime. Research has found that 14% of women in poverty have experienced extensive violence and abuse, compared with 6% of women not in poverty ([McManus and Scott, 2016](#))

**Mental health:** those with mental health difficulties are more likely to be victims of DA and SV. 40% of high-risk victims of abuse report mental health difficulties ([SafeLives, 2015](#))



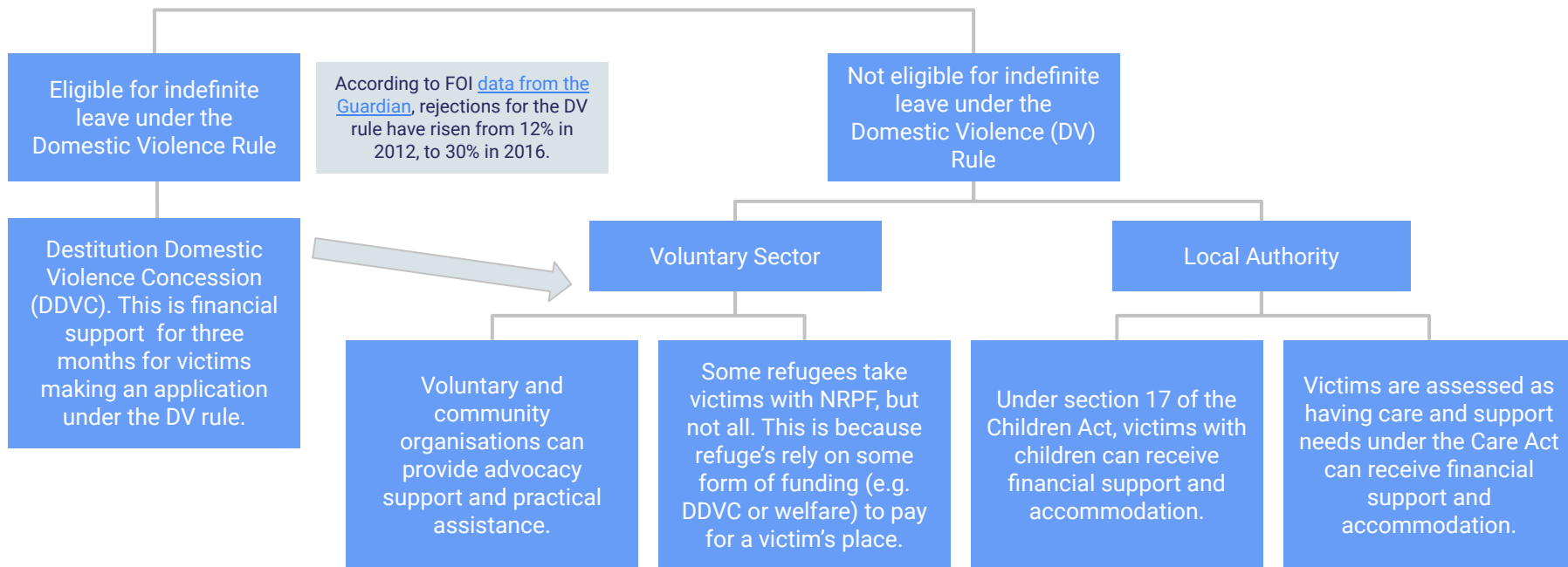
# DA and SV also disproportionately affects migrant women. However, migrant women also experience significant barriers to accessing support and protection

**DA and SV disproportionately affects migrant women.** However, migrant women that are victims of domestic abuse and sexual violence with no recourse to public funds **experience multiple barriers, meaning they are less likely to report their victimisation and receive support. Many are financially or socially reliant on their perpetrators, who may weaponise their insecure immigration status to keep them silent** - for example, by threatening deportation or destitution if the victim seeks help. Despite strong advocacy to create a firewall to enable migrant victims to safely report domestic abuse to the police, the government has rejected this. This means **victims are less likely to report due to fears they will be reported to immigration authorities.**

**For victims of domestic abuse, access to support depends on whether or not they are eligible for indefinite leave under the Domestic Violence (DV) Rule.** To be eligible, victims must be on a two year visa as the spouse or partner of someone who is permanently settled in the UK. Victims also need to be able to show that their relationship broke down due to domestic abuse. **The restrictive criteria of the DV rule means that a significant number of women with NRPF are excluded from receiving support.** These women can turn to the local authority and seek support under the Children and Care Acts. If they do not have children or meet the threshold of need required under the Care Act, then they must rely on support from the voluntary sector.

**Whilst there are programmes that support victim-survivors with NRPF, such as the No Women Turned Away Project, these support services are few and far between.**

# Domestic violence victims with No Recourse to Public Funds have very few support options. Those that are ineligible to apply for the domestic violence rule and don't receive local authority support are reliant on the voluntary sector



# Children and young people (CYP) that witness DA are also victims of DA. This trauma can have a long-lasting psychological, relational and developmental impacts that extend into adulthood

There are record numbers of children affected by domestic abuse in England and Wales. In 2020/2021, police made almost 245,000 referrals to social services for domestic abuse, an 8% increase on the previous year ([NSPCC, 2022](#)).

## Psychological

The trauma of experiencing DA can manifest itself in:

- Aggression
- Depression
- Anxiety
- Withdrawal
- Suicidal thoughts and feelings

## Relational

DA can have a strong effect on children's later relationships. This can manifest as being less trustful of others, and a fear of conflict.

Further, CYP are more likely to show aggressive and abusive behaviours towards others. A quarter of children in [Safelives](#) research displayed abusive behaviours towards others.

## Developmental

DA can affect a child's brain development, which may impact:

- Executive functioning skills
- Brain architecture
- Overactive stress responses

**As such, programmes should be put in place to help children overcome the trauma of witnessing DA, provide them with support, and ensure their needs are met so that the impacts of witnessing DA can be mitigated and they can go on to live fulfilling lives.** An example of one such programme can be found on [slide 68](#).

# The consequences of DA and SV victimisation are wide-reaching and can include physical impact, mental health impact and financial impact.

Domestic abuse and sexual violence can have a long lasting impact on victims due to the **trauma of their experiences**. These include physical, mental health, and financial impacts which **should be considered when commissioning interventions** to help address these. Other impacts can also include relational impacts and emotional impacts.

## Physical impacts

Alongside short-term injuries, [victims of abuse suffer long-term physical health impacts](#). This may include asthma, bladder and kidney infections, fibromyalgia, chronic pain, and migraines/headaches.

In terms of sexual abuse, there are [severe reproductive consequences](#), including sexually transmitted infections, pregnancy difficulties, and gynaecological disorders.

## Mental health impacts

Victims of domestic abuse and sexual violence suffer [severe and long-lasting mental health difficulties](#) due to the trauma of their experiences, which may include anxiety, depression, low self-esteem, inability to trust others, and sleep disturbances.

Insight from the [ldva national dataset](#) shows that 16% of domestic abuse victims have considered or attempted suicide as a result of domestic abuse, and [as many as 64% of victims](#) had developed PTSD in one study.

There is an [acute impact on children](#) witnessing DA as well, and the long lasting impact of this trauma can extend into adulthood. This can manifest as PTSD, anxiety, depression, and behavioural issues

## Financial impact

Victims and survivors face huge financial barriers. For example, they are likely to have to take time off work to help recover from the abuse they have suffered. For example, [the HO](#) have estimated that domestic abuse costs the economy £14 billion a year due to victim-survivors taking time off work and the reduced productivity after.

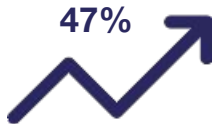


# **Local context: domestic abuse and sexual violence in Leicester, Leicestershire and Rutland**

# Domestic abuse and sexual violence is a growing problem in Leicester, Leicestershire and Rutland. As a result, the Violence Reduction Network have expanded their definition of serious violence to include domestic abuse and sexual violence



7.89%



47%

Figures from [Leicestershire County Council](#) suggest that in 2020/21, 28,360 adults experienced domestic abuse in the past year, **a 7.89% increase from the year prior**. This mirrors the year-on-year increase of the number of domestic abuse incidents across the England and Wales. This is, however, lower than the national average.

**Sexual violence in Leicester, Leicestershire and Rutland increased by 47%** between 2019/20 and 2021/22 according to police recorded crime ([Police recorded crime from the Home Office](#)).

## Leicester, Leicestershire and Rutland's response to DA and sexual violence

To tackle DA and sexual violence in LLR, LLR expanded their definition of serious violence in 2023 to include domestic abuse and sexual violence. Whilst previously LLR focused on public space violence, this has been expanded to include serious violence within the domestic space:

*“Violence resulting in significant physical injury and other serious harm, including sexual violence. Violence may be committed with or without weapons, and may take place in domestic or public places”*

One of the priority focus areas for LLR is now domestic abuse and sexual violence, with a specific focus on under 25s.

# Between 2022/23 DA and SV in Leicester, Leicestershire and Rutland made up a significant portion of serious violence, disproportionately affecting females, those with a disability, and certain ethnicities

Domestic abuse	Sexual violence
In 2022/23, of all serious violence in Leicester, Leicestershire and Rutland, <b>30% was flagged as being DA related</b>	Sexual violence makes up <b>9% of all serious violence</b> in Leicester, Leicestershire and Rutland
The most common offences reported to the police were <b>Stalking and Harassment and Violence with Injury.</b>	<b>85%</b> of suspected perpetrators of sexual violence are <b>male</b>
Almost three-quarters of suspected perpetrators of domestic abuse related serious violence are <b>male</b>	The highest rates of sexual violence perpetration are among <b>males aged 10-19 years old</b>
The highest rates of DA perpetration are among <b>men aged 25-44, particularly men aged 30-34</b>	The highest rates of sexual violence <b>victimisation</b> are seen among <b>females aged between of 10-19 years old</b>
The highest rates of DA <b>victimisation</b> are seen among <b>females aged between of 30-34 years old</b>	<b>80%</b> of victims of sexual violence are <b>female</b>

# The demographics of Leicester, Leicestershire and Rutland must be considered when commissioning interventions to ensure that services meet the needs of the entire population

## Ethnicity

**Leicester, Leicestershire and Rutland is predominantly White.** According to the 2021 census, non-White minorities represent 12.5% of the population (compared to 19% in England), with Asians being the largest minority group, accounting for 8.2% of the population (compared to 10% in England). However, **in Leicester, non-White minorities represent 57% of the population,** with the population being predominantly Asian (43%).

## Religion

Leicester, Leicestershire and Rutland has a **higher than average Hindu population,** with Hindus making up 3.7% of the population compared to 2% in England.

## Gender

There are **more men in Leicester, Leicestershire and Rutland compared to the rest of England,** with there being 97.351 males to every 100 females. This is compared to 96 males to every 100 females in England.

## Mental health

Leicester, Leicestershire and Rutland **have a higher portion of those accessing treatment for depression and anxiety.** In the quarter of June 2022, 5.77% of those in Leicester, Leicestershire and Rutland with common mental health conditions accessed support, compared to 4.94% across England.

## Income

**Households in Leicester, Leicestershire and Rutland have a low average income.** The median gross weekly income for a household in Leicester, Leicestershire and Rutland in £605.43, compared to £642 across England and Wales (ONS, 2023)



# There are currently three commissioned organisations in Leicester, Leicestershire and Rutland which provide DA and SV services to victims and perpetrators across the three levels of prevention

## Free from Violence and Abuse (freeva)

Tertiary

**Sexual Violence and Abuse Service** provides support for victims, including support through the CJS and support to help them cope and recover. This also includes specialist support for CYP and male victim's.

**Locally commissioned helpline**, providing immediate support and referrals to other local services

**The Jenkins Centre** provides The Second Step programme, a domestic abuse perpetrator programme for males, regardless of sexuality

There is a gap in support services for older adults at risk of DA and SV

## Living without abuse (LWA)

Primary

**Leicester City Family Service** provides healthy relationship sessions in schools and youth services

Secondary

**The Amber Project** is an independent service providing support for anyone that has experienced sexual violence, including support for those going through the court process

Tertiary

**The Lotus Service** is a community based service for male and female adult survivors of DA

**Leicester City Family Service** provides a range of support for CYP, including support for young people using violence, counselling, and a parenting programme

**Group Support Programmes** to help survivors of abuse understand what has happened and recover

## Women's Aid Leicester, Leicestershire and Rutland

Secondary

**The ADAM Project** is a service dedicated to male victims/potential victims aged 18 or over. It provides support such as keeping safe, housing options, legal issues, signposting and referrals to other agencies

Tertiary

**Refuges** for adults and their children

Offer a range of services tailored to specific groups. For example, **the Ashna Project** specifically DA survivors and survivors of FGM, forced marriage, and/or honour based violence from BME communities.

These are the main three organisations, but there are other organisations that provide similar services.

# **National strategy, policy and funding to tackle DA and sexual violence**

# Significant events related to domestic abuse and sexual violence have raised public awareness around these issues and led to calls for change in policy and legislation

The **Jimmy Savile scandal** breaks. This led to a huge increase in reporting for sexual violence, with the [NSPCC reporting an 84% increase in calls.](#)

2011

The **National Independent Inquiry into Child Sexual Abuse** publishes its [investigation report](#). It find that council staff failed in their basic duty of care towards children.

2020

**Lockdown hits.** Calls to Refuge's DA helpline went up by [an average of 61%.](#) This rise is widely reported on.

**Sabina Nessa** is murdered by Koci Selamaj in a London park. Her death led to [public debate over VAWG in the UK.](#)

**The Casey review** is published, concluding that the Metropolitan police force is failing women. This has led to widespread allegations of police perpetrated VAWG.

2023

**2010**  
**Femicides are the highest they have been since records began in 2009, with 168 women killed by men in the UK**

2017

The **#MeToo movement** goes viral across social media after a New York Times story on sexual abuse allegations against Harvey Weinstein. This hashtag was used mainly by women to show that they are survivors of domestic abuse and sexual violence.

As a result, a series of sexual assault allegations were made against British politicians

**2018**  
**158 women are killed by men in the UK**

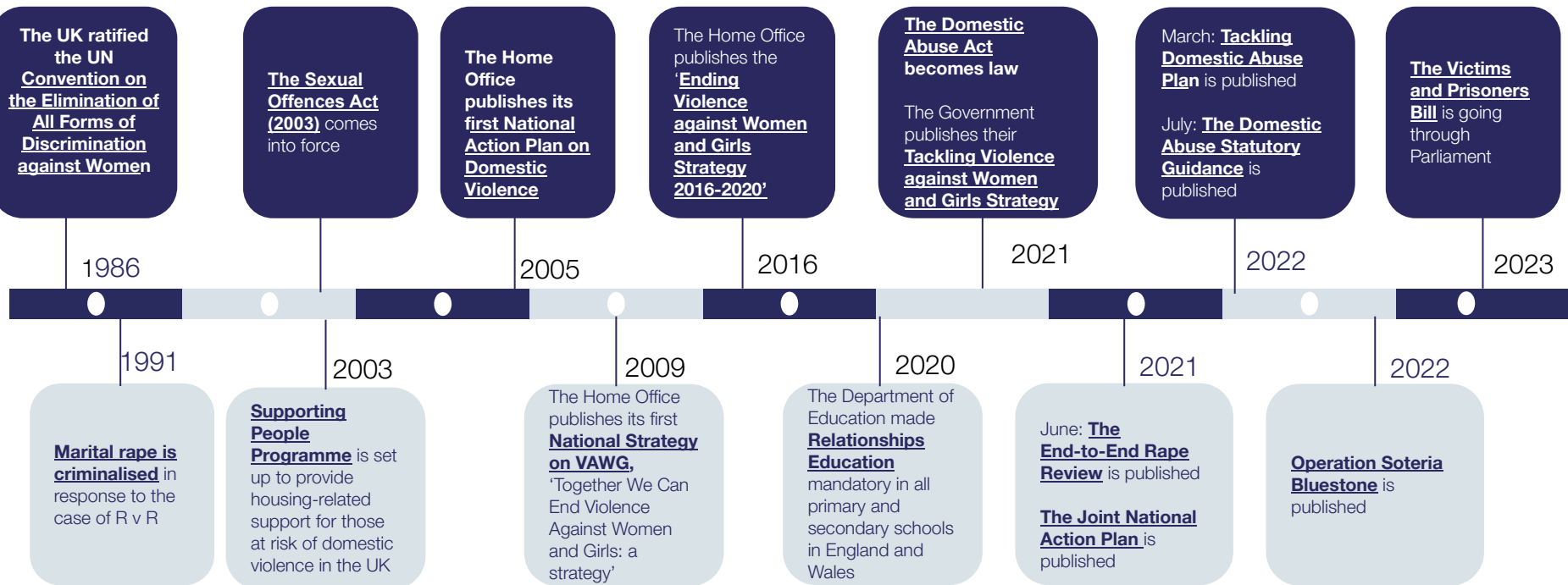
**2020**  
**110 women are killed by men. 111 are implicated in their killings, but only 79 men were found, or pleaded guilty.**

**Sarah Everard** is raped, strangled and killed by police constable Wayne Couzens. The controversial police response after, including the police response at Everard's Clapham Common vigil, led to controversy and gave rise to widespread debate around women's safety in the UK

2022

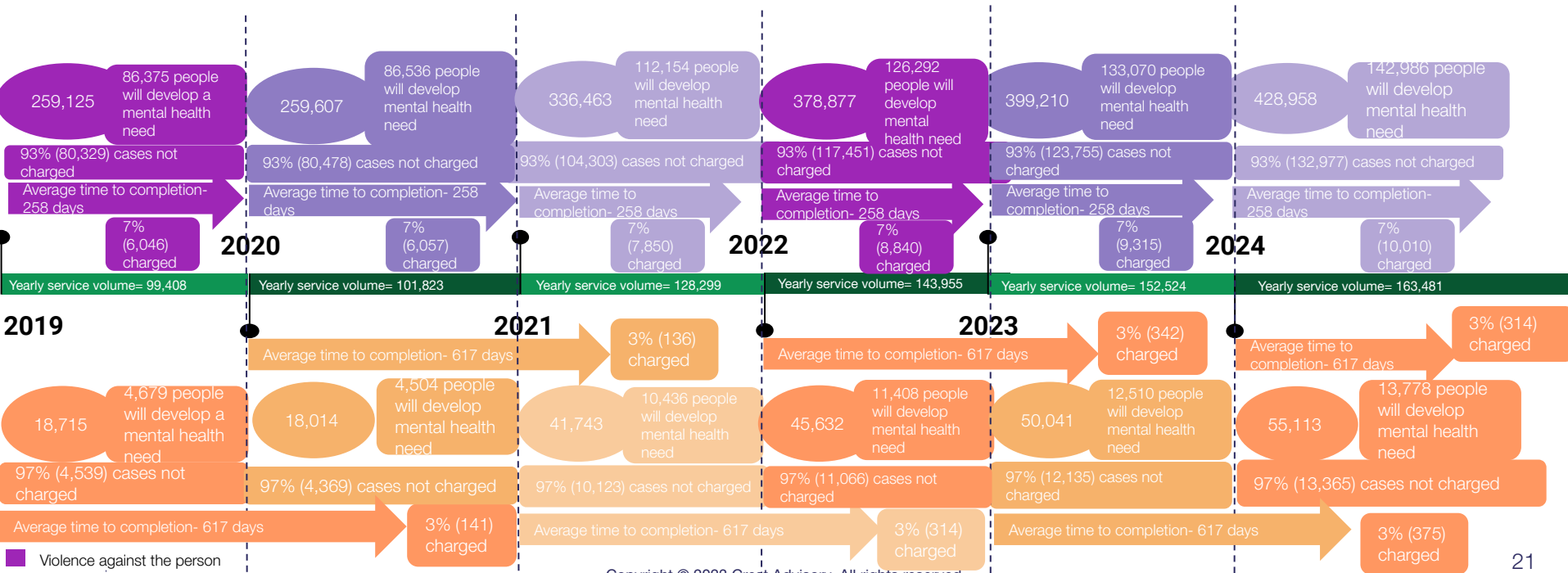
**The Angiolini Inquiry** is set up. This inquiry seeks to understand how Wayne Couzens 'was able to abduct, rape and murder a member of the public.'

# Alongside significant cases, there is a strong history of policy being enacted to tackle domestic abuse and sexual violence. However, there is still significant work to be done, with conviction rates for DA and SV lower than that of other crimes



Despite this work, conviction rates for DA and SV are far lower than that of other crimes; the domestic abuse conviction rate is 77% and the rape conviction rate is 69.1%. This is compared to an all-crime conviction rate of 83% (CPS, 2023).

# The graph below shows the projected demand volumes on mental health services in London based on research from Crest (2022), showing that there is a year-on-year increase in victims of violence against the person and sexual assault developing mental health needs



# The Domestic Abuse Act (2021) has cemented the government's commitment to tackling DA in law. Subsequently, the Tackling Violence against Women and Girls Strategy has been published...

## The Domestic Abuse Act (2021)

The Domestic Abuse Act (2021) has **cemented the government's commitment to tackling DA in law**, including the **importance of DA perpetrator programmes and support for DA survivors**. This also directs that **children that are witnesses on DA be seen as victims**, provides a new approach to **DA needs assessments**, and provides **guidance to relevant authorities** with the aim of **ensuring that victims of DA have access to the correct accommodation-based support when needed**.

Part 4 of the Act introduces a new statutory duty on local authorities, placing accountability on local areas to **ensure the needs of victims are met consistently across England within refuges and DA accommodation**. In addition, as child witnesses are now considered victims. **This should be considered when commissioning interventions to meet their needs**.

## Tackling Violence against Women and Girls Strategy (2021)

This Strategy sets out the government's approach to tackling crimes which disproportionately affect women and girls. The ambitions set out within the Strategy include:

- Increasing support for victims and survivors, measured through increased funded support services
- An increase in the number of perpetrators brought to justice
- Reducing the prevalence of VAWG.

This will be done through the **prioritisation of prevention, supporting victims, pursuing perpetrators, and strengthening the system**

# ... as well as the Tackling Domestic Abuse Plan and the Domestic Abuse Statutory Guidance

## Tackling Domestic Abuse Plan (2022)

This plan is closely aligned to the Tackling VAWG Strategy (2021), and **sets out how various aspects of the DA Act (2021) will be delivered**. This includes a pillar **dedicated to preventing DA from happening in the first place**, for example through a new Relationships, Sex, and Health Education Curriculum, **which sets out a multi-year funding package to deliver community based support services**, and a **commitment to consider more robust management of perpetrators**.

Progress against this plan is measured through the decrease in the number of victim-survivors turned away from support in safe accommodation, and an increase in the number of victim-survivors supported in safe accommodation. When commissioning services, consideration should be given to allow this to happen.

## Domestic Abuse Statutory Guidance (July 2022)

This statutory guidance is issued under the Domestic Abuse Act, and is designed to provide **clear information on what DA is and how to identify it**, and to provide **guidance to inform responses to DA and best practice** for both agency and multi-agency responses. **It also includes specific guidance of the different experiences, needs and related considerations for different groups**, for example considering age, disability, immigration status, and mental health.

Services should be commissioned that consider the different experiences, needs, and voices of certain groups. This could include 'by-and-for' services.

# The End-to-End Rape Review sets out a range of measures to tackle the poor CJS response to rape, including the Joint National Action Plan...

## End-to-End Rape Review Report on Findings and Actions (2021)

This report sets out the government's action plan for improving the CJS's response to rape in England and Wales. At the heart of this review is a systemic and cultural change to ensure that victims feel supported and able to stay engaged with their case. This is due to a decline in cases reaching court and a lack of trust and confidence in police and the CJS overall.

This review **highlights that prevention and early intervention is crucial** to reducing the number of rape and sexual violence offences, and improving services for victims throughout the CJS.

The end-to-end Rape Review Progress Report: One Year On (2022) shows that although some work has been done, **the CJS is falling short to achieve the ambitions set out within the End-to-End Rape Review.**

## Joint National Action Plan (2021)

This plan sets out the commitment by policing and the CPS to work together to improve how rape cases are investigated and prosecuted, directly addressing the findings from HMICPSI (2019) report on rape charging. This report found that some decisions prosecutors have made 'are clearly wrong, wholly unreasonable decision' (page 8).



## ... as well as Operation Soteria and its subsequent National Operating Model

### Operation Soteria Bluestone (2022)

Launched as a response to the End-to-End Rape Review, Operation Soteria's aims are to **enable transformative change in police investigations of rape**, to provide **procedural justice for victims and suspects**, and ensure **rape investigations are fair and balanced**. This is all done through a police-academic collaborative process to pursue the shared goal of 'doing right by victims and developing a new National Operating Model for the investigation of rape and other sexual offences' (Stanko, 2022) This is with the **ambition to contribute to the end of sexual violence**.

### The National Operating Model (NOM)

The NOM for the investigation of rape and serious sexual offences (RASSO) arose from the work of Operation Soteria Bluestone. It ensures that **investigations are victim-centred, suspect-focused, and context-led**. It is based on the following six pillars:

1. Suspect-focused investigations
2. Disruption of repeat suspects
3. A procedural justice approach to engaging with victims
4. Learning, development and wellbeing of officers
5. Strategic use of police data
6. Digital forensics

The commissioning approach should align with the NOM and the different stages of investigations as set out within the NOM.

## **The Victims and Prisoners Bill (2023) will place the Victims' Code into law, and provide improvements in the commissioning of support services for victims. However, many believe this does not go far enough for victims of DA and SV**

The Victims and Prisoners Bill (2023) places the Victims' Code in law, improving victims' experiences of the CJS. It includes measures to:

- Enable improvements in the quality and consistency of support services for victims by introducing a duty on local commissioners in England to work together when commissioning support services
- Introduce guidance on Independent Sexual Violence Advisors (ISVAs) and Independent Domestic Violence Advisors (IDVAs) to increase the awareness and consistency of these roles

Despite these changes, however, the Victims Bill has been subject to scrutiny from [VAWG charities](#). This is because it:

- Does not create a duty for local areas to commission services according to local need, or the sufficient funding to do so
- Does not ensure that migrant women with NRPf can safely report without the risk of immigration control. Without such a firewall, migrant women are excluded from the provisions within the Bill
- As the Bill extends to DA and SV groups, alongside other victims, there is the potential for services to be overwhelmed. Therefore, the Victims Bill must be targeted in its delivery.

# **National guidance on commissioning DA and sexual violence interventions**

# HM Government has provided general guidance for creating victim-focused domestic abuse interventions alongside the Domestic Abuse Act (2021)

Following the passing of the Domestic Abuse Act 2021, HM Government published accompanying **Domestic Abuse Statutory Guidance**. The Guidance aims to provide clear information on what DA is and how to identify it, support (through signposting and resources) for frontline workers, professionals and other organisations, and best practice for agency and multi-agency responses. The Home Office has also published a ['Violence Against Women and Girls Services: Commissioning Toolkit'](#) which provides guidance on commissioning local services to support victims and survivors of violence against women and girls.

## What does the general guidance say?

1. Interventions should recognise that DA involves a wide range of behaviours and contexts, affecting 2.3m people each year but largely victimising women whilst being perpetrated by men. Therefore, **interventions should be broad but women-focused**
2. Interventions should be **sensitive to victims' differing circumstances** and experiences: some may be facing overlapping challenges
3. DA is a public health issue and its impacts on physical and mental wellbeing should be resolved by **public health-related interventions**
4. **Stakeholders must work together**, adopt a **holistic approach** and **involve all members of the community** to tackle DA, focusing especially on expediting strategies and interventions

Additional and more specific practice and safeguarding standards can be found in **publications from local authorities and targeted organisations**. The North Yorkshire Safeguarding Children Partnership, for instance, adds to the Domestic Abuse Statutory Guidance comprehensive information relating to adapting interventions to situations where CYP are present.

# The Imkaan and Women’s Aid Capacity Building Partnership have provided guidance for commissioners around VAWG victim services, which should be considered when commissioning services

The Imkaan and Women’s Aid Capacity Building Partnership have provided guidance for commissioners to ensure that services addressing VAWG are ‘of sufficient quality to deliver long-term improvements in their area’. The guidance outlines the core minimum standards they recommend for the provision of services to support survivors. These standards are based of the Council of Europe Minimum Standards for Violence Against Women Support Services and the Istanbul Convention. Standards relate to funding, distribution of provision, nature of provision, and training.

Funding	Distribution of provision	Nature of provision	Nature of provision
<p>National and local governments should:</p> <ul style="list-style-type: none"> <li>• Have identified funding streams for VAWG services</li> <li>• Have identified funding streams for specialist services for the most marginalised groups</li> </ul> <p>Provision should be funded on the basis of enabling survivors to access safety from perpetrators, regardless of local or regional boundaries, and should not restrict access on residence criteria.</p>	<p>There should be:</p> <ul style="list-style-type: none"> <li>• Refuge provision: At least one specialist VAWG refuge in every urban centre or region</li> <li>• Family spaces in refuge: one per 10,000 women</li> <li>• Helpline: One helpline in every region</li> <li>• Rape crisis centre: one per 500,000 women</li> <li>• Sexual assault centre: one per 500,000 women</li> </ul>	<p>Services should (among other criteria):</p> <ul style="list-style-type: none"> <li>• Be tailored, including to groups with additional needs. These are best provided by independent specialist SV organisations</li> <li>• Be by-and-for</li> <li>• Meet the needs of men in dedicated men’s services</li> </ul>	<p>Staff should be appropriately trained:</p> <ul style="list-style-type: none"> <li>• Minimum initial training and minimum levels of ongoing training should be part of employment contracts</li> <li>• Initial training should include an understanding of gendered dynamics of violence</li> </ul>

# HM Government and Respect have also set out specific guidance for authorities and organisations which should be considered when commissioning any perpetrator-focused interventions

Overarching statutory guidance from HM Government sets out a specific framework of standards for tackling VAWDASV through interventions aimed at perpetrators. Within this framework, Respect publishes The Respect Standard, a regularly updated quality assurance framework outlining a set of principles that guide its accreditation process.

## HM Government standards

HM Government sets out seven standards for perpetrator interventions including a priority outcome of **enhanced safety and freedom for victim-survivors** and **coordination with a wider community response**. Additionally, interventions should **hold perpetrators to account** whilst **offering respect and opportunities to change**, and be directed towards the **right people at the right time**. They should be **delivered equitably** with respect to overlapping protected interests, by **skilled and supported staff** in a way that is constantly **monitored and evaluated**.

## Respect standards

The Respect Standard covers areas including organisational management, safe service delivery and responding to diversity. All Respect Accredited services are held to the Standard to ensure that **only safe, effective work with perpetrators of domestic abuse takes place**. All accredited services are required to apply for a new accreditation assessment every 3 years, and a service can only be considered “accredited” when it has passed its accreditation assessment. **Services say that Respect accreditation, which is endorsed by sector experts, strengthens their offer, and its impact has been mapped.**

# Funding for victim services is currently done through central government fundings, PCCs, and grant giving organisations. However, this funding landscape is fragmented

Funding for support services for survivors of VAWG are primarily funded through **a combination of different statutory and non-statutory sources**, including central government, Police and Crime Commissioners (PCCs), local authorities and charitable trusts, and grant giving organisations. Because of this, **funding for support services are fragmented, complex, and difficult to understand**. Further, the majority of funding available for VAWG support services is **short-term**, which ‘has a negative impact on the ability of commissioners and service providers to respond effectively to need and deliver sustainable services’ ([Womens Aid 2023](#))

## Central government funding

The commitments within the Tackling VAWG strategy (2021) and the Tackling DA Plan (2022) have been backed up with a £140 million investment in support for victims, of which a minimum of £47 million is ring-fenced funding for victims services over three years.

The Department for Levelling Up, Housing and Communities provided local authorities with £124.5 million of funding, asking them to commence delivery Part 4 of the DA Act.

## PCCs

Since 2014, responsibility for regional commissioning of victim support services was devolved to PCCs. The funding to enable this comes from the Ministry of Justice’s Victims Fund and Rape and Sexual Abuse Support Fund.

## Grant giving organisations

Support services for victims are also funded by grant giving organisations, such as The National Lottery Community Fund.

# Funding for perpetrator programmes comes from the Home Office Domestic Abuse Perpetrator Intervention Fund (2023-2025)

The majority of funding around tackling VAWG is focused on the provision of victims services rather than perpetrator programmes. However, in recent years funding has been allocated by the Home Office to PCCs to implement Domestic Abuse Perpetrator programmes through the Domestic Abuse Perpetrator Programme Fund and the Domestic Abuse Perpetrator Intervention Fund.

## Domestic Abuse Perpetrator Programme Fund

The Domestic Abuse Perpetrator Programme Fund issued by the HO in 2020/21 aimed to increase the availability of DA perpetrator interventions with the overall aim of improving the safety of victims and reducing the risk posed by perpetrators. The second ambition is to improve understanding of 'what works' by encouraging innovation and allowing PCCs to introduce new approaches in their area.

## Domestic Abuse Perpetrator Intervention Fund (2023-2025)

Domestic Abuse Perpetrator Intervention Fund 2023-2025 continued the Domestic Abuse Perpetrator Programme Fund, bringing total HO spending on interventions to £36 million over two years. Funding is awarded to PCCs and interventions can be defined as early response, behaviour change work, intensive multi-agency case management.

Leicester, Leicestershire and Rutland successfully bid for more than £240k from the HO to expand their specialist provision for perpetrators of DA for 2020-2021.



# Despite the current legislative and funding landscape, there are gaps in provision for DA victims. Victims services are underfunded, under resourced and lack the representation of underrepresented groups

## Underfunded services

Services face **difficulties around staffing levels and recruitment, often due to the lack of adequate funding**. 43.2% of domestic abuse service services are running community-based services without dedicated funding ([Women's Aid, 2023](#)). To truly provide holistic wraparound care provided by specialist organisation, **there needs to be sustainable funding of £238 million** ([Refuge, 2023](#)).

## Lack of funding for 'by-and-for' services

There is currently **no ring-fenced funding for 'by and for' services**, designed and delivered by and for those who are minorities. By ensuring this ring-fenced funding, services are rooted in the communities they serve.

## A patchwork of provision

In November 2022, the Domestic Abuse commissioner [published a report](#) which highlighted that support services for victims are a 'patchwork', with victims able to access support based on where they lived in England and Wales. Alongside this, there were 'disturbing' gaps of 'by-and-for' support, with almost half of this support based in London and the South East of England.

# Gaps in provision for victims of sexual violence include long waiting lists, unclear ways to access support, and, sometimes, non-inclusive support services

## Long waiting lists

**There are long waiting lists for support services** for victims of sexual violence. In a survey conducted by the MoJ with a total of 1,100 victim-survivors, 51% of survey respondents ([MoJ, 2023](#)) mentioned experiencing long waiting lists for support

## Unclear ways to access support

Victim-survivors are **not aware of support that is available or how to access it**. 43% of survey respondents ([MoJ, 2023](#)) mentioned not knowing what support was available as a difficulty when trying to access support. The availability of support services, and ways to access it, should be clearly advertised.

## Non-inclusive services

**Victims have [raised concerns](#) that support is not inclusive for transgender and other hard to reach victim-survivors**. Support should recognise the different needs of certain groups, and tailor the support they offer to be both inclusive and effective.

# Gaps in provision for perpetrator DA and SV programmes include a lack of programmes, little communication between perpetrator programmes and other programmes, and DA and SV programmes working in silo

## Dearth of provision

There is currently a dearth of programmes for DA perpetrators. In written evidence submitted to parliament, Women's Aid report that **only 1% of DA perpetrators receive an intervention**. One of the largest reasons for this is a lack of funding (Safelives, 2020)  
If perpetrators are able to receive an intervention, a dearth of provision means that **individuals may have to travel considerable distances to attend a session** (Kelly and Westmarland, 2015).

## Unclear communication pathways between perpetrator programmes and other programmes

A coordinated multi agency approach is imperative for prison and probation based work with DA and SV offenders. Through the 'Guidance for Working with Domestic Abuse' issued by the National Offender Management service, there is guidance on how multi-agency cooperation can be achieved. However, **the exact pathways of communication between perpetrator programmes, and other specialised programmes, for example programmes to tackle substance abuse, is not known or visible in available documents** (Jovanovic, 2020)

## Siloed programmes

**There is currently isolation between domestic violence perpetrator programmes and sexual violence perpetrator programmes.** Despite the intersection between domestic abuse and sexual violence, there is a lack of evidence on their connection or communication pathways (Jovanovic, 2020)

# Safeguarding duties apply to those experiencing DA and SV. As such, interventions should be commissioned that have due regard for safeguarding and safeguarding procedures

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Safeguarding 'means protecting an adults right to live in safety, free from abuse and neglect'. Safeguarding duties apply to those who are experiencing, or at risk of experiencing, abuse or neglect, including DA and SV. This includes safeguarding to prevent re-victimisation. It is important that all interventions take a safeguarding approach, and this should be considered when commissioning interventions. According to The Local Government Association's (2015) guidance on adult safeguarding and DA, this could look like:

1. **Special consideration given to those that are more likely to have safeguarding needs**, such as disabled women, and approaches tailored to these groups.
2. Ensure that staff working with victims **understand that many situations are both safeguarding situations and domestic abuse**, and that they have a range of social work and legal options with which to work with people
3. **Ensure that policies, protocols, and procedures about DA refer to safeguarding**, and these are streamlined across all interventions
4. **Ensure there are effective arrangements in place between victims services and Safeguarding Boards**

# Rapid evidence review

# Rapid evidence review: section overview

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## This section contains:

1. A rapid evidence review of **strategies, projects and interventions that have been proven to be effective in tackling domestic abuse and sexual violence.**
2. A set of **general recommendations for commissioning domestic abuse and sexual violence interventions,** with **suggestions for tailoring Leicester, Leicestershire and Rutland's approach.**

The rapid evidence review will focus on **primary, secondary and tertiary interventions for both victims and perpetrators** of domestic abuse and sexual violence. In each section we consider how interventions **may be relevant for different cohorts or specific vulnerable groups.** Where possible, we **identify whether interventions are specifically focused on domestic abuse or sexual violence, or if the interventions are designed to tackle both simultaneously.**

For the purposes of this review, we define primary, secondary and tertiary interventions (as detailed on the next slide), using [Leicester, Leicestershire and Rutland's Violence Reduction Network Annual report.](#)

# Preventing domestic abuse and sexual violence involves multiple tiers of prevention depending on risk level. These activities can be broken down into three categories: primary, secondary and tertiary prevention

## 'Low risk' cohort

Individuals with no or few risk factors

## 'At risk' cohort

Individuals starting to become experienced DA/SV or with a number of risk factors that might lead to DA/SV

## 'High risk' cohort

High harm individuals currently offending and high risk victims in the short to long term

### Primary prevention

**Prevention (universal services):** Aims to stop domestic abuse (DA) and sexual violence before it starts. This approach addresses the root causes of DA and sexual violence.

For example by offering education on healthy relationships

### Secondary prevention

**Early intervention and response (targeted services):** Prevents progression of DA and sexual violence through early identification, intervention and diversion. Involves work with victims and perpetrators, intervening promptly to stop DA and sexual violence.

For example risk identification tools and CBT for victims/perpetrators

### Tertiary prevention

**Reduction (targeted services):** To reduce the impact and prevent the reoccurrence of DA or sexual violence. Tertiary intervention can include providing rehabilitation and recovery opportunities.

For example, recovery support for victims; perpetrator programmes

# Methodology



# Methodology to complete the rapid evidence review

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1. **Plan:** we carried out an initial review of interventions to and decided to structure our rapid review by primary, secondary and tertiary interventions to tackle DA and sexual violence
2. **Search:** we searched for literature on effective primary, secondary and tertiary interventions to tackle domestic abuse and sexual violence. We collated the search evidence in a framework to enable us to analyse and assess the evidence in one place
3. **Analyse:** we reviewed the literature grid and used the Maryland scale to indicate the effectiveness of the interventions based on the available evidence on the impact the interventions have had on tackling domestic abuse and sexual violence
4. **Synthesise:** we summarised the evidence on effective interventions to tackle DA and sexual violence
5. **Write:** we have written up the interventions in this rapid evidence review slide deck, including a summary of the intervention, the impact, the target cohort, and any further information on evaluation

# Using the [YEF Toolkit](#) as guidance, we have considered the quality of the evidence and impact rating for each primary, secondary and tertiary intervention

The describes the **confidence that we have in the research** used to calculate the impact rating.

**Evidence**

- *Description of evidence rating*

**Evidence quality rating: HIGH**

**Impact**

- *Description of impact rating*

**Impact rating: MODERATE**

This describes whether, on average, the approach has had **a low, medium, high impact.**

**Understanding the Evidence score**

**LOW:** We did not find a systematic review or the available systematic reviews did not include suitable studies.

**MODERATE:** The research is quite well-established but there are some limitations in the methods used, the number of studies, or consistency of findings.

**HIGH:** Evidence is strong, the intervention is based on a high-quality systematic review that includes a number of studies with very consistent findings.

**LOW:** There is no evidence of positive change, or evidence showing harmful impact.

**MODERATE:** There is evidence that this intervention has moderate impact; or, the evidence for the impact of this intervention is mixed.

**HIGH:** There is strong evidence that this intervention shows positive impact and this has been rigorously tested.

**Understanding the Impact score**

# Primary interventions to tackle DA and sexual violence

## Primary interventions aim to stop DA and sexual violence from happening in the first place. The focus is often on educating individuals on the key issues. This can be delivered through school-based programmes, active bystander programmes and campaigns

Primary interventions aim to stop sexual violence and domestic abuse from happening in the first place. This type of intervention generally seeks to **challenge attitudes, behaviours and practices that justify, excuse, or condone sexual violence and domestic abuse through educational initiatives.**

Primary interventions work with whole populations, not just the people who are most at risk of domestic abuse or sexual violence. This type of intervention can be delivered in specific settings, and we have chosen to categorise the primary interventions included in this rapid evidence review based on the following settings in which the interventions are delivered:

**School-based programmes promoting equal relationships** can be delivered to a wide range of young people in an educational setting. The intention is that these programmes will impact young people's behaviour and result in them being less likely to be victims or perpetrators of DA or SV in the future.

**Active bystander programmes** are educational interventions that empower individuals to intervene and take action when they witness potentially harmful situations or behaviours that could lead to sexual violence. The aim is to shift the bystander's role from being passive to proactively taking part in preventing VAWG by intervening in a safe and effective manner. These programmes can take place in areas where sexual violence is high, for example at universities or for staff working in the night time economy.

**Awareness-raising campaigns** can be targeted at different demographics. They aim to share informative messages to raise awareness about DA and sexual violence - this can include raising awareness about a service, law or about DA and SV as issues in general.

# **Primary intervention: school-based programmes promoting equal relationships**

## Coaching Boys Into Men (CBIM) is a violence prevention program that trains and motivates secondary school coaches to teach their young male athletes in healthy relationship skills

**Overview:** Coaching Boys into Men is based on Social Norms Change Theory and is a participatory 12-week programme delivered to young men by sports coaches who have received training from violence prevention advocates. The message behind the programme is that violence does not equal strength. The programme seeks to capitalise on the strong relationships that often exist between young men and their sports coaches, and use this relationship to positively impact young people's behaviour on and off the field.

**Resources:** it is necessary resource violence prevention advocates to train sports coaches to deliver this programme.

### Assessment of feasibility in LLR

This programme could be delivered in Leicester, Leicestershire and Rutland through the area's strong approach to partnership working. It would be necessary to create links between violence prevention advocates and sports coaches in the area. Given that the evidence of the effectiveness and impact of this intervention is high, and the resource costs are relatively low, the CBIM programme is a feasible option to be rolled out in Leicester, Leicestershire and Rutland

#### Evidence

- The CBIM programme underwent a [rigorous three year evaluation](#), funded by the Centres for Disease Control (CDC).
- There have been at least eight evaluations of the CBIM programme.

**Evidence quality rating: HIGH**

#### Impact

- Studies have shown that athletes who participate in the program are significantly more likely to intervene when witnessing abusive or disrespectful behaviors among their peers
- Some evidence indicates that there is little difference in the level of impact of the intervention when delivered by a sports coach versus a violence prevention advocate.

**Impact rating: HIGH**

#### Target cohort

- Young men aged 13-25 years old

#### Opportunity cohorts to expand this intervention

- This intervention could be expanded to include other activities beyond sports. It could also be delivered to young women.

# Real Consent is an online sexual violence prevention programme which is tailored to male university students, and developed with them, to tackle sexual violence on university campuses

**Overview:** The Real Consent is an online-based programme delivered to male undergraduate students to support them to critically examine gender roles. In addition, the programme works with participants to develop their skills related to respectful sexual negotiation and how to intervene in situations that could lead to sexual assault. The programme draws on Social Norms and Social Cognitive Theory, and is delivered in six, 30-minute online sessions. These sessions include going through key definitions, scenarios, survivor stories portrayed by actors, and interactive quizzes and games.

**Resources:** There is limited information available on pricing, however, the programme is described as 'affordable'.

## Assessment of feasibility in LLR

There are three universities in LLR: the University of Leicestershire, Loughborough University and De Montfort University. LLR VRN could partner with the three universities to deliver this intervention to students. If the intervention is effective it could be rolled out to secondary school students across the region. The programme is delivered online, meaning it would take limited resources to deliver.

### Evidence

- Randomised control trials with over 220 students indicated a significant reduction on sexual violence
- One evaluation study of the RealConsent was published in a peer-reviewed journal, demonstrating significant improvement on both primary outcome measures (prosocial bystander behavior and sexual perpetration).

**Evidence quality rating: MODERATE**

### Impact

- Evaluation of Real Consent found that the programme significantly decreased sexual violence perpetration among a university-aged men.
- Additionally, the programme showed statistically significant increases in terms of gender equitable attitudes.

**Impact rating: MODERATE**

### Target cohort

- Male undergraduate students

### Opportunity cohorts to expand this intervention

- Male secondary school students

# Safe Dates is an educational programme for young people aged 12-17 years old, aimed at preventing dating violence perpetration and victimisation. Evaluation of the programme indicates that it is effective in preventing dating violence

**Overview:** Safe Dates is an educational programme delivered to young people aged 12-17 years, which is designed to stop or prevent dating violence perpetration and victimisation. The programme aims to change adolescent norms on dating violence and gender roles, improve conflict resolution skills, encourage help-seeking by victims and perpetrators, and to develop peer help-giving skills. The programme is delivered through a curriculum with nine 50-minute sessions, one 45 minute play performed by students, and a poster-making exercise.

**Resources:** The Safe Dates programme curriculum is available in a [book](#) published by Hazelden, which can be purchased online for \$395.00.

## Assessment of feasibility in LLR

The Department of Education has made relationships education mandatory in all primary schools and secondary schools in England and Wales. However, there is local discretion as to how this is delivered. Partners tasked with violence prevention in LLR should review the local curriculum and consider whether Safe Dates could be trialled in the area. The cost is low, but the evidence suggests that the impact can be high in terms of preventing sexual violence.

### Evidence

- Safe Dates has been evaluated in [three major studies](#), which showed statistically significant decreases in sexual abuse perpetration against a dating partner and significant reduction in sexual abuse victimisation.
- Overall, the Safe Dates programme shows promise for preventing dating violence. However, the evidence base needs further development

### Impact

- Safe Dates is an effective school-based programme for preventing dating violence
- [One evaluation](#) showed that after receiving the programme students in the intervention group were significantly less likely to be victims or perpetrators of self-reported sexual violence involving a dating partner compared to students who did not receive the intervention.

### Target cohort

- Young people aged 12-17 years
- Both males and females

**Evidence quality rating: MODERATE**

**Impact rating: HIGH**



# Relationships without Fear (RwF) is an educational programme that delivers bespoke domestic abuse awareness assemblies and training to teachers, school staff and other educational professionals

**Overview:** Relationships without Fear (RwF) is a six-week domestic abuse and prevention programme for children and young people delivered in educational settings. RwF is run for 6 weeks, for 1 hour each week, usually delivered within PSHE lessons. It is designed to be interactive and encourages participation through requiring pupils to respond to scenarios.

**Resources:** The training programme for teachers is delivered from £375 per session, while school assemblies can be delivered from £80.

## Assessment of feasibility in LLR

The RwF programme is currently delivered in Staffordshire, Cheshire and Derby. However, LLR could consider contacting the programme operators, [Glow](#) to discuss whether the programme could be expanded to LLR. Alternatively, LLR could develop a similar programme within the region by working with educational institutions.

### Evidence

- RwF was evaluated during the EU REaDAPt Project, which studied 7 schools (619 children) that undertook the course versus 13 schools (584) that did not. Hale et al. (2012) found that the programme successfully encouraged young people to seek help from adults.
- [Fox et al's \(2016\)](#) follow-up evaluation also found that the programme was successful: teenagers' were less likely to accept violence than a control group for at least three months post-intervention.

**Evidence quality rating: MODERATE**

### Impact

- Evidence suggests that those who received the intervention became less accepting of domestic violence, and more likely to seek help if they or someone they knew was experiencing domestic violence.
- However, there has been limited evaluation of this intervention therefore the impact rating is moderate.

**Impact rating: MODERATE**

### Target cohort

- Ages 8 to 16
- Male and female

# Tender is an art charity with a range of programmes that can be commissioned to prevent DA and sexual violence

**Overview:** Tender is an arts charity working with young people to prevent DA and SV. Tender projects can be tailored to specific needs, including the needs of SEND children and those that identify as LGBTQ+. Their Healthy Relationships Projects involve drama-based sessions to empower students to build positive, respectful relationships with others.

**Resources:** There is limited publicly available information on the cost. However, many projects are funded and available for free, subject to availability. For every £1 they receive, 94p goes directly towards work with young people ([Tender, 2022](#))

## Assessment of feasibility in LLR

Tender projects can be commissioned by local areas. Leicester, Leicestershire and Rutland should consider the existing programmes for relationship education across age ranges to understand if commissioning Tender would fill any gaps in current provision.

### Evidence

- Tender evaluate their programmes and impact on an annual basis using a range of independent evaluators.
- They also commissioned an evaluation from Middlesex University, which found that Tender positively impacted CYP's knowledge of intimate violence and was effectively implemented by partners ([Sanders-McDonagh et al. 2015](#)).

**Evidence quality rating: MODERATE**

### Impact

- In 2021/22, 32,174 young people participated in Tender's projects. Evaluation showed that:
- 98% of participants can identify one early warning sign of SV and DA
  - 96% of participants were able to identify appropriate support channels and services

**Impact rating: HIGH**

### Target cohort

- Children and young people in primary, secondary, and further education.
- Programmes can be tailored to the needs of specific groups, such as children with SEN.

# Mentors in Violence Prevention (MVP) is a peer mentoring programme that has been successfully commissioned by a number of VRUs

**Overview:** The Mentors in Violence Prevention (MVP) is a peer mentoring programme that provides young people with the chance to explore and challenge attitudes, beliefs, and cultural norms that may lead to, and underpin gender based violence. Having been successfully rolled out in schools across Scotland, this programme has commissioned by many VRU's, including South Yorkshire, West Midlands, and Merseyside

**Resources:** There is no information available on the costs associated with this programme.

## Assessment of feasibility in LLR

Due to the lack of primary prevention programmes within Leicester, Leicestershire and Rutland, MVP could fill gaps in current provision. This could be supported by the strong relationships that Leicester, Leicestershire and Rutland's Violence Reduction Network have with other VRU's that have implemented the MVP programme.

### Evidence

There has been a plethora of evaluations of the MVP including:

- [An evaluation](#) of Merseyside's MVP used a mixed methods approach, undertaking pre (n=140) and post (n=130) mentors training surveys, stakeholder interviews (n=5), mentor focus groups (n=15) and a schools staff survey (n=5)
- [A further evaluation](#) was undertaken comprising of data from a total of 816 students

**Evidence quality rating: HIGH**

### Impact

The MVP has shown high impact across the majority of studies including:

- 87.5% of mentors believe they can make a difference to the prevention of violence after the programme, compared to 67.6% prior to completing the programme
- 86% of mentors believe that the MVP programme made them feel safer in school

However, one study found no impact of the MVP programme on outcomes such as changes in attitudes, social influences, and bystander intervention behaviour.

**Impact rating: MODERATE**

### Target cohort

- CYP in secondary schools

### Opportunity cohorts:

CYP that attend schools in areas with high rates of serious violence.

# Primary intervention: Awareness-raising campaigns

## Awareness-raising campaigns aim to share informative messages to raise public understanding about DA and sexual violence. This can include raising awareness about a service, law or about DA and sexual violence as issues in general

Public awareness-raising campaigns on DA and SV aim to **educate community members about the prevalence of abuse, encourage individuals to take action to promote social change, and alert survivors to the options and resources that are available to them.**

When considering awareness-raising campaigns, it is important to keep in mind how the impact of these can be **evaluated and monitored.**

### Key elements of public awareness-raising campaigns:

- **Clear objectives:** a campaign needs well-defined objectives and goals to guide the messaging and activities.
- **Target audience:** identifying the audience is crucial for effective messaging.
- **Multi-channel approach:** campaigns can use a mix of communication channels to maximise reach and effectiveness.
- **Call to action:** this can involve providing information on helplines, and encouraging individuals to report abuse and engage in preventative actions.

## Escape the Control is a domestic abuse campaign which was launched in Knowsley and Sefton and aims to raise public awareness and understanding about coercive control through a concerted 4-week period of local advertising

**Overview:** The Escape the Control campaign was launched in 2018 across the Knowsley and Sefton council areas, and aims to raise public awareness of and understanding about coercive control. To achieve this, the campaign advertised materials to start a discussion with the public and encourage action to coercive control. The campaign emphasised that controlling behavior is part of DA, which is a crime.

**Resources:** there is limited information on the cost of this campaign, however it requires a graphic designer and communication channels.

### Assessment of feasibility in LLR

A similar campaign is feasible in Leicester, Leicestershire and Rutland. It would be necessary for the area to consider existing communication channels and how these could be mobilised if a awareness-raising campaign was developed. In addition, it would be important to consider whether the target audience could be reached through these channels or if other channels need to be developed.

#### Evidence

- There has been one internal evaluation which was commissioned by Sefton and Knowsley Council
- The evaluation included an online survey for the public and staff, in-depth telephone interviews with relevant stakeholders, an analysis of campaign metrics including reach and engagement across channels

**Evidence quality rating: LOW**

#### Impact

- 95% of those surveyed agreed the campaign told them about the signs of controlling behaviour
- 82% felt the campaign educated people about controlling behaviour
- 70% of respondents said they have/would talk to something about coercive control

**Impact rating: MODERATE**

#### Target cohort

- Over 16s with particular focus on those under 35

# The [#SafeToSay](#) campaign was developed for the Wales Violence Prevention Unit to encourage and equip people to speak up on domestic abuse and sexual violence

**Overview:** #SafeToSay sought to encourage prosocial bystander responses toward individuals who demonstrate inappropriate and harmful behaviours in the night time economy (NTE) across Cardiff. More specifically, the campaign sought to encourage and equip people to speak up about sexual harassment and the behaviours that underpin it, by providing them with the awareness needed to identify behaviours that are problematic, and the skills to act as prosocial bystanders.

**Resources:** There is no information of the cost of this campaign, however it was delivered on a 'limited budget for a four-week campaign'.

## Assessment of feasibility in LLR

This campaign was commissioned by Wales Violence Prevention Unit and delivered by the Good Night Out Campaign. If Leicester, Leicestershire and Rutland are interested in doing something similar, they can contact the Good Night Out campaign to discuss how feasible this is.

### Evidence

- An [internal evaluation](#) by [Walker et al. \(2022\)](#) found that the campaign was moderately successful. This involved a public survey, with a sample of 50, and social media and online platform analytics.

**Evidence quality rating: LOW**

### Impact

- 43% of website visitors thought the signposting to relevant services was the most useful information.
- #SafeToSay reached 392,001 people across Cardiff and Swansea during the time it was live, 1,938 people clicked from the advertisement through to the website and 147 people interacted with the post.

**Impact rating: MODERATE**

### Target cohort

- 25-34 years old
- Male and female

# Primary intervention: Active bystander programmes



# The Active Bystander Communities (ABC) is the first evidence-led bystander intervention programme in the UK for the prevention of DA

**Overview:** The Active Bystander Communities (ABC) programme is a primary intervention designed to be delivered in general communities to tackle sexual violence and domestic abuse. Its purpose is to engage 'active bystanders': people outside of the victim/perpetrator relationship in violence prevention. This is done by shifting gender inequitable attitudes, beliefs and cultural norms that support abuse and increasing prosocial bystander behaviour to prevent it.

**Resources:** 6 hour intervention delivered over 3 sessions

## Assessment of feasibility in LLR

Although there is limited evidence of the effectiveness of this intervention as it is relatively new, the evidence available is promising and there may be scope to pilot this intervention in Leicester, Leicestershire and Rutland. The evaluation of ABC suggested that further research is needed to use experiential designs engaging diverse community audiences, something which LLR may be able to focus on.

### Evidence

- The Institute of Health and Law School at the University of Exeter conducted an evaluation of ABC and published the results.
- The evaluation found that ABC shows promise as a community-level primary prevention strategy
- Further research using experimental study designs is required.

**Evidence quality rating: LOW**

### Impact

- In a 4 month follow up, it was found that behavioural intent, bystander efficacy, and domestic violence and abuse myth rejection improved significantly immediately after the intervention and also at the 4-month follow up.
- There was a high attendance rate among participants (83% n=58) attended all sessions. This suggested that the content is engaging.

**Impact rating: MODERATE**

### Target cohort

- General community

### Opportunity cohorts to expand this intervention

- Specific communities with higher levels of DA and sexual violence may be most appropriate to roll out this intervention

# The Good Night Out Campaign works with licenced spaces and Local Authorities to help them to better understand, respond to, and prevent sexual violence

**Overview:** The Good Night Out Campaign (GNOC) focuses on creating safer and more inclusive places for socialising by addressing sexual harassment and violence in nightlife and entertainment venues. The campaign offer accreditation to premises after completing staff bystander training, which consists of 4 steps: policy, training, communication, ongoing support. Accreditation training includes 2.5 hours of interactive discussion and activities.

**Resources:** There is limited information online about the cost of the accreditation training, however reduced rates are available based on the size of the organisation.

## Assessment of feasibility in LLR

The GNOC is available to support licenced premises across England and Wales to become accredited through online training. Leicester, Leicestershire and Rutland VRN and local authorities could work together to support and encourage licenced premises to receive this accreditation training. In turn, this could help to foster a safer nightlife across the area.

### Evidence

- There have been several evaluations into the effectiveness of the GNOC in different locations. These evaluations have been conducted by Liverpool John Moores University and the Wales Violence Prevention Unit
- Further evaluation is needed to identify the impact of this programme on the prevalence of sexual violence in nightlife settings.

**Evidence quality rating: MODERATE**

### Impact

- The GNOC training programme is associated with improvements in knowledge, and greater readiness and confidence to intervene in sexual violence amongst nightlife workers

**Impact rating: MODERATE**

### Target cohort

- Night time economy staff

### Opportunity cohorts to expand this intervention

- Student Unions
- Event organisers

# **STOP-SV is a training programme delivered to night time economy workers to prevent nightlife-related sexual violence. One evaluation has found that the programme is associated with greater confidence to intervene in sexual violence**

**Overview:** The STOP-SV programme was set up to prevent nightlife related sexual violence. The programme operates by providing local stakeholders with resources to train night time economy staff (e.g. servers, bar staff, security) to recognise, prevent and respond to sexual violence in nightlife. The STOP-SV programme was commissioned as part of the European Union Rights, Equality and Citizenship programme and was piloted in Czech Republic, Portugal and Spain where 28 stakeholders were provided with resources to train nightlife workers (114 in total).

**Resources:** It is necessary to spend time training the facilitators, and then the facilitators need between 2-3 hours to train night time economy staff.

## **Assessment of feasibility in LLR**

Leicester City Council recently removed the Cumulative Impact Policy, meaning that it is now easier for licenced premises - including pubs, bars and clubs - to open and for new and existing businesses to extend their opening hours. This new measure will likely lead to an increase in the number of people taking part in night time economy activities in Leicester, and it is important to consider how nightlife staff are prepared to recognise, prevent and respond to sexual violence.

### **Evidence quality rating**

- Liverpool John Moores University carried out one evaluation of the programme
- A survey has been conducted with 28 people who received training through this programme

**Evidence quality rating: LOW**

### **Impact**

Night time economy workers who received this training had:

- Improved knowledge on sexual violence
- Improved attitudes towards sexual violence
- Greater confidence to intervene in sexual assault or situations where patrons appear vulnerable

**Impact rating: MEDIUM** (note limited evidence)

### **Target cohort**

- Night time economy staff

### **Opportunity cohorts to expand this intervention**

- This programme could be expanded to other workplace settings

# Secondary interventions

## Secondary intervention focuses on preventing the progression of domestic abuse and sexual violence through early identification, intervention and diversion. It focuses on de-escalation to prevent reoffending for perpetrators and immediate support for victims

Secondary intervention aims to prevent the progression of domestic abuse and sexual violence through early identification, intervention and diversion. Secondary interventions can work with victims and perpetrators, intervening promptly to stop DA and sexual violence from continuing. Secondary prevention can either focus on survivors through mitigating the immediate consequences of abuse and preventing recurrence, or on perpetrators to prevent the abuse/violence from escalating.

### Victims

Secondary prevention for victims of domestic abuse and sexual violence focuses on **providing support, resources, and assistance** to those that have experienced DA and/or SV. This approach aims to **address the immediate needs of victims**, through various forms of support and services: screening, helplines and shelters, counselling and therapy, and specialist risk management tools.

### Perpetrators

Secondary prevention for perpetrators focuses on intervening with individuals who have engaged in abusive behaviours in order to **prevent the recurrence and escalation of this abuse**. This is done through programmes and activities that **promote positive change**, such as perpetrator intervention programmes, cognitive behavioural therapy based interventions, and restorative justice approaches.

# Secondary intervention: Victims-focused

## Secondary prevention for victims of DA or SV focuses on providing immediate support to victims after an offence. Key types of support include screening for early identification, helplines, CBT and risk management

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### Screening

**Screening** aims to identify people who may be experiencing domestic abuse in primary care. The purpose is to identify cases early so that appropriate support, interventions and safety measures can be provided to individuals affected.

### Support

**Helplines and shelters** are key aspect of support to victims, which offer immediate services with 24 hour access to counselling and safe accommodation.

**Cognitive behavioural therapy** programmes are used to support victims and prevent or reduce PTSD after sexual assault or domestic abuse.

### Specialist risk assessment tools and risk management

**Safe Lives domestic violence risk identification tool** to identify victims (via IDVA/ISVAs) at high or medium risk from domestic abuse and to coordinate safety interventions between agencies.

**MARACs** are meetings where information is shared on the highest risk DA/SV cases between representatives of local police, health, child protection, housing practitioners, IDVAs, probation and other specialists. A coordinated multi-agency action plan is developed to protect the victim.

# Secondary intervention: Screening



# Screening aims to identify victims of DA within primary care settings in order to provide timely, appropriate support

**Overview:** Screening aims to identify people within primary care settings who may be experiencing domestic abuse. The purpose is to identify cases of DA early so that appropriate support, interventions and safety measures can be provided to individuals affected.

**Resources:** A screening service like IRIS costs £136 per woman registered at the clinic/practice per year but saves £178 in social costs (Devine et al. 2012).

## Assessment of feasibility in LLR

Screening for DA is a low-cost and highly effective way to identify victims of DA. Screening services have already been implemented in Leicester, Leicestershire and Rutland. Further research and analysis is needed to understand whether screening can be used to identify victims of sexual violence outside of the DA context.

## Evidence

There is relatively strong evidence for screening, through a [systematic review](#) covering 13 studies, including 1 meta-analyses. [The College of Policing](#) determined this review to have high-quality design. The meta-analysis covers eight studies, basing findings on a total of 10,074 women.

**Evidence quality rating: MODERATE**

## Impact

There is [strong evidence](#) that screening for DA improves the levels of victim identification. Women screened are almost three times more likely to mention their experience of DA/abuse compared to those that are not screened.

There is not enough evidence to conclude whether screening increases the uptake in specialist support services.

**Impact rating: HIGH**

## Target cohort

- Patients in antenatal settings and maternal health services

## Opportunity cohorts

- Screening could be extended beyond primary care settings, to other settings such as emergency services.

# The Identification and Referral to Improve Safety (IRIS) programme is an example of a screening programme

**Overview:** The IRIS programme is a screening programme for DA in healthcare settings, which trains healthcare professional on how to recognise and respond to DA. Introduced in 2007, it aims to improve the response to DA in primary care settings, particularly GP surgeries, in England and Wales. Healthcare professionals that are trained in recognising and responding to DA are then able to refer victim-survivors to domestic abuse or sexual violence services to ensure their support and safety needs are met.

**Resources:** [A cost-benefit analysis](#) suggests that for every pound invested in the IRIS programme, there is a return of £16

## Assessment of feasibility in Leicester, Leicestershire and Rutland

The IRIS programme is already running in Leicester, Leicestershire and Rutland and has been running since 2021.

### Evidence

Since 2011, over 1000 GP surgeries have been trained and over 20,000 patients have been referred to specialist support services.

There is strong evidence of effectiveness for the IRIS programme from across 5 UK sites- Greenwich, Middlesbrough, Gwent, Swansea, and Swale.

**Evidence quality rating: HIGH**

### Impact

Evidence from [Akbari et al. \(2021\)](#) shows that GPs using IRIS saw a threefold increase in the identification of DA and a sevenfold increase in referrals to support services for survivors.

The IRIS programme has been shown to be effective in raises the priority of DA in healthcare setting, increasing the confidence of healthcare staff to engage with DA victims and increasing referrals to services to support survivors of DA.

However, the impact of IRIS is also related to a healthcare practitioner individual's professional characteristics and relationships ([Lewis, 2019](#)). Some professionals see IRIS as part of their everyday work, others do not. Therefore, there needs to be ongoing support of IRIS from practice leads and commissioners.

**Impact rating: MODERATE**

### Target cohort

- GP healthcare professionals supporting patients who may be experiencing DA.

### Opportunity cohorts

- Orthopaedic fracture clinics are at the forefront of dealing with DA. Extending IRIS to this setting has strong potential in prevention ([Akbari, 2021](#))

# Secondary intervention: Support

# Support helplines provide 24/7 support for victims of DA and SV

**Overview:** Helpline support is available 24/7, providing survivors of domestic abuse and sexual violence with immediate access to trained support workers. Helpline operators provide emotional support, safety planning assistance, information of legal rights and options, including housing assistance. Survivors may also be directed to professional counseling or therapy services. The helpline operates with a strong commitment to safety and confidentiality.

**Resources:** There is no information on the cost of running a DA/SV helpline. However, a cost-analysis of a suicide-prevention helpline showed an investment of €218,899 saved €1,452,022 for public health services ([Pil et al. 2013](#))

## Assessment of feasibility in LLR

Support helplines for victims of DA and SV are already implemented in Leicester, Leicestershire and Rutland and used nationally. However, further research is needed to explore how effective helpline services can be further developed to best support the target groups most in need in Leicester, Leicestershire and Rutland.

### Evidence

Evidence demonstrating the effectiveness of helplines is lacking, and most approaches demonstrating the impact only measure proximal outcomes such as the number of calls it manages.

There has been one evaluation of a DA/SV helpline ([Cordis Bright, 2014](#)), which has analysed helpline data, and received 17 survey responses from helpline users, and 209 survey responses from helpline representatives.

There has been one systematic review ([Hoffberg et al. 2020](#)) of crisis line services in general, using 33 studies. However, the studies within this review were not considered rigorous by the author.

**Evidence quality rating: LOW**

### Impact

A study analysing the effectiveness of a DA/SV helpline in Wales show that:

- 10 helpline users felt supported and safe having called the helpline
- 16 helpline users reported that they felt confident to deal with their situation

Whilst there is little evidence of the impact of DA/SV helplines, helplines in general have significant uptake.

**Impact rating: MODERATE**

### Target cohort

- Targeted at those in immediate crisis experience DA/SV.

### Opportunity cohorts

- Helplines could be extended to support secondary victims such as the primary victim's friends and family

# Cognitive Behavioural Therapy (CBT) interventions can be used for victims of DA/SV to help them cope with the trauma of their experiences

**Overview:** CBT for victims of domestic abuse or sexual assault is a therapeutic approach that can be used to help victims cope with the emotional, psychological, and behavioural effects of their experiences. This can help individuals understand the cycle of abuse, and identify negative thought patterns that may have resulted from the abuse.

**Resources:** There is no information on the economic costs of employing CBT for offenders of DA. However, the average cost for a private CBT session costs around £60-£100 per session

## Assessment of feasibility in LLR

CBT is currently available on the NHS. However, CBT health pathways for victims often end up routing to the voluntary community sector. LLR need to understand the uptake for NHS CBT services by DA/SV victims to understand if this is sufficient support, and if not, consider implementing a CBT service specifically for DA/SV victims.

## Evidence

There is moderate evidence researching the impact of CBT for PTSD and victims of DA and SV, including children. Several evaluations and individual studies have been conducted to review the evidence.

One systematic review/meta-analysis conducted looked at the efficacy of CBT for women who have experienced DA (Tirado-Munoz, Gilchrist, and Torrens, 2014). This included twelve randomised control trials involving a total of 2666 participants.

Another review looked at the impact of CBT for child victims of sexual abuse.

**Evidence quality rating: MODERATE**

## Impact

CBT interventions have been shown to significantly reduce physical and psychological domestic abuse and there is some evidence of impact for sexual abuse/

**Impact rating: LOW/MODERATE**

## Target cohort

Information on impact comes from women over the age of 18.

## Opportunity cohorts

Children and adolescents who are witnesses to DA could be offered CBT, in line with them now being classed as victims in their own right.

# Supporting children

# Domestic Abuse Recovering Together (DART) is a programme aimed at supporting CYP to help them recover from the adverse effects of DA

**Overview:** DART is a group programme, recognised by the HO and developed by NSPCC, to help families recover from the adverse effects of DA. DART aims to rebuild and strengthen the parent-child relationship and helps children recover from the trauma of witnessing DA.

**Resources:** There is no information given on the cost of DART. If LLR are interested in implementing DART, they should get in touch with the NSPCC.

## Assessment of feasibility in LLR

LLR do have programmes in place to support children, including some, such as You and Me Mum, which focus on the relationship between child and mother, like DART. Dart could complement programmes like You Me and Mum. However, this should be considered in Leicester, Leicestershire and Rutland's current economic context; interviews with service and implementation leads revealed that there were barriers in implementing DART due to difficulties in funding streams for prevention work, finding appropriate venues, and staff capacity ([Stokes, 2017](#))

### Evidence

There has been two evaluations of DART. The first evaluation ([Smith, 2015](#)) utilized a quasi-experimental, mixed methods design. The second evaluation ([Smith, Belton and Cooke, 2020](#)) also used a quasi-experimental design with an intervention group and two comparison groups, with overall over 350 participants.

**Evidence quality rating: MODERATE**

### Impact

After completing DART ([Smith, 2015](#)):

- 62% of mothers with low self-esteem reported substantial improvement
- 88% of children who found their mothers struggled to show them affection reported substantially improved relationships
- 51% of children with moderate/high behavioural and emotional difficulties reported substantially lower levels of need

**Impact rating: MODERATE**

### Target cohort

- Children aged 7-14 years, who are no longer living with the perpetrator.

# Secondary intervention: Perpetrators



## Secondary prevention for perpetrators focuses on providing immediate support to prevent domestic abuse and sexual violence from re-occurring. Key areas of support include perpetrator intervention programmes, cognitive behavioural therapy and restorative justice approaches

### Perpetrator intervention programmes

Domestic Abuse Perpetrator Programmes (DAPPs) are structured behavioural intervention programmes aimed at perpetrators who are willing to engage with 'relatively stable homelives'<sup>1</sup>. These programmes focus on behaviour change, accountability, and developing healthy relationships, and may also be undertaken in a group setting. There have been several systematic reviews and evaluations on the effectiveness of these programmes.

### Cognitive-behavioural therapy based approaches

Cognitive Behavioural therapy (CBT) is often used either standalone or in conjunction with DAPPs as part of an early response intervention to prevent re-offending. CBT aims to identify and address the thoughts, beliefs and attitudes that contribute to abusive behaviours. Perpetrators can learn alternative ways of thinking, develop empathy, and acquire skills for healthy conflict resolution. There is a moderate evidence base to support the effectiveness of CBT related interventions for reducing re-offending.

### Restorative justice approaches

Restorative justice is a less commonly used method for supporting perpetrators to prevent re-offending DA and SV. These approaches are underpinned by the active involvement of the perpetrator, victims, and community in the healing process. They aim to promote understanding, accountability, and repair harm. There is a limited evidence base, however the studies that exist, such as the AIM project, have shown high impact.

# Perpetrator intervention programmes

# Domestic Abuse Perpetrator programmes (DAPPs) focus on reducing repeat offending through supporting behaviour change

**Overview:** Domestic Abuse Perpetrator Programmes (DAPPs) are focused on reducing repeat offending. Interventions used may differ based on the programme and the needs of the offender, they all focus on the **behaviour change** of the perpetrator, including through **understanding the cycle of violence and abuse**, **understanding the impact** of DA on children, and **understanding the gains and losses from changing behaviour**.

**Resources:** No information on the cost of DAPPs could be found.

## Assessment of feasibility in LLR

DAPPs are already in place in Leicester, Leicestershire and Rutland to support perpetrators to prevent re-offending. Leicester, Leicestershire and Rutland could work to tailor commissioning to ensure specific perpetrator programmes are in place that align with local demand.

### Evidence

There is relatively strong evidence on the effectiveness of DAPP programmes with several large-scale evaluations conducted on multiple DAPPs. Some key evaluations include:

- **Repair programme evaluation**, a mixed-methods evaluation and cost benefit analysis on the effectiveness of the REPAIR perpetrator programme.
- **Project Mirabal evaluation**, a multi-site evaluation researching the efficacy and impact of DAPPs in England and Wales. Involved 12 Respect Accredited DAPPs with six measures of success around the reduction of violence and rebuilding respectful relationships.

**Evidence quality rating: HIGH**

### Impact

The Project Mirabal evaluation found that 12 months after starting a DAPP:

- **Physical and sexual violence stopped for the majority of women** involved in the programme, for example, the number of women injured fell from 61% to 2% after the programme.
- Perpetrators were **more likely to use respectful communication**
- Perpetrators were **less likely to use violence and abuse**
- Perpetrators were **more aware of their behaviour** and the effects it had on others

**Impact rating: HIGH**

### Target cohort

- Male perpetrators across all age groups who are willing to engage

### Opportunity cohorts

- There is currently no established group work programme for female domestic violence perpetrators in the UK - these programmes could be adapted for female offenders

## The Make a Change Programme (MAC) is an example of a DAPP focusing on behaviour change among perpetrators alongside providing support to partners/former partners

**Overview:** The MAC programme is an integrated model developed by Respect in partnership with Women's Aid that addresses both organisational and community level responses to DVA, supports behaviour change among perpetrators, provides support to partners/former partners, and provides training to professionals in the public, voluntary and private sector to improve DA awareness. It is designed to take place before the perpetrator's behaviour escalates. This is 26 week programme divided into three focused phases: a focus of healthy relationships, a focus on specific acts of abuse and violence, and a focus on child-centred, non-abusive parenting. This phased structure allows modules to be delivered either consecutively or concurrently/as flexible as possible.

**Resources:** MAC is funded through National Community Lottery Funds and local area contributors. The cost of MAC is £2970 per individual using abuse. MAC shows large potential savings, with a potential saving in excess of £30,000 for each person using abuse that engaged with the service.

### Evidence

The MAC programme was evaluated in 2020 using rigorous mixed methods. This included evaluating quantitative outcomes of MAC, interviews with survivors, four qualitative focus groups with stakeholders, and interviews with project staff.

**Evidence quality rating: MODERATE**

### Impact

70% of survivors engaged with partner support and provided strong qualitative feedback on this. Survivors particularly highlighted that they were relieved support came to them instead of having to find it. Recidivism rates were not recorded, and therefore conclusions on the impact of MAC on perpetrators behaviours cannot be drawn. Through the training offered to practitioners, practitioners reported significantly more confidence in their ability to understand DA and ability to raise concerns about abusive behaviours.

**Impact rating: MODERATE**

### Assessment of feasibility in LLR

A similar programme is currently in place in Leicester, Leicestershire and Rutland, a perpetrator behaviour change service through the Jenkins Centre, which is based on the Make a Change model. LLR should understand if this programme is suitable to meet the needs of perpetrators across LLR to gain a better understanding if new DAPPs, such as Make a Change, should be commissioned.

### Target cohort

Adult perpetrators of DA that are concerned about their behaviour, but it has not yet escalated to the point where intervention is mandated by courts or child protection orders.

### Opportunity cohorts

Those not yet disclosing that they are using abusive behaviours; tools to understand who these individuals are are undeveloped, but these individuals are compatible with the MAC programme.

# The Change That Lasts Early Awareness (CLEAR) programme is an early intervention programme, used to intervene with abusive behaviours before they escalate

**Overview:** Specifically implemented in Wales in 2019, CLEAR is a an early intervention programme for potential perpetrators who are using abusive behaviours in relationships, which has been developed by Welsh Womens Aid. CLEAR aims to intervene in perpetrator's lives as early as possible and divert them from abusive trajectories by raising awareness, supporting behavioural change and increasing accountability. Men are often referred by a professional or front-line services after consent has been obtained by them, but men can also self-refer. Session are either run in groups, or on a 1:1 setting depending on the needs of the participant.

**Resources:** There is no information available on the costs of this intervention.

## Evidence

CLEAR has been evaluated by Women's Aid using a mixed methods approach. This was done through secondary analysis of project monitoring data and feedback of 27 cases, and qualitative interviews with project workers and staff in specialist services.

**Evidence quality rating: MODERATE**

## Impact

Those completing course reported good progress, stating that CLEAR made a marked difference to their behaviour.

Partners also mentioned positive change in the behaviours of the men undertaking the course. Service providers were also positive about the change in mens behaviours, stating that participants demonstrated commitment to finish the course and completed the homework tasks set for them.

There is further work needed to understand if this course has reduced abusive behaviours.

**Impact rating: MODERATE**

## Assessment of feasibility in LLR

The CLEAR programme (as part of the wider Change that Lasts programme) demonstrated positive impacts in the 9 pilot areas across England and Wales, suggesting that this could be implemented in Leicester, Leicestershire and Rutland to better support community approaches to identifying DA and SV, improve professional training and build up expert support for DA perpetrators and victims.

## Target cohort

The largest cohort of individuals taking part on CLEAR were those aged 30-39 (n=15). One third had mental health issues.

Participants must be men who are 18 years or over, willing and motivated to change. They must not have any outstanding civil or criminal matters relating to their behaviour at the point of referral.

# The Cautioning and Relationship Abuse (CARA) programme is an example of a DAPP that works with perpetrators who have received a diversionary caution

**Overview:** The CARA programme targets DA offenders with a diversionary caution. CARA is a DA awareness raising intervention consisting of two workshops held 4 weeks apart, supporting offenders to make better behaviour choices in their relationships. CARA also promotes the safety of offenders' families through a linked victim contact service offering safeguarding and support.

**Resources:** A cost benefit analysis suggests introducing a CARA Service into a police force area are significant, even using conservative estimates. For West Midlands, the net benefit of the CARA Service would be £156,581 annually. For Hampshire, the net benefit is estimated to be £780,864.40 annually.

## Assessment of feasibility in LLR

The CARA programme is currently in place in Leicester, Leicestershire and Rutland. Taking steps to evaluate the impact and cost benefit of the CARA programme in Leicester, Leicestershire and Rutland would be useful to think about further commissioning of DAPP programmes and what works in Leicester, Leicestershire and Rutland.

### Evidence

The programme has a rigorous multisite evaluation and RCT evaluating the impact of the programme. This includes:

- An [2022 RCT and impact evaluation](#) on the CARA programme across West Midlands and Hampshire.
- [Separate RCT in 2017](#) evaluating the effectiveness of the CARA service in Hampshire.

**Evidence quality rating: MODERATE**

### Impact

CARA service has a significant impact on recidivism.

- On average, CARA reduced offences by 81% in the first six months and by 56% in the first 12 months for West Midlands.
- CARA reduced offences by 39% in the first six months and by 41% in the first 12 months for Hampshire

**Impact rating: HIGH**

### Target cohort

- Domestic Abuse offenders with a diversionary caution
- Early intervention stage

# Cognitive Behavioural Therapy interventions

# Cognitive Behavioural Therapy (CBT) interventions for perpetrators aim to address the thoughts and beliefs that may lead to violence

**Overview:** CBT is used for perpetrators of DA to stop or reduce violence, as well as changing verbally abusive behaviours and attitudes towards both victims and violence. It addresses DA by identifying the thoughts/beliefs that lead to violent behaviour and challenging the way in which perpetrators may justify their violent behaviour. This could be implemented either in correctional facilities or in the community.

**Resources:** There is no information on the economic costs of employing CBT for offenders of DA. However, the average cost for a private CBT session costs around £60-£100 per session.

## Evidence

There is extensive evidence evaluating the effectiveness of CBT programme specific for perpetrators of domestic abuse and sexual violence.

There are several systematic reviews on the effectiveness of CBT for DA perpetrators. One review covers six studies ([Smedslund et al. 2011](#)), and the other covers eight studies ([Babcock, Green and Robie. 2004](#)).

**Evidence quality rating: HIGH**

## Impact

One review ([Smedslund et al. 2011](#)) estimated that, on average, perpetrators receiving CBT are 14% less likely to reoffend than those in the control group; although the effect was not significantly significant.

Many CBT interventions also include other theoretical approaches such as the Duluth model ([Zarling, Bannon and Berta. 2019](#)), making it difficult to identify which component has the greatest impact.

**Impact rating: MODERATE/LOW**

## Assessment of feasibility in LLR

Leicester, Leicestershire and Rutland should gain an understanding of the use of CBT in local correctional facilities for perpetrators of DA to understand whether implementing CBT interventions for perpetrators will be both feasible, and fill a gap in provision.

## Target cohort

It has been hypothesised that CBT may be more impactful if participation is voluntary



# Restorative justice approaches

# Restorative Justice (RJ) interventions focus on bringing the survivor and perpetrator together in order to make amends by focusing on the harm caused

**Overview:** Restorative justice interventions are participatory processes focusing on repairing the harm caused by the perpetrator. The process usually involves bringing together the survivor, the perpetrator, and relevant support staff/facilitators.

**Resources:** There is no information on the cost of RJ programmes for SV and DA. However, an economic evaluation of RJ ([Jones and Harris, 2022](#)) in general found that the cost-social benefit ratio was £14 per £1 invested.

## Evidence

There are no published evaluations regarding restorative justice and sexual violence in the UK, and beyond the UK 'there is a profound lack of empirical evidence in the field'

Evidence on restorative justice for sexual violence comes from case studies. For example, Project Restore in New Zealand offers restorative conferences in cases of sexual violence. [The evaluation](#) of this project came from 3 interviews with victim-survivors and 1 interview with an offender.

There is greater evidence for the use of restorative justice programmes for victims and perpetrators of DA through randomised control trials ([Mills, Baroca and Ariel, 2013](#); [Mills et al, 2019](#)), although there are no systematic reviews or meta-analyses evaluating the effectiveness of this.

Evidence quality rating: **LOW**

## Assessment of feasibility in LLR

Restorative justice initiatives are in place in Leicester, Leicestershire and Rutland through [Victim First](#). These services could be extended to victims of DA and SV, taking into account the evidence and impact rating.

## Impact

Case studies ([Julich et al, 2012](#); [McGlynn, Westmarland, and Godeen, 2012](#)) show that, for victim-survivors of sexual violence, restorative justice can provide a sense of justice. These approaches are most effective when they are 'survivor driven'.

Regarding DA, RJ has been shown to be effective. In a randomised control trial (Mill et al, 2019), restorative justice led to statistically significant reductions in new arrests (53%) and crime severity scores (52%). However, RJ in DA cases is only effective if certain conditions are met ([Gavrielides, 2015](#)), as victims may not feel safe participating and therefore safety precautions must be put in place.

Impact rating: **MODERATE**

## Target cohort

Regarding sexual violence, restorative justice approaches are most commonly delivered when the perpetrator is a youth.

Victim-survivors must be willing to engage with RJ interventions.

# Tertiary interventions

## Tertiary prevention focuses on providing longer-term support after domestic abuse or sexual violence has occurred. Key types of support include interventions to remove victims from harm, such as shelters or protection order notices and high harm offender programmes

### High harm offender programmes

**Programmes for high risk offenders:** these work with DA/SV offenders to address their harmful behaviour. These can take place in a secure environment, such as prisons, or in the community through dedicated programmes that could be attached to probation. These involve risk assessments and management, intensive intervention that also address other needs such as substance abuse, and multi-agency collaboration.

### Long-term support

**Counselling/therapy:** is provided to victims of DA/SV to help them address and cope with the emotional, psychological and behavioural effects of their trauma. Counselling can help individuals understand the cycle of abuse, and identify negative thoughts that may have resulted from the abuse suffered

**Crisis centres:** these are also known as shelters or safe houses and provide immediate assistance to those escaping or recovering from DA situations.

**MARACs:** are meetings where information is shared on the highest risk domestic abuse cases between representatives of local police, health, child protection, housing practitioners, IDVAs, probation and other specialists. A coordinated multi-agency action plan is developed to protect the victim.

### Police/ enforcement support

**Domestic Violence Protection Notices/ (DPVN):** are issued by the police when they think a DA suspect poses a threat to the victim. They prohibit the suspect from staying in or entering the victim's house for 48 hours. The police can also apply to a magistrate's court for a DVPO, which provides the victim with a further 14 to 28 days in which the perpetrator is prohibited from making contact.

**MAPPAS:** Multi-agency public protection arrangements are put in place to ensure the successful management of violent and sexual offenders. The central purpose of MAPPAS is to reduce serious harm from known offenders and prevent further harm to victims, based on the fact that typically complex cases cannot be managed by agencies working alone.

# Multi-Agency Risk Assessment Conferences (MARACs) are multi-agency meetings where key service representatives discuss options for increasing the safety of a victim

**Overview:** A MARAC is a meeting where information is shared on the highest risk domestic abuse cases between key service representatives. After sharing all relevant information they have about a victim, the representatives discuss options for increasing the safety of the victim and turn these into a coordinated action plan. The primary focus of the MARAC is to safeguard the adult victim. The MARAC will also make links with other fora to safeguard children and manage the behaviour of the perpetrator. At the heart of a MARAC is the working assumption that no single agency or individual can see the complete picture of the life of a victim, but all may have insights that are crucial to their safety. The victim is represented by an IDVA who speaks on their behalf

**Resources:** MARACs substantially reduce the cost associated with severe domestic abuse. For every £1 spent on MARACs, it is estimated that at least £6 of public money can be saved annually on direct costs to agencies

## Assessment of feasibility in LLR

MARACs are currently in place in Leicester, Leicestershire and Rutland. Leicester, Leicestershire and Rutland could review the demand and subsequent provision of MARACs across the area to identify if there are any gaps in provision or improvements needed.

### Evidence

MARACs are used extensively across the country; 270 MARACs are in operation throughout England and Wales. Several reviews looking at their cost benefit and effectiveness, however there is a lack of recent evaluations of their impact. Evidence on impact comes from a [2011 Government review](#) of 200 MARACs, including a survey with 32 MARAC professionals on their effectiveness.

**Evidence quality rating: MODERATE**

### Impact

Early analysis found that following intervention by a MARAC and an IDVA service, up to 60% of domestic abuse victims report no further violence  
Effectiveness is enhanced through info sharing; appropriate agency representations; the role of the IDVA in representing and engaging the victim in the process.  
There is some evidence to suggest MARACs are overloaded with inadequate case reviews and challenges with compliance as they lack statutory footing

**Impact rating: HIGH**

### Target cohort

High-risk victims of DA, including children

# The Drive project is aimed at high-harm offenders using a whole-systems approach, co-ordinated multi-agency response

**Overview:** The Drive Programme is designed to address DA perpetrated by high-harm offenders who pose significant risks to their partners and families. It is currently located in West Mercia, South Wales, West Midlands, London, Avon and Somerset, The Wirral, Derbyshire, Northumbria, Dorset and Greater Manchester, with the intention to expand its reach over time. Within each area, it is delivered by domestic abuse organisations that tailor it for the locality. Participation is usually identified through MARAC conferences or police risk-assessment systems.

**Resources:** The programme costs £2400 per perpetrator.

## Assessment of feasibility in LLR

Whilst DAPP programmes are in place in Leicester, Leicestershire and Rutland, there is less evidence of these addressing high-harm offenders. Therefore, the Drive programme could fill this gap in provision.

### Evidence

Evidence for Drive comes from the largest evaluation of perpetrator interventions ever carried out. This evaluation used a randomised control design involving 506 perpetrators, 196 victim-survivors.

### Impact

The number of Drive service users perpetrating abuse reduced significantly\*:

- 82% fewer perpetrators were using physical abuse
- 88% fewer perpetrators were using sexual abuse
- 75% fewer perpetrators were using harassment and stalking
- 73% fewer perpetrators were using jealous and controlling behaviours.

### Target cohort

High-harm perpetrators of domestic abuse that pose significant risks to their partners and families, as identified through a MARAC or police risk assessment systems.

Evidence quality rating: MODERATE

Impact rating: HIGH

# Second responder programmes involve a follow-up visit to a victim of DA by the police and a victim advocate within 2 weeks after the initial police response

**Overview:** Secondary responder programmes typically involve a follow-up visit to victims of domestic abuse at their home. These visits are carried out by a police officer and victim advocate, who attend the victim’s house together with the aim of providing assistance to the victim and sometimes the offender to prevent further violence by finding long-term solutions to the problem. The idea behind this approach is that the victim/offender will be more receptive to interventions in the period shortly after the domestic abuse incident.

**Resources:** There is limited information about costs of this intervention, however the intervention would require the police and victim advocates to work together, potentially pooling resources.

**Assessment of feasibility in LLR**

A second responder programme, Project 360, is underway in Leicester, Leicestershire and Rutland. Engagement workers, with an expertise in assisting victims of domestic violence, work from within the police force to contact victims via telephone within 24 hours of a reported domestic incident. Engagement workers act as a mediator between the police and local domestic violence support services. Rapid phone contact is often followed up by face-to-face visits between engagement workers and victims to provide further assistance.

**Evidence**

There has been one systematic review based on 10 studies of second responder programmes, which conducted meta-analyses of study outcomes by study design.

Further research is needed to study the exact reason for increased reports as a result of second responder programmes

**Impact**

Evaluation shows that second responder programmes have reduced crime, however overall they have not had a statistically significant impact on crime. This evaluation also showed that second responder programmes have led to slightly higher reporting of abuse to the police, however there is no statistically significant impact on repeat victimisation.

- Target cohort**
- Victims of domestic abuse
  - Perpetrators of domestic abuse

**Evidence quality rating: LOW**

**Impact rating: LOW**



# Spotlight: interventions that combine all levels

It is important to note that using specific levels of prevention is only one aspect of a comprehensive approach to preventing and tackling domestic abuse and sexual violence. **Multi-stage interventions that span all levels of prevention allows for a more holistic response.**



# Change That Lasts is a holistic, socially valuable intervention programme by Women's Aid which offers a total response to DA across all three levels of prevention

An example of an intervention that uses all three levels of prevention is Change that Lasts. Change that Lasts was developed by the Women's Aid Federation in England, in partnership with Welsh Women's Aid and survivors. It includes 3 strands which traverse the levels of prevention: Ask me, Trusted Professional, Specialist Support Services. In Wales, there is also CLEAR, which is tertiary prevention aimed at perpetrators. See [slide 74](#) for an overview of this.

## Primary prevention: Ask Me Programme

This strand of the intervention involves the training of community ambassadors to improve awareness and understanding of DA in their communities.

For every £1 invested, this created a social value of £5.13\*

## Secondary prevention: Trusted Professional

This strand of work involves the training of non-specialist professionals to enable them to identify and respond better to survivors and perpetrators.

For every £1 invested, this created a social value of £5.31\*

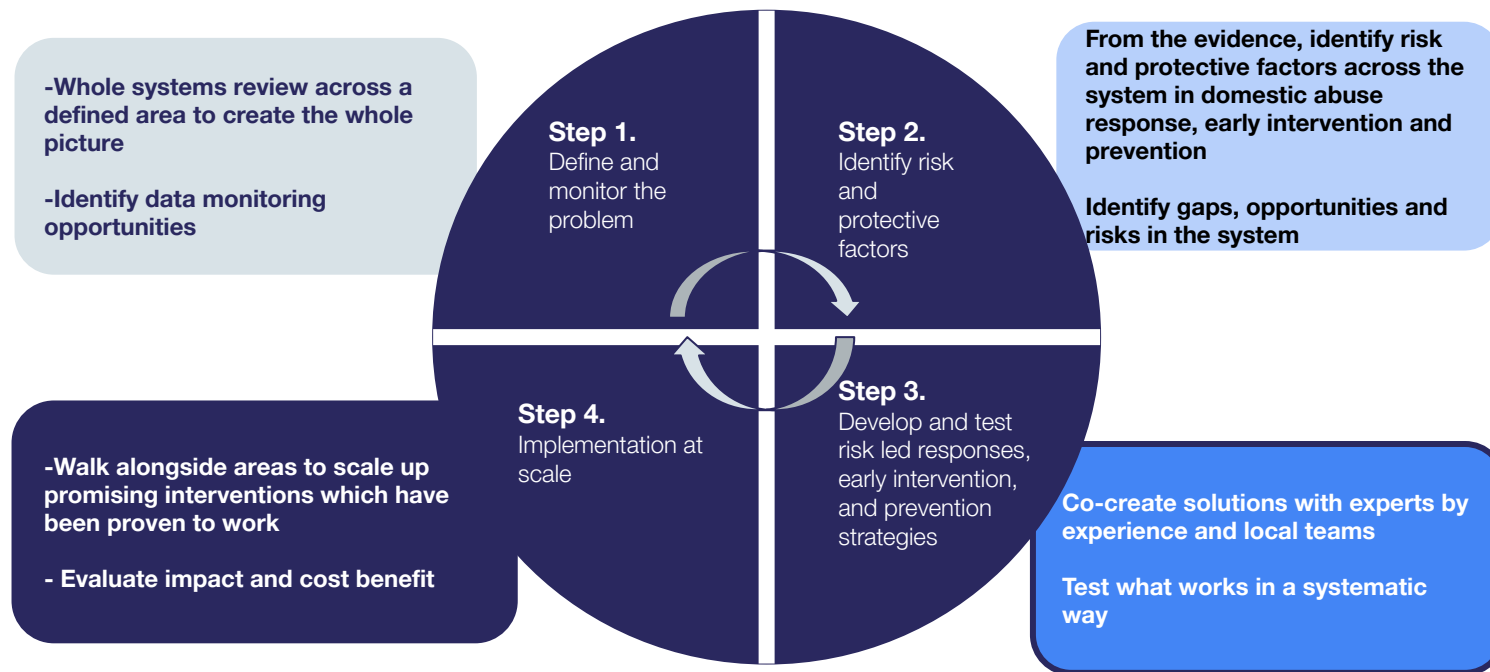
## Tertiary prevention: Expert Voices Scheme

Known as the Specialist Support Services in Wales, this strand involves the provision of needs-led, trauma-informed specialist services for survivors.

For every £1 invested, this created a social value of £5.50\*

# **Recommendations: Commissioning interventions to tackle DA and sexual violence**

# One way to take forward the interventions included in this rapid evidence review is to consider how they fit together within a whole systems approach. Safer lives have developed a public health approach framework to ending domestic abuse and ensure a continuous cycle of improvement across the system



# Discussion points for your partnership

# These questions are intended to be discussed at a partnership level to support your understanding of the existing local landscape around domestic abuse and sexual violence interventions

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**1**

What interventions aimed at tackling sexual violence and domestic abuse are working well in your local area?

**2**

What are the gaps in interventions available to tackle sexual violence and domestic abuse in your local area?

**3**

How will you identify individuals that would benefit from these interventions?

**4**

How will you know these interventions are effective?

# Evaluating success of interventions

## Evaluation mechanisms should be in place to understand the impact of interventions to tackle domestic abuse and sexual violence. A best practice approach to evaluation involves the community and service users and routinely seeks their views

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As part of bolstering your partnership's community engagement, you should be **routinely seeking opportunities to monitor and evaluate your success in engaging with the community**. You might want to think about using mechanisms to record these outcomes:

1. An increase in trust and confidence in the partnership's work to tackle serious violence
2. A refined understanding of who to target engagement with and how to best approach doing so
3. Greater reach, uptake, and and impact of serious violence interventions
4. More inclusive, representative, and robust understanding of the needs, wants, and concerns of community groups
5. An increase in the degree to which community members feel that their voices are heard and that they have influence on the decision-making process
6. An increase in commissioned and co-produced interventions with community groups and organisations

**In what ways do you currently evaluate the impact of interventions to tackle DA and sexual violence?**

**To what extent are the community and service users involved in the evaluation of interventions?**