Violence Against Women and Girls







Executive Summary

Across West Yorkshire, we will work together to ensure that as many women and girls as possible have their lives improved around health and wellbeing and can live free from violence and exploitation. Implementing a long-term public health approach, which tackles the deep rooted and engrained social, health and economic problems facing women and girls, is our best chance to address this issue. Through this work, we aim to improve the health and well-being of women and girls, including health life expectancy and understanding the risk factors, prevent poor health and wellbeing, reduce harm, and intervene early.

Aims:

- To provide an insight into the causes and impacts of Violence Against Women and Girls (VAWG) as understood in current literature and service provision.
- To identify the needs of women and girls in West Yorkshire to support the development and introduction of intelligence led, evidence based sustainable intervention and provision.
- To provide an overview of current knowledge whilst identifying knowledge gaps in knowledge and recommendations to prompt engagement and localised research.

Key findings:

- Women and girls represent over 50% of West Yorkshire's population
- Age, ethnicity, religion, and identity are key components to understanding the varying needs of women and girls in West Yorkshire. The diversity in West Yorkshire means a singular, universal approach to reducing the risk of VAWG cannot be adopted.
- Five themes are apparent in literature regarding women and violence. Women and girls can be presented as victims, perpetrators, mothers, bystanders, and recruiters. These categories are not mutually exclusive, and women/ girls can have multiple roles in crime and violence. These roles can occur simultaneously or sequentially.
- Female criminality should be considered with recognition that the perpetrator may have previously been a victim.
- Trauma can steer the trajectory of a girl's or woman's life. These events may not occur in silos and for some

- multiple traumas can occur concurrently. When a girl experiences trauma, her survival instincts overcompensate. This dramatically reduces her cognitive development and may have lasting and detrimental impacts on her decision making, academic engagement, trust, and perception of right and wrong. The 5 principals of trauma informed practice (safety, choice, collaboration, trust, and empowerment) should structure research and service delivery.
- Nationally, the number of perpetrators charged, prosecuted, and convicted has declined. Even if a perpetrator is prosecuted, evidence suggests they continue to offend and often there is an escalation of behaviours. Low prosecutions rates are partly attributed to victim withdrawal meaning police reports are often closed with outcome 'evidential difficulties' or 'victim does not support action' listed. To supplement research, engagement with victims is desperately needed as to understand their causes for withdrawal.

 Court backlogs are at critical levels due to Covid-19. The closure of courts and social distancing restrictions have placed the already stretched criminal justice system under immense pressure.

Victims

- In West Yorkshire, between January and December 2020, there were 43,460 reports of domestic abuse from women. Using the recent <u>national crime report</u>, the police recorded 844,955 offences, as domestic abuse-related, an increase of 6%, in the year ending March 2021.
- Domestic abuse services do not provide adequate support for the long-term impacts of violence on their emotional, physical, and social wellbeing. This can be attributed to short term funding and competitive funding pools.
- Women have reported suspicion of support services. Perceived prejudice, language barriers and cultural insensitivity have been noted as reasons why some women do not engage with services.
- Women who work in the sex industry are vulnerable for several reasons.
 Women who have multiple partners are more likely to suffer abuse and be victims of violence and sexual assault than women who have one sexual partner. Evidence suggests the barriers to exiting sex work shared similarities with the drivers of their involvement. This includes addiction, stigma, insecure housing.
- The <u>Global Slavery Index</u> has estimated there are 136,000 people in the UK who are living in modern slavery, of which the majority are assumed to be women and girls.
- In the 12 months to September 2020, police forces in England and Wales recorded 56,152 offences of rape and 96,984 other sexual offences. Over 84%

- of the victims were women. Societal perceptions attempt to justify sexual assault and rape by trying to blame the victim or mute the prevalence.
- There has been an increase in reports of <u>domestic servitude</u> within West Yorkshire.
- The number of sexual offences recorded by the police showed a 9% decrease in the year ending March 2021 compared with March 2020 (ONS, 2021). Sexual offences decreases are also evident in West Yorkshire where reports fell by 10.6% which equates to 883 fewer offences.
- Studies have shown a lack of male-perpetrator empathy for sexual offences, this includes prior, during and after prison. Multiple sources agree there is inadequate provision of accredited rehabilitation programmes in men's prisons and in the community. Research is clear in its opinion: the way to stop sexual violence does not relate to the victim and their behaviours, the culpability is with the perpetrator. The Home Office have awarded £11.1 million to 25 PCCs to support programmes for domestic abuse perpetrators and perpetrators of stalkin
- Sexual assault has also migrated onto online spaces. The role of social media and the internet on the exploitation of women and girls warrants further investigation.
- Gang involvement poses unique sexual risks of sexual violence and exploitation for women and girls when interacting or associating with gangs and risks can take several different forms. Women are more likely to perform risky behaviours with members, be forced into sex work or slavery, or be targeted by rival gangs.
- There has been an increase of 290% in child sexual abuse offences since 2013.
 Recent ONS reports (May 2021) show

- that over 89,000 child sexual abuse offences were recorded by police in the year ending March 2021.
- There were 11 recorded crimes relating to FGM between March 2004 and December 2015 in West Yorkshire.
 Police forces are not collecting data on FGM or responding to requests for information in a consistent fashion. For example, FGM has been reported as reported as violence with injury, which may underestimate the number of girls subjected to this procedure.
- Yorkshire and the Humber were associated with 142 cases of forced marriage in 2019.
- Cuckooing is a nuanced and evolving form of victimisation. Homes of vulnerable people are used as bases to support the closed market drug industry. This predation exploits victims both physically and psychologically, as many victims can become isolated and imprisoned in their homes.

Perpetration

- Research into female perpetration is highly skewed and unrepresentative.
- 72% of women who entered prison under sentence in 2020 have committed a non-violent offence and 70% of prison sentences given to women were for less than 12 months. More women were sent to prison to serve a sentence for theft than for violence against the person, robbery, sexual offences, drugs, and motoring offences combined.
- Women in prison tend to share the same disadvantages and common criminogenic needs such as substance misuse, education, experience of abuse/trauma, employment and accommodation.
- The covid-19 restrictions imposed did not consider the specific needs of women in prison.

- There is little published information about the ethnicity of women and girls in the CJS. Shortfalls in research includes: the ethnicity of women received into prison over a 12 month period, the ethnicity of women recalled to prison after release and those on community orders.
- Girls who encounter the CJS at 18 or younger are more likely to have experienced violence, abuse and exploitation, have been in care, faced poor mental health and experienced early parenthood than boys.
- HBA there is a sizable involvement from women as both co-conspirators and sole perpetrators.
- A theme which was not widely discussed is how women commit domestic abuse towards other women. Social norms inhibit men hitting women, however, these norms are not extended to women assaulting other women. Social norms have influenced research and has resulted in a predominately heteronormative perspective.
- Sexual abuse committed by women is underreported.

Mothers

- Whilst woman may be victims or perpetrators themselves, they are also involved in raising children who may become involved in violence or crime.
- In the UK, women constitute 5% of the prison population, roughly, more than half of these women are mothers. The <u>Centre for Women's Justice</u> has suggested that nearly 18,000 children are separated from their imprisoned mothers and 6% of women in prison are pregnant.
- Estimates suggest 100 babies are born to incarcerated mothers each year. The care mothers and babies receive whilst in prison is heavily debated.

- Women face barriers in maintaining their relationship with their children whilst in prison. Barriers include: limited telephone facilities, timing, pricing, lack of privacy and infrequency of visits.
- The additional barriers for mothers in the prison environment has been coined 'double punishment' whereby women are punished as prisoners but also mothers.
- There are significant disparities in maternal and infant birth outcomes of Black and Minority Ethnic women in the UK. Black and Minority Ethnic women are at higher risk of experiencing a still birth; maternal death and poorer experiences of care.

Bystanders

- Women and girls can be bystanders in which they abet criminality or violence through acts of commission or omission.
- Bystanders can be prosocial and active (they do something) or passive (they do nothing).
- Social influence, audience inhibition, diffusion of responsibility, fear of retaliation, pluralistic ignorance can influence a woman's decision to intervene.

Recruiters

- Outside of criminality, more women are in recruitment than men due to their personable traits such as listening skills, resilience, and communication techniques. These characteristics can allow women to be charismatic and appear trusting, which allows them to build strong rapports with individuals.
- Woman have been known to use sexuality, fear, friendship, and/or perceived vulnerability to entrap or recruit individuals.
- Music, social media, intimate relationships, addiction are some of the methods used by women to recruit vulnerable individuals.

Risk factors

- Risk factors have been separated into 4 categories; individual, relationship, community and societal.
- Despite appearing distinct, these categories overlap and are relational to one another.
- Factors can influence the frequency and intensity of others. Risk factors have the potential to increase a woman/girl's likelihood of becoming a victim and/or perpetrating a crime.
- Adverse Childhood experiences, being in care and neurodiversity have a central role in individualist risk factors.

Protective factors

- The presence of positive influences and opportunities can be described as 'protective factors'. These factors can mitigate and buffer against the effects of risk factors for violence.
- Education is a well-known tool for breaking the cycle of poverty.
- Education has the potential to reduces rates of forced marriage and domestic abuse whilst promoting healthier and smaller families.
- Attainment can lead to further education and improve job opportunities and wages for women and girls. Education is a known protective factor for a range of determinants including violence, health, and socioeconomic status.
- Schools can provide girls with structure and purpose which can deter them committing crimes and/or joining gangs.

Identified needs

- Deprivation, racism and gender inequality appear to underpin the needs of all women and girls; however these are to be addressed nationally.
- Perpetrator accountability, conviction and rehabilitation, secure accommodation, addiction support, culturally sensitive services, increased awareness of services, trauma informed services, are some of the needs identified.

Limitations of current research and service

- Limited West Yorkshire based research.
- Robust research into the varying facets of VAWG lacks quality and depth.
 Research is also limited using crosssectional studies. Whilst these are practical for collecting data quickly and presenting a snapshot of society, crosssectional studies cannot infer causality.
- Commissioning and bidding processes create unnecessary competition between providers.
- Partnership working is not as effective as it should be.



Recommendations

- The findings indicate several issues that merit further investigation in future research. Knowledge should review VAWG using a life course perspective.
- The intersectionality's of women in West Yorkshire's local communities should be identified through structured community engagement.
- Demographic data is needed to identify the needs of the LGBTQIA+ community (sexual orientation and trans population).
- More needs to be done to avoid prosecutions for low-level and nonviolent crimes where possible for women and girls.
- Services and processes should be spelt out in plain English to increase awareness and understanding.
- Girls would benefit from early intervention and prevention-focused interventions in schools. These should focus on signs of abuse, teenage pregnancy, healthy relationships, sex education, consent, available services. This has the potential to have longerterm, wide-reaching impacts in changing both attitudes towards and perpetration of VAWG.
- Women will benefit from services with a holistic approach, ideally this should be women-centred and trauma informed, with integrated services. Services should communicate, share working practice and use one another as examples.

Summary

- Tackling VAWG is a priority for many and rightly so, but the agenda needs to maintain current momentum to ensure change occurs.
- Women and girls are often blamed for their victimisation leading many to monitor and discipline their behaviours. This narrative is damaging and inaccurate.
- Women and girls can be victims, perpetrators, mothers, bystanders, and recruiters. Whilst this typology is not exhaustive, it aims to cover the key aspects of their involvement in violence.
- Conviction rates for VAWG are poor and can deter women from reporting abuse. Victim withdrawal and evidential difficulties contribute to low conviction rates.
- Covid 19 will have a significant and lasting impact on VAWG. The pandemic witnessed an increase in reports of DA and saw significant court delays.
- The findings emphasise the need for a holistic, women-centred approach to supporting women and girls. This means research and interventions should aim to address all the needs of women, ie emotional, social and physical, in a comprehensive manner.
- Research and services provision needs to recognise the intersectionality's of women and girls. Current research appears heteronormative and biased which skews service availability.
- There is a requirement to review partnership working.
- Risk and protective factors have been identified. These factors should be used to structure interventions and start conversations about why women are prone to victimisation or offending.



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Section 01

The West Yorkshire Violence Reduction Unit will work together with partners to ensure that as many women and girls as possible, across West Yorkshire, have their lives improved around health and wellbeing and can live free from violence and exploitation.

1.1 Introduction

What started as an authentic rapid, desk-based needs assessment (NA) has turned into a hybrid needs assessment and literature review. The terms 'NA' and 'review' will be used interchangeably throughout.

This review aims to provide an insight into the causes and impacts of Violence Against Women and Girls (VAWG) as understood in current literature and service provision whilst identifying the needs of women and girls in West Yorkshire. The review will provide an overview of current knowledge whilst identifying knowledge gaps in knowledge and recommendations to prompt engagement and localised research. Understanding the local needs of women and girls will allow for the development and introduction of intelligence led, evidence based sustainable intervention and provision. This in turn will support the health and wellbeing of women and girls whilst reducing their vulnerability and involvement with violence.

VAWG is priority concern for both the UK Government and Mayor of West Yorkshire. The recent <u>Domestic Abuse Act</u> (2021) aims to expand victim protections

whilst strengthening measures to tackle perpetrators. All local councils will have legal duties to provide victims with lifesaving support such as therapy, advocacy, and counselling in safe accommodation (UK Government, 2021). The services available to VAWG victims appear to be constrained by funding, reduced evidencebased practice and silo working. Despite being topical VAWG is not new, recent public interest has been motivated by the brutal rape and murder of Sarah Everard in March 2021. This sent shockwaves around the UK as it highlighted the vulnerability of women. The event brought the issues of VAWG and gender inequality to the forefront of mainstream media and forced the government to respond. Academic literature, nonetheless, has researched VAWG extensively for a decade and upholds the narrative that the vulnerability endured by women and girls is a consequence of systemic, deep-rooted inequality.

In July 2021, the UK Government published their <u>tackling violence against women</u> and girls strategy. Whilst creating a new policing lead, the strategy encourages all police forces and their partners to prioritise reducing VAWG. A key theme in this

strategy is that it is VAWG should be heavily offender orientated to ensure perpetrators recognises the culpability of their actions. Literature also supports this view and evidence will be provided in this review.

West Yorkshire is a diverse region, and this review has sought to identify the intersectional needs of women and girls. Age, ethnicity, religion, and identity are key components to understanding the varying needs of women and girls in West Yorkshire. The diversity in West Yorkshire means a singular, universal approach to reducing the risk of VAWG cannot be adopted. This would merely marginalise women and girls whose needs do not align with the approach and would contribute to the invisibility of needs. By listening to lived experiences, varied needs can be central to prevention, protection, and provision of support services. To support this, literature suggests adopting an outlook that promotes the importance of recognising dual rights whereby women are aware of the balance between their own agency and autonomy versus. their protection and guidance.

Throughout the review, findings will attempt to demonstrate that VAWG and vulnerability is not an individual issue but in fact, several factors contribute to a woman or girls' level of risk. Nonetheless, deprivation is an overt casual factor for violence and vulnerability by acting as a catalyst for many behaviours and opportunities. The realities of living in deprivation and its outcome on vulnerability and perpetration will be evident throughout the NA.

The review has taken a women-focused approach and deliberately includes the journey of women and girls through their life course. Whilst doing this, protective and risk factors have been identified. These factors can be at an individual, relationship, community, and the societal level. A robust strategic response to VAWG must address the risk factors at each level with equal importance with the overarching aim of addressing societal norms and systemic inequality.

As expected, VAWG research based in West Yorkshire is limited so inferences and conclusions have been drawn from international, national, and regional evidence. Therefore, the findings of this review should be inferred with this in mind. The findings and recommendations made in this NA, should be used to inform locality-based research and community engagement. This includes listening to the lived experiences OF women and girls in the West Yorkshire to further identity their needs.

1.2 Methodology

The review was completed between July and August 2021 and includes literature which was available at this time.

The literature review was undertaken to address the 3 aims:

- To provide an insight into the causes and impacts of Violence Against Women and Girls as understood in current literature and service provision.
- To identify the needs of women and girls in West Yorkshire to support the development and introduction of evidence-based intervention and provision.
- To provide an overview of current knowledge whilst identifying research gaps and providing recommendations to prompt engagement and localised research.

The evidence presented in this reviewed has been sourced from academic research. government and local authority reports and datasets, third sector reports and grev literature including blog posts, website content, social media posts. Local, national, and international sources were used as West Yorkshire based research is limited. To identify relevant literature, search engines primarily Google and Bing, journal databases, citation searches, government updates and social media were used. Searches were structured by using a series of search terms including but not exclusive to Violence Against Women and Girls, VAWG, domestic abuse, sexual assault, perpetration. When applicable, abstracts or executive summary were scanned to ensure relevance. If deemed appropriate the source was read, and key points noted. From the summary notes, key themes and research gaps were identified.

It is to be stated, this is not a systematic literature review. The review takes a narrative form which aimed to provide an objective summary of the current knowledge. Therefore, the literature and resources included is not exhaustive. Nonetheless, a narrative review does not mean a systematic process was not followed, searches were structured, and literature was read, noted and prioritised in a robust manner.

Section 02

2.1 West Yorkshire's female demographic profile

Where possible, this section includes specific data relating to women and girls in West Yorkshire. If gendered or local data was not available, statistics inclusive of males and national or regional data has been sourced.

2.2 Age distribution

In each of West Yorkshire's metropolitan areas, women and girls make up over 50% of the population. This is unsurprising when compared to national demographic data.

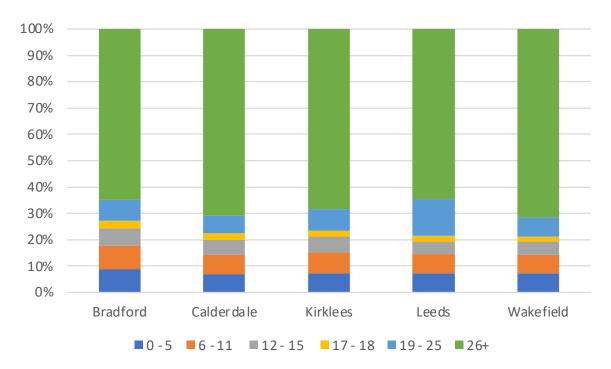
2.2.1 Table 1: Population estimates for women in West Yorkshire, by metropolitan borough using 2018 estimates. Data from ONS (2021).

Age	Bradford	Calderdale	Kirklees	Leeds	Wakefield
0 - 5	23,865	7358	16,219	29,475	12,486
6 - 11	24,070	7976	17,282	28,491	12,315
12 - 16	18,597	6107	13,086	20,034	9059
17 - 18	7137	2397	5169	8444	3567
19 - 25	22,064	7266	18,238	56,120	12,632
26 +	176,700	75,803	151,325	259,487	125,398
Total female	272,433	106,907	221,319	402,051	175,457
Total pop	537,173	210,082	438,717	789,194	345,038
% females	50.7%	50.9%	50.4%	50.9%	50.9%

The population density is varied between areas. Nonetheless, each districts population consists of over 50% women, therefore the needs of these women and girls need to be concern.

The data used to create Figure 1 can be found in Appendix 1 and should be used for further analysis. This information displays the distribution and variation in the female population structure between the boroughs.

2.2.2 Figure 1: The age distribution of women and girls in West Yorkshire, by metropolitan borough. Data from ONS (2021).



As shown by both Table 1 and Figure 1, Leeds has a significantly higher proportion of women aged 19 to 25 (13.96% of its female population), in comparison to the other boroughs. This proportion is unsurprising and most likely related to the city's high student population. Nonetheless, the high proportion can be a cause for concern as university students and women under 25 can be particularly vulnerable, for several reasons which are discussed further in this review.

Despite not being statistical neighbours (areas with similar population sizes and characteristics), the boroughs of West Yorkshire demonstrate some likenesses. Kirklees, Leeds, and Wakefield have comparable proportion of young girls (aged 0 to 5 years); however Bradford is considerably higher and Calderdale considerably lower. Expectedly, the largest proportion of women are over the age of 25. To supplement findings in this review, additional research considering how age, specifically older age, can influence behaviours and a woman's level of vulnerability and risk.

2.3 Life expectancy

For a female born in either Yorkshire or the Humber, between the years 2016 – 2018, her life expectancy (LE) would be 82.4 years. This is 0.5 years less than the UK average and 0.8 years lower than the England average. In relation to West Yorkshire, life expectancy data for females in the 5 boroughs is shown in Table 2.

2.3.1 Table 2: LE estimates at birth for females (2016-18) (years) (ONS, 2021)

	LE estimates at birth (2016-18) (years)
Bradford	81.6
Calderdale	82.2
Kirklees	82.5
Leeds	82.1
Wakefield	81.9

In addition to life expectancy estimates, ONS provides summary data which details how many years a woman can expect to live in good health and live disability free. This is shown in table 3.

2.3.2 Table 3: Latest healthy and disability free life expectancy estimates for females in England and regions, 2016 to 2018. (ONS, 2019)

Females								
	Healthy life expectancy in 2016 to 2018 (years)	Disability free life expectancy 2016 to 2018 (years)						
England	63.9	61.9						
North East	59.7	58						
North West	62.5	60.2						
Yorkshire and the Humber	62.1	60						
East Midlands	61.9	60.3						
West Midlands	62.3	61.2						
East	64.7	63						
London	64.4	63.2						
South East	66.9	64.1						
South West	65.3	62						

Similar to the trends shown in LE, women in the Yorkshire and Humber are expected to have worse health for longer, meaning less years in good health when compared to England's average. When coupled with the other northern regions, the LE and years in good health for northern women supports the concept of North-South divide

as there are significant disparities. The role of health inequalities, and inequalities in general, on serious violence and risk should be assessed separately. Data regarding Quality Adjusted Life Years (QALY) and Disability Adjusted Life Years (DALY) should be used to support this further research.

2.4 Ethnicity

Ethnicity is a key component to understanding the needs of women and girls in West Yorkshire as the region is ethnically diverse. Accordingly, the needs of women and girls in West Yorkshire will not be homogenous due to varying cultural behaviours, social norms, and practices. It is therefore important to understand the ethnic context of each borough so localised needs assessments can be completed. This will ensure the needs of the population are being identified and are suitably met through tailored interventions.

2.4.1 Table 4: Ethnicity estimates for West Yorkshire (inclusive of males and females), based on 2016 estimates. (ONS,2019)

	Total*	WB*	Other white*	Mixed Multiple Ethnic*	Asian or Asian British*	Black / African / Caribbean British*	Other*
West Yorkshire	2,295	1,818	92	40	275	43	27
Bradford	532	366	30	6	120	6	4
Calderdale	210	187	6	2	13	1	1
Kirklees	435	330	12	7	74	9	3
Leeds	780	636	30	21	53	24	16
Wakefield	336	299	14	4	14	3	2

^{*}in thousands

The above data does not directly align to the population estimates in table 1, this is due to the year the estimates were made. This data should be inferred with relative caution, but it does provide a rough basis to understand the diversity within West Yorkshire. In each of the boroughs, women make up 50% of the population so it may be assumed that they also make up 50% of each ethnic group. However, this is not veritable.

For consistent and more thorough ethnicity data, the school censuses are good sources. Table 5 shows the ethnicities of students in West Yorkshire.

2.4.2 Table 5: Ethnicity for West Yorkshire schools 2019/2020 (inclusive of boys and girls) – obtained from West Yorkshire and Harrogate Health Care Partnership (2021)

Pupil Characteristics - Ethnicity for West Yorkshire Schools 2019/20 (percentage)					
	Bradford	Calderdale	Kirklees	Leeds	Wakefield
Any other ethnic group	1.5	0.5	1.2	1.9	0.8
Asian - Any other Asian background	1.2	1.1	1.8	2.2	0.4
Asian - Bangladeshi	3.3	0.4	0.3	1.2	0.0
Asian - Indian	2.0	1.4	6.0	2.4	0.4
Asian - Pakistani	36.5	14.6	19.8	6.5	3.3
Black - Any other Black background	0.2	0.2	0.3	1.1	0.3
Black - Black African	1.3	0.6	1.2	5.8	1.3
Black - Black - Caribbean	0.2	0.2	0.5	0.7	0.0
Chinese	0.1	0.2	0.5	0.7	0.0
Mixed - Any other mixed background	2.0	1.2	1.5	2.3	1.2
Mixed - White and Asian	2.4	1.5	2.1	1.6	1.0
Mixed - White and Black African	0.4	0.4	0.6	1.0	0.6
Mixed - White and Black Caribbean	1.2	1.2	2.8	1.9	0.6
Unclassified	1.2	0.6	1.2	1.4	1.0
White - Any other White background	4.2	2.3	2.8	5.2	5.2
White - Gypsy/Roma	1.1	0.4	0.1	0.2	0.1
White - Irish	0.1	0.1	0.1	0.2	0.1
White - Traveller of Irish heritage	0.0	0.0	0.0	0.1	0.1
White - White British	40.9	73.1	57.6	63.2	83.4

Complete data set can be found here – ONS 2021

Understanding school populations can allow preventative interventions to be specific and target areas of risk and concern, including the disengagement from services due to community norms and risk of cultural practises (Female Genital Mutilation, Honour Based Abuse, distrust of the police). Schools with a diverse

population would be ideal locations for peer forums and conversations about cultural difference and appreciation. This could be especially useful in younger students, prior to conception with the intention of reducing the influence of intergenerational or societal attitudes.

2.4.3 Gypsy, Traveller and Roma populations

The population size and demographic profile of Gypsy, Traveller and Roma communities can only be estimated due to a lack of monitoring and robust data for this population. A nomadic lifestyle and reluctance to self-ascribe, due to fear of discrimination, can partly explain the limited national understanding (Mulahy, 2017). These communities are recognised as being among the most disadvantaged and often do not engage with external support whether that is social, health or education. Women and girls in these communities are known to be isolated

and rarely engage with support service (McFadden, 2018). This demonstrates both significant data and knowledge gaps.

58,000 people identified as Gypsy or Irish Traveller in the 2011 census, but this is probably a significant undercount due to the reasons above. Interestingly, 39% were under the age of 20 (UK Parliament, 2019). Gypsy and Traveller Exchange (GATE), an organisation for Gypsies and Travellers in Leeds, has estimated that in 2018 there are probably about 7,000 Gypsy and Traveller people in West Yorkshire.

2.4.4 Table 6: Roma population in England by region (inclusive of males and females)

Region	Estimated population
North East	10,656
North West	38,976
Yorkshire and Humber	25,451
East Midlands	23,530
West Midlands	23,316
East	12,524
London (inner and outer)	35,997
South East	19,853
South West	2,994
Total	193,297

Roma families are more likely to live in fixed housing, but this tends to be poor-quality rented accommodation. This can contribute to poor health outcomes (respiratory conditions, mental ill health) alongside limiting employment opportunities which may lead to crime involvement, as a method of subsistence. Due to social perception and stigma, families are often vulnerable to exploitation by their landlord and are often subject to unprompted evictions. Shelter England offer a specific advice service for Gypsy and Traveller communities but the uptake

of these services cannot be determined. It should be noted that studies involving Gypsy and Traveller communities tend to have small study samples meaning generalisations are made and needs assessments and interventions can have limited internal validity.

Similar to gypsy and traveller families, Roma communities are private and do not often engage with mainstream services, unless absolutely necessary. Therefore, the needs of this population remain relatively unknown.

2.5 Religion

2.5.1 Table 7: Religion estimates for West Yorkshire (inclusive of males and females), based on 2017 estimates. (ONS, 2020)

	Total*	Christian*	Buddhist*	Hindu*	Jewish*	Muslim*	Sikh*	Other*	None + Not Stated*
West Yorkshire	2,278	1,190	6	17	7	250	13	24	771
Bradford	530	253	1	5	1	113	4	6	147
Calderdale	208	118	1	1	n/a	12	1	2	73
Kirklees	435	211	1	3	1	71	2	4	142
Leeds	773	395	3	8	5	39	6	7	310
Wakefield	333	213	1	1	n/a	14	n/a	5	99

^{*}in thousands

Similar to Table 4, the data shown in Table 7 estimates the population slightly lower than Table 1. Again, this is due to the date in which the data was estimated. The accuracy of this data is uncertain for some

boroughs, such as Leeds, due to the high number of 'None + none stated'. Either there was a poor response rate or there are over 40% of the population in Leeds who do not have a religion.

2.6 LGBTQIA+

2.6.1 Sexual orientation

Data on sexual orientation was not readily available for West Yorkshire. Table 7 provides 2018 summary data for Yorkshire and the Humber.

2.6.1.2 Table 8: Sexual orientation estimates for Yorkshire and the Humber (2018). (ONS, 2020)

2019	
Heterosexual or straight	4,113,000
Gay or lesbian	53,000
Bisexual	47,000
Other	20,000
Don't know or refuse	144,000

Between 2019 and 2020, 2043 reports were made to <u>West Yorkshire Police</u> regarding sexuality hate crimes. It is unknown how many victims and perpetrators were women. The reports were recorded as being motivated by a person's sexual orientation or perceived sexual orientation.

The association between a woman's sexuality and violence is not largely documented or researched. This is an evidence gap that warrants further investigation due to potential heightened risks.

2.6.2 Transgender

There is no systematic evidence on the size and distribution of the trans population. This is unsurprising as it has not been an option on previous censuses. It is also extremely personal, and disclosure may put individuals at risk. In the UK, it is estimated that 1% of the population is trans or non-binary (600,0000) (Stonewall, 2021). Literature suggests it is unlikely that the trans population will be evenly distributed across the population, therefore presumptions cannot be made for West Yorkshire. To obtain data, consultation with organisations such as Yorkshire MESMAC, Trans Mission and Trans Unite, who support individuals in West Yorkshire would be useful.

The Hate Crime report 2021, found that a large proportion of LGBT+ individuals have experienced hate crime, with many experiencing this on a regular and repeated basis. This has consisted of verbal abuse, online abuse, harassment, doxing, blackmail, sexual and physical violence. Of those who had been victimised, 94% were negatively impacted by their experiences of anti-LGBT+ violence and abuse. A reoccurring point was made throughout the report - many LGBT+ individuals who wanted support were unable to access it. West Yorkshire Police recorded 395 hate crimes in which they detailed as being 'transgender hate crime' in 2019 and 2020.

Similar to the point made in the above section regarding sexual orientation, there is a limited evidence base for the LGBTQIA+ community, violence and victimisation.

2.7 Income

Socioeconomic status is a driver for many outcomes such as health, education, housing, and social cohesion etc. As such, income may encourage or deter criminal involvement. However, it should be noted that higher income does not protect women from victimisation, but it can reduce risky behaviours and or subsistence criminality.

West Yorkshire faces a gender pay gap, whilst this is smaller than the national average it is still significant. The size of the gap can be partly attributed to the number of women working part time roles which tend to attract a lower hourly rate of pay. Nevertheless, a significant proportion of women in West Yorkshire are in full time positions but on average earn lower than male counterparts.

2.7.1 Table 9: Average salary for full time employees by gender, 2020. Published November 2020

Local authority	Female average salary*	Male average salary*
Bradford	£28.4	£35.4
Calderdale	£27.5	£36.5
Kirklees	£27.0	£38.0
Wakefield	£31.4	£38.2
Leeds	£30.7	f38.3
United Kingdom	f33.3	£42.2

^{*}in thousands

When the data was published, ONS asked for these figures to be inferred with relative caution as Covid-19 impacted the data gathering process.

To supplement the above table, <u>WYCA's</u> <u>2021 labour market report</u> states 20% of local jobs in West Yorkshire pay less than the Living Wage Foundation's Living Wage rate. The highest proportion was in Kirklees where 28% of jobs fall below the Living Wage threshold.

As shown, women in West Yorkshire have lower average salaries than the UK average. However, it is likely that London has contributed an inflated national average. Even so, there are significant gender pay differences in all areas of West Yorkshire. The above only considers full time employees which can indicate several points:

- A Kings Fund review (2018) found women pay a 'motherhood penalty' where earnings for men and women keep pace until the birth of their first child. For most women the pay gap generated at that point is never recovered. Data also shows that men tend to have more senior roles than women.
- Women take lower paid roles which usually have a degree of flexibility for childcare reasons. During the pandemic, women's work may have been disrupted due to unequal caring roles and lack of childcare because of family isolation and school closures.
- Men and women have different jobs as more women work in hospitality and retail while male-dominated sectors like construction and manufacturing are higher paid and were able to

continue working through the national lockdowns. More women tend to be primary school teachers and men dominate the engineering field. This trend is also seen in West Yorkshire's girls. In the 2019/20 academic year only 6% of those starting on apprenticeships in for Construction, planning and the built environment and 10% on Engineering and Manufacturing Technologies were girls (WYCA, 2021).

 There have been continuous periods of structural joblessness in West Yorkshire as the skills of the those seeking work or new work do not match the profile of labour demand. This is more apparent for women. Kirklees has the largest pay gap of £11,000 and Wakefield have the smallest gap of £6,800. When comparing the region to the national pay gap, Bradford, Leeds, and Wakefield have a smaller gap between the average salary of males and females. Financial independence is a protective factor for women and girls as it can reduce their vulnerability and can allow them to leave abusive relationships. The pay gap between men and women in West Yorkshire is stark and is something that warrants further investigation and review as part of an inequalities research agenda.

In terms of unemployment, Calderdale, Leeds, and Kirklees were below the UK average of 4.5% unemployment. Yet, Bradford was considerably higher with an unemployment rate of 5.6%, Wakefield was only marginally higher with 4.7%.

2.8 Disability

The number of people with disabilities and learning difficulties in West Yorkshire's population is not known with certainty. What is known is that 2393 disability hate crimes were reported to West Yorkshire Police from 2018 to 2020.

According to the <u>Papworth Trust</u>, there are 13.3 million disabled people living in the UK (2018), of which:

- 7% of children are disabled
- 18% of working age adults are disabled
- 44% of pension age adults are disabled
- 83% of disabled people acquire their disability later in life but 50% of mental health problems are established by age 14 and 75% by age 24.
- 20% of people with disabilities live in Yorkshire and the Humber.
- In addition, 1.5 million people in the UK have a learning disability.

There are more disabled women than men in the UK (23% of women compared to 19% of men). Disabled women are known have a heightened vulnerability than non-disabled women, regarding domestic abuse, sexual abuse, and exploitation.

Families with disabled children may face additional barriers to avoiding deprivation. It is estimated that 84% of mothers of disabled children do not work, compared with 39% of mothers of non-disabled children. Only 3% of mothers of disabled children work full-time. This may contribute to the gender pay gap within West Yorkshire but also contribute to the household income for families. The Papworth Trust have highlighted the difficulties that low-income families with disabled children face when trying to access family support, respite, and appropriate childcare.

By 2030, research project that there will be two million more adults with mental health problems than in 2013. The Mental Health Foundation state that 7 in every 10 women, young adults aged 18-34 and people living alone have experienced a mental health problem. Women are more likely to report a mental health problem than men (33% compared to 19%). It has been estimated that 300,000 people with long-term mental health problems lose their job each year. Many of these individuals will likely have a mental health condition rather than physical disabilities. There are myriad consequences for the individual and their families because of this. Unemployment is a predominant risk factor for both vulnerability and involvement in crime and violence.

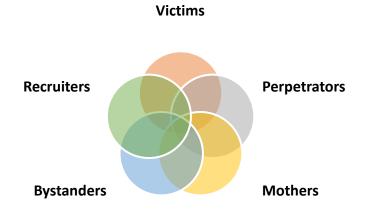
Section 03

3.1 The involvement of women and girls in crime and violence: a typology

Where Five themes are apparent in literature regarding women and violence. Women and girls can be presented as victims, perpetrators, mothers, bystanders, and recruiters. These categories appear to not be mutually exclusive, and women/girls can have multiple roles in crime and violence. These roles can occur simultaneously or sequentially. The relationship between themes is shown by figure 2. By understanding the role of women and girls in violence and the context in which it occurs, knowledge of their diverse and role specific needs will improve.

Recently, there has been a rise in literature which looks beyond the gendered stereotype of women as victims and actively analyses their role in orchestrating and perpetuating violence. Typically, criminality and violence do not align with social perceptions of femininity. Literature asks research to look beyond gendered perceptions and assess female perpetration in an objective manner. Although, there is a clear consensus that female criminality should considered with recognition that the perpetrator may have previously been a victim. The role of bystanders and witnesses is less researched in a UK setting but further investigation would prove useful for the introduction of bystander training.

3.1.1 Figure 2: The roles of women in violence as identified in literature.



3.2 Victims

Women experience higher rates of victimisation and are much more likely to be seriously hurt, coerced and experience fear, than men. Between October 2019 and September 2020, there were 13,692 cases of coercive and controlling behaviour were reported to the police and 10,360 offences of exposure and voyeurism (HMICFRS, 2021).

Being a victim can occur at any age and can be perpetrated by any gender. Evidence shows the risk of exploitation is greater when a girl is younger, and when a woman is older due to their trusting nature, reduced defence skills, and naivety. Women with disabilities have a similar vulnerability level and are 10% more likely to be victims of domestic abuse than non-disabled women (Safe Lives, 2017). Women are more likely to be victims of abuse and violence perpetrated by their partner, former partner, or someone they know. Recent Home Office data shows 58% of adult female homicide victims were killed by someone they knew. The recent brutal murder of Sarah Keith (April 2021), by her boyfriend in Leeds exemplifies this (Full story here - BBC News, 2021) Recent mid-reports from Together Women infer West Yorkshire's women and girls have a hyperawareness of their risk of vulnerability. Consequently, they adjust and discipline their behaviour to limit their risk of violence and/or abuse. Common examples include wearing shoes that are comfortable for running, not going out after dark, informing others of their whereabouts, and finally wearing clothing to conceal their bodies or religion. Not only is this extremely sad that women are both consciously and subconsciously monitoring their behaviour in an attempt not to be victimised, but it highlights the need for perpetrator accountability. By changing their behaviour women and girls can feel responsible for victimisation despite all culpability being with their abuser.

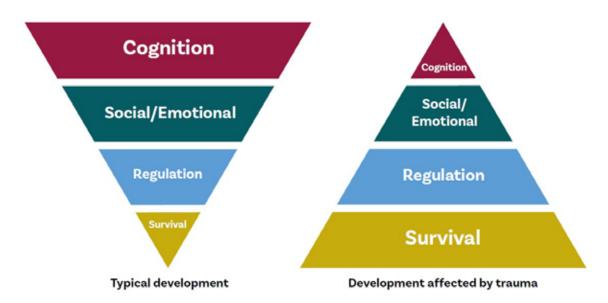
Recent research into <u>safety and transport</u> concludes that personal safety has been identified as one of the most important factors in women's travel decisions. Fear consists of their perceptions of safety and security whilst accessing, waiting for, and travelling using public transport. Findings show that young women feel less safe than men in train stations and suggest that the journey and time is influenced by level of fear. The use of private taxis is also a result of fear, women are reported to use these as a means of controlling risk, but this in itself can induce fear, especially when travelling alone and/or at night.

3.2.1 Trauma

Trauma can steer the trajectory of a girl's or woman's life. Trauma can occur at any point during the life course but traumatic incidents in childhood can have long term outcomes (Mind, 2020). Childhood trauma can include witnessing or being the victim of violence, parental neglect or abuse and bereavement. These events may not occur in silos, and for some multiple traumas can occur concurrently. The impact of trauma on vulnerability and perpetration is a wider project that requires a separate research project. Nonetheless, this review will briefly explain how trauma is associated with VAWG and victim experiences.

Trauma can be responded to in many ways. Contextual factors, such as social norms, environmental factors and individual characteristics can strong determine how trauma is dealt with. When individuals are subject to profound levels of deprivation. trauma can be buried meaning substance use, performing risky sexual behaviours or being a perpetrator of violence, can be means of coping. Further outcomes are clearly explained in an animation by the South Yorkshire VRU. For children, denial can manifest as abscondment, disengagement with school and antisocial behaviour. Figure 3 can offer an explanation as to why these behaviours can occur.

3.2.2 Figure 3: How trauma affects a child's development. Revolving Door Agency - Diverting young adults away from the cycle of crisis and crime (Revolving Doors, 2021)



As shown above, when a girl experiences trauma, her survival instincts overcompensate. This dramatically reduces her cognitive development and may have lasting and detrimental impacts on her decision making, academic engagement, trust, and perception of right and wrong. This reduced mental bandwidth (capacity of the brain to perform daily functions) can contribute to mental health complications. When coupled with a toxic environment, social expectations, deprivation and high crime, her ability to navigate and address her trauma is minimised. This accumulation can steer girls into criminality and entrench their vulnerability.

Even though Figure 3 is directed at children, this can be adapted for women and young people. Evidence shows that experiencing trauma can alter the life course of any victim, at any age or from any social background. Unmet trauma needs can have both unconscious (social withdrawal and detachment) and visible effects (ie losing employment, physical behaviours). This review understands that a trauma informed approach will be the most effective way of reducing VAWG and improving the health and opportunities of women and girls in West Yorkshire. Trauma informed practice understands and responds to the impact of trauma. By using 5 core principals (safety, choice, collaboration, trust, and empowerment), trauma informed approaches address previous experiences to prevent further adversity.

3.2.2 Prosecution rates

Nationally, the number of perpetrators charged, prosecuted, and convicted has declined. Despite the high number of crimes recorded by the police in 2019/2020, only 9% of domestic-abuserelated crimes, 4% of sexual offences, and 2% of rape offences were given an outcome of charged/summonsed in the same year (Home Office, 2020). Even if a perpetrator is prosecuted, evidence suggests they continue to offend and often there is an escalation of behaviours. Studies with those charged with stalking indicate that up to 56% go on to reoffend and suggest a link between unchecked stalking behaviours and domestic homicides (UK Government, 2021). This can demonstrate ineffective or absence of rehabilitation services. Prosecutions for child sexual offences are also low, in the past year convictions for all child sexual abuse offences have fallen by 25% since 2016 (ONS, 2021)

In the 12 months to September 2020, police forces in England and Wales recorded 56,152 offences of rape and 96,984 other sexual offences, of which 84% of the victims were women (HMICFRS, 2021). Despite the volume of reports, convictions for sexual offences have fallen significantly and rape convictions have decreased by 60% since 2016. Data from the CSEW for 2017/18 to 2019/20 highlights 84% of victims aged 16 to 59 who had experienced rape since the age of 16 knew the perpetrator.

Regionally, at the end of the 2021 financial year, it is reported that only 228 of the 2,811 rape investigations concluded by West Yorkshire Police with an alleged female victim resulted in a charge or summons. That is a charge rate of 8%. Despite being shockingly low, West Yorkshire has a higher charge rate than the average for England and Wales (1.6%).

Low prosecutions rates are partly attributed to victim withdrawal meaning police reports are often closed with outcome 'evidential difficulties' or 'victim does not support action' listed. This has been linked to lengthy, intrusive investigations and perceptions that the system favours the perpetrator. Victim withdrawals accounted for 54% of domestic-abuse-related crimes, 35% of sexual offences, and 44% of rape offences in 2019/2020, according to the ONS. Understandably, reporting a crime is a huge undertaking but evidence emphasises the need for additional support throughout investigations from the police and their partners to ensure victim engagement remains high. To supplement research, engagement with victims is desperately needed as to understand their causes for withdrawal. Third sector providers may be best placed to conduct this as they are likely to have established relationships with some victims. However, tactful programmes will be needed to identify the needs of women who report crimes but do not engage with additional services.

There has been a reduction in the use of pre-charge bail whereby those under investigation can be placed under robust and proportionate conditions, with the purpose of safeguarding victims and witnesses. During investigations, victims can be coerced or threatened with may contribute to their withdrawal. At present, whilst there has been some improvements in recent years, evidence suggests that some elements of police investigations and prosecution processes does not protect and appropriately engage victims.

Court backlogs are at critical levels due to Covid-19. The closure of courts and social distancing restricted have placed the stretched criminal justice system under immense pressure. Despite this, court delays prior to covid were reported as a deterrent for many women when asked why they did not report their abuse.

Poor conviction rates and delays have been referred to as systemic failings by government in their June 2021 'Response to Rape report'. The reform pledges made in the report do have some promising aspects, but their delivery is not expected imminently. Therefore, it is likely that further delays and backlogs will continue prevent victims from reporting instances of abuse and limit the number of perpetrators being prosecuted, in the upcoming months and years.

The review will now look at the various ways in which women and girls can be victims. Whilst this is not an exhaustive list, this review attempts to cover the main causes and needs which are outlined in current literature and service provision.

3.2.3 Domestic abuse (DA)

"Any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to psychological, physical, sexual, financial and emotional" – West Yorkshire Police, 2021

The definition used by West Yorkshire Police demonstrates DA takes multiple forms and occurs on a continuum. For many victims they experience a combination of forms of DA. It is unknown whether this definition will be revised as domestic abuse is being consulted on nationally.

Domestic abuse is a gendered crime as women are also more likely to experience domestic abuse than men. In West Yorkshire, between January and December 2020, there were 43,460 reports of domestic abuse from women. Using the recent national crime report, the police recorded 844,955 offences, as domestic

abuse-related, an increase of 6%, in the year ending March 2021. The ethnicity of the victim is not often recorded, this can be viewed as an area of missed opportunity. It is a possibility that the needs of Black and Ethnic Minority women may be overlooked if their intersectional identities are not recorded. Covid-19 has been associated. as a causal factor for the increase in DA reports (Women's aid, 2020). The lockdowns are expected to have a myriad of worrying outcomes both for the victims and those who have witnessed it. This is support by international experience, primarily from New Zealand, has shown that family violence (domestic abuse, child abuse and elder abuse) alongside sexual violence can escalate during and after large-scale disasters or crises (NZFVC, 2020). Similar trends are occurring in the UK, the charity Refuge reported an increase of 25% in help line calls and 150% increase in traffic to their website in the week after the government announced tighter social distancing and lockdown measures in March 2020 (BBC, 2020).

The below reasons for not reporting DA or seeking support where common in literature and were alluded to by a <u>Kirklees Better Outcomes Partnership (KBOP)</u> colleague during a partnership meeting. Whilst these are in reference to domestic abuse, they can also be the reasons why victims of other forms of VAWG do not come forward.

3.2.3.1 Table 10: Reasons and explanations for women not reporting their abuse

Reason	Explanation
Not recognising experience as abuse	Studies have shown women are not aware of the differing forms of abuse, examples given are: a husband raping his wife or understanding that coercive control, in all forms, is VAWG.
Not being able to name their abuser	This could be in relation to their position or status, ie family member or employer.
Unsure how to report this and/or where to locate services	Evidence suggests that women often do not know what services are available to them and/or how to access them. Women who are subject to coercive control may not have easy access to online services. Also, some women require support for their abuse without speaking to the police.
Cultural beliefs	A part of a community where cultural abuse and violence are normalised.
The nature and fear of coercive control	A common threat is the removal of children by social services. Women do not want to risk this by speaking out.
A one-time occurrence	Justification of abuse. Women will often blame themselves for the abuse, so they attempt to 'correct' their behaviour.
Fear	 Of not being believed or listened to Women may have become a victim of abuse because of their work and fear legal proceedings (ie women who work in the sex industry or women with addictions)
No alternative accommodation	This is extremely apparent in mothers who fear being homeless or separated from their children. Women are likely to stay in unsafe accommodation than sleeping on the streets.
No financial independence from abuser	Financial manipulation and dependence can be a form of coercive control, ie mothers with part time income.
Homogenous services	These are not deemed user friendly or appropriate to certain women's experiences, ie staff not understanding certain experiences and language barriers.
The perception of inbuilt prejudice in services	This was voiced by Black and Minority Ethnic women, those in the LGBTQA+ community and women who work in the sex industry. The notion that women will be judged and dismissed based on their appearance, how they speak and behave prevent them from reaching out.
Feelings of shame and/or guilt	Women can feel responsible for their abuse, this can be attributed to social norms of 'victim blaming', where women are seen to put themselves in dangerous spaces.
Bureaucracy of reporting a crime	The length and intrusiveness of the process (not inclusive of prosecution proceedings)
Feelings of blame	Not only for the abuse but for not reporting it sooner.
Dissatisfaction with the police	Community perceptions and distrustTheir response to previous reports.
Inaccessibility of services	 Location Time of services (ie daytime services which close at 5 are not accessible by those who work during those hours) Not near transport links. Having to attend numerous separate services (ie one for housing, money management, trauma support)
Not wanting to appear weak or vulnerable	Women have reported feeling embarrassed for being a victim, this has been associated to women in senior or positions of power.

Recognising abuse and naming the abuser have been denoted as important steps for self-acceptance and recovery. This regaining of agency has been deemed vital by survivors. The initial step would be to increase awareness of what domestic abuse and sexual assault is so that women and girls can identify this and seek help.

Research involving the lived experiences of DA survivors suggest that services do not provide support for the long-term impacts of violence on their emotional, physical, and social wellbeing. Examples include prolonged support for housing, PTSD, trust, and employment. This can be attributed to short term funding and competitive funding pools. Women have reported suffering DA in several relationships and require support for years of cumulative abuse and trauma. Due to short term funding and competitive bidding processes, support services provided by charities can be unsustainable and may be overlooked. Short term funding and interim services may be beneficial, but they will have little effectiveness in addressing the trauma and risk factors in a woman's life. Silo working between organisations can limit accessibility of services to women. For example, women may have to attend appointments for housing, financial planning, or employment with several organisations in different locations. Not only is this logistically difficult and costly but women have reported needing to explain their abuse multiple times to different providers. This can cause additional distress and can led to service disengagement. In response to this. literature denotes the benefits of holistic approaches which employ case workers. By having a case worker, women are guided and fully supported which can allow trust to develop. Case workers can organise and provide access to appropriate services.

A <u>Greater London study</u> (2018) exemplified the spectrum in which DA can occur. The

reports of 220 survivors each contained differences. However, the women did have similar experiences and barriers when attempting to access services. An interesting suggestion from this study, requested that authorities and services should have a wider understanding of the different forms of abuse experienced by women and girls, especially how these forms intersect. Women felt that their experiences were often dissected and only parts of their experiences were viewed as DA as they aligned to the 'typical' abuse forms. The common example given was the dismissal of coercive control and its varying degrees and forms. Literature recommends specialised Domestic Abuse services which are tailored to the needs of their population with trained support workers. This will ensure women are given the appropriate support with individuals who they feel comfortable with and are able to understand their experiences whilst providing proficient provision.

Women have reported suspicion of support services. Perceived prejudice, language barriers and cultural insensitivity have been noted as reasons why some women do not engage with services (Harvey, 2014; Wellock, 2010). These are the experiences of mainly Black and Minority Ethnic women, women in the LGBTQA+ community and women who work in the sex industry. In acknowledgement of this, the Anah Project in Bradford provides a linguistically diverse model of support for women experiencing any form of abuse. The service aims to be an inclusive environment for disadvantaged women throughout the area. By offering approachable and representative services which are designed to meet the individualistic needs of women, the project offers women with information and practical support. Women are informed of on their human rights with the intention of increasing their confidence to regain their independence. Whilst receiving support for

mental wellbeing, women are encouraged to; partake in physical exercise (Zumba classes), continue with their education, and start divorce proceedings, if required. The model used by the Anah Project provides support for marginalised women whose needs can often be overlooked. However other organisations who use this approach are not evident in all areas of West Yorkshire, despite all districts having significant diversity. This demonstrates a gap a service delivery.

To provide early and specific domestic abuse support to victims, Cleveland Police introduced Domestic Abuse cars in 2020 to respond to increased DA reports on weekends. These cars are staffed by a Police Officer and a dedicated DA support worker to provide safeguarding and build reassurance from the outset. Reports show that the cars attended 114 incidents between July 2020 and October 2020. The independent domestic violence advocate works with victims to build their confidence in the police and are a central point of contact for the investigation. In turn, it is hoped this approach will improve victim experiences and maintain their engagement which may lead to a conviction. The Cleveland PCC has deemed the cars as an invaluable resource and has extended funding until the end of Summer 2021. This programme is promising but an evaluation has not yet been completed so potential outcomes cannot be analysed.

West Midlands PCC has recently (<u>August 2021</u>) announced that they will be boosting dedicated support for victims of domestic abuse over age 55. Their records show over 8,600 people over 55 have reported being a victim of DA between April 2019 and April 2021. Age specific data for West Yorkshire's DA reports is not readily available but this is an area that should be reviewed further. As mentioned previously, being a victim can occur at any age and risk of vulnerability can increase

with age for certain offences. It would be interesting to evaluate if risk of age influences prevalence of DA.

The importance of believing women is a common thread in <u>abuse research</u>. Children are also included in this narrative. The impacts of domestic abuse and sexual assault are known but the courage needed to speak out can be paramount (<u>Women's aid, 2018</u>). Disbelief can easily cause someone to retract and stay in a toxic and/or potentially life endangering environment. There is a requirement for wider knowledge of support services so that friends, families/co-workers can support a victim but directing them to support services.

To address the need of awareness of what constitutes DA and the services available, Cambridgeshire Police have recently (August 2021) released a podcast on YouTube. This podcast is based around the experiences of a DA survivor and the Detective Constable who investigated the case. The survivor speaks freely and explains her abuse whilst providing insight to how it made her feel. This is a powerful podcast which shines light on lived experiences and provides a police perspective. Listeners are given information about policy such as Claire's Law as well as available services. The podcast attempts to reassure victims that there is help available and provides suitable links and telephone numbers in description and on screen. Whilst the service may not be heavily trafficked at the time of this review, it is on a popular streaming site and has the potential to be a useful tool if promoted.

An interesting finding from the Together Women mid-report review highlighted how age can influence perception of domestic violence. Younger participants had awareness of the physical harm women can be subjected to and had knowledge of 'stranger danger' but did not fully comprehend that violence can occur within

the home and be committed by relatives or known persons. The discourses surrounding domestic violence and child abuse mirror this understanding, previous discourses presented VAWG as happening exclusively outside of the home and did not attribute the family structure in this.

Domestic abuse is not confirmed to a residence, it is becoming increasingly common on online spaces. Despite social media being a positive tool for community and sharing, it can be used to manipulate and exploit women. Women's aid conducted a survey about online abuse and a third of respondents stated their partner or ex-partner had used spyware or GPS locators to monitor and locate the individual. In the same study, 85% of respondents described the online abuse as mirroring the pattern of abuse they experience offline. This is an area of research that could be explored as part of the VRU social media research tender.

It should be acknowledged that domestic abuse does not end when the woman leaves an abusive relationship. Research from the None in 3 research centre illustrates that the majority of women recall continual campaigns of harassment, intimidation and stalking for periods up to 5 years post-separation which can lead to relentless stress.

Intimate partner violence (IPV) is now recognised as a serious problem for young people in the UK. IPV can consist of control, coercion, and abuse within dating relationships. IPV is part of the domestic abuse continuum. Studies have shown that women between 16-24 years old experience the highest rates of IPV out of any age group. This has been attributed to level of education, social norms, and inexperience of relationships. Young women can also be heavily influenced by peers who can share distorted notions of what a healthy relationship is. Evidence suggests advanced technologies can also

contribute significantly to the susceptibility of younger populations (<u>Murray</u>, <u>King</u>, <u>& Crowe</u>, <u>2016</u>). Women reported higher rates of IPV during pregnancy, after a miscarriage or birth, sporting events or after speaking to other men (Ni3, 2021)

It is more socially acceptable for a young woman to have an older boyfriend, but a young woman's inexperience can often be taken advantage of (Young, 2005). For example, young women may misconstrue violence and coercive control as acts of intimacy. The organisation None in 3 (Ni3) have reported that young women are more likely to downplay their experiences of sexual violence to their peers. Young women can do this unintentionally or it can be a deliberate choice. For some, the early indicators of an abusive relationship are missed. By concealing the extent of their abuse, it can become a normalised event and women continue to endure the abuse. The normalisation of violence can mean women become victims in future relationships. As the most vulnerable group is of school age and university age, it is recommended that the signs of IPV should be taught, and young women should be signposted to the nearest services. Research has also suggested that young women should be reassured during this process as they can often blame themselves.

As part of the Home Office's Domestic Abuse Perpetrator Programme £11.3 million has been awarded to 25 PCCs in England and Wales. West Yorkshire secured £390,939 which will be shared between 4 projects in the region. The projects hold offenders to account for their actions whilst delivering bespoke training and guidance programmes aimed at changing their behaviour for good.

West Yorkshire's funded projects are:

- Caring Dads in Kirklees A programme by Kirklees Council that has a positive impact on fathers parenting and coparenting practices.
- Cautions and Relationship Abuse (CARA) service – A service by Restorative Solutions which aims to provide offenders with an opportunity, not a punishment, to reflect on their choices and find a positive way forward. The additional funding will support the increased demands because of the Covid-19 pandemic.
- Restore Families A focused adolescent violence programme to address youth violence displayed towards family members and peers and 1-1 whole family support for both perpetrator and victim.
- Recognise Reflect Change (RRC) targets male perpetrators and bringing a focussed session for stalking behaviours.

The 25 PCCs will be funding different projects. For example, Cheshire will be introducing the 'Best of Me' model which offers an early intervention approach to tackling perpetrator behaviours before these become pathologised or embedded. Greater Manchester will commission the charity Talk, Listen, Change to deliver work with young perpetrators of DA. Hertfordshire will be delivering the programme 'For Baby's Sake', a holistic, whole family domestic abuse programme starting during pregnancy. Full details of all the projects can be found here. It is unclear whether PCCs shared knowledge during the consultation and bidding processes about their intended projects.

West Yorkshire's projects will require robust monitoring and evaluations to measure their validity and effectiveness. Nonetheless, West Yorkshire appears to be proactive in its approach to reforming offenders of VAWG and ensuring perpetrator culpability. Alongside the region's projects, West Yorkshire should work in collaboration with the other 24 PCCs, to ensure lessons can be learnt from underperforming projects and there is an agreement sharing best practice. PCCs have the potential to build upon the success of these piloted projects.

3.2.4 Women who work in the sex industry

Throughout this section, there is reference to 'women in prostitution' or 'prostitution'. The VRU recognise the stigmatising and insensitivity of these terms. As an organisation, we do not endorse this use of terminology or language. 'Women in prostitution' will only be used if the literature it was extracted from uses this or refers to this term. Having consulted with service providers who support women who work in the sex industry, for all aspects which have been interpreted by the VRU, the term women who work in the sex industry will be used. The use of the term women who work in the sex industry does not exclude or deny the fact that women can be abused or exploited.

Whilst researching this area, it was made clear that various terminology is used to describe individuals involved in the sex industry. There appears to be a disconnect between literature and the lived experiences and opinions of women who work in the sex industry. An appendix item in the Listening Well report by the Voices for Holbeck committee (2020) contributed a view that the term 'sex worker' can indicate a chosen form of employment. The appendix item recognised that for some women who work in the sex industry it can be a personal choice, but it also inferred many women who work in the sex industry do so because of addiction needs, subsistence, debt repayment or coercion. As a result of this view and consultation with individuals, the term 'women in prostitution' was decided on by the Voices of Holbeck committee.

London Mayoral <u>VAWG review</u>'s found that for many women, the barriers to 'exiting prostitution' shared similarities with the drivers of their involvement (<u>MOPAC</u>, <u>2019</u>:14; Greater London Authority, 2018). Drivers include:

- Housing
- Financial insecurity and debt
- Age of entry into sex work
- Coercion
- Addiction
- Migrant population
- Education level
- Adverse Child experiences

Robust statistics of prior victimisation are not available as this is rarely discussed by women who work in the sex industry. Developing a more open and conversational dialogue may encourage more women to speak about their previous experiences and trauma.

Addiction was a common theme in research. For many women, addiction was the reason for their entry into the sex industry. Fast money and access to drugs can feed habits and make it extremely difficult for women to turn their backs on. Addiction can also make women extremely vulnerable to exploitation and coercion from purchasers, drug dealers and pimps. Substance misuse can force women into a cyclical lifestyle whereby they perform risky behaviours to earn money to support their addiction. This can result in women being unable to secure accommodation and/or seek support. However, providing robust and effective support for addiction may have difficulties. This was clearly presented by the <u>Dame Carol Black recent</u> independent review into drugs. The review highlighted how local authority commissioners have reduced capacity, experience, and specialist competence. More specifically, significant funding cuts

had been made to inpatient detoxification and residential rehabilitation services, outreach programmes, comprehensive recovery support, and psychosocial interventions. Dame Black has called for the development of a national Commissioning Quality Standard (CQS) to outline the processes and treatments which local authorities should have available. Nonetheless, this will likely take years to develop and will not address the addiction needs women are currently facing.

Women have also reported the lack of stable accommodation and lack of resources, such as food, as causal factors. Insecure or dangerous housing can lead to addiction and abuse, as mentioned above, but also a lack of other employment opportunities and government allowances. Without a permanent address, services can face difficulties when trying to identify and support women due to their temporary and unstable housing situation. Being unable to see alternatives in employment and comprehend an alternate future, women are known to have become trapped in this dangerous lifestyle, continuing the cycle of risk. The ability of women who work in the sex industry to engage with a substance diversion programme may be limited and even more so if their other basic needs such as food and housing are not being met.

The stigma and secrecy of their lifestyle and fear of the police can hinder reports of abuse or violence, thus leaving them vulnerable and prone to poly-victimisation. Stigma in communities and services can contribute to social exclusion, isolation, and low self-worth. Research suggests this is a barrier for women as they do not access services as they feel unworthy. This is a vicious cycle as women continue to avoid support despite worsening mental health.

3.2.4.1 The Managed Approach

The Managed Approach (MA) was introduced, initially on a trial one-year basis, by the Safer Leeds Partnership in October 2014. This was in response to concerns about pre-existing on-street sex work in Holbeck. The MA had three strategic aims (Leeds City Council., 2021):

- to reduce the problems caused by onstreet prostitution to residents and businesses which currently suffer such nuisance;
- to better engage with on-street sex workers to improve their safety, health and wellbeing with a view to reducing their need to be actively involved in sex work, and;
- to reduce the prevalence of on-street sex work in the city.

As part of the strategy, a non-residential location (zone) was established where women could solicit for sex, between the hours of 8pm and 6am whilst adhering to the specific rules, without being subject to police enforcement action. The covid pandemic in March 2020 saw the suspension of the MA zone. In June 2021, having consulted with partners and despite some disagreement, Leeds City Council and the Safer Leeds Partnership announced the MA's defined zone and hours of operation would not be re-introduced following its earlier suspension. This decision was made as part of an evolving approach to addressing on street sex working following the pandemic and associated legislative changes (Leeds City Council, 2021).

Findings from the <u>Independent Review</u> (IR) (2020) by the University of Huddersfield and commissioned by Safer Leeds suggested the Managed Approach should continue but changes were needed. Alongside recommendations for changes, the IR deemed the Managed Approach to have had successes in relation to improving the health and safety of workers and

praised the street cleaning teams.

A recognised danger associated with on street sex work is the risk it imposes on women and girls. Concerns regarding numbers of kerb crawlers outside of the Managed Approach zone and during the day has been highlighted by a resident survey as part of the IR, the Listening Well Report, as well as journalistic articles and interviews (Yorkshire Live, 2020). However, this resident sample for the IR was small and not representative of Holbeck's residents. Findings from the Listening Well report details residents' experiences of men waiting outside school gates and then approaching young girls.

It is uncertain, from literature, whether the closure could have serious consequences for the health and safety of women who work in the sex industry. Women may be forced underground leading to working in unsafe locations with minimum protection and being forced to take more risks.

Since the introduction in 2014, there continued to be reports of abuse, violence, and a recorded murder in the MA zone (BBC News, 2016). It is to be acknowledged there were reports of crime and violence in Holbeck prior to the introduction of the MA, and not all reports will be related to the MA. Reports were responded to and led to increased police patrols, a dedicated police team with staffed call line and more CCTV. These resources are still in place even though the defined zone and hours of operation have not been re-introduced. The increase in reports of violence and abuse may be attributed to improved trust and relationships with police and support networks. Increased perceptions of safety and projects such as the 'Ugly Mugs' may have contributed to rising reporting numbers (Sanders & Sehmbi, 2015). Risk of violence has always existed within the sex industry; the MA and improved relationships may have only made them more visible to the community and services.

From this, it can be argued that the needs and experiences of women who work in the sex industry only become recognised when they impact the needs of others.

Community groups, such as 'The Voice of Holbeck', have been noted to separate the women in the Managed Approach zone from themselves. This was highlighted in a response by Basis Yorkshire (2021) to the Listening Well report. In the response, Basis challenged the use of the term 'community' as it discounted the women who work in the sex industry as part of the community despite many women working and living in Holbeck.

Organisations such as the <u>Joanna Project</u> and <u>Basis</u> can build rapport with women and redirect them to appropriate services whilst working doing outreach work. The closure of the MA zone may make it more difficult for organisations to support vulnerable women as they will becoming increasingly difficult to identify.

Whilst the Managed Approach has ceased, there is now a revised approach to manage on-street sex work in Leeds. The Safer Leeds Partnership have reiterated their focus on meaningful support for women who work in the sex industry and to improve their safety, health, and wellbeing (Leeds City Council, 2021).

Knowledge of the scale and extent of sex work in West Yorkshire remains limited. The visibility of women who work in the sex industry limits the ability to collect robust data. The closure of the Managed Approach may only conceal the scale further as women may become more transient and fear the police.

3.2.4.2 Case study 1: Joanna Project

The Joanna Project is a Christian organisation which seeks to support women in street sex work. The project was established as an outreach programme providing hot drinks, food, supplies to working women in Leeds. Whilst offering necessities, the team build relationships and encourage the women to access support services in the daytime. The outreach programme largely consists of volunteers, who in total contribute 175 hours per month.

The founders of the project sought to understand and recognise the fragility of the women's lives and the complexity and depth of their needs. The women they met during the night, often did not have telephone or address details, which meant providing them support was difficult. The project recognised that the women they meet require long term and consistent support and to provide this, Joanna House was established in 2015. This is a 'safe sanctuary' where women can drop in and have access to support and advice relating to housing, financial planning. Women can use shower and washing facilities whilst having a hot meal. This demonstrates the practical and emotional needs of women who work in the sex industry.

In June 2021, the Joanna Project launched a 'Step Up' group, this consists of weekly meetings and approaches recovery in creative ways. The project has found that for women leaving street work, boredom and loneliness can be a real problem, so Joanna House offers activities, company, and a sense of belonging. Their services allow women to set own goals and complete therapeutic activities whilst being surrounded by others who understand.

As like other organisations, the Joanna Project has been impacted by Covid-19. The social distancing restrictions limited the number of appointments and face to face contact. However, this has not deterred the team from supporting women through their outreach programme.

Literature provides several approaches which can be used to support women and girls in their transitions out of the sex industry. Examples of current West Yorkshire services are included. Please note, the examples are not an exhaustive list.

3.2.3.2 Table 11: Approaches used to support women and girls in transitions out of the sex industry

Approach	Brief explanation	Example
Dedicated support services	Services which are aware of and can address the differing needs of women who work in the sex industry. Services which recognise the intersectionality of women. Dedicated services can promote confidence and reciprocation.	 BASIS Yorkshire The Joanna Project Yorkshire Mesmac (Wakefield) – working with Black and Minority Ethnic and LGBT+ women. New Directions – Drug and Alcohol service
An individual case worker	Women can build relationships with caseworkers and are not required to repeat painful or distressing experiences to several individuals.	The Lotus Project – BridgeBHA Leeds SkylineAnah Project
Holistic support	Moving away from separate services, it encourages engagement as women can access support for all their needs in a single place.	BASIS YorkshireThe Lotus Project – BridgeThe Hazlehurst Centre
Outreach services	A method of gaining initial engagement and building relationships and mutual trust.	The Joanna ProjectNational Ugly MugsSWARM
Trauma informed services	Working alongside women to understand their deep rooted needs to ensure preventative recovery.	• <u>AVA Project</u>
Staged approach	Transitions out of sex work may not be linear for many - it is a stepped process. By using this understanding services can deliver timely and need specific support.	BASIS Yorkshire
Multi-agency working	A collaborative approach which ensures women are referred to appropriate services. This also prevents women from falling through cracks.	The Hazlehurst Centre

3.2.4 Human Trafficking

Human trafficking into the sex industry is an extremely common and hidden crime. Women are effectively enslaved into sex work or servitude to provide an income for organised crime groups. Women and girls are trafficked by force, fraud, coercion, or deception and this is both a national and regional reality. Literature emphasises that human trafficking does not require individuals to cross international borders and it can occur by transporting women and girls against their will between towns. cities and regions (Unseen, 2021). The Global Slavery Index has estimated there are 136,000 people in the UK who are living in modern slavery, of which the majority are assumed to be women and girls. This has been a priority for West Yorkshire Police, since 2014 they have had a dedicated team working to identify and destabilise modern slavery rings.

There are several myths in which research aims to address, firstly the assumption that the individuals being trafficked are not British. Evidence from the charity <u>Unseen</u> suggests that over a quarter enslaved in the UK are British citizens who were likely to be the most vulnerable or within minority or socially excluded groups. Vulnerability can include deprivation, addiction, or merely being young.

Women can be trafficked into sex work to pay off their debts or the debts of others. Whilst this is not heavily researched in the UK, studies in North America have found that women can be compelled into sex work due to gang involvement as a means of debt repayment or to create ties with other gangs.

Since 2019, evidence suggests there has been an increase in reports of domestic servitude within West Yorkshire. Women from Pakistan and Bangladesh are being brought into the region and exploited in domestic homes. This is forced labour and women are subjected to unbearable conditions or working hours. The prevalence of this hidden crime is a concern for the Deputy Mayor for Policing and Crime, Hope for Justice and West Yorkshire Police. To provide further information on the signs and indicators, animations have been created whilst proving details for organisations that can support victims and bring offenders to justice. These informative animations are available on YouTube but their reach and effect cannot be commented on due to only recently being made active. These resources can be useful for relatives or friends who may know victims of this hidden crime. However, many women in servitude do not have access to mobile phones and/or other devices which may limit their effect and validity. Associations have been made between domestic servitude, honour-based abuse and forced marriage. It is advisable that if further research is to be undertaken, all three of these areas are viewed together.

3.2.5 Sexual offences

The number of sexual offences recorded by the police showed a 9% decrease in the year ending March 2021 compared with March 2020 (ONS, 2021). During this period, recorded rape offences declined by 6%. Nonetheless, rape accounts for 38% of all sexual offences recorded by the police. Decline in sexual offences was also evident in West Yorkshire where reports fell by 10.6% which equates to 883 fewer offences. Nationally, the biggest decline was in the months April to June 2020 which coincides with the first national lockdown and restrictions.

The None in 3 (Ni3) research centre explains that women will not report rape because they are hesitant to label their experiences as rape. This is primarily due to their experiences not involving physical coercion or violence. Again, this highlights awareness and educational needs to ensure women and girls are properly informed.

Studies have shown a lack of maleperpetrator empathy for sexual offences, this includes prior, during and after prison (Bongiorno, 2019). Sources agree there is inadequate provision of accredited rehabilitation programmes in men's prisons and in the community. These interventions should aim to change the behaviour of male perpetrators of domestic abuse and preventing further abuse. The UK Government have acknowledged and responded to the lack of rehabilitation services for men in their 2021 'Tackling Violence Against Women and Girls Strategy'. As part of the strategy, they have pledged a sum of £11.1 million to support programmes for domestic abuse perpetrators and perpetrators of stalking. PCC's were required to bid for this funding. The programmes have not yet come into fruition, so the design, provision and effectiveness of the services are unknown. To prevent silo working, it is advisable that the chosen PCC's share best practice to ensure evidence-based programmes are implemented.

Research is clear in its opinion: the way to stop sexual violence does not relate to the victim and their behaviours, the culpability is with the perpetrator. Prevention strategies are required to go beyond changing individuals, i.e. victim blaming, to changing the system that creates and maintains sexual abuse. Findings from an Australian study with students signified the importance of understanding men's more negative attitudes than women towards women who are sexually harassed. Existing theory and research suggest men's lesser empathy for female victims is likely to be important for these attitudes. This suggests a need for early intervention, especially with children, to provide an understanding of unacceptability from an early age.

In the 12 months to September 2020, police forces in England and Wales recorded 56,152 offences of rape and 96,984 other sexual offences. Over 84% of the victims were women. Despite the volume of reports, convictions for sexual offences have fallen significantly. More specifically, rape convictions have decreased by 60% since 2016. Data from the CSEW for 2017/18 to 2019/20 highlights 84% of victims aged 16 to 59 who had experienced rape since the age of 16 the perpetrator was known. In response to this, the Home Office has pledged an additional £3.2 million to pilot further work to improve rape investigations and prosecutions – Operation Soteria. The focus of the operation is to shift the focus of investigations away from the credibility of the victim to the perpetrator. The specific details of this work is yet to be published but the pilot will likely develop the promising Project Bluestone from Avon and Somerset. This scheme encourages collaborative working from police and academics, from varying disciplines, to reassess the local response to rape with the ambition of improving victim confidence and sanction rates.

Alongside shifting focus to the perpetrators of sexual violence, more attention is needed on the influence social norms have on the prevalence of sexual assault. Literature shows how several myths about sexual assault are circulating in society. This is referred to as rape culture and social attitudes play a role in preserving it. Myths include the idea that rape only occurs at night, in quiet areas by a stranger and consent only being needed once. Women are often blamed for their rape or assault because of the idea that they are supposed to prevent putting themselves at risk or stopping events from escalating. These societal perceptions attempt to justify sexual assault and rape by trying to blame the victim or mute the prevalence. This can not only fuel the perpetrator by removing any element of remorse or prevent victims from reporting due to feeling responsible.

Sexual assault has also migrated onto online spaces. The role of social media and the internet on the exploitation of women and girls is a vast research project and warrants further investigation outside of this review. The most common form of direct online sexual abuse is revenge pornography, image based sexual abuse, whereby, images are uploaded and distributed without consent. In West Yorkshire, there were 22 prosecutions for revenge porn in 2017, leading to 19 convictions. Between April 2019 and March 2020, WYP recorded 250 reports of revenge porn, the method of distribution have been listed as 'social media', 'Facebook' and 'Twitter'. Of the reports, 80% of the victims were women. Unfortunately, the vast majority of cases faced evidential difficulties were not progressed.

In a UK based study with 13–16-yearolds, female participants described having photographs released as being embarrassing. They also suggested it led to bullying and harassment, breakdowns in relationships, depression and suicidal thoughts. An apparent theme was the double standard girls are subjected to, their behaviours and images are under greater scrutiny and judgement, than their male counterparts.

ONS figures have suggested a link between revenge pornography and domestic abuse. Conviction data for revenge pornography, shows that 83% of recorded offences between March 2018 and March 2019 (376 prosecutions) were flagged as being domestic abuse-related. (ONS, 2019). This supports previous evidence which suggests women are likely abused by someone they know, i.e. a current or previous partner. It also highlights the vulnerability of women in private and online spaces.

Despite being seen as a tool that perpetuates violence and vulnerability, social media has provided an outlet for women disclosing their sexual abuse. The #MeTooUK movement provided a stage for woman and girls to express their trauma and for some, it was the first time they had openly discussed their experiences. Women reported feeling comfortable sharing their stories as they were able to be anonymised and unjudged. However, open online forums are not necessarily safe spaces and can fuel existing rhetoric which paints woman and girls as being responsible for sexual harassment because of their purportedly provocative behaviour. In turn this additional online abuse and blame may cause further distress to victims of sexual assault.

Based on the above, it appears women feel more comfortable in disclosing their experiences in mutually respecting environments where they share commonality with others. This unbiased approach is adopted by the Hazlehurst_Centre SARC, where victims of sexual violence can access support and guidance, a medical assessment/treatment, a forensic examination, and the opportunity of

aftercare referrals for support services. The centre also operates a self-referral pathway which does not involve the police or any statutory partners, which is reassuring for some.

Sexual assault can be a taboo and uncomfortable subject, it is estimated that 15% of assaults, annually, are not reported to police (Leeds City Council, 2019). Culture, fear, lack of optimism, and unawareness can also contribute to underreporting. Until recently, the term stealthing was relatively unknown. Stealthing is non-consensual condom removal and is classified as rape under UK law. CPS guidance explains that consent may only be given conditional to the use of a condom. Figures of stealthing offences are unknown due to reports being recorded as rape. This may also explain why there appears to be limited research surrounding stealthing as it is encompassed into rape literature. North American based research often coins stealthing as a 'sexual trend' which reduces the generalisability of their findings. Stealthing can result in unexpected pregnancies and the transmission of STDs. Both of which can have health risking outcomes. Women may have to make difficult decisions regarding the unexpected pregnancy which have long term physical and emotional consequences.

In 2019, an offender was sentenced to 12 years in prison for rape after removing a condom. This was well-publicised and brought attention to stealthing. There is debate regarding the term 'stealthing' itself, some believe the term sanitises and reduces its impact when in fact, it is rape. Conversely, the term identifies offences where condoms have been removed without consent. Due to ambiguity, women and girls are largely unaware of stealthing until it happens to them or someone they know (BBC News, 2021). Evidence points to a lack of awareness as many victims do not realise their victimisation. When speaking to young people, the Schools Consent Project found that there is confusion regarding consent. Stealthing occurs when a girl/women has only consented to having sex with a condom, and removal of the condom goes against her boundaries. This can demonstrate a need to further invest in programmes and education that raises awareness of what constitutes rape and other sexual offences.

There have been calls from individuals and organisations for a reporting system which is not associated with the police or criminal justice system. From speaking with victims, evidence provides an understanding whereby victims want to come forward, but they do not want to go down the investigation and prosecution route. The thoughts of other victims, especially those in West Yorkshire, on whether this would be appropriate for their needs, would be interesting to hear.

3.2.6 Gang involvement

Gang membership has been understood as a coping mechanism for social and psychological stressors. Whilst providing financial opportunities, gang membership can offer a sense of belonging and family and protection (Archer, 2006). Although this understanding was referred to males, it is also the same for girls. Most gang research is based in the US, but it can provide some contextual understanding.

Gang involvement poses unique sexual risks of sexual violence and exploitation for women and girls when interacting or associating with gangs and risks can take several different forms. Women are more likely to perform risky behaviours with members, be forced into sex work or slavery, or be targeted by rival gangs.

Women and girls can be sexually objectified, in all stages of their membership. Women and girls can become 'sexed in' which involves having sex with several members as an initiation (Quinn, 2016). This is not necessarily the only time girls are expected to have sex with members, there are continual internal

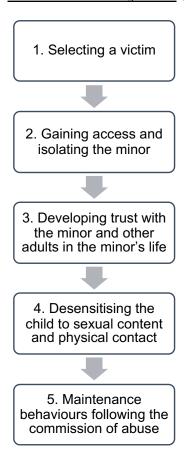
threats. Female members can be required to have sex with other members on demand and in some instances, they are coerced into having sex with non-members for the benefit of the gang. This can cause significant trauma and evidence suggests that women and girls have an internalised sex related stigma. This was also supported by members in North America who did not refer to their experiences of being sexed in and subsequent assaults as rape. This is a clear need that requires addressing, girls need to be informed what sexual assault is and reassure victims that they should not feel stigma, guilt, shame, and blame.

As a result of their membership, girls can be tricked into sex work to meet the needs of the gang, such as paying off drug debts. The risks of sex work are detailed above alongside the needs of the women and girls involved. However, these risks are compounded with the risks of being involved or associated with gangs, however, personal experiences are hard to research due to unlikeliness of self-admission from girls.

3.2.7 Child sexual exploitation (CSE)

Child sexual exploitation has global prevalence. Whilst often associated with poorer countries, it is an active and hidden crime in the UK. There has been an increase of 290% in child sexual abuse offences since 2013. Recent ONS reports (May 2021) show that over 89,000 child sexual abuse offences were recorded by police in the year ending March 2021. Young boys and girls can be objectified, groomed, and exploited for the sexual gratification of others. Recruitment can take many forms, but they involve young, innocent children. These offences can not only enact physical scars but also deeprooted mental ones, of which findings suggest these are the most difficult to recover from. CSE can take many forms, not all of which are sexually motivated, children can be manipulated to increase the financial stability or status of the perpetrator. This aspect appears to be less researched but warrants further attention. Using Bradford as an example, sexual exploitation is the most prevalent exploitation risk category for children, this is closely followed by those at risk of criminal exploitation. Over 50% of children with an 'Exploitation marker' are aged between 13 and 15. Many of these individuals are groomed by older perpetrators. The Sexual Grooming Model (SGM) is a recently validated model of sexual grooming and is comprised on 5 stages. Whilst being a North American model, it can be used in a UK context to understand the process of CSE. At each stage there will be vulnerabilities which can be addressed to reduce harm to at risk individuals. By understanding how each stage is approached by perpetrators, ie gaining access to children through social media, the more safeguarding processes can be in place.

3.2.7.1 Figure 4: An adapted version of The Sexual Grooming Model (SGM) (Jeglic, 2021)



The following paragraphs detail examples of child exploitation with England from CPS records and West Yorkshire Police. This demonstrates the pervasiveness of this crime and violence, primarily against young girls.

- 1. In February 2020, seven individuals from Huddersfield were convicted of historic sexual exploitation of two young victims between 1995 and 2007. Both victims were young girls who were used sexually by multiple men without any regard for their consent. These children were often subdued and plied with substances, primarily alcohol and drugs, which reduced their ability to make informed choices and/or escape. These childhood traumas destroyed the lives of these young girls who have had to live for over a decade with their abuse being a secret.
- 2. West Yorkshire Police have shown commitment to safeguarding and protecting children. As part of a CSE investigation, known as <u>Operation Teeford</u>, 40 individuals (38 men and 2 women) were arrested in connection to alleged abuse against 9 girls predominantly in the Dewsbury and Batley areas between 1989 and 1999 (BBC News, 2021). WYP are encouraging victims, regardless of when the abuse took place, to come forward.
- 3. In July 2021, a 39-year-old man was sentenced to 30 years in prison for charges of rape, indecent assault, and sexual activity with a child, with offences dating back to the early 2000s. The most recent offence was committed, prior to his arrest, in February 2020 where reports state he had sex with a 15-year-old girl. During the initial investigation, 3 more victims were identified which led to further charges being brought against the offender.

4. Social media has been a tool to manipulate children. Offenders have been known to use fake profiles posing as teenage boys to gain the trust of young girls. Their intention is to persuade girls to send indecent photos and videos of themselves. In Worcester, an offender did this to countless girls, aged 12 and 13, across England and threatened to expose them if they did not cooperate and provide more. He subsequently jailed for 6 years and 8 months in November 2020.

Child sexual exploitation is a crime that can be committed by anyone, even those in trusted positions.

- 5. A mental health care worker from
 Torquay was sentenced in September
 2020 for 11 years' imprisonment for
 21 counts of abuse against three highly
 vulnerable girls, each with severe mental
 health concerns in his care. The girls
 were 16 and 17 years old at the time
 of the exploitation. Not only does this
 demonstrate the vulnerability of those
 with mental health needs.
- 6. A Portsmouth PE teacher was convicted for abusing female pupils aged 13 to 16 between 2006 2012. The offender actively pursued girls who he found attractive but also had known vulnerabilities. During the period that he groomed and exploited the girls, he was promoted from a PE teacher to the safeguarding lead and then onto becoming Deputy Head.

Whilst completing this review, the Bradford Partnership published a thematic review into CSE in the district. The review highlighted some interesting points which are explained in case study 2.

3.2.7.2 Case study 2: The Bradford Partnership thematic review into CSE

- The partnership take accountability for the fact that victims in the review were failed by the system which was supposed to protect them, this failure created vulnerabilities to further abuse.
- The review gives 5 examples of victims: Anna, Fiona, Samara, Ruby and Ben.
- 'Anna' perpetuates the life course perspective whereby a young girl becomes a victim to exploitation despite being known to services and falls pregnant whilst still being a looked after child.
- 'Fiona' demonstrates how young women and girls are not believed when they report abuse or exploitation despite showing signs of abuse, previous trauma and having a child whilst in care which further compounded her trauma.
- 'Samara' shows that effective police and service response can enact some positive change, but this was tainted by the delays in responding to Samara and victim blaming narratives. The language used to describe Samara inferred she was responsible for putting herself at risk.
- 'Ruby' reflects the inability of services to address the root causes of behaviour and risk. Children who are perceived as difficult and display some behavioural problems appear to be moved between placements rather than confronting the confounding problems.
- 'Ben' demonstrates the potentially gender differences between CSE of boys and girls. Ben also has a disability and several vulnerabilities (school exclusion, substance misuse) but these were not considered when supporting Ben.
- Of the examples, 2 female victims were excluded from school on several occasions. One individual was later diagnosed with ADHD. This further highlights the need of school exclusion data for females and further analysis of neurodiversity research in girls.

Literature suggests a strong relationship between CSE and adverse mental health consequences for many victims. This was presented in the Bradford Thematic CSE review as all five of the victims had experience of domestic abuse and/or parental mental health.

Multi agency partners whilst having good intentions and starting positively do not work in synergy which can explain why good practice is not shared and why there are gaps in knowledge and provision. For example, a significant gap in research relates to the outcomes for

children, as well as their children, who become pregnant because of CSE. This highlights the requirement for a life course approach when reviewing VAWG as the cycle of abuse and disadvantage can be perpetuated. Additional understanding in this area is needed to ensure that the needs of these individuals are appropriately responded to. Drugs and alcohol are primary tools used as part of the grooming and control of CSE victims. Literature calls for further recognition of this so responses can be developed whilst services and professionals can understand and respond quickly to the signs.

Below are 2 services which are available to both children and their families. These services apply a child-centred, holistic approach to CSE:

- Embrace Child Victims of Crime is a small national charity that provides emotional and practical support to children and young people harmed by crime. Following a grant from the Mayor in July 2021, a service for young people, under the age of 18, who have been victims of sexual or domestic abuse in West Yorkshire can be offered remote counselling to heal their trauma. Support is usually delivered weekly for an average of 6 sessions remotely. There is no clear indication what happens after the six sessions, i.e. is there a follow up service meaning the temporary nature of this intervention may limit its effectiveness but this will require evaluation once the service has begun.
- PACE (Parents Against Child Exploitation) has recently produced a comprehensive piece detailing how parents can support their children during the prosecution process. The report provides details about terminology and court processes whilst offering advice about explaining the roles of prosecutors/judges. Whilst this is a detailed report which will likely positively service parents. It does raise the question, who is responsible for informing vulnerable children of this information? As demonstrated in literature, many CSE victims, whilst not being in care, do not have the support of their parents or families due to fractured relationships, parental neglect, or substance use. A lack of awareness may influence the court outcome, especially if a child is not prepared and becomes overwhelmed.

There is a significant gap in literature around the CSE of rural children. Literature tends to narrate the experiences of urban children but the experiences and needs of rural populations is relatively unknown. As West Yorkshire has rural localities, further research would be beneficial.

3.2.8 Female Genital Mutilation (FGM)

FGM has been associated with complications to a woman's reproductive life cycle, from pre-menarche to post-menopausal and is classified as a form of child abuse. This is due to the timing FGM is generally performed, girls tend to be subject to this procedure between 5 and 9 years old (Malik, 2018). Women who have experienced FGM can suffer from difficulties in childbirth which can put both mother and child at risk.

In West Yorkshire, there were 11 recorded crimes relating to FGM between March 2004 and December 2015. Of the 11 reports; 6 girls were under the age of 1 and the oldest girl was 8 years old. The age of the girl at the time of the procedure was not documented (Malik, 2018). This demonstrates there is a need to protect these young girls. However, police forces are not collecting data on FGM or responding to requests for information in a consistent fashion. For example, FGM has been reported as reported as violence with injury, thus underestimating the number of girls subjected to this procedure. Therefore, specific needs of these victims are unknown.

<u>CPS records</u> show that in 2019 a mother was sentenced to 11 years in prison after performing FGM on her 3 year old daughter. This is the only conviction for FGM in England and Wales.

FGM is widely referred to a sub-African culture procedure, however, research explains is also rooted in South Asian culture too. As shown in Table 4, West Yorkshire has a diverse population which includes both African and Asian ethnicities. To ensure FGM is not performed, there is a need to inform families of the illegal nature of this procedure and the damaging consequences it may have. Health and social care professionals and teachers are required to report instances of FGM, however, at this point the procedure will have been completed therefore preventative work is required.

3.2.9 Forced Marriage (FM)

Forced marriage is a marriage without free consent of one or both parties. FMs are illegal, but even so, they still occur in West Yorkshire. There are clear differences between forced marriage and arranged marriage, for the latter, the decision is made by the bride and groom without duress. In most cases of FM, girls are required to leave their family to live with their husband and his family. Literature refers to this as stripping away a girl's emotional and social support, which can contribute to heightened vulnerability (Ganeshpanchan, 2021).

The Forced Marriage Unit (FMU) is a joint Home Office and Foreign & Commonwealth Office initiative and gave advice or support in 1,355 cases related to a possible forced marriage in 2019. Of those cases, 80% (1,080 cases) were female, 15% (205) involved victims under the age of 15, 63% (848) were under 25 years old, and 10% (137) involved victims with a learning difficulty. This demonstrates the vulnerability of those under 25 and individuals with disabilities. However, forced marriage is a hidden crime so these figures are likely to be underestimates. Reporting of FMs is largely done by professionals (teachers, social workers, health workers) and the lack of selfreporting is worrisome.

Yorkshire and the Humber were associated with 142 cases of forced marriage in 2019. Of the previously mentioned 1,355 cases, Pakistan was regularly the focus country with the largest number of forced marriage cases reported to the FMU. Of the cases relating to Pakistan, 13% were from Yorkshire and Humber (75 cases) (Home Office, 2020). South Asian is commonly associated with forced marriages but it is to be noted, forced marriage is not a specific country or cultural practice. In 2019, the FMU supported 22 cases linked to Romania, victims in these cases were significantly younger and 41% of the cases came from the Yorkshire & the Humber region.

The University of Central Lancashire conducted research (Begum, 2020) with ethnic minority women, predominantly of Pakistani, Bangladeshi, and Arab heritage, to explore their experiences cultural practices and honour-based abuse. Research suggested that the following five reasons for not seeking support when faced with forced marriage and honour-based abuse:

1. Fear

Resulting from family pressure and/ or threats of violence (HBA) as well as fear of external organisations. Fear of external support can be deliberate deception from the abuser. Women were commonly told that services would take their children away.

2. Racism

If a woman and her children decide to leave the marriage, services may be inclined to relocate them to an area outside the community for their safety. However, women who have done this have been racially abused, both physically and verbally.

3. Language

Some women in forced marriages are not British citizens and often do not speak fluent English. Consequently, they are unable to access the necessary services. The process of an interpreter is largely done over the phone meaning women face continual barriers.

4. Immigration status

Further to the above, some women are unable to access public funds due to not being a citizen, as a result they are unable to apply for support, such as housing and other allowances. Thus, leaving them dependant on charities or on their husband and/or abusers.

5. Agency funding

There are charities to support women in need, however the financial and resource limitations of charities is clear. Due to demand, charities will often have to make tough decisions which results in unmet needs of women.

For those forced into marriage, virginity tests on their wedding night may occur. This is to establish whether a woman is innocent with her hymen intact. To 'successfully pass' she will be required to bleed during the first marital sex. It has been documented that if girls do not bleed or refuse, they can be aggressively raped to draw blood. If blood cannot be drawn, the girl may be victim to severe domestic abuse, honour-based violence, due to bringing shame on the family. This violence can include her husband, in laws and her own family (Ganeshpanchan, 2021). On the topic of virginity testing, the UK Government have outlined plans to criminalise this, in all forms (clinical, social) as it is a clear violence of an individual's human rights.

3.2.10 Honour Based Abuse (HBA)

HBA can also be known as Honour Based Violence but, in this review, it will be referred to as HBA as violence is not always involved but the use of this term will also include violent offences. HBA can consist of murder, unexplained death, rape, and imprisonment but it can also include psychological abuse, including coercion, threats, and isolation. HBA is a gendered crime as victims are most likely to be girls or young women.

Whilst sharing similarities with domestic abuse, HBA is performed and condoned by multiple family members to perceived disrespect of cultural and religious beliefs and/or honour. This abuse is to punish the individual and prevent contagion within the family. Reasons for which HBA can occur include, unintended pregnancy, refusal of arranged marriage and westernisation. HBA is associated with cultures from South Asian, however, HBA can occur in all cultures, more so those with traditionalist and conservative views.

Victims are described as being socially conditioned to follow strict rules, by doing so they are stripped of autonomy and agency (Begum, 2020). Victims are seen as responsible for their own victimisation; however, literature suggests that girls do not know they are victims. This tends to be because of social conditioning, normalisation of traditionalist behaviours and violence/abuse in the family unit. This is a clear education and communication gap; vulnerable girls should be aware of the signs and services so that they can seek appropriate support. This need is further supported by a systematic review of 21 studies, by Afrouz (2018), based on women from communities in which family and honour abuse is normalised. The study found women were less likely to seek external support. Knowledge about financial and housing support is particularly salient as dependency is a significant factor

for not seeking help. This unawareness could be an intentional barrier placed by the family.

Britain is the 'honour' killing capital of Europe, with an estimated 12 murders each year (Dyer 2015). However, the extent to which HBA occurs is difficult to estimate due to its domestic nature. Research tends to focus on honour-based killings whereas there is a need for research on non-lethal honour-based violence.

The perpetrator role of mothers in HBV will be discussed in the next section.

3.2.11 Cuckooing

Cuckooing has been referred to as a nuanced and evolving form of victimisation. Homes of vulnerable people are used as bases to support the closed market drug industry, also known as county lines. As outlined by <a href="https://www.wyp.in.com/wyp.in/wyp

- Suffering from drug and/or alcohol addiction
- Struggling financially
- The elderly
- Experiencing mental health issues
- Individuals with learning disabilities

This predation exploits victims both physically and psychologically, as many victims can become isolated and imprisoned in their homes. Victims have reported moving out of their own homes to sleep on the streets in attempts to escape their invaded home.

Evidence suggests that victims do not come forward because of either a distrust of the police, fear of criminal justice repercussions or intimidation from the perpetrators. A <u>recent UK study (2020)</u> provided a typology for victimisation:

1. Parasitic Nest invading

Perpetrators enter a home under false pretences (i.e. a trades company) and can befriend the owner leaving them unsuspecting. It is understood this method requires a degree of organisation and deviance, as a rouse is needed. Reports have shown that women can pose as desperate mothers requiring accommodation to extract sympathy from elderly women. This method is intended for the elderly and individuals who have learning difficulties or poor mental health. Once residing in the home, the victims can suffer violence, sexual assault and isolation.

2. Quasi-cuckooing

Perpetrators are cautiously invited into homes on the premise of 'reciprocal renting'. This tends to occur when the home belongs to an addict. The vulnerabilities and social exclusion of addicts are exploited in this method as the victim is often paid rent in a supply of drugs. A female victim explained it was initially better than having to go out and steal to fund her addiction. However, victims can become uncomfortable with the perpetrators being in their home but when asked to leave, perpetrators can become violent and threatening. Literature states how victims have been exposed to guns and knives to intimate them. Due to the constant supply of drugs, some victims can become indebted meaning they can be forced labour for the perpetrators, whether this is drug running or sex work.

3. Coupling

County Lines dealers may use sexual relationships with female residents to acquire a home. It is suggested that the relationship will keep the female compliant. This demonstrates the potential impacts of grooming and how grooming does not always involve

children. Some women involved in relationships with dealers is strategic, whereby, they allow their home to be used by their partner for drugs and to avoid theft and sex work.

4. 'Local cuckooing' beyond county lines

Despite being transient, county lines dealings can often have localised bases. These act as a layer of protection to the enterprise. This form of victimisation can include any of the above-mentioned forms.

The typology created by Spicer (2020) warrants further investigation using West Yorkshire as a case study. Additional types could also be added. Overall, literature suggests there is propensity for violence against victims of cuckooing. Victims are likely to be those most vulnerable in society. There is clear evidence which points to an overlap between cuckooing, addiction and sex work. However, further research should be conducted into the involvement of elderly residents.

3.2.12 Summary

- There is a need for support provision for women with diverse needs. West Yorkshire is a diverse region therefore services require more cultural sensitivity, responsiveness to diversity and cultural competency.
- Victims are often unaware of available support services which limits utilisation.
 Further education and awareness of services is required. For women and girls who are isolated by their families or experiencing domestic abuse, awareness needs to come from employment, schools, street posters.

3.3. Perpetrators

3.3.1 Women in prison

In July 2021, the Prison Reform Trust (PRT) reported that 72% of women who entered prison under sentence in 2020 have committed a non-violent offence and 70% of prison sentences given to women were for less than 12 months. More women serve a sentence for theft than for violence against the person, robbery, sexual offences, drugs, and motoring offences combined (PRT, 2019). The reasons for theft are unknown but they would provide useful insight and explanation. Reports have concluded that prison is rarely an appropriate or proportionate response for women involved in the criminal justice system. Yet the government have plans to build an additional 500 women's prison places which actively contributes to the problems attached with women being in prison unnecessarily. Similarly, a PRT analysis report found that the government had completed less than half of their commitments outlined in the female offender strategy. Whilst VAWG appears to be a priority, supporting those in the CJS does not appear to have the same emphasis, despite many women in prison being victims of VAWG.

In 2006, Baroness Jean Corston reviewed the UK female prison estate. The review showed that women in prison were disadvantaged either through poverty, mental illness, historic abuse, addiction, or ill health. Despite the review now being 15 years old, a 2018 HMPPS report found that women in prison appear to be still facing the same disadvantages and share common criminogenic needs such as substance misuse, education, experience of abuse/ trauma, employment and accommodation. The report also highlighted the requirement for research and service provision to acknowledge that some needs may be more influential and act as catalysts, therefore, taking a face value approach will not suffice.

The HM Chief Inspector of Prisons Annual Report (July 2021) demonstrates the difficulties vulnerable woman in prison faced because of covid restrictions. Over 71% women in prison report they have mental health issues compared with just under half of men (47%). The withdrawal of several external services in response to covid19, including education, rehabilitation, specialist health services and specialist support may have exacerbated these mental health needs. It has been suggested the restrictions imposed did not consider the specific needs of women in prison. Women experienced reduced working hours and limited time outside of their cells (ranging from 30 to 90 minutes). Coupled with increased food packages due to eating in cells, women have reported lower self-esteem due to weight gain which also increase their risk of several physical comorbidities. During the restrictions, the level of self-harm in women increased and remained consistently high. In comparison, levels in male prisons reduced and stayed consistent. Increased isolation, removal of support (both professionally and peer) has been reported as a contributary factors to the rise in self harm.

In 2019 the MoJ released a review which reported on the 99 women from HMP New Hall and HMP Foston Hall who completed the Choices, Actions, Relationships and Emotions (CARE) programme between April 2011 and March 2015. The programme is an accredited custodial intervention for participants who have a high risk of reconviction, have experience of violence and complex needs. The CARE programme aims to give women the skills to forge a pro-social identity whilst managing their emotions and learning to problem solve and goal set. Whilst this programme promises short term outcomes, the long term effects have not been evaluated which raises doubt of its effectiveness.

Nonetheless, both participants are staff had positive feedback and the training for assertiveness, safe space and mindfulness were seen as most valuable. Whilst completing the goal setting exercise, many women described their goals as being more assertive, having greater confidence, getting out of prison and getting a job, and remaining drug free. These can also be inferred as the needs of women and the support the require both in and out of prison. Further trials of the programme would be recommended at other women's prisons in England, these trials would also need to have a longitudinal design.

In 2020, Safe Homes for Women Leaving Prison initiative stated over 60% of women released from prison did not have secure accommodation. The 2020 HMI Probation report found women were not able to discuss their resettlement needs, which undermined effective release planning. Many women in prison experience multiple vulnerabilities and insecure housing upon their release can only exacerbate these. Ensuring prisoners have appropriate accommodation is a priority concern for the national social justice charity, NARCO, who use the #CellStreetRepeat to raise awareness and enact change. It is well versed in literature that secure housing is a criterion for successful rehabilitation. Therefore, with no stable place to reside, women can face difficulties in regaining primary care of their children, securing employment, and maintaining sobriety. Therefore a woman's risk of reoffending increases. Research suggests that women are far more likely to stay in dangerous accommodation rather than sleeping on the streets. By releasing women without secure accommodation, women are not receiving adequate opportunities to make better choices. NARCO have renewed their call to government and requested that the continuation and development of initiative used during the pandemic to provide emergency accommodation to prison leavers.

There is little published information about the ethnicity of women and girls in the CJS. Shortfalls in research includes: the ethnicity of women received into prison over a 12 month period, the ethnicity of women recalled to prison after release and those on community orders. What is known is there is a disproportionate number of Black and Minority Ethnic women in prison (PRT, 2017). Despite making up only 11.9% of the women's population in England and Wales, it is estimated 18% of the women in prison are from minority backgrounds. However, the needs of these women are wholly unknown.

3.3.1.2 Case study 3: Working Chance - employability support for women with convictions

The CIPD have reported that people with convictions are more reliable and stay longer in their jobs than anyone else. Working Chance is the UK's only recruitment consultancy for women leaving the criminal justice and care systems.

In 2020, Working Chance:

- delivered 72 workshops relating to CV writing, confidence building and disclosing conviction training;
- worked with 177 new women starting their journey and;
- completed 343 hours of 1:1 specialised employability support.

The national charity offers tailored employability support for women in gaining purposeful employment whilst challenging stereotypes from employers. By breaking down barriers, previously convicted women can be successful and valued staff members in public and private sector companies. The charity also offers support and guidance to employers to ensure women are treated equitably and can thrive. Whilst securing employment for women, the charity is collectively working to unpick social norms, whereby convicted women are 'othered'.

Working Chance recognises that employment is more than just generating an income, it is a means of establishing a bright future and the opportunity to contribute to society. As known, women in prison are likely to have unmet mental health needs such as low self-esteem and low self-worth. Working Chance supports women by gradually building their confidence for them to unlock their potential. By building women's assurance, this could radiate to her other social networks, including her children, and potentially breaking the victimisation and deprivation cycles.

3.3.2 Involvement in gangs

Women and girls who commit violence challenges gender framing which expects boys to be violent and girls to be passive victims. To assume women cannot be anything other than victims is naïve, however, in depth research in this field is widely unknown. Existing research does suggest that girls who join gangs were likely victims themselves before becoming perpetrators (Centre for Social Justice, 2018). In many instances, the girls were victims of violence or sexual exploitation often before the age of 16.

CPS has drawn up guidance <u>Decision-making in 'gang' related offences</u>, to give lawyers practical advice to consider if there is evidence women have been forced or groomed into committing crime by gangs.

As mentioned previously, girls join gangs to find protection from other forms of violence in their lives or a sense of belonging. This can mean they feel obliged to be loyal and partake in activities. Research has shown that girls lure members of other gangs, including girls, to a location to be assaulted, both physically and sexually. Girls in gangs are also more likely to carry a concealed weapon, be in a physical altercation or attack with a weapon to cause serious injury.

The knowledge about female perpetration in violence resulting from gang membership is limited due to the smaller proportion of women in gangs compared to men. Consequently, the extent of knowledge around the needs of these woman and girls is vague.

In August 2019, three men who wanted to establish a class A drug market in Bridgend were convicted at Cardiff Crown Court of conspiracy to supply drugs and being concerned in supplying drugs (CPS, 2019). These men used 2 vulnerable women to drug run to mitigate their own risk. This demonstrates that women and girls can become involved in organised crime through association with known members. Whether these individuals had a choice in their involvement is not known but some gang literature would infer they were active participants. Others would argue the women were coerced and most likely victims who were fearful. Research suggests that girls can easily become an indebted workforce and are used as mules because of their less suspecting nature

which makes drug transportation easier. Whilst not convicted, both women were issued with cautions due to the amount and nature of the drugs they transported.

North American studies have considerable findings about the involvement of women in gangs. Findings suggests women and girls will often serve as lookouts, known as falcons, who report on the movement of people, rival gang members and police. They are used in this position as they tend to be overlooked by the police. Whilst they are not directly inflicting violence or committing crimes, they are heavily involved in the orchestration and planning of crime.

South American based research focuses heavily on the involvement of women in the sale and trafficking of drugs. In cartels, women can often assume positions of power and can be one of the few decision makers (<u>Insight</u>, 2021). Women are involved through the roles identified in table 10.

3.3.2.1 Table 12: The different roles women play in gang criminality

Role	Explanation		
Drug trafficker	Women transporting drugs themselves. In a UK context, this can include county lines.		
Human trafficking	Women can play a central role in assisting organised crime growing transporting women in or between countries through gaining their trust and/or speaking their language.		
Chemists	Women can have an often oversee the production of drugs. Women are referred to as being precise and meticulous.		
Recruiter	Similar to human trafficking, women can play a crucial role in recruiting other women to gangs.		
'Trophy wives'	This was referred to in a South American context but women can provide cover for money laundering and act as a form of protection.		
Logistical coordination and finance management	Women have been known to manage the internal business side of drug dealing and organised crime. This can include tracking earnings and overseeing the logistics of shipments.		
Bystanders	Despite not taking active roles, women can become complicit by observing/or being aware of violence towards others and not reporting this.		

3.3.3 Girls and young women in the Criminal Justice System (CJS)

Girls from racial and ethnic minorities and those who have been in care are overrepresented in the CJS. However, there is a significant research gap here which makes it difficult to expand and explain where this is such overrepresentation. What is known, is that intersectional inequalities and previous trauma are common precursors for many young women in the CJS. This has been referred to as double disadvantage. Further research should aim to explore this gap in knowledge.

Reports show that girls who encounter the CJS at 18 or younger are more likely to have experienced violence, abuse and exploitation, have been in care, faced poor mental health and experienced early parenthood than boys (Agenda, 2021). These findings are supported by the Edinburgh Study of Youth Transitions and Crime (2010) which found girls involvement in violence was usually predicted by previous adversities. These are key vulnerabilities that can become more complex and entrenched if not addressed from the outset. It is clear from literature there is a significant gap in service provision to prevent these girls from being caught in crisis and the revolving door of crime.

There is a consensus in research that girls who turn 18 whilst in the CJS fall through the gaps (Agenda, 2021). It has been referred to as facing a cliff edge in support. This is the result of facing harsher treatment in adult services than in the youth justice system. Due to overwhelming demands and volumes, girls experience stark changes to mental health support, reduced safeguarding obligations, and limited and potentially unsafe accommodation options. Evidence suggests that girls, once they turn 18, become numbers and data meaning the

person-centred approach they are used to, is removed.

More resources need allocating to youth and young people in the CJS, it has become apparent that it is easier to fund diversion services for children. As with most temporary projects, short term funding limits the effectiveness of interventions as they have been unable embed in a local area and make positive change. This can mirror the experiences of nearly 18-year-olds, they begin to engage with a service and make progress but are then moved to the adult service once they are 18. This halts any development and does not allow for long term behaviour or attitude change. Young people suffer as limited resources can lead to sub-optimal support which can lead them to re-offending and potential crime escalation. It is advisable that the CJS do not adopt a gender-neutral approach to youth justice as this can risk neglecting the needs and pervious experiences of girls. Whilst this is not to underestimate the trauma endured by boys in the CJS, Literature denotes the CJS as being designed for the male majority meaning gender neutral processes may further marginalise girls. Instead, it is recommended that trauma and gender informed process such be utilised by the CJS.

Currently, once an individual turns 18, they become the responsibility of the adult system and they appear to get little consideration. A key point raised is that the current youth system is missing an opportunity to extend support to these vulnerable girls and meet their needs. Multiple sources have suggested that transitions should be based on individuals needs rather than age. The Transition to Adulthood (T2A) initiative presents the case that developmental maturity is a better guide than age when deciding on the best response to offending by young adults. Flexible approaches whereby girls are retained by youth service provisions for a short time after they turn 18 are said to

have positive effects on both the life and health outcomes of the girl.

Recent evidence suggests that girls who commit offences but turn 18 whilst awaiting court hearings face more punitive sentences. Court closures and delays resulting from covid19 may leave many girls in this vulnerable position. Harsher sentences can have lasting impacts on employment opportunities, social relationships and stigma.

Suggestions for improved service delivery and positive engagement with girls:

- Police-assisted diversion schemes can be used more effectively to meet the needs of young adults
- Services and support workers require greater recognition of backgrounds of vulnerability, ie early trauma, experiences in care, prior victimisation, ethnicity.
- Trauma-informed approaches which aim to address the root causes for criminality to prevent girls being trapped in the revolving door.
- The voices and experiences of young Black and Minority ethnic women and girls need to be listened to. There is clear disproportionality which needs addressing. Using their experiences and feedback, more specialist and tailored support can be delivered to support them.

3.3.4 Case study 4: North Yorkshire and the City of York – Support and Diversionary Scheme

The scheme aims to reduce the number of women and young adult first-time entrants, reduce the reoffending rates of 18–25-year-old men and women of all ages and prevent offending by addressing the needs of these groups.

The services include:

- voluntary pre-arrest support for young women and men at risk of entering the criminal justice system;
- support to those who are offered a community resolution or conditional caution at the point of arrest.

Referrals are accepted from the individual themselves, or a range of services, including North Yorkshire Police, Multiagency Tasking and Coordination protocol, Liaison & Diversion and the Community Safety Hubs. Individuals can be referred at any point even if they have not accessed any other support since encountering the police.

Once referred, individuals are allocated a single point of contact. This keyworker then works with the individual to establish trust and rapport whistling offering consistent, accurate and timely support. The keyworker is then accountable to for making onward referrals and ensuring engagement with other appropriate support services when needed.

The scheme adopts a gender-informed approach and uses one-to-one and peer-support alongside groupwork to address substance use, mental health problems and family contact. Through group work, individuals are provided with skills to build and maintain a pro-social identity and social capital. This could include support with accommodation, their finances or entering education, employment or training.

3.3.5 Honour Based Abuse

Most domestic abuse reports involve a male perpetrator, however, in cases of HBA there is a sizable involvement from women as both co-conspirators and sole perpetrators. This involvement can be from mothers, sisters, aunties, and mother in laws. However, due to the covertness of this abuse, identifying the perpetrators is extremely difficult.

Both parents were imprisoned for 25 years in 2012 for the murder of Shafilea Ahmed. Shafilea who was born in Bradford was murdered in September 2003 in an honour killing. In an attempt to stop the abuse Shafilea drank bleach but her family reported this as accidental. It was Shafilea's mother who is reported to have ordered the killing (The Guardian, 2012)

In addition to physical violence, such as punching in the stomach to induce abortion and the use of restraints, women have been reported of conducting intrusive surveillance, using dark threats and emotional blackmail (Refuge, 2017). The role of female perpetrators is widely underestimated and under recorded, more so because police have been known to disregard their involvement due to social perceptions of mothers. Literature suggests that to protect victims, services including the police, cannot take situations at face value as it is more than plausible for women to be violent perpetrators.

Literature refers to this as unnatural abhorrence behaviour which contradicts the protective role of mothers (Aplin, 2017). Women can also be involved in sustaining and prolonging abuse as victims may possess an unwavering trust in mothers, wherein they believe their mother will stop the abuse. This presents some women being active agents in the cycle of abuse.

Nonetheless, the involvement of women in HBA can has been linked to the perpetrator being a victim themselves. It has been stated that women may be coerced into violence

by men, rather than acting out of individual agency due to fear of destabilising their own vulnerable position. This may not be the reason in which all women commit HBA but it may explain the actions of some. Women may deflect violence onto others, such as their children, to reduce the abuse they receive. However, there is little exploration of this due to potential inclination and/or guilt.

This is an area of study that warrants further attention.

3.3.6 Domestic abuse

Through academic debate, over the past decade there has been greater awareness of women committing domestic abuse, primarily against their husbands. Whilst women can physically abuse their partner, it has been inferred that women are more likely to use less <u>aggressive forms of abuse</u>. This can be in the form of verbal attacks, stalking and controlling behaviours. It has been found that women are more likely than men to perpetrate domestic abuse because of anger or jealousy towards their partner (Harned, 2001).

A theme which was not widely discussed is how women commit domestic abuse towards other women. Social norms inhibit men hitting women, however, these norms are not extended to women assaulting other women. Social norms have influenced research and has resulted in a predominately heteronormative perspective. This has resulted in limited data around the intersectionality of the LGBTQIA+ community and violence. It is known that women contribute to a proportion of domestic abuse reports, but there is clear inference that this abuse is directed towards a male. Women can and do commit DA against other women and it is the invisibility of this issue which can leave women vulnerable. Women have explained that they did not perceive intimate partner violence to be plausible in same gender relationships

and have consequently stayed in abusive households. It has been argued in literature that female perpetrated abuse can be more traumatic due to it being unexpected. Awareness of this is commonly found in grey literature such as support websites and online brochures. Research from York St John's University (2020) argues that research into female perpetration is highly skewed and unrepresentative. This has led to the creation of highly political dialogues that do not appear to be in the best interests of understanding the factors that cause domestic abuse to occur. Consequently, service provision is also skewed as support tends to be for male perpetrated abuse. Further research is needed into female perpetrators in general but their involvement in domestic abuse, especially towards other women, would provide further insight and protect women from harm.

The Bradford Partnership Thematic review into CSE (July 2021) briefly mentioned that mothers can play in committing domestic abuse against their children. This was in reference to the example 'Ben' whereby the individual was subjected to physical abuse from both parents. However, the review focused primarily on the abuse inflicted by the father and did not provide details of the mother's abuse. This can be seen as muting the abuse committed by Ben's mother and contributes to the hidden nature of female perpetrated domestic abuse.

3.3.7 Female sexual offenders

Without question, research shows most sexual abuse is male perpetrated, however, sexual abuse committed by women is underreported. This section aims to bring awareness to female sexual offenders, as this topic is commonly shied away from. Whilst data specific to West Yorkshire is unavailable, the findings of international studies can aid understanding.

Social norms feed into narratives about victims and perpetrators. Hypermasculinity reinforces unhealthy ideals which omit men as victims and instead promotes domination and aggression. These ideals tend to prevent men from reporting sexual abuse but could encourage men to commit sexual abuse as a means of establishing their position. Women who commit sexual offences may have their involvement viewed sympathetically. Female offenders can be framed victim-like, whereby they were engaging in misguided attempts at intimacy, or they are experience mental ill health. Whilst this could be true for some offenders each case should be looked at independently.

In a retrospective US study, 40% of male respondents who were sexually abused in childhood reported that their abuser was female, and 20.8% of which reported that the woman had acted alone. The same study identified that 6% of female respondents were sexually abused by a woman. This demonstrates the prevalence of female sexual offending. The factors influencing these offences have been outlined in more recent findings, which suggest that sexual gratification, a desire for intimacy, revenge or humiliation are associated with female sexual offending. A significant proportion of research is Canadian, but conclusions made in a 2017 study suggests that female sexual offenders are more common among juvenile offenders than adult offenders.

US based research from 2008 has suggested female sexual perpetrators have often been previously sexually victimised themselves or have severe family trauma. Similarly, theories developed to explain the problem of male perpetrators may also apply to women, this includes childhood trauma and powerlessness (Harris, 2012). Unlike male perpetrators, female sexual offenders are less likely to sexually reoffend and have a significantly low recidivism rate.

In a North American study of women in prison, female victims are more than three times as likely to experience sexual abuse by other women inmates than by male staff. In juvenile corrections facilities, female staff are also a much more significant threat than male staff; more than nine in ten juveniles who reported staff sexual victimization were abused by a woman.

Similar to female perpetrated domestic abuse, sexual offence support is designed to support women and girls from male perpetrated attacks. As a result, victims of sexual assault committed by women can be met with a degree of speculation and services may not be fully equipped to support women and girls with their unique needs.

There is a lack of empirical evidence in this area of research, especially in a UK context.

3.3.8 Retaliation

Committing violence towards another due to retaliation was an emergent theme of the Together Women and partners' research. This was in reference to violence towards a male and domestic abuse.

Slightly dated literature from 2008 presents women's physical violence as being more likely motivated by self-defence and fear while men's physical tends to be driven by control motive. Women accused of domestic abuse towards their partners can be women who are victims of abuse but who fought back. It is to be noted that this is not the case for all DA charges against women. More recent data from Australian in 2020 supports previous findings of retaliatory violence and findings showed that of 153 domestic violence cases with a female perpetrator, over half of the women acted in a self-defensive manner.

Research from York St John's University in 2020 emphasises how deeming female perpetrated violence as 'retaliatory' removes all agency from the individual. Retaliation is deemed a deflective response and perpetuates the narrative of women only being victims. This is despite a proportion of women who purposely chose to commit violence. This narrative, whilst it may be true for many women, contributes to a lack of rehabilitation services for female offenders as numbers are continually underestimated.

3.4 Mothers

As mentioned, this review utilises a life course perspective. Whilst woman may be victims or perpetrators themselves, they are also involved in raising children who may become involved in violence or crime. The role of mothers in mitigating risk or deterring children away from crime has been explored, but not in a West Yorkshire context.

It is known that families influence behaviour and attitudes. This can perpetuate an intergenerational cycle of violence, crime, or vulnerability. Regarding vulnerability, the impact of becoming a mother through being a victim of sexual assault, is a topic to be approached with caution. However, to appropriately support these women, their needs require attention. This is a knowledge gap that can be supported by local, West Yorkshire research alongside health care providers in the localities. A maternity needs assessment was completed in 2017 by West Yorkshire and Harrogate Sustainability Transformation Partnership and could inform this research.

Unplanned pregnancies can be a motivating factor for honour-based abuse and research suggests it is a causal factor for domestic abuse. Not only does this put the woman in danger but also her unborn child. This cycle of abuse can lead to the foetus being undeveloped and experiencing health risks. Once a child is born, they can be isolated, forced into servitude or placed in care, each of which can expose a child to trauma and can significantly influence their life choices.

3.4.1 Mothers in prison

In the UK, women constitute 5% of the prison population, roughly, more than half of these women are mothers. The <u>Centre for Women's Justice</u> has suggested that nearly 18,000 children are separated

from their imprisoned mothers and 6% of women in prison are pregnant. Accurate figures are not available but are needed to ensure that the needs of women and their children can be effectively identified and met. A MoJ review of Mother and Baby Units in 2020 lead to a series of promised reforms including the number of pregnant women in custody and births in prison will also be collected centrally and published. This has yet to come into fruition.

It is apparent that the experiences of being pregnant whilst serving a prison sentence lacks robust qualitative research. Nonetheless, formative research demonstrates the scope of current evidence. The national charity, Women In Prison, estimate that 100 babies are born to incarcerated mothers each year. Again, robust statistics are not widely available. Government guidance states that women who give birth or have a young child, may care for their child for up to age 18 months, if they are accepted into a mother and baby unit (MBU). The decisionmaking process for applications is referred as intensive and it appears to remove all agency from the mother. Despite the tedious process, evidence suggests that these services are being underutilised. Women have reported not knowing about MBUs and the role of MBU's is largely unknown to legal and court staff, Probation services, and Children's Services. This is a clear area for improvement.

HMP New Hall is one of the six female prisons with these facilities and the unit is run by the charity 'Action for Children'. Services in the unit include basic baby care classes, budgeting, communication skills, bereavement and loss support, substance misuse and a wide range of other courses. However, specific evidence about the specific health needs of pregnant women, new mothers, and their babies in HMP New Hall is limited.

A review by Russell Webster (2016) collated several reasons why MBU's are frequently underused, whilst being slightly dated, these reasons appear to be still relevant:

- Women may not reveal their status as mothers and make their own 'informal' care arrangements;
- Women may not be expecting a custodial sentence so are unprepared for arranging childcare, including MBU application;
- Leading on from the above, going into custody can be overwhelming which can create a difficult context in which to absorb information about their child placement options;
- The arrival in prison may cause a mother's breast milk to dry up and women may perceive this to have a detrimental impact on the bond with their baby and may deter them from applying.
- Mothers feeling like they are 'choosing' their baby over their older children who may be living with relatives in the community, should they apply for an MBU place. MBU's are only in 6 English prisons meaning women may have to relocate.
- Women being inadequately informed about the provision available in MBUs and the benefits of residing in one;
- Some social workers working within a 'pro-separation' model which focuses on finding alternative care for children rather than exploring fully the possibility of MBU placement;
- Mothers viewing themselves as incapable of effective parenting and their babies as being better off without them; and
- Women coming under pressure from family members to leave their babies in the community.

The care mothers and babies receive whilst in prison is heavily debated. During the period in which the government commissioned a policy review into pregnancy, Mother and Baby Units and maternal separation, two babies died during birth. If the above estimate of 100 births per year is accurate then there is a potential mortality rate of 2%. This is higher than the infant mortality rate in the UK of 3.7 deaths per 1,000 live births (0.37%). However, this is speculative, but it does raise questions about the quality-of-care mothers and babies receive in prison.

The restrictions imposed from Covid-19 have been discussed previously, however, mothers in prison have experienced additional restrictions. The HM Chief Inspector of Prisons Annual Report found the suspension of release on temporary licence (ROTL) for family contact was particularly frustrating for primary carers and disproportionately affected women prisoners. Many were not able to see their children for many months which left them feeling lonely, frustrated, and anxious. These experiences and feelings may have contributed to the higher rates of self-harm in women's prisons.

Recent evidence suggests that continued contact with children can help to manage the 'bad' mothering identity which has been found to develop following their placement in prison. Nonetheless. women face barriers in maintaining their relationship with their children whilst in prison. Many prisons run Incentives and Earned Privileges (IEPs), these are awarded based on good behaviour and are often used to determine family privileges and parent-child contact. For newer prisoners, they do not have IEPs and gaining these can take weeks and/or months. Limited telephone facilities, timing, pricing, lack of privacy and infrequency of visits have been highlighted as obstacles for women. Location has also been identified as a

challenge for mothers and their children. There is only one women's prison in West Yorkshire, HMP New Hall. Outside of the region, there are only eleven women's prisons in England. Wider research acknowledges how the spatiality of prisons creates logistical and financial challenges for families visiting a mother in prison. However, travel constraints such as availability, length of journey and pricing has not been assessed in a West Yorkshire context. When coupled with deprivation, mothers and children may have limited contact due to not being able to afford or arrange visits.

The additional barriers for mothers in the prison environment has been coined 'double punishment'. This is in reference to women being punished as prisoners but also mothers. There is a clear gap in knowledge surrounding the needs of the children as these are being overlooked despite being innocent in the situation. It is widely known that familial instability can be a precursor for future violence and criminality. Literature suggests that more needs to be done to safeguard the children of incarcerated mothers. By maintaining a resemblance of a family unit, it may act as protective factor for the women in terms of re-offending and her children against joining gangs or behaving antisocially.

Overall, evidence is clear in its opinion, forcible maternal separation can increase the likelihood of poor developmental outcomes for children whilst increasing the risk of severe mental illness among mothers. More support is required to ensure women can maintain bonds with their families and children are not disadvantaged through the process. Increased awareness of MBU's is required to ensure women can be informed decisions.

3.4.2 Mothers of gang members

In a review commissioned by Catch 22 (2013), scholars from the London Metropolitan University (LMU) interviewed gang members, their families and service providers in London, West Midlands and Glasgow. They found denial of, or ignorance about young people's involvement in gangs was commonplace amongst the family members sampled. Two thirds of the sample were from a single parent household which were predominately single mothers. The suggestion that mothers can easily lose control of their sons due to a lack of father figure was made, mainly in terms of boundary setting, avoiding confrontation or obliviousness. This can infer that there is a need for support for single mothers to ensure they are proactive in mitigating gang membership.

In relation to mothers of female gang members, it has been suggested that girls in gangs have little parental monitoring compared to nongang girls and they are more likely to say they have poor attachment to their mothers and have little interest in speaking to their mother.

Mothers Against Gangs is a Harrow based group who use information, training, awareness, education and recreation campaigns to empower parents so that they have the tools to lead their children away from crime and gang culture. Due to the presence of gangs in West Yorkshire, this could be a model that is adopted and modified to meet the needs of West Yorkshire's mothers and their children.

Toxic family environments were noted as a cause for joining gangs by literature, this included substance abuse, overcrowding, poverty and bereavement. Gang members interviewed by LMU, tended to be from households where violence was common towards their mother. Interestingly, the perpetrator was not always the father but also included sons.

It is to be noted that mothers were known to have colluded in their child's gang behaviour either by setting rules about stolen goods or being involved in devising criminal plans and condoning violence as a method. Aside from parenting, the predominant reason for gang involvement tended to be rooted in the idea that growing up in a hostile environment where gangs, criminality (fast money) and violence are normalised. This can also be associated to the previous point of mother's involvement, being in a vacuum where violence is a social norm, then it can be difficult to detach.

3.4.3 Mothers' involvement in Honour Based Abuse

As mentioned in the perpetrator section, mothers can have a significant involvement in honour based abuse. The example of Shafilea Ahmed was mentioned as her mother was deemed an active participant in Shafilea's abuse and subsequent murder. It is to be noted that mothers can also be as secondary 'victims' acting under duress whereby they act in an abusive manner towards their child through fear of becoming a victim themselves. In the case of Shafilea, her mother attempted to use this as an explanation for her actions, however she was prosecuted as a co-conspirator who was acting freely.

Reference to mothers in law is also made in literature. Their involvement can vary but they can often side with the woman's husband. In these situations, mothers in law can encourage HBA or overlook signs of HBA as a way of protecting her son.

3.4.4 Maternity services

Information gathered in this section is based on the findings from The Maternity Needs Assessment completed by West Yorkshire and Harrogate Sustainability Transformation Partnership (2017). Maternity services have been included as this review takes a life course approach. Women are mothers and can have significant influence on their child's own life trajectory.

There are significant disparities in maternal and infant birth outcomes of Black and Minority Ethnic women in the UK. Edinburgh University have estimated that the maternal death rate for white British women is 8 per 100,000 maternities, but it is 32.82 for Black Africans, 31.89 for Black Caribbeans, 12.24 for Asians (Indian, Pakistani and Bangladeshi's), 12.52 for Pakistani, and 12.47 for Bangladeshi. Alongside maternal death, Black and Minority Ethnic women are at higher risk of experiencing a still birth; maternal death and poorer experiences of care. Yet, Gypsy and Traveller women 20 times more likely to have experienced the death of a child than women of similar socioeconomic status but different ethnic background.

There is also evidence to suggest a social gradient to stillbirth in England, it is projected that mothers from the most deprived 20% of areas are more likely to experience stillbirth than those in more affluent areas. West Yorkshire also presents this trend as Bradford Districts CCG continually have the highest stillbirth rate locally which is considerably higher than the national rate. Similarly, West Yorkshire is also higher than the national average for percentage of babies of low birth weight, many of which are born to South-Asian mothers.

West Yorkshire appears to offer some maternity services that accommodate the needs of Black and Minority Ethnic women.

However, these services are disproportionate and not widely located. Leeds Teaching Hospitals, have a Haamla service which provides support for pregnant women, and their families, from minority ethnic communities, including asylum seekers and refugees. Support is throughout pregnancy and the postnatal period. There is significant emphasis on postnatal support as infants commonly experience, pre-term delivery, low birth weight and perinatal mortality. Through bi-lingual services, women are offered support to meet their social, religious and cultural needs' and offered bereavement support. Language, translation and understanding of the services were a particular need for women. Therefore, interpreters are readily available for women to ensure they still receive quality care and essential information. To ensure service utilisation, women can choose the location of their appointments, ie at home, and can attend women only groups to build relationships with other women. Despite not being evaluated, the Haamla service is culturally competent and supports vulnerable women who can be disadvantaged by generalised services. However, without rigorous evaluation, the effectiveness and uptake of this service is unknown.

The Maternity Needs Assessment highlighted the following needs for women and service provision:

- Better postnatal care across the region
- Improvement in breast feeding initiatives, primarily in Wakefield
- Increased support for mothers, especially Black or Minority ethnic women, in Bradford and Kirklees due to high rates of infant mortality
- A programme that looked beyond birth as many parents reported not feeling prepared for parenthood.
- Additional support for women in prison and women with disabilities or learning difficulties. Despite being vulnerable they

- do not have access to good quality and appropriate antenatal education.
- Wakefield has a significantly lower initiation rate than the other districts
- Service disengagement is common for women from Eastern Europe or Central Eastern Europe so additional research and resources need to assist women with language, translation and understanding of the services, is required.
- Increased awareness and attention to mothers who have undergone FGM.
 Estimates show that around 2,350 births between 2005 and 2013 to mothers in West Yorkshire and Harrogate had undergone FGM, of which 1,750 were to Leeds residents.
- Additional support is required for victims of domestic abuse. Pregnancy can be a trigger for domestic abuse, with around 30% of domestic violence believed to start or worsen during pregnancy (NHS Choices).

The needs assessment drew attention to the structural factors that influence maternity services and the experiences of mothers, such as deprivation and racism, but these were outside the scope of the review. Nonetheless, there are more births to deprived women in West Yorkshire, than the national rate. In 2015, evidence suggests 40% of all births in West Yorkshire in 2015 were to women living in the two most deprived deciles nationally.

A review into children's care services have identified a lack of treatment for alcohol dependency for pregnant women. Alcohol can be commonly abused as a coping mechanism or social norm. However, there is an association between alcohol dependence in pregnancy and the occurrence of Foetal Alcohol Spectrum Disorder (FASD) - a leading cause of non-genetic disability in children (British Medical Association, 2020). However, West Yorkshire based research is limited. This gap in knowledge would be

useful in determining how services should approach this behaviour.

80% of infanticide which occur in the first year of life, are committed by a woman (Fox & Fridel, 2017), this supports the narrative presented in 1988 whereby a child is much more likely to be killed by its biological mother than its biological father (Daly & Wilson, 1988). Postpartum depression is attributed to many infanticides as a causal factor. Canadian research suggests that the thoughts of infanticide are more common than expected however these are not voiced to health professionals. Evidence implies this is a point in which women seek help, but they will often discuss their own suicidal thoughts. Research heavily suggests that in these situations, GPs and health practitioners should directly ask women if they have experienced thoughts of harming herself or her baby. The need for more intensive and thorough postnatal support is apparent and this need aligns with the gaps in service provision highlighted by the maternity needs assessment.

In regard to maternity services, working alongside West Yorkshire's communities to start the conversation about their maternity and prenatal needs is required to ensure the effective implementation of equitable improvements.

3.4.5 Mothers as protectors

Mothers are presented as having ascribed moral characteristics and are expected to protect their children from violence. This includes ending intimate relationships if risk is present. Literature, to some extent, acknowledges that this is easier said than done and women in abusive relationships may have complex needs or experiences which deter them from leaving.

With appropriate support, women can provide essential protection for their children but until recently support for women to do this has not been readily available. The NSPCC programme, Women as Protectors, provides women with support and skills so they can safeguard their family. This scheme is based upon the Breaking the Cycle Non-Offending Partner Programme: Circles South East. This programme is specifically for the nonoffending partners of men who have been convicted or accused of sexual offences committed against children. Using group and individual sessions, mothers and carers are taught about sexual abuse, reasons why perpetrators commit child abuse, the signs, and risks. This evidence-based practise recognises that non-offending mothers can be the best protectors of their children once abuse has been recognised (Bacon, 2008). Evidence suggests that mothers can also alleviate some long impacts of childhood abuse, by reducing social withdrawal and encouraging open communication and treatment. The service is continually evaluated, using validated tools, to ensure the needs of the women and their children are being met.

Insecure housing and lack of financial independence can deter women from leaving abusive environments which can prolong the abuse her and her children receive. Furthermore, mothers can put themselves in greater risk by protecting their children. In 2020, <u>Australian research</u> emphasised the importance of recognising

the protective behaviours of mothers instead of viewing women as passive victims. In attempts to protect children, women often pre-empt any reason for abuse by being hyperaware of themselves, others and their environment, ie cleaning the house, having food prepared. Women have reported intervening if they felt their child was in danger, however, this often results in women being abused more harshly.

Due to a multitude of reasons and external factors, some women are unable to care for their children meaning they are taken into social care. For some women, they are mothers because of being a victim of abuse and can sometimes be a child themselves. This was evident in the Bradford CSE review. Similarly, there is evidence of intergenerational experiences of care, this is apparent in academic research and district reviews. A recent independent review of children's social care in the UK found that 40% of mothers who have had more than one child removed from their care have experienced being looked after themselves as children. The negative outcome of care is well known for children, i.e. disengagement from school, abscondment, unmet mental health needs, and trauma, but these intergenerational experiences of care demonstrate a long term failure to break cycles of trauma and abuse.

3.5 Bystanders

Women and girls can be bystanders in which they abet criminality or violence through acts of commission or omission.

As stated by Public Health England (2016), bystanders can be prosocial and active (they do something) or passive (they do nothing). To encourage active bystanders, many programmes have been developed to train individuals to identify signs of abuse. This approach is common in the Night time Economy (NTE), university campuses and within the armed forces. A North America Study suggested that women often feel shame when having to intervene in a public fight between women, but they are still more likely to express and intention to intervene. It is reported that women do not intervene if a woman is seen physically or verbally assaulting a man. However, if the man was to retaliate, then the female bystander would intervene.

As discussed previously, women can be perpetrators of HBA or FGM, however, women can also be bystanders during these offences. Family or community members who are aware of the violence yet do not attempt to challenge or stop it are bystanders. Despite not committing the violence themselves, they are viewed as complicit.

Women and girls involved with gangs can be often viewed as bystanders. In several gang-related studies, women have reported ignoring violence towards other girls in the gang. This has included watching them being 'sexed in', raped and trafficked without intervening (Quinn, 2016). The premise of this behaviour is usually based on maintaining their position. Some women in gangs are not obliged to have sex with members, this tends to be when they are relatives and/or 'beat in' to the gang, but this is an unstable position which can be removed. Women can remain subdued to prevent any changes to their

position. Studies have demonstrated that women who have no previous sexual exploitation in the gang have reported having sex with members at the leaders request. Gangs have unique norms whereby women can easily be victims, perpetrators and bystanders, at a single point.

As with other forms of abuse, bystanders can occur in online platforms. Recent conversations with a partner organisation alluded to a new form of bullying whereby young people are added into a WhatsApp conversation to be verbally abused by several individuals whilst others act as spectators.

Social theory, summarised by <u>PHE in 2016</u>, suggests several reasons why females may not be prosocial in some situations:

- 1. Social influence the notion that there is not a problem because no one else is intervening.
- 2. Audience inhibition fear of embarrassment
- 3. Diffusion of responsibility believing someone else will intervene
- 4. Fear of retaliation perceived negative outcomes
- 5. Pluralistic ignorance a collective understanding that intervening is not necessary

Other reasons for not intervening include personal characteristics (gender) and characteristics of the situation at hand requiring intervention (type of event; relationship between offender and victim; physical setting; perception of danger).

Women and girls are more likely to be prosocial bystanders in events which involve their children, peers or family. However, this cannot be assumed for every situation.

Interestingly, when males were interviewed about female violence (women physically fighting other women), Lowe (2012) found questions were met with laughter. Laughter was used to display humour, anxiousness and to avoid answering. Men reported feeling conflicted whether to intervene in female violence because of potential misinterpretations from boyfriends as an act of impropriety or their intervention being deemed inappropriate or predatory by women. However, females in the study suggested that men are unlikely to intervene due to the sexualised stereotype of female fighting and see it as a form of entertainment (Lowe, 2012). Males have also been reported as not intervening due to their underestimation of female violence, there is a narrative that women cannot enact significant harm. It is this preconception that feeds underestimates of female offenders.

3.6 Recruiters

A question which occurs whilst reviewing this area of research - is there a difference between recruiting for and perpetrating violence?

Outside of criminality, more women are in recruitment than men due to listening skills, resilience, and communication techniques. These characteristics can allow women to be charismatic and appear trusting, which allows them to build strong rapports with individuals (Siegel and Blank, 2010).

A recruiter is an active participant who condones and perpetuates criminality and violence. These women may not commit physical violence, but they can be responsible for grooming and recruiting vulnerable or impressible individuals into gangs, organised crime, or sex work (Selmini, 2020). Research suggests that women not only recruit individuals but they can also groom their families to establish a trusting relationship.

Recruitment does not need to be gender orientated, woman have been known to use sexuality, fear, friendship, and/or perceived vulnerability to entrap or recruit individuals. Grooming and recruitment also has an online presence where vulnerable people are influenced through the promise of gifts, advice, attention and perceived loyalty.

A common theme which occurs in female perpetrator literature, is the emphasis on female victimisation and the patriarchal bargain. Using this theory, women become participants' with a vested interest in the system which oppresses them to resist male control. To regain some agency and freedom, women have become recruiters to stop their sexual exploitation. Women and girls are caught in a cycle where they can be forced into criminality as an alternative to exploitation. It may appear that women have agency in this matter but they are often coerced into this decision. A high profile example of this is Jeffery Epstein, but in this case, female recruiters are referred to as enablers. Women were bought lavish gifts to mitigate their abuse and were coerced into recruiting other girls in the notorious exploitation.

This is a significant grey area as women tend to be portrayed as either victims or perpetrators.

Women in the drug trade have been known to use their gender to establish maternal or friendship trust with vulnerable and desperate women and girls to recruit them to transport drugs, making them the most vulnerable link within the drug trafficking chain. Young girls can be enticed by the promise of employment, high income and travel opportunities.

3.6.1. Figure 5: Methods of recruitment used by women as found in literature

Drill music		Social media	A romantic relationship
A mentor relationship		An authority figure	County lines
Social connections - family and friends		Addiction needs	The offer of opportunities - travel & money

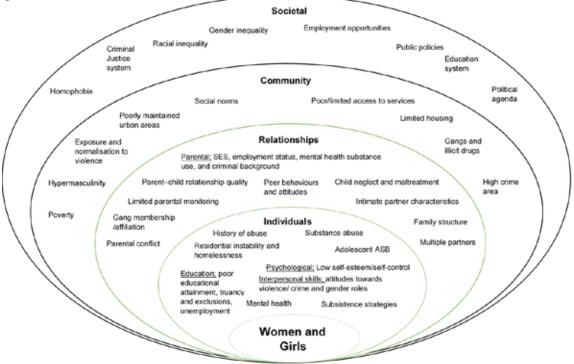
Section 04

4.1 Risk factors

Risk factors have been separated into 4 categories; individual, relationship, community and societal. Despite appearing distinct, these categories overlap and are relational to one another. Factors can influence the frequency and intensity of others. Risk factors have the potential to increase a woman/girl's likelihood of becoming a victim and/or perpetrating a crime (West Yorkshire Violence Reduction Unit, 2021).

Understanding the risk factors associated to women and girls provides insight and understanding of the causes and prevalence of violence against them and allows for the development of tailored and needs-specific support. As Figure 6 shows, there are numerous risk factors for VAWG. Only a select few of the factors will be discussed in detail.



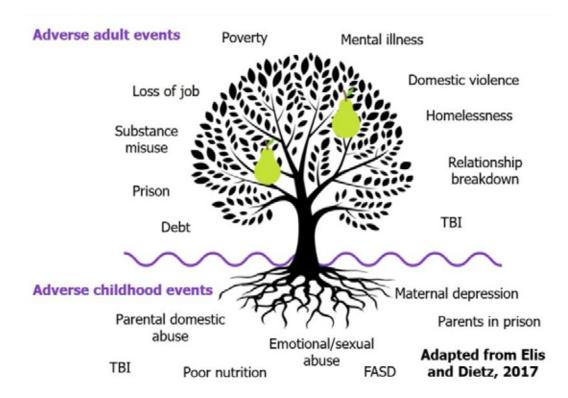


4.2 Adverse Childhood Experiences (ACEs)

Literature demonstrates that a significant number of women who work in the sex industry, involved with the CJS or in prison have experienced adverse childhood experiences and trauma. Russell Webster (August 2021) recently provided a poignant infographic about ACE's. Whilst the graphic

was used in reference to neurodiversity and the CJS, it clearly shows the consequential effects of ACEs. ACE's can be the foundations for poly victimisation and criminality and present further risk factors. To appropriately address VAWG, ACE's need to be a priority and women require support to confront their previous traumas to reshape their lives and reduce their vulnerability.

4.2.1 Figure 7: Infographic showing the potential impacts of ACE's



4.3 Being in care

Children who are looked after are some of the most vulnerable in society. In March 2018 there were over 75,000 children looked after in England. Of which, girls make up 44% of this population (DfE, 2018) but gendered data for ethnicity is not widely available. Looked after children are not a homogenous group, and many have complex needs and have experienced severe trauma. Many children (63%) were taken in care due to abuse or neglect concerns and 15% were being looked after due to family dysfunction. Both reasons, as shown by Figure 6, are risk factors by themselves. When coupled with being in care, these risk factors can be magnified and exacerbated. Recent evidence (2019) argues that the relationship between ACE and poor adult outcomes are magnified for looked after children and they often experience poorer outcomes earlier.

A common misconception with looked after children is that they are troublesome however it is estimated only 1% of children are in care due to unacceptable behaviour. The largest age group is those aged 10 – 15 years (36%) and almost a quarter are over 16 (23%). This in itself is worrying as the majority of children being looked after are at the age of <u>criminal responsibility</u> and these are impressionable years which can influence a child's life course.

<u>Literature</u> shows that placement stability, emotional behaviour and previous experiences are key areas which can influence a girl's outcomes when in care. The age in which a girl is taken into care can also influence her outcomes, more so in terms of behaviours. Older girls are more likely to be detached, rebel and abscond, thus increasing their vulnerability.

For England, the Department of Education (2018) estimates that fewer than 1% of the total under-18 population are currently in the care system. Yet, it is estimated that up to 50% of children in custody have been in care (Prison Reform Trust, 2016). According to the MoJ, 31% of women in prison had

spent time in the care system as a child. There is a clear overrepresentation of care experienced individuals in criminal justice settings. Evidence suggests there has been a decrease in the number of girls, who have experienced care, in the CJS. However, this only raises more questions about whether this is the result of their needs being further marginalised and overlooked (Goodfellow, 2019)

There is a clear need to disrupt the routes between care and custody for girls and women, especially those from Black and Minority Ethnic groups as they are significantly overrepresented. However, evidence only provides a partial picture due to data limitations. Current data tends to group ethnic groups meaning specific analysis cannot be made, it also only provides cross sectional data meaning it does not provide information on the girls being detained for longer periods. This is a significant gap in research.

Conversely, research from Oxford University (2015) found being in foster care has been associated with better progress in schools than children who live with their parents but have a social worker. Education will be discussed further in the review, but it is a well-known protective factor against violence. The research concluded that foster care protects a child's education, but this is dependent on other factors such as length in foster care, school absences, number of previous placements, school relocation and type of school. Whilst this is promising research there is little corroborating evidence.

Being in care is not a direct link to vulnerability and criminality but evidence is clear, being in care can elevate a girl or young women's risk of being involved with the CJS and it can contribute to poly victimisation. The reasons for this can include a lack of trauma informed support whereby young girls can repress their experiences or use behaviours as coping mechanisms.

4.4 Neurodiversity

Neurodevelopmental conditions is an overarching disorder category and can consist of intellectual disability, Communication Disorders, Autism Spectrum Disorder (ASD), Attention-Deficit/Hyperactivity Disorder (ADHD), Neurodevelopmental Motor Disorders (Tics) and Specific Learning Disorders.

Attention-deficit hyperactivity disorder (ADHD) is the most diagnosed neurodevelopmental condition. Yet girls with ADHD remains largely misunderstood by the public, academics, and service professionals. This leaves a significant gender-research gap which warrants significant attention. Current evidence recognises that boys with ADHD being more likely to display aggression or impulsivity whereas many girls with ADHD are found to be introverted and distracted. Due to not displaying overt characteristics and not distracting others, girls can escape notice. The behaviours shown by girls with undiagnosed ADHD are likened to anxiety symptoms or credited to social/ familial problems. Consequently, girls with neurodiversity can experience more somatic disorders due to their internalisation.

Women and girls with neurodevelopmental conditions are more likely to internalise their thoughts and behaviours then boys and men. Girl's camouflage or mask their autistic traits to conform with societal expectations and commonly blame themselves for their behaviours. An example provided by research shows that girls will often force themselves to maintain eye contact despite being extremely uncomfortable. Girls can feel shame and confusion for feeling different, but girls are able conceal their feelings of being overwhelmed. Literature emphasises how exhausting masking is and it often means they do not get the support they require. ADHD is a spectrum disorder and girls are commonly not diagnosed due to

parents and/or teachers not knowing the differing forms, i.e. poor awareness of the introverted form. This is because the criterion for ADHD is skewed towards boys and their typical symptoms.

Research has suggested that girls with ADHD and/or autism (diagnosed or undiagnosed) are often disliked by their peers due to acting differently which can worsen feelings self-worth. This can then lead into increased social isolation where many use coping mechanisms such as substance misuse and/or eating disorders to manage these feelings. A recently published, longitudinal Danish study found autistic women and girls to be four times as likely to attempt suicide than males and non-autistic women.

Research has suggested that women and girls with neurodiversity tend to;

- suffer anxiety and depression than both boys with ADHD and other girls;
- more likely to self harm and attempt suicide;
- higher risk of becoming involved with a violent relationship;
- <u>perform risky sexual behaviours</u>, which can lead to unplanned pregnancies
- Suffer with substance use or eating disorders

There is a common perception that ADHD is limited to children meaning women can remain undiagnosed which can only worsen their anxiety, depression and self-worth. These symptoms can become engrained leaving many women reporting suicide idealisation. Diagnosis can be helpful for many women and girls as it can explain their emotions and behaviours and remove any element of self-blame.

Emergent literature has called for an increased awareness and identification of girls who are struggling in school or their personal life. Further attention needs to be given by teachers and parents to recognise the signs of ADHD to ensure girls are fully supported and their behaviours understood. Increased diagnosis and awareness will hopefully increase engagement and achievement in school whilst simultaneously building their confidence and self-esteem.

A <u>Scottish study published in 2019</u> which investigated neurodevelopmental multimorbidity (more than 2 neurodevelopmental conditions) found that girls had stronger associations with multimorbidity than boys. The most common combination was ASD and ADHD. Of the students identified with multimorbidity, depression was the strongest driver of absenteeism and ADHD the strongest driver of exclusion.

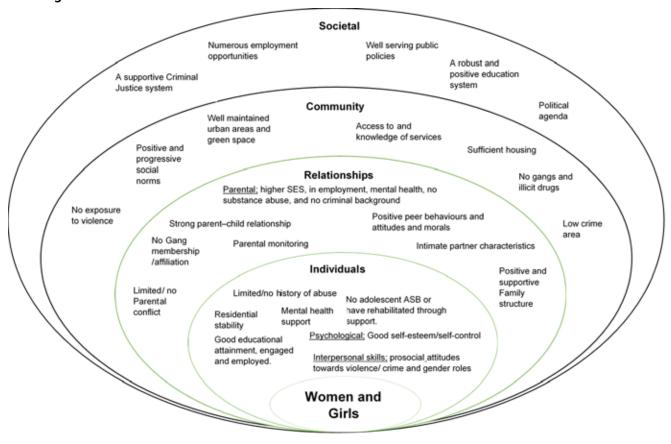
There are multiple neurodevelopmental conditions each of which will have varying outcomes for women and girls. Whether women and girls with <u>neurodevelopmental conditions</u> are at higher risk of being victims or perpetrators of violence requires further and detailed exploration.

Section 05

5.1 Protective factors

The presence of positive influences and opportunities can be described as 'protective factors'. These factors can mitigate and buffer against the effects of risk factors for violence. As above, protective factors are divided into different levels but are still relational to one another. Some protective factors can be understood as the opposite of risk factors (for example effective family structures as opposed to ineffective family structures) whereas other protective factors can be understood in a more interactive sense (such as progressive social norms) (West Yorkshire Violence Reduction Unit, 2021).

5.1.1 Figure 8: Protective factors



5.2 Education

The Malala Fund emphasises the importance of girl's education as it is a well-known tool for breaking the cycle of poverty. Education has the potential to reduces rates of forced marriage and domestic abuse whilst promoting healthier and smaller families. Education attainment can lead to further education and improve job opportunities and wages for women and girls. Education is a known protective factor for a range of determinants including violence, health, and socioeconomic status. In addition to attainment schools can provide girls with structure and purpose which can deter them committing crimes and/or joining gangs.

Government guidance (2021) states all schools should operate a child centred approach where the best interests of the child are priority. The NSPCC reiterate the essential role schools have in protecting children from abuse. Daily contact with children and young people can make schools a crucial tool in identifying the signs of abuse or exploitation. Tools such as the Wakefield Neglect Toolkit are available to schools in West Yorkshire to identify if a child or young person (up to age 18) is experiencing neglect and offers advice about available services. Contact information for social care, emergency duty teams, safeguarding units as well as area specific services are readily available on the West Yorkshire Consortium Inter Agency Safeguarding and Child Protection Procedures website. School staff should be alert to girls who are young carers, has specific learning needs, is showing signs of anti-social behaviour, is at risk of exploitation/modern slavery or is showing signs of abuse.

Whilst offering a safeguarding function, schools can empower girls and increase their aspirations by strengthening their individual protective factors (self-esteem and self-worth) and promoting resilience. Whilst in education girls can realise their human capital potential which can break down barriers to entering the labour market.

When girls disengage with education and school the gender gap can widen. Bradford's Department of Children's Services Education and Learning recent published their annual exclusion report for the 2019/20 academic year. The report shows that boys are five times more likely to be permanently excluded than girls but this reduces to three times more likely to be fixed term excluded than girls. Despite rates being higher, girls are still at risk of being excluded. An Edinburgh study denotes that pathways out of offending for girls are facilitated by key moments in teenage years, in particular school exclusions. The impacts of being excluded are highlighted in the VRU commissioned report by Crest Advisory (2021). For example, between the 2017/18 and 2019/2020 school years, Bradford Girls' Grammar Schools, there were 61 fixed term exclusions which accounts for 194 days lost. There are, however, only 2 girls' schools in the city and data was not collected for the other school. It should be noted that the higher exclusion rate for boys may be the result of presenting aggression whereas girls will often internalise behaviours and withdraw. Therefore, girls are less likely to be disruptive in classrooms (RSA, 2020).

The Crest Advisory report regarding education and exclusion rates is useful for understanding current trends but there appears to be an absence of gender specific data on exclusions for all districts in West Yorkshire. This information would be beneficial to understand the outcomes of exclusions for girls, this work would also support research into neurodiversity in girls.

In April 2021, West Yorkshire Police launched their free PolEd programme. This long-term approach will give pupils aged 6 to 16 information on law, crime prevention and safeguarding, while also building an understanding of resilience, peer-to-peer support and where to access help if needed. Officers and teachers have worked in collaboration on the programme to ensure it is fit for purpose, age appropriate and tackles key themes. This programme may cover some of the gaps in the current PHSE curriculum including domestic violence and wider VAWG concerns. To ensure the programme is evaluated, WYP have partnered with Sheffield Hallam University to undertake this alongside wider academic research to support it development It is not currently known whether the PolEd programmes will be delivered to both boys and girls together. In some instances, PHSE topics are presented to boys and girls separately, i.e. sex education and sexual practices. Whilst separation may increase participant contribution, programmes need to be wellrounded and encompassing, i.e. consent education for all students and not just specifically consent about sex but other sexual practises.

Further to the above point, concerns have been raised about the sex education and sexual support girls receive in school. Girls, aged 13-15 in a UK study, have reported not feeling aware of who to approach if they were a victim of sexual abuse (commonly revenge porn in schools) and what types of services are available.

Girls would also rather speak to peers or an adult from a non-school affiliated child support organisation instead of their parents or teachers. Further engagement with girls across West Yorkshire's schools would be recommended to identify any preferences about the teaching style of sex education. Girls also require detailed awareness of what consists sexual assault, the signs of grooming/domestic abuse/servitude/honour abuse and their autonomy. Without this information, girls could be in significant risk without knowing.

In July 2021, the UK government <u>launched</u> <u>education programmes</u> to help support Gypsy, Roma and Traveller pupils. Whilst focusing on educational attainment, the programme aims to reduce exclusion and drop-out rates for students with the intention of improving employment opportunities and reducing NEET. Bradford, as well as 5 other areas have been chosen as pilot locations due to their significant Gypsy, Roma and Traveller school populations. The pilot will be interesting to analyse once the programme has come into fruition.

Education can act as a buffer against several events, one of which being unplanned pregnancy. In many studies, unplanned pregnancy has been associated with lower academic achievement, drug use, and underage sexual intercourse. Teenage pregnancy and education appear to have a bidirectional relationship as disengagement with school and absenteeism can increase the likelihood of becoming pregnant but pregnancy can limit education after birth due to childcare issues and differing priorities.

In 2015, West Yorkshire had a higher teenage pregnancy rate than the national average, only Wakefield was marginally lower. Literature does not provide robust evidence alluding to the specific needs of these young women meaning further

research is required both to determine factors leading up to the pregnancy and what support would be beneficial after. Whilst unplanned pregnancies in teenage years may be a positive event for some, teenage pregnancy can increase an individual's risk of living in poverty, unemployment or having lower paid work. Young mothers are six times more likely to smoke than older mothers during their pregnancy which can lead to several health outcomes for the infant. Therefore, literature uses teenage pregnancy as marker of social and economic disadvantage at a young age. both of which are risk factors for VAWG. Teenage pregnancy and disadvantage can be cyclic as evidence suggests children of teenage mothers are more likely to become teenage parents. To mitigate the impacts, Leeds Teaching Hospitals have a dedicated teenage pregnancy team to support girls under the age of 19. The team consists of Teenage Pregnancy Midwives, Maternity Support Workers and Obstetric consultants, who are experts in providing information and emotional support for teens. To support the education of the mother, the team have partners who are learning Mentors in schools and financial support officers. These individuals work with the expectant mother to provide reassurance and guidance to stop disengagement and prevent the cycle of teen parents.

Section 06

6.1 Impact of covid-19

As discussed previously, covid-19 restrictions were associated with an increase in domestic abuse reports.

An Alliance for Youth Justice produced literature review (July 2020) examined the impacts of covid-19 on children in the community, and those in court and custody. Findings suggest that the pandemic and subsequent restrictions led to an erosion of children's social care, education, and mental health services. These protective services are crucial to vulnerable children. The review raised safeguarding concerns about children, primarily those living in complex family situations and children in care. Domestic Abuse literature recognises that the home can be the least safe place for a woman or a child. The national lockdowns and 'stay at home' rules may have intensified children's experiences of abuse, neglect and domestic violence.

Literature indicates the reduction in available support for children during the pandemic and voices concerns regarding their safety and protection from harm. Children's vulnerability was compounded by school closures and changes to public services whereby many services were scaled back. School closures highlighted existing

disparities in education provision. The prevalence of digital divides were obvious and poorer access to digital infrastructure made it difficult for girls to access schooling as well as the support they require. Poor service provision has also been linked to austerity and rising child poverty. These factors have resulted in services being poorly prepared for the pandemic, as the demands for the education, health and social care services were already stretched.

In November 2020, the annual HM Inspectorate of Probation report suggested that children who were on YOT caseloads were not deemed vulnerable, which prevented them from accessing schools, food parcels or laptops during the national lockdowns. This approach meant children had minimal mitigation unless local arrangements were agreed. To further complicate matters, YOTs reported that they faced difficulties when undertaking initial assessments with children without meeting them face to face. As a result, referrals and support may have been suggested based on under or over reporting of needs. The importance of in person assessments, should be taken into consideration when reviewing new working practices.

As mentioned previously, court delays may have a significant impact on young girls who allegedly committed offences as children but are approaching and turning 18 while awaiting their hearing. For those with hearings, it has been suggested in previous research by Irransform Justice, that the use of live links can disadvantage young girls. Children who appeared over video link are less likely to be granted bail, more likely to have been remanded to custody, and more likely to have received custodial sentences.

It has been presented by Alliance for Youth Justice (May 2020) that children in custody are extremely vulnerable, and their experiences of detention exacerbates and compounds this vulnerability. The newly imposed regulations, such as quarantining for new arrivals, isolation for those presenting symptoms and shielding, were reported as bleak and as having the potential for long term impacts. Children in custody had similar conditions to those in adult prisons, education and support services were restricted, which does not appear to be in their best interests. Physical violence was reported to have decreased yet children reported more intimidating and verbal bullying. This has the potential to aggravate mental health symptoms and psychological behaviours. The Government's response to children in custody has been widely criticised in literature, with the comments that it has failed to distinguish between its approach to adults and children in several policy responses.

An impact of covid which is mentioned but not deeply explored is the association between increased exposure to gangs and exploitation and reduction in education and support provision. However, the extent to which this has impacted girls is difficult to ascertain due to lack of available data. This association despite being unproven is not surprising, the closure of businesses and little community provision meant that young people may have lost their income and experienced increased level of boredom meaning the pull of gangs, fast money and escapism was enhanced.

Section 07

7.1 Identified needs

Throughout the review, common needs have been identified. Whilst these needs are from academic research and grey literature, community engagement with women and girls from West Yorkshire is required.

Deprivation, racism and gender inequality appear to underpin the needs of all women and girls; however these are to be addressed nationally. Hopefully, the VAWG agenda will attempt to address these which in turn will assist statutory and 3rd sector partners in tackling and meeting the needs of women in West Yorkshire.

The below table highlights the overarching needs of women and girls, this is not an exhaustive list of all the needs discussed in this review, ie. maternity needs are not repeated below.

7.2 Table 13: Identified needs of women and girls

Need	Explanation
Preparator accountability and rehabilitation	As outlined in the Government's VAWG agenda, this should be a priority. VAWG can be prevented by tackling the issue at the source, i.e. the perpetrator. This can include rehabilitation services for offenders and robust prosecution processes. Attitudes towards VAWG need to be changed and children need to be educated that VAWG should not occur.
Secure and safe accommodation	This was voiced by women who work in the sex industry and those facing DA. Without secure accommodation, women are unlikely to remove themselves from their lifestyles or abusive environment.
Addiction and substance use support	This was apparent for women who work in the sex industry and women leaving prison. Without robust support, women are unable to exiting dangerous lifestyles due to needing quick money to support their addiction. Addiction was also noted as being a reason why women cannot maintain housing due to spending their rent on substances.

Need	Explanation
Culturally sensitive services	'Run by and run for' services with the intention of removing perceptions of engrained prejudice.
Increased awareness of services	Ideally in common places: doctors' surgeries, supermarkets, radio, toilets. This could benefit women suffering DA or girls faced with FGM, FM or HBA. These individuals may be socially isolated so support services need to be apparent and highlighted in commonly used places.
Increased awareness of the roles of organisations and their processes	For example: how will social and child protection services be involved if DA is reported, if children are involved. This is with the intention inform women and remove any deterrents from reporting a crime/violence through fear of losing children.
Recognition of female perpetrators	More public awareness so that women and girls are informed and protected.
Support for mental health needs	Especially in girls: low self-esteem, low self-worth, and confidence. Services to support them in understanding and unpicking their emotions and the causes.
Educational support	In girls and predominantly women and girls from Black and Minority Ethnic groups.
Awareness training	The signs of domestic abuse, FM, HBA.
Trauma services	To unpick ACE's and prevent poly victimisation
Services with long term potential	 Life course services to support mothers and prevent violence from preconception. Short term interventions are unable to provide the level of support needed. Progress is limited through funding.
A holistic approach: Collaborative and accessible services	 Services that work alongside one another to ensure women are fully supported and are not required to attend several appointments in different locations. Collective funding to ensure equal provision. Sharing best practice
Engagement with women	Women do not feel their needs are even being identified, never mind met. Active engagement will allow their voices to be heard and will allow coproduction of specialist services.

Secure and safe accommodation is an apparent need for women and girls. Many will not leave abusive relationships or their lifestyle due to fear of homelessness and rough sleeping. In July 2021, the government announced a safe housing pilot programme, known as 'Respite Rooms'. The programme will see 12 local areas across England share £3.7 million to fund accommodation and expert support for victims of domestic abuse, rape or sexual assault, women who work in the

sex industry, victims of exploitation, or violence. It is anticipated the programme will create 140 bed spaces and support up to 1100 people at risk of sleeping rough. Alongside receiving secure accommodation, individuals will receive support tailored to their experiences and/or trauma. However, no areas in West Yorkshire have been selected for this pilot but evaluations of the programme may be instrumental in funding similar refuse spaces in West Yorkshire.

Despite not being a pilot location for respite rooms, the Domestic Abuse Act will force councils to prioritise accommodation requests from women suffering/have suffered domestic abuse. Previously, for requests to be seen as priority, victims had to be assessed as being 'vulnerable' which many were not. Under the new legislation, domestic abuse will be a standalone reason to qualify as needing this support.

Substance abuse is a risk factor in itself and is referred to as having a bidirectional relationship. Previous assault can increase risk of drug use and drug use can increase the risk of assault. Both scenarios increase a woman's vulnerability to becoming a victim.

Women and girls who have experienced violence or trauma require holistic, womencentred approached. There is a requirement for contained care where women can access multiple services without needing to approach serval service providers. When this is not possible, there needs to be continuity of care and better sharing of information. Women don't always want to relive and explain their experiences and needs with each care provider. There is a requirement for an improved communication system, between providers, so women are not retraumatised.

7.3 Case study 5: Project 1325 by WomenCentre, Calderdale and Kirklees

Project 1325 is a WomenCentre and Big Lottery funded project which works with girls and young women aged 13 to 15. The project spans across both Calderdale and Kirklees to support the girls and young women in the community to recognise their full potential. The primary objective was to empower girls and young women to recognise their needs, then take the steps to address them and to make the changes that they wanted to bring about in their lives. The project promotes personal awareness

and self-appreciation by actively encouraging girls to celebrate their achievements and growth alongside engaging in ongoing reflection and learning.

Throughout the project, the team at WomenCentre worked with girls who had a myriad of needs. It was clear that girls and young women are unlikely to have one need but have several intertwining needs. The University of Huddersfield completed an evaluation exercise and reported that on average, each girl presented between 4 and 6 different needs.

From the university's evaluation, the girls and young women involved presented the following needs:

- Mental health issues (79% of the young women);
- problems in family relationships (71%);
- low confidence and self-esteem (64%);
- experiences of interpersonal/ sexual violence and sexual exploitation (53%);
- school issues (incl. being excluded from school and not in education, training and employment) (42%).

When asked how they would like to receive support, the girls reported needing to develop coping skills and resilience to address their problems. Others responded by requesting emotional support so they can frame their own needs.

A clear need of girls and young women that was apparent in this project is the need to develop or regain agency so that they can have independence which in turn will reinforce self-worth and confidence in decision making.

Section 08

8.1 Limitations of current research and services

Throughout the review, it was apparent that West Yorkshire based studies and research are few and far between. This presented difficulties when trying to establish the needs of West Yorkshire's women and girls. Nonetheless, the review has included contemporary findings from literature from both academic and grey sources. These findings should be used to inform further research and highlight areas for service delivery.

Robust research into the varying facets of VAWG lacks quality and depth. Research is also limited using cross-sectional studies. Whilst these are practical for collecting data guickly and presenting a snapshot of society, cross-sectional studies cannot infer causality meaning only associations can be commented on. This is because they are unable to differentiate cause and effect as the sequence of events cannot be determined. It is evident that study samples are not representative of women and girls, in terms of age, socioeconomic status, race, and ethnicity. Consequently, findings can both under and overestimate associations. By not studying a representative sample, research does not accurately reflect or identify the challenges faced by women and girls from differing races, ethnicities, and their subsequent needs. These biases are reflective in current service provision as they are not deemed to be representative or user friendly.

North American studies also have some limitations as they cannot be directly applied to a UK context. Studies regarding gang involvement and female perpetration were largely North American based which limits the generalisability of the findings as the cultural context and criminal justice system are dramatically different. Similarly, the UK care system and US system cannot be compared due to structural and legal differences.

Research shows that women and girls require intensive, trauma-informed support but this requires resources which are not readily available. As a result, it appears that quality service is only provided to a small minority women and girls. This is not to blame the current services, who are actively trying to make a difference, but the commissioning process. Short term funding and competitive bidding process can ruin relationships between organisations. This is not beneficial for sharing data or good practice which could benefit women

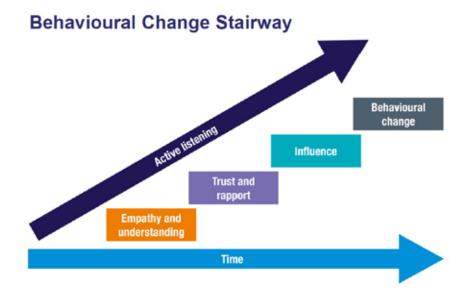
and girls. Beyond the women and girls, themselves, there is a desperate need for more collaborative working. The need for holistic approaches has been made clear, women and girls benefit from having collective and accessible support. The STAGE partnership is a good example of organisations, of varying sizes, working together to create change.

Limited resources mean waiting lists get longer which leaves women and girls at risk for longer. If the government is committing to reducing VAWG then resources need to be given to the on the ground services that can engage those most vulnerable. However, when completing this review, it has become clear that engaging vulnerable woman is easier said than done because many crimes can be hidden (CSE, DA, HBA and FM). To address this, there needs to be more awareness of the signs of hidden crime, information about services should be common knowledge and placed in well trafficked locations. Also, localised assessments of ethnic minority women and those of an older age need to be conducted. otherwise, interventions intending to help them will only further marginalise them.

Some of the interventions mentioned in this review have focus on behavioural change. Whilst useful for women with substance misuse, they are not appropriate for victims of sexual assault as their behaviour is not responsible for their abuse. The capability lies with the perpetrator. It can be inferred that these interventions maintain the discourse of victim blaming.

Many behaviour change interventions are short-term, meaning effective and lasting change cannot occur. They were likely implemented without a robust evidence base. This is unsurprising because there is currently little long-term evidence, due to the lack of longitudinal studies. Future interventions, if focusing on behaviour change could use the behaviour change stairway (Figure 9) when developing interventions as this (College of Policing 2021). This stepped approach shows awareness that behaviour change is a long process which requires different levels of support. Future reoffending interventions should use this approach.

8.1.1 Figure 9: The Behaviour Change Stairway (College of Policing, 2021)





9.1 Recommendations

Recommendations for research, service provision and community engagement have been made throughout. The primary recommendations have been repeated below. For ease, recommendations have been split into categories.

The findings indicate several issues that merit further investigation in **future research**:

- To continue looking at VAWG using a life course perspective. This may ensure that risk factors are addressed earlier and/or prevented.
- Further research into the intersectionality's
 of women in West Yorkshire's local
 communities. There is an inherent focus
 on white girls as victims and ethnic
 individuals as the perpetrators but no
 comparable mention of white criminals.
 This is not reflective of the current
 picture. To assess needs, systematic biases
 need to be removed.
- Further to the above, data is needed to identify the needs of the LGBTQIA+ community (sexual orientation and trans population). This can be obtained from local stakeholders and support charities.

- Women committing domestic violence, towards their partner or children requires summarising. Further research should investigate why and how women commit domestic violence against other women.
- Research to support West Yorkshire's
 Gypsy and Traveller populations is
 required. This can be in consultation with
 organisations such as The Gate.
- Research should look to involve girls aged 11-12 in study participation (with parental consent). This is a transitional age whereby girls are impressionable and experiencing body changes, school changes and having peaking interests.
 Engagement with this age group and coproduction of awareness materials (signs of abuse, safety talks etc) may prove beneficial.
- Women who work in the sex industry should be a focus especially now the Managed Approach will be ending. Their needs could change rapidly. This is an opportunity for research and engagement.

- Further research is required to understand why girls (especially older girls) are more likely to report emotional problems, this could be done in a school environment. Alternatively, this area of study could be explored in social media research to understand whether engagement with social media influences the attitudes and emotions of girls.
- Additional research about middle aged women, particularly their drug and alcohol use. This can expand research beyond deprivation and also look at VAWG from an alternate perspective.
- Future research should utilise a longitudinal design to follow girls over time into adulthood, to explore how exposure to risk factors influences later mental health, wellbeing and vulnerability.

- To explore the needs of girls who are/have experienced teenage pregnancy. This includes their needs prior and post birth.
- Research into specific offender rehabilitation interventions would be useful. The aim of this research would be to look at what works approaches. This would support work being done by the VRU in consultation with prisons.
- Research should consider implementing the RESPECT framework to support further research projects and support intervention focus:

9.1.1 Figure 10: The RESPECT Framework

- **R Relationship skills strengthened.** This refers to strategies to improve skills in interpersonal communication, conflict management and shared decision-making.
- **E Empowerment of women.** This refers to economic and social empowerment strategies including those that build skills in self-efficacy, assertiveness, negotiation, and self-confidence.
- **S Services ensured.** This refers to a range of services including health, police, legal, and social services for survivors of violence.
- **P Poverty reduced.** This refers to strategies targeted to women or the household, whose primary aim is to alleviate poverty.
- **E Environments made safe.** This refers to efforts to create safe schools, public spaces and work environments, among others.
- **C Child and adolescent abuse prevented.** This includes strategies that establish nurturing family relationships.
- **T Transformed attitudes, beliefs and norms.** This refers to strategies that challenge harmful gender attitudes.



Criminal justice system

- To avoid prosecutions for low-level and non-violent crimes where possible for women and girls. For girls specifically, the development of age-informed, gendersensitive diversion services are required.
- Peppelling things out in plain English, will help increase knowledge and awareness of CJ diversion schemes. Moving aware from phases such as 'diversion and out of court disposals' to 'resolving crime without going to court' is favoured. This approach can also be taken for informing women of services and the role of organisations. The clearer the information is the less room for uncertainty and determent.

Education

- Girls would benefit from early intervention and prevention-focused interventions in schools. These should focus on signs of abuse, teenage pregnancy, healthy relationships, sex education, consent, available services. This has the potential to have longerterm, wide-reaching impacts in changing both attitudes towards and perpetration of VAWG.
- Preventative interventions will also students in school should be implemented. Whilst this is a structural change, more needs to be done at an early age to prevent the entrenchment of social norms and acceptance of VAWG.



Adoption of a holistic approach

- As mentioned throughout the review, women will benefit from services with a holistic approach, ideally this should be women-centred and trauma informed, with integrated services. There is also a need for support for post separation.
 Figure 11 examples how a holistic approach can be structured. The root problems are identified and addressed through a 3 stage process.
- Partners should be working together to prevent duplication and promote evidence-based working. The STAGE Partnership are a good example of this. In this partnership, the larger partner takes responsibility for overseeing the funding and commissioning aspects and allows the grass root partners to focus of delivery and user experience.
- There is a need for co-production when designing interventions. Using the experiences and needs of women to inform practise will increase usability. This is extremely important for ethnic minorities who have voiced their hesitance when accessing services due to their suspicion of discrimination. Co-production should be done at all stages, this includes identifying needs, determining aims, detailing how support should be structured and administered and the promotional materials.

9.1.2 Figure 11: The STAGE Partnership: Learning and Legacy. Theory of Change.



- Phase 1: Being Initially engaging individuals through assertive outreach, being responsive and flexible to their needs (housing, health, addiction). This phase is about building up trust through unconditional positive regard and a non-judgemental approach.
- Phase 2: Becoming This stage supports individuals to begin building recovery. The focus is on supporting women to overcome trauma, address complex emotions and engage with court processes.
- Phase 3: Belonging The final phase of support consists of building
 positive social networks and integrating into the community. Women are
 supported to link into community resources and build on their strengths
 through employment, training and education.

Section 10

10.1 Summary

The impacts of VAWG cannot be underestimated. It is an inherent problem in society that takes many forms and has damaging consequences. Experiences of violence can lead to trauma, risky behaviours, school disengagement and addiction, to name a few. The review has used a life course perspective to explore VAWG, but the vulnerability of older women requires further examination.

Tackling VAWG is a priority for many and rightly so, but the agenda needs to maintain current momentum to ensure change occurs. The government has outlined some promising initiatives and funding opportunities; however, these are yet to come into fruition and their impacts are not known. Nevertheless, preventing VAWG will be a long process which should focus on social change, education, convictions, and offender rehabilitation. Committing violence is deemed a choice therefore preventative interventions are likely to have the most impact. However, the events leading up to this also need considering, ie previous trauma.

Women and girls are often blamed for their victimisation leading many to monitor and discipline their behaviours. This narrative is

damaging and inaccurate. Further awareness and understanding that all culpability lies with the offender is required. West Yorkshire appears to be proactive in this area and the recent funding secured by the mayor will support this. Even so, more needs to be done. Newly funded services in West Yorkshire will require continual monitoring and evaluation to ensure they are fit for purpose.

As explained, women and girls can be victims, perpetrators, mothers, bystanders, and recruiters. Whilst this typology is not exhaustive, it aims to cover the key aspects of their involvement in violence. The roles of perpetrators, bystanders, and recruiters warrants further research, especially in a UK or West Yorkshire context. It is unsurprising that the victimisation of women and girls is dominant in research. Domestic abuse, sexual assault, HBA and FM, have been shown to be gendered crimes. The review has identified several ways in which violence is perpetrated against women and girls. Alongside this, it has described the needs of women and girls and highlighted gaps in current knowledge. Engagement with women in our region is required to ensure the needs highlighted in this review are accurate for West Yorkshire.

Conviction rates for VAWG are poor and can deter women from reporting abuse. Victim withdrawal and evidential difficulties contribute to low conviction rates. Further support services for victims during police investigations and prosecution processes are required. Increased confidence in the police is also needed, this can be achieved by having dedicated victim support workers who work alongside police forces.

Covid 19 will have a significant and lasting impact on VAWG. The pandemic witnessed an increase in reports of DA and saw significant court delays. These court delays are likely to disadvantage the most vulnerable in society, ie girls turning 18 in the CJS. As explained in the review, girls, and young women in the CJS require personable and tailored support, which may include being retained by youth services after their 18th birthday. This can be a crucial point in their lives and inadequate support may lead to negative outcomes. Further examination is needed to understand why Black and Minority Ethnic women are overrepresented in the CJS and what can be done to prevent this.

The findings emphasise the need for a holistic, women-centred approach to supporting women and girls. This means research and interventions should aim to address all the needs of women, ie emotional, social and physical, in a comprehensive manner. Approaches should be gendered to ensure women are appropriately supported. Practically, this could involve integrated services which cater for housing needs, financial support needs, mental health needs, physical health needs etc. In addition, all services, where applicable, should also adopt a trauma-informed approach. As made clear in the review, ACE's, previous trauma, and addiction are common themes in the experiences of women and girls. If these trauma needs remain unmet, women and girls can entrench their vulnerability

by being in abusive relationships, having addiction issues, being in prison.

Research and services provision needs to recognise the intersectionality's of women and girls. Current research appears heteronormative and biased which skews service availability. As demonstrated, several characteristics such as age, ethnicity, race, sexual orientation, and identity can significantly influence an individual's needs. If services do not appear to meet these needs or there is perceived prejudice, then women are unlikely to engage. If needs of women in West Yorkshire are relatively unknown, then community engagement is required. There is little purpose in commissioning services which are not evidence-based as they will not be useful nor effective. Services such as the Anah Project should be used as examples to support inclusive and userfriendly services.

There is a requirement to review partnership working. It appears competitive commissioning processes can cause more harm than good as smaller third sector organisations often miss out on long term funding due to bureaucracy. The STAGE partnership approach is a strong example of partnership communication and delegation.

Risk and protective factors have been identified. These factors should be used to structure interventions and start conversations about why women are prone to victimisation or offending. Structural inequalities can drive vulnerability, but community and individual level factors can contribute significantly. Addiction, insecure housing and previous trauma were noted as key risk factors. Whereas educational engagement and attainment were coined as preventative factors.

Current evidence is fragmented and appears one dimensional. The limitations of current research and provision should be used to develop longitudinal studies to improve knowledge and evidence-based practice. The recommendations provided in this review identify the next steps in understanding VAWG. The research base for VAWG is vast but contextual evidence for West Yorkshire is needed. This knowledge should be based on the lived experiences of women and girls to ensure that organisations and services can provide adequate and needs-specific services. Existing services are doing what they can, however, they face numerous challenges, especially those relating to funding. Women who have been victims of VAWG require lasting support meaning short term interventions have little effect.

Appendix 1Age distribution, in %, of women and girls in West Yorkshire by metropolitan borough.

Age	Bradford	Calderdale	Kirklees	Leeds	Wakefield
0 - 5	8.76	6.88	7.33	7.33	7.12
6 - 11	8.84	7.46	7.81	7.09	7.02
12 - 15	6.83	5.71	5.91	4.98	5.16
17 - 18	2.62	2.24	2.34	2.10	2.03
19 - 25	8.10	6.80	8.24	13.96	7.20
26+	64.86	70.91	68.37	64.54	71.47

Appendix 2

Age distribution, in %, of women and girls in West Yorkshire by metropolitan borough.

Risk Factors					
Individual	Relationship	Community	Environmental		
 Childhood experiences of abuse History of adolescent antisocial behaviour Residential instability and homelessness Substance use/abuse Subsistence strategies Psychological; behaviour disorders, low self-esteem, social isolation, low self-control Education; poor educational attainment, truancy and exclusions, unemployment Interpersonal skills; attitudes towards violence/crime; attitudes towards gender roles 	 Family characteristics; parental SES, employment status, mental health, substance use, and criminal background, family structure. Family relationships; parental conflict, parent—child relationship quality, parenting style, parental monitoring, and family functioning Child maltreatment and neglect Intimate partner; substance abuse, hypermasculinity, Having numerous partners Peer attitudes and behaviours Gang membership or affiliation 	 High crime area Exposure to violence Poverty Drugs Poorly maintained urban area Social norms Poor/limited access to services Limited housing available 	Inequalities; Gender, Racism, Homophobia Socioeconomic environment; limited employment opportunities Laws, enforcement and policies		

Protective Factors						
Individual	Relationship	Community	Environmental			
 Psychological; low behaviour disorders, high self-esteem, social isolation, high self-control Education; school readiness, academic attainment, engagement, employment. Good interpersonal skills; decision making, prosocial attitudes Stable housing No substance abuse/ dependence 	 Family characteristics; parental SES, employment status, mental health, substance use, and criminal background, family structure. Family relationships; limited parental conflict, positive parent—child relationship quality, parenting style, appropriate parental monitoring, and family functioning. Positive peer relationships 	 Low crime area Little/no exposure to violence Secure housing Well maintained urban area and green spaces Positive and encouraging social norms Easy access to quality services Quality housing available 	Socioeconomic environment; employment opportunities Proactive laws, enforcement and policies			

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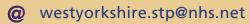
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