## DELIVERING EQUALLY SAFE

**Impact Report**April 2022 - September 2022







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### **Content Warning**

This report includes content of a sensitive nature including real life descriptions of gender-based violence that readers may find challenging or distressing. Please practice self-care whilst and after reading.



### **Foreword**



### Siobhian Brown MSP

Minister for Victims and Community Safety

As the Minister with lead responsibility for Equally Safe and tackling violence against women and girls, receiving this report has been most welcome. I want to express both my appreciation and thanks to all involved.

I feel encouraged by the way services are adapting and developing new ways of supporting survivors to help address growing demand; whilst also placing a focus on prevention, education and awareness raising, all of which have increased since the last impact report.

During the first six-month period, between October '21 to March '22, 19,721 people were supported. This report shows that over 23,000 people, an increase of 16% from the previous six month report, have benefited from the incredible support services. The stories of the transformative impact on their lives speaks of the importance to the work undertaken.

The Delivering Equally Safe (DES) fund highlights noted in this report period demonstrates there is much to be positive about, but it ultimately also highlights the on-going challenges.

In these uncertain times, tackling violence against women and girls remains a priority for the Scottish Government and I am committed to, alongside key partners, carrying on the work of my predecessors and implementing the changes we need to address the issue. The extraordinary work undertaken by DES funded projects remains key to this and will continue to make real change to the lives of women and girls.



#### **Foreword**



Celia Tennant

Chief Executive, Inspiring Scotland



We would like to take this opportunity to thank Delivering Equally Safe (DES) organisations for the vital work that they continue to deliver throughout Scotland. During the second six-month period of the fund, organisations supported high numbers of adults, children and young people with valuable frontline support and prevention activity. In this report, we continue to share learning from this work, highlighting the growing impact of newly funded projects, and innovative new ways of working.

We recognise the strength of those affected by gender-based violence (GBV) & abuse and thank those who have contributed their experiences to this report.

As the fund continues, we look forward to continuing to support and learn from all those tackling GBV and abuse.



I recently answered the door to a woman who I did not recognise. I was unsure of the reason for her visit, but invited her in nonetheless and made her feel welcome and comfortable. She introduced herself and told me that she and her two children had lived in our refuge back in 1988, she had never forgotten the support she received at the time and wished to make a donation to the service as she was now in a position to do so. I of course thanked her profusely and we went on to have a chat about her time with Western Isles Women's Aid and how her life had changed so much for the better following her escape from her abusive partner at the time.

It struck me how even short-term support many, many years ago could have such a long-lasting positive impact on future outcomes for women and their children and was grateful for the reminder.

Western Isles Women's Aid





## **DES Fund in Numbers**



## **Section 1 DES Fund in Numbers**

## 1.1 Number of people supported

23,439

people received front line support between April '22 and September '22







**17,244** adults



6,195

children and young people (CYP)

Of these, **8,671 adults** & **3,362 children and young people** were **new** to services (or re-engaged after previously ending support) during the six-month period

#### This included:



**1:1 support** for **13,759** women



**1:1 support** for **3,466** children and young people



**9,295** helpline calls



**Refuge provision** for **515** people



**Group work** for **1830** women



**Group work** for **2,085** children and young people



Counselling\* for
524 people



**Legal Advice** for **257** people



**Financial Advice** for **315** people



**Advocacy** for **5,003** people



**177** people engaged with the **CEDAR** programme



**1,403** professionals completed **Safe & Together** Institute Training



<sup>\*</sup>delivered by an accredited and registered counsellor

#### 1.1.2 Comparison with previous period





23,439 people supported

Oct 21 - Mar 22

**April 22 - Sept 22** 

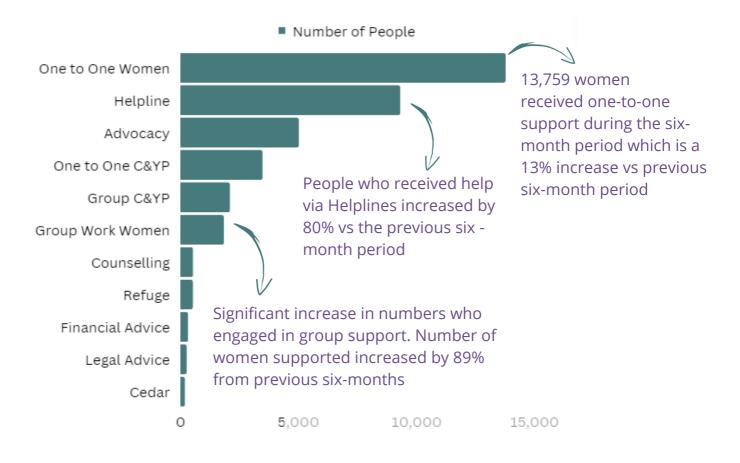
## 3,718 more people

supported in this reporting period.

+ 19 %

#### 1.2 Frontline Activities Delivered

The range of activities being delivered directly to people affected by GBV by DES funded organisations and projects is detailed below:





Across all types of activity shown in the previous graph (except one-to-one support for CYP) numbers supported have increased in this reporting period vs the previous reporting period. The quote below provides an example of the impact increasing demand is having on services:



At present, the CYP and Outreach service have a waiting list which prevents us from providing immediate support to women, children and young people who have witnessed or experienced domestic abuse. With limitations in the number of staff members available for support and constraints on our available hours, we are not able to provide referred cases with a guarantee on how long it will take until they are seen. This impedes our delivery of support by preventing us from giving a timely response to women, children, young people, and their families when they have reached out to us for help.

Moray Women's Aid

Financial support had the highest increase in percentage terms with a 250% increase in the number of sessions delivered. Anecdotal feedback from organisations indicates this was as a result of an increase in resource recruited to deliver direct financial advice coupled with an increasing need for support with financial issues caused by the cost of living crisis.



The only activity that saw a fall in the number of sessions delivered was one-to-one support for children and young people. Feedback from organisations suggests this was as a result of:

- School holidays
- Loss of staff with skills to deliver the sessions
- Lessening of restrictions allowing more group work to take place

Image Credit: West Lothian Women's Aid – Freedom Programme





#### 1.3 Education and Awareness Sessions Delivered





**4,404 more people** attended education and awareness sessions in this reporting period compared to the previous reporting period.

**178 more sessions** were held compared to previous reporting period.



Sessions held with children were **down** slightly by **318 children and young people**. This is likely to be because the reporting period covered the summer school holidays.







## **Key Findings**



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## **Section 2 Key Findings**

## 2.1 Key Themes



## **Improving Themes**

These are existing themes that have ongoing relevance and/or are having a more positive impact

Evidence provided by the organisations continues to show that front line service support delivered has a positive impact on survivors and contributes to the priorities set out in the Equally Safe Strategy. Support provided changes the lives of survivors and their families

I would never have got to where I am without you, I was a mess back then and in crisis mode. You need to give yourself some credit, because of you I started to see what life could be like again. I tried to get support from other places, but no one really helped me, you were the first person to be able to help and you understood me and what I was going through. I thought I was the only one in the world that was in an abusive relationship, and I couldn't get past what had happened to me but now

I can focus on the future and my life, that all began with you. So thank you.

Quote from person supported by Dundee Women's Aid

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Increase in number of people accessing funded activity

There has been a 19% uplift in the number of people supported by front line organisations in this sixmonth period and an increase of more than 4,000 people attending awareness raising and education sessions.

While it is encouraging to see increasing numbers of people receiving support, it is worrying that demand is continuing at such a high level.



Organisations who moved to a "hybrid" method of delivering support to survivors continue to provide evidence that this is working well and is preferable to online only. Other examples of new ways of working are highlighted with the following icon throughout this report:

New ways of supporting survivors & addressing demand

Targeted work leading to better support

People who share protected characteristics are being better supported through targeted support and specialist services. This includes targeted work with women with learning disabilities, Deaf women and people from minority ethnic communities. Awareness raising and development of resources is supporting better practice across the sector, however evidence shows demand is high for specialist services.

Organisations delivering education and awareness raising sessions continue to evidence positive results. For example, teachers attending Safe and Together training have altered behaviours particularly regarding use of language.

Increase in awareness raising and education



## **Worsening Themes**

These are existing themes that have ongoing relevance and are worsening and/or having a more negative impact.

Education and awareness raising session attendance

Although the number of education and awareness sessions have increased, there was also feedback from over 30% of the organisations that delivering training sessions to council staff and in education settings has become more challenging to set up and run. Given the pressures they are facing, the level of engagement from some councils and schools has reduced.

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These are themes that have emerged during the reporting period

High profile instances of GBV have led to more discussion in the media, politically and in communities about GBV. Many frontline services report seeing increases in the number of referrals or people approaching them for support following high profile cases, including more young people.

Increased profile of GBV has led more people to seek support

Increased need for telephone and email helpline support

The number of calls to helplines has increased by 80% despite restrictions on face to face meetings being completely lifted. Helplines are altering opening hours and increasing resources to meet demand.

Despite this, organisations are reporting that their call abandonment levels remain at a higher level than they would like.

Although the number of education and awareness sessions have increased, there were mixed views reported on whether continuing with online only training is providing the same level of engagement and impact.

Online engagement less popular



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## 2.2 Fund Challenges

It is clear that impactful work is ongoing and organisations continue to do their best to meet the needs of communities, however recent reporting also highlights challenges across the sector.



## **Pre-existing Challenges**

These challenges are pre-existing and have continued to present barriers to delivering services this reporting period.

Undoubtedly the most common challenge reported by funded organisations continues to be recruitment and retention of staff. Some organisations have reported that uncertainty around ongoing funding has led to staff leaving.

Staff Recruitment & Retention



WASLER have lost 27% of its workforce in the past two years with 66% of those who have left citing financial considerations as the sole reason to leave WASLER. All but one resignation cited low salary levels as a contributing/ principal factor. Staff have moved onto competitor organisations within our field where they can expect to earn 4.8% (or £3,105 more) more per annum than they would do should they remain with WASLER.

Women's Aid South Lanarkshire and East Renfrewshire



Difficulty diversifying income sources The uncertainty over sourcing suitable funding impacts on the capacity of the organisation to plan and develop their service.



## Gaps in Support: Court Process

Delays in the court process are continuing to create increased stress and anxiety for survivors.

Assist currently have over 1,000 adult clients they are supporting. Their bespoke service for young people is up and running. Early evidence shows the service is needed with high demand from young people.

A worker supported a women through the court case with the perpetrator and through the child protection system as her young child was placed on the child protection register. She provided her with regular sessions where she could work through her experiences and was able to exit once the perpetrator had been charged and sentenced and the child had been deregistered from the child protection register. At her exit, Mum reported that her and her child were both doing well.

Stirling and District Women's Aid

Targeted support for people with multiple protected characteristics is being delivered, for example, frontline work with black and minority ethnic people, deaf people, people with learning disabilities and so on. However, this support is limited in scale and evidence indicates that existing support often fails to meet level of demand or need.

Gaps in Support: Targeted Work

Gaps in Support: Geographical Gaps The availability of services varies depending on local authority area. Reporting highlights, in particular, gaps in the availability of specialist support throughout Scotland.

It is becoming harder to gain Legal Aid. We now have no one in the Highlands providing this option for women. This is causing a lot of stress when women are trying to find the finance to support them. More and more women are requiring counselling for situations outwith our remit, this has increased and continues to increase.

\*\*Ross-shire Women's Aid\*\*

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Continued difficulty for Survivors from minority ethnic communities in accessing appropriate support. In particular, those with "no recourse to public funds" status. Reporting shows many have complex needs, which are compounded by existing barriers and limited knowledge and awareness of their rights.

Barriers for minority ethnic Survivors

No Recourse to Public Funds visa status remains one of top challenges when supporting BME women and children.

Shakti Women's Aid

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Referral Backlogs

Onward referrals both to NHS and other statutory services are proving a challenge due to service demand pressure. Similarly referrals to funded organisations providing front line support are facing delays due to increased service demand.



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## Worsening Challenges

These challenges are worsening and more organisations are reporting them.

Of the 92 orgs in the DES fund who deliver Front Line Services, 63 answered that they faced pressures with service demand, which equates to 68%.

Of 17 funded Rape Crisis Centres, 14 reported pressure with service demand, 82%. Similarly, of 33 funded Women's Aid Centres, 21 reported pressure with service demand, 64%.

Service Demand
Pressures

Mental Health & Access to MH Support Organisations reported that they are encountering increased prevalence of women presenting with mental health challenges. Anecdotally some commented that this can be exacerbated by the duration of their wait time for support and access to NHS Mental Health services. Mental Health Counselling was provided to 524 women in the last six months. This is an increase of 6% when compared with the previous period.



What has been exceptionally demanding over the last six months has been the increase in presentation of women with additional complexities including significant and more enduring mental health problems, accompanying addictions and a number of clients also presenting with a learning disability alongside their experiences of domestic abuse. We have also seen increased levels of need both in terms of additional support needs and behavioural challenges amongst the CYP we support.

West Lothian Women's Aid





Organisations continue to report increased running costs such as utilities, resources and fuel. Many organisations offered salary uplifts to staff higher than originally budgeted in this financial year in response to the increasing cost of living. Some report they may struggle to maintain higher salary levels which may lead to reduction in staff hours and possible job losses. In addition, more survivors are requiring financial support. Numbers offered financial advice has increased by 250% when compared to the previous period.

Increasing cost of living



Our main challenge is capacity to meet demand. Numbers that we had predicted for DES to fund has increased and we are presently operating a waiting list for CYP and women's service. Due to demand on CYP service we've had to recruit a further CYP worker funded from our reserves.

Grampian Women's Aid





## **Emerging Challenges**

These challenges are new or emerging this reporting period

A range of funded organisations report that they are seeing more people affected by Intimate Image Abuse (IIA) as part of their experience of GBV.

South West Grid for Learning report a 300% rise in usage of their website from Scotland with website users spending on average 2 minutes 46 seconds on the Revenge Porn Helpline page.

Online and Intimate Image Abuse (IIA)





## **Policy Areas**

The Own my Life course
has given to me
an oasis, and safe space
of understanding and shared empathy

PTSD triggers have no place and no longer frighten me because I was able to talk them out with non-judgemental company

For years I hid what I had known of insult and abuse which made me feel each day in life that I was of no use

Being part of the group has allowed me to find a strength in myself and respect my own mind

The Own My Life course work helped me think and be free so CASWA support group A big 'Thank You' from me









## **Section 3 Policy Areas**

### 3.1 Domestic Abuse



- **81** Organisations
- 32 Local Authorities covered

#### 3.1.1 Activity Delivered

Support delivered includes, but is not limited to:

- one-to-one emotional and practical support
- group work and advocacy
- creating safety and support plans\*
- provision or facilitation of emergency accommodation (including refuge) and well-being support
- provision of or signposting to legal & financial advice
- Counselling support

\*the safety and support plans include housing safety, emotional safety and physical needs to reduce vulnerability. This is usually at the early stages of their journey.



"Support has made sense of my experience of control and has helped me to be able to see patterns of abuse" and "It is a safe place for me to talk and I know I won't be judged"

Motherwell and District Women's Aid

The impact of the support offered aims to deal with the consequences of domestic abuse which include physical, economic, emotional and social abuse.





"You saved my life"

"The refuge is our safe home, our sanctuary. The flat is beautiful, full of light, with thoughtful pictures, bedding, and so much more including a fabulous garden the boys enjoy running about in where I can watch them safely"

"I have made friends and I know there is always a safe place to come"

Perthshire Women's Aid



In terms of measuring outcomes, funded organisations used a variety of evaluation tools which were suited to the needs of those supported. These included:

- Outcomes stars
- Empowerment star (ongoing evaluation of woman's perception of her needs and her journey and measurement of her outcomes) and empowerment star action plan, activities related to supporting the woman to meet her goals;
- Rosenberg Self-Esteem Score (Angus WA)
- Safety plans ongoing evaluation of WCYP safety

The support makes a notable difference to women by offering specific and holistic services to support them through the trauma of domestic abuse.



"[worker] is just incredible – I honestly don't think I'd still be here if it wasn't for her patience and understanding. I've accessed so many services due to my partner's violence but no-where has quite been like Women's Aid, they just get it"

"[support worker] has been amazing but actually everyone - I cannot thank all the lassies enough, you's are real guardian angels, thank you, thank you from the bottom of my heart. Life is still hard and I've a long way to go but I've learnt so much and being believed, being understood and listened to – I cannae say how much that has helped"

Women's Aid East and Mid Lothian





#### 3.1.2 Mental Health and Emotional Wellbeing

This continues to be a key focus of support for those impacted by GBV. Counselling support is offered by several organisations in the portfolio including Argyll and Bute, Fife, Inverness, Ross-shire, Shakti, West Lothian Women's Aid groups and Kingdom Abuse Survivors Project.

The positive impact of direct emotional support on mental health and wellbeing is highlighted throughout reporting. Organisations include this as an integral part of support planning.

Inverness Women's Aid report that "many of our clients have significant mental health and trauma issues resulting from their abuse experiences and lack of NHS services led to the creation of a new project offering counselling sessions to adult clients, which is delivered by Scottish Counselling Services".



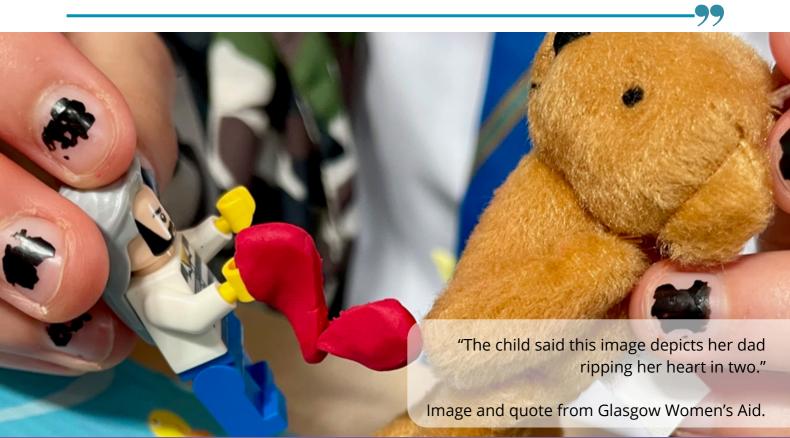
"Have come a long way the appointments have helped me very much"

"She helped me make steps to cut him out my life"

"I told her things I would have never told anyone"

"Gold star I wish I had done it ages ago"

Argyll & Bute Women's Aid

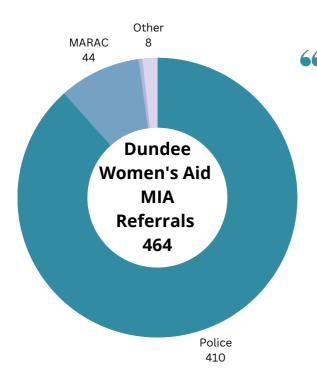


#### 3.1.3 Cross Agency Working

The following example clearly evidences the impact of cross agency working in ensuring positive outcomes for Survivors.

#### **Dundee Women's Aid - MIA (Multi-Agency Independent Advocacy)**

The MIA service provides crisis intervention and helps people at risk and their families to minimise future risks of harm. They ensure that adults continue to be supported by relevant agencies upon exiting the service.



It is no surprise that police continue to be the biggest referral agent, and this is simply down to our co-location and the effective partnership we have developed and maintained over the years. The expansion of the new court advocacy aspect of the service accounts for the rise in number of referrals. This has created an opportunity where victims of all domestic incidents in Dundee are referred to the service where there is consent.

Dundee Women's Aid

Discussing the impact of the MIA service, Dundee Women's Aid reported:

"This is a huge step forward for women experiencing domestic abuse in the Dundee area as they are all now offered a service in such a complex, overwhelming time. Medium and high-risk female victims are still prioritised; however we are proud to say that despite the new pressures and demands on the service we have been able to continue to contact all referrals in that all important 24–48-hour time period. Another positive aspect of the new court advocacy aspect is that cases are open to MIA for a longer time period due to the nature of the court processes. This has ensured that there is no gap in service when referring onto services like Dundee Women's Aid or Dundee Domestic Abuse Service and gives the opportunity for a more comprehensive joint working approach. This again is a huge improvement for women accessing support and is creating that timely, seamless support."



Ongoing funded work by SafeLives Safer Sooner network, made up of 76 professionals across the GBV sector, is focused on improving MARAC (multi-agency risk assessment conference) processes and outcomes. During the six-month period they carried out a consultation with services who support those currently underepresented at MARAC. Consultation responses will be used alongside feedback from SafeLives Authentic Voice survivor group to develop a toolkit for Scottish MARACs and contribute to ongoing work to support MARACs across Scotland.

"I don't think agencies realise how important they actually really are. It could be the difference between life or death, literally, they could be saving lives, they don't realise how important Marac really is."

SafeLives Authentic Voice Panel

#### 3.1.4 Support for Children and Young People

Activities focus on the delivery of one-to-one support to CYP, group work with CYP, advocacy, refuge provision, follow-on support, outreach services, prevention and development (with CYP and 3rd sector), and summer programmes.

Key elements incorporate tailored support plans including safety plans, domestic abuse, dating abuse, healthy relationships, gender stereotypes, self-esteem, children's rights, wellbeing and trauma recovery activities to CYP affected by domestic abuse.

"The support from women's aid has been amazing for my daughters as they have had such a hard time with their dad and needed some extra support and someone to talk to and express their feelings to that had an outside perspective, they have been able to talk openly with Viv and come home feeling happier and more at ease knowing someone is listening to them"

"I couldn't ask for more from the staff that work with my girls as they support them inside and outside school"

Clackmannanshire Women's Aid.

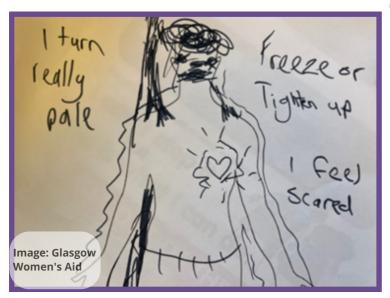
Evaluation feedback from Glasgow Women's Aid highlighted how one-to-one work with CYP had a significant impact on wellbeing and feelings of safety.

"96% of C&YP told us 'I now understand ways to keep myself safe.'"

Glasgow Women's Aid









"I learned about safe adults"

"That I can talk to other people about my feelings instead of keeping those feelings to myself and letting them build-up"

"I got a ring doorbell and learned a lot about staying safe" (from Enough! service)

Glasgow Women's Aid





"It's good to know I can talk to you and I won't hurt your feelings. I always worry I will hurt my Mum if I tell her how I'm really feeling"

> 13 year old supported by Dumbarton District Women's Aid

Other examples of work being delivered for CYP include the Relax Kids programme developed by Glasgow Women's Aid to help children develop gentle self-care skills, through yoga, guided meditation and focused talking activities. The group also helps to promote their well-being with targeted interventions to increase children's sense of self-worth. This was done through individual reflection and group activity; promoting healthy and nurturing relationships between the children.







## + 3.1.5 New and Innovative Activity

While much of the funded activity is established and ongoing frontline work, organisations are also delivering new and innovative activity.

Women's Aid East and Mid Lothian (WAEML) have developed equality champions (made up of staff and service users). They actively work to eradicate discrimination, harassment or victimisation within the organisation. An equality champion will aim to ensure their workplace and service is a safe space for all and that everyone feels safe, welcomed, valued, included and respected. Their groups are themed on areas including age, belief, disability, LGBT, minority ethnic communities.

Work has included updating their trans inclusion policy, introducing pronoun badges within support services/group work programmes for staff and service users and updating staff training on LGBT awareness. The group have also been doing joint work with their age champions following feedback from young people requesting WAEML develop a position on support available for non-binary people.

A couple of organisations have stated that they are piloting the Decider skills course. Lochaber Women's Aid has trained 4 staff who are now certified facilitators and report that the initial course was a great success.

The skills within this course are designed to improve mental health and can be used by adults and children to defuse challenging or stressful situations. They are particularly useful for families to implement in the family home. Quotes from attendees included:



It was great to see both the mums and the children realising how they were not always listening to each other or considering each others' views. Using the skills taught helped them take some time out before acting impulsively and creating a bad outcome from them all.

They could manage their emotions after completing the course and were using the skills learnt on a regular basis. They all agreed they now listened better and were able to resolve any issues quicker and with less drama.

Lochaber Women's Aid





## 3.2 Specialist and Targeted Support

DES funding continues to contribute to projects which offer targeted GBV support to people who share multiple protected characteristics. People experiencing GBV who are affected by alcohol and/or substance use, women with learning disabilities, Deaf women, LGBT people and black and minority ethnic women are all provided with targeted support through DES funded activity.

For new projects funded through DES, the initial six-month period was largely focused on project development and set up. During the most recent six-month period, projects have now made significant progress and all have reported on the positive impact that direct targeted support has had on the lives of the groups they work with.

#### 3.2.1 Improving Outcomes for People with Learning Disabilities

Central Advocacy Partners (CAP) provide direct support to people with learning disabilities affected by GBV. Like other frontline support work, safety is a key focus. Establishing trust and developing safety planning typically takes place over a longer period of support as many people worked with have had poor experiences when interacting with statutory and other services in the past. CAP highlight that some people they work with have been labelled as 'non-engaging' or 'difficult' to work with previously which has heightened barriers to support. CAP workers spend time building trust and understanding to increase individual knowledge of their rights and ensure the people they work with can share their opinion and feel valued.

Advocacy workers support those experiencing GBV, for example, in interactions with Police, engaging with social work, meeting solicitors, meeting with health professionals, securing housing and so on. They work with people to help prepare for meetings by breaking down complicated information, ensuring those supported have a clear understanding of different scenarios and processes and are able to participate in a way that works for them.





This has proved particularly helpful in meetings regarding the children of those supported. CAP report that they see a high number of cases where children have been removed from mothers with learning disabilities where they are the non-offending parent, often contrary to the principles of Safe & Together. Their workers supported a number of women during the six-month period who were attending Children's Panel meetings. By working with them prior to the panel they were able to help them determine what they wanted to say or offer to advocate for them. Such support also helped improve awareness and understanding amongst panel members and ensured flexibility in processes.

In one Children's Panel meeting a woman being supported had become angry and was being advised by panel members to 'calm down'. Advocacy workers were able to highlight the impact of her learning disability on her communication and advocate on her behalf. This led to the panel being able to continue after a break and the woman being able to participate fully in discussions about her children. She later reported she felt 'respected and listened too'.

I handled things better, I got my point across, and professionals have listened more because I've had someone sitting next to me advocating for me.

Partner supported by Central Advocacy Partners through advocacy at Children's Panel

It is clear that, while other GBV organisations are able to support people with learning disabilities and are working to become more inclusive, specialist targeted work is essential to ensure the needs of people with learning disabilities experiencing GBV are met. During the six-month period CAP regularly received referrals and requests for advice and support from other GBV services.

"I have been struck by how vulnerable and open to exploitation this client group are, so I really appreciated your input. The additional time, patience and skill involved in working with adults with a learning disability is significant. You guys are providing an amazing and invaluable service"

Domestic Abuse Advocacy Worker from third sector discussing CAP





Ongoing research and development by The Scottish Commission for People with Learning Disabilities (SCLD) and People First (Scotland) continues to raise awareness of the experiences of women with learning disabilities and improve responses to those affected by GBV. A report on research into current GBV provision is expected to be released to coincide with SCLD's conference on GBV and learning disabilities due to take place in March 2023.\* Women with learning disabilities have been at the heart of this research work, co-designing and leading on its development as well as sharing their own experiences.



\*SCLD's Report , 'Unheard, Unequal, Unjust: But Not Hidden Anymore' has since been released and can be accessed <u>here</u>

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"The Equally Safe Group has helped members to try and move on, be open about personal experiences, and help others. For so long we have been on our own and not able to talk about this. But now we get to speak with others about experiences like ours. If we're on our own, others will need comfort and support too. This is what is keeping us working and why this project is so important."

Member of SCLD & People First (Scotland)'s Equally Safe Group made up of eight women with learning disabilities







#### 3.2.2 Frontline support and awareness raising for Deaf people

DeafLinks, in partnership with Angus Women's Aid, Dundee Women's Aid and Perthshire Women's Aid continue to improve responses to GBV for Deaf people across Tayside. Through one-to-one support and group awareness raising, they highlighted the importance of improving understanding of GBV.

Their work further underlines what they describe as a 'knowledge gap' between Deaf people and others in the general population in respect of GBV. The majority of people they work with use BSL as their first language and many cannot read or write in English. Without hearing they do not pick up information that those in the 'hearing world' may take for granted. Workers report that this gap in knowledge and understanding is particularly apparent around sex, consent and GBV. To address this, the project have developed a series of workshops and information sessions delivered in BSL. Attendance at these sessions has grown rapidly through the six-month period with the project running a total of 16 sessions.



sessions





Quotes from people attending Deaf Links awareness raising sessions

The impact of these sessions has been incredible – people aged 19 to 82 have attended and discussed their experiences of GBV, often for the first time. This has led many to develop knowledge they otherwise had no access to. For some it has allowed them to identify GBV that they have experienced while for others it has ensured they are aware of their rights. This has led to people receiving one-to-one support from partnered Women's Aid organisations including one women accessing refuge accommodation from Dundee Women's Aid. She sought support after attending a session on domestic abuse and realising that the experiences mirrored those in her own marriage.

## 3.2.3 Improved Support for People affected by Substance/Alcohol Use

Liber8 and WASLER's Saoirse Project worked with 88 people during the six-month period. The majority presented to the project experiencing domestic abuse and alcohol or substance use was then also disclosed. Reporting highlights the value of combining the expertise of Liber8 and WASLER staff to ensure people can access specialist support that meets their needs on a more holistic basis. The 'one door approach' helps remove barriers often faced by women such as multiple assessments and going through traumatic experiences with more than one person.

Those attending Saiorse were pleased when Equalities Minister Christina McKelvie visited during October 2022 as they felt it "helped their voice to be heard".

Wellbeing groups focused on activities such as arts and crafts, gardening and jewellery making, are hosted regularly by Saoirse.

These sessions have also helped facilitate conversations on mental health, substance use and domestic abuse. Those supported report that they value learning from others experiences.



#### 3.2.4 Tackling Economic Abuse

GEMAP's Financially Included project is unique within the portfolio in its focus on improving knowledge, understanding and practice around economic abuse across the advice sector and GBV support services in Glasgow. While the initial six-month period was focused primarily on establishing the project, recent reporting includes the delivery of direct financial advice to 111 people in total. Financial support is delivered on a one-to-one basis from their office, in the community, or during outreach sessions held at Saheliya. Support is led by the needs of each person however, advisors commonly support people with benefits applications, medical assessments for disability benefits, crisis grant applications, income maximisation, housing and energy.



While the advice sector can offer similar support it is clear the needs of those accessing Financially Included often fall outwith those met by mainstream advice services. Appointments with those who have experienced economic abuse can take much longer, gathering of financial information is often a more complex and potentially dangerous task, and support needed often differs.



**GEMAP's Financially** 

Included

In the recent six-month period advisors helped three women who live with a perpetrator of domestic abuse to explore their entitlements and how they may support themselves if they leave. This advice allowed women to explore the practicalities of leaving so that they may do so in an informed and safe way as possible. This requires knowledge of domestic abuse, safeguarding and awareness of other domestic abuse support available.

Women who have coerced debt have been supported by advisors who are able to engage with private credit companies, banks etc, to provide evidence of abuse and debts being incurred as a result of this abuse. This has led to debt solutions being explored or debt being written-off completely in some cases. During the six-month period advisors have been able to secure a total of £118,379.50 for those they have supported. Often the impacts of economic abuse last for many years.

#### 3.2.5 Direct Support for LGBTI+ people

While the majority of funded frontline activity is targeted at women, non-binary people and children who have experienced GBV, Sacro's FearFree project provides support to men and LGBTI people. They have seen a rising number of referrals in the recent six-month period including those relating to male victims in heterosexual relationships. Similarly to other domestic abuse services, FearFree provided key support around safety planning, housing and accessing financial assistance. A significant amount of FearFree's work is focused on improving understanding and advocating for people as they interact with statutory services.

"I finally have a house I can call home and can move forward in my life with my children. Thanks so much. Your advice on how to stay safe and what to do when I was abused worked so well. Calling the Police was a huge step but with your help I was able to explain things and they arrested her. Making housing understand my needs as well, really helped as I got so nervous speaking to them."

Person supported by Sacro's FearFree project





Minority ethnic women and young people who are at risk of suffering domestic abuse or honour based violence (HBV) are also being supported in relation to their gender or sexual identity.

Shakti's LGBTI Maitri Project provides direct support to LGBTI people as well as raising awareness about the barriers/issues they face. They supported seven individuals with a sensitive, person-centred approach, addressing each individual's needs and understanding the cultural, family and community context that each case has presented. In addition, Shakti have supported an HBV/ human trafficking/asylum seeker case with a very robust safety planning framework in collaboration with Police Scotland as well as working closely with others to produce safety plans to significantly reduce their risk of HBV, forced marriage and domestic abuse.

They are working closely with LGBT Youth Scotland and held LGBTI Awareness: Live Action Planning Workshop in April, in collaboration with them. The media work included a public campaign for the Pride Month in June 2022.



For the campaign we created posts for social media and tagged people / organisations in them, changed our organisation email signatures to reflect pride month. Our champions held regular meetings with all staff, created content and scheduled on social media and planned a webinar to introduce our LGBTI service. This campaign helped us to raise awareness about the issues that affect BME LGBTI individuals and what Shakti Women's Aid could do to help. We attended Edinburgh Pride. Maitri has been a pioneer in Scotland in addressing the very specific needs of highly isolated, stigmatised, and vulnerable individuals from BME communities. One of the main difficulties in assessing the needs of the individuals was when individuals felt guilty and shameful to seek help.

Shakti Women's Aid

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Organisations reported that more work with the communities, education establishments and use of social media to share positive messages and campaigns could motivate more individuals to come forward. They report that there is still a lot of unconscious bias and discrimination towards LGBTI individuals from all communities.

LGBTI+ Awareness Raising and Education





# 3.3 Honour Based Violence and Support for Black and Minority Ethnic People



#### 3.3.1 Activity Delivered

Twelve funded organisations provide frontline, specialist support services to people from minority ethnic groups facing GBV. This work includes support fleeing domestic abuse, living within abusive relationships, or for those experiencing HBV.

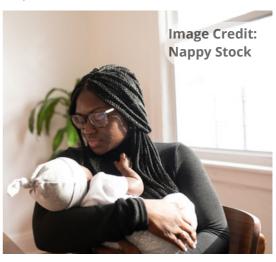
The key elements of support are similar to frontline domestic abuse support:

- One-to-one and group support work
- Person centred safety and support planning
- Refuge services
- Crisis and outreach services

#### 3.3.2 Language and Culturally specific support

Importantly, support provided by specialist minority ethnic organisations is culturally sensitive and targeted to the individual needs of each person. Organisations funded to work with black and minority ethnic people can provide essential support in their own language through support from staff and interpreters.

The value of culturally specific support delivered in a person's own language is highlighted throughout reporting. Demand for such support is high. Glasgow & Clyde Rape Crisis Centre report that they have supported an additional 22 BAME women and girls through the Criminal Justice System during this period, providing essential advocacy and ensuring they have the information and confidence to engage fully with the system.





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We are currently supporting 76 women from 21 different countries, speaking 18 different languages and who have experienced rape and sexual assault through trafficking for commercial sexual exploitation, female genital mutilation, forced marriage, honour-based violence and domestic violence.

We have also supported 5 women to attend their substantive Home Office Asylum Interview and 1 woman to attend a Tribunal appeal.

Glasgow and Clyde Rape Crisis

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Organisations often support women from black and minority ethnic communities to confront the cultural barriers they face. They work with women to address these barriers, as well as carrying out awareness raising activities within the communities and with other stakeholders. This focuses on addressing issues like shame, family dishonour and HBV and aims to empower women.

Reporting shows women from black and minority ethnic communities have complex needs, which are often compounded by existing barriers and access to knowledge and awareness of rights, responsibilities and entitlements.

Support for C&YP focuses in on helping them build a trusting relationship with their key worker and talk about their experiences in a way that will help them to understand and explore their thoughts, feelings and emotions and address the impact of domestic abuse. A number of organisations deliver advocacy support for C&YP which includes participating in a range of meetings with external agencies to ensure they are supported and represented. Organisations report supporting C&YP in meetings with education services, social work, mental health teams, Police Scotland and a range of legal services. High risk cases are referred and discussed at Marac.

"F is a single parent of 3 children, she fled from Nigeria after experiencing FGM and feeling fearful for her 2 daughters. After claiming asylum in the UK, she has waited over a year for her substantive interview due to availability of interpreters in her language. F suffers from a deep fear of being sent back to Nigeria and her life has been threatened if she does return, she suffers from flashbacks, anxiety, depression, sleep issues and physical problems connected to the FGM procedure carried out on her."

Glasgow and Clyde Rape Crisis





Feedback from one person who accessed support through Shakti's service demonstrates the difference this work makes.



So blessed to have this important help in all forms and ways. I'm still receiving support from Shakti, as member of the LGBTQ community I have been participating in the pride march, information meetings and events, as well my caseworker is qualified highly in LGBTQ, and other tools to work with people like me who are in vulnerable situations, receiving shelter, finding ways to recover from the abusive relationship I was in, and going ahead to sort out legal issues, medicals concerns and working on my behalf and wellbeing, treating me with respect, considerations and helping me out to find my way back to sooner recovering from the traumatic events. Reminds us that we can break the circle of violence if we decide to... It's from vital importance to have this organisation that supports us, thanks for those who make possible to continue this process going on, on behalf of who require help, support and encourage to continue ourselves with empowerment through education, mental health services, research and development of services. Thanks to God and SHAKTI WOMAN'S AID service I got a new chance to live a dignified life away from domestic abuse. Kindly regards, blessings always.

#### 3.3.3 FGM

Funded organisations providing support to people who have experienced FGM continue to report positive outcomes.

Multi-cultural family base (MCFB) continue to support black and minority ethnic women, children and young people affected by GBV. They supported 46 adults and 21 children & young people during the six-month period and of those over half were affected by FGM, 41% by Domestic Abuse, 31% by forced marriage and 19% had received threats related to honour. Through one-to-one support workers were primarily able to assess safety and put in place practical measures.

Often women have not spoken to anyone about their experiences of FGM prior to connecting with the project. Learning more about FGM has a powerful impact on those supported helping them to better understand their experience including the cultural background to such practices. For some this has allowed them to acknowledge and begin to process trauma as well as explore practical ways to address ongoing pain. The following feedback from one young woman supported by MCFB highlights the power of this support.





I was unaware that not every woman had FGM done, I thought we were are all "the same". Firstly, I was so angry, I wanted to call my mum and shout at her asking "what have you done, how could you"?, I never wanted to speak to her again but that all passed as I realised that she's actually done this for my own good as she believed I would have better life. It was a real "Act of Love", to provide for me, give me better prospects in life, get a good husband who would love me and my children, in short to be as happy as any woman from our community could be. Isn't that irony? I am not angry with her anymore, we speak often but I will never allow this to happen to my daughters. This harmful practice robbed me of my childhood, of my womanhood so I will do anything in my power to stop it from happening.

During my pregnancy there was time when I was constantly balancing between being angry at my family and feeling guilty at the same time. I was referred to Bright Choices service by my midwife and it was literally a life changer. I was supported by them and learned that although I had no control over my past traumatic experience I have my life in my hands now. I learned the ways how I can protect my own daughters especially when there are still people in my community who think that FGM is part of our culture and should continue. I believe I would be able to make difference in delivering service regarding FGM and want to help people just as I was offered help.

Multi-cultural Family Base

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As well as frontline work with those affected by FGM, DES funding also contributes to ongoing awareness raising work. During the six-month period Women's Support Project have continued to deliver workshops and training on FGM and harmful practices. Through delivering multi-agency webinars they were able to connect with a range of professionals and raise awareness of FGM including early signs and ensure responses from statutory and third sector organisations continue to improve.

Some organisations (JustRight and Women's Support Project) have postponed elements of their funded work related to the implementation of the 2020 FGM Act and supporting guidance as they await further developments within Scottish Government.





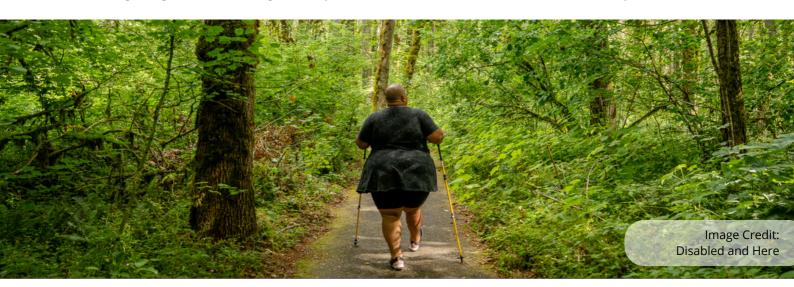
#### 3.3.4 Support for Asylum Seekers and Refugees

Asylum seekers and refugees who are affected by GBV have continued to receive support through British Red Cross' Women's Support Service during the recent sixmonth period. One to one support helped address the needs of 188 women who contacted their emergency enquiry line during the six-month period. Workers commonly supported people to access asylum legal advice, through their asylum claim, and with destitution, health and accomodation. Often those worked with require support to meet their basic needs, especially those who have no recourse to public funds. This includes support to access NHS care and housing. Women may have experienced GBV in the past, including in a country they have travelled from, or be experiencing it currently. The project works with women of varying experiences including those affected by domestic abuse, sexual abuse, trafficking and Commercial Sexual Exploitation.

# Immigration status and awareness of rights and systems in Scotland make many vulnerable to ongoing GBV.

Legal support and advice for women, children & YP affected by gender based violence is provided by Just Right Scotland. During the six-month period they helped obtain leave to remain for a number of women and children – including securing Refugee Status for an unaccompanied asylum seeking child survivor of sexual violence and indefinite leave to remain for an adult survivor of domestic abuse.

They have been able to advise and represent a number of victims of trafficking to ensure they are treated as such by the law and provided with emotional support where needed. Through regular legal surgeries they are able to inform women of their rights and give one off advice. For example, one woman experiencing domestic abuse had a visa dependent on her spouse. The Solicitor was able to advise her of her legal rights and immigration position should she choose to leave her partner.







#### 3.4 Sexual Abuse



There are a number of organisations, most notably but not exclusively, Rape Crisis Centres, where tackling and raising awareness of sexual abuse is the primary focus.

The DES portfolio includes all 17 Rape Crisis Centres who operate across Scotland. All receive funding for core activities as well as some project work. Each of the organisations is autonomous, and has developed their service in accordance with the needs of their area, with support and guidance from Rape Crisis Scotland.

#### 3.4.1 Activity Delivered

Frontline support is survivor centered and trauma informed and is primarily available to people aged 13 and over. The frontline services have continued to provide essential core services throughout this period including:

- One to one support for adults
- One to one support for children
- Groupwork
- Advocacy
- Awareness Raising through training and campaigns with community, schools, other agencies and professionals

#### 3.4.2 One to One Support

One to One support work is person-centred and adapted to the needs of the organisation and the survivors. Rape Crisis Centres provide support for both children, young people and adults. The age bands vary between centres, typically the youngest age supported is 11 and above.

One to one support tends to be offered in blocks of support though these can be extended if required or a survivor can re-engage at a later date. Support options are reviewed regularly to ensure they are the most effective way for their local needs.



During the term of this report face to face appointments are being held more regularly, though services continue to offer the option of phone calls, texts and online meetings to add to the range of support methods they have in place.







# "When you finally reach a point that you're ready to talk, you almost want access [to support] immediately"

Rape Crisis Scotland Survivor Survey, 2020

Edinburgh Rape Crisis Centre also aims to offer a quick response after referral with a service called Here and Now where adult survivors are offered up to 6 sessions of immediate practical and emotional support as soon as possible after referral. Initially they were able to provide support within weeks, however the increased demand has meant that they now operate a waiting list for this service, with most people being offered support within six months.

The blocks of one to one support that are offered vary for children and young people and for adults. For instance WRASAC Dundee and Angus offer up to 24 sessions of emotional support to survivors. Each session is a safe and confidential space for survivors to process the trauma they have experienced at their own pace. They use a range of practical and therapeutic interventions all of which are survivor centered in order that they empower and support women to understand how the sexual violence has impacted them and to identify what they need to feel safer and to be able to manage and cope better.

ERCC Young Person Service, STAR, has delivered holistic and trauma informed support to young people, aged 12-18, offering up to 18 sessions of practical and emotional support, providing a safe space to explore their experiences.



It seems strange to me we have never met yet here is a woman I will never forget Buckle up, enjoy the ride, welcome to the rollercoaster I call my life Always ups and down I never have much luck, deal with it, move on, don't get stuck

Calls of laughter, calls of tears, with each one you've helped me with my fears Our time together will soon be done, I'm truly blessed you've been my one Onwards and upwards, no looking back, only love and light ahead on this track

A poem written by a survivor supported by WRASAC Dundee and Angus







"In the time I have been seeing my support worker at ABRC I have seen such positive changes in myself, that I never would have imagined possible. When I began my sessions I was wrought with self-hate, disgust and shame. I was not only struggling to deal with past traumas, I was becoming increasingly haunted by them."

Survivor supported by Argyll and Bute Rape Crisis Centre



#### 3.4.3 Group Support Work



Group work is increasing following the removal of covid restrictions. For some people there was still anxiety about meeting face to face and in enclosed spaces, but the reports show that organisations are being responsive and flexible in finding suitable outreach venues, or arranging outdoor meetings and walks.

The number of people attending the sessions is increasing and organisations are developing new opportunities for people to meet, offering therapeutic benefits and peer support.

In some services staff absence and vacancies has impacted on staff capacity, meaning that group work sessions have not been happening as expected, as the one to one sessions are prioritised over these.







The Scottish Borders Rape Crisis Centre has a year long project happening through their group work. The Natural Dye Project, allowing survivors to get involved with the growing and harvesting of flowers and plants to use to create dyes for arts and craft work, including dyeing alpaca wool.





Image Credit: Scottish Borders Rape Crisis Centre

#### 3.4.4. Advocacy

There is a wide range of advocacy and practical support offered across the sector – reflecting the range of issues and needs.

#### This can include:

- Guidance through the Criminal Justice System
- Support with child protection cases
- Access to GUM clinics and health needs
- Assistance with housing, benefits and education
- Practical support through provision of food, clothing banks and energy utilities vouchers

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Finally how I feel safer I can walk around town without feeling anxious as much, its given me more confidence I don't worry about anyone coming to my door any more, its took 7 months but I can finally eat and sleep again after narcissistic abuse and having had gone to court and the man who put me in hospital had to plead guilty which made me feel a lot better that the abuse was real I didn't imagine it and that I've been through the worst of my recovery and have now started my HNC Beauty therapy course again just yesterday.

West Lothian Council (Court Advocacy)





#### 3.4.5 Criminal Justice System

There are still significant delays with the court system, caused in part by the backlog after covid restrictions. Many of the organisations provide support for survivors going through the court system. This can be long and complex and can re-traumatise survivors. Having support and advocacy to better understand what to expect of the process can make it less distressing.

RASAC PK have produced a <u>short video</u> which explains the support that a survivor can expect from the Justice Advocacy worker.



"Me and the kids have a new happy life now. Court is over with and it's time to be happy. Your help and support has been life saving for us, couldn't have done it all without you"

Monklands Women's Aid



Glasgow and Clyde Rape Crisis has a Justice Team which supports survivors to understand and make decisions involving their progress through the Justice system. They empowered and supported the 215 women and girls in their caseload, in over 3,591 hours of support and advocacy, to feel confident and in control of the criminal justice process happening around them, to know the next steps and to contribute to the process in a meaningful way. They work closely with Police Scotland and Crown Office Procurator Fiscal Service, holding regular meetings to ensure that the lines of communication were always open and clear and to provide mutual feedback on their services and ensure the voices of our survivors were heard.



ORSAS (Orkney Rape and Sexual Assault Service) report that Orkney have been involved in the Visually Recorded Interview (VRI) Pilot to record rape complainers' initial statement to the police. The two year VRI Pilot, which concluded last year, was delivered by Police Scotland, COPFS, Rape Crisis Scotland and the Scottish Government within three areas across Scotland (Highland and Islands, Edinburgh, and Dumfries and Galloway). The aim is that applications are made to the court to have the VRIs admitted in evidence at any subsequent trial as evidence-in-chief and combined with applications to pre-record any further evidence by commissioner (including the cross-examination). The combination of these measures - VRI and evidence by commissioner - assists in capturing evidence as early as possible and reduces or removes the physical requirement to give evidence at trial.



ORSAS also report that the development of VRI and the training of one of the local CID officers as a SOLO (Sexual Offences Liaison Officer) has meant that adult survivors now have the option to record their evidence. This can half the time taken from what can be a lengthy process.

Although this is not a solution for survivors with a camera trauma trigger, the mobility of the system makes it easy to record statements in most venues. Most witnesses in Orkney are now being offered video links from Kirkwall Sheriff Court to deliver their evidence rather than endure a fortnight long floating trial on mainland Scotland. Delivering evidence remotely is less triggering, quicker and for women who are carers mean they can be home with their families in a less stressful environment.

The VRI Pilot is currently subject to evaluation to support an informed decision on enhancing access to other parts of Scotland to embed a holistic response for survivors and to realise the aim of removing or reducing the need to attend court. In the meantime, Police Scotland continue to carry out VRIs within the original pilot areas.



#### 3.4.6 New and Innovative Activity

To help to deal with this increase in referrals, services have continued to review their process for responding to referrals, with some offering a few immediate crisis sessions, check-in appointments and developing new resources to give survivors some self-management tools while they are waiting for their one to one support sessions to start.

Rape and Sexual Assault Highlands (RASAH) highlighted the importance of being able to access support quickly - 92% of survivors reported that access to immediate support was crucial,

In May 2022, RASAH adapted their service model to introduce immediate support sessions at the point of referral and brought in blocks of support sessions. This has helped to reduce the waiting time by 9 months. However, there is still pressure on the service as referrals increase. RASAH has produced a welcome pack that survivors can use to help understand trauma and its impacts, as well as access grounding tools and coping techniques. They have also developed an animated version to increase access to support for those with additional support needs, young survivors, and people for whom language is a barrier and will make this available for all survivors accessing their service as well as on their website/social media.

Forth Valley Rape Crisis aim to contact new referrals to arrange an appointment for an initial assessment of needs within a week. Once on the waiting list for their block of 15 one to one sessions (if appropriate for them) they receive ongoing check-in support at fortnightly intervals to ensure they continue to feel supported, safer and so that any urgent needs can be identified and prioritised appropriately.







Several noted an increase in the number of young survivors being referred and have adapted their support for young people to meet this need. Again this may be due to raised awareness due to high profile cases and social media campaigns.

RASAC Perth and Kinross also noted anecdotal evidence that there has been an increase in older women coming forward and so attended a local "older peoples day" event to raise awareness of the service amongst this demographic with flyers, keyrings and wristbands given out to those who may require the service. They are liaising with other agencies to see if this trend has been noted elsewhere in the area and to find out if there is an underlying cause for it.

Forth Valley Rape Crisis Centre has introduced a trauma informed message service, which some survivors have been accessing alongside their one-to-one therapeutic support sessions.

SAY Women has been offering sessions with a trauma informed hairdresser for the young women they support in their semi-supported accommodation.



"Since regularly seeing my worker, I now feel so freed from the weight and shame of my past. I no longer see myself as culpable or responsible in my own abuse and consequently feel the burden of self-disgust and hate continually dissipating. I feel more empowered by the day and I am so grateful to finally be moving past the abusive episodes survived."

Argyll and Bute Rape Crisis



The number of partnerships and collaborations also continues to increase with organisations reporting on a number of formal and informal partnerships that they are involved with; sharing their expertise, providing training and bringing in other sources of support for survivors.

Multi agency partnerships allow them to share information and support for women who have been identified as vulnerable due to ongoing complex support needs. For instance WRASAC Dundee and Angus takes part in the multi-agency triage meeting which is regularly attended by representatives from statutory services, community mental health, social work, police and psychiatric services. They are able to discuss the best route of support for women who are at risk of disengaging and who are usually in crisis. The sharing of knowledge can sometimes identify if there is a service that the woman is engaging with and identify a joint approach for support.



# 3.5 Intimate Image Abuse

# 4 Organisations National

Intimate image abuse (IIA) or image-based sexual abuse has continued to evolve in recent years with reporting highlighting how new and developing technology is leading to increasingly complex behaviours.

Through DES funding, South West Grid for Learning (SWGfL) continue to operate the Revenge Porn Helpline (RPH) for callers throughout Scotland. Support includes advice on rights, signposting to emotional support and practical assistance in pursuing the removal of intimate images.

SWGfL report a 94% removal rate of intimate images during the sixmonth period for those calling from Scotland.

Networking and relationship building with organisations throughout Scotland has improved referral pathways to the helpline and ensured that helpline workers have been able to signpost callers to appropriate local support for ongoing emotional support related to their experiences. Helpline workers continue to use adaptive technologies to locate, request and secure the removal of intimate images. Reporting from SWGfL continues to evidence the gendered nature of IIA with women overwhelmingly more likely to come forward.



Funded organisations working across a range of policy areas highlight that IIA is being faced more and more by those they support. Funded projects that work with young people, including students, report increased prevalence of image-based abuse. In the delivery of awareness raising sessions at schools, colleges and universities, Emily Test report receiving disclosures of IIA from young people. Similarly, rape crisis centres offering support to young people report that IIA is an ongoing theme for those at secondary school.

Shetland Rape Crisis Centre's campaign on sexual harassment and IIA received almost 200 submissions from the community demonstrating the interest in this area.



Given the widespread nature of IIA, a key focus for SWGfL's ongoing work has been increasing knowledge and awareness of IIA within Scotland. In the first six-month period SWGfL worked extensively to update Scotland-specific information on their website. They report a 300% rise in usage of their website from Scotland with website users spending on average 2 minutes 46 seconds on the Revenge Porn Helpline page. The delivery of training to professionals throughout Scotland has undoubtedly contributed to the increased traffic to their website.

During the most recent six-month period SWGfL hosted 15 information and training sessions for professionals in Scotland and reached 530 people in total. Training focused on providing an overview of intimate image abuse, including the legal framework in Scotland, and information on the RPH. Training was targeted at GBV support services including Rape Crisis, Women's Aid and VAWP organisations. Such training has proved effective in ensuring those impacted by intimate image abuse are made aware of the helpline and practical support that can be provided.

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It's been really helpful and reassuring to know there are services like yours that exist, that there's somewhere we can refer survivors and that something practical can be done for them in a time that feels very out of control.

Participant in SWGfL's training on Intimate Image Abuse

SWGfL report that they consistently receive questions at training events about support available for those under 18 who are impacted by the non-consensual sharing of intimate images. They do not provide support for this age group as such images do not fall under the same legal provisions as 'revenge porn', however there are other routes of support for those under 18 who are impacted by the non-consensual sharing of intimate images\*.

Under 18s

**Rural Support** 

SWGfL has identified that IIA in rural communities raises unique concerns, for example as a result of the size of communities, and awareness of laws and support available surround IIA appears more limited. As such, during the next six-month period they plan to carry out more focused training with services based in rural areas. This will include work with local police to improve understanding of laws surrounding IIA and ensure those impacted are signposted to appropriate support.

\*For information please visit the Scottish Government website 'How to report inappropriate content online'





#### 3.6 CEDAR



7 Organisations

6 Local Authorities covered

CEDAR (Children Experiencing Domestic Abuse Recovery) is a unique model working with groups of children and young people in parallel with groups of their mothers over 12 weeks to aid their recovery from Domestic Abuse. A key aspect of the programme is the opportunity to share experience and understanding amongst peers, employing creative and fun activities to keep children engaged whilst equipping mothers to help their children recover from Domestic Abuse.



CEDAR groups are about creating a safe place for children and their mothers to enable them to help each other to find the best strategies to process their adverse experiences, repair the damage to the mother/child relationship often fragmented as a result of the abuse and begin the journey to rebuild their lives.

West Lothian Council

Many of the children we are working with have not come across other people their age who understand what they have gone through. It is clear to see from very early on in the programme that the shared experience within the group helps children to feel comfortable and share their own experiences and support with each other.

**Dundee City Council** 



177 people engaged in CEDAR

33 more when compared with previous six month period





INSPIRING SCOTLAND



Although organisations are finding the delivery of CEDAR at local schools to be a useful way to relax families into a more familiar safe environment, a couple of projects have highlighted some challenges. Sessions must be run during term time as holidays affected capability to attend group work sessions, and there were also some who came across a lack of engagement from schools themselves despite contact being made to raise awareness of the programme.

When the coordinators first came into post, emails to all Head Teachers and Deputy Head Teachers of high schools were sent out, highlighting CEDAR as a new domestic abuse recovery programme. However, we found the uptake of the project was not as high as was expected from high schools. This is perhaps due to a lack of family workers based in high schools, where there are larger numbers of pupils, or an influx of other new projects making links with schools. We are hopeful that this will improve for the January set of groups starting as we are due to attend a citywide Guidance Network meeting in October, and we have also built a relationship with the Education Support Office for Health and Wellbeing.

**Dundee City Council** 

One organisation, Fife Council, reported a drop in referrals from partner agencies, alongside an increase of families who seemed to have not quite met the criteria or dropped out of the programme. This seems to be due to the dip in advertisement, limited delivery, and extended waiting times during the Covid-19 lockdown when face-to-face CEDAR groups weren't able to meet which has been compounded by shifts in staff across partner agencies that have been experiencing the sector-wide challenges with retention and recruitment. Despite this dip in referrals for some from partner agencies, the demand is high and waiting lists continue to be a challenge.

The coordinators have therefore been proactive in having a more visible presence across our networks, attending team meetings and locality networking events to raise the profile and inform staff of what CEDAR+ offers, the criteria families must meet and the referral process. For those families who have chosen not to progress many were in different situations from point of referral and no longer felt there was a requirement for CEDAR / EYDAR. Others felt that the timing was not right, some of whom remain on the waiting list, whilst others have chosen to be removed. They however hold the relevant information if in the future they would wish to reconsider. Through reviewing our data and referrals what we are achieving is a shorter timescale for families to wait to participate in the group, although the smaller pool of families can create its own challenges.

Fife Council



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Pre-CEDAR support is now being delivered by several organisations, who are reporting that not only is the waiting list itself presenting a barrier, but that the needs of families are increasingly complex and factors such as poverty, poor mental health and the cost-of-living crisis are exacerbating the difficulties in getting families access to the programme.



EYDAR (Early Years Domestic Abuse Recovery) provision of safe transport (child seats) was a real challenge, particularly for mums who do not have cars, car seats or the resources to buy them to enable their children to get to the group.

Scottish Borders Council





Many organisations are finding the return to face-to-face working with families is positively affecting CEDAR groups. The in-person sessions allow participants to feel more connected with others who have had similar experiences, which in turn frees them up to feel more comfortable sharing their stories.



This was the first year that we were able to deliver face-to-face groupwork since 2019 which was very positive, especially for the women, being able to sit in a room together and share their stories and experiences was powerful. Previous women's groups had struggled with the remote sessions, so we had a higher attrition rate as a result.

West Lothian Council





A number of organisations have also commented on the processes around CEDAR group sessions being more key to the delivery of the programme than initially expected. Some have found that children taxi-sharing on the way to sessions has markedly promoted their relationships with each other, whilst others have found that delivering the adult sessions in familiar environments such as community schools really helped in making them feel more comfortable in participating. Enabling families to attend by providing appropriate transportation to and from venues has become more important than ever in the current cost-of-living crisis.



The CEDAR programme is targeted at families who are assessed as in recovery and are post-crisis however we are learning that this a very fragile time for families who can be thrust back into crisis very quickly because they don't have the resources or supports to overcome them.

Renfrewshire Council Children's Services





# 3.7 Safe and Together



11 organisations across 14 Local Authorities delivered Safe and Together training during this six-month period.

A number of organisations experienced difficulty getting activity going due to issues with recruitment and capacity and have therefore only just started to deliver Safe and Together training in this reporting period. Others are further into DES-funded activity and are moving towards methods of embedding the model within their organisations.

There is an ongoing challenge around getting Board members and staff released to plan, deliver, and attend workshops. This is due to a number of factors including limited capacity making it difficult to free staff for training, delays in recruiting Safe and Together Coordinators as well and staff absences due to Covid etc. Several organisations have also commented on competing demands and training priorities being an issue in terms of getting management on board to help deliver the training to frontline staff.



Identifying dates for the Blended Core Training has been challenging to fit in around trainers availability. This has been further compounded by competing demands for frontline staff and significant pressures on agencies.

Dumfries & Galloway Council

One challenge that we have faced throughout this reporting period is the release of staff to attend training, across the organisation. This appears to be a challenge due to many different factors such as staff recruitment and retention, and staff absence which has impacted on the release of staff to attend the training. Additionally, competing demand on practitioner workload is impacting on their ability to attend or fully participate in the training.

North Lanarkshire Council





A couple of organisations have also commented on issues booking Safe and Together trainers for in-person training. In these cases, orgs have come up with workarounds, including opting for some online training whilst waiting for trainers to free up as well as enrolling staff in the Train-the-Trainer course:



The difficultly in booking a trainer to deliver CORE sessions in Moray (the S&T institute had no capacity) meant we opted to put 4 individuals through online CORE training in the early summer and then send them directly to undertake Train-the-Trainers accreditation beginning in September 2022.

Moray Women's Aid (Partnership)

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Virtual training has, however, been an issue for some as it becomes more difficult for workers to protect time to dedicate to training and the lack of face-to-face contact minimises the opportunities for shared learning. Where this has been the case, some organisations have found strategies such as peer support groups helpful in aiding staff through the programme.





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"As stated by Midlothian the virtual training continues to be challenging in getting social workers to complete within a reasonable timescale. Whilst we have now had two Core training sessions being supported by facilitators from East and Midlothian learning and development teams it is a blended model and there is still room for improvement.

"...following the successful pilot of a joint East Lothian and Midlothian peer mentoring training session earlier this year which supported workers to complete the training programme, a further peer session is running this month.

East Lothian and Midlothian Public Protection Committee



Despite these difficulties organising and ensuring attendance of training, feedback is largely positive, and a number of projects have had to buy in additional places/have advised that extra sessions would be beneficial as demand is high.





Events are being well subscribed to and feedback is positive. Most importantly there is a desire across agencies to see a roll out of the Safe and Together Model and the changes that will bring in their practice and the lives of women and children. This is evidenced in the fact that we have had to buy in 25 Core Programme training places this year, rather than the planned 20.

feedback from Aberdeen City Council

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The model has generally received positive feedback from DES-funded organisations. To read more around the first year of Safe and Together, please see the Year One Learning Report published by Improvement Service **here**.

Several practitioners who have attended Safe and Together Overview and Core training across DES-funded organisations have commented on changes to language as the most noticeable outcome of Safe & Together training.

I reviewed my own practice over the years and saw how often women had been held to account for "failure to protect". I can now see how that is written into culture and strategy of agencies. I will challenge this when I see and hear it now.

S&T training participant from Dumfries & Galloway Council

A number have also reported increased confidence in working with non-offending parents, as well as holding perpetrators to account upon completing training.



"Feedback from multi agency overview training that was delivered in August 2022 included a quote from a practitioner who shared the view that the primary strength of the training was that "it promoted perpetrator accountability, moved away from victim blaming and encouraged a strengths-based approach to working with survivors. It is moving away from the idea of failure to protect and promotes a much more collaborative and holistic way of working with families"... Participants also displayed an increase of their understanding and knowledge when asked, "how can family-serving professionals intervene with domestic violence perpetrators even if they refuse to participate?", with the average test score results for this question increasing from 63% to 92%"

North Lanarkshire Council







It is also becoming increasingly clear that Safe and Together training needs to be supplemented by local and national practices to embed and progress the model past training and into frontline work. Organisations have started to do this using a multitude of techniques including Safe and Together steering groups, peer support sessions, newsletters, practitioner forums as well as engaging with key stakeholders and partnerships. This need for dedicated time and funds is especially evident in organisations who experienced difficulties with sign-up/attendance of training before a Coordinator took up post, and who are now reporting a marked increase in uptake once this position was filled, with time dedicated to managing these practices.

As well as this feedback from training, anecdotal evidence is starting to come through regarding the impact of Safe and Together training in practitioners day-to-day working.

Team leaders audit one case file per month. Where domestic abuse features, these audits are advising that Safe and Together practice is evident in case file recordings, assessments and risk management. We have not undertaken any further audit activity within the last six months, but we continue to see the impact of the training within individual case records and in case discussion forums.

East Lothian and Midlothian Public Protection Committee

Organisations have commented that although there is some anecdotal evidence that the model is being utilised by practitioners, it is too early on to comprehensively identify implementation and the effect of the training 'on the ground'. They are hopeful of presenting evidence around this in upcoming reports.







# 3.8 Commercial Sexual Exploitation



DES provides funding to three organisations to carry out work focused on commercial sexual exploitation (CSE). Funded activity includes:

- Direct work with people affected by CSE
- Training & resources for professionals across a range of sectors
- Policy development alongside the Scottish Government

In March 2023 we published a report summarising DES funded activity throughout Year 1 which focused on CSE.



You can download our CSE Specific Report HERE







## 3.9 Primary Prevention



Funded activity tackling GBV and abuse through prevention continued to grow during the six-month period. Given the breadth of activity being undertaken, a separate report has been written which provides further information and analysis of DES funded prevention work.



#### You can download our Prevention Specific Report HERE

#### 3.9.1 Summary of Funded Prevention Activity

Primary prevention is about preventing violence before it occurs. To achieve this there is a focus on changing behaviour, attitudes, building the knowledge and skills of individuals, and ultimately delivering a progressive shift in the structural, cultural and societal contexts in which violence occurs. This includes:

- Education and awareness raising
- Development and delivery of training and resources
- Campaigning
- Delivery of GBV & abuse charters
- Research



27,541 people

took part in education and awareness raising sessions

"Always make sure you ask for someone's consent and that they are okay" (Girl, 12)

"Stereotypes can put pressure on people" (Boy, 11)

Rape Crisis Scotland







# **Case Studies**



"Although anonymous the story of a survivor's journey in my opinion is incredibly important. Being heard by people who wish to support Rape Crisis Grampian (RCG) or being read by someone who has just started their own journey, letting people know that anything is possible. With the help of RCG rebuilding and redirecting the path is a fundamental part of survival realising that a harrowing experience like rape/domestic violence/coercive control doesn't define us as human beings. We are survivors who got to where we are with the support of RCG and the amazing people who work for/with RCG as well as sheer determination. So thank you for allowing me to be part of this"

Quote from Survivor at Rape Crisis Grampian when asked about sharing their story





## **Section 4 Case Studies**



#### 4.1 Fife Women's Aid

This case study demonstrates the impact and importance of specialist counselling services funded by DES for women and girls who are survivors of sexual & domestic abuse. Within a safe environment, survivors are able to open up about their experiences. With specialist support they begin to have a greater awareness of healthy relationships, increased self-confidence, self-esteem and are more able to participate in social and community activities. This case study contributes to Equally Safe Strategy Priority 3.

R referred herself to Fife Women's Aid counselling service after the breakdown of her long-term relationship. She disclosed physical, emotional and sexual abuse. She described how her ex had controlled every aspect of her life and had left her an "empty shell". R also described a difficult childhood where she experienced neglect and emotional abuse. From an early age she described feelings of not belonging and being unwanted which contributed to her low self-esteem and self-worth.

At the start of the sessions, the counsellor explored R's core beliefs and values and how these came to be. Through this process R was able to recognise how her childhood experiences had led to the creation of core beliefs and was able to see the behaviours/coping mechanisms she had put in place to survive and protect herself. Through this exploration, R was able to map out the script she had created for herself and develop a better felt understanding of herself.

R wanted to continue to explore her childhood experiences, so the counsellor undertook some inner child work. It was an arduous process for R, but she stated it was also the most powerful work she had done. R described a breakthrough moment and said she felt "like I am no longer walking around with a big heavy rucksack". This allowed her to process the abuse and trauma without feelings of shame and guilt, but for the first time through a lens of compassion.

R also experienced anxiety and panic attacks and the counsellor supported her to think about ways she could manage these. Through working together and utilising particular tools, R built her confidence, faced some of her fears and attended events that she had previously thought she would never have been able to do.



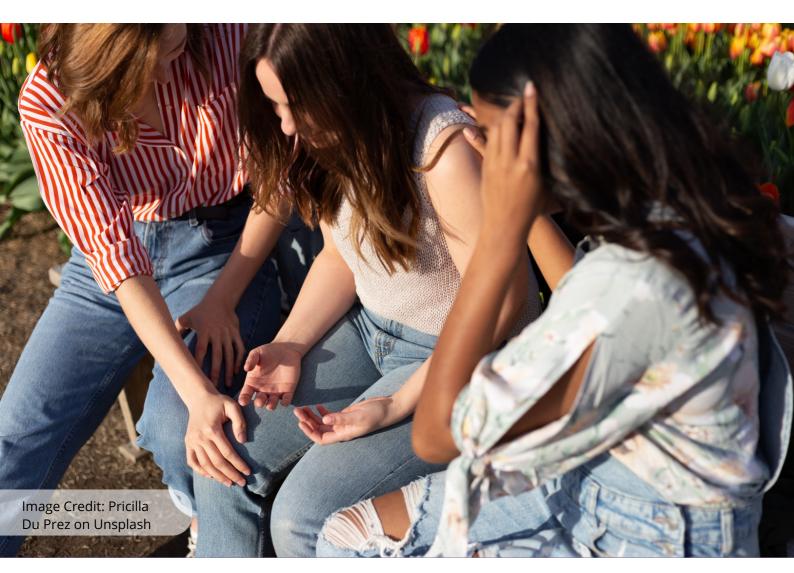


The counsellor and R continued to explore her inner critic and work on recognising her self-worth, looking at how this resulted in her 'people pleasing'. This process led to R reflecting on boundaries and looking at assertiveness and self-worth. The counsellor and R considered the drama triangle and the winner's triangle and how these roles played out in R's life. R found this particularly helpful and started to see changes in her relationship with her family and her interactions with her ex-partner. She commented that people said 'something about her had changed'.

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On reflecting on her counselling journey, R stated a year ago "I wanted to die". She disclosed this was a familiar feeling, however, she said "for the first time in my life I want to live. Counselling honestly changed my whole life. I'm doing great. I've walked the bridge twice, joined a running club, booked a holiday. Who would have thought it! It wouldn't have been possible without my counsellors help".











# 4.2 Rape Crisis Grampian

This case study demonstrates the range of support that organisations may need to provide to one survivor. This holistic support is critical to ensuring that the survivor is able to move on with their life. This case study contributes to Equally Safe Strategy Priority 1.

Emma, a 42-year-old woman began support with Rape Crisis Grampian in April 2020 with a sexual violence support worker. At that time, she had reported her sexual violence to the police and her abuser was out on bail. There were several incidents of her house being made to feel unsafe due to banging on the doors by unseen individuals and seeing her abuser out and about.

Trauma responses that ensued were impactful. These were complicated by her own physical health issues which further restricted activities. The combination of these factors resulted in low mood, so she was supported to engage with medical help and journalling was suggested as a way to gain clarity of thought. This allowed her emotions to rise to the surface and work was done in sessions to process these feelings.

During the court process, her abuser pled guilty to his charges, leading to a mixture of emotions which her support worker helped her to unpick as normal, nonetheless, remaining impactful. Media attention was unhelpful for her by identifying the family and resulted in bullying at school which was stressful for all.

At this point her original worker left but support was picked up by another support worker. Rape Crisis Grampian Advocacy Support was added in to help Emma deal with the repercussion of the court case and media fallout and to support her in the legal processes surrounding custody etc.

Our work then focused on processing her inner feelings of self-blame which were at war with her cognitive reality that she was not at fault. Rape Crisis Grampian was able to fund wellness packs for our survivors, so we sent one out for her and used this to look at what that wellness meant for her and to practice self-care. It also provided a mindfulness journal which allowed Emma to continue journalling to good effect. Safety planning helped to give a pragmatic response to fears around her abuser's release.

Having made a claim to the CICA (Criminal Injuries Compensation Authority), Rape Crisis Grampian were asked to provide supporting information on the effects of the abuse on the survivor, which we did with Emma's express permission.





We worked together looking at intimacy and engaging in a relationship where safety and mutual respect existed. Over time this matured into a relationship which happily resulted in marriage. Sadly, a miscarriage ensued and we were able to explore the triggering aspects which linked this to her abuse.

Psychoeducation helped by providing a frame of reference, a common language to describe emotional states and allow discernment and the choice to change. Mental health began to improve as she saw hope and a shift from her self-blame to seeing strength and a way forward. She was learning to listen to herself.

However, the pending date of her abuser's prison release loomed large and trauma responses and fears for her safety and that of her family threatened her wellbeing. She felt that his knowing where she lived, combined with the physical daily reminders of her assault which happened in her home, were creating an environment where she could not feel safe. To support her desire to be relocated to a new home and place of safety, we wrote a letter of support to her housing officer, reiterating her belief that a move of house and area would be of paramount importance to her recovery and safety. Challenges from the housing system resulted in calls as a follow-up to our letters to ensure that they really heard the survivor in her need.

Around this time, financial difficulties arose and we were able to refer to a food bank agency to tide the family over their crisis point.

In the weeks that followed, Emma began to reflect on her newfound ability to trust, love and move forwards in her relationship. She wrote poetry which expressed her, often hidden, gentleness and vulnerability and felt able to share it with me in support sessions. This growth was paused by her perpetrator's pending release (from prison) date. Thankfully, finally, she was able to get alternative housing, though at very short notice. This brought further financial challenges so we were able to support her by applying to a trust fund to enable the timely move only a few days after her abuser was released.

All the emotions of the move and the "freedom" of her abuser were very exhausting and in sessions we focused in on all that she had achieved as a survivor as an empowering antidote. We worked through the settling in of the new family dynamic, how she was able to be happy and feel OK sometimes and came to a place where the survivor felt able to reduce the weekly sessions to fortnightly with a view to ending support. Her desire to be more than her trauma was evident in her desire to undertake training to be able to pay forwards all that she had learned.







# 4.3 Aberlour - The Bridges Partnership

Below, a Children & Families Worker highlights how project support is necessary in tackling financial hardship and barriers faced by people new to the UK or for whom English is not their first language.

During an initial visit, Mum explained that she had No Recourse to Public Funds having fled from Nigeria to Scotland from her abusive husband. Mum disclosed finances were a major stressor as her children's bus fares to and from school were £5 per day. This left the family with little money for essentials such as food and clothing. Within the first month of support The Bridges Partnership supported the children to apply for their free bus travel passes, a grant application was made to The Buttle Fund (awarded £2,100 with additional £250 emergency fund awarded).

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I feel so blessed for Aberlour supporting me and my girls. It was beautiful to watch that my children were excited to go to school on Monday so they could tell their friends that they went bowling, out for dinner and clothes shopping as I've never been able to afford any of these things before. This was our first time ever bowling we had so much fun

"I am supporting a young mother and during our assessment she highlighted she wishes to further her

highlighted she wishes to further her studies and attend university to progress into a career. I have been supporting her to apply to university and she has received a conditional offer. However, due to not having asylum status, there are many financial barriers to accessing education. This woman is determined to build a better future for her children, and I will continue to try my best to support her through this [process]."



Image Credit: Kibble





## 4.4 Shakti Women's Aid

This case study details the increasingly complex support needs of those seeking support. It highlights the impact of statutory and third sector processes, as well as external political factors on the ability of Survivors to get the support they need.

The complexities of many BME migrant women's immigration status has continued to put them at further risk. It has been discouraging to see many organisations including those of statutory capacity such as Social Work departments in the Lothians, Fife and Forth Valley being reluctant in their approach to support these individuals due to their complex immigration needs.

Since post-Brexit there has been a recent influx of traveller communities include BME such as Roma. We have been seeing more and more cases coming through; that is typical of Human Trafficking/HB/Forced Prostitution and Forced Drug Dealing. Human Trafficking is a very serious, organised crime. We are always committed in helping all BME communities including such as these, however this presents extra pressures for us in keeping our own staff safe.

We encourage service users to seek counselling sessions through NHS services as the demand for mental health support has increased dramatically over this period as well. However the lack of resources from NHS meant the waiting times for these sessions were lengthy. The number of cases where service users have extreme and complex mental health needs have continued to increase dramatically.

Such demand requires either BME specific NHS mental health support or availability of trauma informed bi-lingual counsellors. Unfortunately, we have noticed that NHS BME specific services are very rare and bi-lingual counsellors are very difficult to source. Furthermore, there is a lack of specialist trauma informed counselling services that we can refer our service users to.

As there is a serious lack of BME specific counselling services from NHS and also lack of bilingual BME trauma informed Counsellors our staff are now finding themselves having to provide emotional support at a level equivalent to counselling.

As a crisis organisation, we strive to start supporting our service users as soon as possible and always in a timely manner. Unfortunately due to the increased demand pressures across the board, we now have a minimum two week waiting list in all regions for all non-urgent new referrals.







# 4.6 Hemat Gryffe Women's Aid

Below, a Children & Families Worker highlights how project support is necessary in tackling financial hardship and barriers faced by people new to the UK or for whom English is not their first language.

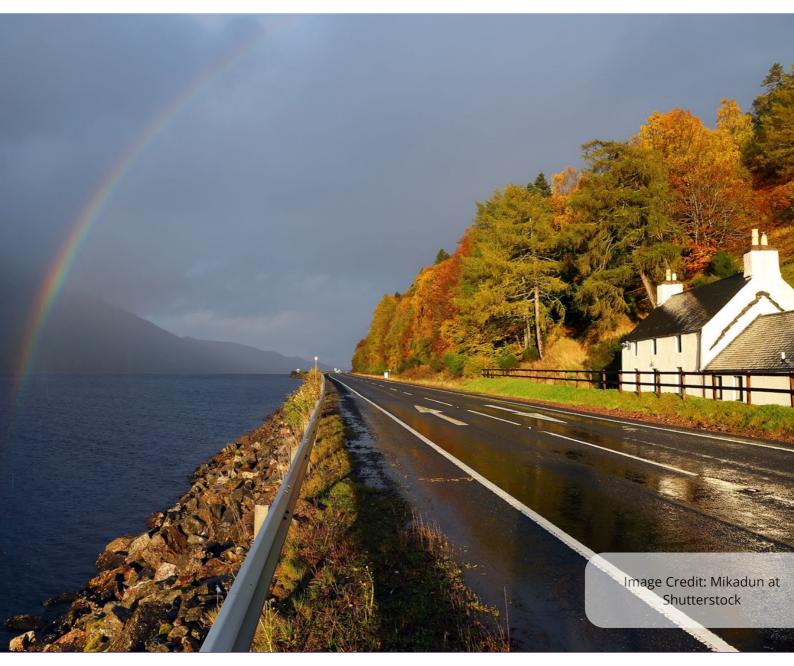
Aisha was referred to the outreach service by social work services as she disclosed domestic abuse from her first husband and years of extended family abuse at the hands of her in-laws. She experienced physical, emotional, and verbal abuse. She felt that she was never good enough for her mother-in-law and was constantly berated and looked down upon by her. She fled for the safety of her child as her husband told her that he planned to kidnap their child and take the child out with the United Kingdom whereupon he planned to sell the child. She was frightened. The ongoing abuse that she had suffered for years had taken its toll and she had no reason to disbelieve what she was being told given the level of abuse and mistreatment that she endured. She was isolated from her natal family living within her husband's extended family home.

When she contacted her parents for support, they demanded that she return to her husband's family home, conform to their cultural expectations, and told her that she had brought shame to the family name for leaving. Her family did not support her, they told her that they would rather see her dead and would disown her if she did not return to her husband. The police contacted the drop in centre as her family reported her and the child missing. A risk assessment and safety plan was implemented to ensure her ongoing safety.

She received bilingual culturally sensitive emotional support, to recognise and address the abuse and trauma she had experienced over the years. She was supported to access temporary accommodation. Staff liaised with social work to ensure she received financial support until she was in receipt of benefits. We organised for her to meet with an immigration solicitor, and she received legal advice in relation to her immigration status. She was supported to apply for welfare benefits for herself and her child and housing benefit to pay for the cost of her accommodation. She was shown where to pay her utility bills and assisted with budgeting. Her key worker showed her the Glasgow transport system to enable her to get out and about. This allowed her to integrate into the community and gave her a sense of empowerment and independence.



She has been participating in the organisation's women's group and research workshops where she was given a platform to share her story. Since joining the women's group, she spoke of how this has reduced her isolation significantly as she has developed friendships. She has improved her English skills, and this has also increased her self-confidence. She has joined a volunteering programme and is looking forward to joining college soon. She wants to use her voice and story to inspire and help other women. She is slowly moving towards becoming independent.







# **Appendix 1**

# 1. Fund Background

# Delivering Equally Safe (DES) is a three and a half year\* funding programme.

It supports activity across the voluntary and public sector. Funded work contributes to the outcomes and priorities contained within the Scottish Government and COSLA's Equally Safe strategy.

Between October 2021 and September 2023, funding of over £38m\*\* (approximately £19m p.a.) will be distributed to 112 organisations delivering 121 projects.



Public sector includes Local Authority projects, NHS and Higher Education

There are a mix of organisations being funded. Some are delivering ongoing activity whereas for some organisations this has been a start-up period for their activity. This is particularly the case for new services or projects and partnerships where the level of preparation and recruitment required are higher than established activity. Additionally, for some funded groups, evaluation processes are in development with evidence of impact to be more fully reported as funded activity progresses.

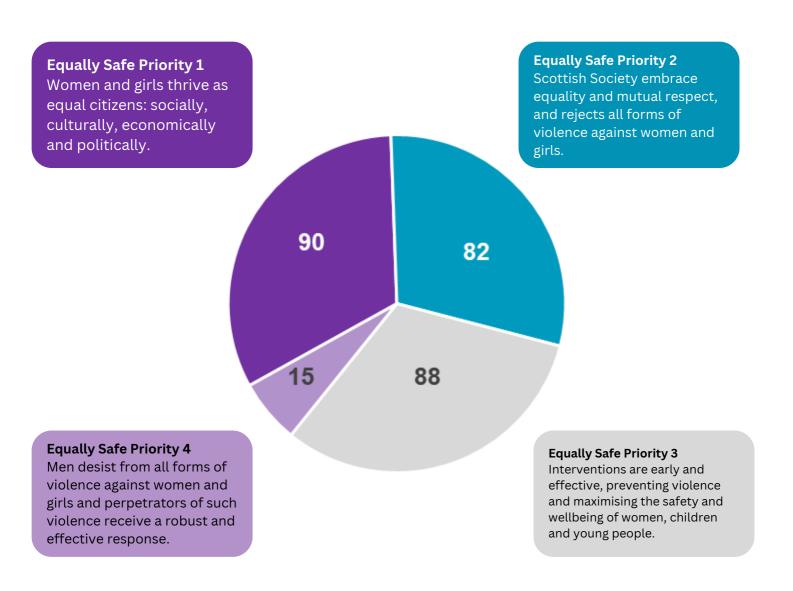
\*In April 2022, it was announced that the fund would run for an additional 18 months from October 2023 to March 2025 to allow the independent Strategic Review of Funding and Commissioning of Violence Against Women and Girls to report its findings in 2023.

Annual funding is dependent on the Scottish Government's Annual Spending Review and Scottish Budget.



# 2. Equally Safe Priorities

The organisations reported on which priority/(ies) they are delivering against in the first six-month period. Many organisations' activities are contributing to multiple priorities. The diagram shows the number of organisations delivering against each equally safe priority.



More information, including <u>a list of all the funded organisations</u>, can be found on the <u>Delivering Equally Safe webpage.</u>



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