"Women's Experience of Violence: Mapping Experiences and Responses"

A Pilot Study

wcrp
Women's Centres Regional Partnership

Women's Experience of Violence: Mapping Experiences and Responses

A Pilot Study

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December 2009

Contents

Acknowledgements

I would like to thank the following people for their support and participation in this research:

Executive Summary

Purpose

The Women's Centre Regional Partnership (WCRP) commissioned Anne McMurray to undertake qualitative research into women's experience of violence in Northern Ireland in 2009. This was resourced by the Department for Social Development which funds many frontline women's organisations.

The Steering Group for the project consisted of the Women's Resource and Development Agency (WRDA) (representing the WCRP), the Women's Aid Federation NI, the Department for Social Development and also involved the Department of Health, Social Services and Public Safety.

The purpose was to map the individual experiences and responses of women who have experienced violence to highlight issues for policy and strategy and increase the knowledge base in Northern Ireland.

Ending violence against women in Northern Ireland is a priority if women are able to achieve equality in all areas of their citizenship.

Method

The research project involved a sample of 15 frontline organisations across Northern Ireland including women's centres, Women's Aid refuges, social services and the PSNI. The methodology used qualitative narrative methods with staff to elicit women's experience of violence.

The narrative research phase of the research generated 38 stories of women's experience of violence. The respondents indexed what they saw as the significant themes. These were used to design the snapshot survey.

The main themes were used to design an online survey which was administered during the 21st – 25th September 2009 across 15 pilot sites. The findings were presented at a policy interpretation workshop in October 2009 attended by a range of stakeholder organisations.

Northern Ireland Policy Context

Local policy and strategy is derived from the United Nations Convention on the elimination of all discrimination against women (2006), which highlighted that violence against women has its root cause in the structurally unequal relationship between men and women.

In Northern Ireland the Regional Strategy for Tackling Sexual Violence and Abuse 2008 – 2013 sets out an inter departmental approach. Annual action plans flow from this strategy; the most recent being 2009 – 2010.

The regional action plan was used as a 'mirror' in which to reflect the findings from this research and make recommendations to endorse and further develop the scope of its implementation.

115 women were profiled by frontline staff using the snapshot survey in 15 sites during the working week of 21st to 25th September, 2009. This is a small study which maps out issues requiring further investigation and research. It cannot be used to estimate prevalence.

Findings

The findings highlight some significant patterns and issues for policy makers and service providers:

- o Violence against women reduces self-esteem and self-confidence which increases vulnerability and mental health issues.
- o Women experience cultural and social pressure to stay in violent relationships.
- o Women who experience violence are often isolated.
- o Coping through the use of alcohol or drugs is sometimes a response to experiencing violence.
- o Over 60% of the women profiled have been prescribed anti-depressants by GPs.
- o 70% of perpetrators have a sense of entitlement to be violent to a woman.
- o In 50% of situations, professionals and the legal system are unable to compel the perpetrator to co-operate with them.
- o The nature of violence includes emotional, physical, financial, sexual and psychological methods; in one week over 30% of the sample had their life put at risk.
- o Mothers who have experienced violence lose their parenting ability; 41% of children in the sample exhibit behaviour problems.
- o 47% of women experienced professionals and support services as non-judgemental.
- o Legal sanctions, e.g. breach of non-molestation orders are not taken seriously. Women experience practical difficulties in participating in the legal system. Procedures are not 'women' friendly.
- o The % of non-national women in the sample was ten times higher than their representation in the general population.

Themes Emerging for Recommendations

- o A medicated response on its own is not enough to help women recover from the trauma and ongoing effect on mental health of violence.
- o The design of formal statutory structures and procedures are incompatible with the emotional and practical needs of a woman who is recovering from violence.
- o Services which champion, support and listen to women are necessary to assist recovery and rehabilitation.
- o Mainstreaming education about gender relations and developing a zero tolerance in society of gender violence is necessary to challenge the prevalent entitlement mindset.

- o Specialist services for mothers and children are required to re-instate the woman as parent
- o Positive and therapeutic interventions for children are necessary to prevent the cycle of violence continuing into their adult lives and relationships.
- o Patterns and archetypes of violence can be identified; these can be used to inform women about self protection and prevention strategies.
- o Full implementation of the regional strategy is dependent on local co-ordination and information sharing.
- o Development of the survey into a simple self-assessment tool to be used directly by women would provide a comprehensive measure of the prevalence as well as the nature of violence in Northern Ireland for policy and services development.
- o New media, e.g. email or texting is used by perpetrators to exert psychological control on women and this area needs to be addressed[1].
- o The statutory agencies and judicial system need to compel perpetrators to co-operate and take responsibility for their violence.
- o The scale of violence against the non-national population of women living in Northern Ireland highlights their isolation and difficulties in accessing services and support.
- o The judicial system needs to help more women engage positively to take legal recourse and protection.

The recommendations from the research are based on these themes, highlighting specific actions for appropriate lead departments.

The research findings endorse the Regional Strategy and annual action plan for Northern Ireland and recommends that these are fully implemented through departmental support and accountability.

To help focus on implementation, it is recommended that an independent stakeholder network is convened on an annual basis to review progress, share information, promote good practice and quality assure forthcoming plans.

Anne McMurray
Dr Julie Harrison

December 2009

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[1] As has emerged in the McElhill Inquest (December 2009)

1. Introduction

1.1 DSD Interest in women's experience of violence

The Department for Social Development (DSD) has a particular policy interest in women living in disadvantaged areas and addressing issues that prevent women's full participation in society.

DSD funds a number of frontline women's organisations that provide a range of services for women in disadvantaged areas. The Department also funds the regional body the Women's Centres Regional Partnership (WCRP) to support the work of frontline women's organisations and inform government about emerging issues.

In Northern Ireland, the Women's Centres Regional Partnership (WCRP) consists of four partner organisations: the Women's Resource and Development Agency, Women's Support Network, Northern Ireland Rural Women's Network and the Women's Centre, Derry, which collectively support fourteen Women's Centres across Northern Ireland, situated in disadvantaged areas. These centres provide a range of support services to women, including education, training, childcare advice and signposting. The WCRP has recently published research[2] examining the barriers to engagement for women in disadvantaged areas.

In late 2008 the Minister for Social Development, Margaret Ritchie, met members of the Northern Ireland End Violence Against Women working group. At this time, WCRP was reporting to the Department that frontline women's organisations were supporting many women who had or continued to experience violence. They were identifying this as a considerable barrier to a women's ability to support her family and fully participate in her community and wider society.

Although much good work with women in disadvantaged areas is supported by the DSD through funding to Women's Centres and Neighbourhood Renewal and Housing Programmes, the Minister supported the view that that more could be done at a cross-departmental policy level on the issue of women's experience of violence.

In acknowledgement of this the Minister confirmed the allocation of a small budget to commission this piece of research.

The WCRP appointed Anne McMurray to gather qualitative and quantitative information about women's experience of violence in Northern Ireland, with consideration of how the issue impacts on women living in disadvantaged areas. The timeframe for the research was February to November 2009. At the same time the 'Barriers to Participation' report was being completed. The two pieces of research can jointly inform the DSD and other departments about priorities for the removal of barriers for women to fully participate in society. The findings will be relevant to all the policy and support services who work to support women's citizenship in Northern Ireland.

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[2] Women Living in Disadvantaged Communities: Barriers to Participation (McLaughlin 2009)

1.2   Violence against women: Stakeholders

It is estimated[3] that 3 million women across the UK experience rape, domestic violence, forced marriage, stalking, sexual exploitation and trafficking, female genital mutilation or crimes in the name of honour each year. In England and Wales the cost to society is over £40 million a year.

The UK governmental policy response has been described as *"fractured with separate policies …. Where the focus is on the criminal justice system, even though most victims do not ever report to the police, there has been no equivalent focus on supporting victims and there is no vision of …. preventing violence in the first place".* Research from the rest of the UK provides a template for developing integrated policy which would be relevant for guiding a 'joined up' approach in Northern Ireland.

Women's Aid Federation Northern Ireland were members of the Steering Group for the project. Women's Aid is recognised as the lead voluntary agency in Northern Ireland for women who have experienced violence by providing refuge and accommodation for them (and their children), as well as supporting women in the community through their outreach services.

DHSSPSNI are the policy lead for violence against women in Northern Ireland and they were approached to participate in the Steering Group. This was an important strategic link for the study as the aim is to promote more 'joined-up' thinking and planning. Links were also made with the PSNI and two of the Health and Social Services Trusts.

This is a small study to map the experiences and responses of women who have experienced violence. Its value is in highlighting issues which warrant further investigation, corroborating what is already known and validating current policy and strategic plans. The intention was to contribute to an emerging Northern Ireland specific knowledge base about women's experience of violence.

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[3] Realising Rights, Fulfilling Obligations: A Template for an Integrated Strategy on Violence Against Women in the UK" (Coy, Lovett and Kelly, 2008)

1.3   Definition of Violence against Women

It is the experience of WRCP that in a post-conflict society, it appears that violence continues for women in Northern Ireland. This study aimed to highlight the nature of that violence. The study used the United Nation definition of violence[4] as stated below:

"Violence that is directed against a woman, because she is a woman, or violence that affects women disproportionately. It includes acts that inflict physical, mental or sexual harm or suffering, threats of such acts, coercion and other deprivations of liberty".

In Northern Ireland, the Gender Equality Strategy[5] highlights violence against women as one of the twelve critical areas of concern, which is perpetuated by a range of factors including culture, stereotyping and a lack of gender sensitive support systems. Tackling gender related violence (domestic violence, sexual abuse, victims, survivors and violent crime) is a key action area in the strategy, with related objectives such as better collection and dissemination of data and the active participation of women and men in peace building, civil society, economy and government .

Ending violence against women in Northern Ireland must continue to be a priority if women are to be able to achieve equality in all areas of their citizenship. This means addressing the structural and cultural mechanisms which perpetuate it at a societal level, as well as providing support and services appropriately for individual women who are affected directly.

Women play an important role in Northern Ireland's society at a number of levels – as carers (for children, the disabled, the elderly); in community leadership and peace building; politically in local and regional government and economically as employers and employees. Women have different life experiences compared to their male counterparts. They bring a different perspective and quality of leadership. This diversity can offer new ways of shaping and stabilising a post conflict society. It is critical that women are able to fully take up their role and contribute fully to civic life in Northern Ireland.

Removing barriers to their participation is in everyone's interest, not least for women themselves now, and also for future successive generations.

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[4] UN Summary Definition of Violence Against Women (2006)

[5] http://www.ofmdfmni.gov.uk/genderequalitystrategy2006-2018.pdf

2.   Terms of Reference

Violence against women is a multi-faceted and deep-rooted societal issue, which has existed for a long time and is linked inextricably to the structures of society and culture. Government policy interventions and the design of support structures affecting the issue must target a range of causal or contributory factors. The questions for policy makers are:

a. How do we change the societal and contextual conditions to reduce the prevalence of violence against women?
b. How do we increase ease of access to support for women from all backgrounds who have suffered violence?
c. What policy interventions will stop violence and make it safe for women to fully participate in society?

The aim of the project was to make policy recommendations to the Department for Social Development based on the real experiences of women who have experienced violence in Northern Ireland. This relates to the Northern Ireland's Government's role in preventing, protecting and supporting women who suffer from violence.

The objectives of the study were to:
o Facilitate the Women's Centres Regional Partnership to gather qualitative and quantitative information about women's experience of violence in Northern Ireland
o Explore women's experience of all types of violence, inside and outside the home and their experience of the support which is available
o Develop an inclusive, safe and confidential methodology
o Identify the main themes which could be addressed by Government policy in Northern Ireland
o Build capacity for the ongoing evaluation of women's experience of violence in Northern Ireland, at an individual, community and societal level
o Inform government policy and strategy development

It is difficult to develop a methodology to measure the prevalence of violence against women in society. We know from evidence[6] that women tend not to report episodes of violence against them for a range of reasons. This project did not attempt to measure the extent of women's experience of violence in Northern Ireland. There would be serious risk of underestimating the scale of the problem which would be counterproductive.

The focus of the methodology was to profile of the nature of violence against women based on real experience. This qualitative information can inform the development of policies and strategies which might address the causes and ameliorate the impact.

A sample of organisations and teams across Northern Ireland participated in the information gathering and analysis. The geographical spread included Londonderry, Cookstown, Dungannon, Coleraine, Craigavon, Ballynahinch, Newtownards, Armagh, Lisburn, Belfast and Dundonald.

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[6] http://www.womensaid.org.uk/domestic-violence-articles.asp?section=00010001002200390001&itemid=1279

3.   Methodology

3.1   Design

The purpose of the pilot study was to deepen understanding of the factors which affect an individual women's experience of violence. The design was a blend of narrative enquiry, survey and interpretation into policy techniques.

Interview informants and survey respondents were frontline staff who work directly with women who have experienced violence. This was to prevent re-traumatising women by asking them to "re-tell" their story which may be painful and harrowing. Frontline staff were asked to recount the stories of violence as told to them by the women they work with. One to one and small group meetings were used for the qualitative narrative enquiry interviews.

Staff identified the key themes in each woman's story. These themes were used as the basis for a "snapshot survey" which was carried out during a specific week (21st – 25th September 2009) across the 15 sample sites in Northern Ireland. This provided an indicative baseline measure of the nature of women's experience of violence. The findings indicate the sort of support they require and the issues to be addressed by policy makers and service providers.

The snapshot survey was conducted online. A PDF version was also available for some staff without access to the internet to collate manually. This data was then inputted by the project team.

3.2   Project Stages

The key stages in the project methodology were:

Project Steering Group Set Up: made up of representatives of the Department for Social Development, the Women's Resource and Development Agency, as one of the partners in the Women's Centres Regional Partnership and Women's Aid Federation NI. The DHSSPSNI was also represented. Their role was to quality assure the policy analysis, guide the design of the project, advise on frontline participation, promote the pilot in their own agency, make links with other related projects or initiatives and assist in the formulation of the final recommendations

Policy Overview: an overview of the current policy framework relating to women's experience of violence in Northern Ireland which looked at international, national, regional and local policy and strategy.

Narrative Research: 38 interviews with a variety of "frontline" staff from Women's Aid refuges, Women's Centres, social services and PSNI who respond to women who have experienced violence. These interviews were tape-recorded. Some were hand written by staff. (See Appendix One for Templates.) All recorded data was deleted on completion of the pilot in line with data protection requirements**.**

Snapshot Survey: 15 teams participated in the online "snapshot" survey. Staff were asked to profile the women they were working with during the week of 21st September 2009 to 25th September 2009 in relation to the issues which had emerged from the narrative enquiry research. Staff selected the specific issues which applied to each woman. The aim of the "snapshot" survey was to capture real-time data in Northern Ireland of the nature of women's experience of violence over a specific time frame.

Analysis of the Findings and Interpretation into Policy: The results of the snapshot survey were shared at a workshop held on the 13th October 2009 in Belfast. 24 representatives of the key stakeholder organisations took part. The Regional Action Plan for Tackling Sexual Abuse and Violence, 2009 -2010 was used as a "mirror" to reflect the lived experience of women who are experiencing violence in Northern Ireland and to assess the extent to which policy intentions matched need as indicated by the snapshot survey and interviews.

This report contains the summary of the findings, the main issues raised and the recommendations to the Steering Group.

4.   Policy Framework

This study was commissioned to draw out issues that need to be addressed at a social policy level to end violence against women. Within the terms of reference two objectives reflected this focus on shaping the policy agenda:

a) Identify the main themes that could be addressed by Government policy in Northern Ireland;
b) Inform government policy and strategy development.

4.1   International context

Local policy and strategy in relation to the issue of violence against women sits within a National and International policy framework. The International community has had a specific focus on violence against women (in the context of the elimination of discrimination) since 1979, when the UN General Assembly agreed CEDAW as what was essentially an international bill of rights for women[7]. This UN Convention defined what constitutes discrimination and set up an agenda for National action by individual states. A number of states (including Great Britain and Northern Ireland) signed up to the convention in 1981. In 1992, it was clarified to include an obligation on all State Parties to take all appropriate means to eliminate violence against women. By 2006 89 states had specific domestic violence laws (up from 45 states in 2003).

In 2006 the report '*Ending Violence Against Women: From Words to Action'*, commissioned by the United Nations Secretary General, highlighted that violence against women has its root cause in the structurally unequal relationship between women and men. This has been established as a human rights issue, which requires state policy intervention to prevent, eradicate and punish violence against women. It was recommended that member states undertake a comprehensive and systematic response to address violence against women by:

o Taking urgent and concrete measures to protect women's human rights
o Showing leadership at all levels – local, national, regional and international
o Closing the gaps between international standards, national laws, policies and practices
o Building strong multi-sectoral strategies which are co-ordinated nationally and locally
o Allocating adequate resources and finding programmes to address and reduce violence against women
o Strengthening the knowledge base on all forms of violence against women to inform policy and strategy development

It is also worth noting that in November 2009 the European Parliament delivered two resolutions calling for a concrete strategy in Europe to eradicate male violence against women[8].

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[7] United Nations Convention on the Elimination of all Discrimination Against Women (CEDAW)
[8] See www.epacvaw.org

4.2   Local Context

In Northern Ireland, the Department of Health Social Services and Public Safety and the Northern Ireland Office act as joint policy leads on the Domestic and Sexual Violence Strategies.

A 2005 inter-departmental strategy 'Tackling Violence at Home' set out five aims:

a. To improve services and support for all victims of domestic violence;
b. To develop and deliver a high quality, coordinated multi-agency response to domestic violence;
c. To further increase and develop awareness generally about domestic violence and the measures in place to help victims;
d. To educate children and young people and the wider general public that domestic violence is wrong and is unacceptable and to enable them to make informed choices;
e. To hold perpetrators/abusers accountable and provide effective interventions for their behaviour.

Annual Domestic Violence Action Plans flow from this strategy and were to be published each year from April 2007. The Action Plans indicate what activities are proposed, which Department has responsibility for them and which is leading. Targets are then set for progressing actins within them. The current Action Plan was issued in October 2009, covering the period from April 2009 to September 2010. It[9] contains specific actions against four themes – 'prevention', 'protection and justice', 'support' and 'other priorities'. These are summarised in Appendix Two. A Ministerial group on domestic violence and sexual assault was established in May 2008 to oversee delivery. This includes the Department of Finance and Personnel, the Northern Ireland Office, the Department for Social Development, the Office of First Minister and Deputy First Minister, Secretary of State and the Department of Health and Social Services and Public Safety for Northern Ireland.

The emphasis on an inter-departmental and inter-agency focus on the issues that relate to violence against women is an important aspect of delivering against the strategy. It is easy to draw lines to a number of policies in Northern Ireland that have direct or indirect links to the issues identified in the Domestic Violence Action Plans. These include DSD's 'Supporting People' policy, Community Safety strategy, the Northern Ireland Commissioner for Children and Young People's focus on children's rights, the DHSSPS service framework for mental health and well being, children and young people's services planning and review of legal aid - to name a few.

An effective inter-departmental and inter-agency approach to violence against women is arguably going to become even more important in the next few years. New governance arrangements, including the development of a single Public Health Authority and Regional Health and Social Care Board, new commissioning arrangements for health and social services, a single Education and Skills Authority and powers for community planning and well being that are to be taken on by 11 new Regional Councils mean that much is in flux.

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[9] http://www.dhsspsni.gov.uk/tackling-violence-at-home-2009-2010-action-plan.pdf

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The economic climate and ongoing commitment to efficiency savings also mean that to ensure the implementation of policies that seek to combat violence against women, the Ministerial Group will need to ensure that policy initiatives are acted on and regularly reviewed in light of learning from statutory partners, practitioners and communities most closely connected to the experience of women and their families.

4.3   National Context

In Great Britain, the Home Office's National Domestic Violence Plan was produced in 2005. This included five goals – reducing the prevalence of domestic violence, increasing the rate of offences being brought to justice, supporting and protecting victims and increasing reporting. Each year, a report is produced which details programmes and actions against the Plan. For 2008/09 this reports progress against four main objectives:

a. Increasing early identification of and intervention with victims through use of front line professionals;
b. Building capacity within the domestic violence sector to provide effective advice and support;
c. Improving the response of the criminal justice system to domestic violence
d. Supporting victims through the criminal justice system and managing perpetrators to reduce risk.

Policy direction in relation to violence against women has clear resonance in Great Britain, as in Northern Ireland, with policies that seek to address related issues such as physical and mental health, homelessness, support for children and families and crime/criminal justice.

5.   Narrative Research

5.1   Respondents

The first phase of data collection involved narrative research with staff to elicit the stories of women with whom they have worked in the last year who had experienced violence. Staff were sent an explanatory brief prior to the interview with the following information:

> "I am meeting with people (like you) who are "frontline" staff from a range of agencies who respond to women who have experienced violence. In the course of your day to day work you meet women who come to you directly for support, e.g. in the case of Women's Aid, PSNI or social services In other organisations such as Women's Centres, a woman may develop enough trust in staff to disclose the violence they suffer and seek advice on how to access support.
>
> Think of an individual woman you have worked with over the last 12 months who had experienced violence. I would like you to tell me her story as far as you know it. The questions below might help you
>
> ➢ What had happened to her?
> ➢ Who was involved?
> ➢ What mattered most to her?
> ➢ What helped her most?
> ➢ What was missing in the situation that could have made things better for her?
>
> I will record you telling the story. After we have recorded the story I would like you to list what you think are the main themes in each story and also to give the story a title."

38 stories were collected from frontline staff during May – July 2009 from the following centres:

Ballybeen Women's Centre	Belfast Women's Aid Refuge
Chrysalis Women's Centre	Belfast Women's Aid Outreach team
Windsor Women's Centre	Cookstown Women's Aid Refuge
Falls Women's Centre	Derry Women's Centre
First Steps Women's Centre	Foyle Women's Aid Refuge
Causeway Women's Aid Refuge	Social Services Ballynahinch
Lisburn Women's Aid Refuge	PSNI

These were digitally recorded and have been destroyed on completion of the project. The United Nations definition of violence was used[10].

5.2   Themes and Titles

The purpose of narrative research is to find out from people's real experience what has meaning and significance. This method is called 'pre-hypothesis' research[11]. The process is designed to be 'expert free', i.e. the respondents determine what is important rather than the researcher. In this way the 38 stories provided:

- o The themes which were used to construct the snapshot survey instrument (Appendix Three)
- o The titles which represent archetypes of women's experience (see Appendix Four)

It was interesting that staff in different teams were able to recognise the story titles from other sites in the pilot. For example, the story title 'Kept me barefoot and pregnant' was recognised by staff in different centres as describing a set of circumstances with which they are familiar. This suggests that there may be archetypal stories and patterns that are generally recognisable.

Staff were asked to identify the themes from the stories they provided and to give each one a title, which conveyed the message in the story or what can be learned from this woman's experience. The themes identified by staff were used to design the snapshot survey. The most significant themes emerging from the 38 stories fell into the following nine categories:

a. The factors which apply to the women being profiled
b. The nature of her support systems
c. The factors which apply to the perpetrator of her violence
d. The factors describing the woman's relationship with the perpetrator
e. The nature of the violence she experienced
f. The factors that apply if children are involved
g. Experience of the professional services and support and the range of professionals and support services involved, e.g. Women's Aid, Women's Centres, social services, PSNI, NIHE, Social Security, GPs, Health Visiting, Accident and Emergency Services and other voluntary organisations
h. How the woman experienced the legal system
i. The factors which apply if the woman is from a different nationality and living in Northern Ireland

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[10] **The term "violence against women" means any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life (UN 4th World Conference on Women, 1995)**

[11] www.cognitive-edge.com

5.3   Nature of Violence

For the purposes of this approach, each story content itself was primarily a vehicle to extract the significant themes which profile women's experience of violence. That said the section in the survey 'The nature of the violence' provides a harrowing picture of the range of violent methods used (in line with the UN definition). There were a number of stories which contained methods such as:

- o The woman being made to lie face down on the sitting room floor for three hours in front of the family
- o The woman being made to lie in a cold bath for a prolonged period
- o The withholding of money for food for children unless the woman complies with the perpetrator's demands
- o Verbal derogatory comments
- o Use of third party intimidation
- o Use of internet, email and texting to threaten the woman

These methods resemble the systematic and controlled psychological destruction of an individual's personal power and sense of identity.

6. Snapshot Survey

The 'snapshot survey' was developed using the themes from the narrative research. Respondents (frontline staff) were asked to profile women they were working with during the week of 21st to 25th September 2009. The survey was accessed online. A PDF version which could be printed out, completed by hand and returned to Anne McMurray for inputting was also available (Appendix Three: Survey).

Respondents completed a separate survey for each woman they had worked with during that week. The aim was to pilot the survey instrument to test if it:

a. Was easy to administer and complete
b. Generated quantitative data about qualitative experiences; and
c. Would be capable of development for wider use, including self-profiling by women in the future

If the answer to each of the above is 'yes', then the survey has the potential to provide real time Northern Ireland wide monitoring of the nature <u>as well as</u> the prevalence of violence against women in Northern Ireland.

7.   Findings

7.1   Response to Survey

Staff from the 15 teams (Women's Aid (5), Women's Centres (5) PSNI (1) and Social Services (2)) profiled a total of 113 women who had experienced violence during the week of 21st to 25th September 2009. This represents a small sample of the female population who may have experienced violence during that week. The representation of respondents was:

Women's Aid   58%
Women's Centres   20%
PSNI   4%
Social Services   18%

Respondents were asked to indicate which factors in the survey categories applied to each of the women they profiled. This meant that respondents could skip items that did not apply to the particular woman they profiled. This means that the findings show what is known to be present in the woman's situation.

Respondents were asked to indicate where the woman currently lives: i.e. in a rural or urban (town/city) setting. 35% live in an urban setting, 17% live in a rural setting. A number of the stories collected through the narrative research indicated that the geographical isolation of women living in rural settings contributed to their vulnerability at the hands of their perpetrators and the difficulty for them in accessing support; or for support, e.g. the PSNI being able to arrive quickly in the event of an emergency.

Women's Aid provides accommodation for women who have experienced violence. Many of the women they profiled will currently be living in a refuge - 58% of the sample. The remaining 42% of women profiled are living in the community.

In regard to income, 23% of the women are in paid work and 67% of the women profiled are receiving benefit payments. The source of finance of the remaining 10% is unknown. In this sample almost a quarter of the women are working. We cannot say if the 67% were always on benefits or whether some are now on benefits as a result of the violence.

The rest of this section will highlight the responses to each of the survey questions.

7.2 Factors that Apply to the Women being profiled

102 women were profiled in this question. Responses are provided in Table One:

Table One: Factors that apply to the woman being profiled

Which of the following factors apply to the woman you are profiling? (Please tick all that apply)
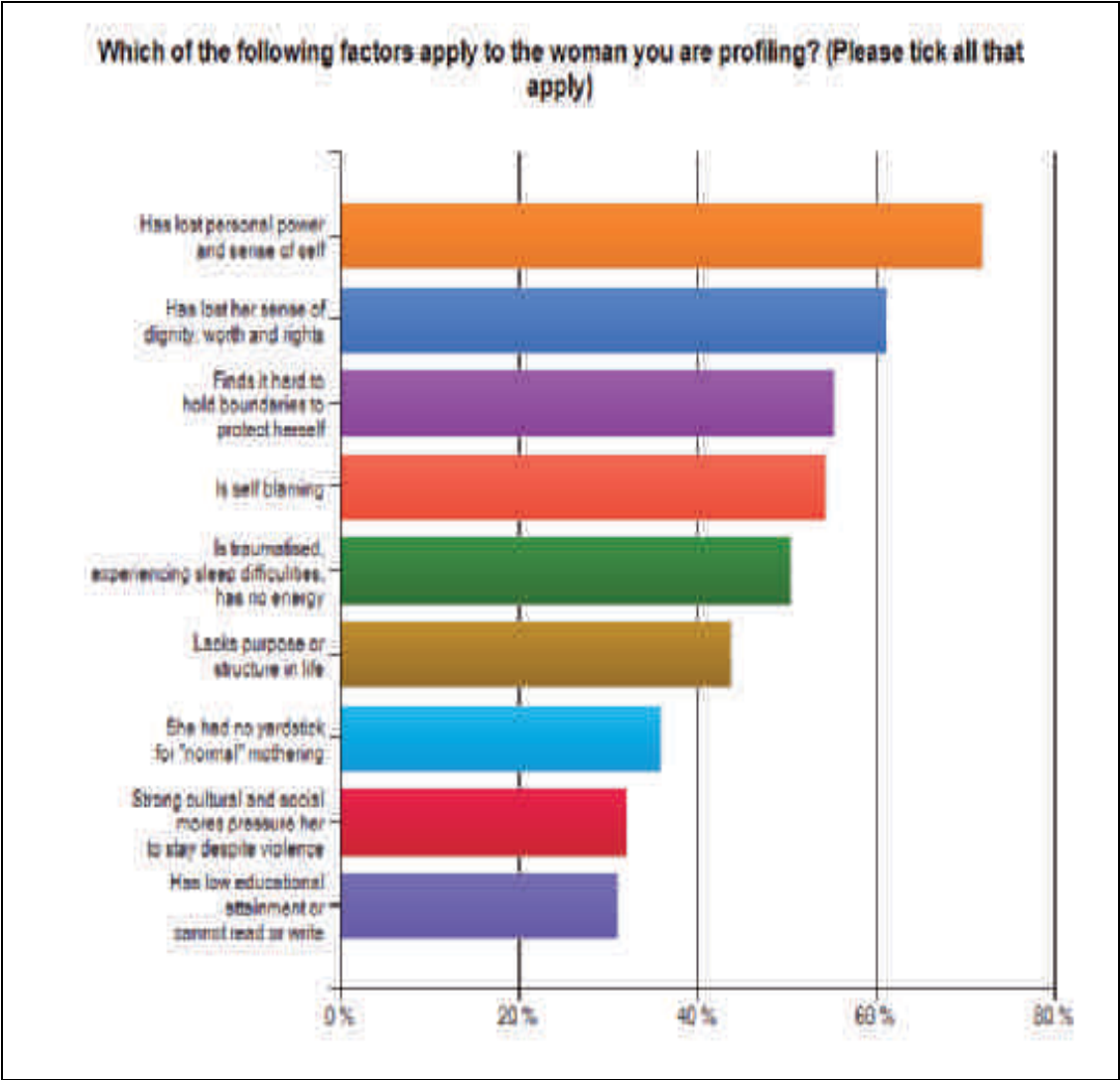
These findings corroborate research[12] that shows the impact of violence against women is to remove self-esteem and self-confidence, increase vulnerability and mental health issues. These factors reduce her ability to fulfil her familial, social, political and economic roles. It shows the sorts of emotional and psychological needs that women who have experienced violence present with to support and protection services.

For 31% of the women profiled, there exists strong cultural and social pressure to stay in the violent situation, despite the negative impact on the woman's mental and physical health and well being.

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[12] Domestic Violence and Welfare Policy, Shamila Lawrence, 2002, Research Forum on Children Family and the New Federalism

Guidelines for leaders of faith communities in Northern Ireland have been produced (2008), which advise on how to respond to domestic violence and abuse. These should be disseminated so that faith community leaders are engaged in identifying the role they can play in supporting women who have experienced violence.

7.3 The Nature of Support Systems

The narrative research had highlighted the issue of isolation (geographic or social) as a key factor in the situation for women who experience violence. A number of stories had also shown that where a woman had positive support systems in place, there was a greater chance she could leave the violent situation or relationship.

103 women were profiled against this section of factors. Responses are provided in Table Two:

Table Two: Support Systems

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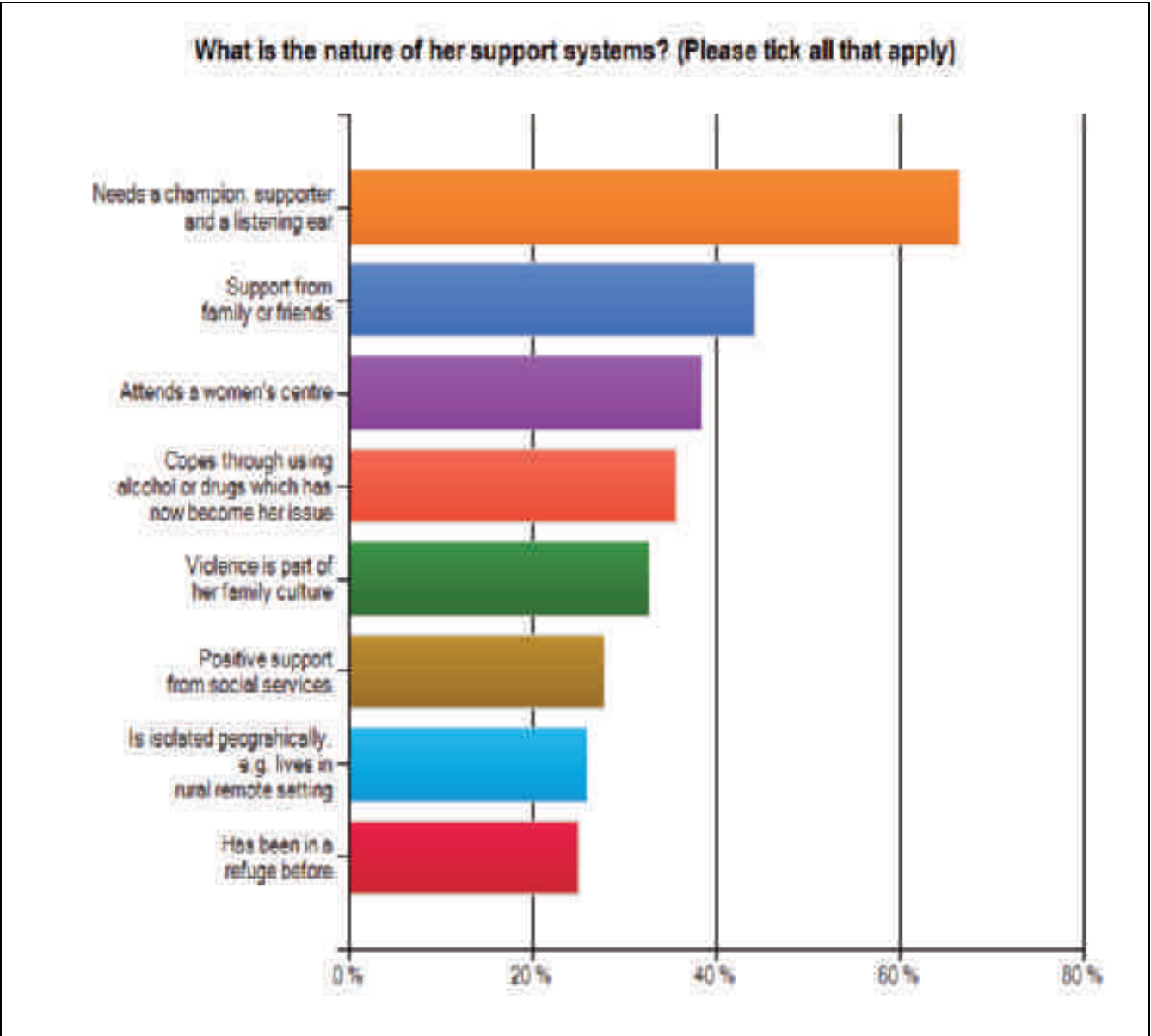
67% highlighted the woman's need for 'a champion, supporter and a listening ear'. This was the most significant support issue identified. 44% have support from family or friends and 39% attend a Women's Centre. 36% 'cope through using alcohol or drugs which has now become her issue'. 33% indicated that 'violence is part of her family culture'.

The findings in this section highlight the importance of personal support and being listened to for women who have experienced violence. It also reinforces the mental health issues raised in the first question by indicating the dependency on drugs or alcohol which can be created when self-esteem and life coping mechanisms are damaged.

A picture emerges of a woman who has experienced violence losing her self-confidence and self-worth, then using alcohol or drugs to cope with stress, which in turn leads to addiction and other attendant problems.

Women's Aid NI provides the championing role to women who they work with. Across Northern Ireland, Women's Centres provide this role in community settings. Much of their funding now is for formal accredited training. Informal support and personal development happens as a result of the trusted relationships that develop between women who attend the centres and staff.

This is due to the empowering ethos of the Women's Centres which is an example of the "intangible" value provided by Women's Centres which increases social and human capital among women in many communities in Northern Ireland. This qualitative social benefit is typically not captured by quantitative performance indicators alone. Continued funding for the personal development which builds confidence and assertiveness is essential to strengthening women's role in Northern Ireland society.

7.4   Factors that apply to the perpetrator

Respondents completing the survey were asked to profile what was known about perpetrators. This information would in some cases have been provided by women themselves, but in other circumstances the perpetrator may be known to the respondent, e.g. family and childcare social services. The factors in this category were those which had been generated through the narrative research. 103 women's situations were profiled (which equates to 103 perpetrators). Responses are provided in Table Three.

Table Three: Perpetrator

Which factors apply to the perpetrator of her violence? (Please tick all that apply)
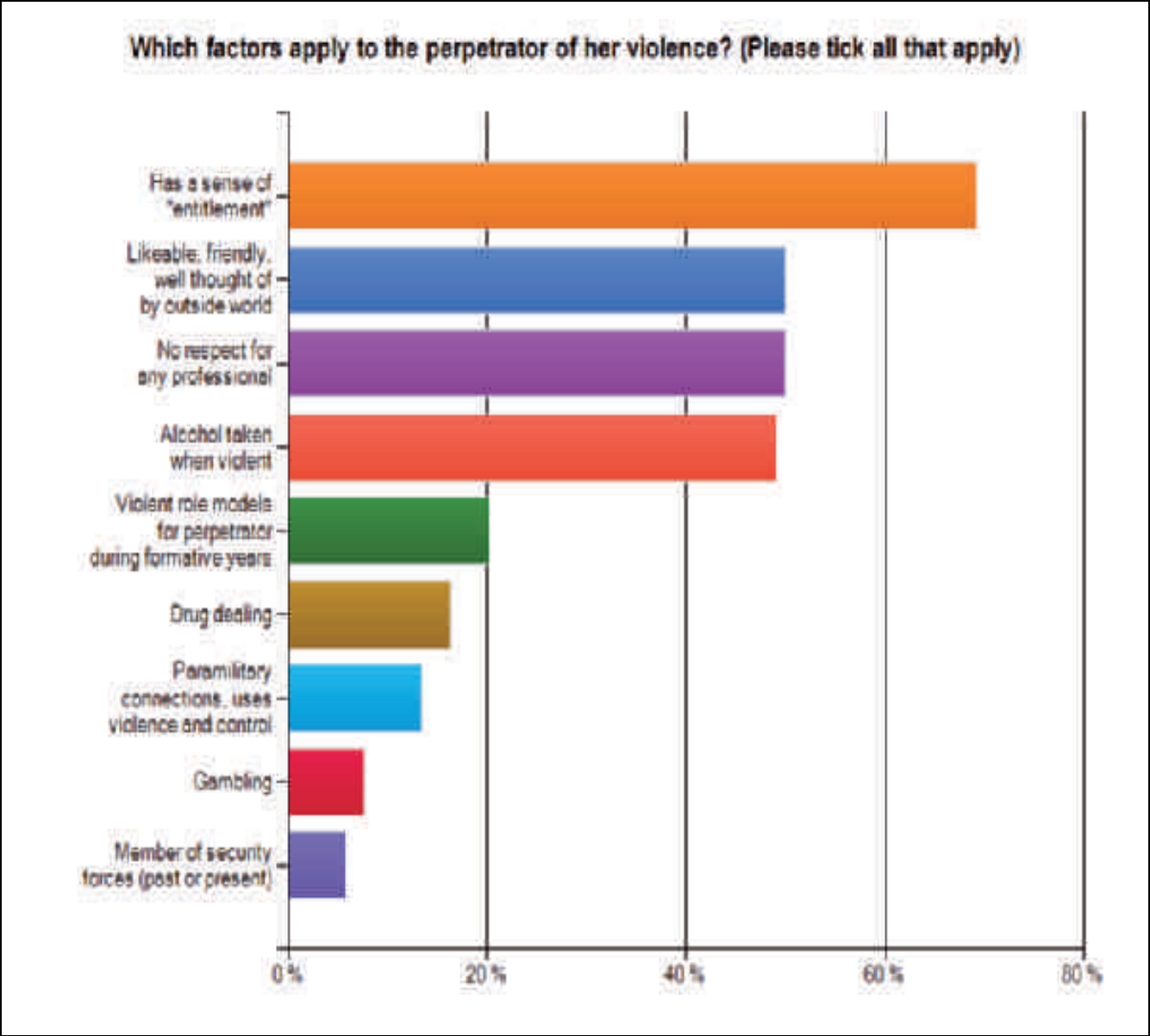
The sense of 'entitlement', i.e. that 'it is okay for me to be violent towards a woman', corroborates with other research[13] into perpetrator behaviour and raises questions about how societal and cultural attitudes about male/female relationships are perpetuated and transmitted through generations.

The concept of entitlement is described in the extract below.

> *"Sense of entitlement (masculinity)*
> *Violence and other abusive behaviours are used to control. Domestic violence perpetrators use abusive behaviour to support their sense of entitlement by:*
>
> - *punishing the woman for something she has done wrong ("teaching her a lesson")*
> - *forcing her to do something she does not want to do (e.g. "shut up")*
> - *stopping her from doing something she wishes to do (e.g. leave the relationship).*
>
> *This is establishing the power to set the further rules of the relationship (e.g. he can drink, spend money, come and go as he pleases without criticism). Through this the perpetrator also obtains services from his partner (e.g. sex, housework, emotional care) and restricts her movements and autonomy. These expectations are deeply enmeshed with gender and identity, with what it means to be a man and, in particular, a man in a relationship with a woman.*
>
> *Despite the fact that the perpetrator knows that his violence is wrong, this sense that entitlement is bound up with received ideas about gender identity allows him to see his behaviour as 'reasonable' given his partner's 'unreasonable' resistance to his expectations."*

This snapshot survey sample shows that a significant (number of) men in Northern Ireland potentially hold this 'sense of entitlement' which is enforced by societal beliefs. Mindset and cultural change is necessary to reduce the prevalence and acceptability of this sense of entitlement.

Half of the perpetrators have 'no respect for any professional'. This theme emerges again later in the survey findings. These relate to the difficulties that the "official" external support agencies, i.e. PSNI, social services, have in engaging perpetrators in stopping the violence and resolving the problems or consequences that they have given rise to, e.g. negative impact on children.

The result of this is that the woman, the victim of violence, (who as the first two questions in the survey have shown, is experiencing loss of confidence, life coping capability, sleep loss and trauma) becomes by default the point of contact for the official statutory agencies. As such she is required to be capable of engaging with them on a range of family issues particularly if there are children involved and appearing confident, in control and capable.

Similarly, 50% of the perpetrators in the sample are regarded as "likeable, friendly, well thought of by the outside world". This means that it may be harder for a woman to be believed when she discloses violence against her. It reinforces the need for a 'champion' and supporter in the face of others' tendency to deny the violence she has experienced.

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[13] Blacklock, Neil, Advances in Psychiatric Treatment (2001) 7: 65-72
© 2001 The Royal College of Psychiatrists Domestic violence: working with perpetrators, the community and its institutions

Three other important factors applied to perpetrators in this sample: 17% are engaged in drug dealing, 14% have paramilitary activities and 4% are within the security forces. This may highlight areas needing further investigation across the whole of Northern Ireland. The role of violence in Northern Irish society has been significant during the last 40 years. In this context these findings may not be surprising but they are disturbing.

Finally, 20% of perpetrators were known to have had violent role models during formative years. This does not mean that 80% did not; it just means that it was reported as affirmative for 20% of the sample.

7.5   The woman's relationship with the perpetrator

103 respondents profiled what they knew about the woman's relationship with the perpetrator of violence against her. Responses are provided in Table Four.

Table Four: Relationship with Perpetrator

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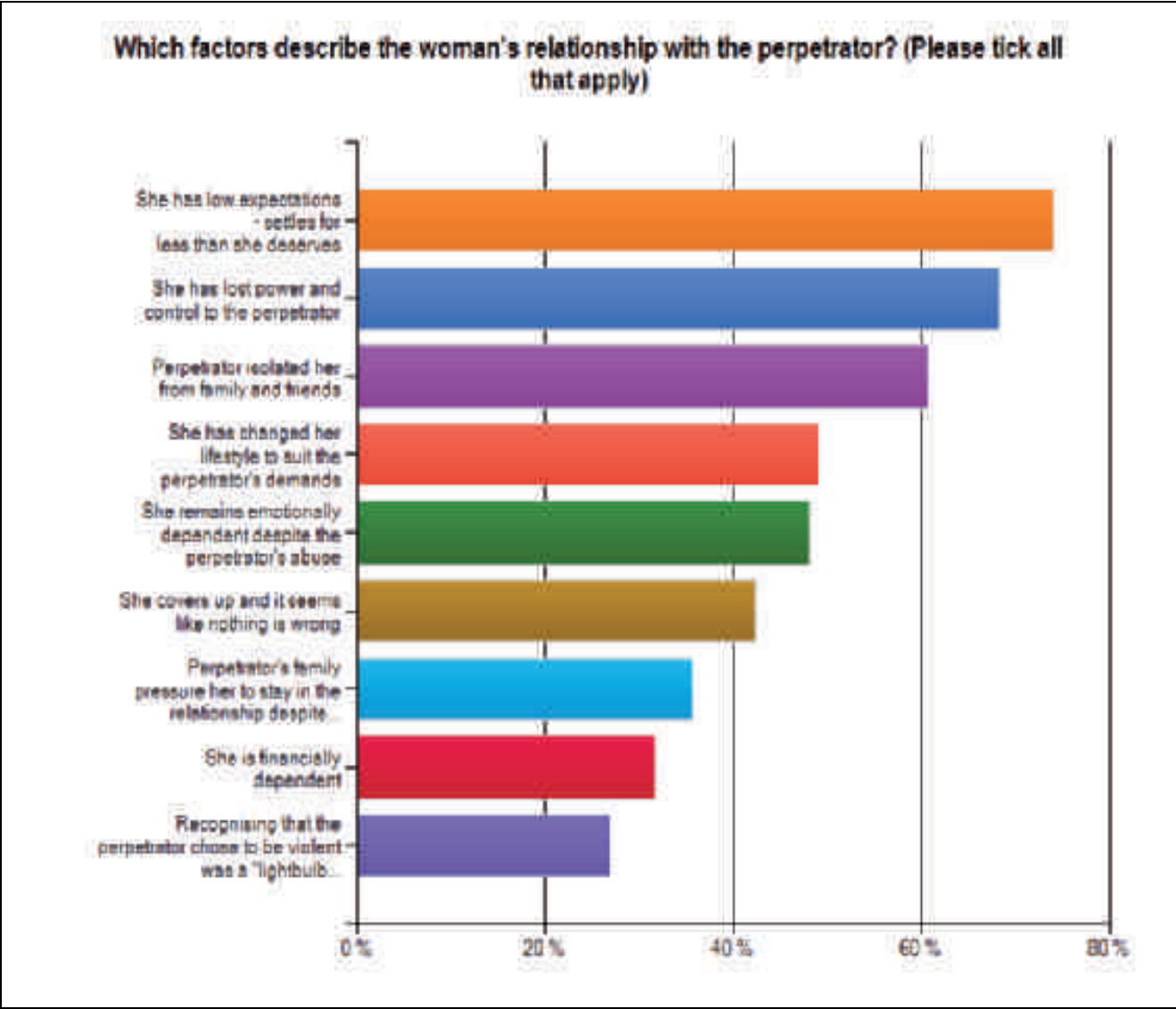
The finding of 'low expectations' correlates almost exactly with the 74% in 7.2 who had 'lost personal power and sense of self'. The two factors are mutually reinforcing.

Similarly, the 68% who had 'lost control' to the perpetrator and the 61% who are isolated correlates with the 62% in 7.2 who had 'lost sense of dignity, worth and rights'.

These findings taken together support the need for 'a champion, supporter and a listening ear' (67%) to enable them to take steps to recover and rehabilitate themselves from the violence they had experienced.

44% of the women in the sample 'cover up' the violence, which may indicate the stigma they experience with disclosure. This highlights the importance of confidential, easy access to enable women to disclose, get support and take action to protect themselves.

36% of women profiled in this section also experienced the perpetrators' family putting pressure on her to stay despite knowing about the violence she was experiencing.

7.6   The nature of the violence against the woman

The narrative research had highlighted a range of types of violence that women experience and methods used to inflict the violence. 104 respondents described the nature of violence used against the women they profiled in this section. Responses are provided in Table Five.

Table Five: Nature of Violence
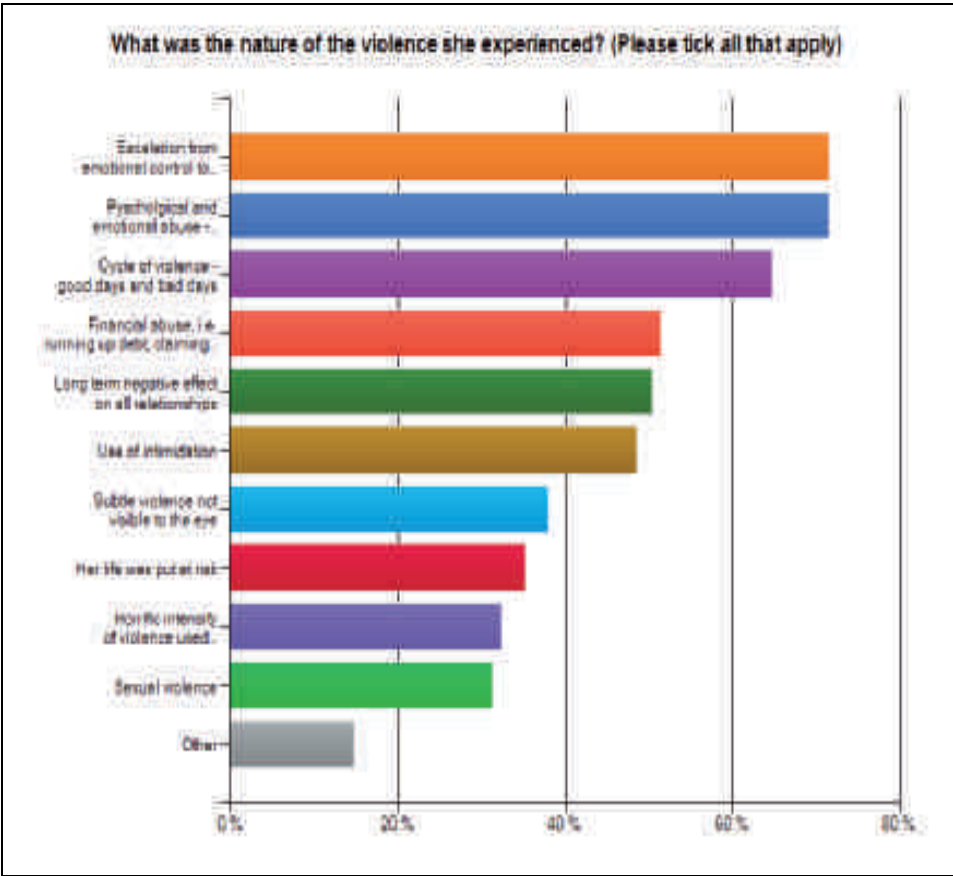
72% had experienced psychological and emotional abuse, which involved punishment and disapproval. For 72% emotional control and abuse had escalated to physical violence. This trend of escalation is corroborated by research into violence against women.[14] Emotional or psychological abuse is an indicator of physical violence. It also links with the 70% reporting the perpetrator's sense of 'entitlement' to treat the woman in an abusive way and the 73% of women who had lost their sense of personal power and sense of self.

36% of the women profiled in that particular week had had their life put at risk, with the violence used against 33% of the women described as having an 'horrific intensity'. This suggests that these women would have required medical attention. This cost to the health and social services adds a burden at a time of cutback and financial efficiencies. It demonstrates a business case for resources going to preventive measures, such as easy access to support and information in the community.

51% of women experienced financial abuse with the perpetrator running up debt, claiming her benefits or withholding money. In some cases this was linked to sexual violence (32%) where money was withheld unless sexual activity determined by the perpetrator was engaged in by the woman. 5% of the women were raped in front of others or the children. 49% of women experienced intimidation and 23% of women experienced threats through texting, email or third parties on behalf of the perpetrator. For 24% of the women, the violence against them was reinforced by the cultural beliefs they, the perpetrators or their extended family/community subscribe to, e.g. faith based, religion or community culture.

64% report experiencing the well evidenced cycle of violence where bad days are followed by good days[15].

For 21% of the situations where violence is used against women, weapons were involved. This means the perpetrators may either be using a licensed firearm, or a knife or other type of weapon. In 51% of the situations, long term negative consequences were evident for all relationships. One woman out of the 104 profiled had been trafficked for the sex industry.

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[14]http://www.womensaid.org.uk/domestic-violence-survivors-handbook.asp?section=0001000100080001000310003&sectionTitle=What+is+domestic+violence%3F
[15] Duluth Cycle of Violence, Walker 1979

7.7   Impact on children

When children are involved, violence against women has a significant effect on their emotional and physical health and wellbeing. Domestic violence is regarded as a key negative indicator of risk in child protection by social services. Children were involved in the situations of 86 women who were profiled. This section explores the impact on them as known to the respondents of the survey. Responses are provided in Table Six.

Table Six: Impact on Children

If there are children involved, please tick all the factors that apply. If children are not involved, you may skip this section.

61% of the women 'need tools and support to reinstate role as mother'. A consequence of violence (as evidenced in previous sections 7.2 and 7.4) is the woman loses her ability to perform roles such as mother, daughter, sister, friend, employee or student. This highlights the importance of support to redevelop the role of mother and parenting skills for the

woman, and the need for responsive support services with staff skilled in methods to assist this process.

51% of the women had 'lost parenting skills as a result of violence' and yet 50% of the women profiled stayed in the violent relationship for the children. For 36%, the threat of violence to the children finally motivated the woman to leave the violent situation.

Many women stay in the relationship "for the sake" of the children. Fears of losing children or being able to cope are a disincentive to accessing support. The pattern emerges that the women/mothers stay until the children become direct targets of violence.   Earlier intervention through universally accessible 'entry points' to support in the community could prevent this escalation and increased risk of serious harm to women and/or her children.

This links to the Hardiker model for children's safeguarding and protection[16] which shows that greater availability of universal community based services can provide support in a non stigmatising way at an earlier stage to reduce risk and harm to children. This underlines the important role played by community based crèches, playgroups and day care centres to support women and children and break the pattern.

41% of the children known to the respondents were exhibiting behaviour problems, including aggressive and anti-social behaviour. The impact of violence on children and young people is expressed by them in a variety of ways.[17] In Northern Ireland, children and young people who are affected by violence in the family are less likely to achieve the health and well-being outcomes as set out in the Regional Children's Strategy, 2006-2016[18] such as school readiness as well as Living in Safety and Stability and Contributing Positively to Community and Society.

The importance of supporting children to live free from violence in the family is reinforced by the Report of United Nations Convention on the Rights of the Child, 49th Session (2008)[19] which recommended that each member state:

a.   establish mechanisms for monitoring the number of cases and the extent of violence, sexual abuse, neglect, maltreatment or exploitation, including within the family, in schools and in institutional or other care;

b.   ensure that professionals working with children (including teachers, social workers, medical professionals, members of the police and the judiciary) receive training on their obligation to report and take appropriate action in suspected cases of domestic violence affecting children;

c.   strengthen support for victims of violence, abuse, neglect and maltreatment in order to ensure that they are not victimised once again during legal proceedings;
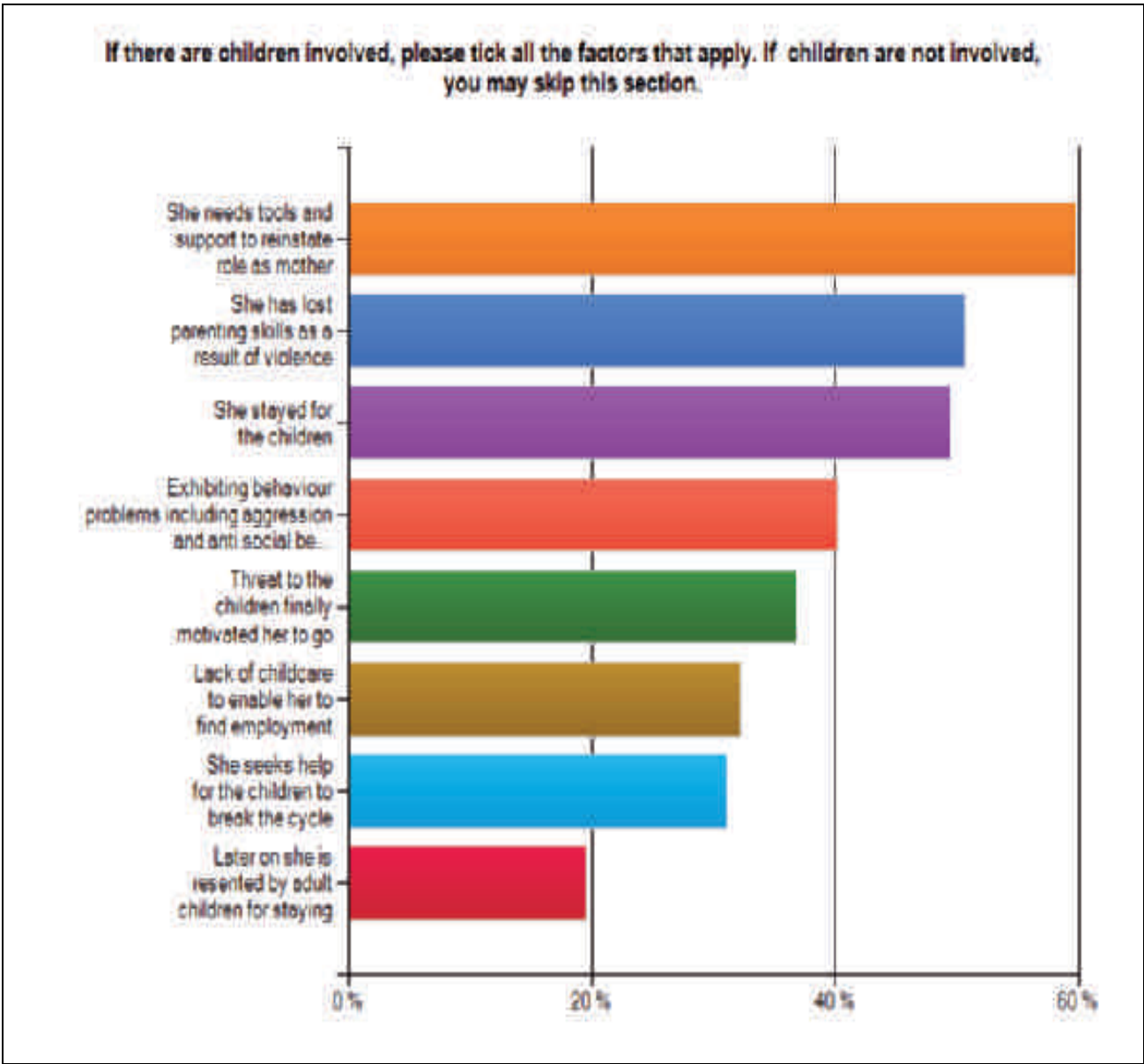
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[16] Hardiker et al., 1995

[17] http://www.womensaid.org.uk/domestic-violence-survivors-handbook.asp?section=00010001000800010031003&sectionTitle=What+is+domestic+violence%3F

[18] http://www.allchildrenni.gov.uk/

[19] http://www.article12.org/pdf/What%20is%20the%20UNCRC%20(2009).pdf

provide access to adequate services for recovery, counselling and other forms of reintegration in all parts of the country.

In the absence of skilled therapeutic intervention and the restoration of confident parenting in the mother, these children may mature into adults with aggressive and anti-social behaviour. This information throws light on how the perpetuation of destructive relationships between men and women continues between generations. Many women are aware of this and 31% of the women profiled are actively seeking help for their children to break the cycle of violence.

7.8   Women's experience of professional and support services

A range of professional and support services are often involved with a woman who has experienced violence.   Some of these have a statutory responsibility for safety and protection, e.g. PSNI and Social Services, education (DE), housing (NIHE), finance (Social Security) as well as the provision of physical and mental health care for women and children (GPs, Accident and Emergency services, health visitors). Many women also access voluntary or community organisations for help and support, e.g. Women's Aid, Women's Centres, NSPCC, Nexus and Barnardos. This section tested for how the woman had experienced professional and support services. 100 women were profiled in this section of the survey. Responses are provided in Table Seven.

Table Seven: Professional and Support Services
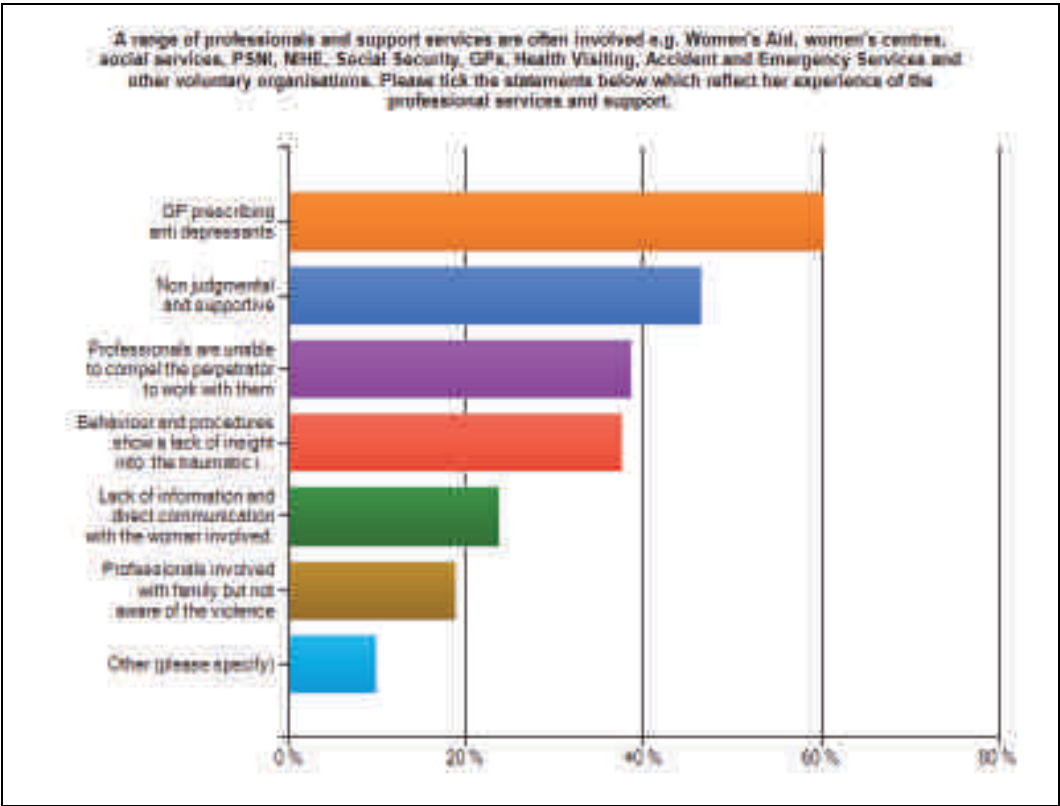
The most significant finding was that 61% of the women had been prescribed anti-depressants by their GP (comparable with GB). This re-iterates the link between women's

mental health and well being and the experience of violence, e.g. causing depression or addiction.

Exploring violence as a possible causal factor for a woman should be a routine line of enquiry for GPs, when diagnosing the nature and causes of her mental health issues. This links to earlier findings about dependence on drugs (and alcohol) to help cope, given the addictive nature of commonly prescribed anti-anxiety drugs, e.g. Diazepam. While medication may be necessary to help a woman cope at a certain point, medication alone is not an adequate response to helping her. It may in fact compound her difficulties.

The physiological impact of anti-depressants is to reduce energy levels. This may further impair the woman's parenting ability if she has children. Anti depressants may cause withdrawal symptoms which may have a negative affect on the women's ability to cope. The use of a biological medical response to the woman's mental health needs will have a limited impact without the additional intervention of a 'champion, supporter, listening ear'.

47% of women experienced professionals and support services as non-judgemental and supportive. This would appear to be unacceptably low given the value base which is core to professional training and education. In 39% of the women's cases, professionals were unable to compel the perpetrator to work with them – which correlates with the finding in 7.4 that 51% of perpetrators have no respect for professionals or support services.

In England, a two week 'Go Order' has been piloted where the perpetrator is compelled to leave the situation. This has been shown to be beneficial in creating the 'safe space' for
   a) the woman to recover from a violent experience, and
   b) to take steps to put in place support and protection.

In the light of the earlier findings in regard to the debilitating impact of evidence on women's mental health, 38% of respondents reported that professional behaviour and procedures show a lack of insight into the traumatic impact of violence on women. This suggests that the design of the procedures which professionals are obliged to follow are not influenced by an understanding of how violence impacts on a woman's emotional and mental wellbeing.

7.9   Women's experience of the legal system

Not all women who experience violence will necessarily engage with the legal system in Northern Ireland. Only 68 of the 113 women profiled in the snapshot survey had taken legal action against the perpetrator of their violence. We can only speculate why more women do not pursue justice and protection through the legal system:
   a) they may prefer to just leave the violent situation rather than get engaged with the legal system,
   b) the experience of engaging with the legal system is perceived as not worthwhile as "justice" is not done
   c) barriers may exist to utilising the protection of the law, e.g. cost, access.
The experience of the women who have experienced the legal system is detailed below. Responses are provided in Table Eight.

Table Eight: Legal System.

How has the woman experienced the legal system? (Please tick all that apply)
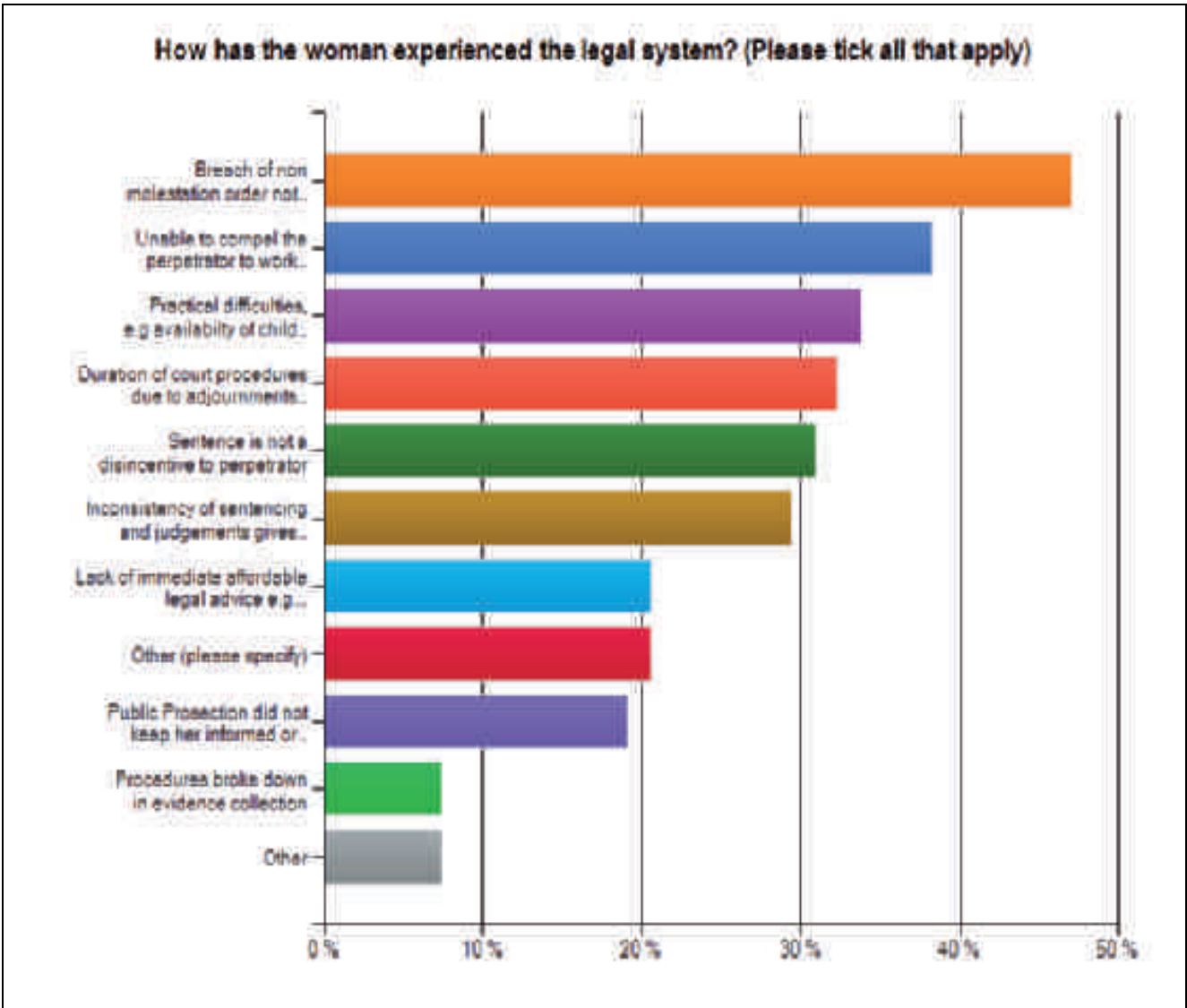
Of those who had experienced the legal system, for 47% the breach of the non-molestation order was "not taken seriously". This requires more investigation, as the PSNI have the power of arrest in response to a breach. Does this imply that these powers are not being invoked? If breaching of a court order is perceived by almost half of the respondents as not generally being recorded as a serious issue, it raises concerns about the public perception and confidence in legal protection.

In 38% of the women's situations, the legal system was unable to compel the perpetrator to co-operate and comply. This links with earlier findings about the perpetrators lack of respect for professionals and sense of entitlement. It may reinforce the feeling of 'is it worth it?' for women to seek justice and protection from the perpetrator through the law.

For 21%, the cost of the non-molestation order was unaffordable. 31% report that sentences are not a disincentive to perpetrators and 29% report inconsistency in sentencing

and judgments resulting in women having a low level of confidence in receiving fair treatment from the legal system.

34% experienced practical difficulties in participating with the requirements of the legal system, e.g. availability of childcare, short notice to attend court. For 19%, Public Prosecution Services did not adequately keep the woman informed of progress or explain the process for criminal proceedings.

7.10   Women from other nationalities living in Northern Ireland

There has been an increase in the non Northern Irish population living in Northern Ireland as a result of economic immigration and those seeking political asylum. Twelve women out of the 113 who were profiled were from a different nationality. Responses are detailed Table Nine.

Table Nine: Non National Women
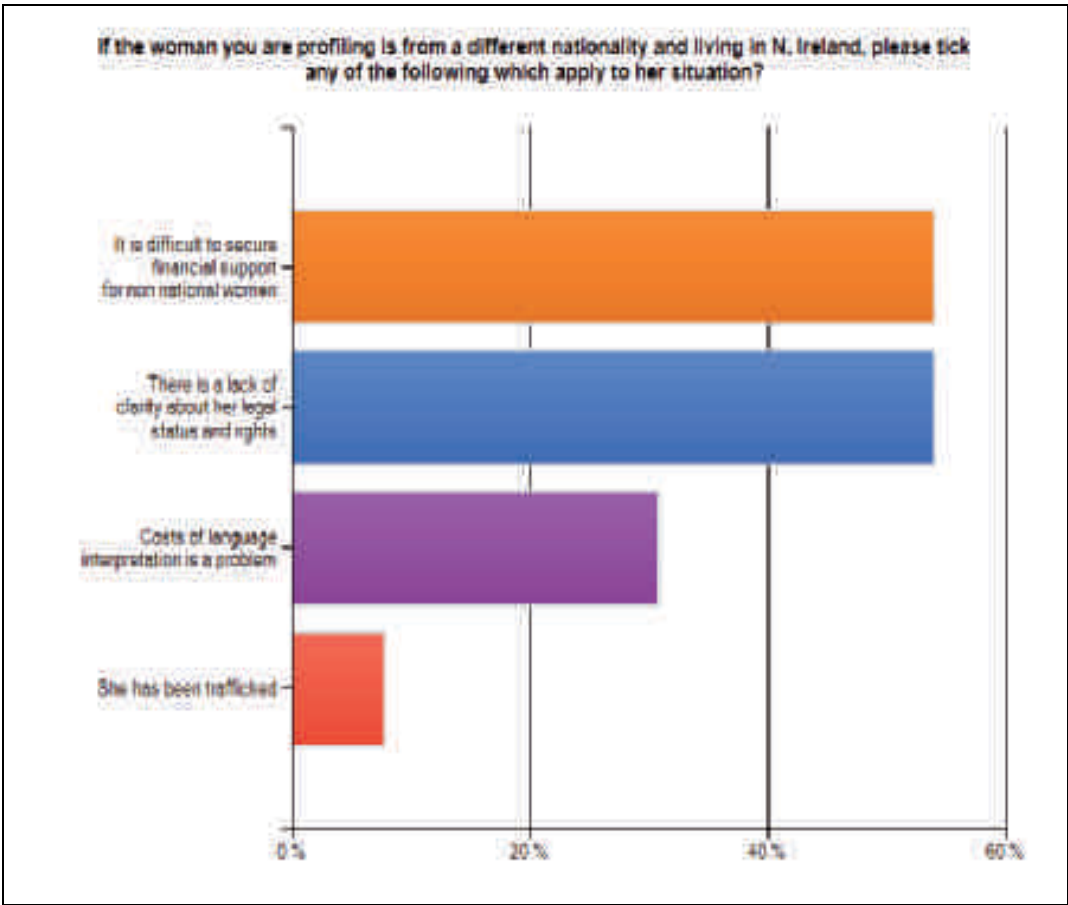
The one woman who had been trafficked in the sample of 113 was from a different nationality.

The female non-national population in Northern Ireland is approximately 7,433 (NISRA 2008). The resident female population aged between 18-64 in Northern Ireland is

approximately 525,540 (NISRA 2007). This means that the non national population of women is approximately 1.4% of the overall N. Irish. However non national women represent 10.6% of the sample in the survey representation. This raises a number of issues:

a) how to explain that the extent of violence experienced by women from other nationalities is significantly higher than their representation in the general population;
b) the access they have to support systems and public funds; and
c) the lack of clarity around financial and legal rights and the additional impact this has on their vulnerability to violence, mental ill-health and protection/welfare of any children involved. Different regulations apply to different nationalities. This adds to the complexity (and cost in terms of time) for staff and organisations trying to support these women.

Conclusion

The 'snapshot survey' conducted in a sample of 15 services to support women reveals a harrowing picture of the nature of violence experienced by 113 women during the week of 21st to 25th September 2009 in Northern Ireland.

While it is impossible to accurately extrapolate from this the nature (and prevalence) Northern Ireland wide, it highlights the importance of having real data to use in planning, targeting and evaluating the impact of services.

8.   Analysis of the Findings: Main Issues Emerging

The findings of the 'snapshot survey' were presented to a workshop held on the 13th October 2009.   The 24 participants in the workshop included Women's Aid, WRDA, Women's Centres, Women's Support Network, DHSSPSNI, NIO, PSNI, NIHE, Social Services, DSD and academics.

The purpose of the workshop was to assess the significance of the findings and how they relate to the policy context in Northern Ireland. The new action plan for 2010 based on the Regional Strategy: Tackling Sexual Violence and Abuse 2008-2013[20] had just been published at the start of October 2009. Hard copies had been provided for the workshop participants by the DHSSPSNI.

This section will summarise the main issues emerging from the analysis of the findings.

8.1   Mental Health and Well-being

The findings indicate the negative impact of violence on women's mental health and well-being which impairs her ability to fulfil family, community, economic and social roles.

The dependency on drugs and alcohol to cope or through prescription of anti-depressants further debilitates her capacity to take control of her life and function at her optimal capability.   Throughout the findings, the negative impact of violence on a woman's self esteem, confidence and personal resilience is illustrated. A solely medical response by the use of prescription anti depressant drugs may further exacerbate the problems for the woman, particularly if the GP who is prescribing is unaware that the causal factors are related to violence.

8.2   Formal structures and procedures

The combined effect of results in sections 7.1 and 7.2 means that a woman who has experienced violence may find herself in an incompatible duality of role as
   a. a person in recovery from a debilitating traumatic experience,
   b. the 'formal agent' of the family engaging with the statutory official authorities on behalf of herself and her children.

Formal procedures and structures, e.g. the legal system, child protection procedures and evidence collection do not appear to have been designed to take account of the probable impairment in the woman's capacity to 'be in control' during the aftermath of a violent episode against her. It may be compared to a grief reaction. We recognise that people who have been bereaved deserve sensitivity. Legal and statutory procedures are designed to be factual, formal and rational. This creates a context which the woman may find difficult and insensitive to her emotional distress.

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[20] http://www.dhsspsni.gov.uk/tackling-sexual-violence-and-abuse-2009-2010-action-plan.pdf

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It also emerged that women who have experienced violence need 'private time' without the presence of the perpetrator so they can freely without fear report their experience. Examples given included the perpetrator being present when a woman sought to withdraw a non-molestation order with the PSNI, of the perpetrator accompanying her to Accident and Emergency. His presence will impact on her ability to communicate the facts. 'Private time' does not yet appear to be universally implemented.

8.3   Champion and Support

The need for 'soft' and complementary services which provide a 'champion, supporter, listening ear'; to enable the woman to fulfil the incompatible dual roles expected of her in the current arrangements is evidenced by the findings. Given how funding is allocated, a business case might be needed which demonstrates the potential role and benefits to the 'system' that can be realised by resourcing this kind of service through existing community facilities such as Women's Centres that are not immediately identifiable as being a provider of support to women experiencing domestic violence. The provision of such services could offer cost savings to the health care system and social services in particular, by facilitating earlier reporting and developing person centred signposting to relevant agencies that can help to interrupt the escalation of violence and the associated costs

This service is necessary not only to assist recovery and rehabilitation, but also as an early intervention to interrupt the escalation of emotional violence to physical violence. Women's Aid and Women's Centres currently play a significant role in this provision. The funding stream needs to be protected in any transfer of power through the Reform of Public Administration and the transfer of funding from the DSD to other bodies.

The importance of non-judgmental support, particularly from professionals is an area where more progress is necessary.

8.4   Gender Relations – education and culture change

Societal tolerance of violence against women, the prevalence of cultural pressure to remain in a violent relationship which destroys self-confidence and self-worth and the emulation by children of aggressive and anti-social behaviour, highlights the need for mainstream education at all levels about positive gender relationships between males and females. This is necessary to contradict and challenge the cultural mindset which perpetuates a sense of entitlement in perpetrators.

Mainstreaming Gender Relations and Citizenship education is essential if this is to be addressed. Models such as the Women's Aid pilots have been successful and offer a way forward. This report welcomes the initiative announced on the 24th November 2009 by the UK Government that gender relations education would be mainstreamed in Schools by 2011. It is important that this applies also to Northern Ireland.

8.5   Specialist Support

Methods and interventions 'to reinstate the woman in her role as parent' as well as to restore self-confidence and self-esteem are necessary to remove the barriers to full participation in society by women who have experienced violence and their children. Access to specialist services is required. Staff training in this area must be provided, particularly with children who are showing behaviour problems. This needs to be addressed by the Northern Ireland Assembly if it is to comply with the United Nation Convention on the Rights of the Child resolution, 2008.

8.6   Nature of violence

The survey highlighted the range of types of violence women experience, e.g. psychological, physical, isolation, financial, intimidation, remote control, life threatening and the use of weapons. The relationship between alcohol and violence requires further investigation as it was not as prevalent as may have been predicted (41%). In fact the driver of 'entitlement' was stronger (70%). This supports the UN definition and the proposition that violence is rooted in gender inequalities.

If the progression and archetypes of violence can be patterned and recognised, this information may help earlier intervention to prevent the escalation of violence and cost to individual women, her family and the Northern Ireland economy. More needs to be discovered in this area to develop knowledge and information about indicators of risk and personal protection strategies. In the Northern Ireland context, the issue of use of weapons and paramilitary links needs to be addressed. The education of young people in relationships is necessary.

8.7   Regional Strategy Implementation

The 'Tackling Sexual Violence and Abuse, A Regional Strategy 2008-2013' was benchmarked against the survey findings. All of the issues raised appeared to have been addressed by the Regional Strategy which is positive. However, the outworking and implementation of the Regional Strategy requires communication, co-ordination and accountability between government departments, the range of professional and support agencies, the justice system, grassroots organisations and the general public. The 2010 Action Plan will test the commitment to implementation and support.

There are a number of sub groups and inter departmental working groups which are responsible for progressing aspects of the strategy. It appears that the Children and Young People Sub-Group last met in April 2007[21], when attendance at meetings was noted to be falling. This raises concerns about accountability for the implementation of the regional strategy and how it is being driven.

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[21] http://www.dhsspsni.gov.uk/index/hss/domestic_violence/dv-children-and-young-people-subgroup.htm

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In Northern Ireland it appears that at the level of health and social services trusts, there is no specific co-ordinator role to facilitate information sharing, implementation and progress monitoring. This means that there can be communication problems between the statutory providers and other local provision 'on the ground' and low level of evidence collection of the impact of interventions.

Feedback from the policy workshop was very positive, particularly in regard to the exchange of perspectives, new information and contacts. It highlighted the benefits to be gained from increasing social capital among the community of interest which seeks to champion an end to violence against women in Northern Ireland. Women's Aid Federation play this role in Northern Ireland and this will continue to be essential in the future.

8.8 Self Assessment

The 'snapshot survey' was developed through the stories and experiences of frontline staff working with women who had experienced violence. The 'snapshot survey' was responded to by staff who profiled the women they worked with in one specific timeframe. The survey information was regarded as useful in providing a baseline for a sample.

There is the potential to develop the survey tool to be self-administered by women themselves on receipt of services to build up a sustainable real time knowledge repository of the prevalence of violence against women in Northern Ireland. This would generate trend data that could be used to evaluate the impact of the Regional Strategy. This would provide a method to measure progress over time in response to its implementation and provide a longitudinal evidence base to evaluate impact.

8.9 New Media

The use of new media, i.e. texting, mobile phones, internet email to control and intimidate women is an emerging issue particularly for young women. This points to the need for a protocol with the private sector providers of these media to enable women to easily place bars on their phones or email accounts. It also highlights the need for organisations and businesses to have domestic violence and abuse policies to support female employees and take action if necessary.

8.10 Perpetrator Engagement by Statutory Authorities

Perpetrators often see themselves as 'entitled' to inflict violence on women. A significant proportion of perpetrators do not engage with professionals or the legal system apparently *with no penalty*. While this was a study into women's experience of violence, the findings highlight the importance of perpetrators being engaged to take responsibility for their behaviour and its consequences. This is an issue for the statutory agencies and judicial system to address in a consistent manner. At a societal level, acceptance of 'entitlement' needs to be extinguished.

8.11   Non National Women

The complexity of issues facing non-national women who experience violence is highlighted in this sample. The disproportionate numbers emerging in this sample suggest that they may experience a greater prevalence of violence. They face structural barriers of language, access to services, geographic isolation and finance. The organisations supporting them may not receive any funding to do so. More needs to be known and understood about these women to inform policy, strategy and services.

8.12   Legal System

There is scope for more positive engagement with the legal system by women who have experienced violence. In Northern Ireland, the law must be seen to be fair, impartial and upholding individual rights and freedom. The areas for improvement relate to consistency of judgements and enforcement of orders; easement of practical arrangements such as lack of access and affordability; and sensitive support and advice for women who are preparing a case for prosecution of the perpetrator.

9. Recommendations

The recommendations are based on the analysis of the findings. They relate, where appropriate, to existing policies and strategies. The Regional Strategy is comprehensive and seeks to address many of the issues emerging. The recommendations have been selected for those issues which were judged by participants to be the most critical.

9.1 Mental Health and Well-being

Recommendation	Strategy / Policy Lead
a) GPs routinely enquire if violence is a causal factor for women presenting with depression.	DHSSPSNI
b) Procedures for prescribing anti-depressants to women who have experienced violence are reviewed.	DHSSPSNI
c) Investment in counselling, support and emotional rehabilitation is channelled to enable women to recover from the trauma of violence.	DHSSPSNI
d) Specialist programmes for women who are dependent on drugs or alcohol as a result of violence are piloted.	DHSSPSNI

9.2 Formal Structures and Procedures

Recommendation	Strategy / Policy Lead
a) Formal procedures in health and social care trusts, PSNI, Courts and other statutory agencies are 'sensitive proofed' for women.	DHSSPSNI, NIO, Courts Service
b) 'Private Time' without the perpetrator being present is routine in all settings, e.g. Accident and Emergency, PSNI, Social Services	DHSSPSNI

9.3 Champion and Support

Recommendation	Strategy / Policy Lead
a) Allocation of resources to Women's Centres and Women's Aid to provide personal development support and advocacy to women who have experienced violence.	DSD
b) Information and support for women in rural areas who have experienced violence.	DARD

9.4   Gender Relations

Recommendation	Strategy / Policy Lead
a) Mainstream gender relations education in primary and secondary schools.	DE
b) Make available designated person in schools to whom children and young people can disclose violence at home.	DE/ESA

9.5   Specialist Support

Recommendation	Strategy / Policy Lead
a) Training to help reinstate parenting skills for mothers who have experienced violence.	DHSSPSNI
b) Access to specialist therapeutic services for children and young people exhibiting behaviour problems.	DHSSPSNI
c) Joint training, intervention and support between GPS, social services, schools and Women's Centres to enable earlier, more 'joined up' support and intervention.	DHSSPSNI/DSD/DE

9.6   Nature of Violence

Recommendation	Strategy / Policy Lead
a) Further research in Northern Ireland about the nature and patterns of violence against women to identify indicators of risk and inform earlier intervention.	DHSSPSNI/DSD
b) Media and community development campaign to contradict the 'entitlement' ethos.	OFMDFM
c) Engagement by faith and community leaders in a zero tolerance of violence against women in Northern Ireland.	DHSSPSNI
d) Advice and information to women and girls on a personal protection strategy.	PSNI

9.7   Regional Strategy Implementation

Recommendation	Strategy / Policy Lead
a) Appointment and resourcing of local co-ordinators of the Regional Strategy at Trust and local level.	DHSSPSNI
b) Develop a networked community of practice of services and organisations to stop violence against women and facilitate knowledge and information exchange using virtual and face to face fora.	DHSSPSNI

Recommendation	Strategy / Policy Lead
c) Convene a Standing event annually to bring together policy makers and frontline services to share information and experience of what is making an impact.	WRCP/WANI

9.8 Self Assessment – Real Time Measure

Recommendation	Strategy / Policy Lead
a) Develop the 'snapshot' survey to be self-administered continually by all women presenting with experience of violence, or available online to women not yet presenting.	DHSSPSNI
b) Use this data to populate a real time knowledge repository on the prevalence of violence in Northern Ireland.	Women's Sector
c) Analyse and publish information on the nature and prevalence annually to highlight the issue and engage societal support.	Women's Sector

9.9 New Media

Recommendation	Strategy / Policy Lead
a) Private sector protocol with BT / 02 / Orange / Vodafone, etc. to enable women to bar intimidatory calls via mobile phone.	DHSSPSNI and private sector
b) Workplace email monitoring and support for women to avoid unwanted emails as well as using this as evidence.	DETI/DFP

9.10 Perpetrator Engagement

Recommendation	Strategy / Policy Lead
a) Enforcement of penalties and sanctions on non co-operative perpetrators.	NIO/PSNI/PUBLIC PROSECUTION SERVICE

9.11 Non-National Women

Recommendation	Strategy / Policy Lead
a) Research into prevalence and nature of violence against non-national women.	OFMDFM
b) Clarification of non-national women's legal rights and specialist support.	Law Society
c) Access to interpretation services.	OFMDFM

9.12   Legal System

Recommendation	Strategy / Policy Lead
a) Audit the use of powers for breach of non-molestation orders.	PPS/PSNI/NIO
b) Audit the consistency of judgements and sentencing in Northern Ireland Courts.	PPS/NIO
c) Audit the delays, cancellations and notice given to women to attend court against the availability of child care.	Northern Ireland Courts Services

Appendix One:

Narrative Template & Interview Template

Narrative Template

Project Brief

As you know, the impact of violence[22] on a woman is devastating. It affects her ability to fulfill her potential as a human being, as well as her children if she has any. This pilot study seeks to understand the real nature of violence against women in Northern Ireland and to increase awareness of the varying experiences of women in regard to violence and use of available support.

By developing a significant number of case studies across Northern Ireland, the pilot seeks to inform policy and development of support and services in the future, particularly for women in disadvantaged areas.

Project Method – Narrative Enquiry

I am meeting with people (like you) who are "frontline" staff from a range of agencies who respond to women who have experienced violence. In the course of your day to day work you meet women who come to you directly for support, e.g. in the case of Women's Aid, PSNI or social services In other organisations such as Women's Centres, a woman may develop enough trust in staff to disclose the violence they suffer and seek advice on how to access support.

Think of an individual woman you have worked with over the last 12 months who had experienced violence. I would like you to tell me her story as far as you know it. The questions below might help you

➢ What had happened to her?

➢ Who was involved?

➢ What mattered most to her?

➢ What helped her most?

➢ What was missing in the situation that could have made things better for her?

I will record you telling the story. After we have recorded the story I would like you to list what you think are the main themes in each story and also to give the story a title.

Thank you very much for your help. The information is confidential and the stories will not be shared or attributed to any individual. The themes and issues identified through the stories will be used to inform the design of a survey which we will use in the Autumn of 2009 to take a "snapshot" of violence against women in a sample of services across Northern Ireland. The results will be used to inform future policy and planning.

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[22] **The term "violence against women" means any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life (UN 4th World Conference on Women, 1995)**

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Interview Template

Interview:	Date:				
Organisation:	Story Number				
What are the main themes or issues in each story?	1	2	3	4	5

Can you give each story a title, e.g. what is the message in the story or what can we learn from this experience?

Story	Title
1	
2	
3	
4	
5	

Appendix Two

Tackling Violence at Home. Main Actions proposed for 2009-2010 by theme.

1 Prevention: Summary of Key Actions

Domestic Violence Workplace Policies	Resource Manual for health and social services professionals	Media Campaign	Domestic Violence website	Education in Schools	Children and Young People	Routine Enquiry	Hard to reach/vulnerable groups

2 Support: Summary of Key Actions

Domestic Violence Helpline for victims	Domestic Violence Helpline for perpetrators	Housing	Support for children and young people affected by domestic violence	People from a minority ethnic background and/or from the lesbian gay and bisexual community	Young people affected by homophobic domestic violence	Young people who are perpetrators of domestic violence	Support for Adults

3 Protection and Justice: Summary of Key Actions

Multi-agency Risk Assessment Conference	Homicide Review	Integrated Family Courts	Programmes for perpetrators	Raising Awareness	Access to Justice	Improve the sharing of information	Improving services for all victims
Improve evidence gathering	Anonymous registration for vulnerable voters	Child Contact	Inter-jurisdiction issues	Research and Analysis	Police Response to Domestic Violence		

4 Other Priorities: Summary of Key Actions

Inter-Ministerial Group on Domestic Violence	Training Strategy	Data Collection	Performance Indicators	Information Sharing	Sharing Good Practice with other countries	Production of Annual Action Plans and Review of previous year's Action Plan

Appendix Three

Snapshot Survey

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1. Introduction to Pilot Study: Women's experience of violence: mapping experi...

This survey is designed to map the reality of violence against women in N. Ireland today. The results will be used to increase awareness and to inform future strategy.

During the summer of 2009, we interviewed frontline staff in women's centres, women's refuges, PSNI and Social Services. We have collected stories from staff about individual 38 women with whom they have worked and who have experienced violence. The content of this survey is based on the issues which they identifed.

You can help by taking part in the "snapshot survey" during the week beginning the 21st September 2009.

Your responses will help to show how widespread these issues are among a larger group of women. Our target is to profile a sample of 150 women across N Ireland.

How to complete:

a) Select one woman you are working with this week
b) Please tick from the list of factors all those which you know to be true in her story
c) Complete the survey for her situation
d) Start another survey for the next woman you are working with
e) Repeat as many surveys as you can, each for a different woman you are working with

There is no limit to the number of women you can profile. We would like you to complete the survey for each woman you are working with this week.

The information will be treated in confidence. You complete the survey anonymously. The results will be aggregated to produce the overall findings. These will be made available to each of the staff teams who participate.

The survey is open from 18th September, 2009 at 9am to 28th September 2009 at 5pm.

Each survey should take you no more than 5 minutes to complete.

If you have any queries please contact Anne McMurray on 028 9094 1616 or at anne@annemcmurray.com

Thank you for your help.

Women's Experience of Violence

1. Do you work for

☐ Women's Aid

☐ A Women's Centre

☐ PSNI

☐ Social Services

☐ Other (please specify)

> [   ]

2. Tick the characteristics that apply to the woman you are profiling

☐ in paid work

☐ on benefits

☐ lives rurally

☐ lives in a town/city

Women's Experience of Violence

2. Snapshot Survey September 2009

1. Which of the following factors apply to the woman you are profiling? (Please tick all that apply)

☐ Has low educational attainment or cannot read or write

☐ Is traumatised, experiencing sleep difficulties, has no energy

☐ Has lost personal power and sense of self

☐ Strong cultural and social mores pressure her to stay despite violence

☐ Is self blaming

☐ Has lost her sense of dignity, worth and rights

☐ She had no yardstick for "normal" mothering

☐ Lacks purpose or structure in life

☐ Finds it hard to hold boundaries to protect herself

Other (please specify)

2. What is the nature of her support systems? (Please tick all that apply)

☐ Violence is part of her family culture

☐ Copes through using alcohol or drugs which has now become her issue

☐ Attends a women's centre

☐ Support from family or friends

☐ Positive support from social services

☐ Has been in a refuge before

☐ Needs a champion, supporter and a listening ear

☐ Is isolated geograhically, e.g. lives in rural remote setting

Other (please specify)

3. Which factors apply to the perpetrator of her violence? (Please tick all that apply)

☐ Alcohol taken when violent

☐ Drug dealing

☐ Gambling

☐ Has a sense of "entitlement"

☐ Likeable, friendly, well thought of by outside world

☐ Member of security forces (past or present)

☐ No respect for any professional

☐ Paramilitary connections, uses violence and control

☐ Violent role models for perpetrator during formative years

Other (please specify)

[   ]

4. Which factors describe the woman's relationship with the perpetrator? (Please tick all that apply)

☐ Recognising that the perpetrator chose to be violent was a "lightbulb" moment of clarity and breakthrough

☐ She has lost power and control to the perpetrator

☐ She remains emotionally dependent despite the perpetrator's abuse

☐ She covers up and it seems like nothing is wrong

☐ She has changed her lifestyle to suit the perpetrator's demands

☐ Perpetrator isolated her from family and friends

☐ She has low expectations - settles for less than she deserves

☐ She is financially dependent

☐ Perpetrator's family pressure her to stay in the relationship despite knowing about the violence she experienced

Other (please specify)

[   ]

5. What was the nature of the violence she experienced? (Please tick all that apply)

☐ Cycle of violence - good days and bad days

☐ Escalation from emotional control to physical violence

☐ Financial abuse, i.e. running up debt, claiming her benefits, witholding money

☐ Her life was put at risk

☐ Horrific intensity of violence used against the woman

☐ Long term negative effect on all relationships

☐ Pyscholgical and emotional abuse - punished by disapproval

☐ Raped in front of children or other people

☐ Reinforced by cultural beliefs, e.g. religion, faith, custom

☐ Remote control (e.g. by phone, email, through others from prison)

☐ Sexual violence

☐ Subtle violence not visible to the eye

☐ Trafficked her for the sex industry

☐ Use of intimidation

☐ Weapons involved

Other (please specify)

[   ]

6. If there are children involved, please tick all the factors that apply. If children are not involved, you may skip this section.

☐ Exhibiting behaviour problems including aggression and anti social behaviour

☐ Lack of childcare to enable her to find employment

☐ Later on she is resented by adult children for staying

☐ She has lost parenting skills as a result of violence

☐ She needs tools and support to reinstate role as mother

☐ She seeks help for the children to break the cycle

☐ She stayed for the children

☐ Threat to the children finally motivated her to go

Other (please specify)

[   ]

7. A range of professionals and support services are often involved e.g. Women's Aid, women's centres, social services, PSNI, NIHE, Social Security, GPs, Health Visiting, Accident and Emergency Services and other voluntary organisations. Please tick the statements below which reflect her experience of the professional services and support.

☐ Behaviour and procedures show a lack of insight into the traumatic impact of violence on women

☐ GP prescribing anti depressants

☐ Lack of information and direct communication with the woman involved.

☐ Non judgmental and supportive

☐ Professionals are unable to compel the perpetrator to work with them

☐ Professionals involved with family but not aware of the violence

☐ Other (please specify)

[   ]

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8. How has the woman experienced the legal system? (Please tick all that apply)

☐ Breach of non molestation order not taken seriously

☐ Duration of court procedures due to adjournments and delays is out of step with her recovery process from the trauma of violence

☐ Inconsistency of sentencing and judgements gives her low confidence about receiving fair treatment

☐ Lack of immediate affordable legal advice e.g. cost of non molestation order

☐ Practical difficulties, e.g availabilty of child care cover and short notice to attend court

☐ Procedures broke down in evidence collection

☐ Prohibitive costs of legal proceedings

☐ Public Prosection did not keep her informed or explain review process for criminal proceedings.

☐ Sentence is not a disincentive to perpetrator

☐ Unable to compel the perpetrator to work with the legal system

☐ Other (please specify)

[   ]

9. If the woman you are profiling is from a different nationality and living in N. Ireland, please tick any of the following which apply to her situation?

☐ Costs of language interpretation is a problem

☐ It is difficult to secure financial support for non national women

☐ She has been trafficked

☐ There is a lack of clarity about her legal status and rights

Other (please specify)

[   ]

3. End of Survey

Thank you for completing the survey. Please click DONE to submit your response. Your answers will automatically be forwarded to us.

Once you have clicked on DONE you should be directed to Anne McMurray Consulting Ltd's website.

However if, when you have done this, you see a 'forbidden' or 'error' message - your survey has still been registered. It just means that your or our current anti-virus / firewall software will not allow your computer to display our website home page.

There is no limit to the number of women you can profile. We would like you to complete the survey for each woman you are working with this week between the 21st and 25th of September. Simply log back into the survey to do a further profile.

Thank you again for your participation.

Appendix Four

Story Themes

Story	Title	Centre
1	Strength to escape through love of the children	Ballybeen
2	Cover Up	Ballybeen
3	Still a threat even apart	Ballybeen
4	All round loss - family devastation	Ballybeen
5	The legacy lives on in children	Ballybeen
6	Self realisation and a happy ending	Chrysalis
7	Hard work below the surface - deeper shift	Chrysalis
8	Light at the end of the tunnel	Causeway
9	Mothers -listen to your children and let them express themselves	Causeway
10	Just wants someone to love her - warts and all	Causeway
11	Allow her to be herself	Causeway
12	"Stigma Attachments" (like labels) lifelong to the abuser for the survivor	Cookstown
13	Is it my fault?	Cookstown
14	Kept me barefoot and pregnant	Cookstown
15	From Father to Son	First Steps
16	Determination	First Steps
17	Realisation - light bulb moment	First Steps
18	No Choice	First Steps
19	In Limbo - no passport non entity	First Steps
20	Invisible wings of protection - mother and children	Lisburn
21	Still travelling - torn between two worlds	Lisburn
22	Too Much Too Young - Hollyoaks	Lisburn
23	Star of David - gift of hope and start of a new phase	Falls
24	Keeping up Appearances - Don't be Deceived	Falls
25	Relentless - a break never comes	Windsor
26	Curb your enthusiasm	Windsor
27	Leave - at what cost?	Windsor
28	Small Steps when you are ready	Belfast Women's Aid
29	Driftwood - choosing to ride the waves herself	Belfast Women's Aid
30	Where's the justice?	Belfast Women's Aid
31	Get out sooner - better for everyone	Belfast Women's Aid
32	Surviving Unspeakable Violence - but at home not in a war zone	Belfast Women's Aid
33	Really Listen - to what women and children are saying	SE Trust
34	Family secrets	Foyle Women's Aid
35	Why didn't social services help more?	Foyle Women's Aid
36	Why did I not know?	Foyle Women's Aid
37	Ultimate control	Foyle Women's Aid
38	Honesty is not always the best policy (according to the law)	Foyle Women's Aid

wcrp
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