Insights sexual violence pilot with Victim Support Services

12 months to October 2017
89% Of victims were women

One in four victims was under the age of 18

The time since the incident occurred varied from less than 1 month ago (35%) to more than 10 years ago (20%)

10%

Survivors were more likely to be able to live life to the fullest after accessing support (59%) compared to before (21%)

The perpetrator of abuse was a stranger in one in ten cases

Around a quarter of victims were provided with immediate support with completing a forensic exam (28%) or accessing a sexual health clinic (23%)

46% Survivors received 11-20 direct contacts with their Isva

26%

A quarter of criminal cases were still in progress at case closure

88%

Survivors felt supported by the Isva throughout the criminal justice process
SafeLives Insights Briefing: Sexual Violence

Key findings from our pilot with Victim Support

Last year we started a pilot of Insights with Victim Support which was designed to amplify the voices of victims and survivors of sexual violence, and learn more about the specialist support provided by Independent Sexual Violence Advisors (Isvas). In 2017, 645,000 people were estimated to have experienced sexual violence across the UK. Reports of sexual violence have increased 22% from the previous year, yet we know that only one in four sexual offences are reported to the police. We are nowhere close to uncovering the true prevalence of sexual violence in the UK and too many victims remain hidden.

People accessing sexual violence services: what we have learnt so far.

SafeLives Sexual Violence Insights dataset reveals that, in the majority of cases, victims of sexual abuse were female (89%). A further one in ten victims (11%) were male. More than a quarter of victims had dependent children (28%). Of the families with children, 35% were involved with children’s social services. Over half of victims of sexual abuse were aged under 30 (54%) and more than a quarter of victims were under 18 (28%).

‘At sixteen I lost the choice in whether or not we had sex, it became a need for him rather than a want and even when I didn’t want to, he found a way to get it.’

– Chantelle, young survivor
Isvas supported clients who had experienced serious sexual violence and abuse. For some, this abuse was historic and for others the abuse had occurred recently.

The most common type of sexual offence was rape (60%). One in three (31%) had experienced sexual assault and 7% experienced assault by penetration. Other sexual offences related to causing someone to engage in sexual activity (6%), attempted rape (3%), incest (2%) and childhood sexual exploitation (2%).

The length of time between the incident and accessing support varied widely. For more than half, the incident had occurred recently – either in the last month (35%) or the last year (28%). For one in five survivors (20%), the incident had occurred more than ten years ago.

In just under one in ten (8%) cases the perpetrator of abuse first made contact via the internet or social media. In 18% of cases there were multiple victims and in 10% cases the victim experienced abuse from multiple perpetrators.

In the majority of cases, the perpetrator of abuse was male (98%). The relationship of the perpetrator to the victim included adult family member (18%), friend or acquaintance (16%) or ex-intimate partner (12%). One in ten sexual violence offences were perpetrated by strangers (10%) and 8% experienced sexual violence from a current intimate partner.

Where there was an ongoing pattern of sexual abuse, victims were more likely to be living with the perpetrator of abuse (45%), who was more often than not a family member (31%) and there was a greater chance of multiple victims (31%). Comparatively, for victims who experienced abuse as a one off incident, the perpetrator of abuse was significantly more likely to be a friend (24%), an acquaintance (22%) or a stranger (15%).

At the point of accessing a service, a large proportion of victims reported mental health issues and a number of additional vulnerabilities.

The most common mental health needs reported were anxiety (69%), depression (65%), trouble sleeping (53%) and stress (42%). More than a third were experiencing flashbacks (36%), one in five (20%) had panic attacks and around a third had attempted suicide (29%) or self-harm (34%). Survivors of sexual abuse also faced a number of additional vulnerabilities including having experienced domestic abuse (15%) and being at risk of childhood sexual exploitation (5%).
Isvas provide tailored, holistic and intensive support over long periods of time to survivors of sexual violence to ensure they have the help they need to recover.

People accessing Isva services received support from Isvas for, on average, around two months. However, Isvas tell us that it is not uncommon for cases to be open for over two years because of ongoing criminal proceedings. Around half of clients (46%) received between 11 and 20 direct contacts with their Isva during their case.

At intake, immediate specialist sexual violence support was provided to victims for forensic examinations (28%), access to a sexual health clinic (23%), emergency services (6%), emergency contraception (5%) and post exposure prophylaxis.

Partnership working is also critical to providing a joined up and effective response. Isvas commonly work in partnership with the police, sexual health clinics, specialist sexual violence services for adults and children, counselling and therapeutic services alongside mental health services.

Throughout a case, Isvas provide holistic support around safety, health and wellbeing, feeling informed and supported and reintegration. To address safety, most victims were supported with a needs assessment (88%) and a risk assessment (80%) as well as a safety plan (39%) and/or a personal alarm (39%). To promote health and wellbeing, Isvas addressed issues with clients including coping strategies (45%), self-confidence (41%), decision-making (22%), anxiety (15%) and trauma (12%). Isvas ensured that people felt informed and supported by providing specialist sexual violence services directly to them (47%) or to their children (18%) and/or support with applications for compensation from the Criminal Injuries Compensation Authority (15%). A small number of survivors were supported with reintegration including support with housing (5%), benefits (1%) and/or employment (1%).

1. This may, at least in part, explain the low return of Insights Sexual Violence exit forms as there was intake information for 487 clients, but exit information for only 74 clients. At the point of writing this report the majority of sexual violence cases were still open, we believe in the majority of cases for reasons relating to the criminal justice process.
A critical part of an Isva’s role is providing criminal justice support to victims of sexual violence before and during a trial.

Most victims made a police report before engagement with the service (88%)² and two victims (3%) made a police report after. In the four cases where a police report was not made, the reason given was concerns about children’s services involvement. In advance of the trial, Isvas discussed special measures with a third of clients (33%), explained the support available from the witness service for one in five (20%) and explained the burden of proof to 17%. Isvas attended the hearings in a third of cases (33%) and in a few cases provided additional support by liaising with the prosecutor at the trial (3%), provided a voice for victims throughout the proceedings (3%) or advocated on their behalf regarding bail conditions (3%). Throughout the trial, Isvas monitored safety for two thirds of victims (63%) and in a quarter of cases (23%) supported them with their own charges/convictions.

Survivors were asked about their experiences of the criminal justice process. The majority felt that the police took the time to listen (71%) and were courteous and respectful (69%). Most felt safe (78%) and supported by the Isva (88%) throughout the criminal justice process. A slightly smaller proportion of survivors of sexual abuse were satisfied with the police response (55%) or felt it was worthwhile taking criminal action against the perpetrator (49%). This may reflect a feeling of dissatisfaction as a result of a negative criminal justice outcome even in circumstances where experiences with individual officers or the police in general were positive.

There were mixed criminal justice outcomes for victims of sexual violence and abuse, with half of cases not proceeding.

Around half of the cases did not proceed because there was no further action (34%), the initial investigation closed (13%) or there was insufficient evidence for CPS to proceed (6%). A quarter of the criminal cases were ongoing at the point of Isva case closure with ten cases requiring further investigation (14%), five cases at the police report stage (7%) and three cases where the victim and witness statements had been taken (4%).

Defendants pled guilty to the original charge in three cases (4%) and were found guilty in three cases (4%). In two cases, the defendant was sentenced.

² This high level of police reports is likely to reflect the work of Victim Support and their working arrangements with the police in local areas. As the national dataset grows we expect this figure to be more representative of other sexual violence support services and differences in practice.
Survivors reported that their safety and wellbeing had improved after support from an Isva.

Survivors were asked to reflect on their safety and wellbeing at intake to the service and then again at the point of exit when the case closed. Compared to intake, there were much larger proportions of clients who agreed that they were confident to deal with the situation on their own (47% compared to 10%), were able to enjoy life (62% compared to 28%) and live life to the fullest (59% compared to 21%), were coping (65% compared to 26%) or felt safe outside their home (64% compared to 38%). The proportion of clients who agreed that the abuse prevented them from living life as they used to decreased from 44% at intake compared to 27% at exit.
Appendix: Insights for Sexual Violence services, our research methodology

Research design

This paper outlines the research methodology adopted in the development of the Insights Sexual Violence forms developed in partnership with Victim Support. The pilot aimed to address three main aims:

• to amplify the voices of victims who have experienced sexual violence
• to assess how Isva services are working
• to implement a standardised process for monitoring and evaluation to identify good practice and highlight areas of development

Adopting a realist and iterative approach to research methodology, meant that the design of the outcomes toolkit could develop and change as we learnt more about sexual violence and the Isva services providing support. We started a consultation with Victim Support’s Isvas which aimed to capture the unique nature of the Isva services and understand the most crucial information needed to evidence the specialist nature of their work. The process also involved consultation with service managers, strategic leads as well as funders and commissioners. During a consultation workshop, we used a theory of change model to focus the development of an outcomes focussed approach. Isvas identified the need for a systematic needs-led approach to service delivery that enabled victims to regain their independence and overcome their traumatic experiences. This was expressed as the overall goal ‘to ensure victims cope and recover’. Then individual outcomes were identified which Victim Support felt were necessary for clients to achieve in order to cope and recover, they included: improved health and wellbeing, reintegration, increased feelings of safety, feeling supported, feeling informed. A sixth outcome was added aimed at capturing victim’s experiences of the criminal justice system, given the work of Isvas in this area: improved experience of the criminal justice system. These integrate the five Ministry of Justice outcomes for victims of crime. Using this theory of change to guide us, Isva’s then contributed to the design of the questions which made up the forms. We drew on our learning from the Insights toolkit for domestic abuse services to inform the basis of the design.
Data collection

Once the final format was determined, Insights for Sexual Violence services was piloted for 9 months by three Victim Support services: West Yorkshire, Cumbria and Lancashire. Data collection is designed to be completed by Isvas working with victims of sexual violence at the point of accessing the service (intake) and then on case closure (exit). Broadly speaking, the online forms collect information around client demographic, the context of abuse, support and intervention provided by the Isva service, client’s experience of the criminal and civil justice system and client reported outcomes. The data collected was analysed by the Research Evaluation and Analysis team at SafeLives and reported back to services, funders and commissioners at quarterly intervals. This briefing is based on 487 clients who accessed support from Victim Support Isva services in the three sites between April 1 and October 31st 2017. During this time 487 intake forms were submitted and 74 exit forms submitted.

Feedback, reflections and key learnings

After six months of data collection, we ran another consultation workshop with Isva’s from the pilot sites so that they could feedback their experience of using the toolkit. Although feedback was largely positive, several themes on areas of improvement emerged. The first was that the support and intervention areas in the exit part of the form were still too focussed on domestic abuse interventions, not specialist enough for sexual violence work. Second, whilst the original scoping for the pilot did not include designing forms for children this need became apparent early on as around a third of clients were aged under 18. Third, Isvas noted that a significant proportion of their clients were receiving support for sexual abuse that occurred historically and this shaped the support they provided. This was not adequately reflected in the abuse context section of the intake form. Taking this feedback on board, we worked with Isvas and Victim Support to make these amendments to an updated version of the forms.

We have added interventions to the support and intervention categories in the exit part of the forms so that the specialist work of Isvas is adequately reflected. We have also shaped the form around needs assessments commonly used by Isvas, such as that provided by Lime Culture. We have also designed items that are suitable for children and young people under eighteen and have reformulated the context of abuse section to reflect non-recent or current abuse. This learning has been integrated into our new Sexual Violence Insights that is now available nationally to every sexual violence service. You can find out more about Insights here.
Insights is an outcomes measurement tool developed for the domestic abuse sector designed to evidence impact and develop best practice for domestic abuse services.


The ONS reflects that these increases are most likely the result of greater willingness of victims to come forward in light of several recent high profile investigations into recent and non-recent reported sexual offences. Increases are also accredited to improvements in crime recording processes by the police, yet are recognised not to be fully representative or a true estimate of prevalence.

“Historic abuse” is when a client has not experienced any abuse in the last three months.

http://limeculture.co.uk/