



County Durham and Darlington Sexual Violence Strategy 2011 - 2014

“He’d make her participate in sexual acts that she didn’t want to. When she refused one time, he jumped on her as she lay on the bed, breaking one of her ribs. He took her to the hospital but got bored waiting and left, she was too scared to say how the injury really happened.”

(Hannah Louise Fisher - murdered at the age of 21)

Foreward

We welcome the development of the first Sexual Violence Strategy for County Durham and Darlington. It has been developed with input from a range of partners and stakeholders. Each of the Responsible Authorities under the Crime and Disorder Act has agreed to work in partnership to tackle sexual violence and the negative impact it has on individuals and families.

Sexual Violence, including sexual assault, rape, child sexual abuse and sexual exploitation is a complex and sensitive area of criminality with a high level of under-reporting to the police. For many that do come forward, it is often a long time after the event has taken place. The public perception is that it is mainly associated with stranger rape; however from the recorded data we have available in County Durham and Darlington, victims of sexual violence are more likely to be attacked by someone they know and in familiar surroundings.

Victims of sexual violence are often vulnerable in other areas - young people who go missing, those experiencing domestic abuse, people who were abused as children, sex workers and people with learning disabilities. Therefore we need to work in conjunction with other partnerships such as the Local Safeguarding Boards, Domestic Abuse Forums, Vulnerability Groups and Alcohol Strategy Groups to ensure a coordinated approach.

We are proud of some of the achievements we have made to tackle sexual violence in County Durham and Darlington, in particular the establishment of the Sexual Assault Referral Centre (SARC) which is jointly funded by the Police, NHS and both Councils; the ongoing support for the Independent Sexual Violence Advisor role and the high conviction rate for those that do progress through the court system. However we still have a long way to go in terms of increasing public confidence in reporting; challenging some of the myths surrounding sexual violence and abuse; ensuring that victims are provided with support; improving data recording and ensuring those that are perpetrators are brought to justice. Our aim is very clear - sexual violence will not be tolerated. The strategy is therefore only a first step - we will establish a local implementation group to ensure the commitments we have made are progressed over the next three years.

We would like to thank Traci McNally, Acting Detective Chief Inspector from Durham Constabulary for coordinating the development of this strategy.



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1. Executive Summary

1.1 The need for a sexual violence strategy

In this strategy we have summarised the priorities and main areas of activity agreed by the Safe Durham and Safer Darlington Partnerships for the forthcoming three years.

We recognise that sexual violence is a hugely complex and sensitive area of criminality that in many cases goes unreported, leaving victims feeling unsupported and isolated. We acknowledge that despite significant progress across all partner agencies, we still have many challenges to address in the areas of protection, provision and prevention.

Whilst it is acknowledged that at local level, needs may differ across County Durham and Darlington, research has shown us that the issues in relation to sexual violence are common to both partnership areas. Additionally, as Durham Constabulary and the Sexual Assault Referral Centre (SARC) arrangements cover all of the County Durham and Darlington area, it was considered appropriate that the two partnerships worked collectively and in a co-ordinated manner, to address the serious and complex issue of sexual violence.

The Safe Durham and Safer Darlington Partnerships will work together in a co-ordinated way to target our efforts within the following priority areas:-

KEY PRIORITY ONE -

PREVENTION

To prevent sexual violence and sexual exploitation and reduce the associated harm.

KEY PRIORITY TWO -

PROVISION

To ensure that victims of sexual violence are provided with access to the right help and support throughout the criminal justice process, and that there are services available to address their needs.

KEY PRIORITY THREE -

PROTECTION

To improve the criminal justice response to sexual violence.

This strategy aims to address these areas in order that we can achieve positive outcomes for adults and young people at risk of sexual violence and exploitation.

1.2 Aim

Sexual violence and sexual exploitation are some of the most serious crimes within communities. They blight society and leave victims feeling vulnerable and violated. It is the collective vision of the Safe Durham and Safer Darlington Partnerships that sexual violence will not be tolerated and that perpetrators will be brought to account for their actions. Victims of sexual violence will be supported, treated with dignity and respect and made to feel safe within their community whilst seeing their offenders brought to justice.

1.3 Purpose of the Strategy

This is an overarching strategy for County Durham and Darlington for the period 2011-2014. It has been prepared in consultation with a range of partners within the statutory and third sectors to ensure that the response to rape, sexual violence and sexual exploitation is proportionate to the significant and damaging effect it has on the lives of individuals and communities within the county.

2. Introduction

This strategy has been developed in partnership in order that sexual violence and sexual exploitation can be effectively tackled. Addressing these types of crimes and the harm that they cause is a key priority as it cuts across many other agendas including safeguarding of vulnerable adults and children, public health, domestic abuse, reducing crime and the fear of crime, bringing offenders to justice and increasing public confidence.

The strategy and associated action plan contains initiatives which aim to address sexual violence in a considered and collaborative way. It incorporates actions which are aimed at preventing sexual violence and exploitation from happening, and, where it has happened, seek to improve services and outcomes for victims and their families. The strategy provides a robust and effective framework with clear performance measures. Specialist services to support victims will play a key part in the delivery of this strategy. Durham Constabulary, the County Durham and Darlington Primary Care Trust, Darlington Borough and Durham County Council's have all invested in the Sexual Assault Referral Centre (SARC) which opened in 2005. It brings together health and forensic services into a single unit to provide an improved service for victims.

County Durham and Darlington are also working with other regional partners to ensure that services to children and young people are also delivered to a high standard.

3. National Framework

Early in 2010, responding to wider public concerns at the general level of violence perpetrated against women and the perceived sexualisation of teenage girls, the Home Office launched a national cross-government public consultation paper “Together We Can End Violence Against Women and Girls”, resulting in the development of the coalition Governments strategy, ‘A Call to End Violence Against Women and Girls’. Despite the progress in tackling domestic violence, prosecution and conviction rates for rape have fallen. Many argue that significant steps still need to be taken before the police, local authorities and justice system are able to operate within a robust framework that provides the support and protection victims need, and prevents violence against women from occurring in the first place.

The official statistics (under-estimated) for the average PCT show that 4% of women (County Durham and Darlington =10,232)¹ have been raped (excluding attempted rape).

6 % of children on the Local Child Protection Register will have suffered sexual abuse and 30% of the female adult population (County Durham and Darlington = 76,737) will have suffered or be suffering domestic abuse². Statistics³ have shown that 9% of reported rape victims are male whilst 99% of offenders are male. Research⁴ also shows that 3% of men report sexual assault after the age of 16.

3.1 Links between alcohol and sexual violence

Research into alcohol and sexual violence⁵ indicates a strong association between alcohol use- both ‘drinking in the event’ and long term drinking patterns - and sexual violence. Many perpetrators are drinking when they attack their victim or have alcohol abuse problems. Alcohol-related sexual assaults are more likely to occur between people who do not know each other well, and more likely to occur in bars and at parties than at either person’s home. There is often both offender and victim drinking in incidents of sexual violence. The presence of alcohol has implications for the severity of sexual violence outcomes.

3.2 Links between domestic abuse and sexual violence

There is much evidence that exists of the links between domestic abuse and sexual violence. When rape and sexual violence occurs within the confines of an intimate relationship, it is - quite apart from a physical and sexual violation - a betrayal of trust. This type of sexual assault is so destructive because it betrays the fundamental basis of their relationship, leaving victims questioning every understanding they have not only of their partner and their relationship, but of themselves, leaving them feeling betrayed and humiliated.

¹ County Durham and Darlington practice population profile. http://intranet/InformationServices/Files/Online_PracticePopulation.xls Accessed 25/5/10

² Department of Health. 2010. Commissioning Services for Women and Children Who Have Experienced Violence or Abuse – A Guide for PCTs.

³ Rape statistics. <http://www2.ucsc.edu/rape-prevention/statistics.html> Accessed 19/5/10

⁴ Rape of men is Not Uncommon – Study Days. http://findarticles.com/p/articles/mi_m1355/is_21_95/ai_54727840/ Accessed 19/5/10

⁵ Finney A (2004) Alcohol and sexual violence: key findings from the research. Findings report 215. Home Office

Until 1994 in the UK it was considered impossible in British law that a man could rape his wife. This only changed with the introduction of the Criminal Justice and Public Order Act 1994. Many women may still be unaware that this is the case and may be unaware that what they endure, often multiple times a day, is in fact a crime. Unwanted sex is sexual assault, regardless of the nature of the relationship between the two people involved. Consent is something that is constantly changing based on the situation and the actions;- a relationship does not guarantee constant consent.

3.3 Young people and sexual exploitation

Partner violence amongst children and young people

Research indicates that a quarter of girls aged 13 to 17 have experienced physical violence from a boyfriend and a third have been pressured into unwanted sexual acts. As young people enter relationships for the first time they must be aware that allowing consistent power and control over a partner in any relationship is abusive and not acceptable. Agencies must work in partnership to reach young people and make them aware of the risks.

The University of Bristol and the NSPCC looked jointly at the issue of partner violence in teenage intimate relationships.⁶ The findings clearly showed that violence in young people's intimate relationships is a significant child welfare issue. There was also a greater incidence of violence reported by girls rather than boys. Some of the key findings included:-

- Young people with an experience of family violence were more likely to have experienced a relationship, and more likely to have experienced one at an earlier age than young people with no history of family violence;
- 30% of girls and 16% of boys reported some form of partner sexual violence;
- The majority were single incidents, however, for a minority of young people, sexual violence was a more regular feature of their relationships;

E Safety and Grooming⁷

The Child Exploitation and Online protection Agency (CEOP) report that grooming is the most significant suspect activity reported to them, with the majority of suspicious contact being made in social networking sites, primarily Facebook, before grooming itself takes place, often in Windows Live Messenger. There has been much media coverage around social networking sites, primarily as a result of high profile child abuse cases. Evidence from police forces as well as from reports to CEOP suggests an increase in grooming cases linked to social networking. However, it is always difficult to establish whether there is an increase in such incidences or whether there is an increase in reporting due to heightened levels of awareness. There is also a lack of recording at local level about the level of incidents of grooming and sexual exploitation.

Risks to children who go missing

Research would suggest that children who go missing from home are more likely to be vulnerable to sexual exploitation. The risks appear to increase for those children who go missing from Local Authority care. These children may well have a history of unstable and dysfunctional relationships, along with physical/sexual abuse and substance misuse which are all common push factors for young people who become involved in prostitution. Between April 2010 and August 2010, 370 young people under the age of 17 years were reported missing from home across County Durham and Darlington.

⁶ Partner Exploitation and Violence in Teenage Intimate Relationships. (NSPCC).

⁷ CEOP Strategic Overview 2009-2010

Female Genital Mutilation

Female Genital Mutilation (FGM), previously known as ‘Female Circumcision’, is a collective term for procedures which include the partial or total removal of the external female genitalia, for cultural or other non therapeutic reasons.⁸

The age at which FGM is carried out varies, but is commonly between 4 and 10 years. The procedure can cause severe pain and shock and a number of girls die as a direct result of the procedure through blood loss or infection. Damage to the external reproductive system can cause severe long term health consequences such as uterine, vaginal and pelvic infections, difficulties in menstruation and urination, sexual dysfunction, infertility and complications in pregnancy and childbirth. Girls who have undergone the procedure may also suffer from mental health or psychological problems.⁹

FGM is a criminal offence in the UK. Under the Female Genital Mutilation Act 2003 it is also illegal for a UK national or permanent resident to carry out FGM abroad, or to aid, abet or procure the carrying out of FGM abroad, even in countries where the practice is legal.¹⁰ Local authorities can exercise their powers under section 47 of the Children Act 1989 if there is reason to believe that a child is likely to suffer or has suffered FGM.

3.4 National Guidance for SARC development.

A SARC (Sexual Assault Referral Centre) is a one-stop location where survivors of rape, sexual abuse and serious sexual assault, regardless of gender or age, can receive medical care and counselling. They will also have the opportunity to assist a police investigation, including undergoing a forensic examination if they so choose.

The National Support Team (NST) for Response to Sexual Violence (RSV) offered support to local area partnerships to ensure effective SARC provision. Local area partnerships will usually include strategic and operational arrangements between the police, health, and third sector organisations. Between October 2008 and March 2009, a pilot scheme delivered 28 support visits across 16 police force areas over five months, focusing primarily on areas that do not have SARC provision and where they required support to set up robust local partnerships in order to develop a SARC. The pilot team also visited local area partnerships that had recently developed a SARC to ensure that adequate support was provided during the early stages to comply with the National Service Guidelines for Developing Sexual Assault Referral Centres (2005).

In December 2009 the NST undertook a visit to the Meadows SARC located in County Durham to assess whether the facility met the standards within the revised ‘National Service Guide - A Resource for Developing A Sexual Assault Referral Centre.’ The recommendations from that visit were developed into an action plan and the remaining actions have now been incorporated into this strategy and action plan.

⁸ World Health Organisation (1997) Female Genital Mutilation - A joint WHO/UNICEF/UNFPA statement

⁹ Department of Health (2009) Improving Safety, Reducing Harm. Children, Young People and Domestic Violence. A practical toolkit for frontline practitioners.

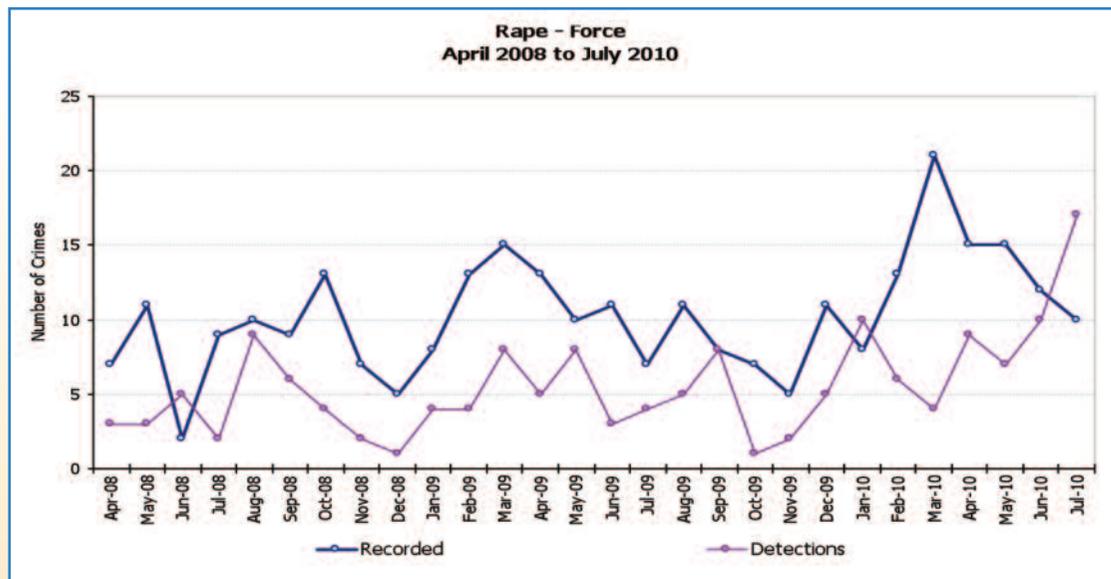
¹⁰ HM Government (2010) Working Together to Safeguard Children

4. Rape and Sexual Assault in County Durham and Darlington - Local profile

In October 2010 Durham Constabulary produced problem profiles on the scale, nature and extent of rape and sexual exploitation within County Durham and Darlington. The findings of this work form the basis of the recommendations and action plan within this strategy. The work is supplemented by the findings of the 2009 National Support Team inspection on responding to sexual violence, the 2010 Health Needs Assessment for Sexual Violence in County Durham and Darlington, and the Government Office North East report 'identifying the barriers that exist to the provision and delivery of sexual violence services'.

In County Durham and Darlington there are on average around 120 rapes and 300 other instances of sexual violence that are recorded each year¹¹ which would suggest a significant under-reporting, indeed it is estimated that nationally around 90% of rapes are not disclosed by the victim. This is confirmed through Rape Crisis and SARC data locally about the number of self referrals. It is therefore difficult to assess with any accuracy the level of sexual violence within the county and this also potentially raises concerns about a lack of confidence in reporting to police. For the time period between 01/08/2009 - 31/07/2010, 165 crimes of rape were recorded by police.

¹¹ Recorded Crime Durham Constabulary average figures



The breakdown of the 165 recorded crimes of rape across County Durham and Darlington is as follows:-

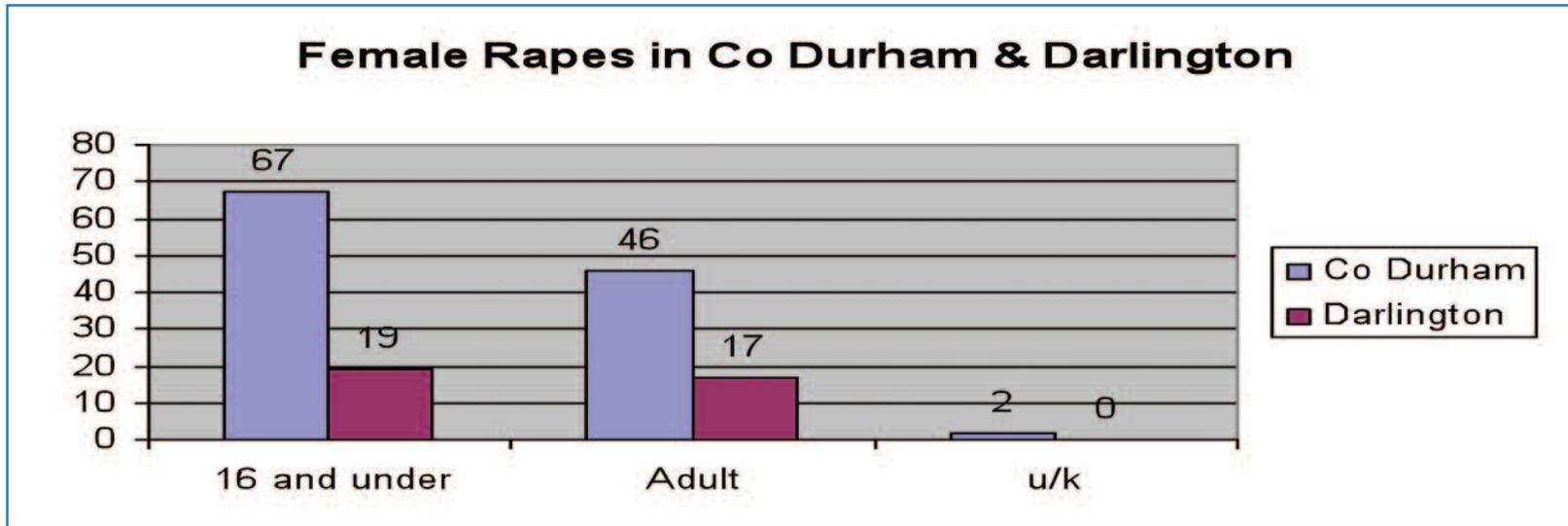
Female Rapes Darlington)	Acute (within 7 days)	Historic (post 7 days)	unknown	Total
Age 16 & under	3	10	0	13
Age 16 & under (with consent)	1	5	0	6
Adult	4	11	2	17
Total	8	26	2	36

Male Rapes (Darlington)	Acute	Historic	u/k	Total
Age 16 & under	0	4	0	0
Age 16 & under (with consent)	0	0	0	0
Adult	0	0	0	0
Total	0	4	0	4

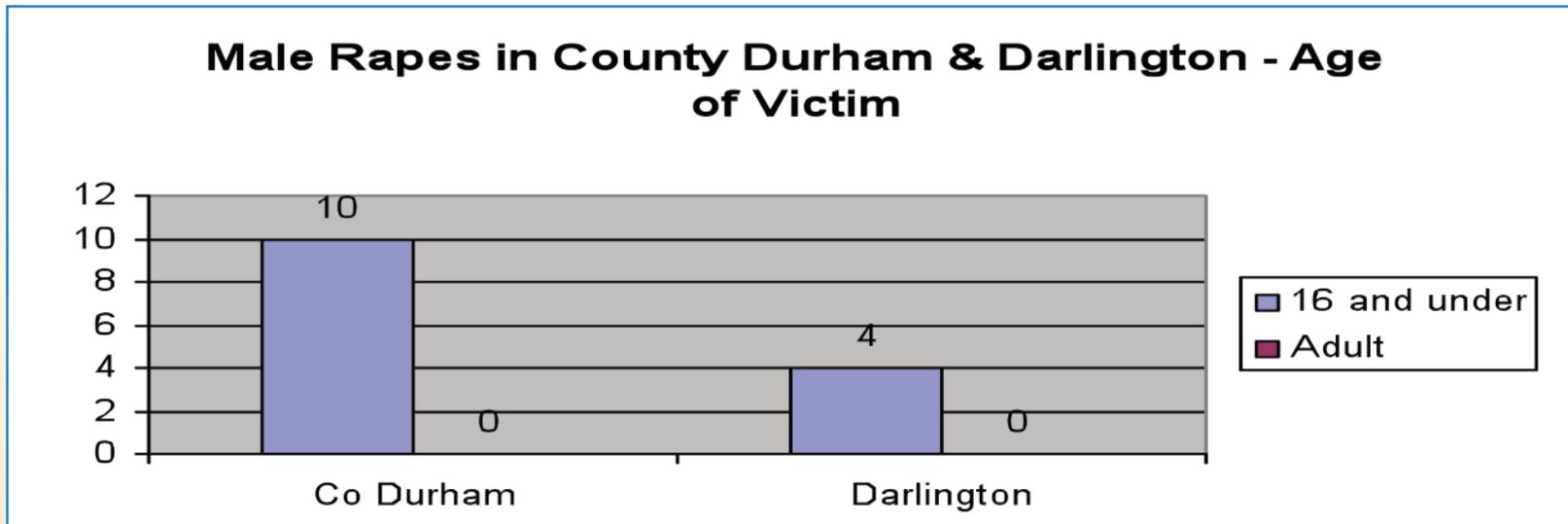
Female Rapes (Durham)	Acute	Historic	u/k	Total
Age 16 & under	13	30	0	43
Age 16 & under (with consent)	9	15	0	24
Adult	20	26	0	46
Age u/k	1	1	0	2
Total	43	72	0	115

Male Rapes (Durham)	Acute	Historic	u/k	Total
Age 16 & under	0	9	0	9
Age 16 & under (with consent)	0	1	0	1
Adult	0	0	0	0
Total	0	10	0	10

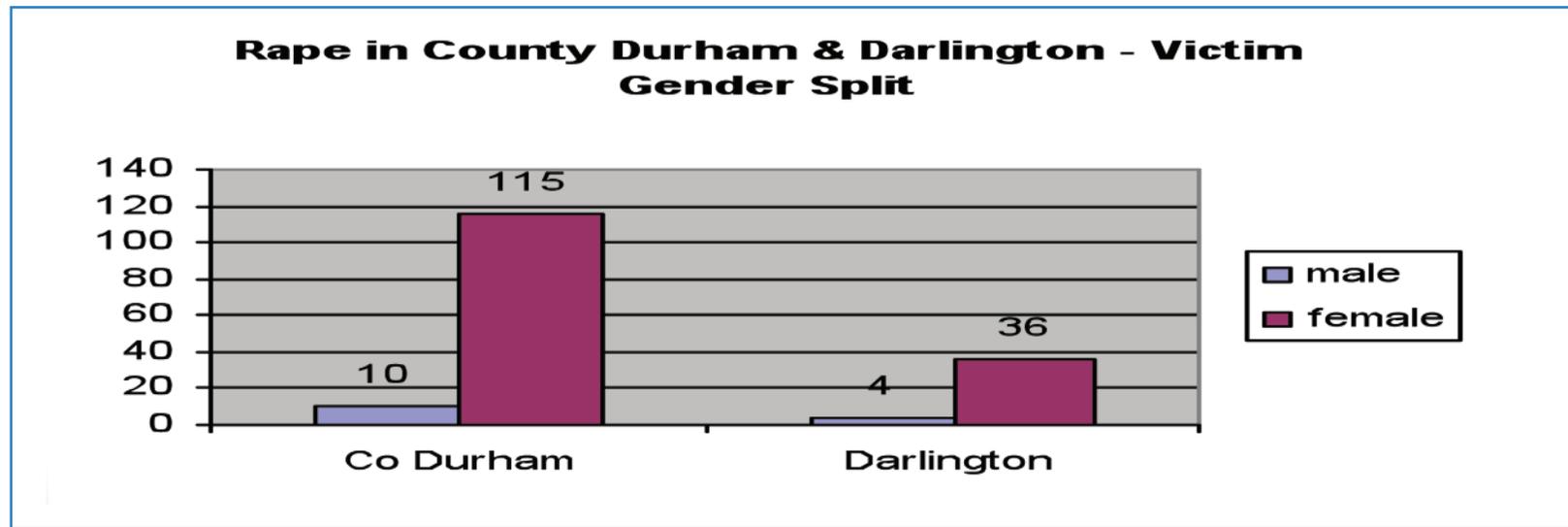
Age of Victim



Age of Victim



Rape by Gender



Of the 165 rapes identified in the reporting period, 92% of the victims were female and 8% of the victims were male.

Data from the County Durham and Darlington Local Criminal Justice Board suggests that in around half of all incidents of rape that are recorded by Police, the case does not enter the criminal justice process. For those that do progress to court however, there is an 84% conviction rate.¹²

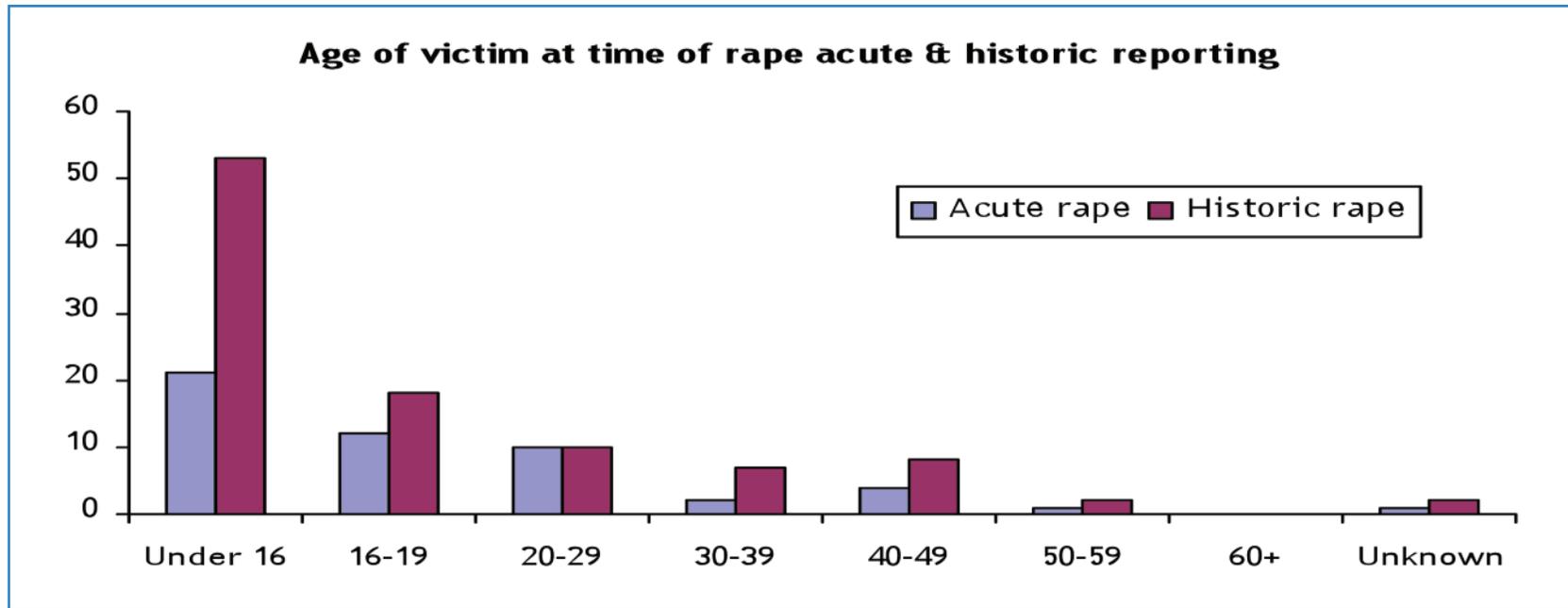
To better understand the victim and offender profiles, the 165 crimes of rape between 01/08/2009 - 31/07/2010 were analysed in detail.

Victims were more likely to be attacked by somebody they knew and more than likely within familiar surroundings. In 66% of reported cases, the rape or act of sexual violence was historic, having occurred up to a year before it was reported to police.

Where 'acute'¹³ rapes were reported, they were more likely to be reported on weekends, between 2100 and 0700 the following morning. Alcohol was believed to be a contributing factor in the majority of cases.

¹² County Durham and Darlington LCJB Rape Investigations and Prosecutions Summary July 2009 – July 2010. NOTE:- Since the initial data collection, it appears that this figure has reduced to just over 60%.

¹³ Acute rape is a rape that is reported within 7 days of the incident having occurred



Young People

In 52% of cases, the victim was a young person under the age of 16 years. Breaking this down further, 21% were under the age of 13 and their relationship with the offender was most commonly that of a family member or an acquaintance. 31% of victims were aged between 13 and 15 years old. Over a third (36%) of these were in a consensual relationship with the offender; of the remainder the most common relationship (a further 36%) is that of acquaintance.

The vast majority (71%) of male victims are under the age of 13 at the time of the crime.

Within the profile that was conducted¹⁴, partners reported growing concerns about the increased use of social networking sites by young people which increased the risk of sexual exploitation. A worrying culture and changing of attitudes towards sex has developed amongst children and young people, which resulted in the increased sexualisation of young people and therefore an increased vulnerability to sexual harm.

Concerns were also highlighted around the vulnerability of young people going missing from home and their vulnerability to sexual exploitation. This vulnerability is magnified for those young people who go missing from the Looked After system.

¹⁴ Durham Constabulary Problem Profile on Sexual Exploitation 2010.

Adults

Sample testing of incidents would suggest that victims of sexual violence have often have been considered vulnerable in other areas. Common factors which were evident were domestic abuse, or child abuse as a young person.

In almost half of all reported rape cases, the offender was reported as a partner or family member. It is likely that other forms of abuse were also present within these relationships – indeed in more than a third of cases involving sexual assault within an intimate relationship, domestic abuse was also a feature of the relationship. The majority of rapes that had been reported within intimate relationships, were reported historically, ie more than 12 months after the rape took place.

Reports of stranger rape were rare, but when reported, were more likely to be reported as acute rape. Of the stranger rapes identified, they occurred most frequently within open spaces.

In a proportion of cases, there were rapes that were reported to the police but that did not result in a crime being recorded. There are a number of factors why this may be the case. In some instances, the victim became uncooperative with the criminal justice process, but on some occasions complaints were shown to have been fabricated. There is a potential that where victims have refused to co-operate with the criminal justice process, that this could be due to a lack of confidence in the criminal justice process, once the crime had been reported, causing the victim to retract their complaint.

8% of reported rapes involved male victims. This is in line with national trends, however it is believed to highlight a significant under reporting in cases of male rape and therefore the true picture could not be established.

5. Why is Tackling Sexual Violence a Priority?¹⁵

It is much more common than people think

23% of women and 3% of men experience sexual assault as an adult. 5% of women and 0.4% of men experience rape.

It represents a form of gender inequality

Most perpetrators of sexual violence are men and most victims are women. Sexual violence is both a consequence and a cause of gender inequality. Human rights and gender inequality legislation, including the Gender Equality Duty, require public authorities to address violence against women.

The most vulnerable in society are disproportionately affected.

Adult sexual violence is more likely to be experienced by people with a disability, people involved in sex work and people who were abused as children.

It causes fear in communities

Women are more concerned about rape and sexual assault than any other crime

It causes severe and long lasting harm to survivors

Direct physical health consequences of sexual violence include physical injury, sexually transmitted infections and unwanted pregnancy. Long term consequences can include post traumatic stress disorder, anxiety and panic attacks, depression, social phobia, substance misuse, eating disorders, self-harm and suicide.

It causes harm to society

The overall cost to society is estimated at more than £8 billion each year. Leaving aside the inability to measure human suffering, the price tag to health services is estimated at £76,000 for each individual rape. Addressing problems at an early stage should help to prevent long term costs.

Victims don't always get the support they need

It is estimated that 90% of people who suffer rape do not tell anybody about it. This means that victims do not get the support that they need to deal with the sexual violence they have experienced. Where victims do try and access support, it hasn't always been available. We need to ensure that services are available for those who need them.

It is an important and dangerous element of domestic abuse

Many people believe that strangers normally commit adult sexual violence. In fact, perpetrators are normally known to the victim and many are partners or family members. Rape is associated with the most severe cases of domestic abuse and is a risk factor for domestic homicide.

Offenders are not being brought to justice

Only 15% of serious sexual offences against people over 16 are reported to the Police.

¹⁵ Bristol's Rape and Sexual Assault Strategy 2009-11

6. Barriers to reporting sexual crimes¹⁶

Children

It is not unusual for children who have been sexually abused not to tell anybody about their abuse. This is particularly the case if the perpetrator is a family member or loved one, or the child has been told not to tell. Children who experience sexual abuse are often fearful of the impact within the family if they disclose, or maybe even feel responsible for this abuse, which again presents difficulties in encouraging children to report sexual crimes.

Men

There is evidence that men are less likely to report sexual violence to the police than women. Because the media rarely tend to report on stories of male rape and sexual assault, this can lead to victims feeling that they are the only one who has suffered the experience. This can lead to male victims feeling even more isolated and fearful that they would not be believed if they were to report.

Language

For those victims who do not speak English or for whom English is not their first language, there is an immediate barrier to them reporting sexual violence. The language barriers could also have an impact on whether the victim will be able to access appropriate support services.

People involved in sex work

Those people who are involved in sex work are especially vulnerable to sex crime and particularly at risk of sexual violence from people who pay for and use their services. The fact that a victim is involved in sex work can also lead to enhanced feelings of shame and self blame when they are the victim of a sexual assault. The social stigma attached to working as a prostitute and the fear that criminal proceedings may result against the victim because of their sex work, is also likely to lead to fears about reporting the crime to the Police.

People with physical and learning disabilities

People with physical or learning disabilities may be even more vulnerable to sexual violence and may be targeted by sex offenders because of their vulnerability. Those people with a learning disability may also be targeted because the offender thinks that they will not be believed or may not make a credible witness at court. Where the perpetrator is a care worker or in a position of authority, it may be difficult for a victim to understand that what has happened to them is a crime, and they may not wish to report it to the Police or be prepared to be a witness at court.

People who have been trafficked

Women and children may find themselves having been trafficked into the country for the purposes of sexual exploitation by organised crime groups. The complexities of the cultural issues around debt bondage and fear of violence and intimidation against family members in the victims home country frequently means that they are terrified to disclose and are distrustful of authority. The lack of immigration status for many of the victims in these circumstances also increases the likelihood that victims will not disclose to Police.

¹⁶ Northern Ireland Strategy for Tackling Sexual Violence and Sexual Abuse 2008-1013

7. Links to other Plans and Strategies

- Durham Local Safeguarding Children's Board and Safeguarding Adults Board policies, procedures and action plans
- Darlington Safeguarding Children's Board and Safeguarding Adults Board policies, procedures and action plans
- County Durham Alcohol Harm Reduction Strategy 2009-12
- Darlington Alcohol Harm Reduction Strategy 2008- 2011
- County Durham Domestic Abuse Strategy 2008 - 2011
- County Durham and Darlington Sexual Health Strategy
- Darlington Domestic Abuse Strategy
- Response To Sexual Violence Needs Assessment
- NSPCC Report on Teenage Partner Violence
- Government Strategy – Call to End Violence Against Women and Girls

8. Strategic Priorities

This strategy will be delivered through a targeted implementation plan based on a number of strategic priorities. The governance of this strategy will be through the Vulnerability Groups of the Safe Durham and Safer Darlington Partnerships. In order to achieve this, an Implementation Group will be established to determine timescales, leads and resources required for each action within the implementation plan.

Where there is ongoing work within the Local Safeguarding Children's Boards, this will be referenced within the implementation plan. The implementation plan is intended to be a living and evolving document which will be updated regularly.

The aims of this strategy are to work in partnership to:-

PREVENTION

To prevent sexual violence and sexual exploitation and reduce the associated harm

Objective 1

To ensure that all children and young people have an understanding that healthy relationships are based on respect, with sexual activity being consensual.

Objective 2

To raise public awareness of sexual violence, both inside and outside of the home.

Objective 3

To ensure early identification and co-ordinated intervention by front line professionals to protect victims of sexual violence. This includes children, young people and adults.

PROVISION

To ensure that victims of sexual violence are provided with access to the right end to end help and support, and that services are available to address their needs.

Objective 4

To ensure that all victims of sexual violence have access to forensic medical provision which provides the full range of health care and after care to ensure that mental and sexual health needs are addressed.

Objective 5

To develop an accurate picture of the scale and nature of all aspects of sexual violence.

PROTECTION

To improve the criminal justice response to tackling sexual violence and sexual exploitation

Objective 6

To reduce the attrition rate and maintain the high conviction rate in cases of sexual violence.

Objective 7

To ensure that victims are provided with an enhanced level of support throughout the end to end criminal justice process.

Objective 8

To ensure that all criminal justice agencies address the underlying problems in reporting of rape and in prosecuting rape cases.

County Durham and Darlington Sexual Violence Implementation Plan 2011- 2014

PREVENTION

To prevent sexual violence and sexual exploitation and reduce the associated harm

Objective One

To ensure that all children and young people have an understanding that healthy relationships are based on respect, with sexual activity being consensual

NO.	ACTION	PROGRESS AND RAG STATUS	LEAD	TIMESCALE
1	Develop the Sex and Relationship (SRE) programme within schools to encourage the development of healthy relationships and respect. Within this, develop age appropriate messages about what constitutes inappropriate and/or harmful sexual behaviour, including what is meant by consent in relation to sexual activities. This will include education on the law around under age sex.			
2	Identify and promote multi agency interventions to improve outcomes for young people who display sexually harmful behaviour. Consideration should be given to the use of the CAF and the Children's Trust within this.			

3	To ensure that the risks of sexual exploitation amongst children and young people are addressed through LSCB action plans.			
4	To consider the necessity and practicality of each LSCB establishing a sexual exploitation sub group as suggested in HM Government supplementary guidance.			
Objective Two To raise public awareness of sexual violence, both inside and outside of the home.				
NO.	ACTION	PROGRESS AND RAG STATUS	LEAD	TIMESCALE
5	Encourage Further and Higher Education establishments to include in their pastoral care arrangements, information, advice and support around the issue of sexual violence.			
6	Engage with local media in raising awareness of the issues and in challenging the myths surrounding sexual violence and abuse.			
7	Engage with the local media in addressing how story lines in print and programming about sexual violence and abuse are accurately and sensitively portrayed, and that help lines are published.			

Objective Two

To raise public awareness of sexual violence, both inside and outside of the home.

NO.	ACTION	PROGRESS AND RAG STATUS	LEAD	TIMESCALE
8	Engage with groups of people who face additional barriers to accessing services (BME, LGBGT, disability) to raise awareness of rape and of available services.			
9	Develop annual plan for marketing or SARC services, to include in particular refreshing of leaflets in key settings such as GP Surgeries and Well Woman clinics			
10	To work with the Domestic Abuse Executive Group (Durham), the Vulnerability Group (Darlington) and the Children's Trust Boards to develop a media campaign to raise awareness of sexual violence within the home and of teenage partner violence.			

Objective Three

To ensure early identification and co-ordinated intervention by front line professionals to protect victims of sexual violence. This includes children, young people and adults.

NO.	ACTION	PROGRESS AND RAG STATUS	LEAD	TIMESCALE
11	Engage with the Security Industry to raise awareness of door staff about the vulnerability of lone females leaving licensed premises late at night.			

12	Work with Taxi Licensing Authorities to encourage drivers to adopt safety measures for lone females travelling late at night.			
13	Improve the first police response to reports of sexual violence			
14	Develop the Durham Constabulary SLEUTH Protecting Vulnerable Persons database in order that serial perpetrators can be identified and appropriately targeted through multi agency Potentially Dangerous Persons (PDP) protocols			
15	Develop processes across agencies for the identification of individuals that pose a high risk of sexual harm and are non convicted, in order that information can be shared amongst key agencies and that the risk can be managed.			
16	Ensure that organisations support staff to attend multi agency public protection meetings such as MAPPA, MARAC and PDP.			
17	Ensure that neighbourhood police officers and PCSO's are aware of those offenders who are considered to be sexually violent, including those in the MARAC arena.			

18	Improve processes across LSCB partners for the management of missing from home investigations, with a particular emphasis on reducing the frequency of young people repeatedly being reported missing from home in circumstances where they are vulnerable to sexual exploitation.			
19	Integrate strategic messages about sexual violence and abuse into those about domestic violence, alcohol and drug harm, mental health and the protection of children and vulnerable adults. Ensure that guidance contains consistent messages about specific risk factors.			
20	Implement the new NPIA Guidance on Protecting the Public - Management of Violent and Sexual Offenders			
21	Develop improved working practices within Durham Constabulary to ensure that referrals are routinely made to Children's Services in cases where extra familial child abuse is being investigated in order that the wider safeguarding issues can be addressed.			
22	Develop a harbourers policy to ensure that steps are taken to protect vulnerable young people who go missing from home and are vulnerable to sexual exploitation.			
	Nominate a Sexual Violence Lead within each partner agency.			

PROVISION

To ensure that all victims of sexual violence have the access to the right help and support throughout the criminal justice process, and that services are available to address their needs.

Objective Four

To ensure that all survivors of sexual violence have access to forensic medical provision which provides the full range of health care and after care to ensure that mental and sexual health needs are addressed.

NO.	ACTION	PROGRESS AND RAG STATUS	LEAD	TIMESCALE
24	Ensure that victim perspective is incorporated into all aspects of processes, procedures and policies of The Meadows (SARC) and Rape Crisis, using Service User Satisfaction and feedback measures to regularly improve service			
25	To work with the SARC, third sector and health sector sexual violence services to ensure that where a victim is self referred/referred, that reporting to the police is encouraged and that staff have an understanding of criminal justices processes in order that they can provide appropriate advice and encouragement.			
26	Review marketing arrangements for SARC services. This requires a clear comms/marketing strategy.			

27	Develop a standardised regional approach to the commissioning of forensic paediatric provision in acute cases and ensure that there is resilience to undertake historic assessments.			
28	Develop the role of the ISVA to ensure appropriate support for children and young people within families throughout the court process. Consideration should be given for developing dedicated C&YP ISVA			
29	Conduct a review of referral pathways (including within the SARC) for children and young people to specialist age appropriate post trauma services. Ensure that agencies understand the referral criteria for young people to access these services. Services should be made available in both acute and historic cases.			
30	Conduct a service review of mental health services particularly counselling available to children and their families and male rape victims.			
31	Develop mechanisms within health sector around coding of MARAC outcome/sensitive information on records.			
32	Ensure that where possible, victims are provided with a choice of gender of the FME who will conduct their medical examination after a sexual assault			

Objective Five

To develop an accurate picture of the scale and nature of all aspects of sexual violence.

NO.	ACTION	PROGRESS AND RAG STATUS	LEAD	TIMESCALE
33	Increase referrals from all partner agencies into the MARAC process, and explore the MARAC model as a means for managing the risk to those individuals who are at risk of sexual exploitation.			
34	Commence data collection within the SARC and Out Reach services relating to sexual violence in an intimate relationship			
35	Ensure the recoding and collection of data in key settings e.g. GUM, sexual health, A&E, Obs and gynae (including Termination of Pregnancy), primary care, alcohol and drug treatment etc.			

PROTECTION

To improve the criminal justice response to tackling sexual violence and sexual exploitation

Objective Six

To reduce the attrition rate and maintain the high conviction rate in cases of sexual violence.

NO.	ACTION	PROGRESS AND RAG STATUS	LEAD	TIMESCALE
36	To gain an understanding of the reasons why 50% of acute adult cases reported to the police result in No Further Action being taken prior to being crimed.			
37	Develop improved processes for shared learning including a joint SARC/Police/CPS performance meeting to examine all aspects of rape prosecutions			

Objective Seven

To ensure that victims are provided with an enhanced level of support throughout the end to end criminal justice process.

NO.	ACTION	PROGRESS AND RAG STATUS	LEAD	TIMESCALE
38	To establish a process whereby the CPS can understand why a victim retracts or does not support a prosecution in order that decisions can be taken around compelling victims to give evidence as appropriate.			
39	To establish an independent mechanism for obtaining feedback from victims who have been through the court process. Findings should be fed back through Rape Operations Group.			

Objective Eight

To ensure that all criminal justice agencies address the underlying problems in reporting of rape and in prosecuting rape cases.

NO.	ACTION	PROGRESS AND RAG STATUS	LEAD	TIMESCALE
40	To develop a dedicated Prosecution Team for investigation and prosecution of rape, to include appointment of rape champion lawyer within CPS to work with the SARC and ISVA's and investigating officers in order to improve case building from early consultation, through charging and pre-trial phases;			
41	Instruction only of suitably trained and experienced counsel in sexual violence criminal cases.			
42	Develop improved processes so that wherever possible, a SOLO trained officer or Safeguarding Champion is deployed first on scene at allegations of rape. This should include consideration of advanced evidence gathering techniques eg Head Cams to recall first accounts and disclosures of sexual violence where appropriate.			
43	For the SARC to conduct follow up and feedback with victims about their whole experience in the following circumstance:- i) Victims who self referred for counselling but did not inform the police.			
44	To develop co-ordinated and consistent quality assurance processes to assess the quality of rape investigations, to include bi monthly dip sampling jointly by Police and CPS.			