SSA EQUALITY IMPACT AND NEEDS ANALYSIS

Directorate	Chief Executive's Department
Service Area	Stronger and Safer Communities
Service/policy/function being assessed	Community Safety
Which borough (s) does the service/policy apply to	Richmond
Staff involved in developing this EINA	Miranda Hibbert, Vulnerabilities Manager
	Samantha Stephenson, VAWG Officer
Date approved by Directorate Equality Group (if applicable)	N/A
Date approved by Policy and Review Manager All EINAs must be signed off by the Policy and Review Manager	8/10/2024
Date submitted to Directors' Board	

1. Summary

Please summarise the key findings of the EINA.

This EINA relates to the recommissioning exercise for the independent domestic abuse violence (IDVA) service in Community Safety. The service will be a positive step in addressing inequalities across the London Borough of Richmond Upon Thames, the service is accessible and free; providing expert, specialist advocacy to those suffering domestic abuse.

The service will primarily be accessed by women as women and girls are disproportionately victims of abuse, however, is accessible to all gender identities. The service will seek to actively engage with over/underrepresented cohorts of the communities to address inequalities and ensure the service is accessible. Currently there is not enough information available on most protected characteristics to gain an accurate representation of who is accessing support.

Overall, there are no anticipated negative impacts of this recommissioning exercise, and it provides a great opportunity to improve a vital service for vulnerable residents.

2. Evidence gathering and engagement

a. What evidence has been used for this assessment? For example, national data, local data via DataRich or DataWand

Evidence	Source
Qualitative Data	DataRich
	Office of National Statistics
	Met Police Data
	Domestic Abuse Commissioners Officer
Local VAWG Needs Assessment	
Demographic data of those accessing support	Annual Reports

b. Who have you engaged and consulted with as part of your assessment?

Individuals/Groups	Consultation/Engagement results	Date	What changed as a result of the consultation
Provider Organisations	The CS Teams engages with 11 organisations over two events to get feedback on the Service Specification and plan for procurement to ensure a maximum number of applications would come in. The market was sufficiently warmed and we gained valuable feedback as to how the Council can make their procurement exercises more accessible to the voluntary community sector (VCS), and how the service specification can be improved.	November 2023	The CS team incorporated the comments from the market into the service specification and the KPIs to ensure it would be the most effective service.

3. Analysis of need

Potential impact on this group of residents and actions taken to mitigate impact and advance equality, diversity and inclusion

Protected group	Findings
Age	The 2021 Census showed that Richmond Upon Thames is broken down in the following ways: 19% are aged 0-14 years old; 15-64 years old is 65%; and 65+ makes up the remaining 16% of the population.
	Richmond has a slightly higher than London average population percentage aged 65+ (16% vs 12%) and the average age is 41
	The most common age of victims accessing the current provision is in line with the expected age for the borough, with the most common age group being 40-44 for the year 22/23.
	The Domestic Abuse Act 2021 created a statutory definition of domestic abuse that recognised victims to be those who were aged 16+ and personally connected.
	 Children and Young People Following the Domestic Abuse Act 2021, children who are affected by domestic abuse in their own home are recognised as victims in their own right. Across England in the year ending March 2023, the most common factor for a child to be referred to children's social care was concerns about the parent/carer being a

	 victim of domestic abuse¹ and domestic abuse is recognised as an adverse childhood experience. Young people are also at risk in their own relationships with a quarter of girls reporting they had experienced physical violence from a boyfriend, 75% of girls and 50% of boys reporting experiencing some form of emotional abuse in their own relationships². Older People There is lack of awareness of abuse of older people and a there is a lack of consistency across services in defining the age of an older person resulting in a lack of data being available on the impact. However, research suggests it is a very under-reported and misunderstood crime that needs to be addressed with older people facing significant barriers to reporting and may be more likely to face different types of abuse such as abuse from an adult family member rather than an intimidate partner³. A national review of Domestic Homicides highlights many professionals failed to identify domestic abuse due to a victim's age⁴.
Disability	 12% of Richmond's population identify themselves as having a disability. Guidance ⁵suggests disabled people are three times more likely to experience domestic abuse than those without a disability; are more likely to remain living with their perpetrator and have increased risks of experiencing different types of abusive behaviour related to their disability. Disabled victims may face additional barriers in accessing support and a 2022 national report found disabled people reported they found accessing any support very difficult, especially those with learning disabilities.⁶
Sex	 Richmond's population is 52% females and 48% males. Although domestic abuse can affect anyone, it does disproportionately affect women and girls. For year ending March 2023, 1 in 4 women nationally (27%) experienced domestic abuse since the age of 16, and for men it was 1 in 7 (13.9%)⁷.
Gender reassignment	0.4% of the population of Richmond responded to the Census in 2021 identified as having a different gender identity from that registered at birth. This is lower than the London average (0.9%) It is important to note in the census this question was voluntary

¹ <u>Children in need, Reporting year 2023 - Explore education statistics - GOV.UK (explore-education-statistics.service.gov.uk)</u>

² Tackling teen relationship violence on TV | Research | University of Bristol

³ Policy Briefs | Hourglass (wearehourglass.org)

⁴ <u>Domestic Homicide Review findings on the abuse of older people - SafeLives</u>

⁵ <u>Domestic Abuse Statutory Guidance (publishing.service.gov.uk)</u>

⁶ DAC Mapping-Abuse-Suvivors Long-Policy-Report Nov2022 FA.pdf (domesticabusecommissioner.uk)

⁷ Who is missing in the data? What the available data on domestic abuse does and doesn't tell us about women's experiences - Women's Aid (womensaid.org.uk)

and across the U.K. 6% of respondents did not answer this question so there is a possibility the number of individuals is higher. There is limited research on the experiences on trans people in relation to domestic abuse but available evidence suggests the LGBTQ+ are more at risk; transgender victims experience specific types of abuse related to their gender identity; and trans victims experience additional needs especially in relation to mental health8. Some research suggests around 80% of trans people have experienced domestic Marriage and civil 49.5% of the Richmond population are married or in a registered civil partnership, higher partnership than the London average of 40%. There is little research into the impacts of marriage on domestic abuse but the Crime Survey from 2019 suggests that adults who were separated or divorced were more likely to have experienced domestic abuse compared with those who were married or civil partnered, cohabiting, single or widowed¹⁰. • For those who are married or in a civil partnership and who chose to separate, research shows the family justice system does not always protect victims as it should, especially when there are children involved, and can cause retraumatisation. The family justice system can also be used by abusers as an ongoing form of abuse¹¹. • Forced marriage often occurs in the context of domestic abuse, and is a specific criminal offence as well as an abuse of human rights¹². **Pregnancy and** In 2022 there were 1,827 live births in Richmond Borough, the total fertility rate¹³ was maternity 1.4, the still birth rate was 1.4 per $1,000^{14}$. • Pregnancy or recent birth is a known risk factor for domestic abuse¹⁵. Race/ethnicity Census 2021 data show the Richmond population is 80.5% White, 8.9% Asian/Asian British, 5.5% Mixed or Multiple Ethnic Group, and 1.9% Black/Black British/Caribbean or African. The most common vulnerability of victims accessing the current IDVA provision for the years 2021-2023 was not having English as a first language.

⁸ Transgender victims & survivors | Domestic abuse - SafeLives

⁹ Risk factors | Background information | Domestic abuse | CKS | NICE

¹⁰ Domestic abuse victim characteristics, England and Wales - Office for National Statistics (ons.gov.uk)

¹¹ Family Court - Domestic Abuse Commissioner

¹² What Is Forced Marriage? Booklet (publishing.service.gov.uk)

¹³ The Total Fertility Rate (TFR) is the average number of live children that a group of women would bear if they experienced the age-specific fertility rates of the calendar year throughout their childbearing lifespan.

¹⁴ Births in England and Wales: summary tables - Office for National Statistics (ons.gov.uk)

¹⁵ Risk factors | Background information | Domestic abuse | CKS | NICE

	 Research shows that victims of domestic abuse from Black, Asian and minority groups face extra barriers in accessing support and these include: language barriers; historic distrust of police; some communities pressuring individuals to stay quiet; immigration status including those with NRPF; and institutional racism from services¹⁶.
Religion and belief, including non belief	 The top three religious groups in Richmond are 45% Christian, 38% no religion and 4% Muslim. Religion and spiritual abuse can occur in the context of domestic abuse, and may include forcing a victim to practice things in conflict with their beliefs or preventing a victim from carrying out religious practices.
Sexual orientation	 The LGBTQ+ population in Richmond is 3.5% Research suggests that members of the Lesbian, Gay, Bisexual, Transgender, Queer + (LGBTQ+) community are not only more likely to experience DA, but they also face additional barriers in accessing support including, not wanting to disclose their sexuality to services for fear of discrimination¹⁷.
Across groups i.e older LGBT service users or Black, Asian & Minority Ethnic young men.	 We know that domestic abuse disproportionately affects women and girls, and certain groups of women are more at risk and face additional barriers to accessing support including: older women, children and young people, disabled women, ethnic minorities, migrant women, women from lower socio-economic backgrounds and care experienced women. However, there is a lack of data that explores intersectional factors and their representation in domestic abuse support locally.
Socio-economic status Include the following groups: Deprivation (measured by the 2019 English Indices of Deprivation) Low-income groups & employment	 39% of households in Richmond are deprived in one or more dimension (lower than the London average of 51.9%), and deprivation and lower socio-economic status are identified risk factors for domestic abuse¹⁸, with financial barriers a common reason for someone being unable to leave an abusive situation. 7.1% of the Richmond population provide unpaid care, and wider research suggests care-giving to be a risk factor for domestic abuse and this is often a hidden abuse that is widely misunderstood¹⁹, especially for young carers who may often not be receiving support. Care-experienced individuals are at higher risks of many forms of abuse, given high likely hood of experienced trauma and lack of stable support network.

Domestic Abuse in Black, Asian and Minority Ethnic Groups | Interventions Alliance
 Domestic Abuse in LGBT Communities | Interventions Alliance

Domestic Abuse: statutory guidance (accessible version) - GOV.UK (www.gov.uk)

¹⁹ Carers Week: a spotlight on carers who experience abuse from those they care for | Hourglass (wearehourglass.org)

CarersCare	 8.8% of Richmond households area lone parent family and single parents are more likely to experience domestic abuse and be at risk of abuse from their ex-
experienced	partners ²⁰ .
people	 Refugee status – see section on race/ethnicity.
Single parents	
• Health	
inequalities	
Refugee status	

Data gaps

Data gap(s)	How will this be addressed?
Intersectional data	The commissioned service will ensure robust data collection. There is a governance structure in place to monitor delivery of the local VAWG Strategy: a standing item on this is a data dashboard which will now seek to take an intersectional lens to the data to develop a better understanding of how vulnerabilities interlink.
Socio-economic status data	This data is not readily available and is something we know impacts service users, for example financial barriers to leave an abusive situation. However this is anecdotal evidence reported by the IDVA service, rather than quantitatively collected data. The information and trends will continue to be collected anecdotally, through case study examples and a discussion with the new service other ways to show to show any identified need not captured currently.

4. Impact

Protected group	Positive	Negative
Age	provider will monitor age of victims accessing service to ensure it is reflective of local population, and if not will be expected to carry out targeted work.	Older and younger women may not access traditional services, but the provider will be expected to work in partnership with specialist organisations to support all ages of women to access appropriate support.
	Under 16s will not be supported by the service but they will work closely with other local support such as Children's services to ensure there is effective support for any age that contact the	

²⁰ Women most at risk of experiencing partner abuse in England and Wales - Office for National Statistics (ons.gov.uk)

	service, as well as any children affected by	
	domestic abuse in their home.	
Disability	The provider will be open to all, and is expected to make the service accessible for those with disabilities, but partnership working to ensure services are tailored to an individuals needs is expected and victims are able to access appropriate support.	Individuals with disabilities may find accessing a mainstream service difficult. However, the provider is part of the Pan-London service which is a consortium of specialist services and will be able to refer and support through specialised support.
Sex	The service will be open to all genders but it is expected it will be accessed mostly by women, given the gendered nature of domestic abuse.	Men may be less likely to seek support due to stigma and may feel excluded from mainstream services if there is not a specific male focus. Service is expected to work in partnership with specialist male by and for domestic abuse services that work pan-London, and offer appropriate signposting or onward referral to mitigate for this.
Gender reassignment	There is currently no specific provision for this group, and the service will be open to all genders as above. Service will need to have a clear policy for trans gender women.	It may be appropriate for service to have some women-only support groups, to allow female victim survivors to access support in a safe space, but service should offer inclusive groups or work in partnership to host groups for transgender individuals alongside.
Marriage and civil partnership	Service will provide support regardless of marital status, and this includes supporting someone to stay in their marriage if they choose and supporting them to manage risk. Service will also support people to understand their legal options to separate, so a victim can make an informed decision. The service will be available to those who have been victims of forced marriage and will work with local specialist services to ensure appropriate support.	There is a risk of victims believing they may not be support available if they want to stay in their marriage, or if they have concerns about their immigration status if they want to separate. To balance this the service will make this clear in their communications what support is available and to who, and to work in partnership with specialist organisations as needed to overcome any barriers.
Pregnancy and maternity	Provider will work with health partners, given the known risks of domestic abuse associated with pregnancy.	No negative impact is anticipated, and data on numbers of pregnant women is to be collected by provider to ensure expected numbers are accessing support.
Race/ethnicity	The service will continue to record ethnicity data and monitor any over or under representation in service access.	Some communities may not want to access a mainstream service or are rarely reached by a non-specialist service. To mitigate this

Religion and belief, including non belief	The service will continue to record data on religion and monitor any over or under representation in service access.	the new service will work closely with the local community to access hardly reached groups. Some communities may not want to access a mainstream service or are rarely reached by a non-specialist service. To mitigate this the new service will work closely with the local community to access hardly reached groups.
Sexual orientation	The provider will have an understanding of the specific types of abuse that those from LGBTQ+ groups may face and identify them when offering support.	Fears of discrimination may be a barrier to accessing a new service, however the new service will work with existing trusted specialist by and for services to develop referral pathways for individuals who would prefer to access specialist support.
Socio-economic status Include the following groups: Deprivation (measured by the 2019 English Indices of Deprivation) Low-income groups & employment Carers Care experienced people Single parents Health inequalities Refugee status	The service will provide free support to the community to remove financial barriers to support. The service will also be flexible in the ways it provides support, including through staff working in co-location with other services or offering support virtually (if safe to do so) to remove any barriers that may be the result of socio-economic status such as being a single parent making it harder to travel to a service.	Refugees with NRPF or those with insecure immigration status may be disadvantaged as there are restrictions on what public services they can access and they face additional fears of immigration issues, but are a group at high risk of domestic abuse. This problem is not unique to this service, with many recent research reports highlighting the problem such as the Safety before Status report by the Domestic Abuse Commissioner ²¹ . To mitigate this, service needs to work in partnership with services funded to support those with NRPF and to keep accurate records of anyone they are unable to support to demonstrate the scale of the problem so further solutions can be sought.

5. Actions to advance equality, diversity and inclusion

Action	Lead Officer	Deadline
The commissioned provider will be expected to identify by and for	Commissioned	June 2025 (post
services to develop referral pathways, and work in partnership to	Provider	mobilization)
mitigate any barriers protected groups may face in accessing support.		
These partnerships will be included in their reports and monitored by the		
local council.		
The commissioned provider will collect demographic data, including	Commissioned	Ongoing
protected characteristics, on those accessing the service and report these	Provider	
on a regular basis to the responsible council officer. These will be		
reviewed regularly in line with local population and expected access and		

²¹ FINAL-DOC Firewall-Report 2023 V2.pdf (domesticabusecommissioner.uk)

any identified under-represented groups will be targeted to ensure		
equality in access.		
Contract monitoring to include monitoring of equalities data for	Council Officer	Ongoing
over/under representations to identify trends or inequalities in access		
Survivors input to be sought regularly to identify any barriers to access	Commissioned	Ongoing
from an ED&I perspective	Provider and	
	Council Officer	

6. Further Consultation (optional section – complete as appropriate)

Consultation planned	Date of consultation	