

Executive Summary

Central Advocacy Partners Survivors Project – Year 2 Report

(Published May 2020)

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1 Introduction and Background

The relationship between disability and abuse is relatively well established, particularly that between women with disabilities and domestic violence. The European Union Agency for Fundamental Rights (2014) suggests that 50% of disabled women have experienced domestic abuse at some point in their life. The experience of adults with learning disabilities who have or who are experiencing sexual abuse and/or intimate partner violence is, however, not so well documented in academic literature and there appear to be limited resources available to support them overall (Guardian, 2015). Existing research suggests that not only do adults with learning disabilities have limited knowledge of the services that might be available to them but also that agencies and professionals have limited knowledge of how to support adults with learning disabilities who are survivors of abuse (McCarthy et al, 2015).

In response to these issues and their own local experience, Central Advocacy Partners (CAP) developed a Survivors' Advocacy Project to support adults with learning disabilities who have or are currently experiencing such abuse to receive advocacy support. The project is funded for three years (from 2018) by The National Lottery Community Fund. The main focus of the work with survivors is to support them to remain safe, link them into existing services and support their access to such services as well as raising awareness of the key issues for adults with learning disabilities experiencing these forms of abuse.

The key outcomes for the project are as below:

- People (usually women) with learning disabilities/difficulties learn to recognise abuse, to end violence in their lives and to understand their rights.
- People (usually women) with learning disabilities/difficulties are more aware of the options and services available to them and are using those services to seek help.
- People (usually women) with learning disabilities/difficulties understand information, and are empowered to make decision in their lives.

The project is currently being evaluated by Dr Gillian MacIntyre and Dr Ailsa Stewart. The key questions being explored within the evaluation are:

- To what extent do referrers believe that adults with learning disabilities who are experiencing/ have experienced abuse have been supported by the survivors' project and in what way?
- What benefits do adults who have been referred to the service report?
- What have been the key challenges and opportunities for those delivering the service?
- What are the range of outcomes reported for those who have received support from the project at the end of the study period?

This **Executive Summary** covers the second year of the project **2019/2020** and is linked to the full second year report available at <http://centraladvocacypartners.org.uk/assets/images/EvaluationYear2Report2020.pdf>

Methods

A multi-method qualitative approach has been adopted. In year two of the study this has involved undertaking an additional review of relevant literature, face to face interviews with staff involved in the project both formal and informal (n=3 x 2), analysis of additional completed survey responses, one focus group undertaken with advocacy partners (n=4) who have been working with the project for some time, telephone interviews with new advocacy partners (n=3) detailed case reviews for each new advocacy partner (n=3) and telephone interviews with referrers to the project (n=2). It should be noted that data collection for the evaluation in Year 2 of the project was significantly impacted by Covid-19. Due to the lockdown, many interviews have had to be conducted by telephone and the number of survivors able to participate in interviews was reduced. We were able to conduct one focus group (as noted below) before the lockdown was implemented, however, plans for a second had to be suspended.

Evidence from the literature

Additional literature was reviewed to build upon the themes identified in the year 1 evaluation report and to explore issues emerging during year 2. This addendum to the literature review in the first year report is published as a separate document and is available on request and should be read in conjunction with the 1st year report of the evaluation.

Context/Implications of Covid-19

Currently in the UK, there are considerable restrictions on movement and socialisation as the result of a household lockdown due to the Covid-19 pandemic. For the Survivors Project, this has meant that the women are supported by telephone. Staff have also continued to represent their advocacy partners at formal meetings, including at online children's hearing meetings. This situation undoubtedly puts survivors at greater risk, not only of exposure to gender based violence but to greater social isolation, loneliness and exclusion.

For those in the midst of child protection proceedings there is concern about how survivors can meaningfully participate virtually. Others have expressed concerns about their lack of access to the technology needed to facilitate video calling and worry that their lack of experience in this area might be held against them in any assessment of their parenting. Staff have expressed concerns that an ongoing lack of face to face contact between mothers and their children will have a significant and detrimental impact on the women's mental health. There has been an alarming increase in the number of calls to domestic violence services and websites during the Covid-19 lockdown and the project has responded to concerns about this increase. In collaboration with other local agencies, the project has developed an accessible poster and leaflets to alert those with learning disabilities to the services and supports that are available to them during this time.

Evidence from data collection

The findings from across the data collection is presented under two key headings: the lived experience of the survivors and the issues for the project and for the staff who work there. The findings in year 2 reflect and build upon those identified in the year 1 evaluation.

Part 1: The Survivors

Who are the women?

During 2019-20, 18 referrals were received by the project, all were female. Nine of the referrals were from social work, six were from the third sector and three were self - referrals. Of those 18, four did not engage, four referrals were unable to be progressed (as the individual did not have or acknowledge a learning disability) and one was placed on a waiting list, leaving nine to be allocated. Of those nine, two were pregnant. We therefore interviewed one third (n=3) of this years referred and allocated cases, in addition to four existing survivors.

The profiles of all three new referrals interviewed were remarkably similar to those we interviewed during year one of the project. All had experienced domestic abuse at the hands of a male partner and all had multiple experiences of abuse often going back many years, all had experienced mental health problems; depression and anxiety were common. All three women had children and all had moved to a new home or area to escape their abusive relationship.

Nature of abuse

The abuse experienced by participants was pervasive in nature and had been present since the start of their relationships. The women described how their current or previous partners had controlled their behaviour which they found to be deskilling and disempowering, rendering them unable to make decisions and/or to become dependent on their abusers. The women also reported difficulties in recognising their partners' behaviour as abusive. Many felt they had been deliberately targeted by their abusers due to their learning disability, and

there was growing awareness of this among the women, particularly among focus group participants who had been working with the project for a longer period of time.

The sense of vulnerability led to the women reporting not being believed when reporting any abusive behaviours to authorities. There were also reports of being considered unreliable and/or being associated or blamed for the behaviours of the perpetrators.

Other issues

Parenting - All but one of the women we spoke to in Year 2 (n=7), in interviews and focus group) were parents. Two of the women were involved in complex child protection proceedings and were receiving support from the Survivor's project to traverse the system. An emerging theme around parenting for the survivors is the level of responsibility they are given to keep their children safe, often from very experienced predators – with very limited support. Despite this, however, if the women failed, they appear to be viewed very negatively by professionals. None of the women we spoke to were able to provide examples of how they had been supported to parent by other agencies.

Isolation/loneliness – Powerful testimonies from the women provided evidence that a lack of friendships and social networks engendered significant loneliness and isolation, reflecting research that suggests that that loneliness and isolation places women at a heightened risk of gender based violence. Fear of beginning new relationships (both intimate and friendships) were noted due to previous experiences of abuse. Participants, however, reported that the project staff had given them a “lifeline” in terms of social support and developing trust and was described as invaluable.

Bullying and harassment - There seemed to be three main factors at play here. Firstly women were targeted as they were seen as vulnerable due to their learning disability. Secondly, because they were often housed in temporary or homeless accommodation in less desirable neighbourhoods and experienced a range of issues including drug misuse and mental health problems. Finally, women found themselves targets for abuse because they were deemed “guilty by association” as a result of something their partner or previous partner had done.

Use of social media - On the one hand social media was a useful tool to enable the women to remain connected to extended family and friends. On the other, it posed an element of risk for the women and was used by abusive partners and ex-partners to track the women down or to post abusive content about them. Advocacy workers' role here, therefore, is to educate and support the women to learn about internet safety, empowering them to make informed choices in this respect.

Communication issues - Participants reported needing help to translate information in a range of different settings and project staff have played a vital role in helping women to read and write letters, accompanying them to various appointments in a range of settings to provide support and to relay often complex information in a more accessible format. Survivors noted being viewed negatively by professionals as they were perceived as being unwilling to engage or listen as a result of barriers to communication. These barriers are common for people with learning disabilities, but may be exacerbated for those who have

experienced trauma which makes it difficult for them to hear anything other than negative feedback. An important function for advocacy staff has therefore been to debrief after meetings, reinforcing positive messages as well as areas for improvement.

Outcomes for survivors

Positive outcomes were noted for survivors across the data collection. In particular these related to making informed choices, gaining confidence, increased understanding and awareness of healthy and unhealthy relationships and a greater understanding of how to keep safe. More detail on these is noted below. Participants however noted some concern that survivors would find it difficult to maintain positive outcomes without ongoing support from the project and/or alternative services. This made it difficult for staff to close cases due to concern that any improvements made would be eroded without support.

Communication – Whilst not a homogenous group, the increased ability of survivors to communicate their wishes and needs effectively with other agencies, whether that be on their own or with the support of an advocate or a combination of both was noted. Unsurprisingly those who had worked for longer with the project were more confident in their communication than those in the early stages.

Understanding and engagement - Understanding and engagement were linked as participants felt that improved understanding increased engagement. The complex systems that survivors have to navigate can be challenging to understand, particularly the implications of actions and/or decisions. The advocates role in explaining processes and decisions was highly valued; the role that the advocates played in debriefing and explaining decisions was also noted as crucial in promoting understanding and engagement. Survivors sometimes indicated an unwillingness to participate in formal proceedings or appointments due to a view that they were not likely to be heard or believed. The involvement of the advocates ameliorated this concern and improved participation.

Increased understanding of abuse – Increased understanding of abuse was evident from the data collection. This focused on a number of key areas including; self-protection and security, awareness of impact of abuse on self and children, increased ability to make choices based on an assessment of risk and an ability to provide advice to others. The survivors were able to provide evidence of increased understanding from their own real life experiences and in a response to a case study as part of the focus group discussion. Areas identified identifying inappropriate behaviour and taking action and providing advice on keeping safe to other women.

Choice - The data indicates that survivors were more able to make informed choices about relationships, with support. This included checking on an individual's background before entering into a relationship, i.e. any criminal history or history of abuse, being able to identify abusive behaviours and knowing where to seek relevant support, with the help of their advocate.

Well-being – The positive impact on the survivors of being involved in the project was wide-ranging. Primarily, survivors reported that they felt understood and heard by others. The

relationship with the advocate provided the foundation of the survivor's well-being and their reported positive outcomes. The advocates reflected their experience and saw the value in what they had to bring to discussions, which led to improved confidence, self-esteem and ability to function in the survivors' daily life.

Part two: issues for the project

Experience of working with the project - The data suggests that the experience of working with the Survivors project has been overwhelmingly positive. There has been a particular appreciation of the expertise of project staff, the time they have available to spend with survivors and the level of flexibility that they can offer alongside the independent nature of the project. Referrers in particular valued; the easy referral process, flexible criteria (i.e. no requirement for formal diagnosis of learning disability), the expertise of project staff (both learning disability and gender based violence), flexible model of advocacy, focus on relationships, project values of inclusion and equality. For survivors the positives include; non-judgemental relationship based approach, the time and expertise offered by advocates, trust and support offered and the breaking down of social isolation.

Work carried out by the project – The range of tasks carried out by the advocacy workers is significant and often focused on the context within which the survivors are living. Dealing with contextual issues such as debt and housing freed survivors up to deal with more challenging issues such as identifying abuse, self-protection and safety issues. Undertaking risk assessment and management via safety planning in collaboration with the women throughout the year has focused on strengths, risk and safety that directly addressed the issues survivors are facing. Multi-agency working with the survivors has also meant that the needs of those survivors with learning disabilities have been highlighted encouraging and promoting inclusive practice.

Model of advocacy and the role of the advocate – An advocacy plus model was noted in the first year report as most accurately reflecting the range of tasks undertaken within the framework of the Survivors Project, this remains the case.

There are two key elements to this model; one to one advocacy, and institutional advocacy. Staff within the project require to balance undertaking the contextual tasks noted above and facilitating education around GBV and abuse whilst maintaining the parameters of the advocacy role. Staff acknowledge they are trying to balance the tension between the parameters of their role as it has evolved within the project to reflect the needs of survivors and a broader definition of advocacy.

Institutional advocacy is an important concept to consider within the work of the project. A view upheld by referrers to the survivors' project who considered that the work undertaken by the advocates significantly raised the profile of women with learning disabilities experiences of domestic violence and the implications of this for services. They suggested that this helped other projects appreciate issues around communication, social isolation and lack of self-esteem and how this impacted on the survivor's ability to engage effectively with services and promoted equality whilst challenging discrimination

Supervision and support for staff - Staff were keen to acknowledge the regular supervision and support within the project as being helpful in ensuring workloads were managed and that any issues regarding the potential for cases to be closed could be considered. Given the complexity of the role and the added pressures noted, it may, be appropriate to consider outside support for staff that focuses on counselling and the emotional aspect of the role.

The advocates work almost entirely on their own, although they have regular contact with each other and other staff within the broader CAP project. Creation of more private office space this year has meant the opportunity to work more within the main office rather than in survivors' homes and this is valued by staff. This has however, been derailed due to Covid-19 and therefore the isolation of advocates and other workers remains acute.

Future developments – We asked all participants to consider the future development of the project and consistent themes emerged across the data collection. These focused on; additional advocates to support the already stretched staff, the promotion of peer and self-advocacy via group work and institutional advocacy via strategic work to promote the needs of survivors with learning disabilities and to provide a resource for other organisations to benefit from the expertise within the survivors project.

Conclusion

This has been a very challenging but successful and innovative year for the project, particularly responding to the demands of Covid-19 restrictions. Clear outcomes for survivors have been noted and the project is valued by those who use it and who refer survivors to it. A continuing need for the project is evident. The combination of knowledge and skills as it relates to domestic violence and learning disability as well as its independence from statutory services was considered to be unique. The needs of the survivors remain, however, complex and long term and a significant issue for the project moving forward is how they sustain positive outcomes for existing survivors whilst working with new cases.

It is evident that the model of advocacy employed within the project is still evolving and that it is a fluid and non-traditional approach demanding a great deal from the advocates, but clearly delivering a valued service to the survivors. Future developments for the project are clearly articulated within the data collected and many participants were concerned to ensure that the project was maintained and could be provided with the opportunity to grow. Staff are currently seeking additional funding opportunities to ensure the project continues at the same time as considering how it might develop and provide ongoing support to this often marginalised group of survivors.

Given the fluid and ever changing nature of society due to the Covid-19 restrictions, plans for the final year of the evaluation will be flexible to ensure maximum opportunities for data collection.