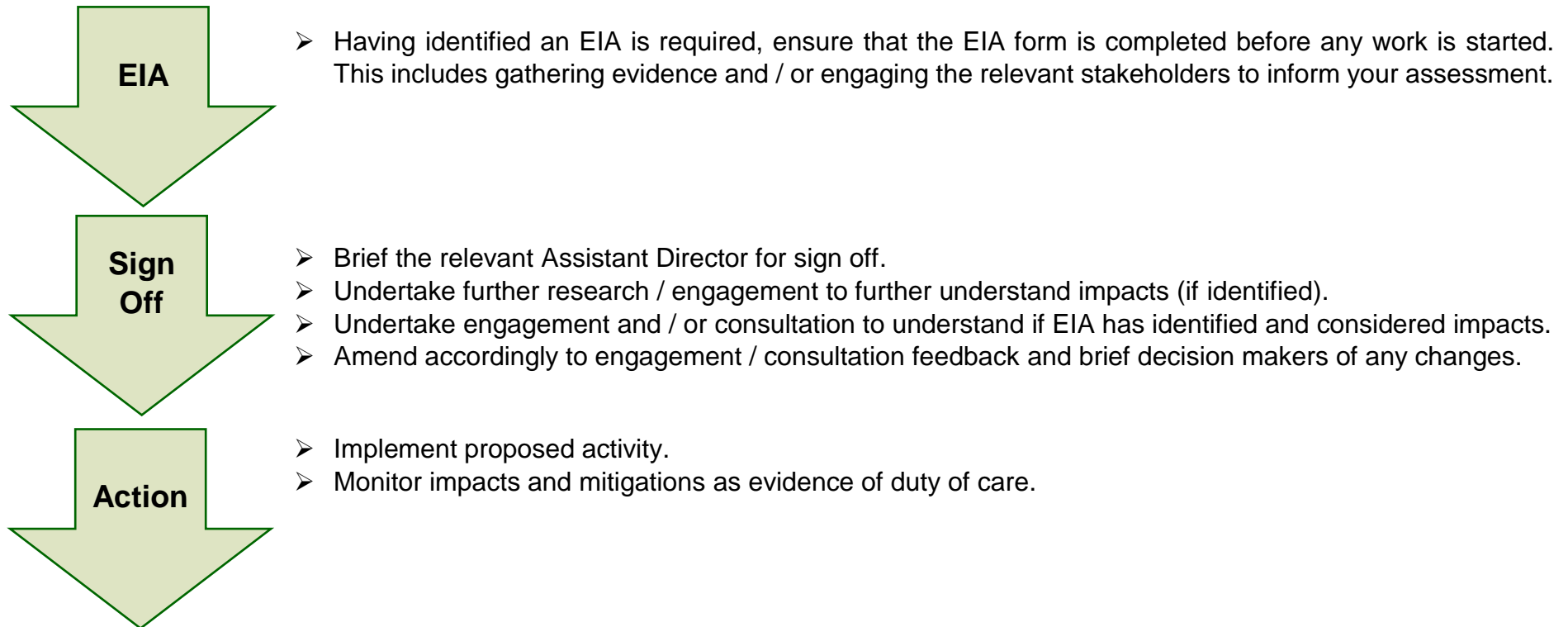


Warwickshire County Council (WCC) Equality Impact Assessment (EIA) Form

The purpose of an EIA is to ensure WCC is as inclusive as possible, both as a service deliverer and as an employer. It also demonstrates our compliance with Public Sector Equality Duty (PSED).

This document is a planning tool, designed to help you improve programmes of work by considering the implications for different groups of people. A guidance document is available [here](#).

Please note that, once approved, this document will be made public, unless you have indicated that it contains sensitive information. Please ensure that the form is clear and easy to understand. If you would like any support or advice on completing this document, please contact the Equality, Diversity and Inclusion (EDI) team on 01926 412370 or via equalities@warwickshire.gov.uk, or if it's relating to health inequalities please contact Ruby Dillon via rubydillon@warwickshire.gov.uk.



Section One: Essential Information

Service / policy / strategy / practice / plan being assessed	Domestic Abuse Specialist Counselling and Therapy Service
Business Unit / Service Area	Vulnerable People, Strategic Commissioning, People Group
Is this a new or existing service / policy / strategy / practice / plan?	New Service
EIA Authors N.B. It is best practice to have more than one person complete the EIA to bring different perspectives to the table.	<ul style="list-style-type: none"> • Emma Guest – Domestic Abuse Commissioner • Hannah Strick – Domestic Abuse Commissioning Support Officer • Rachel Jackson – Lead Commissioner Keira Rounsley, EDI Practitioner
Do any other Business Units / Service Areas need to be included?	Consulted with Childrens Services, Adult and Childrens Mental Health Commissioners and Public Health Lead. Externally, the Service Specification will be reviewed by colleagues from the CCG, District and Borough colleagues, the Police and OPCC.
Does this EIA contain personal and / or sensitive information?	No

Are any of the outcomes from this assessment likely to result in complaints from existing services users, members of the public and / or employees?

No

1. Please explain the background to your proposed activity and the reasons for it.

Domestic Abuse is a catalyst for Mental Health needs and, as part of the Domestic Abuse Joint Strategic Needs Assessment (DAJSNA), Warwickshire identified that the counselling and therapy provision for Domestic Abuse victim-survivors needs improvement.

This has been reinforced by the Domestic Abuse Act 2021. The Act introduces a new statutory duty for Tier 1 local authorities to provide DA victims with specialist support in safe / relevant accommodation. This explicitly includes the provision of counselling and therapy.

2. Please outline your proposed activity including a summary of the main actions.

A new Domestic Abuse Specialist Counselling and Therapy Service is being commissioned to support adult and child victim-survivors of domestic abuse that are engaged with the Warwickshire Domestic Violence and Abuse Service and are either temporarily or permanently resident of Warwickshire. Under the new Domestic Abuse Act (2021), children are victim-survivors in their own right and so this service has been designed for victim-survivors of all ages.

The commissioning of a new Domestic Abuse Specialist Counselling and Therapy Service includes the following activities:

- Completion of DVA Joint Strategic Needs Assessment and Safe Accommodation Needs Assessment
- Development of a new service specification
- Review of current and projected future demand of this service
- Review of projected future costs based on demand
- Review of national best practice and guidance
- Market testing

- Tender process – going out to tender for a new service, reviewing and evaluating submissions and awarding the final contract
- Mobilisation of the new service

3. Who is this going to impact and how?

Customers	Members of the Public	Employees	Job Applicants
<p>This will impact current victim-survivors of domestic abuse who are supported by our WCC commissioned Warwickshire Domestic Violence and Abuse (WDVA) Service. It will enhance the service offer to them, to address counselling and therapy needs which are prevalent. It will impact the children of victim-survivors who are supported by our service as they will be offered a counselling and therapy offer in their own right.</p>	<p>In future we may seek to expand referral routes to the service to accept other victim-survivors of domestic abuse (that are not currently in receipt of support from our Warwickshire Domestic Violence and Abuse Service).</p> <p>By promoting the fact that our counselling and therapy offer can be accessed via our WDVA Service, there may be an increase in referrals to the WDVA Service. This might result in those that would not have otherwise seeking support in relation to DA, coming forwards to accessing support.</p>	<p>None. There is not an existing service.</p>	<p>None.</p>

Other, please specify:

- None

Section Two: Evidence

Please include any evidence or relevant information that has influenced the decisions contained in this EIA. This could include demographic profiles; audits; research; health needs assessments; national guidance or legislative requirements and how this relates to the protected characteristic groups and additional groups outlined in Section Four.

A – Quantitative Evidence

This is evidence which is numerical and should include the number people who use the service and the number of people from the protected characteristic groups who might be affected by changes to the service.

There is currently no WCC or partnership commissioned DA counselling and therapy provision in the county. The current offer is delivered by the charitable sector funded by one-off grant funding. WCC's intention to commission a new service will ensure that those victim-survivors supported by the WDVA Service are able to access required counselling and therapy service in the future and will address the current shortfall in provision and postcode lottery (there are differences in provision across the county). What we know in terms of need and demand is outlined below:

Warwickshire Domestic Violence and Abuse Needs Assessment 2021

Drawing off national intelligence, the DAJSNA highlighted the following considerations and gaps in relation to the mental health and wellbeing of adults, children, and young people¹:

- It is estimated that more women take their own lives due to DA than those who are murdered by their abuser; whilst two women a week are killed by an abuser, 30 women everyday attempt suicide as a result of experiencing DVA, and three women a week take their own lives².

¹ <https://www.warwickshire.gov.uk/joint-strategic-needs-assessments-1/thematic-needs-assessments-previous-annual-updates/1>

² SafeLives, (2016), A Cry for Health: Why we must invest in domestic abuse services in hospitals.

- Children growing up with DA have a higher rate of mental health difficulties compared to those who don't^{3,4}.
- In the *SafeLives* National Dataset on children and young people accessing DVA services, 21% experienced anxiety or depression and 33% felt unhappy⁵.
- Of women with severe mental illnesses, 15-22% experienced recent DVA⁶.
- Some groups of people, including disabled people and those identifying as LGBT, are more likely to have mental health needs when accessing DA services⁷.
- Of women with severe mental illnesses, 15-22% experienced recent DA⁸.
- Some groups of people, including disabled people and those identifying as LGBT, are more likely to have mental health needs when accessing DA services⁹.
- Despite the high co-occurrence of DA and mental health problems, DA is often undetected in mental health services, with just 10-30% of DVA cases identified¹⁰.
- One in seven (14.2%) children and young people under the age of 18 are exposed to domestic abuse which places them at an increased risk of trauma, direct abuse, serious injury or death.¹¹

³ Meltzer, Doos, Vostanis, Ford, & Goodman, (2009), The mental health of children who witness domestic violence. *Child & Family Social Work*, 14, 491-501.

⁴ Fantuzzo, & Mohr, (1999), Prevalence and Effects of Child Exposure to Domestic Violence. *The Future of Children*, 9 (3), 21-32.

⁵ SafeLives, (2018), Children's Insights England and Wales dataset 2015-18: Specialist children's domestic abuse services.

⁶ Khalifeh, Oram, Osborn, Howard, & Johnson, (2016). Recent physical and sexual violence against adults with severe mental illness: a systematic review and meta-analysis. *International review of psychiatry*, 28(5).

⁷ SafeLives, 2019, <https://safelives.org.uk/sites/default/files/resources/Spotlight%207%20-%20Mental%20health%20and%20domestic%20abuse.pdf>

⁸ Khalifeh, Oram, Osborn, Howard, & Johnson, (2016). Recent physical and sexual violence against adults with severe mental illness: a systematic review and meta-analysis. *International review of psychiatry*, 28(5).

⁹ SafeLives, 2019, <https://safelives.org.uk/sites/default/files/resources/Spotlight%207%20-%20Mental%20health%20and%20domestic%20abuse.pdf>

¹⁰ Trevillion, Corker, Capron, & Oram, (2016), Improving mental health service responses to domestic violence and abuse. *International Review of Psychiatry*, 28 (5): 423-432.

¹¹ Osofsky, 1999, 'The Impact of Violence on Children', *The Future of Children – Domestic Violence and Children*, Vol. 9,

- Exposure to DA can negatively impact children’s mental health, physical health and educational attainment¹².
- Young People are at risk of domestic abuse from a partner. The Office of National Statistics reported that 6.6% of men and 12.6% of women aged 16 to 19 experienced DA in the past year¹³.
- A survey of 13- to 17-year olds found that 25% of girls and 18% of boys had experienced physical violence from an intimate partner¹⁴.

Drawing off local intelligence, the DAJSNA highlighted that in 2017-2018, 42% of those supported by the Warwickshire Domestic Violence and Abuse (WDVA) Service had a mental health issue, of these, 17% had attempted to take their own lives.

The recommendations which emerged from the DAJSNA suggested that further development was required to:

- Identify and respond to the support needs of children and young people who have been a victim of, or experienced domestic abuse by living in a household where it is taking place.
- Provide specialised, trauma informed therapy for victim-survivors of domestic abuse of all ages.

Warwickshire’s Safe Accommodation Needs Assessment 2021

- A high proportion of victims are aged 19-44, however numbers are increasing in older age categories (45yrs+).
- Victims are predominantly female; however, the number of male victims is increasing year on year. Therefore, other groups need consideration (e.g., accommodation suitable for different gender identities).
- Increasing number of victims with mental health needs across the district and boroughs.

¹² Szilassy et al, 2017; Stanley, 2011

¹³ Office for National Statistics, 2019, www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/domesticabusevictimcharacteristicsenglandandwales/yearendingmarch2019

¹⁴ Barter, C, McCarry, M, Berridge, D and Evans K (2009) Partner exploitation and violence in teenage intimate relationships, NSPCC [Online] Available at: <https://www.nspcc.org.uk/globalassets/documents/research-reports/partner-exploitation-violence-teenage-intimate-relationships-report.pdf>

B – Qualitative Evidence

This is data which describes the effect or impact of a change on a group of people, e.g. some information provided as part of performance reporting.

Warwickshire's Domestic Violence and Abuse Service will be the only referrer (at present) into the service. A victim-survivor will need to be supported by the WDVA Service (Refuge) in order to be eligible for the Counselling and Therapy Service. As such, this information below highlights those that would be impacted by the provision of the new service. This service will positively impact those engaging with the WDVA service as it will ensure their counselling and therapy needs are met.

Refuge IDVA Annual Performance Report (2020-2021):

Overall number of people supported by the IDVA service: 1,662

Clients given short term support or local helpline support: 219 (13.8% of all those engaging with the IDVA service)

Children from clients given short term support: 271 (16.3% of all those engaging with the IDVA service)

Women given longer term support: 456 (24.4% of all those engaging with the IDVA service)

Children given longer term support: 705 (42.4% of all those engaging with the IDVA service)

Men given longer term support: 11 (0.6% of all those engaging with the IDVA service)

Long term support disability information: Mental Health

Women requiring support: 94 (20.7% of all women engaging with the IDVA service)

Children requiring support: **Unknown as it is their parent who's needs are assessed**

Men requiring support: 4 (36.4% of all men engaging with the IDVA service)

Complex Needs: Suicidal

Women requiring support: 75 (16.4% of all women engaging with the IDVA service)

Children requiring support: **Unknown as it is their parent who's needs are assessed**

Men requiring support: 2 (18.9% of all men engaging with the IDVA service)

Health Outcomes from Case Closure

Number of Clients who accessed specialist provider in relation to mental health: 56 (3.7% of all those engaging with the IDVA service)

Number of Clients who accessed support from specialist domestic violence services other than a refuge: 37 (2.2% of all those engaging with the IDVA service)

Number of Clients who attended a support group run by Refuge to discuss and get support around the psychological and emotional impact of domestic violence: 52 (3.1% of all those engaging with the IDVA service)

Refuge Accommodation Annual Performance Report (2020-2021):

Overall number of women and their children accommodation in refuge accommodation: 178

Women given longer term support: 79

Children given longer term support: 99

Men given longer term support: 0

Long term support disability information: Mental Health

Women requiring support: 23 (29.1% of all women in refuge accommodation)

Children requiring support: **Unknown as it is their parent who's needs are assessed**

Men requiring support: Unknown due to no male accommodation

Complex Needs: Suicidal

Women requiring support: 6 (7.6% of all women in refuge accommodation)

Children requiring support: **Unknown as it is their parent who's needs are assessed**

Men requiring support: Unknown due to no male accommodation

Health Outcomes from Case Closure

Number of women who accessed specialist provider in relation to mental health: 10 (12.7% of all women in refuge accommodation)

Number of women who accessed support from specialist domestic violence services other than a refuge: 8 (10% of all women in refuge accommodation)

Number of women who attended a support group run by Refuge to discuss and get support around the psychological and emotional impact of domestic violence: 4 (5% of all women in refuge accommodation)

Q1 2021 Refuge's Quantitative Report:

The impact of abuse on the women's mental health is extensive. 58.3% of the women were left feeling nervous as a result of the psychological abuse. 33.3% women reported having problems sleeping and 66.7% suffered with low self-esteem.

The data continues to support the need to ensure that domestic abuse specific mental health and counselling services are made accessible to victims of domestic violence and abuse.

Q2 2021 Refuge's Quantitative Report:

The impact of abuse on the women's mental health is extensive. 28.6% of the women were left feeling nervous as a result of the psychological abuse. 57.1% women reported having problems sleeping and 71.4% suffered with low self-esteem.

The data continues to support the need to ensure that domestic abuse specific mental health and counselling services are made accessible to victims of domestic violence and abuse.

Section Three: Engagement

Engagement with individuals or organisations affected by the proposed activity must take place. For further advice and support with engagement and consultations, click [here](#).

<p>Has the proposed activity been subject to engagement or consultation with those it's going to impact, taking into account their protected characteristics and socio-economic status?</p>	<p>Yes</p>
<p>If YES, please state who with.</p>	<p>Engagement was undertaken as part of the DVA needs assessment, members of the public, victims-survivors, frontline professionals, senior stakeholder and focus groups all identified the provision of specialist DA counselling and therapy as a high need and an existing gap, for both adults and children. Case studies were collated for the safe accommodation needs assessment.</p>
<p>If NO engagement has been conducted, please state why.</p>	

How was the engagement carried out?	Yes / No	What were the results from the engagement? Please list...
Focus Groups	Yes	<ul style="list-style-type: none"> DA specialist counselling and therapy offer was identified as a high priority for provision by residents, victim-survivors/service users, frontline professionals, senior stakeholders. There was particular need for CYP who are impacted by domestic abuse, to have a counselling and therapy offer. The feedback also included that the offer needed to be trauma informed and responsive to the particular dynamics and impact of domestic abuse. As there is no commissioned or formal offer, there is a postcode lottery in being able to access counselling and therapy within Warwickshire and long waiting times.
Surveys	Yes	
User Panels	No	
Public Event	No	
Displays / Exhibitions	No	
Other (please specify)	No	
Has the proposed activity changed as a result of the engagement?	Yes	The results of the stakeholder engagement formed the basis of the service. Key professionals were engaged with when drafting the service in order to ensure the themes for the DAJSNA have been picked up.
Have the results of the engagement been fed back to the consultees?	Yes	<p>Senior stakeholders have been consulted and the DAJSNA recommendations were shared. Stakeholders have also sat on the Safe Accommodation Working Group and have helped shape the service which has been developed.</p> <p>For the public, the engagement has not yet been fed back. Consideration is being made for creating a “you said, we did” once we have completed our implementation of the feedback.</p>
Is further engagement or consultation recommended or planned?		The contract will include performance monitoring; satisfaction has been embedded into the performance monitoring of the service. This will include satisfaction surveys, compliments and complaints monitoring.

What process have you got in place to review and evaluate?	Regular reviews of the service including performance monitoring will be undertaken as part of the contract monitoring.
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Section Four: Assessing the Impact

Protected Characteristics and other groups that experience greater inequalities

What will the impact of implementing this proposal be on people who share characteristics protected by the Equality Act 2010 or are likely to be affected by the proposed activity? This section also allows you to consider other impacts, e.g. health inequalities such as deprivation, socio-economic status, vulnerable groups such as armed forces, carers, homelessness, people leaving prison, young people leaving care etc.

On the basis of evidence, has the potential impact of the proposed activity been judged to be positive (+), neutral (=), negative (-), or positive and negative (+&-), for each of the protected characteristic groups below and in what way?

N.B In our Guidance to EIAs we have provided you with potential questions to ask yourself when considering the impact of your proposed activity. Think about what actions you might take to mitigate / remove the negative impacts and maximize on the positive ones. This will form part of your action plan at Section Six.

	Impact type (+) (=) (-) or (+&-)	Nature of impact
		There is currently no DA specialist counselling and therapy commissioned offer in Warwickshire; this service would have a positive impact on victim-survivors of domestic abuse as they would be able to access this service across the county. The WDVA Service will be the only referrer (currently) into this service. As such, the new service will be dependent on the accessibility into the WDVA Service too.

As part of the WDVA Service's new contract, (which went 'live' on 1st October 2021,) WCC integrated the need for the WDVA Service to improve on their ability to:

- *Be responsive to meet the varying needs of victims-survivors as demonstrated in the needs assessment, with a particular focus on demonstrating how need will be met for:*
 - *BAME victim-survivors, which includes a response to Harmful Practices, Honour Based Violence, Female Genital Mutilation and Faith Based Violence.*
 - *Elderly victim-survivors*
 - *Young Adult victim-survivors*
 - *Gypsy-Traveller victim-survivors*
 - *Victim-survivors with a physical and / or learning disability*
 - *LGBTQ victim-survivors*
 - *Male victim-survivors*

WCC monitors the demographics of the county and comparing Warwickshire's referral rates from these demographics, it is understood that they are underrepresented in the WDVA Service, at present. With the work going on to improve these referrals into the WDVA Service, this will impact the DA specialist counselling and therapy service positively as it will be more accessible for these victim-survivors to receive DA specialist counselling and therapy.

Age	+	<ul style="list-style-type: none"> • All adults and ‘connected’ children in receipt of support from the WDVA Service will be able to access the service. • The specification includes a requirement to have age-appropriate interventions. • The specification also requires the provider to be responsive to the particular needs of younger adults (16-21yrs old) and older adults (65+yrs old) in the delivery of the service. • Within the quality response questions, potential providers will be asked to demonstrate how they will ensure the service is responsive to different age groups (i.e. responsive to the preferences of individuals ensuring that a virtual offer does not exclude those that might be less confident when using technology). • The specification requires the provider to be able to deliver a face-to-face offer in all 5 district and boroughs. • The specification also requires the provider to operate their hours flexibly to ensure those that are attending school, working or not as confident leaving home in the evening are able to access the service (i.e. evenings and weekends but also during office hours.)
Disability Consider: <ul style="list-style-type: none"> • Physical disabilities • Sensory impairments • Neurodiverse conditions (e.g. dyslexia) • Mental health conditions (e.g. depression) • Medical conditions (e.g. diabetes) 	+	<ul style="list-style-type: none"> • The creation of the service will (positively) directly impact those with mental health conditions such as Depression, Anxiety and PTSD by providing around 10 sessions of counselling and therapy to support the processing of domestic abuse related trauma. • The specification requires the Provider to assess the needs of the victim-survivor upon referral into the service and also requires the provider to be responsive to the particular needs of victim-survivors referred, and to explain clearly to victim-survivors what counselling and therapy options are available. This allows for a victim-led approach allowing them to share how they believe their needs be best met. • Part of the eligibility criteria for this service requires some of the victim-survivor’s to be in “safe and relevant accommodation”. WCC and Tier 2 LA’s are planning on increasing the units which are “safe and relevant” and will deliver this through a dispersed model; a certain amount of these units will be

		<p>required to be DDA compliant which will see an increase in those with physical disabilities, neurodiverse conditions, sensory conditions and mental health conditions being able to access this service over the next few years.</p> <ul style="list-style-type: none"> • The WDVA Service has increased capacity for community based support. As the only referrer into the Counselling and Therapy Service, this could potentially increase referrals, specifically for people with a disability, recognising the specific needs and barriers of victim-survivors and tailoring support accordingly. • Face-to-face locations would be expected to be DDA compliant. • The new Counselling and Therapy Service is required to develop and implement specific resources, designed to address the access and communication preferences. This will support those with Neurodiverse Conditions. • The Service will assign staff who have been specifically trained in supporting victims who are: male, from a minoritised community, older adults, young adults, LGBTQIA+ and / or who have a disability. • The specification requires a Trauma Informed approach; this will specifically help those with mental health conditions.
Gender Reassignment	+	<ul style="list-style-type: none"> • The specification requires the Provider develop a tailored approach of counselling and therapy to meet the needs of victim-survivors and be responsive to the particular needs of victims, this includes those who have undertaken gender reassignment, in the delivery of the service. • The specification requires the Counselling and Therapy Service to assign staff who have been specifically trained in supporting victims who are from the LGBTQIA+ Community, more specifically those who are transgender. • Though only 1 transgender individual accessed the WDVA Service in 2020-21, the WDVA Service are working to increase engagement with those from the LGBTQIA+ community which should reflect an increase in referrals to the Counselling and Therapy Service. • The Provider will be required to fill out the equalities monitoring information; this includes gender reassignment. This will be included as an appendix to the specifications.

Marriage and Civil Partnership	+	<ul style="list-style-type: none"> WDVA Service year-end reports for 2020-21 showed that individuals tend to seek support once they have left the partner who had been abusive. <table border="0" style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> IDVA 17.2% (106) current partner 82.8% (512) ex-partner </td> <td style="width: 50%; vertical-align: top;"> Refuge 17.3% (14) current partner 82.7% (67) ex-partner </td> </tr> </table> <p>This trend is likely to be reflected in the Counselling and Therapy Service as the WDVA Service will be the only referrer (currently).</p> <ul style="list-style-type: none"> All victim-survivors, who fit the eligibility criteria, will be able to access this service; the Providers policies and procedures will not discriminate against civil partnerships or marriage and victim-survivors will be treated equally, regardless of their relationship status. 	IDVA 17.2% (106) current partner 82.8% (512) ex-partner	Refuge 17.3% (14) current partner 82.7% (67) ex-partner
IDVA 17.2% (106) current partner 82.8% (512) ex-partner	Refuge 17.3% (14) current partner 82.7% (67) ex-partner			
Pregnancy and Maternity	+	<ul style="list-style-type: none"> There is evidence that pregnancy can be a trigger for domestic abuse worsening significantly therefore, pregnant women are likely to be more at risk. 40% (40/99) of all victim-survivors in Refuge accommodation in 2020-21 were pregnant or pregnant and had another child aged 1 or less. 27% (361/1314) of all victim-survivors who engaged with an IDVA from the WDVA Service in 2020-21 were pregnant or pregnant and had another child aged 1 or less. The Provider will be expected to ensure there are locations in all 5 district and boroughs to provide counselling and therapy to victim-survivors. It is expected that some of these locations are children's centres allowing for accessibility for breastfeeding mothers and pregnant women. The specification requires the provider develop a tailored approach of counselling and therapy to meet the needs of victim-survivors and be responsive to the particular needs of victims, this includes pregnant women. 		
Race Including: <ul style="list-style-type: none"> Colour Nationality Citizenship Ethnic or national origins 	+	<ul style="list-style-type: none"> Within the quality response questions, potential providers will be asked to demonstrate how they will ensure the service is responsive to differing needs. The specification states that Provider will ensure the service is accessible and meets the specific and varied needs of Victim-survivors from ethnic minorities or minoritised communities. This will ensure that the victim-survivors needs are met. 		

		<ul style="list-style-type: none"> • The specification also requires the Provider to specifically consider the needs for victim-survivors from ethnic minorities and minoritised communities by providing a service that is culturally sensitive to communities and, to consider any language or other specific needs of ethnic minorities and minoritised communities by providing information in a range of different formats and languages, offering interpreting and translation services where required. • The WDVA Service is working closely with ethnic minorities and minoritised communities to improve referral numbers into the service. • The specification asks that the Provider is able to demonstrate that they are able to meet cultural differences and that staff are trained to be aware of and responsive to cultural differences. • The specification includes victim-survivors familial abuse, so-called Honour Based Violence, Forced Marriage, Female Genital Mutilation and / or Faith Based Abuse within the eligibility criteria. The Provider will also support victims-survivors that have No Recourse to Public Funds.
Religion or Belief	+	<ul style="list-style-type: none"> • The specification asks that the Provider is able to demonstrate that they are able to meet cultural differences and that staff are trained to be aware of and responsive to cultural differences. This will ensure that the Service is sensitive to different religious requirements. • The specification includes victim-survivors familial abuse, so-called Honour Based Violence, Forced Marriage, Female Genital Mutilation and / or Faith Based Abuse within the eligibility criteria. The Provider will also support victims-survivors that have No Recourse to Public Funds. • The specification also requires the provider to operate their hours flexibly to meet to ensure those that are unable to attend at certain times or on certain days due to partaking in religious days or religious holidays are still able to access the service (i.e. evenings and weekends but also during office hours.) • The Provider will be required to fill out the equalities monitoring information; this includes religion. This will be included as an appendix to the specifications.
Sex	+	<ul style="list-style-type: none"> • Whilst the Service will be accessible to any victim-survivor regardless of their sex, in Warwickshire, over 98% of those accessing support for Domestic Abuse Services (WDVA Service) are women. We do know that Domestic Abuse is a

		<p>gendered crime, and therefore it is expected that more women will both be a victim of Domestic Abuse and will require the specialist counselling and therapy provision. That said, our Warwickshire Domestic Abuse Joint Strategic Needs Assessment identified that there is likely to be a much greater number of male victims of domestic abuse in Warwickshire, than are currently accessing the WDVA Service. The new WDVA service has been set a target of increasing male referrals through their outreach work. The new counselling and therapy service will be dependent on this work to ensure that male victims that would benefit from therapy, are able to access the service. The Service will assist the Commissioner in highlighting and challenging the stereotypes of victim-survivors in Warwickshire.</p> <ul style="list-style-type: none"> • The specification also requires the provider to operate their hours flexibly to meet to ensure those that are attending school, working or not as confident leaving home in the evening are able to access the service (i.e. evenings and weekends but also during office hours.) • The Provider will be required to fill out the equalities monitoring information; this includes sex. This will be included as an appendix to the specifications. • The specification asks that the Provider is able to demonstrate that they are able to meet the needs of male victim-survivors and female victim-survivors and that staff are trained to be aware of and responsive to these differences. The Service will assign staff who have been specifically trained in supporting victims who are: male, from a minoritised community, older adults, young adults, LGBTQIA+ and / or who have a disability. • It will be expected that the Provider will ensure their attitudes, beliefs and values will reflect those of Warwickshire County Council.
Sexual Orientation	+	<ul style="list-style-type: none"> • The specification asks that the Provider is able to demonstrate that they are able to meet the needs of LGBTQ+ victim-survivors and that staff are trained to be aware of and responsive to these differences. The Service will assign staff who have been specifically trained in supporting victims who are: male, from a minoritised community, older adults, young adults, LGBTQ+ and / or who have a disability. The provider will have access to the Warwickshire Domestic Abuse Joint Strategic Needs Assessment which outlines some of the specific

		<p>challenges and needs that individuals who are LGBTQ+ can face. This includes perpetrators threatening to “out” a victim to family / friends, so called “honor-based” violence and abuse that can be experienced as a result of sexual orientation, a perception that domestic abuse services are for “heterosexual women with children”¹⁵.</p> <ul style="list-style-type: none"> • The Provider will be required to fill out the equalities monitoring information; this includes sexual orientation. This will be included as an appendix to the specifications. • The specification asks that the Provider is able to demonstrate that they are able to meet cultural differences and that staff are trained to be aware of and responsive to different cultures.
<p>Vulnerable People:</p> <ul style="list-style-type: none"> • Armed Forces (WCC signed the Armed Forces Covenant in June 2012) • Carers • Homelessness • People leaving Prison • People leaving Care 	+	<ul style="list-style-type: none"> • The Service will be accessible to any victim-survivor who is supported by the WDVA Service, if they are a Veteran, Homeless, Carer or someone leaving Care or Prison. • The Warwickshire Domestic Abuse Joint Strategic Needs Assessment identified: <ul style="list-style-type: none"> ○ That a leading cause of homelessness for women is domestic abuse, furthermore that the threat of homelessness can act as a barrier for victims accessing support. ○ Women in prison are more likely than the general population to be a victim of domestic abuse. • The Service will become a member of the domestic abuse partnership structures in Warwickshire and will assist the Commissioner in highlighting and challenging the stereotypes of victim-survivors in Warwickshire.
<p>Health Inequalities (HI) Many issues can have an impact on health: is it an area of deprivation, does every</p>	+	<ul style="list-style-type: none"> • We are aware that at present, there is a ‘postcode lottery’ when it comes to domestic abuse counselling and therapy services in Warwickshire due in part to current organisations being grant funded instead of formally commissioned.

¹⁵ This was a specific finding from a Warwickshire focus group.

<p>population group have equal access, unemployment, work conditions, education, skills, our living situation, rural, urban, rates of crime etc.</p>		<p>By commissioning this Service, we are hoping to eradicate the lottery by commissioning a countywide offer which includes a face-to-face offer in all 5 district and boroughs.</p> <ul style="list-style-type: none"> • The specification also requires the provider to operate their hours flexibly to meet the needs of the victim-survivor and ensure that they are still able to access the service (i.e. ability to move their 'regular' time if the victim-survivor is at a job interview or has the victim-survivor is unable to get child care or has a class at this time.) • The Service will be accessible and meet the needs of victim-survivors across the county, this will include offering both face-to-face and virtual sessions which will mean that regardless of if the victim-survivor is in a rural or urban setting, they are still able to access support. The locations which the service will operate from will be required to be accessible via public transport links.
<p>Other Groups If there are any other groups</p>		

Public Sector Equality Duty (PSED)

Public Authorities must have 'due regard' to the need to eliminate unlawful discrimination, advance equality of opportunity and foster good relations.

	Evidence of Due Regard
<p>Eliminate unlawful discrimination (harassment, victimisation and other prohibited conduct):</p>	<p>This service provides open-access service to ALL victim-survivors of domestic abuse. There is a requirement which states 'The Provider(s) will ensure Service Users are not directly or indirectly discriminated against, victimised, harassed or put at a disadvantage on any grounds, including the Protected Characteristics in the Equality Act 2010'.</p>
<p>Advance equality of opportunity:</p> <p>This involves</p> <ul style="list-style-type: none"> • removing or minimising disadvantages suffered by people due to their protected characteristics; • taking steps to meet the needs of people with certain protected characteristics where these are different from the needs of 	<p>The specification states the following:</p> <ul style="list-style-type: none"> • The counselling and therapy offer will be available across the county of Warwickshire. It is expected that the service will provide a face-to-face offer in all five

<p>other people, for example, taking steps to take account of people with disabilities;</p> <ul style="list-style-type: none"> encouraging people with certain protected characteristics to participate in public life or in other activities where their participation is disproportionately low. 	<p>district and boroughs in order to meet demand. Locations planned will be shared with the commissioner for information. Service delivery locations will take account the nature of the service and the need to offer privacy and confidentiality to victim-survivors.</p> <ul style="list-style-type: none"> The service will be delivered at times and locations convenient for the victim-survivor including evenings, weekends and during school holidays. The commissioner will keep this under review during the life of the contract and any changes required would be agreed by the commissioner and the provider. It is expected that staff will travel to meet victim-survivors in Warwickshire refuge accommodation, as appropriate and agreed with the WDVA Service. The Provide will have access to interpreters or translation services to ensure the service is accessible for those for whom English is not a first language. The provider will be expected to meet the costs of this additional provision. The Provider will develop and implement specific resources, designed to address the access and communication preferences, and needs of victim-survivors. This may include drawing in expertise from other specialist organisations. <p>A detailed list of Policy requirements is requested, this includes but is not limited to: Equality and Diversity, Whistleblowing, Lone Worker, Safeguarding, Customer Care/Support planning, Privacy Notice, Confidentiality.</p>
<p>Foster good relations:</p> <p>This means tackling prejudice and promoting understanding between people from different groups and communities.</p>	

Section Five: Partners / Stakeholders



Which sectors are likely to have an interest in or be affected by the proposed activity?	Yes / No	Describe the interest / affect
Businesses	No	
Councils	No	
Education Sector	No	
Fire and Rescue	No	
Governance Structures	No	
NHS	No	
Police	No	
Voluntary and Community Sector	YES	WDVA Service will be the only referrer into the service to begin with.
Other(s): please list and describe the nature of the relationship / impact		Childrens' services have raised their interest in being able to refer into the service when we are in a position to expand the referral pathway.

Section Six: Action Planning

If you have identified impacts on protected characteristic groups in Section Four, please summarise these in the table below detailing the actions you are taking to mitigate or support this impact. If you are not taking any action to support or mitigate the impact you should complete the No Mitigating Actions section below instead.

Mitigating Actions

Consider:

- Who else do you need to talk to? Do you need to engage or consult?

- How you will ensure your activity is clearly communicated
- Whether you could mitigate any negative impacts or build on positive impacts for protected groups or health inequalities
- Whether you could do more to fulfil the aims of the PSED
- How you will monitor and evaluate the effect of this work
- Anything else you can think of!

Identified Impact	Action(s)	Timescale incl. evaluation and review date	Name of person responsible
<p>There is a need to mitigate against any potential negative impacts such as:</p> <ul style="list-style-type: none"> • All those that would benefit from the service being unable to access it (via the WDVA Service). • Inability of the provider to respond to the needs and preferences of individuals accessing the service. • Inability of staff to respond to differing needs and communication preferences. • Poorer outcomes and service experience for individuals with 	<p>DA Commissioner is working with the commissioned WDVA Service to increase referrals into the service of those that have not historically accessed the service in the numbers that crime survey prevalence data would indicate are a victim of domestic abuse. The new commissioned DA Specialist Counselling and Therapy Service will be dependent on this work to ensure that all those that would benefit from the service, are able to access it.</p>	<p>Ongoing – impact monitored quarterly.</p>	<p>Emma Guest – DA Commissioner</p> <p>Hannah Strick – DA CSO</p>
	<p>Specification includes requirement for staff of provider to be trained on, aware of and responsive to needs of victims-survivors who have protected characteristics. Potential providers will need to outline how they meet this requirement in their bid to provide the service.</p>	<p>Ongoing – impact monitored quarterly.</p>	<p>Emma Guest – DA Commissioner</p> <p>Hannah Strick – DA CSO</p>
	<p>Quality questions within the tender documentation to include specific</p>	<p>Evaluation of tender – March 2022</p>	<p>Emma Guest – DA Commissioner</p>

protected characteristics.	questions around how potential providers will meet the needs of those with protected characteristics		Hannah Strick – DA CSO
	Ensure during mobilization that equalities monitoring information is routinely collected and reported by the successful provider.	Ongoing – impact monitored quarterly.	Emma Guest – DA Commissioner Hannah Strick – DA CSO
	During mobilization, ensure that the referrer and provider have a good understanding of the eligibility criteria so that all those that could benefit from the service are able to access it.	Ongoing – impact monitored quarterly.	Emma Guest – DA Commissioner Hannah Strick – DA CSO
	Once contract is in place, equalities monitoring data, outcomes and feedback from customers will be monitored to review the extent to which the service is accessible to and able to meet the needs of all.	Ongoing – impact monitored quarterly.	Emma Guest – DA Commissioner Hannah Strick – DA CSO
	Contract monitoring meetings to be used to monitor the accessibility / provision of the service to ensure that expectations within the service specification are being met (for example, monitoring of face to face sessions, provision of information in different formats / languages etc.)	Ongoing – impact monitored quarterly.	Emma Guest – DA Commissioner Hannah Strick – DA CSO

No Mitigating Actions

Please explain why you do not need to take any action to mitigate or support the impact of your proposed activity.

Section Seven: Assessment Outcome

Only one of following statements best matches your assessment of this proposed activity. Please select one and provide your reasons.

No major change required	X	The impact of the Service on Protected Characteristics has always been at the forefront of our minds when developing this service, and as such, no major change is required.
The proposal has to be adjusted to reduce impact on protected characteristic groups and/or health inequalities		
Continue with the proposal but it is not possible to remove all the risk to protected characteristic groups and/or health inequalities		
Stop the proposal as it is potentially in breach of equality legislation		

Section Eight: Sign Off
N.B To be completed after the EIA is completed but before the area of work commences.

Name of person/s completing EIA	Hannah Strick Emma Guest
Name and signature of Assistant Director	Becky Hale
Date	23/12/21
Date of next review and name of person/s responsible	02/05/22 – Hannah Strick and Emma Guest

Once signed off, please ensure the EIA is recorded on the following document: [WCC EIA Recording Document](#)