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Cenedlaethol
Cymru

National
Assembly for
Wales

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[The Equality, Local Government and
Communities Committee](#)

13/10/2016

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Cofnodir y trafodion yn yr iaith y llefarwyd hwy ynddi yn y pwyllgor. Yn ogystal, cynhwysir trawsgrifiad o'r cyfieithu ar y pryd.

The proceedings are reported in the language in which they were spoken in the committee. In addition, a transcription of the simultaneous interpretation is included.

Aelodau'r pwyllgor yn bresennol
Committee members in attendance

Gareth Bennett	UKIP Cymru
Bywgraffiad Biography	UKIP Wales
Janet Finch–Saunders	Ceidwadwyr Cymreig
Bywgraffiad Biography	Welsh Conservatives
John Griffiths	Llafur (Cadeirydd y Pwyllgor)
Bywgraffiad Biography	Labour (Committee Chair)
Sian Gwenllian	Plaid Cymru
Bywgraffiad Biography	The Party of Wales
Bethan Jenkins	Plaid Cymru
Bywgraffiad Biography	The Party of Wales
Jenny Rathbone	Llafur
Bywgraffiad Biography	Labour
Joyce Watson	Llafur
Bywgraffiad Biography	Labour

Eraill yn bresennol
Others in attendance

Frances Beecher	Grŵp Gweithredu Trais yn erbyn Menywod Cymru Wales Violence Against Women Action Group
Eleri Butler	Cymorth i Fenywod Cymru Welsh Women's Aid
Fflur Elin	Undeb Cenedlaethol y Myfyrwyr Cymru National Union of Students Wales
Vivienne Laing	Y Gymdeithas Genedlaethol er Atal Creulondeb i blant National Society for the Prevention of Cruelty to Children
Mutale Merrill	Black Association of Women Step Out
Sian Morris	Cyngor Bwrdeistref Sirol Castell–nedd Port Talbot Neath Port Talbot County Borough Council
Dr Aideen Naughton	Iechyd Cyhoeddus Cymru Public Health Wales
Claire O'Shea	Undeb Cenedlaethol y Myfyrwyr Cymru National Union of Students Wales
Chris Overs	Bwrdd Iechyd Lleol Aneurin Bevan Aneurin Bevan Local Health Board

Lin Slater	Bwrdd Iechyd Lleol Aneurin Bevan Aneurin Bevan Local Health Board
Jackie Stamp	Llwybrau Newydd New Pathways
Wendy Sunderland- Evans	Bwrdd Iechyd Lleol Prifysgol Abertawe Bro Morgannwg Abertawe Bro Morgannwg University Local Health Board
Joy Williams	Cymdeithas Llywodraeth Leol Cymru Welsh Local Government Association

**Swyddogion Cynulliad Cenedlaethol Cymru yn bresennol
National Assembly for Wales officials in attendance**

Jon Antoniazzi	Clerc Clerk
Steve Davies	Cynghorydd Cyfreithiol Legal Adviser
Linda Heard	Dirprwy Glerc Deputy Clerk
Hannah Johnson	Y Gwasanaeth Ymchwil Research Service
Sarah Sargeant	Dirprwy Glerc Deputy Clerk

Dechreuodd y cyfarfod am 09:15.

The meeting began at 09:15.

**Cyflwyniad, Ymddiheuriadau, Dirprwyon a Datgan Buddiannau
Introduction, Apologies, Substitutions and Declarations of Interest**

[1] **John Griffiths:** May I welcome Members to this meeting of the Equality, Local Government and Communities Committee and go straight into item 1? The only apology that I've received for today is from Rhianon Passmore, who's unable to make it. As ever, the headsets are available for simultaneous translation on channel 1 and sound amplification on channel 2. In the event of an emergency, an alarm will sound and ushers will direct everyone to the nearest safe exist and assembly point.

09:16

**Ymchwiliad Ôl-ddeddfwriaethol i Ddeddf Trais yn erbyn Menywod,
Cam-drin Domestig a Thrais Rhywiol (Cymru) 2015:
Sesiwn Dystiolaeth 1
Post-legislative Inquiry into the Violence against Women, Domestic
Abuse and Sexual Violence (Wales) Act 2015: Evidence Session 1**

[2] **John Griffiths:** So we'll move, then, into item 2, our post-legislative inquiry into the Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015, and our first evidence session today with the voluntary sector. So, may I welcome Eleri Butler of Welsh Women's Aid, Frances Beecher of the Wales Violence Against Women Action Group, Jackie Stamp of New Pathways and Mutale Merrill of BAWSO? We haven't got much time for opening statements, I'm afraid, so if it's okay with you we'll move straight into questioning. Please feel free to answer, whoever is best placed to answer on the particular question. Obviously, it's not limited to just one of you answering a question, but don't feel obliged to contribute to every single answer if you do not wish to.

[3] Okay. Well, let me start us off by talking about implementation of the legislation, and just asking, really, whether you believe that the pace of implementation of the Act, the effectiveness, is everything that it should be at this stage.

[4] **Ms Butler:** Shall I start? Thank you for the invitation, on behalf of Welsh Women's Aid. Our evidence is representing the independent special services domestic abuse, violence against women services across Wales.

[5] In relation to the implementation, I think, to sum it up, it's probably slow and limited. There are quite a few things in relation to the Act that have already come in, like the appointment of the national adviser, and publication of the national training framework statutory guidance. There's been a refreshed violence against women, domestic abuse, sexual violence national strategy that's been out for consultation, and there are some early adopter sites piloting 'ask and act', for example. But, there are key elements in the Act that still haven't come in. Obviously, as you know, the local strategies won't be developed until 2018 and provisions around education are not timetabled yet, particularly in relation to local authorities reporting on whole-education approach responses.

[6] So, I think whilst some things have been published, for us, it's really

the national approach, the national framework and communication around that, and the leadership to make sure that this is a critical priority across the country, regionally and locally, and a critical communication message to local areas that, actually, at a public service board level, this is a critical core business priority for every area—a cross-cutting priority. I think that's one of our concerns, and I think if that had happened when the Act was enacted, I think we'd have seen more progress on a regional and local level, to some extent.

[7] As I said, there are early adopter sites that have started implementing certain areas of work, like training in 'ask and act', but it's not really been a cross-Government or cross-departmental priority, necessarily. So, I think, from our perspective, that really frames the implementation, pace and scope.

[8] **Ms Beecher:** I'd just like to add that I think what would be very important as well is that we really do need consultation on the delivery plan. The devil's in the detail. We really need to see what that delivery plan is and how it's going to be implemented—what the targets are, what the measures are against—so that we can, from grass-roots organisations, actually see how this is going to improve the pace and push momentum forwards.

[9] **Ms Merrill:** I think, from a service delivery perspective, and to pick up on what Eleri and Frances have said, the reality check is that what actually has been done is that the penny has dropped for public services. At least, we've seen that change of attitude and thinking. It's early days yet, but I think the seed has been sown, because I know that there's been a lot of demand now from public services, especially from social care and health, to engage with the sector, especially, in my view, in terms of the work that we do around female genital mutilation, honour-based violence and forced marriage. We've had a lot of conversations that would happen with local authorities, with the police and with health. So, there's been a movement there.

[10] **Ms Stamp:** I'd really like to pick up the issue of the impact of some delay in implementation, or the detail of the implementation. In some local areas, looking at Powys, for instance, or Neath Port Talbot, some areas have gone ahead, looking at their own strategies at a regional level before there is national guidance. One of the implications for sexual violence in particular of that is that a lot of those plans are currently completely domestic-abuse focused. There is no sexual violence element. The Powys plan, for instance, is specifically domestic violence or domestic abuse. So, I think there is some

concern around national guidance. The detail in the delivery plan, as Frances said, needs to come out quite quickly and be very robust in its guidance to local areas or regional areas.

[11] **John Griffiths:** Okay, well, thank you very much for that. Would you give us a flavour of your thoughts on how we could align the Act with other legislation, such as the Social Services and Well-being (Wales) Act 2014 and the Well-being of Future Generations (Wales) Act 2015, and indeed the Housing (Wales) Act 2014? Obviously, it's important for Welsh Government and those responsible for implementing the Act, to make sure that the different pieces of legislation fit together and complement each other. What would your views be on how that could be best achieved?

[12] **Ms Butler:** I think, from our perspective, it's really, really important that the violence against women, domestic abuse and sexual violence Act in Wales intersects, not only with the legislation that you mentioned, but also with UK and international legislation and legal obligations. So, the context for the feedback that our member services have given us, for example, is that we've got sustainable development goals that states have to respond to. One of those, SDG 5, is around ending discrimination against women and girls and the prevention of violence against women. There are also obligations in the victims' directive—legal obligations for minimum specialist service levels in every country. There's also a UK Government violence against women prevention strategy, which directs non-devolved services. And then within the Wales framework, which needs to cross-cut with all of those, like you said, there's the social services and well-being legislation and the well-being of future generations. The principles of all these national pieces of legislation are very much aligned around prevention, early intervention and being needs led and so on, but, in our experience, we're seeing little integration, or little evidence of integration, at a local level, and some feedback we've had in local areas is that the local responsible authorities are almost dealing with pieces of legislation sequentially, not necessarily at the same time.

[13] So there's scope, for example, to align population needs assessments with violence against women, domestic abuse, sexual violence thematic needs assessments, but we haven't really seen that happening. There's also scope to co-ordinate outcomes frameworks. We have national outcomes frameworks for those different pieces of legislation, and there's also particular scope to align training. There's a massive roll-out of training with local authorities around the social services and well-being legislation. Separately, we're looking to early adopter sites to do training around 'ask

and act', and obviously violence against women prevention and protection is very closely aligned with safeguarding. So, they really should be more joined up, which is why, from our perspective, we really think that if it's going to be a priority at the public service board level to have that overarching, strategic oversight of an area, locally or regionally, then those agendas would probably more effectively join up. Our view is that, if we're actually going to be effective around addressing the well-being of future generations, you can't not have a priority on violence against women prevention, because otherwise the well-being of our future generations won't be effective at all. We really need leadership from a national level, from Government level, to make sure that it's a strategic priority at a local area level.

[14] **Ms Beecher:** I can give you an example on the ground of where, whilst not perfect, there are some areas that are trying to move forward. For example, in Gwent, they are looking at ensuring alignment across this whole range of legislation, ensuring the well-being and population assessments across Gwent align with their strategic well-being assessment group. I think that might be a good practice example that we can send to you to show that it can be done and you can align all this different legislation, as long as you've got somebody within that region taking a lead. I'm not saying that it's perfect and I'm not saying that it's not early stages, but they are trying to grasp that.

[15] There have been some examples in Cwm Taf as well, where they're having stakeholder workshops looking at the violence against women, domestic abuse and sexual violence Act and looking at the future generations, social services and UK Acts. They're having workshops to try and get a handle on it. So, I think there are some things that are going on that perhaps can be used and looked at in more detail, so that that absolutely vital leadership that Eleri is talking about can be rolled out. So, we could send that—

[16] **John Griffiths:** Okay, we'd be very grateful if you could do that, Frances. Thank you very much.

[17] **Ms Merrill:** My quick comment is just to pick up on what both of the speakers have said. It's a lack of integration between the devolved and non-devolved issues, especially when it comes to—. If you look at it in terms of violence against women from a BME perspective, the responsibility for protection and the funding for protection, prevention and support comes from the UK Government. So, for female genital mutilation, forced marriage,

honour-based violence and human trafficking, we're depending on funding from the UK Government to do those pieces of work. When the funding comes through, it's actually very English based. So, that means we're short changed. So, we do need leadership from Welsh Government to be able to work with the UK Government in order for us to provide that service. Because, if the Act is going to be implemented on, we're only going to implement—. The requirement is with the public services, that's good, but, actually, the delivery will have to be done by specialist services, because I can't see how a social worker from a local authority will be able to support a hard-to-reach individual, and when a woman is fleeing FGM, they're even harder to reach. So, the Act won't be implemented if we don't get the specialist services supported.

[18] The other issue is around integration around the departments of the Welsh Government. There's just no connectivity around departments. So, we've got an issue where we've got the strategy being devolved in one department, but there's no connectivity between all the departments. So, we're looking at that leadership as well to make sure that all departments are engaged.

[19] **John Griffiths:** Okay, thank you.

[20] **Ms Stamp:** Actually, Mutale just picked up the point I was going to make. So, just to strengthen that, I think that there are lots of examples on the ground of integrated working, particularly in the third sector, across this legislation and across all of the Acts that have been implemented recently. However, there is a perception that there is not that inter-departmental Welsh Government cross working. I would just reiterate Mutale's point that it's very difficult, actually, from a third sector perspective, to deal with all the different departments individually. There needs to be some kind of joined-up-ness, if that's a good word for this morning.

[21] **John Griffiths:** Absolutely. Thank you very much. Bethan.

[22] **Bethan Jenkins:** I just wanted to go back over what Mutale said about when the money comes through it's very English focused. I wanted to understand what that was. And also, with regard to welfare reform, the Bevan Foundation, for example, has commissioned research into looking at potential for devolving certain powers over our benefits, so that we can have more of those powers here in Wales, so that we can shape them better. I'm wondering, a few of you have indicated that there may be problems with

funding coming though from the UK Government, have you looked at having a view on whether some of those powers should be in Wales, as opposed to sitting with the UK Government.

[23] **Ms Merrill:** We'd welcome it if those powers were in Wales instead of looking at the UK Government—

[24] **Bethan Jenkins:** You what, sorry?

[25] **Ms Merrill:** We would welcome that.

[26] **Bethan Jenkins:** You would welcome that.

[27] **Ms Merrill:** And we will give you evidence and position papers to evidence that we need to have those powers in the Welsh Assembly rather than the UK Government. Because what happens is that, for instance—let me just give you an example of FGM—there was a grant of more than £3 million that came out of the UK Government and we were all asked to apply, but if you looked at the small print, it then said, 'Only for English-based third sector to apply'. If you look at my funding for FGM, I'm having to go through trusts to get funding, like the Waterloo Foundation, which gave me about £30,000. You're expecting, then, for BAWSO to provide—or for organisations to provide—prevention, support and protection based on project funding that comes from trusts. In terms of sustainability, you can't sustain funding like that.

[28] For forced marriage and honour-based violence, we get funding from the Home Office, and it's very minimal. For human trafficking, we get funding, again, from local government through Salvation Army contracts. The only funding we get from Welsh Government to do with human trafficking is for one unit, a refuge in north Wales, which we are grateful for. But in terms of demand—and because of the Act, there has been increased demand in all these issues—it means we need to look again at how the two Governments are working together.

09:30

[29] **Bethan Jenkins:** So, you're not getting that consequential for Wales that you would expect to get to be able to deliver a percentage of the service here for the people who would need it here.

[30] **Ms Merrill:** Yes, definitely. No, we're not.

[31] **Bethan Jenkins:** Okay, thanks.

[32] **John Griffiths:** Jenny, and then Joyce.

[33] **Jenny Rathbone:** I just want to pick up on the point you were making about the need for specialist services. When we're looking at FGM prevention, surely we need to educate everybody. Clearly, there's a job to be done within the communities where FGM is prevalent, but surely we need, particularly in our schools and in our health services, to have that awareness of risk so that people are alert to possible—.

[34] **Mr Merrill:** Just to give you an example with FGM, for instance, it's a very complex issue, as Jenny knows, because you're part of that initiative to understand what it's all about. It's not just about schools, it's not just about us, it's not just about communities, you have to start from the source countries, because there's a clear link between the diaspora living in Wales and the relationship they have with the source country. Let me give you an example. There was a case where a woman was living in the UK with her husband, the woman got pregnant and then the health visitor discovered when she went to check that she had FGM. She didn't know, because it was at the first stage. So, then they started talking to her. They went with one of my staff to their house and found that the man had tribal marks. Social services didn't realise that, if a man has tribal marks, it's more likely the children will undergo FGM. Now, the woman had already told the health visitor that the husband had invited the mother-in-law to come with the equipment to cut the daughter at birth, because now it's very difficult for them to do it in the UK.

[35] This means actually we're not just talking about engagement with schools, when it comes to FGM, we're talking about engagement with the practising communities, we're talking about engagement with health, with police, and we're also talking about engagement with the service providers, of course, but we're also talking about engagement with the source countries, so that it's a whole-system approach. This means we need to work differently. I know that the answers don't just lie with BAWSO, the answers lie with all of us, but we really do need to work differently in order to approach this in a different way. This means that being integrated and having a very co-ordinated approach will come in handy. So, it's something that we'll probably need to look at and work very differently from the way we've

worked in the past.

[36] **John Griffiths:** And Joyce.

[37] **Joyce Watson:** Just a small question, again to Mutale. In terms of the funding that comes from the UK—and you mentioned specific funding for trafficking, FGM and all those specifics—is it because we haven't got legislation over policing, and is it the case that they devolve their money downwards under that heading? That's what I think it might be. And therefore it becomes complicated to ask for funds.

[38] **Ms Merrill:** Yes, we suspect it is, and we find it extremely frustrating, because I think the assumption from the community is that Welsh Government delivers for everything, that they give us support for all the areas we need support in, but, actually, that's not the case. So, the specific areas that I mentioned in the Act on violence against women define FGM, forced marriage, honour-based violence and human trafficking as part of the violence against women agenda that the local authorities and other public services are supposed to be preventing or protecting with support. It won't happen, because the resources are with the UK Government. That's where the problem is. I think if that power was given to Welsh Government, it would be easier for us to implement this Act.

[39] **Joyce Watson:** Okay.

[40] **John Griffiths:** Okay. Well, thanks very much for that. One further question from me on this section: do you have any particular concerns about the statutory guidance or the national indicators at this stage?

[41] **Ms Butler:** In relation to the statutory guidance, there was some consultation on some proposed statutory guidance last year around 'ask and act' and multi-agency working, but, after the consultation, that guidance hasn't been issued yet. The only statutory guidance that's been issued formally is the national training framework, although, obviously, as I said, two early adopters sites in Gwent and in ABMU health board are trialling 'ask and act' and the training framework around that. I think, in relation to the national training framework, one of the things I think is needed is some kind of national oversight in relation to how it's being used. So, it's for a range of groups of professionals across public and third sector services, but we haven't, as far as I'm aware, got any monitoring framework in relation to how effective the training is and its roll-out for all public service professionals,

for example—for public authority leaders and so on. So, there's a monitoring framework that isn't attached to it, necessarily.

[42] There's also non-statutory guidance that's been issued, which Welsh Women's Aid supported the consultation and writing for, which was the whole education approach guidance, which only focuses on education; obviously, it doesn't pick up wider prevention around community education. Maybe we can talk about that in a bit more detail, but that doesn't particularly come with a framework for implementation across education settings. There's also been limited consultation on guidance for working with perpetrators, but that's not come out yet, and that was particularly with the advisory board.

[43] Our main concern is the delay in publishing statutory commissioning guidance, which was mentioned as the Bill was going through, before the Act became law. And the delay in publishing commissioning guidance is really worrying, because, as has already been indicated by my colleagues, the commissioning is already happening on the ground without that national statutory framework. In the absence of that, Lloyds Bank Foundation, working with a range of sector organisations, has developed some commissioning guidance for Wales around good practice, and that's something that the national adviser's had input into. But, again, that's obviously non-statutory guidance and I think there are big inconsistencies between what the Act intended and what's actually happened. Also, obviously, we haven't got a national outcomes framework for violence against women yet, and national indicators around that, and that's something to be developed, I would assume, once the strategy is published in November. So, that's something we're keeping a close eye on.

[44] I just wanted to flag up that there's also, for us—. Just a quick point around the range of statutory guidance that's referred to in the Act, which we welcomed as the Bill was going through, and how that fits with the Welsh Government's plan at the moment, the five-year plan, in relation to the intention in the plan to slash performance indicators, cut guidance, and reform audit and inspection, which is stated in the Welsh Government's five-year plan—that seems to contradict issuing a whole suite of statutory guidance, for example, and indicators and outcomes, and one of the things our members have asked us is: 'Well, what does that mean in practice for future implementation?'

[45] **John Griffiths:** Okay, thanks very much for that. Jackie.

[46] **Ms Stamp:** I just wanted to say that some feedback we've had from colleagues in the sexual violence sector is really around what will statutory guidance actually mean, and what teeth will that actually have in terms of, for instance, putting a duty upon authorities to actually meet the objectives in the Act. Will there be an ability to impose sanctions on authorities who don't comply or who don't comply in the way it was meant to be done? I think there is some confusion in the third sector around what the expectations will be on them. Will they be trying to meet a national set of indicators that regionally look very different? So, I think it's just, really, to point out that it's not clear what is meant by statutory guidance at this stage, outside of Welsh Government.

[47] **John Griffiths:** Okay.

[48] **Ms Beecher:** Can I just make a final point as well? It would be very useful for the committee to consider where the violence against women, domestic abuse and sexual violence is going to sit. Is it going to sit in a locality, or is it, like social services, going to be looked at more regionally? If we're going to talk about cross-cutting departments and cutting across, then we need to forward-think and forward-plan about this as well. So, I think that's an issue that we'd be very grateful to have some more thought on.

[49] **John Griffiths:** Thank you very much, that's very useful. Okay, well, thanks very much. At this stage, we'll move on to the national strategy, and I think Sian has some questions.

[50] **Sian Gwenllian:** Byddaf yn siarad yn Gymraeg. Roeddwn yn awyddus i gael eich barn chi am y strategaeth ddrafft—cynnwys y strategaeth ac a yw'n ddigon clir ac yn y blaen—a hefyd a ydych chi'n meddwl bod barn goroeswyr wedi cael eu gwau i mewn iddi yn ddigonol?
Sian Gwenllian: I'll be speaking in Welsh. I was keen to hear your views on the draft national strategy—the content of the strategy and whether it is clear enough and so forth—and also do you think the views of survivors have been weaved into it sufficiently?

[51] **Ms Stamp:** Yes, shall I start? I think from our perspective, I would say that the national strategy at the moment is not clear enough and is not strong enough. There is concern that it has not actually moved on much from the last 'The Right to be Safe' strategy that we had in place already. So, I

think we need to be, maybe, a lot stronger and a lot clearer in what is different, what we are hoping to achieve now underneath the Act. It's really relevant, the point you raise about survivors' voices, because there has been some consultation. We would certainly advocate that there should be a lot more engagement than there has been and time to do that effectively. But it's very clear that the feedback that came out of that survivor engagement, which perhaps Eleri could talk little more on as she was instrumental in some of that work—it's difficult to see that replicated in this strategy. Where are the recommendations within this strategy, I would question?

[52] **Ms Butler:** We would support that. One of the main concerns we've had about the draft strategy and how it compares—because it's a refresh strategy from 'The Right to be Safe' strategy—and how it compares is that it's lost the United Nations' definition of violence against women, which I think is really vital to be in there, because it frames the strategy within an equality and human rights framework. So, that's one of our strong responses to the consultation. And it's really important that, when we understand violence against women, what we mean from that UN definition perspective is that we're talking about violence and abuse that's most likely to be experienced by women and girls because they're women and girls, and because it's related to inequality between women and men. That doesn't mean that those forms of violence and abuse can't be experienced by children, young people and men and so on, and from a strategy perspective and a delivery perspective, obviously, it applies to everybody. So, I think that definition to be in there is really important.

[53] The voices of survivors are—there are some quotes in the draft strategy, but, as Jackie said, the recommendations aren't featuring in there at the moment, and we'd really like to see the top—. There are about 10 key recommendations that survivors made to us as we conducted a relatively limited snapshot survey of some focus groups of survivors across the country. And the things that they called for included things like dedicated specialist services for children and young people impacted by domestic abuse, sexual violence, forced marriage and exploitation. They also recommended the need for specialist domestic abuse and sexual violence services for survivors that are well resourced and available when they need them, so not being time-limited to a short period of time or working hours. They made a series of recommendations for how public services in Wales should work better with the criminal justice system and with the family justice system, and had particular concerns around the family court practice. They spoke very highly in the feedback, in terms of some of the

recommendations that should inform commissioning, around the value of independent specialist domestic abuse and sexual violence services that we have across Wales already, and about sustaining those. So, that was really a positive. They also wanted, particularly, equal access to safety, support, protection and justice, irrespective of immigration status, because a lot of survivors we spoke to talked about that stark choice of staying with their abuser or facing destitution, because of, for example, no recourse to public funds, and the benefit of services like BAWSO to meet their health and support needs.

[54] One of the things they also particularly wanted was to make perpetrators more visible and to be held to account, and to challenge perpetrators, not only perpetrators of domestic abuse, but all forms of violence against women perpetrators. And a bigger focus on primary prevention, which is stopping it happening in the first place, and for that, one of the things that they were talking about was addressing issues around women's access to childcare, to employment, to learning and development opportunities, to increasing 'space for action' for survivors, to enable them to access it independently—and live lives free from abuse. They talked about having spaces, not only to get access to crisis help and support, but to recover in the longer term, and they didn't see that happening.

[55] So, there are some key recommendations that we got, specifically to inform the national strategy, because that was the question, that we'd really like to see in it when it's published in November.

[56] **Ms Beecher:** I'd just like to pick up the point Eleri made—and obviously we'll talk about it in a little bit more detail when we come to funding—on having those spaces. Currently, through previous legislation, the Welsh Government has supported one-stop shops and multi-agency centres for women fleeing domestic abuse or sexual violence, and there is no clear indication—and obviously this might come into the implementation plan—of how those fit into this overarching strategy. These are safe places where people can go and are not immediately identifiable. There are also places where people can go who actually don't recognise they're in coercive or difficult relationships, which can assist people to allow themselves to self-identify as is appropriate. And yet, at the moment, there is no clarity around the revenue funding of these centres, and certainly no clear—other than year on year—capital funding. These are central to the whole implementation of this Act and, really, in the consultation we did, over 80 of the women we work with actually said, 'Well, hang on, where is this?' So, I do feel a central

plank really needs to be identified.

09:45

[57] **Ms Merrill:** I do feel this is going to be a missed opportunity. Wales led in having that Act. What we're having is a national strategy that everybody has fed back to say it's not adequate or is not fit for purpose at the moment. What we'd like to see is evidence that we've been listened to, that the survivors' voices have been listened to, otherwise, you have—. And minus the fact that—. The other thing is that we don't have the delivery plan. What we would have preferred is for the national strategy to have been drafted with the delivery plan, so would have given it a proper critique. The survivors would have given it a proper critique. But we haven't got that. We are not assured how much resource will be aligned to that delivery plan. So, there are a lot of question marks at the moment. What we're asking for is assurance that what we are fed and we have been consulted on, and we have asked survivors that were being consulted—what we just want to be assured is that we've been listened to and that that's evidenced in the amendments in that national strategy. Otherwise, it will be a lost opportunity, really.

[58] **John Griffiths:** Jackie.

[59] **Ms Stamp:** Specifically referring to the content of the national strategy, there certainly is a feeling that it's very DA focused, still. There's quite a lot of feedback that sexual violence in particular and female genital mutilation need to be included within that. Obviously, that has implications on how that is accepted at a regional level and what therefore is put into place underneath that strategy. The words 'sexual violence' are actually throughout the document but, in terms of the content, there is nothing there. If you look at the 'how will we achieve' or 'what will Welsh Government do to achieve this', there is nothing in terms of the sexual there, it's still very domestic abuse focused. And that's a real concern of the whole sector at the moment. And just a small pointer to reiterate, the sample that was taken in terms of the survivor engagement—the panel here, we've all worked in this sector for a very long time; we have almost 30 years' experience of doing this work. I can tell you that that small sample is totally representative of the views of the wider service user forums.

[60] **John Griffiths:** Thanks, Jackie. Sian, did you want to come back on—?

[61] **Sian Gwenllian:** I'm just very concerned, as you are, about the timeline

now, because we've only got a couple of weeks to get into a strategy that does take on board what you're saying. Do you think there's enough time left now? Can we actually do it? Can we produce a strategy that does kind of move things on?

[62] **Ms Merrill:** I think that we've all offered our—. In fact, we've offered—from violence against women action group, and from Welsh Women's Aid as an umbrella organisation, we've offered our expertise, and we've offered even to have a task and finish group in order to do the heavy lifting because we're so worried.

[63] **Bethan Jenkins:** Has that been rejected, then, or—?

[64] **Ms Merrill:** It hasn't been responded to.

[65] **Sian Gwenllian:** So, it hasn't been picked up.

[66] **Ms Merrill:** It hasn't been picked up.

[67] **John Griffiths:** When did you make the offer?

[68] **Ms Merrill:** During the consultation period.

[69] **Ms Butler:** Well, we've been making the offer for the last 18 months, I have to say, since the Act was enacted. Because we've had a year and a half to get the strategy right nationally, so, as well, I think that's important to realise. It's not just a last minute rush—the timescale has been since the Act's—

[70] **John Griffiths:** But during the—as a response to the consultation as well.

[71] **Ms Butler:** Absolutely, absolutely. But I also think it's not just on the third sector to work 24 hours round the clock to get it ready for the next two weeks. But also one of the issues with the strategy, as was alluded to before, is that it comes from a specific department within Welsh Government—the violence against women team within there, which is the capacity that we have. But there's no objectives in there—you know, what are health doing, what are education doing, and what are other departments doing? It's not really a cross-departmental strategy. So, I would be expecting, over the next two weeks, before it's published, other Government departments to be

working quite rapidly to identify what they're going to be doing to deliver it, and I think that's really important.

[72] **Sian Gwenllian:** Are you worried, because of the lack of clarity, to put it mildly, of the strategy, that that then doesn't inform the local strategies?

[73] **Ms Butler:** Well, that's the concern, because the scope of the strategy and the definitions—. This why we're all concerned about things like the definitions, because it sets the framework, it sets the areas for working over the next five years.

[74] **Ms Stamp:** The definition of sexual violence is almost non-existent within this revised strategy, which is very concerning. It's just not there. The word 'rape' isn't even in that definition. And there are obviously some internationally-recognised definitions that can be used.

[75] **Ms Butler:** It makes passing reference to some obligations on an international level, but, again, the detail—. Maybe the detail's in the delivery plan, but we would have liked to have seen the delivery plan alongside the strategy, and we hope that that's going to be consulted on before it comes out, at least with the advisory board. Also, in terms of, as we talked about right from the start, the implementation, what's the budget for delivering it in relation to—? One of the key aspects of the Act is to make sure that public service responses are improved, and they can't do that without a robust, strong, sustainable third sector, specialist third sector, in Wales. So, to make sure that we've got specialist third sector services that have access to long-term sustainable funding across the country for all aspects of domestic abuse, sexual violence and violence against women is really vitally important. If that funding model isn't sustainable and long term over the next year, we will probably lose half the sector in Wales from April. So, that's really, really concerning. So, it's not only getting the strategy right. That sets the framework and the national approach, which we really need to get right. As Mutale said, we've got a great opportunity because, globally, the Act has been heralded as really innovative—the focus on prevention and everything else, which is great—but it's just that we really need to get the implementation right.

[76] **Ms Beecher:** I think that the point made, as well, is that, globally, it has been recognised and thinking, 'Well, actually, Wales is leading the way', and then, 'Hang on a minute; what is this definition?' You know, everybody is looking at it and going 'what?' And, if we did nothing else, let's get ourselves

back up where we were.

[77] **John Griffiths:** Okay. I'll just bring Jenny in at this stage.

[78] **Jenny Rathbone:** Picking up on your point about the need for more focus on sexual violence, you mentioned in your written evidence that you think that the guide to healthy relationships isn't being delivered through all of our schools. I'm sure that that's right, but it's such a vast subject, and healthy relationships isn't just about sexual violence. So, what exactly would you like to see in the guidance in relation to what is a very large subject?

[79] **Ms Stamp:** I think that there needs to be some clear guidance around who and how that will be delivered. Putting, for instance, an expectation on a class teacher in a PSE lesson to teach a very difficult subject—most people won't say the words 'sexual abuse', so to deliver lessons that include those things are very difficult. So, I think it's about some guidance around what are the minimum levels of expectation of inclusion, the detail underneath this VAWDASV, and what exactly we want to deliver—so, being very clear, and also being very clear it's got to be delivered appropriately by trained professionals.

[80] **Jenny Rathbone:** Okay.

[81] **John Griffiths:** Okay. Thanks for that. We'll move on to education and Joyce Watson.

[82] **Joyce Watson:** Yes. I want to ask—picking up and following on from your last point, Jackie; I think that's a good place to start—in your opinion, and we can guess the answer, but I want to ask, whether the Act's overall aim to improve the consistency of preventative, protective and supportive services can be achieved. Or do you think we need compulsory—that's the question—healthy relationships education? Because we know that this was a bone of contention.

[83] **Ms Stamp:** I think that in order to achieve a consistent message across Wales there has to be a compulsion to deliver it appropriately. Because, I think at the moment some—. For instance, if we're just talking about school education, obviously prevention is much wider than just whole-school education, but at the moment some schools will grasp that, and have done, and actually deliver some very good work. There's pockets of really good work going on, but there is no consistency, and so, if that guidance is not

mandatory and the detail is not within that guidance, you will not achieve consistency across the country.

[84] **Joyce Watson:** So, if we move on, do you think that they've looked at any implementation from the Donaldson review? Or are you aware that any of this has been looked at through the prism of the Donaldson review?

[85] **Ms Stamp:** Certainly what I can tell you from a sexual-violence sector perspective is that we have had no input into that in any shape or form and so I would have to say that, no, our evidence would be that there is no—well, there is no evidence that that has happened yet. And these things—. When we're talking about the legislation linking to other pieces of work, that's an example where it's not linking together, in our opinion.

[86] **Ms Butler:** Just to reiterate Jackie's point as well, we've been asking to be involved in the Donaldson review and the curriculum reviews and all the work that's falling out from that from our membership's perspective, and we haven't also had any involvement, particularly, in that, and it's really important. I would agree it needs to be compulsory. We're talking not just about an individual lesson about domestic abuse or sexual violence in different years—obviously age-appropriate—in different parts of the education system, but it needs to be ongoing: age-appropriate lessons covering all aspects of issues that we know link to prevention, like gender stereotyping, sexual consent, sexuality, respect, healthy relationships and so on. At present, that's not consistently available to children and young people across Wales. There was a lot of engagement and involvement with young people in the development of the Bill, and education was one of those issues that was debated quite vociferously, and we have got a non-statutory whole-education approach guide, but how is that being distributed? We don't know what the plan is to make sure that schools and other education establishments actually know that the guide exists—we've spoken to some that haven't heard of it. And how is it being implemented? I haven't seen any evidence that it's been implemented consistently across Wales and other education settings. There are no data around it either, so I do think it needs to be compulsory. I know there's a lot of competing agendas in education and schools, but it's really important that this is prioritised.

[87] **Ms Beecher:** As I say, it has been discussed as a part of the Donaldson review, but what came out of that was they were going to wait to see what the strategy was, and to take some guidance from the Bill and the implementation. Because there were discussions around should it be more

than just a PSE, should it be whole-school policy—you know, quite rightly, the whole range—but my understanding was that there was, ‘Well, we’ll wait to see what we have to do’. There was also discussion about the importance of having it as part of Estyn inspections, having specific led—in the same way as, if you’re a Church of Wales school, you’ll have a specific element of your Estyn inspection, and there was discussion around that as well. But I think this sort of leads back to some of the issues we discussed previously. This has come out of one department, and another area is saying, ‘Well, okay, we’ll wait to see’, but actually we’ve got to dovetail in. So it was discussed and it was sort of, ‘Okay, well we’ll wait to see what we hear back’, but we’re running out of time.

[88] **Ms Merrill:** My comment has to do with what we mean by education, because I think the conversation’s usually around ‘the providers of education have to be schools’. Well, actually, it’s wider than that. Because, if you look at education vis-à-vis black and ethnic minority communities, they are taught around—forced marriage, honour-based violence, FGM is very community based, family based. So, if we don’t engage with the communities, with the practicing communities, the prevention work that we are going to be doing is not going to be effective. So, if you’re going to be talking about healthy relationships, the relationships of the young people, sexual violence, then we need to engage with the practicing communities. The children will spend so many hours in school and then go back home and the grandmother, the father, the mother will be telling them something else and there will be pressure from the community. They are more likely to listen to their community and their parents than they are likely to listen to teachers. So, we need to look differently at how we approach this.

10:00

[89] **John Griffiths:** Thank you. Bethan.

[90] **Bethan Jenkins:** Obviously the White Paper proposed that education on healthy relationships would be delivered in all schools, but the Act didn’t contain that. Can you just clarify whether you supported waiting for Donaldson and that it wouldn’t be in the Act? Or did you want it to be part of the Act and compulsory at the time of its passing, so that we can fully understand why, now, the situation has arisen whereby we’ve got this obvious lag, which, I personally could’ve predicted, because Donaldson was going to be taking a long time anyway; we knew it was going to be taking many years? So, I just wanted you to confirm for the record what your views

at the time were, so we can understand fully where you're coming from.

[91] **Ms Butler:** Our submission at the time, which is on record, as the Bill was going through, was that it should be compulsory, from a Welsh Women's Aid perspective. But we were also making recommendations around that, as the Bill was going through and being debated, that we would hope that some of that compulsory element would then feature in statutory guidance, as a secondary option. And we haven't seen the statutory guidance come out yet in relation to the whole-education approach either. Obviously, once statutory guidance comes out, then it needs to have teeth and there needs to be accountability if it's not implemented.

[92] **Bethan Jenkins:** So, where you were willing to compromise was that it would be in statutory guidance as opposed to—

[93] **Ms Butler:** Well, we weren't wanting to compromise; we wanted it to be compulsory, but it's not our decision to make, so we get what we're given. But we're trying to make it as strong as possible.

[94] **Ms Beecher:** And the violence against women group, Llamau, as an individual provider, are on the record that we felt it should be compulsory. In fact, it was a very strong bone of contention and we pushed it as forcefully as we possibly could.

[95] **John Griffiths:** Okay, well, thanks very much for that. We'll move on then, still with Bethan, to the national adviser and—

[96] **Ms Beecher:** Sorry to interrupt. Can I just make one small point on education? I'll be really quick. We have to incorporate—for want of a better word; I hate the term—young people who are not in education or training. It takes the pot of Mutale. We have to get to that community of young people, because research shows that, due to the level of deprivation, as you know, they are far more likely to be involved in abusive or coercive relationships themselves. So, it's not just—. It is in the submission as well—we wanted compulsory education in schools, but we also wanted specialist organisations that reach the hardest-to-reach to be delivering that as well. Sorry.

[97] **John Griffiths:** No. Thank you very much for that, Frances. That's fine. Bethan, on the national adviser and survivors' views.

[98] **Bethan Jenkins:** Obviously from your evidence, I can see that you

support the creation of the national adviser and welcome that, but, obviously, there's concern around her capacity in terms of it being a part-time position with one support staff and the powers around the national adviser and whether she can sanction organisations that are not adhering to the Act. I'm just wondering if you can expand on those views and whether you would be, at this stage, because it's quite early, wanting to give more time to this national adviser and how she progresses her work. Or would you be calling for a commissioner-type role, as with what we've got with the children's commissioner and the older people's commissioner, so that that role is fully resourced and accountable, potentially, to this place?

[99] **Ms Merrill:** I do feel that if we are saying violence against women, domestic abuse, sexual violence is all our business, we can't sit here and say, 'We haven't been affected by it', because I'm sure at one point in your lives, you've either witnessed it or you've been affected by it, or your relative or your friend has. If you are saying it's society's responsibility, we can't afford to have the position of the national adviser to be a side-kick. We've got to raise that profile and make that post into a commissioner's post, as we've done, for instance for older people, all because we felt older people were on the margins. The only way to do it is to make sure you practise what you are preaching. So, I think we're all in agreement in exactly the things that you've articulated—that we do need to look at this. At the very minimum, make it a full-time post, give it capacity and give it the resources that we need, because otherwise the adviser will just be a laughing stock; people will just look the other way. There's no need to have something that's not working.

[100] **Bethan Jenkins:** But do you think it has the independence, currently? Obviously, it's an adviser, so if she wanted—. Well, I think her evidence, from our cross-party group, is going to be quite critical. But do you think it would have that independence of thought?

[101] **Ms Merrill:** You can't have independence if you don't have capacity—you're compromised. If you can't do something, how can you implement your independence? You can call yourself independent, but you are not effective. So, I think that if we resource that post, there'd be evidence very quickly, because that's a very low-hanging fruit that can be picked very quickly in terms of resourcing that post, at the very minimum, then people will sit up and listen. When she goes into the room, people will say, 'We will listen to her,' and the impact of that post would be starting to be felt. At the moment, it's not workable.

[102] **Ms Beecher:** I think we made two fundamental mistakes: one was the definition, and the other was having an adviser and not a commissioner. We led the way and people were looking at Wales, saying, 'Hang on a minute, this is really important. They are recognising—.' We were leading the UK, and then it was, 'Hang on, we've changed the definition' and we think it's so important that we put a part-time adviser in. It says it all, doesn't it?

[103] **Ms Stamp:** When we're talking about links to the other pieces of legislation that we have, if you look at the resource they have to implement that legislation, then this Act almost feels like a poor relation, because of what we've afforded it. The part-time issue is very relevant, Bethan, as you just said. It needs to be full time, but it needs to be much more than that. It's about the gravitas that that role has. The national adviser advises Welsh Government Ministers across the board, not just the one Minister under whom this team sits. I'm not sure how she would do that with the current capacity.

[104] **Bethan Jenkins:** Can you just expand on—I think it was Welsh Women's Aid that said it—the national survivor participation framework for Wales? Can you say what your thoughts are on that and progress on it?

[105] **Ms Butler:** It's something that our members, from a Welsh Women's Aid perspective, have been calling for for some time. All specialist services, domestic abuse, sexual violence and violence against women services, are founded on survivor engagement, survivor involvement and survivor participation principles. All of my colleagues do that in their organisations on a daily basis, whether that's with adults or whether that's with children and young people. But it's not very often resourced, I have to say, in a way that's effective or sustainable. One of the things we've been calling for not only in the development of the legislation, but in the development and review of the strategy, is to make sure that we've got a sustainable national framework for survivor involvement, engagement and participation—for their voices to be heard, not only on an ad hoc basis, when, maybe, a policy is changing or some focus groups need to be set up very quickly, but on an ongoing—

[106] **Bethan Jenkins:** That hasn't informed the draft strategy at all, so there's no framework for survivors to take part in what the Cabinet Secretary—

[107] **Ms Butler:** The framework was that an independent facilitator worked with services, us and the national adviser particularly, across Wales to hold

focus groups with survivors of all forms of violence and abuse to inform the national strategy.

[108] **Bethan Jenkins:** That was to inform the national strategy.

[109] **Ms Butler:** To inform the national strategy. So, that was a one-off piece of work.

[110] **Bethan Jenkins:** But that hasn't been reflected in the national strategy.

[111] **Ms Butler:** We've been calling for this national framework for a while. We've been talking, again, with colleagues and with our members about the options available, like having regional or local survivor panels, survivor forums, or a national survivor panel. The mention of that framework in our submission is that, in the absence of any framework that's resourced within Wales, from a Welsh Women's Aid perspective, we've got trust and foundation funding, and we've just started a piece of work to engage with survivors to start developing a framework and piloting that in different regions that align with the violence against women legislation being implemented, which is what that refers to, in our submission. There's no national framework, currently. That's where we want to go, and in the absence of Government resources to do it, we're trying to find other ways of doing it.

[112] **Bethan Jenkins:** But that's only as effective as what you can put forward, then, I suppose, and whether you're heard or not, because if it's not a Government-led thing then it's, again—

[113] **Ms Butler:** Absolutely, and that's why we're doing it in areas that are working at the moment really actively on violence against women and the strategy development, like in Gwent, for example. Because there's no point at all, as you indicate, in consulting with survivors if nobody's listening. So, you have to have that leadership and engagement to make sure that those recommendations and the issues being raised are acted on. What we really want to see is that survivors are leading that process, as they identify and they tell public services and they tell Government actually what's wrong and what needs to change, rather than what usually happens, which is the other way around, when statutory services say, 'Well, we want to know about x, y and z. Let's go and ask someone.' So, it's survivors actually leading that agenda, through—

[114] **Bethan Jenkins:** Just to finish, when I visited Calan DVS, last week, I think what was most impactful for me was meeting a survivor who said not enough is being done on repeat offenders. So, she could name, say, five people in her small community who were going around and doing the same thing to various women, but they weren't being picked up in a sort of thematic process, and that's something that could be covered if the survivors were engaged more fully.

[115] **Ms Butler:** Yes. Every refuge in the country would say the same. They would know who is repeat offending.

[116] **John Griffiths:** That's a very strong point, isn't it? Anybody else on these matters? If not, can I just ask BAWSO particularly whether BME communities now are beginning to notice an improvement in services at this stage or not?

[117] **Ms Merrill:** I think, as I said at the beginning of this meeting, we have noticed that public services are becoming responsive to the work that we do. So, that has got a positive impact on the BME communities that we serve. But it's just really at the beginning of the process. I think there's a need for it to be much more planned, and that can only be done if there are national and local strategies that embed the BME needs in those strategies.

[118] At the moment, we are beginning to see public services being responsive, but there is no connectivity between public services being responsive and the BME community's feeling that they are being heard and listened to. Because, actually, public services have been known to perceive black and ethnic minority communities as hard to reach, and the bridge is the specialist services, so, in this case, the bridge is BAWSO. The pathway is still long, so you are more likely to get the police going to social services and social services then coming to BAWSO, and then we would go to the victim. Whereas actually what we need to do is to narrow that pathway so that we have a similar service—that we have a victim coming to BAWSO for help as soon as possible without having to go through so many hoops before finally being supported by us.

[119] **John Griffiths:** Thank you very much. Jenny.

[120] **Jenny Rathbone:** I just want to pick up on the specific incident that one of your survivor groups told me about when I came last week, which was around somebody who'd fled domestic violence, but leaving behind a

disabled child with the perpetrator. When you call the police to get an escort to go and, obviously, take this child to a place of safety, it took six or seven hours to get an escort. Given the age of the child—I think it was either nine or 12—I can't understand why that wasn't given top priority. So, I just wondered if you could explain, using that instance, how much you think the police are able to understand what is urgent and needs instant attention as opposed to something that's important, but needs to wait.

[121] **Ms Merrill:** I think there's been a lot of movement from where we were 20 years ago and where we are now, in terms of the police response to any domestic abuse call-out. But I think that you still need—. The danger is where there is too much emphasis on just training professionals. First of all, there's no resource to train them, so we are expecting the third sector, and BAWSO, to train when we haven't got the resources. We are using our front-line staff to train the police, so when our front-line staff are training the police, there's nobody to do one-to-one support with the victims.

[122] **Jenny Rathbone:** You don't charge the police, then, for that time?

[123] **Ms Merrill:** Well, under the Act—Eleri will probably expand on this—because the Act is requiring, obviously, that public services have to prevent and protect and support, there's a push for the third sector to provide training, and 'ask and act', under which we're setting the pilots, says that providers are going to have to do it. The relationship between local authorities and ourselves is a commission, and we're being commissioned, so sometimes they will ask the third sector to do staff or training, and if we feel we are not able to do it, when they are making decisions on how they are going to be commissioning, they will be looking at the give and take—what are the benefits of commissioning this third sector provider? That's the reality check.

[124] In the case that you've just given, of course there are instances when the police are not responsive because they don't understand the issues around domestic abuse from a BME perspective. We've had issues where, because of their lack of knowledge, understanding or sometimes just lack of empathy, because they are not getting to hear the survivor stories, because they haven't walked in those shoes, they tend to be dismissive when there's a call-out. So, that example you've just given is when the police haven't actually got it that this call-out is urgent, and this can be done through training, but also it has to be done through embedding the survivor voice. So, the police have to have an opportunity to listen and act by listening to the

survivors and victims of FGM—you listened to a victim of FGM when you came to visit us—and that change of thinking. We're not having that in cases when the public services are having their training, because their training is defined sometimes by them and how it's delivered is defined by them. We don't have the resources to bring in survivors, because survivors have to be trained to impart that story. We don't have resources to train the survivors. Ideally, they should be co-training. Survivors and the professionals should be co-training and delivering that, but we don't have the resources. So, we are not there yet.

10:15

[125] **Jenny Rathbone:** Okay. So, is it the experience of other voluntary organisations here today that, if a statutory organisation asks you to train their staff on the Act—? Surely it's a subject of a contract. I can understand the complex—

[126] **Ms Beecher:** Talking from a grass-roots organisation, we very often get requests to train. In Cardiff alone last year, we worked with over 1,400 young people on healthy relationships. We do that because it's really important, and it is part of our mission to get communities and society to understand. But you don't get, as I say, the training. Just as an example, with the Act, we have to release our staff so that our staff can get trained, so that our staff can do things. And it's all down to an understanding that resources have to be found, and unless those resources are properly paid for, it's coming out of somewhere else. So, that's our common experience and has been for—Llamau is 30 years old this year—and it has been for the last 30 years, and we keep banging on about it.

[127] **Mr Merrill:** Just before Eleri picks up, in terms of service providers for FGM, we have got one worker in Swansea with 20 people that she's supporting, and she's also asked to train on FGM. So, she has to make those decisions as to whether she will go and do one-to-one support this afternoon, or agree to go and train professionals. There is a budget there—it's not a zero budget. We just have to acknowledge that there is a resource and you have to invest in that in order to do this properly. Otherwise, actually, you're putting people at risk, because if she decides to go and do that training and she's the only support worker all over Swansea, what if there's a woman who's actually fleeing domestic abuse who she hasn't had time to support, and something happens to that woman? Where does the responsibility lie? So, those are the issues that we have to encounter as the

service every day, because we're being asked to do both—to train and provide a service using the same resource of front-line staff.

[128] **Jenny Rathbone:** Thank you.

[129] **Ms Stamp:** Could I come in briefly?

[130] **John Griffiths:** Yes, sure.

[131] **Ms Stamp:** Just to say that there is a lot of grant and foundation funding that is sought and secured for staff to actually then train public services. New Pathways, for instance, provides training to every intake of police throughout south Wales, Gwent and Dyfed Powys. They also provide health training for GPs and for midwives. That is a regular programme of training and that is not funded, just to be clear—that's funded by the third sector. And exactly as Mutale says, that takes directly away from front-line services. Some of the sexual violence staff—independent sexual violence advisers—are currently working with victims of rape with caseloads of 80 people, and in addition are contributing to training services.

[132] **Jenny Rathbone:** And it's not possible to get further funding from trusts for this important training.

[133] **Ms Stamp:** We do where we can; we certainly get it, but, no, in general terms, it's something that we carry.

[134] **Jenny Rathbone:** Okay, thank you.

[135] **John Griffiths:** Eleri.

[136] **Ms Butler:** I just want to add to that, really. From the Act perspective and the national training framework in Wales, the model that's been chosen to roll out 'ask and act' training, for example—which doesn't apply to the police; it applies to public authorities, so devolved services—is a train the trainer model. So, the expectation is that Welsh Women's Aid as the national contract provider develops and works with regional training partnerships, comprising of specialist services and public services, who will then be trained to cascade training to all public service front-line staff, managers and so on, over the next five years. That's the model and that's the plan. The reality is that, because of, particularly in the public sector, competing priorities—there's lots of training going on around social services and well-being

legislation, homelessness prevention et cetera—the reality is that, where the early adopter sites are trialling this model out at the moment, the actual cascading of the training is left to the third sector specialist services, because lots of the public sector, local government and health, departments are, and have been, and certainly will be, if it rolls out, struggling to release staff to train with them. And we're not saying, I don't think, that specialist services shouldn't be involved in training, because they have the expertise. Particularly from the criminal justice training and police training, which you asked about, which is around domestic abuse, coercive control, female genital mutilation and so on, the national College of Policing, which covers England and Wales, very much recommends that training in the police is co-trained with specialist services for violence against women, domestic abuse and sexual violence, but that should be paid for—for their release. That, I think, is the issue. So, it's making sure that the national training framework in Wales aligns with plans in the criminal justice system for training, and that specialist services expertise is not sidelined, but is also not a voluntary role. It does need to be resourced.

[137] **Ms Beecher:** Yes, because, currently, as I say, we are working very closely, especially in Gwent, but we're having to release staff, so I'm having to ensure that other staff are brought in to ensure that risk is managed. So, as I say, we're having to pay for that, and it gets to a point in time where you can't keep doing it.

[138] **John Griffiths:** Thank you, Frances. Joyce.

[139] **Joyce Watson:** I take on board everything you've said. Have any of you been requested to deliver training on a more regional level? In other words, have local authorities joined together, maybe with health authorities? I'm just trying to think my way around this—and some collaboration that would perhaps help with limited resources.

[140] **Ms Butler:** We have a national training service, but it doesn't particularly relate to your question about local authorities and health. On a regional basis, we've been delivering and are delivering to police—to South Wales Police, for example—we're co-delivering with them around coercive control, which aligns with the College of Policing framework for delivery of that particular training. So, that's a regional approach, and it would be really good if the criminal justice system across police and crime commissioner areas were to have a co-ordinated approach to training, working with specialist services nationally on that basis. At the moment, it's very—it's

different depending on which PCC region you're in. But from a regional basis for local authorities and health, in relation to this Act, and the violence against women work, on a national level, we're only involved in that regional approach in the early adopter sites, which is in Gwent and ABMU health board.

[141] **Ms Beecher:** From a service provider, just to give you an example, we are with Youth Justice Board Cymru, delivering healthy relationships and targeting young men who are showing behaviours that are concerning, and also, young women. And we are doing that more on a regional basis. But, again, that is part of our remit as a charity to do that.

[142] **Ms Merrill:** We're not doing regional training, and even the example that I gave of FGM in Swansea, that's funded from a trust fund—the Waterloo Foundation. So, actually, she could turn around and say, 'That's not my—'. So, we haven't had any regional training. We would love to have that co-ordinated between health and local authorities. That would really be the best model to do it, because then you have the two talking to each other as well, so you have that integrated approach. Ideally, that's what would be a preferred model.

[143] **Ms Stamp:** There are local authority regional training frameworks. We do some regional training on that basis, but not specifically under this remit for VAWDASV. so, it's really about getting, again, that joined-up guidance that goes out to each region to achieve consistency, because that's very much pockets of work.

[144] **John Griffiths:** Okay. Thanks very much for that. Before we end this particular evidence session, there's one matter I'd quickly like to return to, which I think we discussed briefly and you might have mentioned, Frances, under the national strategy heading, which was about funding. I know there's an issue about whether funding should be ring-fenced for services. I wonder if you could say a little bit more about your calls for that, and whether there are other countries where that ring-fencing takes place, as far as you're aware.

[145] **Ms Beecher:** Well, I think the funding is quite complex, and, as I say, I can only really speak with some authority on the main funding stream for refuges, Supporting People—and Wales has led the way. England long ago lost supporting People, and so a lot of support providers fall to the wayside. So, Wales should be commended for that. Currently, SP is still ring-fenced in

Wales. However, SP, it is an amazing programme, which has proved time and time again—and I won't bore you—every time you spend money on it, you save at least twice as much on other services. But, I think what we are looking for is a recognition that sustainable funding for VAWDASV needs to be looked at wider. For example, Supporting People doesn't cover any element of support for survivors of sexual violence, and the question is: why doesn't it? We need to join that up.

[146] So, we are calling for ring-fencing, but we are calling for a sustainable funding stream that recognises, right the way across this Bill, that accommodation, refuge provision, supported accommodation and outreach all needs to be incorporated. Because, the reality is, what we can't forget is, under 'ask and act', we are going to see more demand. Just as one support provider, over the last year and this year, we saw a 56 per cent increase in demand for our services. At the same time, we saw a 37 per cent decrease in the funding we've got, because of cuts. We've all heard in the headlines today about the issues in the care world; the support world isn't that far behind, and we really need to acknowledge and accept that. But I think Eleri will probably—

[147] **Ms Butler:** Just to support what Frances has said, really. Even though we're a strong advocate and supporter of ring-fencing the Supporting People programme—it provides essential services for some of the refuge delivery—it doesn't cover refuge delivery costs in its entirety though. Even when it's ring-fenced nationally, commissioning decisions are made regionally and locally. So, even this year, in our refuge services, in terms of Welsh Women's Aid members, 46 per cent of services had their funding cut this year. And that followed over half of them last year having some of their funding cut. So, they're really, really down to the wire in relation to their capacity. And, as Frances said, 'ask and act' and various other initiatives under the strategy and legislation will increase demand to specialist services, and I think that's really important.

[148] But, for us, it's not only about making sure that that ring-fencing Supporting People nationally also cascades as it's commissioned locally, but it's also about looking at criminal justice funding, community safety funding, public health, NHS, social care, education funding, and pooling those resources. There should be a model for joint, strategic commissioning, to have a model for sustainable funding for specialist services, because they are the bedrock. We've been working in Wales for 40 years plus on these issues, and that joint investment in a sustainable third sector of services across the

country is really vital, otherwise the Act is not worth the paper it's written on, frankly. I think that's really vital.

[149] You asked about examples in other countries. The loss of ring-fenced funding in England has led to services closing, which has been a problem. What Westminster is trying to do now is to allocate millions of pounds to stop services closing, and we don't want to be in that point in Wales, this year, next year, or in five years' time. Scotland have got an interesting model for domestic abuse and sexual violence, because they've got a national ring-fenced pot of funding in Government, as well as local commissioning. So, for example, for domestic abuse services in Scotland, about 60 per cent of their funding comes from local sources, 35 per cent comes from national Government, and they've ring-fenced funding for sexual violence, for domestic abuse, support for children and young people and for violence against women, as an agenda. And they've just allocated an additional £20 million from the national budget, which they expect to continue until 2021. So, I think it's a combination of national ring-fenced funding, local, and strategic commissioning across the board.

[150] **John Griffiths:** Okay. Thanks very much for that. I'm afraid we have to end there, but thank you very much for your evidence today. You will be sent a transcript, to check for factual accuracy. Thank you very much indeed. We're going to have a very short break, for literally two minutes—a comfort break—and then, please come straight back. Thank you very much.

10:37

**Ymchwiliad Ôl-ddeddfwriaethol i Ddeddf Trais yn erbyn Menywod,
Cam-drin Domestig a Thrais Rhywiol (Cymru) 2015:**

Sesiwn Dystiolaeth 2

**Post-legislative Inquiry into the Violence against Women, Domestic
Abuse and Sexual Violence (Wales) Act 2015: Evidence Session 2**

[151] **John Griffiths:** Okay. The committee, then, will move into its second evidence-taking session of the day, with third sector representatives of education and young people. Thank you all very much for coming along today. Would you like to introduce yourselves, please?

[152] **Ms Laing:** I'm Vivienne Laing. I'm the policy and public affairs manager for the National Society for the Prevention of Cruelty to Children Cymru

Wales.

[153] **Ms Elin:** Fflur Elin, llywydd i **Ms Elin:** Fflur Elin, National Union of Undeb Cenedlaethol y Myfyrwyr Students Wales president.
Cymru.

[154] **Ms O'Shea:** Claire O'Shea, external affairs manager, NUS Wales.

[155] **John Griffiths:** Okay, well, thanks very much for coming in. Rather than have opening statements, we will move straight to questions, given the time constraints. If I could begin, to ask you really about your general views on the implementation of the Act, whether the pace of the implementation is everything that is necessary and whether you think there are any particular issues that you'd like to highlight this morning.

[156] **Ms Laing:** Okay, then. Well, NSPCC feels that this is really a landmark piece of legislation, and we certainly welcomed it in terms of improving the arrangements for prevention, protection and support for victims and their children. However, you know, we think there are some problems with the implementation. I think it's missing a lot of those opportunities to be that groundbreaking piece of work, to really change and be that catalyst to stop domestic abuse, sexual violence and violence against women, particularly when we look at the deadlines—the deadlines for the national strategy and the various bits of guidance that haven't been published, and we've got local strategies that need to be published in six months. So, I'm really concerned about the timing, about the opportunities that are not being seized, to make this an effective piece of legislation.

[157] **Ms Elin:** Similarly, we welcome the ideas and the ideology behind the Act and that the Welsh Government are clear that they really do want to stamp out violence against women and domestic abuse. We do think that ideology is good, but there needs to be more clear guidance on how local authorities can actually go about dealing with these issues, and, obviously, in the context of cuts, and cuts to local authorities, we think there needs to be a kind of clear guidance on what and how the local authorities need to deliver on this strategy.

[158] **John Griffiths:** Thank you, Fflur. Just in terms of guidance, the fact that guidance on commissioning hasn't yet been issued has been raised with us. Would you have any comments to make on that?

[159] **Ms Laing:** Yes, I'm concerned because local areas are starting to make decisions about what services they're funding. So, they're making those decisions without that guidance. Local areas need that guidance so that they're aware of what, as a minimum, they need to be providing. If that guidance isn't there and they're making their decisions, we are again missing opportunities.

[160] **John Griffiths:** I wonder if any of you would have any views on whether the different component parts of the Act present any particular problems in terms of implementation, whether it's domestic abuse, violence against women or sexual violence, perhaps. Would you make any particular points regarding any of those around implementation of the Act?

[161] **Ms Elin:** I guess, in terms of implementation, again, we'll come back to the guidelines, and the guidelines about how to tackle these issues need to be based on evidence and best practice on how these issues have been tackled in Wales, but also in other countries. So, I think that, in terms of problems with potential implementation, without those guidelines and checks in place to make sure that local authorities are delivering on the strategy properly, then that could obviously be a potential barrier.

[162] **Ms Laing:** We feel that the Act actually names the different strands of violence against women, domestic abuse, sexual violence, but the guidance so far focuses on domestic abuse. Sexual violence and violence against women is largely missed out. I mean, sexual violence is an area that's very complex and we just don't think the strategy does it justice, or the Act. Are you going to be asking questions about the strategy later on, because I've got quite a lot of comments about FGM?

[163] **John Griffiths:** Yes, in fact, we'll be moving on to the national strategy now and I think Sian has some questions.

[164] **Sian Gwenllian:** Fe fyddaf i'n **Sian Gwenllian:** I will be speaking in siarad yn Gymraeg. Fe fyddaf i'n Welsh. I will focus on the strategy, or canolbwyntio ar y strategaeth, neu'r the lack of strategy, to be honest. I'd diffyg strategaeth, a dweud y gwir. just like your views about the draft Rwyf eisiau eich barn chi ar y fersiwn version that has reached us already. ddrafft sydd wedi cyrraedd yn barod.

[165] **Ms Elin:** Rwy'n meddwl bod **Ms Elin:** I think there's a lot in the yna lot yn y strategaeth. Yn amlwg, strategy. Clearly, they want to tackle

maen nhw'n moyn taclo'r problemau rydym ni'n edrych arnyn nhw. Ond rwy'n meddwl, eto, fel y dywedais i, gyda phethau fel hyn, maen nhw mor gymhleth—mae cymaint o'r problemau sy'n dod allan o hyn yn bethau sy'n *ingrained* ynom ni fel cymdeithas—mae wir angen i sut rydym ni'n delio â nhw fod wedi'i seilio ar dystiolaeth. Rwy'n meddwl efallai dyna beth sydd ar goll ychydig bach yw, sut yn union rydym yn mynd i fynd i'r afael â'r problemau.

the problems that we're looking at. But I think, again, as I said, with things like this, they're so complex—so many of these problems that come out of this are ingrained in us as a society—there is a real need for how we deal with them to be based on evidence. I think that's perhaps what is missing a little bit, is how exactly we're going to address the problems.

[166] **Ms Laing:** Could you repeat the question?

[167] **Sian Gwenllian:** Roeddwn yn holi ynglŷn â'r strategaeth ddrafft ac yn ceisio cael eich barn chi ynglŷn â beth sydd yn y strategaeth ddrafft. A ydy hi'n ddigon clir? A ydy hi'n ddigon cadarn i symud ymlaen?

Sian Gwenllian: I was asking about the draft strategy and seeking your views about what that draft strategy contains. Is it sufficiently clear? Is it sufficiently robust for us to move forward?

[168] **Ms Laing:** Okay. Do I take this off now, do I? I don't know. I'm speaking in English anyway.

[169] **John Griffiths:** You certainly can do; I mean, it's entirely up to you.

[170] **Ms Laing:** Yes, because it's all echoing. Okay then, we believe the national strategy should provide national direction, strategic leadership and guidance to local areas, but we're disappointed because we feel that the draft strategy falls far short of that. We'd like to see significant strengthening. We are very concerned about some of the phrasing in there. It's very much full of 'continue to', 'improve the way', 'work with' and 'support'. Things are just unclear. We want actions and objectives that are robust, clear, smart and outcome focused. I could give you some examples. There's one in the good practice guide about supporting schools in educating children and young people on the importance of respect and consent in a relationship. Yes, I agree with that. But, I would like to see something much clearer, something like reviewing how successfully schools have implemented the good practice guide and then working with schools to develop an implementation plan,

which includes where they get support, where they get training and how it is going to be disseminated.

10:45

[171] So, everything is a bit woolly, and so I'm very concerned about that. I'm also concerned about the definitions. I share the concerns that the violence against women group have about the definition. We think the definition should be the United Nations definition, so it is placed clearly within the equality and human rights framework. We are concerned at what, from the strategy, looks like a lack of a cross-governmental approach. The Act does say that Welsh Ministers must prepare and publish the strategy. So that, to me, implies that other parts of the Government are playing a part, because the VAWDA team is too small to do it. We need the other parts of the Government and the other Ministers to play a part.

[172] I am concerned about how the local strategies will link with the national strategies. There's no clarity about that, which is why we need a strong national strategy to form the framework and provide the guidance to all the local strategies. But, there is no clarity about the links between them.

[173] We would like to see a rights-based approach. Obviously, we are coming at it from a children's perspective. We would like separate sections for children and young people, and we would like to see that the United Nations Convention on the Rights of the Child framework is in place. They've published the Welsh language impact assessment, but I haven't seen the children's rights impact assessment. So, I think it's essential that that is published. We would just generally like to see a clearer focus on children. We want to see those joined-up approaches to working with children and their families. We want to see those objectives clear and focused.

[174] I've got something to say about FGM and child sexual abuse, but I'll wait until the other questions.

[175] **Sian Gwenllian:** Just a few follow-ons from what you have said there: do you think that, within the timescale that we've got now, the Government is going to be able to improve the strategy along the lines that you were implying?

[176] **Ms Laing:** I have suggested in my response to the Government that I would rather see a good national strategy, and it be delivered late, than just

little tweaks around the edges to this current one. I want to see a good national strategy, and we need that if we're going to make that step change towards ending violence against women, domestic abuse and sexual violence. So, I would rather see it late. I can't see how they can do it in two weeks.

[177] **Sian Gwenllian:** How involved have children, in particular—and I will ask the same about students—been in having their voice heard in the strategy?

[178] **Ms Laing:** Well, I'm not aware of any involvement of children. We have consulted with children. We have put those views into the different bits of responses we've done to the different elements. I applaud Welsh Women's Aid and the consultation with survivors. I can see that the quotes are included, but I can't see that the recommendations from that report are included. But, I don't think that children and young people have been consulted, and I think it's essential that they are. But, again, how are we going to do that in such a short time? I would rather see a later strategy.

[179] **Sian Gwenllian:** Involving children and young people, how would that strengthen the strategy?

[180] **Ms Laing:** Well, we can only provide—. I mean, I can't see a very clear focus on children in the strategy anyway. So, it would ensure that—. I mean, first off, I want a clearer focus on children. Witnessing domestic abuse is child abuse. We know that. The definition has been changed of harm on a child. Those children need support. The only way we can respond properly in the national strategy and the local strategy is by asking their views. As they haven't been asked, as far as I'm aware, we can't respond properly to it. That's why they feature so little in the strategy, I believe.

[181] **Sian Gwenllian:** Mi wna i ofyn yr un cwestiwn i Fflur Elin. A ydych yn teimlo bod llais myfyrwyr yn dod drwyddo yn y strategaeth yma? **Sian Gwenllian:** I will ask the same question to Fflur Elin. Do you feel that the voice of the students comes through in this strategy?

[182] **Ms Elin:** Wel, rydym wedi gallu bwydo i mewn, ond nid ydym yn teimlo wastad fod beth yr ydym wedi'i fwydo i mewn yn cael ei adlewyrchu. Er enghraifft, fe **Ms Elin:** We've been able to feed in, but we haven't felt all the time that what we have fed in is reflected. For example, we have called for universities to have to provide

wnaethom ni alw am brifysgolion i orfod rhoi hyfforddiant i bobl ar *consent*. Nid yw hynny i'w weld yn y strategaeth. Felly, er ein bod ni'n falch ein bod ni wedi gallu bwydo i mewn, nid yw popeth wedi cael ei adlewyrchu. Hefyd, yn amlwg, rydym ni ddim ond yn cynrychioli'r bobl ifanc hynny sydd mewn addysg, nid y bobl ifanc sydd ddim mewn addysg. Rwy'n credu y gallai mwy fod wedi cael ei wneud. Rwy'n credu mai beth sy'n bwysig gyda'r materion yma yw cael ymchwil i'r profiadau ond hefyd i sut i ddelio â'r problemau. Felly, rwy'n credu y gallai mwy gael ei wneud yn y fan yna.

[183] **Sian Gwenllian:** A ydych chi'n meddwl bod yna amser yn yr amser cyfyngedig yma i gryfhau'r strategaeth? Neu a ydych chi o'r un farn efallai y byddai'n well gohirio?

[184] **Ms Elin:** Ydw. Eto, yn yr un ffordd, er enghraifft, nid oes llawer o ymchwil wedi cael ei wneud yn gyffredinol, nid jest gan Lywodraeth Cymru, i brofiadau myfyrwyr mewn neuaddau a sut mae *sexual violence* yn digwydd mewn neuaddau neu mewn *shared residence* neu o ran hen bobl mewn *care homes*. So, mae hynny'n un peth rŷm ni'n meddwl sydd angen cael mwy o sylw gan yr adroddiad. Ond, eto, mae'n rhywbeth nad oes llawer o ymchwil wedi cael ei wneud iddo. Yn sicr, mae angen gwneud mwy o waith i allu gwneud yn siŵr bod y strategaeth yma yn strategaeth genedlaethol, gref ond

training on consent. That isn't seen in the strategy. So, even though we we've been able to feed in, not everything has been reflected. And, clearly, we only represent those young people who are in education not those who aren't in education. I think more could have been done. I think what's important about this is the need to have research into experiences but also how to deal with the problems. So, I think that more could be done in that respect.

Sian Gwenllian: Do you think that there is time in this limited timescale to strengthen the strategy? Or are you of the view that it would be better to delay it?

Ms Elin: Yes. Again, in the same way, for example, not much research has been conducted generally, not just by the Welsh Government, into students' experiences in halls of residence and how sexual violence happens in halls of residence or shared residences or in terms of elderly people in care homes. So, that is something we think needs more attention by the report. But, again, it's something where not much research has been undertaken. Certainly, there is a need to do more work to ensure that this strategy is a national, robust strategy but also one that provides good suggestions on how to address the

hefyd yn un sy'n rhoi awgrymiadau problems.
da am sut i fynd i'r afael â'r
problemau.

[185] **Sian Gwenllian:** lawn, diolch. **Sian Gwenllian:** Right, thank you.

[186] **John Griffiths:** Bethan.

[187] **Bethan Jenkins:** I'm just really concerned about what people have been saying with regard to children not being consulted, because, obviously, with the United Nations Convention on the Rights of the Child being streamlined through legislation it would not appear to be a very good way of setting an example from the Welsh Government, to not have consulted with young people. Do you think there are grounds to take action on that level because, obviously, in other situations—and I'm sure other AMs have been in similar situations—I have communicated with councils in my region who have failed to do that and we've made a big campaign of that? I'm just wondering, if this is so fundamental for children to have not been consulted, what your views are on taking that forward. I hear you say that you want to delay it, but is that delay going to mean that you will be content then if children are consulted or not?

[188] **Ms Laing:** Well, no. I'm suggesting it's delayed so that all these necessary consultations can take place. I think it's absolutely fundamental and, yes, that's why I want to see the children's rights impact assessment as well, because I haven't seen that published.

[189] **Bethan Jenkins:** But if it isn't delayed and that doesn't happen, what would be your view then of the strategy if there isn't a child impact assessment and there isn't consultation with young people?

[190] **Ms Laing:** I would have to take advice.

[191] **Bethan Jenkins:** Right. Would that be the same for the NUS?

[192] **Ms Elin:** I think that, obviously, there are some issues that need to be addressed with the strategy and we want to see those issues addressed. That's why we're raising them now.

[193] **John Griffiths:** Could I just ask you, I think you said earlier that, in feeding in the NSPCC's views as part of the consultation around this strategy,

you would've consulted children?

[194] **Ms Laing:** Yes. We've provided lots of services, including one called Caring Dads: Safer Children, where we work when there's suspicion. It's a parenting programme where we are somehow aware that there is some domestic abuse. So, we work with the fathers and that's a very effective programme. A lot of fathers have reduced their—. It's an effective way of reducing domestic abuse incidents in the home. And we've also provided other services for mums and their children recovering after the perpetrator has left the home. We've consulted them on lots of the elements of the Act and then fed that in in our consultation responses.

[195] **John Griffiths:** I see, okay. Yes, Joyce.

[196] **Joyce Watson:** Perhaps it's me, but I seem a bit unclear about exactly what's being asked for in terms of children's engagement, and I just need a bit of clarity in my own thinking really. I assume I'm right in thinking that all agencies who deal primarily with children would've been asked for their comments on this Bill and they would have done that. So, what more is it that you particularly, because you represent children in the NSPCC, feel should have been done that hasn't been done because I don't think it's entirely true that—. That's the bit I'm struggling with.

[197] **Ms Laing:** Can I just say I don't think it's down to us in the third sector to do all this work? I mean the work with Welsh Women's Aid, I believe, was commissioned, and that was adult survivors. I mean, we've contributed lots of our time and resources, as lots of third sector organisations have done, to consulting with our service users, responding to all the different requests for policy responses and, you know, responses to the draft guidance, all the different ones. But, you know, we've done our bit, I think. I think that the Government, as preventing violence against women and domestic abuse is so crucial in children and young people's lives, should have commissioned it. We've contributed an awful lot already.

[198] **Joyce Watson:** So, it's the commissioning bit, you think, that was missing. That's the bit I was trying to—

[199] **Ms Laing:** Yes.

[200] **John Griffiths:** Jenny, did you want to come in?

[201] **Jenny Rathbone:** To pick up with both witnesses: No. 1, Fflur, you particularly mention revenge porn as being an issue, which unfortunately is also a problem in our secondary schools, but it's also a problem in universities. Are there any examples of best practice amongst Welsh universities that could perhaps be shared?

[202] **Ms Elin:** Welsh universities are starting to look into policies on sexual violence, often led by student unions who call on the universities to do this work. But again there is a big problem in society, in which things like revenge porn are seen as acceptable by too many people, and even people within universities. We're not actually seeing universities doing enough to combat these sorts of issues. So, what we called for when we responded to the strategy was training for young people in universities, and anybody who attends university, on consent, and actually what we've been looking into is the bystander initiative in which—. When you've left school, you've ingrained a lot of these societal problems and a lot of these unhealthy attitudes towards sex and relationships, and by then it's too late to give sex and relationships education that's inclusive and expect that to change everything. So, what we need is education that is targeted at changing societal attitudes. And this is what the bystander research looks at—how we can target those sort of behaviours and change them. There are universities in England who have started to do this work, and there is a lot of research being done by an English university that actually produced the bystander initiative. But I think that we actually need to see universities doing more to tackle the societal issues, not just putting provisions in place to punish those committing the crimes.

[203] **Jenny Rathbone:** So is there a particular university in England that is—? Which one is that?

[204] **Ms Elin:** Yes, I can't actually remember the name, as I was talking—

[205] **Jenny Rathbone:** Perhaps you will let us know.

[206] **Ms Elin:** I can pass that along, yes.

[207] **Jenny Rathbone:** Okay.

[208] **Ms Elin:** Oh, the University of the West of England—sorry.

[209] **Jenny Rathbone:** Okay, so not very far away from us. That's very useful information. Just coming back to FGM and your concerns about how well the

Act is focusing on this issue, could you just tell us why the Wales honour-based violence strategic leadership group hasn't proactively submitted evidence, because, obviously, it was an open invitation for evidence?

[210] **Ms Laing:** That I don't know, I'm sorry

[211] **Jenny Rathbone:** Okay. You're not a member of that group, then.

[212] **Ms Laing:** One of my team is on the FGM forum and strategic leadership group, but I think it's quite a small group. What I would want to say about that FGM strategic leadership group is the Act, and the work that has been done by the civil servants in this area on FGM, is the envy of the other UK administrations. And what I'm concerned about is that, when I look at the strategy, it's broadly missing—FGM is broadly missing. There's a statistic about it and something about raising awareness, but, apart from that, it's broadly missing. The strategic leadership group has got a detailed delivery plan, and so I can't quite understand why that's not included as an action in the strategy—it just needs to be under objective 1. And the other thing is that BAWSO and NSPPC worked with 16 young women on the development of campaign materials, commissioned by Welsh Government again, called Voices over Silence, and that is supposed to change attitudes, spark conversations in communities and in schools. The dissemination of that is needed, and I don't know why that's not in the strategy. I'd like to see it in the delivery plan.

11:00

[213] **Jenny Rathbone:** Was this based at Fitzalan High School, or is that a separate thing?

[214] **Ms Laing:** No. BAWSO have got a young people's group. So, they worked with us and we developed—oh, I must have dropped it. I've got a lovely poster, a video and leaflets that need to be disseminated if we really are going to try and change attitudes towards FGM.

[215] **Jenny Rathbone:** Indeed, but when I went to BAWSO to listen to stakeholders, there was an issue raised by one person saying that we need to be careful that this isn't used as a way of bullying certain BME groups on the grounds that these appalling practices are going on in x, y and z groups. So, it's a complex issue in schools.

[216] **Ms Laing:** Yes, it is. I agree.

[217] **Jenny Rathbone:** Surely education goes beyond schools and we ought to be doing a lot more in communities—and the mosques.

[218] **Ms Laing:** Absolutely. That's what these materials are for.

[219] **Jenny Rathbone:** Okay. So, the strategy group's offer isn't just about schools.

[220] **Ms Laing:** No.

[221] **Jenny Rathbone:** Okay.

[222] **John Griffiths:** Okay. Can I bring Joyce in at this stage?

[223] **Joyce Watson:** Yes. Just briefly on FGM—and I mentioned you yesterday in my speech, about that particular project—linking up again to what Fflur said earlier on, looking at examples where things have been done perhaps on an international level as well to address the diversity, and coming back to what you've just said, Vivienne, about FGM and almost being one line in there, would you like to perhaps give us—because we're all pretty new to how to work within safe bounds, and that's what Jenny was talking about: dissemination—some more detail than we've already had, if you have it, of course, as a group, about where that's been done?

[224] **Ms Laing:** Yes. Shall I send a little note?

[225] **Joyce Watson:** That's what I meant—do a note.

[226] **Ms Laing:** Yes, I'll send a little note with the detail.

[227] **John Griffiths:** If you could send us a note, I think that would be useful for the committee. Okay.

[228] **Ms Laing:** Yes, I will send a note on that.

[229] **John Griffiths:** Okay. Could I also ask perhaps, NUS, in your evidence you raised issues around LGBT and whether the strategy really is dealing with those issues sufficiently, so would you like to perhaps elaborate on that?

[230] **Ms Elin:** Yes. There's a link to the research you did in, I think, 2014 on the experience of the LGBT+ community with domestic violence. That raises a lot of issues. So, for example, how it is often more difficult for those in the LGBT community to access services provided to help people deal with sexual violence and domestic abuse. I think that just linking to the strategy and that evidence isn't really enough because most people probably will only read the one strategy focused on this. So, I think that more could have been done to bring that research in, and not just bring that research in but to convert that into recommendations on how to make the services accessible to those within the LGBT community. I think, as well, that there isn't enough emphasis on how important SRE is for the LGBT community. So, there is a big problem currently in which SRE isn't inclusive and doesn't talk enough about different sexual and gender identities. If we're not including that in SRE, then our SRE isn't inclusive. We do see that causing deep-seated issues for LGBT people, particularly as they grow older and go into life. They're some of the things that we see reflected then with issues of domestic abuse.

[231] I think something else that isn't clear enough is that, those people—so, for example, teachers who will potentially be teaching SRE, teachers anyway in school who are working with young people and children, those who work in services available for those suffering sexual violence and domestic abuse—need training on how to deliver inclusive services, and not just for LGBT people but also for those from BME backgrounds, and especially where you see intersectionality. So, BME members that are also LGBT, for example, and the difficult barriers and different barriers that they face. Like I said earlier, we learn a lot as we grow up, and the media, pornography and normalised societal attitudes—we've all ingrained them and we're all learning them, and it is hard to unlearn these. That's why it isn't just enough to put SRE into schools. We need to be providing training, particularly for those dealing with young people, and those who experience domestic abuse and sexual violence, to be able to understand those internalised problems and unhealthy attitudes and then to obviously be able to move past them.

[232] **John Griffiths:** Okay, thanks very much. Jenny.

[233] **Jenny Rathbone:** I just wanted to pick up on the work you've done with schools. What role do you think Estyn should play? We weren't able to get evidence from them today, because they weren't available. So, you know, they're the ones who inspect all schools and—

[234] **Ms Laing:** I understood there was supposed to be a themed inspection on this, and I'd like to see that.

[235] **Jenny Rathbone:** A themed inspection on domestic violence and sexual violence.

[236] **Ms Laing:** For the purpose of the Act, yes.

[237] **John Griffiths:** Okay. Well, this takes us into education, and I think Joyce has some questions on this.

[238] **Joyce Watson:** This brings us nicely into education and I won't re-ask the question that you've answered. What I will ask is: have any of you had any input into the Donaldson review?

[239] **Ms Elin:** We sit on one of the Donaldson stakeholder groups. One of the things that I think is important around Donaldson is that, obviously, Donaldson wants to create a curriculum that isn't as prescriptive and to give schools and local authorities more opportunity to, kind of, shape their own curriculum. I think one of the issues with SRE is that, whilst we wouldn't want to go against the principle of Donaldson giving more freedom to schools—what an inclusive SRE is can be very different from person to person because of their own experiences, perhaps their own prejudice, religion can sometimes colour how you look at an inclusive SRE. So, we think that SRE does need to at least have strict guidelines on what has to be included in SRE. It won't work if LGBT identities aren't discussed within it, it won't work unless we discuss consent and healthy relationships, and how to have safe sex also. But I think that, whilst we are inputting into Donaldson and we understand that they want to give more freedom, on this, just like literacy and numeracy are crucial things that young people need to learn, we think SRE is also something crucial that has to be taught in school curriculums.

[240] **Ms Laing:** And we agree with that, but, first off, to answer your actual question about how much input—. We have responded to the consultation on Donaldson, making these requests, and we have met with the civil servants and they have told us that they will involve us. But we think, if there's one thing that needs to be done to prevent violence against women, domestic abuse, sexual violence, it's to introduce core, mandatory training on healthy relationships, taught from a gender-equality perspective, co-produced with children and young people, and it's got to be delivered by appropriately trained practitioners. That could be a dedicated personal and social

education teacher, or an appropriately trained SRE/HRE teacher. I've seen both of those examples in some schools, but, obviously, at the moment, because PSE is taught from a PSE framework and there's a wide menu, schools decide what they're going to cover out of that menu, and so we can't at the moment guarantee that healthy relationships education is delivered. We think it's absolutely essential that it's mandatory—very disappointed that that wasn't on the face of the Act. We think that's absolutely essential and that's the one thing that we can do in Wales to make sure that we start putting a stop to this abuse and violence.

[241] **Joyce Watson:** Do you agree with that?

[242] **Ms Elin:** Yes, I think SRE in schools should be mandatory and should be an essential part of the curriculum.

[243] **Joyce Watson:** Okay. I think that covers the education.

[244] **John Griffiths:** Okay, well—

[245] **Joyce Watson:** No, sorry, except for one angle of the education, which you briefly mentioned, about those who are not in school. So, how do we educate those who are not in mainstream school? How would you? Do you have any involvement in any of that?

[246] **Ms Laing:** It's not an area that we work in.

[247] **Ms Elin:** Again, it isn't something that—

[248] **Joyce Watson:** Okay, that's fine.

[249] **John Griffiths:** Okay, then, if we move on to the national advisor and survivors' views, I think Bethan has some questions.

[250] **Ms Laing:** Can I just say something about good practice guidance? Is anybody going to be asking me about that or are we going on to the—? I'd like to say something—we're strongly supportive of the good practice guidance that's been issued. We think it can be very helpful, but we're unsure about how it's being disseminated. We're unsure whether schools are aware of it, and I think that is something that needs to be found out. You've got the power to find out how that has been disseminated.

[251] **John Griffiths:** Okay. Thanks for that Vivienne. Bethan.

[252] **Bethan Jenkins:** I'm just asking about the national adviser and survivors' views, really. Obviously, we've heard from other witnesses this morning telling us about the fact that they believe, potentially, that the national adviser should have more powers in relation to sanctioning and in relation to holding authorities to account. I'm just wondering if you empathise with those views. I think the NUS said so, but I think NSPCC were a bit more hesitant to comment at this point in time. So, just your initial views on that.

[253] **Ms Laing:** Well, we've strengthened up our views since—

[254] **Bethan Jenkins:** Right, okay.

[255] **Ms Laing:** —since I put that evidence in. I mean, we still think that that role has the potential to make a big contribution to the strategic direction and leadership, both nationally and locally. But after rereading the powers of the national adviser, all she can do is advise and ask for information. So, she hasn't got—. Other commissioners do have those stronger powers and I would like to find out—. I know that the national adviser—

[256] **Bethan Jenkins:** But she's not a commissioner; I guess that's probably why.

[257] **Ms Laing:** Yes.

[258] **Bethan Jenkins:** So, you would want it to be a commissioner role.

[259] **Ms Laing:** Yes.

[260] **Bethan Jenkins:** Did you say that at the time of the Act? And did other organisations call for a commissioner?

[261] **Ms Laing:** Yes, I think so. I think we were a bit behind on that one, but we're there now.

[262] **Bethan Jenkins:** Okay. So, you didn't at the time.

[263] **Ms Laing:** No, we didn't at the time. But we, now—. I've only got to look at the national strategy, because I'm aware that the national adviser has

given her views about what should be in there, but I have no idea whether the Welsh Government has actually listened. So, I don't know. I think it needs to be stronger, I think it needs to be a commissioner and I think she needs—. She's part time, she hasn't got any resources, she's got the power to commission research, for instance, but without any resources and only working three days a week, and I can't see how she can possibly do that. So, she needs to be a commissioner, she needs to be full time and she needs to have some resources to do her job well.

[264] **Bethan Jenkins:** Okay, thanks. Fflur?

[265] **Ms Elin:** We said in our consultation response that we think they should have more power to sanction companies that aren't making sure that they are tackling sexual violence in the workplace. But, also in terms of research, again, this is something that I think is missing from lots of aspects. Not in this commission only, but across the globe, there is a problem with sexual violence and domestic abuse, and I don't think there is enough research being done into how we tackle it. So, I think they should have more power to conduct research.

[266] This can't be the end-answer. I think this is something we'll have to keep looking at and keep working on. So, for example, there needs to be more research done into people's experiences in halls of residence and shared homes. Also there needs to be more research on who is best placed to deliver SRE in schools; that's something that currently has a few options available for it, and both have pluses and minuses, but without that evidence to prove which is the most effective—

[267] **Bethan Jenkins:** So, you think that the national adviser, specifically, should be carrying out that type of research.

[268] **Ms Elin:** I think that type of research needs to be done and if that was the best place to do it, then—. But I wouldn't have a strong view on where.

[269] **Bethan Jenkins:** And with regard to survivors' experiences, obviously we heard from Women's Aid about the fact that they're creating their own framework for consultation with survivors in the absence of the Government doing so. Is that something that you think that they should be doing or do you think that's something that should fall with the national adviser or with Government itself?

[270] **Ms Laing:** Probably jointly. Probably both, but, sorry, I'm not sure.

[271] **Ms Elin:** I'd have to say I'm not sure, sorry.

[272] **Bethan Jenkins:** So, you wouldn't have a particular view, only that it would be done somewhere within the mix of—. What I think Women's Aid were saying was that they had to do it in absence of the fact that Welsh Government were not creating a framework to consult with survivors. So, do you think that it should be for the third sector to do, or do you think it should be for Government to carry out that work as part of their strategic thinking?

[273] **Ms Elin:** I think there needs to be partnership working. Obviously, it works best when there's partnership work between the Welsh Government and the third sector. So, like we can see today with the third sector giving their evidence on their elements of expertise. But then there has to be some element of the Welsh Government commissioning research to look into certain aspects.

[274] **Ms Laing:** I feel that the third sector do an awful lot of bringing service users and survivors to Welsh Government. We think that they should commission and that the adviser should have power to commission research.

[275] In terms of healthy relationships education, I would like to think—. I don't know the answer to this—whether the pilot schools are actually piloting healthy relationships education—the new pilot schools for the new curriculum. I would like to think that they're doing that, but I don't know.

11:15

[276] **Bethan Jenkins:** That's another question for us to ask as well, then.

[277] **John Griffiths:** Indeed. Okay. Just finally, in terms of resourcing—resourcing of the national strategy, funding of the national strategy and, indeed, the national adviser's capacity and office—would you have views as to whether those resources are adequate or not?

[278] **Ms Laing:** I am not aware—it's not made clear anywhere what budget is available. A key plank is going to be services, service provision, and the anecdotal evidence I have is that those services are going month to month and are having to suffer budget cuts. So, I would like to see what the budget

is. I think if we're going to make that difference, it needs to be well funded, in all the different strands: the perpetrator work, the services, the adviser post, the research and consultation with—you know, everything. It's done on a shoestring at the moment.

[279] **John Griffiths:** And Fflur.

[280] **Ms Elin:** Firstly, it's such a massive and ingrained problem in society that we do think, as a minimum, you need somebody full time tackling it. Also, local authorities need to be better resourced to deal with it and also mandated to spend a certain amount on these resources, because the problem is, when cuts happen to local authorities, the first things often to go are those social services that are there to tackle issues like this.

[281] **John Griffiths:** Thank you very much for your evidence this morning. You will be sent a transcript to check for factual accuracy. Thank you very much indeed.

[282] The committee will now break until 11:30.

*Gohiriwyd y cyfarfod rhwng 11:16 ac 11:30.
The meeting adjourned between 11:16 and 11:30.*

**Ymchwiliad Ôl-ddeddfwriaethol i Ddeddf Trais yn erbyn Menywod,
Cam-drin Domestig a Thrais Rhywiol (Cymru) 2015:
Sesiwn Dystiolaeth 3
Post-legislative Inquiry into the Violence against Women, Domestic
Abuse and Sexual Violence (Wales) Act 2015: Evidence Session 3**

[283] **John Griffiths:** We'll move into our last evidence session of the morning, then. I'm very pleased to welcome Sian Morris of Neath Port Talbot County Borough Council and Joy Williams from the Welsh Local Government Association. Rather than have opening statements, we'll move straight into questions. Perhaps I can begin by asking about your general views on implementation of the Act—whether the pace of implementation is everything you would like it to be, and if there are remaining areas that need to be prioritised in terms of that implementation. Would either of you like to—?

[284] **Ms Williams:** Okay. I'll start. You'll have to bear with us both, because

we're both standing in for other people.

[285] **Jenny Rathbone:** Welcome.

[286] **Ms Williams:** Thank you. So, on behalf of the WLGA, I think what we would say is that we welcome the Act, and the direction of it, and would work to support the delivery of the Act with local authorities. We don't feel it's our role to co-ordinate that delivery or to monitor how local authorities are delivering that, but we will support local authorities where we can in their implementation.

[287] I think we've had an awful lot of changes—the Housing Act, the Social Services and Well-being Act, the VAWDASV Act, so maybe, because of all of that, the pace is a little fast, in trying to implement a lot of things at once. So, I think what we would be mindful of is ensuring that although there are different pieces of legislation, they're joined up in their implementation and their delivery. So, yes, from our point of view, we'd say that we would welcome it, but just slow down the pace a little.

[288] **John Griffiths:** One thing we heard earlier during previous evidence sessions was that sometimes, in terms of training staff so they're up to speed with new legislation, a sort of sequential approach has been taken. So, rather than looking at these different pieces of legislation in the round and how they link, and how they need to be taken forward together, they've been looked at in isolation. Is that your experience, you know, in talking about these different Acts as you have? Do you believe local government is addressing them in a co-ordinated, linked way?

[289] **Ms Williams:** I don't have an answer to that, sorry. I think what I would say is that knowing about these pieces of legislation is one thing, but when you're delivering them on the ground, operationally, it's a whole different kind of learning that you need to do, and training. So, say with regard to housing and homelessness officers, the Housing Act has changed the nature of their work dramatically, and the level of training that they needed then, and the ongoing training, was quite a lot. To release staff for that training is costly, is difficult, and it stops the front-line services being delivered for periods of time or what have you. These staff now would be classed as having received the level 2 training of the training programme within the Act, so that's another set of training now that these people—. So, I don't think, with that example—that cohort of people couldn't have been delivered that training delivered together. The homelessness legislation was 18 months ago

anyway, so they had to be trained then. This is now, so it couldn't have been joined up, and yet now they need to be released to do another round of training, which is necessary and important, but it's another burden on their time and the time of local authorities when resources are scarce to backfill, and things like that.

[290] **John Griffiths:** I see. That's fine. Would you say that's your view as well, Sian?

[291] **Ms Morris:** I'm here representing Neath Port Talbot council, but I'm a community safety manager so I have a lot of areas of work under mine, and we were looking at training. I'm supposed to be here representing Neath Port Talbot, but my personal opinion is that we might have missed a trick here, because all this training—domestic abuse, hate crime, anti-slavery, radicalisation, which is a big thing now—is all about safeguarding. It's all about safeguarding, and I think perhaps we could have been a bit more co-ordinated and had a really good, robust safeguarding training programme. Once you've identified your vulnerable person, okay, 'This is what you look for if it's domestic abuse, this is what to look for it's hate crime'. That's me speaking. But as it is now, we've got all this training. We're in a particularly unfortunate position in Neath Port Talbot because we are late rolling out our WRAP training—our workshop to raise awareness of Prevent. That is something that we've got to do as well now. So, it is problematic. It is difficult. Everybody said about the problem with front-line staff, so I won't repeat myself.

[292] Having said that, as an authority we are fully supportive and we know this training is important. We also know it's very important to roll it out properly if you're going to reap the rewards. So it's a double-edged sword, really.

[293] **John Griffiths:** Thanks very much for that. You mentioned obligations under the Act and duties, and that's one thing, and actually delivering it to make it meaningful on the ground, perhaps, is another. But in terms of the obligations, do you think local authorities are quite clear as to what's required of them under the Act?

[294] **Ms Morris:** I've spoken to my head of service, Karen Jones, about this, and she is a bit concerned about some of the things that we are being asked as a local authority to do under the Act—that perhaps the powers aren't there to do it. However, we do recognise our responsibility. We've every

intention of doing everything we possibly can to discharge it. We've already started on our draft strategy. We did a review of all our services earlier on in the year. We've made a start on our strategy. We're hoping to have the draft ready by the beginning of next year. One of the things we've done is gone through the Act, gone through the guidance and done a gap analysis, so we know where we've got all the information that we need and where the gaps are. We know where we are now, we know where we want to be; it's how we make that journey.

[295] **John Griffiths:** Okay, thanks, Sian. I think, Janet, you wanted to come in at this stage.

[296] **Janet Finch-Saunders:** Yes, on that, thank you, Chairman. Just on that one, you said you haven't got the powers to do it. Is it powers or is it resources?

[297] **Ms Morris:** We haven't got the resources, but the concern that my manager has—who I'm representing, and I've got to get this right—is requirements. We have previously made representations that the draft guidance includes many requirements that Welsh Government would appear not to have the power to impose.

[298] **Janet Finch-Saunders:** Right, okay.

[299] **John Griffiths:** Okay. Jenny.

[300] **Jenny Rathbone:** I just want to pick up on I what I think is a very important point, which is that you said we could have wrapped all this up into robust safeguarding training. I think I want to, you know, have that headline clear. I don't think any of the local authorities who submitted evidence have picked that up themselves. We can agree—. You know, others do mention that they're being asked to do this and that, and it is about being realistic about what can be achieved and the pace of change. But it's also about joined-up Government. So, well done you for stating the obvious as a front-line worker. I suppose what I'm keen to know is how well you, as a front-line member of staff, are able to liaise with people in other local authorities to share best practice—ways of doing things that you know have worked.

[301] **Ms Morris:** It's funny you're saying that, but the ways that we used to have are diminishing rapidly. We used to have WACSO, which was the Wales

Association of Community Safety Officers and Managers, so that's where we would go. We would share good practice, we'd have the WLGA come along and sometimes we'd have a representative from Welsh Government come along. Unfortunately, the chair retired—the chair was the community safety manager of Bridgend—so it doesn't look as if those meetings are going to take place any more. We used to have Safer South Wales meetings, where we'd get together in south Wales and we would—. Those meetings aren't happening any more. We do work very closely with Swansea, who are our neighbours, and also with Bridgend. We work regionally on some things, but, over the years, I've seen that our ways of talking to our neighbours and sharing good practice are just getting less and less and less. People are busier. As a local authority, we've got 20 per cent less staff now than we had five years ago. A lot of the people that have left have gone on ER or VR—early or voluntary retirement. They had the experience, the knowledge. I myself have been in community safety since 1997. I'm a bit of a dinosaur now and there aren't many of me left. So, that's the problem. Obviously, we can still keep in touch with e-mail and we do get information that comes our way, but it's not as good as it used to be.

[302] **Jenny Rathbone:** If you want something done, ask a busy woman. So why couldn't you convene these networks?

[303] **Ms Morris:** The problem is every time an Act comes in, I get given a new responsibility. So, whereas two or three years ago, I was managing domestic abuse, anti-social behaviour and crime prevention, I'm now the officer for the Prevent agenda and I'm responsible for making sure this draft strategy is ready next year. I've also been given community cohesion, and, last Friday, my manager called me in and asked me if I'd take over CCTV as well.

[304] **Jenny Rathbone:** But you've already given us a solution to the problems that you face, which is to bring the whole thing together as one robust safeguarding strategy. In endorse that; take it back to your manager.

[305] **Ms Morris:** What we're actually doing is we've got a Prevent radicalisation workshop for 'train the trainers', and we've invited everybody to come in the morning for the Prevent training, but in the afternoon, we're going to do a bit of hate crime training, and a bit of modern anti-slavery training, because the links are there. The links are there. And we haven't even touched on child sexual exploitation and all the other things, but it is all safeguarding.

[306] **John Griffiths:** Okay. Thanks very much for that. Just one final question from me in this section, as it were, which is about the statutory guidance on commissioning, which hasn't yet been issued. Would you have any views on the impact of that—the fact that it hasn't yet been published?

[307] **Ms Williams:** I think, from the WLGA's perspective, we think this would be helpful, and we'd be keen to work with Welsh Government as it's developed. But, I think, as well, there's a need for flexibility, to ensure that the commissioning is joined up with other areas as appropriate, and ensures that local circumstances are addressed. One size doesn't fit all, so if there's no commitment to the statutory guidance from Welsh Government, then this type of guidance could be helpful anyway to develop consistency—and also a person-centred approach. Sorry, I am reading notes. When you're looking at developing commissioning for domestic abuse services, we've got commissioning for Supporting People services. How would it align with that? How would it marry? We'd be looking at working with you to develop that going forward.

[308] **Ms Morris:** I'm afraid I'm going to have to read a note as well. We actually think that there's no need for more guidance, especially very prescriptive guidance, but a properly structured network would help facilitate the important learning, as each area implements the new duties. This probably then would encourage innovation, and possibly take the focus off compliance. You can tell that's not me talking, can't you?

[309] **John Griffiths:** That's fine, thank you, Sian.

[310] **Ms Williams:** There is some very good commissioning guidance anyway that's recently been developed. So, don't reinvent the wheel, I would say, as well, and utilise some of that stuff and—

[311] **John Griffiths:** Which would have general application, including these areas, Joy. Is that—?

[312] **Ms Williams:** I'm sure I've just spoken recently with Rhian Bowen-Davies about domestic abuse and specific commissioning guidance. I'm trying—

[313] **John Griffiths:** Okay. Well, maybe that's the guidance—

[314] **Ms Williams:** Sorry, I'm thinking something in the back of my mind.

[315] **John Griffiths:** Well, maybe this guidance has been worked up, but hasn't yet been finalised, perhaps.

[316] **Ms Williams:** Yes.

[317] **John Griffiths:** Okay. We'll move on to the national strategy, and I think Sian has some questions.

<p>[318] Sian Gwenllian: Diolch. Beth yw eich barn chi am y strategaeth genedlaethol ddrafft? Byddai'n ddiddorol gweld os ydych chi'n teimlo ei fod yn ddigon clir, ac a ydy o'n helpu wrth greu'r strategaethau lleol. Rwy'n falch iawn o weld eich bod chi, Sian, wedi mynd ati i greu strategaeth leol, er nad yw'r strategaeth genedlaethol ddim mewn lle. Byddai'n ddiddorol gwybod gan y WLGA a oes cynghorau eraill wedi symud ymlaen i wneud yr un math o waith, a pha mor anodd oedd o i chi symud ymlaen efo'ch un lleol chi heb fod yr un cenedlaethol mewn lle.</p>	<p>Sian Gwenllian: Thank you. What is your view about the draft national strategy? It would be interesting to see whether you feel that it's sufficiently clear, and whether it helps in terms of creating the local strategies. I'm very happy to see that you, Sian, have started to create a local strategy, although the national strategy isn't yet in place. So, it would be interesting to know from the WLGA whether other councils have moved ahead to do the same kind of work, and how difficult was it for you to go ahead with your local strategy without the national strategy being in place.</p>
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11:45

[319] **Ms Williams:** I'm just thinking—there are two parts to it, really. We were listening in the gallery earlier, and I suppose I would endorse and echo what Vivienne Laing said, from the NSPCC—some of her comments regarding the strategy. I think there's a lot more that perhaps needs to be in there, really, before we can really see where we're going, and I think across portfolios as well in Welsh Government—you know, to look at how other areas within the Government are linking into that, and also working that into their own work.

[320] It's interesting that, from a local government perspective, we've got one national strategy, 22 local authorities, six regional collaborative

committees, nine areas now under the Social Services and Well-being (Wales) Act 2014, potentially 22 public service boards. And it's how we develop local strategies, then, within that landscape. So, do we need 22? Is there scope for potentially having more regionally focused strategies, and then local action plans based on those? Is there a better, smarter way of doing it?

[321] I couldn't tell you, across the country, who's where, I'm sorry—I don't have that information. If you want that information, I'm sure we could pull it together. But I think maybe there's a way of looking at it more smartly, and also linking in with—we've got to write a local well-being plan, we've got to write a homelessness strategy. So, now we've got the VAWDASV strategies. How do they link, how do they use, sometimes, maybe the same needs-mapping information, or the same evidence feeding into those separate strategies? So, maybe some steer on how that might be done in a smarter way, potentially.

[322] **Sian Gwenllian:** You're raising similar points to what you were making earlier, about the need to join up the approach not just with training but with a strategic approach as well across different pieces of legislation and different areas, which is very sensible.

[323] **Ms Morris:** Regarding the local strategy, obviously, when the Act came out, we were a bit surprised that it said there would be a national strategy and that there would be a local strategy in partnership with health. I think we welcomed that, because we were very much aware—there had been a lot of changes in senior staff, and we were very much aware that our current arrangement, which was the DASG, the domestic abuse strategic group, was just not functioning as well as it was, we weren't supporting the third sector as well as we could be. And we could see the cuts in funding coming. So I think we welcomed it, as a strategy and an action plan, to put us all on a better footing in Neath Port Talbot.

[324] I think the change of manager—. My new manager is Karen Jones; she's an advocate for anything to reduce the problem of domestic abuse. So, she took the reins, we went with her, and we commissioned a review in January of an independent consultant that looked at everything that we do: looked at what we do as a council, looked at what the third sector do, looked at what our partners do, collected all the data in, spoke to—. She ran workshops for professionals, partners, service users, and put all that information together, which we were hoping would then lend us with the basis of a draft strategy. The truth is there's far more work to be done than

we could ever have realised.

[325] So, we've had to take a bit of a step back. Yes, we've got all the findings of the review, and other things, other pieces of work that have come our way, but we've got to sit down now and look at how that's going to work in Neath Port Talbot and how can we make sure that, with all these strategies and action plans and everything we're doing, and all these committees we've set up to the delivery—. What's important is that the victim out there is the one who gets the best service possible. And, at the moment, it feels like three steps forwards, two steps back—it might even be two steps forwards, and three steps back—but I think we are on the right lines. And, as I said earlier, we know where we are now, because of the review, we know where we want to be—and the Act has helped us to decide that—it's how we get there, who we take with us.

[326] We're hoping to have a draft ready by January. We're still trying to engage with health on the strategy. So, there's still a little bit of work to do on it, but we are quite confident that we should have something by March.

[327] **Sian Gwenllian:** Okay, so, from your point of view, the national strategy, or lack of national strategy, doesn't really affect you, because you've moved on anyway. It's the other local authorities I'm concerned about more, really, than what you're doing, because you're obviously passionate about the area and maybe that's why—

[328] **Ms Morris:** Yes, we want to get it right.

[329] **Sian Gwenllian:**—there's a drive in your local authority. It may not be the same in other places, and, you know, what we were told is that the lack of a national strategy is hindering the progress to creating the local strategies.

[330] **Ms Morris:** And we're an example of where that's not the case, but it is a priority. It's a priority for the council, it's a priority for the public services board, it's a priority for the CSP, a priority for me, so, yes, we made the decision to—. Because we always thought, when we do get the draft national strategy, obviously, we will use that to guide us, but who is better placed to know what's happening in Neath Port Talbot and how we can improve the services, sustain what's good, change what's not so good, than the people on the ground?

[331] **John Griffiths:** So, you didn't feel, then, Sian, that you needed to await the national strategy in case you were going in the wrong direction in some way or another with your local strategy. You didn't feel that was an issue.

[332] **Ms Morris:** We just felt we needed to make a start, and I think the reason we did that was that we knew, we recognised, that what we had wasn't good enough, wasn't working, our third sector wasn't being supported, our victims weren't getting the best. We recognised that. It wasn't all doom and gloom; we've got some fantastic work going on in Neath Port Talbot. It's strategically, this was. Operationally, there's some excellent work, and I'd love to sit here and talk, and tell you about some of the operational stuff, but, from a strategic point of view, we knew it was losing focus: too many changes, head of services. I've moved three directorates in the last four years. I've had six different people sign my annual leave sheet in the last—I'm sure you don't need to know that. But it just—you know, something had to change, and now we're in a far more stable place and we're in a better position. So, look, other authorities may not have been through that and may not have the right person, perhaps, up—I shouldn't be saying that, should I? I'm sorry; I'm going to stop speaking now.

[333] **John Griffiths:** No, Sian, that's fine. Thanks very much. And I think, Joy, you said that you'd send the committee information in terms of the picture across local authorities, in terms of the information that you have.

[334] **Ms Williams:** Yes, I'll go back to the WLGA and try and get, like I say, a picture of where people are. I think, having worked with some of the DASGs, and I think even their patches, shall we say, are not consistent—so, we have some regional and some more local—there is a move to develop things. It's not that things are put on hold—you know, my sense isn't that at all. Evidence is being collected locally and people are working towards developing a strategy, but I will get a better picture of where people are for you, yes, as much as I can.

[335] **John Griffiths:** Okay. Thanks for that. And I think Jenny had a question.

[336] **Jenny Rathbone:** Sian, I just wanted to pick up—you said you were still trying to engage with health, and I just wondered if you could elaborate a little bit more, because I don't see how you can do this without your health visitors, your school nurses, and other primary care professionals.

[337] **Ms Morris:** We do engage with health. We've got representatives

coming to our PSB and the CSP. What we have had trouble with—. We've set up a new group—

[338] **Jenny Rathbone:** So, they do attend your public service boards.

[339] **Ms Morris:** Perhaps the right person is not coming, and we really need—. We have been told that they will come on board, but people are so busy these days. You set up meetings and then, last minute, they give their apologies because something else—. I mean, I should have been somewhere else today, and then somebody said, 'No, you're going there', and that's how it is at the moment. So, we have to make allowances, but we need to sit down at the table now. We've been able to get as far as we've got. We've been able to do the review and get as far as we've got, but we need health on board now. So, we are looking forward to them coming to the next meeting, and mental health services as well, because they are a crucial part. That's why I'm saying that, although we'd like to get the draft strategy in place in early January, let's give ourselves until the end of March, so that we're not putting ourselves under too much pressure.

[340] **Jenny Rathbone:** Okay, so, I appreciate everybody's juggling competing, conflicting priorities, but do you think that the Act has helped ensure all the people you need to be liaising with on this are aware that this is something that they need to be taking forward as a priority?

[341] **Ms Morris:** When we got rid of our DASG and we set up the—I can say VAWDA, can I? When we set up the VAWDA leadership group, we actually went through the Act and we complied our terms of reference from who it recommends should be included. We're now happy that we've got all those members on the board. What we haven't quite got yet is them all sitting around the table, but we're nearly there. So, that is something that we have used and we have found it beneficial. Sorry, what was the second part of the question?

[342] **Jenny Rathbone:** I think it sort of begs the question of the role of the WLGA really to ensure that we're not reinventing the wheel, because it sounds like you've done all the right things. We acknowledge you're not there yet, but—

[343] **Ms Morris:** We'd be happy to share our terms of reference, because this is what I'm doing now: I've had this prevent agenda thrown at me, and I'm actually going and saying, 'Look, has somebody got an external-speaker

policy? Has somebody got an information-sharing protocol?', because we don't want to sit down and reinvent the wheel. We've got our terms of reference, which is for our board, but we're happy to share it and for people to use it as a template, we're happy that we've got our membership right—other people might tweak it a bit—but we'd be more than happy to do that. Once we've got our draft strategy and it's gone through the members, it's gone through the political process, then we would be happy to share that. We're happy to share our learning, and we already do with our neighbours.

[344] **Jenny Rathbone:** Excellent. Well, if you felt able to share it, I think we'd be very keen to have that and the WLGA—

[345] **Ms Morris:** I think we need to do it.

[346] **Jenny Rathbone:** —needs to be able to disseminate it so that everybody isn't starting from point zero.

[347] **John Griffiths:** Yes, it'd be very useful if you would forward that information to the committee, Sian. I think Joyce also had a follow-up question.

[348] **Joyce Watson:** It's great that you're doing what you're doing, and the passion is—you can't hide it, that's wonderful. My question is this, and you mentioned it way back, about the regional approach: do we need all of these people, do we need 22 separate bodies working towards the same aim? So, you're talking about getting health involved. The local health board, which you say will come on board but aren't there yet, would be working wider, anyway, than you. So, I suppose my question's a fundamental one: would that be perhaps a better model, when we're talking about bringing together strategic partnerships, because they'd have to be involved, in terms of working to progress what we all want, which is ending violence against women and girls?

[349] **Ms Morris:** I think what we need to do, and I think this is where the WLGA can help, is we need to look at what we really need to do locally, what would be better done regionally, and what could be done nationally. So, for instance, terms of reference and things like that, there's no reason why that couldn't come down to save people money. But that's what we need. I think that's the key: what would be better done locally, and what can we do regionally? Our nearest neighbours are Swansea, which is a city. We are three small towns and four valleys. So, although we do work in collaboration with

Swansea—I work cross-border all the time—you always come back to that Swansea is a city with a larger population and most of their problems are centred in the city centre, whereas ours are dispersed. So, if you take most of our domestic abuse, you'd expect the majority of it to take place in and around the towns, related to the night-time economy possibly, but it actually goes on in the rural communities. So, from our point of view, I think we'll welcome this local strategy but, because we are going to be working in partnership with health, and health are going to be working with Swansea and working with Bridgend, health will benefit from that, maybe.

[350] **Ms Williams:** I think, with regard to that, it would be useful to have a steer from yourselves, in a sense, as to what you want or what you would advise or what would be acceptable. The Act says 'local strategies', so, from that, we read 22 local documents. Whether that then means something different and can be interpreted as local meaning 'regional', or local meaning 'sub-regional' or local meaning 'health board footprints' or whatever, then maybe that message needs to come across loud and clear, so that people can start working from that perspective and feel comfortable working from that perspective. I think that you're right: when you are talking about working with the health boards, it makes sense for the health board to have the same strategy as the three or five local authorities that it relates to. So, I think that perhaps some steer from the national level with regard to how that can be implemented and how those local strategies can be developed and implemented will be useful.

12:00

[351] **Joyce Watson:** Okay, thank you.

[352] **Ms Williams:** Because I think—. Maybe it's semantics, but 'local', I suppose, in one sense, to us means 'local authority level', whereas maybe—you are shaking your head Jenny, so local may mean 'regional' or 'health board' or whatever to somebody else.

[353] **John Griffiths:** Jenny.

[354] **Jenny Rathbone:** Look at the Well-being of Future Generations (Wales) Act 2015 and the well-being goals. I think it's very much about valuing grass-roots stakeholders, whoever they are. I don't think 'local' means 22 local authorities. I think that Mark Drakeford's statement last week indicates there is an expectation that people will collaborate, depending on the issue

that is being discussed. So, for example, Sian, I'd be pretty certain that FGM would be an issue in Swansea—

[355] **Ms Morris:** Oh, yes.

[356] **Jenny Rathbone:** —but possibly not in Neath Port Talbot.

[357] **Ms Morris:** Yes.

[358] **Jenny Rathbone:** So, I think that's a good example of where collaboration is great, but there needs to be more focus in Swansea on FGM, but—

[359] **Ms Morris:** But just because we don't think it's a problem, it doesn't mean to say—. I mean, I worked with a manager once who always used to say, 'We don't know what we don't know.' We don't think it's a problem, but we don't know. So, that would be something that we would work regionally on, definitely.

[360] **John Griffiths:** Okay, thanks for that. I'm sure the committee will give some thought, in terms of that clarity you are asking for, Joy, in terms of that local versus regional approach. Can I just, before we move on, ask one other question under national strategy, which is about the funding structures? Do you think that the funding structures, as they are, are adequate to deliver on the strategy and the Act?

[361] **Ms Williams:** I think that, from our perspective, there are two things, really. I think that funding is always going to be challenging, isn't it? It's always going to be a little bit of an elephant in the room, particularly in these times. Local authorities will need to make hard decisions about the allocation of resources. We can only work with what we've got in that sense. I think that when you are looking at the implementation of the Act—and rolling out local training, 'ask and act', local strategies—all of this work is inevitably going to lead to more victims being identified, more people reporting, more cases coming to light, which will then perhaps increase the demands on resources and funding. So, I suppose what I'm saying is that I'm not sure—and probably know—that we haven't got the resources that maybe we will potentially need.

[362] **John Griffiths:** And Sian.

[363] **Ms Morris:** I would agree entirely. I've been sitting in the gallery, so I know that that has been said. So, perhaps I can give you a very small example of how complex it is. This is a list of all the funding that comes into Neath Port Talbot for various—. This includes absolutely everything. I've got one IDVA that works for me. I get—

[364] **Joyce Watson:** Do you want to say for the record what that is?

[365] **Ms Morris:** Sorry: independent domestic violence adviser. They deal with very, very high-risk victims of domestic abuse and their families. They take them through court. It's a really intense job, and it is a very, very important job. I get £10,000 off the Welsh Government towards her salary. I get £20,000 off the Home Office towards her salary. I have already been told that that is going to be discontinued on 31 March. I top that up with a little bit from the police and crime commissioner money that we get. She is based in the police station, so the police pay for her office space, her landline and her admin support. I manage her. So, the council pays for her supervision, her management, her training, her office expenses, her mobile phone, et cetera et cetera, et cetera. That is one member of staff.

[366] **John Griffiths:** Joyce.

[367] **Joyce Watson:** Because I know what an IDVA is and the importance of the role, can I ask you about where you said that funding was ceasing? Did you say it was the Home Office? The £20,000.

[368] **Ms Morris:** We've had an e-mail from the Home Office to say that they're not going to be—. They give us £20,000 for an IDVA and £15,000 for a MAREC, the multi-agency risk awareness conference. She's only an admin assistant. But they fund that post as well. Basically we've had year-on-year funding for the last two or three years. So, what happens now is, in December, I hand those staff redundancy notices and then in January or February, when funding is confirmed, I throw a party and say, 'You're okay for another year.' Sorry, I don't mean to be flippant, but this is what we have to do. So, we've had an e-mail from the Home Office now, saying that from 1 April the IDVA and the MAREC will have to be funded locally, but they will be putting money into a transformation fund and they will be looking for innovative projects. That's great, but you've got to do the day job. You've got to do your bread and butter before you can start even considering—. I like to think we are very innovative in Neath Port Talbot, but I've got to have that money to pay. I've only got two IDVAs. The recommended case load is 70 per

person. At the moment, they're running at about 200 each and that's the reality really.

[369] **Joyce Watson:** Well, thanks for that because you've opened up a whole area for me that isn't here on the paper.

[370] **John Griffiths:** Yes, okay, well, thank you very much.

[371] **Joyce Watson:** Yes, great.

[372] **Ms Williams:** Just to echo that in a sense: I did a piece of work recently developing target-hardening responses across the country and it was really interesting to me. It opened up where a lot of the funding for domestic abuse services and support comes from and it is very piecemeal. It's a little bit from the police and crime commissioner, a little bit from the Home Office, some from the VAWDA team in Welsh Government, some from Supporting People, and some is from the general fund. But none of it is sustainable, a lot of it is year on year, not even three-yearly, so we don't know from year to year what funding we're going to have to sustain what projects to help the numerous victims within the locality. So, it is something that really needs to be looked at in a perhaps more strategic, cohesive way, to say, 'Actually, this is the pot; this is the ring fence for VAWDA and sexual violence services and we're going to keep it sustainable.' Because it's really hard for services to keep running like that.

[373] **Ms Morris:** Ideally, what we would like to do is put all this money into one pot and then we can allocate that money to the services that are most needed and are most important, and then we would be accountable for making sure that they were delivered, rather than having all this money and then, 'You spend that and you spend that' and yet there's a vital service there that's now got to go because there's no funding. So, I think, as a local authority, we would like to be able to have that responsibility. We'd rise to the challenge and we'd be accountable.

[374] **John Griffiths:** Okay, thank you very much. Joyce, I think you have some questions on education.

[375] **Joyce Watson:** Yes, I have. Really, how do you think that local authorities will begin to report on how they are actually addressing the educational aspects of violence against women, the Bill? And who is going to collate that information in terms of performance? You could send us a note if

you like.

[376] **Ms Williams:** I would really struggle to answer that. I've had various pieces of information shared with colleagues and I've had a small piece from education that does talk about the Donaldson review and the changing of the curriculum and the much higher involvement of personal and social education within that, and also the use of external experts, in a sense, to deliver some of the more specialist education and training that's needed. I think those are the things that we would be endorsing and sharing with colleagues. I suppose that our role is in supporting and disseminating that good practice, so who monitors and evaluates that I don't think would come into our remit anyway. You need to be looking at Estyn probably and agencies like that. I suppose if I've got a specific question that I can take back, I can get a specific response, but, unfortunately, education really is way out of my comfort zone.

[377] **Ms Morris:** Can I pick up a point that I think I heard you make earlier, that education isn't just in schools, because that's a big concern of mine? I don't know a lot about education because I'm not in the education directorate, but—sorry, I shouldn't say I don't know a lot—I know there's a lot of good work going on, what with the core programme and we've got Spectrum, we've got BRAVE. There's a lot work going on in schools. What concerns me is after school because these young people, who are in violent and abusive homes, at 4 o'clock, they go home to them. They're there on the weekend and there are six-week summer holidays, and all the little projects that we used to fund to actually take these young people out of their environment, show them that there was another way of living their lives, letting them mix with other children from the same background, so they could see that they were not alone, and doing some self-esteem work, they've all gone; we've lost all the funding. We've got very few. We've come on leaps and bounds now with young carers, so there's a whole network of people that actually take young carers away from their caring responsibilities, so that they can do something social, and yet we've got hundreds and hundreds and hundreds of young people who are in very violent, very abusive homes, at the very least witnessing it, if not experiencing it. And after 4 o'clock, there's nothing for them.

[378] **Joyce Watson:** So can I, just to probe this further, then? When we talk about education being delivered, and probably the focus is on school and teaching healthy relationships and all of that, what you're saying, Sian, is that's okay where it is, but there's a much wider remit. Would you like—?

Could we take a note on that, maybe?

[379] **Ms Williams:** I can give you two examples of that from my note that I've had from a colleague. Hub: he's mentioned Hub and work that WLGA are doing with Welsh Government to pilot some involvement with youth services having access to Hub, so that they can learn from and share their learning with the teaching profession. So, youth services have been involved in some of that learning and dissemination as well. And then, also, the police all-Wales school liaison core programme go into schools and deliver domestic violence training, education on health and well-being, and keeping safe education with young people as well. And they collect data at a national level on the training that they deliver. I think they're qualified police officers who are also qualified teachers who deliver that training. So, those two bits of education were also mentioned.

[380] **John Griffiths:** Jenny.

[381] **Jenny Rathbone:** We have to acknowledge we're peeling the layers off the onion here. Domestic violence, unfortunately, and sexual violence is endemic in our society. And the role played by the popular newspapers is obviously not helpful either. One youth worker said to me recently that, because domestic violence is the biggest crime in a particular area, the best way they can deal with it is by providing self-defence classes to the young people in school X. So, I just think we have to acknowledge this is a vast subject, and I can see that you're feeling as if you're drowning under the weight of responsibility. And we can't allow that, you know. It's about ensuring that we're using resources effectively and acknowledging—. I think there's a tension, you see, between piloting new ways of working and getting them acknowledged as a good way of working, if that proves to be the case, and then how do we then make that leap into mainstreaming them? Because some of the things you were talking about, about different sources of funding streams—. At the end of the day, core statutory mainstream organisations do have to have a way of embedding good practice into their mainstream way of working. It's whether or not the grass-roots teams you have have their voices heard in the senior leadership.

[382] **Ms Morris:** Yes, that's very important.

[383] **Jenny Rathbone:** I wonder if you could say a little bit about that, as to whether you think you've got learning organisations that are listening to the people who are delivering the grass-roots services, so that they can embed—

. All organisations have to change—we all have to change.

12:15

[384] **Ms Morris:** Yes, and you need change for the better and, as you say, you need to make sure that the resources you have are delivering the best outcomes, and delivering the best for the victims.

[385] **Jenny Rathbone:** So, do you have any contact with the youth services and are they doing things like that, given that it's huge?

[386] **Ms Morris:** It is huge, yes. As I say, I'm not 100 per cent sure what goes on in youth clubs. They keep their staff very well trained, they've recently rolled out hate crime training and we are starting to get referrals through our Channel panel for the radicalisation.

[387] The other thing is, you see, when you do—. As you said earlier, the more awareness raising we do, the more people that come forward. The youth workers have then got to make sure that they know where to signpost those young people. I think we're one of very few local authorities now that still do Crucial Crew, which is a learning programme for year 6—children who are age 11 and they're going up to comp—it's awareness raising about the different dangers. And we do a healthy relationships set; 1,500 to 1,600 children came through in June, and they all went through the healthy relationships, which is delivered by peer educators. It was delivered by 14 to 15-year-olds, because an 11-year-old is more likely to listen to them than they are to you or myself. And we always, always have a number of disclosures there. But there are agents from our local Women's Aid there to deal with those, and then the teachers are involved when they go back to school. So, we know that the demand is there, and we know that what we're going to be doing is increasing that demand. So, no matter how well trained the youth work—. And again, the youth clubs these days are only open about two days a week. In some of the valleys they're open one day a week. I know of one that's open once a fortnight. So what can one youth worker do once a fortnight when they've got 40, 50 young people?

[388] There's a lot of excellent work going on on the ground, there really is, but I think there's still a gap, myself. Once that child leaves school at 4 o'clock, what are they going back to? What support is there for them? Six weeks summer holidays—. That's what I think. We don't need a lot of money to run small projects, but we've lost them all. We have a multi-agency risk

assessment meeting fortnightly to talk about the very, very high-risk victims of domestic abuse, and more often than not there are a lot of children involved in that. What do we offer the children? There isn't anything at the moment. Specialist services, I mean. Obviously there are other services out there, but the actual specialists—counselling, taking them out of the environment, and getting them mixing with other people. I think that's a gap.

[389] **John Griffiths:** I think Sian had a quick follow up question.

[390] **Sian Gwenllian:** I symud ymlaen o'r gwaith sydd yn digwydd, neu angen digwydd, y tu allan i'r ysgolion, rwy'n derbyn y pwynt yna'n llwyr, ond o ran beth sy'n digwydd yn yr ysgolion eu hunain—efallai mai cwestiwn i'r WLGA ydy hwn, mewn ffordd—a ydy'r canllawiau arfer da yn cyrraedd yr ysgolion? Hynny yw, rydym yn gweld bod yna ddogfen swmpus a syniadau da wedi dod trwodd drwy'r Ddeddf, ond a ydyn nhw'r cyrraedd yr ysgolion ar draws Cymru? A oes yna dystiolaeth o hynny? Ac wedyn, o ran addysg perthynas iach, a ydy'r ysgolion sydd yn cymryd rhan yn yr arbrofi efo Donaldson yn rhoi pwyslais ar yr agwedd yna? Efallai bod hwn yn rhywbeth i chi ddod nôl atom ni ar ôl cael gwybodaeth ar draws. Ond rwy'n meddwl, ar draws Cymru, mae'n bwysig inni gael y darlun: a ydy beth mae'r Ddeddf yma'n ceisio ei wneud yn treiddio lawr i'r gwaith yn yr ysgolion?

Sian Gwenllian: Yes, just to move on from the work that happens, or needs to happen, outside of schools, I entirely accept that point, but in terms of what's happening in the schools themselves—perhaps this is a question for the WLGA, in a way—is the good practice guidance reaching the schools? That is, we see that a substantial document and good ideas and good practice have come through via the legislation, but are they reaching the schools throughout Wales? Is there evidence of that? And then in terms of healthy relationships education, are the schools that are taking part in the pilot schemes under Donaldson pressing on this? Perhaps this might be something you'd like to come back to us on after receiving information more broadly. But I'm looking at the whole-Wales picture, and I think it's important that we get that picture of whether what this Act is seeking to do is really reaching the work at the school level.

[391] **John Griffiths:** Joy, do you want to come back to the committee with a note on—?

[392] **Ms Williams:** Yes, is that okay? I'm just writing loads of questions down. Sorry.

[393] **John Griffiths:** No, that's fine. Thanks. I think we'll move on then to a further and final set of questions on the national advisor and survivors' views. Janet, I think you have some questions.

[394] **Janet Finch-Saunders:** Yes. Hang on a sec, I do apologise. I've been actually gripped by some of the passion and the work that you're trying to do—

[395] **John Griffiths:** Page 18, I think, Janet.

[396] **Janet Finch-Saunders:** Yes, I know. There's not much on there. I think it was page 19. But anyway, how do you feel the role of the national adviser will help to address some of those very real issues that you've—? How do you think they'll feed into local authorities and actually make a difference?

[397] **Ms Morris:** I think it's good practice, really—sharing good practice, helping us with funding, helping us to be smarter with our funding.

[398] **Janet Finch-Saunders:** What about Joy?

[399] **Ms Williams:** I think that role has enabled a lot of the strands to be pulled together, in a sense. So, you're looking at funding streams, deliverers of services, providers, local authorities, and it's helped to see that bigger picture and pull those things together. We've worked very closely, and will continue to do so, with the national adviser. I think it is a really crucial and valuable role. It was interesting to hear earlier about the views on her part-time work at the moment, and I think, yes, it's a big job for one person to do. It is a huge job and a huge scope. A very challenging role for one person with limited support. I think, within that, she is having a considerable amount of influence and reach, but I think that could be widened, with developing that role and strengthening that role.

[400] **Janet Finch-Saunders:** So, do you think that the national adviser has the resources and is able to implement any real change to address some of the very real problems that we see? I know we're only a few months in—20 months in—but I think, already, we're starting to get things put on the radar now, where—

[401] **Ms Williams:** Yes, I think it's a huge job for one person, and particularly one part-time person.

[402] **Jenny Rathbone:** It would be helpful if you could just tell us what you think she's done so far, in your experience, as far as you're aware.

[403] **Janet Finch-Saunders:** Yes, and also whether you, as the WLGA, have any real concerns about how local authorities have the ability to actually deliver on these vital aims?

[404] **Ms Williams:** I think it is early days.

[405] **Janet Finch-Saunders:** Have you brought any evidence with you, though, of where the WLGA are feeding into local authorities?

[406] **Ms Williams:** No, I haven't. I haven't got that. We are meeting with the national adviser. We've got meetings planned with her. We've met already. She's met with directors in the WLGA already and we've got a follow-up meeting with her planned to look at how local authorities can work with her to implement some of that work. Apart from that, no, nothing else yet more concrete.

[407] **Janet Finch-Saunders:** I just want to get this right. The WLGA are not actually working with local authorities yet about developing their local strategies.

[408] **Ms Williams:** I don't know. It's not my area, because—. Sorry, I haven't got an answer to that. I presume they are, because—

[409] **Janet Finch-Saunders:** Have they sent you a briefing paper?

[410] **Ms Williams:** Yes.

[411] **Janet Finch-Saunders:** Is there nothing on there that mentions the local strategy? Because it's a key, fundamental part of the—

[412] **John Griffiths:** I think, Joy, if you could provide the committee with a note, we'd be interested in whether any of the local authorities are struggling in terms of their local strategies, and what the picture is across Wales. So, if, after today, you could provide us with whatever information the WLGA has, that would be useful. Is that okay?

[413] **Ms Williams:** I think I can ask. I feel like you're asking me something out of the remit of the WLGA in one sense. We are there to support and help local authorities, and that is what the domestic abuse policy officer will be doing, and the team under Naomi Alleyne's direction. That is what they'll be doing. I think, you know, the questions around local, regional and that sort of thing, we need some clarity over as well. I think we could probably get a picture of who is working on their strategies and at what point they are. But I think any more than that is not—. Is that okay?

[414] **John Griffiths:** That would be fine, Joy. If you could provide us with information on where the local authorities are with their local strategies, I think that would be very useful for us.

[415] **Janet Finch-Saunders:** If I could, Chairman, there is a team under Naomi, though, is there, charged with this responsibility?

[416] **Ms Williams:** Yes.

[417] **Janet Finch-Saunders:** A team—

[418] **John Griffiths:** Jenny.

[419] **Jenny Rathbone:** I'd just like to pose the question a little bit more in terms of the role of the WLGA—

[420] **Ms Williams:** Well, there's a policy officer.

[421] **Jenny Rathbone:** We've obviously heard of the excellent practice going on in NPT and we've had other written evidence from local authorities that are clearly on the case. I just wondered what you think the role of the WLGA is in addressing local authorities that don't appear to have given it as much thought as they ought to.

[422] **Ms Williams:** I don't think that is our role.

[423] **Jenny Rathbone:** It isn't? Surely, your role is to ensure that all local authorities are meeting the needs of their communities.

[424] **Ms Williams:** Well, we work with them to support them to do that, yes.

[425] **Jenny Rathbone:** Indeed. Well, one of the ways you can work with them to support their role is surely to share good practice that's happening elsewhere.

[426] **Ms Williams:** Absolutely, yes, and that will be done, yes.

[427] **Jenny Rathbone:** And some challenge. Is that not the role of the WLGA?

[428] **Ms Williams:** I think you would need to have that discussion with Naomi.

[429] **Jenny Rathbone:** Well, that's the role of the national adviser. I think, obviously, we could have that with the head of the WLGA, but I would've thought that that is part of its role.

[430] **John Griffiths:** Okay. I think one final question. Would you know, Joy, the picture across Wales in terms of how effectively local authorities are gathering the experience of survivors? I don't know whether Sian might be able to say something about the position in Neath Port Talbot on that front.

[431] **Ms Morris:** Yes, I can tell you. In Neath Port Talbot, we have two very active coffee mornings for victims of domestic abuse, and we've got a couple of projects. One of them is called Material Girls, where they upcycle clothes and various things and that is made up of survivors and current victims of domestic abuse. We do security surveys for high-risk victims of domestic abuse where we do target hardening. We had the 'Are you listening and am I being heard?' report. I believe that was circulated by the national adviser. I'm not quite sure the extent of her input, but that was very interesting and we will be using that when we put our draft strategy together.

[432] We've got very good links with third sector providers. In Neath Port Talbot, there are three, so we meet regularly with those. We've also made a lot of links with victims and survivors through the review we did with the independent consultant earlier on in the year. And I get, personally, a lot of anecdotal information coming from my operational staff, such as the independent domestic violence adviser—the IDVA—my MARAC co-ordinator, my domestic abuse co-ordinator and the manager of the one-stop shop, because we've got a one-stop shop in Neath. So, I get a lot of anecdotal information.

[433] **John Griffiths:** Okay. Thank you very much for that, Sian. And, Joy,

again, perhaps you might provide the committee with a note in terms of any information the WLGAs have on the picture across Wales.

[434] **Ms Williams:** Yes. I think we've got evidence of lots of authorities engaging with survivors. It's a key part of their process in developing those strategies across the board. I think similar initiatives as in Neath Port Talbot are happening across the country.

[435] **John Griffiths:** Okay. Thanks very much for that. Very briefly, Janet, because we're due to end now.

[436] **Janet Finch-Saunders:** Could you name two or three authorities that are taking this seriously and moving forward?

[437] **Ms Williams:** Developing the strategies and—

[438] **Janet Finch-Saunders:** Yes. And actually taking this agenda—

[439] **Ms Williams:** Gwent, as a region, are working—

[440] **Janet Finch-Saunders:** What are they doing?

[441] **Jenny Rathbone:** Well, we've heard about a lot of that, haven't we?

[442] **Janet Finch-Saunders:** Any others?

[443] **Ms Williams:** Swansea work with survivors as well and have similar projects to Neath Port Talbot. Because it's not my area of work and I'm speaking on behalf of somebody else, I can't give you a very detailed picture, but I can tell you about—

[444] **John Griffiths:** Well, I think that's where a note—

[445] **Ms Williams:** —the domestic abuse co-ordinators that I've worked with and I know that they're working very hard, liaising with local providers and local Supporting People teams to ensure that the voices of survivors are heard and fed into local strategies, and that they're supporting people who are experiencing abuse now. So, yes, that is happening; people aren't being left high and dry by their local authorities, by any means.

[446] **John Griffiths:** Okay, Joy. I think a note would be very useful. I'm afraid

we have to call a halt there. Thank you very much for your evidence. You will be sent a transcript, which you can check for factual accuracy. Thanks very much for coming along today. We will now break for lunch until 1 o'clock.

*Gohiriwyd y cyfarfod rhwng 12:30 a 13:03.
The meeting adjourned between 12:30 and 13:03.*

**Ymchwiliad Ôl-ddeddfwriaethol i Ddeddf Trais yn erbyn Menywod,
Cam-drin Domestig a Thrais Rhywiol (Cymru) 2015:
Sesiwn Dystiolaeth 4**

**Post-legislative Inquiry into the Violence against Women, Domestic
Abuse and Sexual Violence (Wales) Act 2015: Evidence Session 4**

[447] **John Griffiths:** Okay, can I welcome everyone, including Members, back after our lunch break? This is evidence session 4 of our post-legislative inquiry into the Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015. And we have with us Lin Slater of Aneurin Bevan university health board, Chris Overs of Aneurin Bevan university health board, Wendy Sunderland-Evans, Abertawe Bro Morgannwg university health board and Aideen Naughton of Public Health Wales. Rather than start with any opening statements, we'll go straight into questions if that's okay with all of you. And I think Jenny Rathbone has the first question on the implementation of the Act and strategy.

[448] **Jenny Rathbone:** Both AMBU and Aneurin Bevan are obviously setting the pace. One of you is an 'ask and act' pilot adopter and the other one—. In Gwent, you've already got your violence against women, domestic abuse and sexual violence board up and running, both of which are absolutely excellent. So, I wondered if you could say briefly what your view on the pace of the Act's implementation is so far, both in your own organisations and across the patch, as far as you're aware of it, as to whether you think you're isolated cases of good practice?

[449] **Ms Slater:** Shall I start first? Aneurin Bevan university health board is part of the wider Gwent region, obviously, as you know, and the local authorities within Gwent are early adopters. Unfortunately, when the pilot sites were chosen, Aneurin Bevan wasn't included as part of that pilot, so, although the local authorities have been acting as a pilot, and we've been going along with them, the pilot site for the health service is ABMU. But, having said that, within Gwent, obviously, Aneurin Bevan has worked very

closely with the local authorities and we've now established the board. We're also privileged, I think, to have the national adviser as the chair of that board. Because of that expertise, that gives us that pace. So, the board is now well established, we do have an infrastructure, and we are about to embark on a needs assessment that will help us to develop our regional strategy. So, although Aneurin Bevan hasn't been part of a pilot or the early adopter, if you like, we've been taken along with it. We've been working with the local authorities to that end, so that's where we are at the moment, and we have started to implement training as well in respect of 'ask and act', and we can talk to you a little bit more about that, as you would like. But Wendy has the pilot site in ABMU for health.

[450] **Jenny Rathbone:** Excellent. Wendy, can you just tell us how you think—? Obviously, you're very clear that this has made health professionals more confident about referring and reporting.

[451] **Ms Sunderland–Evans:** Yes. So, within ABMU, we've got pilot areas, so we're looking at the national training framework for the 'ask and act' training. There were 2,300 staff identified to have the group 1 online training, and, since last September, 3,170 staff have actually completed the online training, so that's in excess of the number identified for the pilot. That's really encouraging, because the rest of the health board are coming on with that. With the group 2 training, which is training for your staff with significant contact—so, those would be your nurses, your doctors; that face-to-face contact—we started that training in May last year. As my response actually said, we have evaluated 100 of those staff who've attended the training, and there was a definite increase in their levels of confidence and knowledge relating to violence against women, domestic abuse and sexual violence after the training.

[452] **Jenny Rathbone:** How effective do you think this online training is in enabling staff who've themselves suffered domestic violence to feel comfortable about asking patients about it?

[453] **Ms Sunderland–Evans:** Some staff have relayed some difficulties, because, sometimes, it might bring back some memories if something has happened to themselves, so that's something we're very conscious of, but there is that warning at the beginning—when people go on to the online training, there is that warning there about what to do if they are feeling upset; the immediate action is to contact their managers. What I have come across recently, within the last few months, is that staff are asking questions

about the ABMU policy for staff who are victims of perpetrators of domestic abuse. So, definitely, that knowledge is there. So, that's new, at various times within the last few months, which is good, isn't it, because that policy is there for staff, and there is that knowledge—or, even if they don't know the policy is there, they are raising the subject, because then they're directed to the use of it and we can implement it.

[454] **Jenny Rathbone:** These are complex fields. Do you think the 'ask and act' pilot is the best way of dealing with this thorny subject? If the front-line practitioner has reservations because of their own experience, they won't ask the pregnant woman or the new mum.

[455] **Ms Sunderland-Evans:** I've worked with one of the health visitors who has actually done the training, you know, the group 2 train the trainer, and in the training session she actually disclosed that, many years ago, she was a victim of domestic abuse herself. In fact, for that reason, she was more enamoured to actually help victims because of what she'd been through before. So, what might be an experience for one person doesn't fit all.

[456] **Jenny Rathbone:** Okay. This is work in progress, obviously. So, what is your role now, having been selected as the pilot? What's your role in enabling other health boards to learn about the pilot and the ups and downs of it?

[457] **Ms Sunderland-Evans:** It's very important to share the learning, because we've identified things we've done well and we've identified things where we'd do it differently next time and we want to share those lessons. So, I do sit on the all-Wales violence against women, domestic abuse and sexual violence working group, so I regularly add those items to the agenda and share them every time.

[458] **Dr Naughton:** It might helpful if I come in here, because I'm the lead for a service within Public Health Wales called the national safeguarding team, and we have a safeguarding network, which comprises all the health boards and the three trusts in Wales and that's how we work and collaborate together. The working group that Wendy's referred to, actually, is part of the machinery of the network, and what I would say is that, with that group, we've already had Wendy and her group feed back to the wider network group on the learning from the 'ask and act' pilot, and also from a previous named nurse who was working within Aneurin Bevan from the work that was happening in the Gwent area as well with regard to the development of regional partnerships. So, that's ongoing, and I think what's been very

helpful is that that particular group were able to influence the national training group in terms of the group 1 learning, getting it on to the NHS e-learning platform, so that, actually, in the organisation I work in, Public Health Wales, we've all completed group 1 through e-learning. So, that was, actually, quite a positive way of influencing that. So, as well as taking it to us, I think you're feeding that into the national training group as well.

[459] **Jenny Rathbone:** So, would you say one of your primary roles was to prevent people reinventing the wheel?

[460] **Dr Naughton:** Well, I think, hopefully, but also learning where there is good practice in one area and actually trying to get that shared quite quickly. And I was glad that you brought up the policy, because one of the patient stories that we shared at the network, probably about 12 months ago, was in fact an employee's story in relation to being a victim of domestic abuse and the particular health board's policy and how she'd been supported. That was incredibly helpful, I think, learning that we shared across the piece. So, it's an opportunity.

[461] **Jenny Rathbone:** And, from Aneurin Bevan's perspective, do you now feel comfortable about rolling out 'ask and act' to your staff?

[462] **Ms Slater:** It is work in progression. So, we are learning from our colleagues in the way that Aideen has just suggested, and we have now built in the level 1 training into our induction programme. So, that's given time to people to complete that 45-minute online training programme, because it is difficult to get 14,000 people through that training. And we are beginning to identify ways of delivering the level 2 training to our staff, and we've identified about 4,500 people that we have to put through that training. Chris, I don't know whether you want to say anything more about that?

[463] **Ms Overs:** Yes. We have identified about 4,500 who have to go through it, but we do see it as building on the routine enquiry training and implementation that, obviously, health visitors have been doing, and midwives have been doing, for what would be around six or seven years. We have also rolled that enquiry out into A&E areas and into sexual health services. So, in sexual health, they routinely ask every man and woman who attends those routine enquiry questions, and, for children, those under 18, they always ask questions about child sexual exploitation. So, they're trying to look at it that way.

[464] As Lin said, the online 45-minute training, all of our staff have to access that, so we've done some work with areas that—. Everybody thinks about the nurses, the doctors, the therapists, but the health board's made up of far more staff than that, and how we roll it out to somebody who works very part time in an area where access to IT is not that straightforward needs a bit of creativity and a bit of thinking about that. And I think we'd hoped for some flexibility maybe in how we could deliver it, but we've certainly—. We've now built it in, as Lin said, into our mandatory staff induction. Every new member of staff has to complete a week of induction, and the 45-minute online training will be part of that. So, that's a good starting point for that.

[465] And, as I said, we're building on the routine enquiry. We have identified some trainers for the 'ask and act' training, who are now—. We've got one who's completed it, and we've got others going through that process, and we're working with our different divisions to clearly identify which staff we need to prioritise, because there are so many—where can we start with this, and who should be our priorities—and we're just starting that process.

13:15

[466] **Jenny Rathbone:** Thank you for that. How much do you think implementation of the Act has focused on domestic violence, to the exclusion of the other aspects of the Act, particularly around sexual violence, and child pornography, you mentioned—child abuse.

[467] **Ms Overs:** Exploitation.

[468] **Jenny Rathbone:** Child exploitation. Would you like to start off?

[469] **Ms Sunderland-Evans:** Having received the training—the group 2 training—and seen the content of the group 3 training, we've actually fed back to Women's Aid and Welsh Government that the content does need to be reviewed, because there is a strong focus on domestic abuse. So, it's really important to bring the sexual violence and the honour-based violence—. So that is something we have fed back.

[470] **Jenny Rathbone:** Okay. One of our local authority witnesses, earlier this morning, said that, obviously, all front-line professionals are being asked to do so many different things relating to the future Generations Act

and in relation to the health and social services Act, and that really what's needed is robust safeguarding training.

[471] **Ms Sunderland–Evans:** Yes.

[472] **Jenny Rathbone:** So, would you like to comment on that? You sound as if you're in agreement on that.

[473] **Dr Naughton:** I'd be happy to comment on that—I'm going to keep coming back to, because this is something that's a huge challenge for the health service, in terms of universal provision, and really, quite frankly, seeing the necessity, of course, that people are confident and competent to respond in an appropriate way, when you're met with very clear evidence, or at least to be proactive in seeking that. So, we have a training group that is really trying to look at what's required from a legislative point of view, how that can be brought together in a framework that's comprehensive but actually achievable, so that it's realistic about supporting health boards and trusts, through collaborating together, and how we can actually ensure that, at the end of the day, the training can be delivered, and that the content meets the requirements that are there in the legislation. And that, at the end of the day, the people on the front line feel able to respond in an appropriate way.

[474] Of course, all of these things, individually, take a huge amount of time, and, if we're spending too much time training our staff, it'll be at the expense of delivering the services. So there's always that tension there. But it's something that we are working very, very actively on, and actually making some progress, looking at, in fact, in terms of, as you say, comprehensive safeguarding training, where the content that actually hits all the parts of the legislative requirements is, rather than trying to always look for a stand-alone piece of training in addition.

[475] **Jenny Rathbone:** So, what do you think is the best solution to some of the more tailored aspects of the Act? I'm thinking particularly around honour-based violence and female genital mutilation, which is obviously going to be a more prevalent presentation in some areas than others.

[476] **Dr Naughton:** Yes.

[477] **Jenny Rathbone:** So, has Public Health Wales thought about how we might ensure that those who need to know about this sort of thing are

prioritised, to get this information?

[478] **Dr Naughton:** Well, that's precisely what's been looked at, in two groups, actually. Because I know that, in terms of a care pathway for FGM, that's been developed as part of the VAWDASV working group, but, equally, in talking across to the training sub-group, and perhaps thinking about priority groups within the staff who would be prioritised first, in terms of the training. We can't get away completely from having it mentioned across the piece, at the very group 1 level, really, or level 1, because, of course, there's different terminology used in relation to the training for this Act as opposed to other Acts. Of course, we do still have some people displaced in different parts of Wales. I live in Powys, as it happens, and so, from a rural point of view, we cannot think like that just because the main groups may be elsewhere. We need to make sure that that awareness is across all of the health service in Wales, really.

[479] **John Griffiths:** Okay. Joyce, I think you wanted to come in on this.

[480] **Joyce Watson:** I wanted to pick up a point, well made, by Aideen, about the cost of training. I just wanted to explore that a bit further, about the cost of not training, and whether there is, or ever has been, any data collected about people who keep reappearing, you know, re-presenting themselves, whether it's at A&E or mental health services, or whatever, as a direct consequence of domestic abuse, and how this level of training, and maybe, therefore, early intervention, could actually be cost-effective.

[481] **Ms Slater:** Absolutely. I think that there is a compelling argument that if we intervene early and we prevent domestic abuse and other forms of violence, then that will have greater impact on health services in terms of lessening the need for mental health services, substance misuse services, as well as our accident and emergency services. So, I think the argument is well made. So, without doubt, we've got to have staff who are trained and feel confident and are competent in identifying and responding to risk safeguarding, whatever shape or form that takes.

[482] I suppose, for me, and talking to practitioners, sometimes it's difficult for them to try to separate the components of safeguarding in the way that we are asked to do. So, practitioners used to work with families or people who are members of families. So, if we're talking about child protection, if we're talking about domestic abuse, if we're talking about adults at risk, they're all safeguarding, and there are usually elements of all of those factors

at play when we're thinking about safeguarding. So, in terms of making training meaningful, sometimes, if we had more flexibility, so that we could have a training session, if you like, that doesn't just focus on one element and then, six months later, they have to have training on another element, and then, six months later, another training, so, you know—. I think it would be not only more economical in terms of our ability to deliver the training, but also it would be more meaningful to practitioners who are dealing with real people, rather than just, you know, the elements of abuse and neglect, if you like.

[483] **Joyce Watson:** It's about safeguarding.

[484] **Ms Slater:** It's about safeguarding.

[485] **Dr Naughton:** Yes. Absolutely.

[486] **Joyce Watson:** Can I, Chair? I know that GPs don't fall necessary under your remit, but they're not totally excluded from it either. I just wondered, because, very often, they will be the first point of call, where they fit into all of this.

[487] **Dr Naughton:** They fit in at various stages, I would suggest. I'm just going to mention one bit from the kind of work that I'm doing I thought I'd like to flag up, really, which is precisely what you say: primary care and having the right information at the time. So, one of the pieces of work again that has come out from our SV working group as part of the network is to have information at the multi-agency risk assessment conferences shared with primary care, so that the GP, who is maybe treating both the victim and, possibly, the perpetrator, has that information and is aware in terms of interpreting the person in front of them and a range of symptoms that are presenting with that knowledge in order to be able to be much more proactive about the appropriate support. And there are, at the moment, some pilots under way—I'm just looking at Wendy, because she's a member of that group, I think I'm correct—about trying to take that forward. It's not without its challenges, because, interestingly, and I think health are probably, at times, appropriately challenged about information sharing. The information sharing challenge, I think, is with the police at the moment, in terms of sharing that information out of the MARAC to primary care. But I don't think they're insurmountable, because good multi-agency working will get over that. But that's one thing I just wanted to share with you, to make you aware of that.

[488] And the other, which you may have heard mentioned, I'm not sure, earlier, is about the IRIS—identification and referral to improve safety—obviously, in primary care—the work that is about having a specific person working into primary care. That's happening in Cardiff and also in the Cwm Taf area as well, about supporting the primary care team, I would suggest, but it's particularly with the GPs—again, I'm looking at Wendy to cut across if I'm getting any of my facts incorrect here—to (a) be trained, but (b) also facilitate women or victims being able to make those disclosures, and to then have someone to provide a greater follow-up in terms of further discussion and, you know, signposting on to services that would be supportive. So, they're two things that are happening in relation to primary care. I don't know if you want to say about training.

[489] **Ms Sunderland-Evans:** GPs aren't within the pilot within ABMU for 'ask and act', but within the last month I've had an inquiry from a GP who co-ordinates GP training with a request for domestic abuse training. So, we're going to be delivering to a group in December. That's encouraging, isn't it, that professions are contacting us, the safeguarding team?

[490] **Jenny Rathbone:** Can I just pick up on the point about the MARAC, because I thought that the whole point of the MARAC is that it's the multi-agency sharing of information to keep people safe? So, you're telling us that GPs don't systematically get information about somebody who's either been the victim or, indeed, the perpetrator?

[491] **Dr Naughton:** No, they haven't been.

[492] **Jenny Rathbone:** That's a massive hole in the safeguarding.

[493] **Dr Naughton:** It is, hence why it's being addressed.

[494] **Jenny Rathbone:** Okay.

[495] **John Griffiths:** Okay. Could I ask whether you would point to any ways in which health boards might be better supported in meeting their duties under the Act? Is there anything in particular that you would want to draw to the committee's attention?

[496] **Ms Slater:** One I think we've just touched on quite significantly, and that's about training, because this is a cost-neutral Act, but, obviously, it's

not without cost. It is about trying to get the right resources in place to make sure that everybody is trained and, as we've said, having some flexibility in the way that we deliver that training would be supportive to health boards.

[497] The other important thing, of course, though, is that if we're asking practitioners to ask and then to act, then they need to be confident that they know how to act and what services are available for them to refer to. I think that's one of the biggest anxieties, particularly for GPs, interestingly, who often have very short consultation periods with their patients. What they would like is a directory of resources, really, that enables them to say, 'Well, if this happens, this is who I can refer to and this is what I can offer'. People need to know what they can offer to patients. So, that's one of the biggest things.

[498] I suppose a concern also is that some of those services are within our gift, so we need to look at how we support our services. I'm thinking about substance misuse and so forth and how we can support those services in delivering. I know that there is some anxiety in the voluntary sector about whether their services will be sustainable going forward. I don't have any evidence of this yet, but there has been comments made at our board that perhaps an unintended consequence of the Act is that resourcing is less available to the third sector because this is now a statutory responsibility of organisations. Therefore, hard-fought-for cash is perhaps being given to other areas where there isn't a statutory responsibility for that to be delivered. I have to say, I don't have the evidence for that, but that's certainly a concern that I have heard from the voluntary sector. So, it is about knowing where the support is.

[499] **John Griffiths:** Jenny.

[500] **Jenny Rathbone:** Well, just to help you out here, BAWSO very clearly stated, on trying to get counselling for people who are the victims of domestic abuse, both adults and children, that there were nine-month waiting lists for something that's a dramatic event that has occurred, which a child in particular needs help for, and the adult too, and that because the waiting lists were so long in statutory services, statutory services were then referring to the voluntary sector—and guess what's happening. So, there is a bit of a perfect storm here, which obviously we need to flag up.

[501] **Dr Naughton:** I think, potentially, also for the helpline as well because, obviously, if we're being effective in asking—part of that would be about

encouraging the use of the helpline—the calls will then rocket as well.

[502] **Ms Sunderland–Evans:** This is anecdotal, but a midwife I spoke to within the last month, who's been a midwife for many years and so has been practising the routine inquiry questions for domestic abuse for many years, actually said that, after having done the group-2 training, within a month after that training, she had far more disclosures from women within that month than she'd had in the previous year, because it just sort of gave her confidence in the way to be asking the question. That's the effect that we want, but we do need the resources to deal with those increases.

[503] **Dr Naughton:** Sorry, if I may, just something else that may be helpful is about learning lessons from reviews. Domestic homicide reviews, of course, unlike the child practice reviews and now the adult practice reviews and adult safeguarding, are primarily, although done in a multi-agency way, Home Office. They are not shared in the way that the child practice reviews and, hopefully, the adult practice reviews are, so we don't get then opportunity in the same way to pull out specific lessons, I think, for health, on, you know, what works as much as what didn't go well. That's a real disappointment. I am aware, from having spoken to the chair of the National Independent Safeguarding Board, that there were 12, if not 13, domestic homicide reviews. But, as chair of the network, that's something I would like to be able to work with and pull out lessons, so that we can very quickly see if there is good practice that could be shared, you know, to have some positive lessons to come out of these tragic events as well. So, if there is any influence there, we would really hope you could support that.

13:30

[504] **John Griffiths:** [*Inaudible.*] Okay, we had better move on to the national strategy, and I think that Sian Gwenllian has some questions.

[505] **Sian Gwenllian:** Rwy'n mynd i siarad yn Gymraeg. Roeddwn i jest eisiau mynd ar ôl y strategaeth genedlaethol sydd ar ffurf ddrafft, wrth gwrs, ar hyn o bryd. I ddechrau, beth yw eich barn chi ar y strategaeth yn gyffredinol? **Sian Gwenllian:** I am going to speak in Welsh. I just wanted to go after the national strategy that is in draft form at the moment. To start, what are your views on the strategy in general?

[506] **Ms Slater:** I think the strategy is quite clear, and it sets out what the

Act intends in terms of prevention of abuse, and what we need to do to protect, and also the supportive services. For me, what it doesn't do is tell us in what direction of travel we need to be, and what will be the indicators to tell us that we are getting there. So, I would be looking for some support around what the outcomes are, and I understand that that will be coming, but it isn't within this strategy.

[507] **Dr Naughton:** I just would like to say that, again, I am a little bit disappointed that there wasn't more in relation to sexual violence and online exploitation, and more in relation, perhaps, to child sexual exploitation as well. It is mentioned, but I don't think there is sufficient emphasis in it. I was pleased to see that adverse childhood experiences figure as one line within the strategy. Coming from Public Health Wales, obviously, I would want to emphasise how hugely important this piece of work is in terms of all the public bodies, and indeed working at individual and community level, drawing on the real opportunities that we have from the three pieces of legislation that we have—the Well-being of Future Generations (Wales) Act 2015 and the Social Services and Well-being (Wales) Act—for prevention to be a much bigger part of the work that we are doing. And so, while healthy relationships in schools and a whole-school approach is to be applauded, I actually think it needs to start much earlier than that. We would look at trying to influence universal provision through the Healthy Child Wales programme in that earliest discussion of good emotional development of babies and through, so that by the time the children are getting into school, that is already there, in terms of healthy relationships. So, they are a couple of points that I would like to raise in relation to the strategy.

[508] **Sian Gwenllian:** Felly, rydych chi'n teimlo bod y rheini ar goll o'r strategaeth fel y mae ar hyn o bryd. **Sian Gwenllian:** So, you feel that those are missing from the strategy as it is at present.

[509] **Dr Naughton:** I don't think there's sufficient emphasis. There's one line. I think there could be more.

[510] **Sian Gwenllian:** Pa mor bwysig yw'r strategaeth yn gyffredinol rŵan ar gyfer gyrru'r gwaith hwn ymlaen? **Sian Gwenllian:** How important is the strategy in general, now, for driving this work forward? Is it important that the strategy is a robust strategy, un gadarn ac yn cynnwys yr holl elfennau, a'i bod yn glir, ynteu a yw'r and that it includes all the elements gwaith yn digwydd beth bynnag, heb anyway, without the strategy?

y strategaeth?

[511] **Ms Slater:** I think that we have all got to move at the same pace across Wales. Therefore, a national strategy with all the elements that we have just discussed is vital. That will set the landscape for our local strategies, and we will all be clear then how we are progressing—locally, and comparing ourselves across regions and, as we are doing, as Wales.

[512] **Sian Gwenllian:** Ond ar hyn bryd, nid yw'r strategaeth yn ei lle yn iawn ac nid chi yw'r cyntaf i dynnu sylw at wendidau yn y strategaeth. Mae yna bryder y bydd yr holl broses yn cael ei hoedi rŵan wrth inni drïo cael gwell strategaeth. Neu a ydych chi'n meddwl ei bod hi'n bwysig symud ymlaen beth bynnag, trio gwneud yn y cyfnod byr yma, trio cael y strategaeth cyn gliried â phosibl er mwyn symud ymlaen, neu a fyddai'n well oedi er mwyn cael y strategaeth yn iawn? Mae yna bach o falans yn fanna sydd angen digwydd.

Sian Gwenllian: But, at the moment, the strategy isn't in place correctly, and you're not the first to draw attention to the weaknesses in the strategy. There is a concern that the whole process will be delayed now, as we attempt to get an improved strategy. Do you think it's important to move ahead anyway in this very short period, and try to get the strategy as clear as possible in order to move on, or would it be better to pause in order to get the strategy right? There is an issue of balance there.

[513] **Ms Slater:** I would suggest that does need to be a balance. We're not stopping; we're delivering the training. We've developed the boards, we're setting our own plans but we could do so much more if we had a national strategy, I think. So, it is the balance as you say—moving forward but then having clearer direction in time to come.

[514] **Sian Gwenllian:** A ydy'r maes iechyd yn cael digon o sylw yn gyffredinol, heblaw am yr elfennau penodol? Y maes iechyd—nid oes llawer o sylw iddo fo yn y strategaeth.

Sian Gwenllian: Does the field of health have enough attention in general, apart from the specific elements? So, health—there doesn't seem to be much attention given to health in the strategy.

[515] **Ms Slater:** I don't think that there's any particular direction for any of the agencies actually within the strategy. I think it's very broad. And I think there could be some greater clarity about the responsibilities of the various agencies, both working singularly and together, and I think that would be

helpful.

[516] **Dr Naughton:** And particularly, I would suggest—this may have been mentioned already—as to the integrated pathway that’s referred to, we’d need to understand and have greater clarity on what’s that’s going to look like and the various agencies’ roles in relation to that pathway. But I agree with you: I think, particularly for health, working as part of—I’m going back to sexual violence again—sexual assault referral centres, having some understanding of how they’re going to be sustained and whether that’s supported, because we still have a very varied response across Wales to people who need to be seen at sexual assault referral centres.

[517] **John Griffiths:** Aideen, could I ask you to elaborate a little in terms of what you said around the importance of adverse childhood experiences and those early years in terms of hopefully embedding the right sort of values and understandings? What would you like to see in that national strategy to make it what it should be in terms of inclusions that would address those matters?

[518] **Dr Naughton:** I mean, I would probably want to see it as a thread that runs throughout really, because to just have it under one of the objectives that seems to relate to education seems to imply that it’s something that will be taught in school. But, really, this is a whole-systems change. While waiting to come in, we were just saying that we still have cultural responses, just chattering around in the media, that seem to want to respond in a different way to, say, Donald Trump’s revelations over the last while or so. And so, we’ve got to actually have something that permeates the whole strategy and that, if we’re serious about prevention, is not just in this area but across the board really.

[519] So, I would like to see, from the very beginning, how we’re tackling this in terms of what people need to understand about adverse childhood experiences as individuals, how communities know they can make a difference, how public bodies know that they can actually deliver the service in a way that is aware, when their staff are interfacing with people, that they have a real understanding of what adverse childhood experiences may mean to that particular presentation. I’m not saying a traumatic presentation; it could be an illness. If we don’t understand that there may be an ACE behind that, then we won’t necessarily approach that particular individual in way that’s going to be most helpful for them. So, it’s quite a broad answer I’m giving you, but it’s something that shows that thread running throughout.

And I think that's very much where Public Health Wales are coming from, from a population point of view, about trying to really establish incrementally a real system change in how we understand adverse childhood experience and the long-term impact throughout life, and throughout health. We've always kind of understood from the mental well-being point of view, but actually physical health and people's ability to be fully participant and empowered within our society.

[520] **John Griffiths:** Okay. Jenny.

[521] **Jenny Rathbone:** It all starts with the midwife. Regardless of the training that's been going on online all midwives are supposed to ask whether there's been domestic violence going on of the pregnant woman when nobody else is present. What proportion of midwives actually record having had that conversation?

[522] **Ms Overs:** They should ask at least once, preferably twice in that time, and if they're not able to ask the question because there's always somebody with the woman, then that information is then given to the health visitor to take the opportunity in the early post-natal period to do that. Midwives do manage—the exact proportion I can't remember—on the first enquiry. It is good. They do ask once, pretty nearly everyone does. Best practice would be to ask it twice. Uptake and the completion of the second enquiry is less good and effective, but asking once is good and if it hasn't been asked that transfer of that information to the health visitor to then ask it is also good. So, it does get picked up by the health visitor if the midwife hasn't been able to do it. But, ideally, it should be asked twice, but our first is good. Aileen, do you know the exact figures?

[523] **Dr Naughton:** They vary. But I would have to say that they've been stubbornly lower, much lower, for enquiry 2 compared with enquiry 1, and I think there's probably a whole host of reasons that would go into that, but it's difficult to kind of come out here.

[524] **Jenny Rathbone:** But would you agree that that is the foundation stone?

[525] **Dr Naughton:** I would agree that, yes. It is the foundation stone, yes.

[526] **Jenny Rathbone:** That's the foundation stone of healthy relationship between the mother and the baby.

[527] **Dr Naughton:** Absolutely.

[528] **Ms Overs:** And we see the training here is building on that, really, and I'm sure routine enquiry 1 and 2 will improve with the introduction of the Act and the further training and support that goes into that.

[529] **Ms Sunderland–Evans:** Can I just add one thing to that? There is now a new all–Wales hand held maternity record, a new version, and the difference with the new version is that, for every ante–natal visit, there's a reminder for the midwife to ask the question. So, for every visit it says 'RE' and there's another box to actually say whether there was somebody present. If I was a midwife and I'm looking at a lady and she's 40 weeks, it would actually highlight to me that this question has not been asked at any one time and that would be a red flag really to get that woman on her own. So, that's a big improvement on those notes, whereas before it was hidden in a different page.

[530] **Jenny Rathbone:** Thank you for that.

[531] **John Griffiths:** Okay. I think this has taken us into education, but I think Joyce may have a question or further questions.

[532] **Joyce Watson:** I've got a question and it's quite simple: do any health professionals have any role whatsoever in discussing abuse and healthy relationships with children?

[533] **Dr Naughton:** I'm just thinking, either you or I think it was probably Chris—both with CAMHS but also for children under 18, in the sexual health services, they'd ask direct questions.

[534] **Ms Overs:** All young people presenting in our sexual health services, certainly those under the age of 18, are asked questions—there's screening—in relation to child sexual exploitation. Of course, I suppose our core services, our school nurses and our specialist nurses for looked–after children would definitely be asking questions around that area. So, they would be the main ones. Any young person presenting in A&E, they're seen by a children's nurse and those concerns will be there in their minds as well to ask.

[535] **Joyce Watson:** Okay. In terms of education, where do you think you fit

as health boards in trying to disseminate information? What would you see as education I suppose is what I'm really trying to ask, and where would you see you fitting within educating people about this Bill in all its context?

[536] **Ms Slater:** I think, in the main, it's about raising public awareness. So, it's about having posters about where people can get help from. It's about making sure that those are up to date and relevant and in the right places. It's about having clear policies and procedures within our own organisations about how we manage concerns about any types of abuse and neglect. Aideen mentioned a case study earlier. That was a case within our own organisation of a nurse that was being harassed by her ex-partner, and that was quite a difficult situation to manage but we used that for learning both within the network and within our own organisation. We have videos and training now—sorry, DVDs—as part of a training package for managers so that they are supported in both identifying and managing any concerns about domestic abuse and sexual violence in our workforce. So, it's constantly making sure that we are raising awareness, and educating people at the right level so that they can take action.

13:45

[537] **Ms Overs:** And we used the national domestic violence week last year to particularly target our managers—being aware of the policy, how they could support staff if they did disclose, or how they could maybe look for it within their own teams and giving them the confidence to deal with it. That was a particular focus last year during that week with our workforce.

[538] **Joyce Watson:** I might be wrong, but I would assume that some aspects of sexual violence are better known and more easily and readily understood than other aspects like FGM, honour-based violence, you know, those sorts of wider issues, and they'd be more prevalent in some areas like yours, maybe, than in Powys, or even better understood, should we say. How do you deal with that?

[539] **Ms Slater:** I think we're only just touching the iceberg to be honest with you. We are identifying FGM in our maternity services, but that's probably about the only place. There might be a case or two that come up in other areas, but generally it's within our maternity services and we report those data. I think it's very difficult to know how to manage those situations for staff, because there clearly are concerns about the woman who has had this done to her, but also there are then safeguarding concerns about

children. I think that that presents a real tension and difficulty for practitioners. So, it's about managing that better. But I think we're only just tipping the iceberg.

[540] **Dr Naughton:** I'm a practicing paediatrician as well. I have had one potential case referred to me in my clinical role—because I actually work clinically in Aneurin Bevan, and I work within Public Health Wales for the rest of my job. I think we are all on a steep learning curve here. Despite having had some experience many, many years ago having been a voluntary worker in Sudan—. I think what we need to do, and it's incumbent upon us to share as much as we can, both from a clinical point of view—. I work with people in Cardiff and in London who have a lot more experience, so that's amongst the paediatric group, but the same things happen with our obstetricians and our midwives in maternity. But, to be mindful that, while we may have areas of expertise, we need to see how can that be spread wider.

[541] I just wanted to go back to one thing that struck me about an opportunity, just back on education, to think also about local public health teams who are interfacing with the public as well. Something that just struck me—and I know that we're trying to look at this without overwhelming people with messages—but to keep joining up the dots here. We went back to saying it's all about safeguarding, to keep joining up the dots. So, where we're doing something that's around awareness around alcohol, for example, to really realise what a huge role alcohol plays in relation to the subject matter we're talking about today. That is an opportunity, again, to actually bring those messages together. So, I just think we need to be as we are, but to just try to avoid compartmentalising all the time, and actually to bring things together.

[542] **John Griffiths:** Okay, thanks very much for that. Jenny.

[543] **Jenny Rathbone:** I just wanted to add, going back to different health professionals' involvement with young people, the NSPCC wants to see appropriately trained practitioners for a whole-system approach to healthy relationships in schools. I just wondered if—some teachers find this a difficult subject, they're just not that comfortable—do you think, potentially, school nurses could be, in some cases, because it wouldn't be every school nurse who'd want to do it, trained up to do this, as, obviously, an expert in this?

[544] **Ms Overs:** Well, our school nurses, they do work in the schools at the

moment working on some of those difficult areas. They do teaching sessions, working alongside education on healthy relationships, sexual health, some of the areas that teachers find a bit more difficult to do. So, there is certainly the potential for the school nurse to develop further expertise to support those programmes in school.

[545] **Jenny Rathbone:** And be delivering these programmes.

[546] **Ms Overs:** And be delivering it, yes. But it's probably better done together, isn't it, rather than the school nurse comes in and delivers the session on it. It needs to be integrated in a together approach. There probably are teachers who could do it very, very well. It's about doing it together and that confidence, isn't it, to do it a bit like the training at the moment, which is delivered by the third sector and by the health board. It brings something extra to it, doesn't it, if you come at it from slightly different perspectives. So, I think doing it together would be great.

[547] **Jenny Rathbone:** Thank you.

[548] **John Griffiths:** Okay. Could I ask two further questions, please? One is about local strategies: whether you have any sense, really, of whether those local strategies are on course and are likely to be delivered by 2018.

[549] **Ms Slater:** I can say in Gwent that the first action that we're taking, that we're just about to start, is the needs assessment. So, we've commissioned a needs assessment to be undertaken by Welsh Women's Aid, and they will be progressing with that and they will be delivering the outcome of that to us in December. From that assessment, we will then go on to develop our local strategy. So, we're on target, I think, to have a strategy in place by March.

[550] I think it's very important that we think about all the other needs assessments that are also being undertaken in terms of the population needs assessment as well, and how we, again, don't duplicate, but we make sure that one fits into the other, so that will maximise our efforts.

[551] **John Griffiths:** Okay. I don't know, Aideen—would you have any sense of what the picture is more widely?

[552] **Dr Naughton:** I couldn't say with any certainty about where everybody is. I don't get quite as involved with that within my remit within Public Health

Wales. But just to echo, really: that's the thing, I think, about making sure what's required coming through from the well-being of future generations Act and the public service boards, and that end of prevention, is tying up with the regional footprint, the health board footprint, for the population needs assessment. If I have an opportunity to say, I think that the regional partnerships, of which I'm more familiar, are obviously the safeguarding boards, but I think our regional planning partnerships are critical in the service design and delivery in response to those population needs assessments.

[553] **John Griffiths:** Okay. Final question, then, on the national adviser, do you believe that the national adviser has the necessary resource and capacity to deliver on the Act? Anybody want to venture an opinion on that?

[554] **Ms Slater:** Well, she's certainly able to help us deliver on the objectives of our board, but she is one person, isn't she? I think it's difficult for me to answer that. I think perhaps she might best answer that.

[555] **Dr Naughton:** What I would say is, I think—also having met the national adviser and met her with our team—we've got a very able person in that role at the moment who's very passionate and very competent, but, you know, doesn't have an office behind her like the older people's commissioner and the children's commissioner. So, I think that just speaks for itself, really, in terms of what can be achieved by one individual with very limited resources, no matter how passionate and energetic they are. So, I think that is a challenge, a real challenge.

[556] **John Griffiths:** Okay, that's fine. Thank you very much. Is there anything any of you would like to add? No? Well, can I thank you all very much for coming along today to give evidence? You will be sent a transcript that you can check for factual accuracy. Thank you very much.

13:54

Papurau i'w Nodi Papers to Note

[557] **John Griffiths:** Okay. That takes us on, then, to papers to note, the first of which is a letter from myself to Carl Sargent, as Cabinet Secretary for Communities and Children, around the national strategy and the evidence that we're taking at the moment and the exercise that we're engaged in. Any

views on that, or are you all content to note?

[558] The next, then, is the letter from the Cabinet Secretary for Communities and Children to myself. Happy to note that?

[559] The third is the letter from the Gwent Police and Crime Commissioner. Content to note? Okay, thank you very much.

13:55

**Cynnig o dan Reol Sefydlog 17.42 i Benderfynu Gwahardd y Cyhoedd o
Weddill y Cyfarfod
Motion under Standing Order 17.42 to Resolve to Exclude the Public
from the Remainder of the Meeting**

Cynnig:

Motion:

bod y pwyllgor yn penderfynu that the committee resolves to gwahardd y cyhoedd o weddill y exclude the public from the cyfarfod yn unol â Rheol Sefydlog remainder of the meeting in 17.42.

accordance with Standing Order 17.42.

Cynigiwyd y cynnig.

Motion moved.

[560] **John Griffiths:** At this stage, then, if you're happy, we'll go into private session. So, we have a motion under Standing Order 17.42 to resolve to exclude the public from the remainder of the meeting to enable us to consider the evidence we've received during these evidence sessions today. Are you all content to move to private session? Yes? Okay, thanks very much. I close the public meeting.

Derbyniwyd y cynnig.

Motion agreed.

Daeth rhan gyhoeddus y cyfarfod i ben am 13:55.

The public part of the meeting ended at 13:55.