

How we must all play our part: a public health approach to halting the epidemic in gender- based violence

January 2024



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How we must all play our part: a public health approach to halting the epidemic in gender- based violence

January 2024



About the Committee

The Committee was established on 23 June 2021. Its remit can be found at:
www.senedd.wales/SeneddEquality

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Welsh Labour



Jane Dodds MS
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Altaf Hussain MS
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Sarah Murphy MS
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Chair's foreword

Two women a week are killed by a former or current partner in England and Wales. Violence and abuse against women is an epidemic. The figures indicate that 1 in 3 women aged 16 to 59 will experience domestic abuse in their lifetime. But because of underreporting, it is difficult to know the true scale of the problem.

Behind these shocking statistics is a person, a mother, a colleague, or a loved one. Each is a victim of this epidemic and each deserves to be remembered. Our focus in this report is on how we can help to end this epidemic. We must all take collective responsibility for tackling it, especially through engagement by men and boys.

Our recommendations emphasise the leading role the Welsh Government has to play in:

- promoting gender equality across the public, private and third sectors, acknowledging that it is the assumed dominance of men in our families, our work and our culture which is the building block for endemic gender-based violence;
- ensuring that interventions to prevent and mitigate GBV are based on the best available evidence of what works;
- supporting those in positions of responsibility starting with frontline services with the training and resources to deliver effective interventions.



Jenny Rathbone MS,

Chair of the Equality and Social Justice Committee

Recommendations

Recommendation 1. The Welsh Government should adopt a whole-of-government approach and work with partners across public services, the private and third sectors to promote gender equality and inclusivity in Wales. To help to achieve this it should implement a ‘gender equality test’ which assesses the impact of all policy decisions and legislative proposals on gender equality with the aim of reducing gender disparities. The gender equality test should be introduced as soon as feasibly possible and should be applied to all Welsh Government decisions from December 2024 onwards at the latest. Page 18

Recommendation 2. The Welsh Government should embrace its role as an innovator and leader in applying a public health approach to gender-based violence, by:

- identifying opportunities to raise awareness and generate shared understanding of the approach and Blueprint;
- contributing to the evidence base of what works by proactively publishing progress updates and resources used to underpin the Blueprint;
- continuing to prioritise work with the next generation through effective programmes aimed at children and young people.Page 19

Recommendation 3. The Welsh Government should set out how the development and evaluation of policies which address the intersectionality of GBV will be informed by data, evidence, and analysis. In particular the Welsh Government should provide the Equality, Race and Disability Evidence Units with clarity regarding their priorities and agree timescales for completion of key milestones by end of April 2024. The response should include details of:

- the target date for completing the work to establish baseline data and a summary of the baseline indicators it intends to use;
- the partners it will work with to gather baseline data and the target date by which data-gathering efforts will be mainstreamed; and
- when it anticipates the data gathered by the Units will be able to meaningfully contribute to policy development and evaluation. Page 26

Recommendation 4. The Welsh Government should take urgent action to ensure that fast-tracked, specific and specialised therapeutic services are available for all babies, children and young people who experience or witness gender-based violence and provide details of these in response to this report. This action should include:

- details of how the Welsh Government is enforcing the rights of babies, children and young people who have experienced or witnessed violence to access fast-tracked, specialised therapeutic services;
- reviewing the availability of therapeutic services for children and young people who witness or experience violence, and how well these are integrated into the broader health and education system.³¹

This work should involve all relevant stakeholders (including the police, CAFCASS and local authority social services) and be progressed at pace with an update provided to the Senedd in the autumn term of 2024.....Page 31

Recommendation 5. The Welsh Government should request that Estyn’s Chief Inspector of Education and Training in Wales undertakes a national thematic review of healthy relationships in schools. The review should:

- include views and recommendations on the sufficiency of resources and training for teaching healthy relationships;
- seek to verify whether there is any link between a lack of provision and higher levels of deprivation; and
- identify best practice with regards to ‘whole school approaches’ to preventing GBV.

The review should be included in the next available programme of thematic reviews and completed within the usual timescales..... Page 36

Recommendation 6. The Welsh Government must take immediate action to ensure that teachers are reminded of the mandatory reporting duty placed on them in relation to FGM. Longer-term, the Welsh Government should work with Estyn on establishing monitoring arrangements and safeguards to provide assurance that teachers are aware of their legal duties in relation to preventing GBV. The work to establish these monitoring safeguards should be completed by September 2024..... Page 36

Recommendation 7. The Welsh Government should require its newly established Advisory Panel for Digital Resilience to agree its priorities and forward work programme at pace and publish these by the end of April 2024. The Panel should clarify which areas it will prioritise, estimated timescales for sequencing of its forward work programme and how it will address the significant areas of non-devolved policy and legislation relating to digital and online regulation.Page 41

Recommendation 8. The Welsh Government should work with health bodies to enhance the ability of healthcare professionals to identify and respond to GBV. To give effect to this recommendation the Welsh Government should:

- extend the Ask and Act duty to other health and social care professionals and issue revised guidance to GPs in the first instance;
- track and publicly report statistics on the participation of staff in training programmes;
- collate and publish statistics on the timeliness of response times (between disclosure and being seen by a specialist) to Ask and Act referrals;
- and clearly outline the methodology for measuring the impact of training initiatives.

This work should be completed by March 2025..... Page 45

Recommendation 9. The Welsh Government should establish a seventh workstream within the VAWDASV Blueprint whose mission will be to make ambitious recommendations on how businesses and organisations can create safer and more equal workplaces. The workstream should cover practical information on the policies, procedures and training necessary to support this aim. The group should operate in a spirit of social partnership with representation from employers and trade unions.....Page 47

Recommendation 10. The Welsh Government should consider funding a nation-wide public awareness campaign with a top male, sporting role model who can inspire other men and boys to take a stand against violence and promote positive values and behaviours. It is important this person is well-informed about the issue and receives appropriate training to effectively communicate and advocate for change. An evaluation of impact should be undertaken at the end of the campaign. Page 54

Recommendation 11. The Welsh Government perpetrator workstream should undertake a rapid review of perpetrator programmes designed to prevent GBV that are available across Wales. The review should seek to provide assurance that each programme considers the safety of survivors and can evidence effective rehabilitation. It should also consider different cultural and contextual factors that can influence the effectiveness of perpetrator programmes and be completed by June 2024..... Page 58

Recommendation 12. All Members of the Senedd should commit to completing training on GBV prevention by the end of 2024. Alongside this commitment, Senedd Member Support Staff and Senedd Commission staff should be encouraged via the appropriate channels to participate in such training.

This should be sought from a best practice provider and seek to address cultural norms and practices that perpetuate GBV whilst respecting cultural diversity.
..... Page 59

1. Introduction

What is a public health approach?

1. The World Health Organisation (WHO) defines a public health approach to violence prevention as “seeking to improve the health and safety of all individuals by addressing underlying risk factors that increase the likelihood that an individual will become a victim or a perpetrator of violence”.¹
2. Applying this approach to gender-based violence (or GBV) involves addressing it as a public health concern rather than solely an individual problem. It incorporates programmes for the population as a whole and aims to deliver cultural change. As such it recognises that GBV is a widespread and complex problem that:
 - looks at society as a whole and recognises the significant consequences that GBV has on health and wellbeing over a lifetime;
 - recognises that a multi-sectoral response and collaborative working is essential to eliminate GBV; and
 - seeks to address the root causes of violence through a three strand approach to prevention; primary, secondary and tertiary.

A note on language

It is well documented that there is a strong and consistent association between gender inequality and violence against women. Gender-based violence (GBV) is disproportionately perpetrated by men. Women and girls are disproportionately victimised. The term GBV acknowledges the power inequalities that exist at many levels in our society and underpin multiple forms of violence against women. However, it also recognises that men and boys can be the target of GBV. To reflect this, the term GBV is used throughout this report.

¹ [World Health Organisation, The VPA Approach](#)

Background to the Committee's inquiry

- 3.** The Equality and Social Justice Committee's inquiry set out to explore how a public health approach to preventing GBV is being applied in Wales. We focused, in particular, on primary and secondary prevention.
- 4.** We gathered evidence via a public consultation and held evidence sessions with experts. We established an Advisory Group made up of survivors of GBV who gave powerful testimonies that shaped our approach to scrutiny sessions with Ministers and the inquiry generally.² Members also met participants of a perpetrator programme in Cardiff.³
- 5.** The Minister for Social Justice, Jane Hutt MS, (the Minister) gave evidence to the Committee on 18 September 2023 and provided a written paper.⁴ The Committee also took evidence from the Minister for Health and Social Services, the Deputy Minister for Social Services, and the Minister for Education and Welsh Language.⁵ The Minister for Education provided a written paper.⁶
- 6.** On 3 January 2024 an independent review of South Wales Fire and Rescue Service found significant problems with the culture and values of the organisation including discriminatory and misogynistic attitudes and behaviours throughout. These findings, though relevant to the themes of the inquiry, were published after the Committee had finished gathering evidence and were too late to be considered or reflected in this report.
- 7.** Annexes 1 and 2 provide full details of the evidence received. The Committee would like to thank all those who contributed to the inquiry, in particular members of the Advisory Group who shared their time and experiences so willingly, and whose input was crucial.
- 8.** Full details, including the terms of reference, are available on the [inquiry homepage](#).

² The Committee met with the Advisory Group on 22 May 2023 and 11 September 2023.

³ Jenny Rathbone MS, Altaf Hussain MS, Sarah Murphy MS and Sioned Williams MS met with the manager and participants of the Driving Change programme in Cardiff on 21 June 2023. A note of the discussions is available online.

⁴ Equality and Social Justice Committee, [18 September 2023](#); Welsh Government [evidence paper](#).

⁵ Equality and Social Justice Committee, [11 September 2023](#).

⁶ Welsh Government, [evidence paper from the Minister for Education and Welsh Language](#).

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Where to find advice and support

If you, or someone you know, is impacted by any of the issues raised in this report, you can contact the Live Fear Free helpline for confidential information, advice or support:

Live Fear Free: 0808 80 10 800

Figure 1 the legal and policy framework for preventing GBV in Wales

The legal and policy framework in Wales



The Violence Against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015

Created legal duties to prevent gender-based violence and for Welsh Government to publish a VAWDASV strategy
The 2022-2026 strategy commits to taking a public health approach to violence prevention
Prevention and early intervention are one of six priorities



Violence against women, domestic abuse and sexual violence: blueprint high level action plan

Provides further detail on implementation of the VAWDASV strategy
Contains 6 workstreams which are reported on annually
Covers the work of devolved and non-devolved public bodies



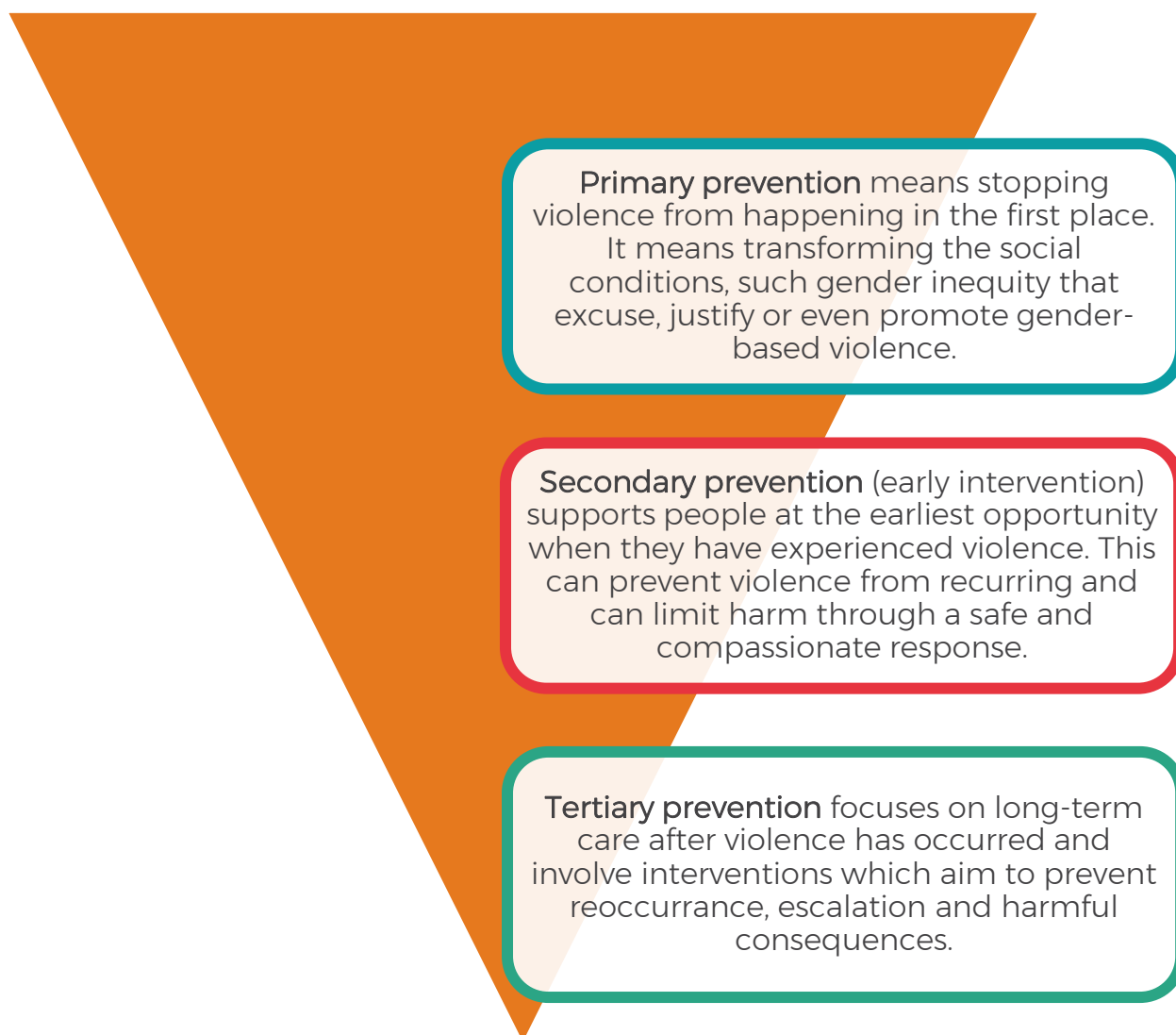
Serious violence duty

Places responsibility on a range of multi-agency partners to take a public health approach to violence prevention
Aims to ensure that services collaborate and share information to prevent and reduce serious violence
The duty covers England and Wales

9. The Welsh Government emphasises that its public health approach to violence prevention does not mean less support for survivors:

“... this is about expanding the impact of what we do to ensure that survivors as individuals are supported holistically and that there is a wider societal effect which reduces the chances that they would experience VAWDASV⁷ in the first place.”⁸

Figure 2 the differences between primary, secondary, and tertiary prevention



10. In March 2023, the Welsh Government published its Blueprint consisting of six workstreams designed to take forward actions set out in the VAWDASV

⁷ Please note that VAWDASV stands for Violence Against Women, Domestic Abuse, and Sexual Violence and is the term used officially in some circumstances e.g. the VAWDASV Act 2015

⁸ Welsh Government [evidence paper](#).

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strategy.⁹ The Minister highlighted that steps are being taken to make the workstreams more transparent, including publishing summary minutes of Blueprint meetings on the Welsh Government website and a newsletter for stakeholders.¹⁰

11. In 2021 the Wales Violence Prevention Unit in Public Health Wales (PHW) published the findings of a Welsh Government-commissioned review into ‘What Works to Prevent violence against women, domestic abuse and sexual violence?’. The report provided a systematic assessment of the evidence base for the primary and secondary prevention of VAWDASV.¹¹

Advisory Group and co-production

12. Co-production is a key feature of a public health approach. A National Panel of victims and survivors provides advice to the Welsh Government on the Blueprint.

13. We set-up an Advisory Group to inform our work at key stages of the inquiry. These women with lived experience of gender-based violence provided feedback on the key themes in the evidence and suggested potential questions ahead of the Ministerial evidence session. We continue to seek the views of the Advisory Group on the Welsh Government’s response to our recommendations ahead of the Plenary debate on this report.

⁹ Welsh Government, [Violence against women, domestic abuse and sexual violence: blueprint high level action plan](#), March 2023

¹⁰ [Letter from the Minister for Social Justice, 19 October 2023](#)

¹¹ Public Health Wales, [What Works to Prevent VAWDASV?](#), Sept 2021

2. Responding to the challenge

“The critical context for gender-based violence is gender inequality and cultural norms of men as powerholders, decision makers and leaders at societal level, in the work-place and in families.”¹²

Gender inequality

14. GBV is deeply rooted in the social and cultural structures, norms and values that govern society. Public Health Wales (PHW) said it is often perpetuated by a culture of denial and silence which is:

“... both a cause and a consequence of gender inequality”.¹³

15. PHW said recognising inequalities in experience of violence, and applying an intersectional lens, is key to a public health approach.¹⁴

16. Promoting gender equality is key to preventing GBV. Evidence from Welsh Women’s Aid, Plan International UK, the Royal College of Psychiatrists and Policing in Wales all acknowledged that gender inequalities are the breeding ground for harmful attitudes and beliefs.¹⁵

17. Dr Stephen Burrell of Durham University said that the “gendered roots of violence against women and girls remain front and centre” to a public health approach:

“Ultimately, this violence is founded in, and plays a significant role in reproducing gender inequalities in which women’s lives are valued less and men are encouraged to expect to have more power. This cannot simply be seen as one among many

¹² National Advisers for Violence against Women, Gender-based Violence, Domestic Abuse and Sexual Violence (VAWDASV), [written evidence](#)

¹³ Public Health Wales, [written evidence](#)

¹⁴ Public Health Wales, [written evidence](#)

¹⁵ Welsh Women’s Aid, [written evidence](#); Plan International UK, [written evidence](#); Policing in Wales, [written evidence](#)

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factors contributing to gender-based violence – it is the central factor.”¹⁶

18. Dr Burrell noted that research supports “gender transformative approaches”, so individuals can actively challenge gender norms, promote positions of social and political influence for women in communities, and address power inequities. He noted that funding for this kind of prevention work “is still very small when you look at the scale of the problem”.¹⁷

19. The Minister said the need to tackle male violence, misogyny and gender inequality is key to breaking the cycle and “addressing the root cause of VAWDASV”.¹⁸

Government’s approach

20. PHW encapsulated the scale of the response needed to tackle GBV:

“No single sector or organisation can solve this problem alone.”¹⁹

21. Welsh Women’s Aid said that preventing GBV “is everyone’s business”.²⁰

22. The need to work collaboratively across agencies in all sectors was emphasised by the National Advisers, Dr Rachael Fenton, PHW, NSPCC Cymru, and Lloyds Banking Group, the British Psychological Society (BPS) and others.²¹

23. The National Advisers for VAWDASV stressed the need to look at the impact of broader policy decisions on the prevention agenda.²²

¹⁶ Dr Stephen Burrell, Durham University, [written evidence](#)

¹⁷ Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 43

¹⁸ Welsh Government [evidence paper](#)

¹⁹ Public Health Wales, [additional written evidence](#)

²⁰ Welsh Women’s Aid, [written evidence](#)

²¹ Written evidence: National Advisers for VAWDASV; NSPCC Cymru; Lloyds Banking Group; British Psychological Society, [Equality and Social Justice Committee, 22 May 2023, Record of Proceedings, paragraph 52:](#)

²² Equality and Social Justice Committee, [22 May 2023, Record of Proceedings](#), paragraphs 54 and 209

24. Lara Snowdon of PHW warned that the public health approach as set out in the VAWDASV strategy is very much in its infancy:

“... we have this high-level commitment in the strategy, but there is still a lot of work, really, to do to embed that approach in practice across Wales.”²³

25. The Minister acknowledged that a lot is still unknown about the effectiveness of public health approaches to tackling GBV and that the Government intends to “learn together” with partners to develop the approach. She highlighted the creation of a Central Repository of Knowledge which “will provide a focus for developing evidence and evaluation.”²⁴

26. More broadly, the Minister said that tackling VAWDASV was “at the forefront of the Government’s priorities” and she was working with colleagues across government to deliver, but the approach would need to involve “the whole of society”.²⁵

Our view

An epidemic of violence

The prevalence of GBV in our society can be described as an epidemic. Just as it is not possible to contain an epidemic without knowing how it is transmitted, so GBV cannot be prevented unless we confront gender inequality.

We believe the root cause of this epidemic lies in social inequality, the most important of which is gender inequality. Implementing policies that promote gender equality must be the overarching imperative. Addressing the underlying imbalance between men and women, is key to preventing and ultimately eliminating GBV, fostering a safer and more equitable society for all.

This will involve challenging cultural change. For its part the Welsh Government will need to adopt a vigorous, ‘whole of government’ approach. It will need to leverage the support of partners across the public, private and third sectors and make this truly a collective responsibility. The approach should include

²³ Equality and Social Justice Committee, [22 May 2023. Record of Proceedings](#), paragraph 5

²⁴ Welsh Government [evidence paper](#)

²⁵ Equality and Social Justice Committee, [18 Sept 2023. Record of Proceedings](#), paragraphs 5, 16

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introducing a ‘gender equality test’ which assesses the impact of all policy decisions and legislative proposals on gender equality.

Recommendation 1. The Welsh Government should adopt a whole-of-government approach and work with partners across public services, the private and third sectors to promote gender equality and inclusivity in Wales. To help to achieve this it should implement a ‘gender equality test’ which assesses the impact of all policy decisions and legislative proposals on gender equality with the aim of reducing gender disparities. The gender equality test should be introduced as soon as feasibly possible and should be applied to all Welsh Government decisions from December 2024 onwards at the latest.

Action 1. The Welsh Government should ensure all equality plans address gender disparities, challenge stereotypes and foster a culture of respect and equality. It should work with partners on detailed actions it will take in the short, medium and longer-term to improve public awareness about gender issues, promote women in leadership, and enforce rights that guarantee equality and freedom from discrimination, harassment and violence. An update on these actions should be provided to the Senedd in Plenary within six months of the Senedd debate for this report and annually thereafter.

Government’s approach

By applying a public health approach to gender-based violence, the Welsh Government is exercising a leadership role which it could do more to embrace. The scale of the challenge justifies the level of ambition that the Welsh Government has set itself. However, ambitions cannot be met unless awareness and understanding is improved across the board. It is therefore surprising that the work plans for each of the workstreams set out in the Blueprint are not publicly available. Given that the amount of information currently available regarding the public health approach is limited there is a strong case for publishing these in short order.

Recommendation 2. The Welsh Government should embrace its role as an innovator and leader in applying a public health approach to gender-based violence, by:

- identifying opportunities to raise awareness and generate shared understanding of the approach and Blueprint;

- contributing to the evidence base of what works by proactively publishing progress updates and resources used to underpin the Blueprint;
- continuing to prioritise work with the next generation through effective programmes aimed at children and young people.

The overall approach is underpinned by the 2015 VAWDASV Act. The aims of the Act are to prevent, protect and support people affected by VAWDASV. It places a range of statutory duties on Welsh Ministers and public bodies across the public sector. Given the importance of these legal duties on Welsh Ministers it is incumbent on Ministers to ensure greater transparency and accountability across the whole of the Welsh Government to more clearly demonstrate how the Act is being delivered on a cross-government basis. All public services in Wales need to be reminded of and scrutinised on their delivery of the duties that also apply to them.

Action 2. To further aid transparency, we look forward to seeing the workplans and membership details of each of the Blueprint workstreams published and that the Minister has committed to publishing. We will write to the Welsh Government in March 2024 to coincide with the end of the financial year to hold it to account for these commitments.

Engaging men and boys

27. In addition to advancing gender equality for women, the need to engage men and boys in preventing gender-based violence was seen as key. The Minister says:

“We must challenge attitudes and change behaviours of those who behave abusively. It is not for women to modify their behaviour, it is for abusers to change theirs.”²⁶

28. Dr Jen Daffin from Psychologists for Social Change explained that when men display violence and aggression “they’re not learning how to regulate their own emotions and how to engage in relationships in a healthy way”.²⁷

²⁶ Welsh Government [evidence paper](#).

²⁷ Equality and Social Justice Committee, [22 May 2023, Record of Proceedings](#), paragraph 185

29. Several witnesses suggested that men are still less likely to talk or open up about their feelings and can have a tendency to “brush it off” when they experience difficult feelings. Anne-Marie Lawrence from Plan International UK suggested:

“It needs to become normal for boys to recognise how they feel, and to be able to talk about it and to feel safe doing so, but that's quite a shift for a lot of boys and men.”²⁸

30. Dr Burrell said that conversations with boys and men about gender equality needed to happen from “as young an age as possible” noting that everyone is confronted with gender stereotypes from day one: at home, in educational settings and in the workplace.²⁹

31. He added:

“If we start talking to boys and men more about the pressures that they face about masculinity, like, 'Be tough, be strong, don't show your emotions, don't ask for help', we can help to get to the roots of different kinds of violence and abuse, which is predominantly being perpetrated by men and boys.”³⁰

32. Anne-Marie Lawrence said Plan International UK working in schools had found large majorities of boys felt they needed to be tough, could not be themselves around their friends, and displayed concerning attitudes around the acceptance of violence in relationships.³¹

33. While there is limited evidence of the effectiveness of interventions involving men and boys, witnesses pointed to potentially promising initiatives such as bystander interventions, adolescent dating interventions and perpetrator programmes intended to raise men and boys’ awareness about GBV and challenge views about traditional gender roles. Some of these interventions are explored in later chapters.

²⁸ Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 27

²⁹ Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 34

³⁰ Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 36

³¹ Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 28

Engaging boys and young men: prevention in practice

Plan International UK fund eight grass-roots organisations to carry out ‘test-and-learn’ projects. Working directly with boys and young men, they include a project in rural mid and west Wales where 13 to 15-year-old boys are involved in a local community garden; a project in Swansea which uses music and DJing to help boys connect to their feelings around masculinity; and a project by Safer Wales working with young men in custody. These distinctive projects are happening simultaneously, supported by a community of practice (where experiences, challenges, ideas and successes are shared).

Anne-Marie Lawrence, Wales Development Manager for Plan International UK said: “These projects are about giving those who support young people the space to learn and explore what works, and how to create the right conditions for boys and young men to feel safe to think and talk about exploring masculinity, mental health, and relationships.”.

Our view

Any approach to preventing GBV which neglects engagement with men and boys is unlikely to succeed, especially given the centrality of gender inequality to the problem. We heard that some interventions show promising attitudinal and/or behavioural change in men and boys (for example PHW’s report on ‘What Works’), however most were studies undertaken in the United States.³²

Further investigation by the Welsh Government and its partners into successful interventions that have a long term effect on preventing GBV is needed, particularly if it is to be prevented at a population scale. Proposals for a Central Repository where information, data and knowledge on what works in preventing GBV can be collected, managed and made easily accessible are welcome. However, the Repository must do more than store information. It should actively promote the sharing of knowledge among organisations, and act as a catalyst for innovation and better informed decisions. The challenging financial climate raises questions about whether funding to effectively assess and evaluate the impact

³² Violence Prevention Unit, [What Works to Prevent Violence against Women, Domestic Abuse and Sexual Violence \(VAWDASV\)?](#), September 2021

and outcomes of interventions will be available. This data is vital in understanding whether the national strategy and blueprint approach are effective.

Action 3. The Welsh Government should set out the timelines for the creation of the Central Repository and how the repository will support collaboration, knowledge sharing and facilitate research. In particular, the Welsh Government should identify opportunities for researching interventions that engage men and boys specifically in order to add to the evidence base on this issue.

An intersectional issue

34. Lara Snowdon from PHW noted that while gender is “front and centre”, poverty, race, sexuality or religion are all relevant drivers of GBV prevalence.³³ Our Advisory Group, the National Advisers for VAWDASV, Welsh Women’s Aid and Learning Disability Wales shared that view.³⁴

35. Dr Nathan Eisenstadt of Bristol University agreed and described poverty as “one of the highest risk factors for both perpetration and victimisation”.³⁵ Oliver Townsend from Platform said: “one of the greatest interventions we could continue to develop is tackling poverty”.³⁶

36. The Royal College of Psychiatrists also told us that GBV policy “must look beyond gender and utilise an intersectional approach” for reasons of social justice and health equity.³⁷ That view was shared by Natalie Russell and Dr Lora Adair of Brunel University London.³⁸

37. The BPS emphasised the need for interventions to reflect cultural context.³⁹ The National Board of Catholic Women Violence Against Women and Girls (VAWG) Committee argued:

“Primary prevention messages may be more accessible to women of faith in the context and language of their faith

³³ NB: this is often referred to as “intersectionality”; Equality and Social Justice Committee, [22 May 2023, Record of Proceedings](#), paragraph 19

³⁴ National Advisers for VAWDASV, [written evidence](#); Welsh Women’s Aid, [written evidence](#); Learning Disability Wales, [written evidence](#)

³⁵ Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 260

³⁶ Equality and Social Justice Committee, [22 May 2023, Record of Proceedings](#), paragraph 186

³⁷ Royal College of Psychiatrists, [written evidence](#)

³⁸ Natalie Russell and Dr Lora Adair, Brunel University London, [written evidence](#)

³⁹ British Psychological Society, [written evidence](#)

community, and when they demonstrate awareness of and respect for their faith or spirituality.”⁴⁰

38. Lara Snowdon welcomed recognition of intersectionality in the VAWDASV strategy but added that there is “a long way to go” to ensuring that diversity in Wales is represented in implementation.⁴¹

39. Recommendation 15 of our report *Gender based violence: The needs of migrant women* called for the Welsh Government to amend its VAWDASV strategy to include a section which deals specifically with the needs of migrant women and children.⁴² This was accepted by the Welsh Government:

“Supporting migrant victims of VAWDASV, including those with NRPF, is already addressed in the strategy as a key priority deliverable within our delivery plan, which highlights how Welsh Government will “Continue to work with UK Government and other partners to find appropriate solutions to meet the needs of survivors of VAWDASV with no recourse to public funds due to immigration status in line with Welsh Government’s Nation of Sanctuary Action Plan”. This will continue to be a key policy focus over the next four years and any changes to the Strategy will be considered as part of the Strategy Workstream Considerations.”⁴³

40. National Adviser for VAWDASV Yasmin Khan pointed out that the VAWDASV Act “pays particular attention to honour-based abuse”, and that victims of honour-based abuse (HBA) can also be a victim of sexual abuse, forced marriage and female genital mutilation (FGM). She agreed with Lara Snowdon that knowledge and understanding of honour-based abuse is “very sporadic”.⁴⁴

41. Dr Claire Fox and Dr Caroline Miles of the University of Manchester said that “much more needs to be done in order to identify early indicators of honour-based abuse, and to effectively respond to them.”⁴⁵

⁴⁰ National Board of Catholic Women Violence Against Women and Girls Committee, [written evidence](#)

⁴¹ Equality and Social Justice Committee, [22 May 2023, Record of Proceedings](#), paragraph 21

⁴² Equality and Social Justice Committee, [Gender based violence: the needs of migrant women](#), October 2022

⁴³ [Welsh Government response to the Equality & Social Justice Committee’s report on Gender based violence and the needs of migrant women](#), December 2022

⁴⁴ Equality and Social Justice Committee, [22 May 2023, Record of Proceedings](#), paragraph 226

⁴⁵ Dr Claire Fox and Dr Caroline Miles, University of Manchester, [written evidence](#)

42. According to the Minister, the Welsh Government funds specialist organisations who work with communities to raise awareness of the impact of this abuse with a view to stopping it before it occurs.⁴⁶ She noted that resources had been circulated to teachers to raise awareness of FGM and the potential risk signs:

“In October 2020, an awareness raising training contract was awarded to Karma Nirvana, a specialist service supporting victims and survivors of honour based abuse, to provide twenty free virtual ‘roadshows’ to professionals working within Wales to build confidence when challenging honour-based abuse and forced marriage.”

43. Our Advisory Group noted that experiences of disabled people of domestic abuse and/or sexual violence can be overlooked by services. The Group told us there are nuances and subtleties in the experiences of disabled people, which can mean that an onus is often placed on them to explain the additional risks they encounter.

44. The Older People’s Commissioner for Wales (OPC) and Plan International UK pointed to a lack of data and evidence relating to intersectionality generally, and for the OPC, the abuse of older people specifically.⁴⁷ Plan International UK noted: “limited data on gender identity, including the experiences of transgender or non-binary people.”⁴⁸

45. Learning Disability Wales were critical of the lack of trans inclusivity in the Blueprint.⁴⁹

46. The Minister said the Welsh Government is “very conscious” of the intersectional and disproportionate impact of VAWDASV:

“This makes it all the more important that the work is underpinned throughout by robust equality data and evidence.”

⁴⁶ Welsh Government [evidence paper](#).

⁴⁷ Older People’s Commissioner for Wales, [written evidence](#).

⁴⁸ Plan International UK, [written evidence](#).

⁴⁹ Learning Disability Wales, [written evidence](#).

47. The Minister confirmed that the Equality, Poverty and Children’s Evidence and Support Division is providing analytical support for VAWDASV policy development, monitoring and evaluation.⁵⁰

Our view

Addressing intersectionality is important because individuals can experience GBV differently depending on various intersecting factors, such as race, class, sexual orientation, gender identity, and disability. We should work towards creating environments where individuals can access services irrespective of their intersecting identities. To achieve this, it is vital that the Welsh Government continues its work to improve data collection including recording the experiences of individuals who face multiple forms of discrimination. For future policy development, we note that the Equality, Poverty and Children’s Evidence and Support Division will be providing analytical support. However, it is unclear how this work will interact with Equality, Race and Disability Evidence Units. It is vital that to avoid duplication they work together to provide robust evidence and data which can inform Welsh Government policy development.

More broadly, the collection and use of better data to inform decision-making has been a theme in virtually all our inquiries and workstreams. The Welsh Government, in turn has consistently recognised this and dedicated resources towards creating the specialist Evidence Units to inform its approach. However, now we have reached the midpoint of this Senedd term, we are keen to see progress whereby data from these Units begins to have a meaningful impact on policy-development and evaluation. The Welsh Government now needs to provide clarity on its priorities and the timescales for when it expects key milestones to be achieved.

Recommendation 3. The Welsh Government should set out how the development and evaluation of policies which address the intersectionality of GBV will be informed by data, evidence, and analysis. In particular the Welsh Government should provide the Equality, Race and Disability Evidence Units with clarity regarding their priorities and agree timescales for completion of key milestones by end of April 2024. The response should include details of:

⁵⁰ [Letter from the Minister for Social Justice and Chief Whip, 19 October 2023](#)

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- the target date for completing the work to establish baseline data and a summary of the baseline indicators it intends to use;
- the partners it will work with to gather baseline data and the target date by which data-gathering efforts will be mainstreamed; and
- when it anticipates the data gathered by the Units will be able to meaningfully contribute to policy development and evaluation.

Action 4. Some of the particular challenges faced by migrant women were set out in our report: ‘Gender based violence: The needs of migrant women’. We will be requesting an update to the recommendations and conclusions of that report in Spring 2024.

Trauma-informed approach

48. In 2022, the ACE Hub Wales and Traumatic Stress Wales jointly published a report on a ‘Trauma-informed Wales’, which Oliver Townsend described as “a really good statement of intent at a policy level”.⁵¹

49. The Welsh Government’s ambition is to embed a trauma-informed approach across public services. Dr Joanne Hopkins, Director of ACE Hub Wales and Professor Jon Bisson, Director of Traumatic Stress Wales told the Health and Social Care Committee:

“We want to see public services, third sector organisations, communities and individuals adopting this Framework and embedding it into practice, so that all interactions with each other and the people we serve, are based on a trauma-informed approach.”⁵²

50. Witnesses highlighted the contribution that a trauma-informed and relational health approach can have on preventing GBV, specifically in breaking cycles of aggression and intergenerational violence.

⁵¹ ACE Hub Wales, [Trauma-informed Wales: A Societal Approach to Understanding, Preventing and Supporting the Impacts of Trauma and Adversity](#); Equality and Social Justice Committee, [22 May 2023, Record of Proceedings](#), paragraph 87

⁵² Health and Social Care Committee, [PTN 3.5 Letter from ACE Hub Wales and Traumatic Stress Wales regarding the National Trauma-Informed Framework for Wales, 12 July 2023](#).

51. Oliver Townsend noted that “a lot of the people who cause harm have themselves been victims of harm”.⁵³

52. Although supportive of a trauma-informed approach, the National Adviser for VAWDASV, Johanna Robinson, questioned the efficacy of the current training.⁵⁴

53. Our Advisory Group expressed a lack of confidence in the police in its handling of domestic abuse cases. Dyfed Powys Police and Crime Commissioner (PCC) Dafydd Llywelyn said that Welsh police forces had invested in understanding adverse childhood experiences, which now provides a framework for front line policing.⁵⁵

54. North Wales Police Chief Constable, Amanda Blakeman, told us:

“... we make sure that we can really be on top of the training that our officers need to be able to spot those early points either with a family, with a young person, in whatever setting, so we can be more trauma-informed, and we can make sure that those early warning mechanisms are set off.”⁵⁶

55. Chief Constable Blakeman highlighted the role of public protection notices in early intervention.⁵⁷ Public protection notices are information-sharing documents that record safeguarding concerns about an adult or child and are used to inform a multi-agency response.⁵⁸

56. Police representatives also highlighted the model of ‘early help hubs’ which work with Police Community Support Officers and local partners to identify issues or vulnerabilities including for children and families who are experiencing domestic abuse.⁵⁹

57. South Wales Deputy PCC Emma Wools confirmed:

“As part of a trauma-informed approach to safeguarding, forces across Wales are developing partnership agreements for referring those affected by VAWDASV to early help services, where statutory safeguarding thresholds are not met. It is

⁵³ Equality and Social Justice Committee, [22 May 2023, Record of Proceedings](#), paragraph 90

⁵⁴ Equality and Social Justice Committee, [22 May 2023, Record of Proceedings](#), paragraph 237

⁵⁵ Equality and Social Justice Committee, [10 July 2023, Record of Proceedings](#), paragraph 6

⁵⁶ Equality and Social Justice Committee, [10 July 2023, Record of Proceedings](#), paragraph 9

⁵⁷ Equality and Social Justice Committee, [10 July 2023, Record of Proceedings](#), paragraph 10

⁵⁸ His Majesty’s Inspectorate of Constabulary, [Public Protection Notices](#)

⁵⁹ Equality and Social Justice Committee, [10 July 2023, Record of Proceedings](#), paragraph 17

acknowledged that local arrangements are currently different in each area, but the Blueprint structure will influence shared learning and the development of good practice models across Wales.”⁶⁰

Therapeutic support for children and young people

58. Our Advisory Group raised serious concerns about the impact of witnessing domestic abuse, adverse childhood experiences and early trauma on children and young people.

59. The Trauma-informed Framework recognises the impact of harrowing experiences and adversities on individuals, arising from sexual violence, or growing up in a household where a child is exposed to domestic violence.⁶¹

60. The evidence we heard focused less on preventive interventions in domestic abuse for children and young people and more on the need for support for children and young people who had witnessed prolonged or repeated domestic abuse, including post-separation abuse.

61. Our Advisory Group stated that it had been “impossible” to access counselling and therapy for their children. Survivors were angry about the lack of support available to help their children process their experiences and emotions in a safe space, and to connect with others who have gone through similar situations. National Adviser Johanna Robinson said there was “an absolute lack of therapeutic services for children and young people”.⁶²

62. Barnardo’s Cymru highlighted “growing evidence that children who live in families where there is domestic abuse can suffer serious long-term emotional effects.”⁶³

63. Dr Jen Daffin said:

“There’s not an appropriate evidence base yet. It’s developing, and colleagues in Traumatic Stress Wales and other areas are doing really great work on that, but it isn’t routinely available to children in the same way that it is to adults. We don’t have a

⁶⁰ [Letter from Emma Wools, Deputy PCC for South Wales](#), 25 August 2023

⁶¹ Written Statement: [Welsh Government’s plan for preventing Adverse Childhood Experiences](#), January 2022

⁶² Equality and Social Justice Committee, [22 May 2023, Record of Proceedings](#), paragraph 240

⁶³ Barnardo’s Cymru, [written evidence](#)

developmental trauma diagnosis, we don't have a post-traumatic stress diagnosis, and intervention packages that go alongside those, for children.”⁶⁴

64. Yasmin Khan told us there are “real problems and real gaps in services” at the 16-19 years transition age. She said it is “the most precarious age that presents the hugest challenges” for services:

“If there's anything that can be presented from today, around children and young people, and the gaps in services, surely this must be one of the key priorities. It needs to be a key priority, because what we are teaching young people who have been failed before is that there are going to be no easy routes to adulthood, and I think this is something that we really need to have a much sharper focus on.”⁶⁵

65. We asked the Minister for Health and Social Services to provide details relating to access to counselling services in schools for young people who may have witnessed or experienced GBV.⁶⁶ She pointed to the Welsh Government’s school and community-based counselling toolkit, which was issued in 2020, and supports local authorities in developing and implementing their counselling policies and services. She noted that “12,500 children and young people accessed the service in 2021/22 and that referrals can be made by schools, family members and individuals themselves.”⁶⁷

66. The Deputy Minister for Social Services told us that specialist training is delivered to the social care workforce “to support identification, assessment and support for cases of VAWDASV among women and children.”⁶⁸ She said health and social care professionals were a priority group for ‘Ask and Act’ training in the statutory guidance.

67. The Minister and the Deputy Minister for Social Services recognised the need for a ‘whole-system approach’ and that in Wales, the Welsh Government was improving “cross-agency engagement and delivery”. They noted that work is

⁶⁴ Equality and Social Justice Committee, [22 May 2023, Record of Proceedings](#), paragraph 166

⁶⁵ Equality and Social Justice Committee, [22 May 2023, Record of Proceedings](#), paragraph 246

⁶⁶ [Letter to the Minister for Health and Social Services](#), 25 September 2023

⁶⁷ [Letter from the Minister for Health and Social Services](#), 9 October 2023

⁶⁸ [Letter from the Deputy Minister for Social Services](#), 10 October 2023

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“firmly” underway to develop and deliver a National Practice Framework and the “first set of national standards for children’s services in Wales”.⁶⁹

Our view

We commend the Welsh Government for promoting a trauma-informed approach in a range of settings, including healthcare, schools and social services. This approach is key to recognising the impact of trauma and emphasises the need for sensitivity and empathy in care.

While we also recognise the efforts made by the Welsh police forces to proactively improve their responses to GBV cases, we were concerned to hear about the negative experiences of our Advisory Group. Law enforcement agencies including the police, the Crown Prosecution Service, the family court and CAFCASS, must consider these trust issues. It was clear to us that some women worry that involving the police could negatively impact child custody arrangements. This must be addressed.

We were extremely concerned to hear about the difficulties for children and young people in obtaining therapeutic support. In order to comply with its duty to prevent future harm under the Wellbeing of Future Generations Act, the Welsh Government must show greater leadership by ensuring that all babies, children and young people who experience or witness violence get fast-tracked access to specific, specialised therapeutic care and support services.⁷⁰ It is unacceptable that families are struggling to access care which is essential to healing and recovery. This must be addressed if we are to break the cycle of violence for the next generation.

We note the work being carried out on a new National Practice Framework for children’s services and expect it to address these issues. Further, the Welsh Government should review what therapeutic services currently exist for children and young people who witness or experience violence at home, including how well integrated child trauma and mental health services are in the broader healthcare and education systems to make it easier for families to get help.

⁶⁹ [Letter from the Minister for Social Justice and Chief Whip and the Deputy Minister for Social Services](#), 18 October 2023

⁷⁰ Such as those offered by [the Domestic Violence Intervention Project](#)

Recommendation 4. The Welsh Government should take urgent action to ensure that fast-tracked, specific and specialised therapeutic services are available for all babies, children and young people who experience or witness gender-based violence and provide details of these in response to this report. This action should include:

- details of how the Welsh Government is enforcing the rights of babies, children and young people who have experienced or witnessed violence to access fast-tracked, specialised therapeutic services;
- reviewing the availability of therapeutic services for children and young people who witness or experience violence, and how well these are integrated into the broader health and education system.

This work should involve all relevant stakeholders (including the police, CAFCASS and local authority social services) and be progressed at pace with an update provided to the Senedd in the autumn term of 2024.

3. Education, early intervention and prevention

“Messages need to be reinforced everywhere...across all ages and across all of society.”⁷¹

68. Anne-Marie Lawrence from Plan International UK said that “messages need to be reinforced everywhere” and emphasised the importance of a life-course approach:

“education throughout the life course is essential in challenging and changing some of these social norms, and that we need to see this modelled everywhere, from our national leadership through to our schools and throughout our communities as well.”⁷²

Schools and education settings

69. Most witnesses and our Advisory Group agreed that education settings are critically important places for applying a public health approach to prevention. Estyn and Barnardo’s Cymru emphasised the role of schools in preventing GBV and supporting learners⁷³. The BPS noted:

“Children spend a significant amount of time in schools so what they experience in the classroom, on the playground, and with their peers, will impact on their views and behaviours towards others. Schools are in a unique position to positively shape children’s views through an awareness about safe, equal and healthy relationships and translating these into practice.”⁷⁴

70. Anne-Marie Lawrence cautioned that “it can’t just be done in schools”.⁷⁵

71. The School Health Research Network (SHRN) surveys children and young people in Wales every two years, and include questions about dating and relationship violence and sexual behaviours. The data helps to provide an understanding about school experience when it comes to these topics. The SHRN

⁷¹ Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 106

⁷² Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 6

⁷³ Written evidence, Estyn; Barnardo’s Cymru

⁷⁴ British Psychological Society, [written evidence Barnardo’s Cymru, written evidence](#)

⁷⁵ Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 41

completed a systematic review of school-based interventions including classroom-based activities for students, parental intervention, activities with school teachers, and the school environment (though only one of the interventions included in the review was based in the UK). The review noted that school-based interventions focused on adolescent dating violence tend to be the most successful.

72. This is consistent with PHW's Systematic Evidence Assessment, which found that school-based dating violence interventions show considerable success in shaping gender-equitable attitudes among boys and girls.⁷⁶

Whole school approach

73. Plan International UK said that 'whole school' interventions, tend to be the "most effective approaches" because they work across multiple levels.⁷⁷ The National Board of Catholic Women VAWG Committee and Barnardo's Cymru strongly supported this and NSPCC Wales told us:

"A whole school approach will enable entire schools and communities to have a shared understanding of their responsibilities."⁷⁸

74. However, Dr Honor Young from SHRN argued that single interventions can often be more impactful. She pointed out that with the number of significant changes schools are being asked to make at the moment, with multiple pressures on staff time and:

"... where there's maybe less capacity, fewer resources perhaps in more deprived areas, really, basic safety is perhaps most important, reducing the harmful behaviours. And, in areas where there is more capacity more resource, it may be possible to promote some of the more pro-social behaviours."⁷⁹

⁷⁶ Public Health Wales, Violence Prevention Unit, [What Works to Prevent Violence against Women, Domestic Abuse and Sexual Violence \(VAWDASV\)?](#), September 2021

⁷⁷ Plan International UK, [written evidence](#)

⁷⁸ NSPCC Wales, [written evidence](#)

⁷⁹ Equality and Social Justice Committee, [19 June 2023, Record of Proceedings](#), paragraph 54

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75. The Minister for Education agreed that success requires “effectively linking all aspects of a school's thinking and operations and curriculum”, and “there’s an expectation that schools are delivering on this”.⁸⁰

76. The Minister for Social Justice told us that the Welsh Government funds Hafan Cymru’s Spectrum project, which promotes healthy relationships and provides training for school staff and governors about the impact of domestic abuse on a child.”⁸¹

77. Estyn concluded, however, that while provision has improved over time, schools are not always carrying out their role as well as they could. They highlighted evidence that not all teachers are aware of the mandatory reporting duty placed on them regarding FGM for example.⁸²

The Relationships and Sexuality Education Code

78. The roll-out of the Relationship and Sexuality Education (RSE) Code provides new opportunities for schools to integrate GBV prevention in education settings.

79. The Minister for Education told us the RSE Code is:

“mandatory and it's obviously taught in a way that is age appropriate, but it is clear that recognising harmful, abusive or coercive behaviour in personal relationships is one of its objectives from age 11 onwards, and, more broadly than that, understanding and having an awareness of different kinds of harmful or abusive behaviour, including violence on the basis of sex and gender.”⁸³

80. Evaluating the new Curriculum, including the statutory RSE requirement was seen as a long-term piece of work, given it is still in its infancy.

81. Several witnesses including NSPCC Cymru, Dr Jen Daffin and Emily van de Venter from PHW spoke of the importance of training for teachers, school leaders and staff. This could enable teachers to better support children and young people experiencing GBV, and to signpost them appropriately to support.⁸⁴

⁸⁰ Equality and Social Justice Committee, [11 Sept 2023, Record of Proceedings](#), paragraph 114

⁸¹ Welsh Government [evidence paper](#)

⁸² Estyn, [written evidence](#)

⁸³ Equality and Social Justice Committee, [11 Sept 2023, Record of Proceedings](#), paragraph 85

⁸⁴ NSPCC Cymru, [written evidence](#); Equality and Social Justice Committee, [22 May 2023, Record of Proceedings](#), paragraph 129

82. Emily van de Venter said training staff to understand and therefore respond to behaviours that may be the result of a young person experiencing trauma will help with early intervention.⁸⁵

83. However, Anne-Marie Lawrence warned of the pressure on staff: “some of this work needs a specialist knowledge and understanding, [...] we can't just keep on asking schools to pick some of this stuff up.”⁸⁶

84. Our Advisory Group questioned whether staff feel adequately empowered to act, citing fears staff may have about how to handle a disclosure. Members of the Group suggested that consideration should also be given to safeguarding those to whom the disclosure is made, due to their potentially traumatic/triggering nature.⁸⁷

85. The Minister for Education acknowledged that some headteachers would welcome more support for introducing the RSE component of the curriculum successfully.⁸⁸

Our view

RSE Code

Schools and education settings are at the forefront of early intervention and prevention efforts. By fostering a culture of respect, equality and non-violence, they play a key role in preventing GBV and setting norms that last into adulthood. Integration of gender equality and GBV prevention into the new Curriculum for Wales offers a golden opportunity to hone messages to learners about the principles of consent, respect and healthy relationships. While the trajectory of this work is promising, it is too early to assess the overall effectiveness of the approach as the new Curriculum needs time to bed-in. Nevertheless we were concerned to hear from the Schools Health Network that some schools choose or can afford to do prevention work and others cannot, particularly in deprived areas. This cannot be right and the Welsh Government should ask Estyn to investigate whether all schools are allocating sufficient resources to embedding healthy relationships across all aspects of school life.

⁸⁵ Equality and Social Justice Committee, [19 June 2023, Record of Proceedings](#), paragraph 143

⁸⁶ Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 32

⁸⁷ Notes from the Advisory Group

⁸⁸ Equality and Social Justice Committee, [11 September 2023, Record of Proceedings](#), paragraph 97

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Recommendation 5. The Welsh Government should request that Estyn’s Chief Inspector of Education and Training in Wales undertakes a national thematic review of healthy relationships in schools. The review should:

- include views and recommendations on the sufficiency of resources and training for teaching healthy relationships;
- seek to verify whether there is any link between a lack of provision and higher levels of deprivation; and
- identify best practice with regards to ‘whole school approaches’ to preventing GBV.

The review should be included in the next available programme of thematic reviews and completed within the usual timescales.

Female Genital Mutilation

We were concerned to hear from Estyn that some teachers are not aware of their duty to report FGM. This needs to be addressed urgently by the Welsh Government.

Recommendation 6. The Welsh Government must take immediate action to ensure that teachers are reminded of the mandatory reporting duty placed on them in relation to FGM. Longer-term, the Welsh Government should work with Estyn on establishing monitoring arrangements and safeguards to provide assurance that teachers are aware of their legal duties in relation to preventing GBV. The work to establish these monitoring safeguards should be completed by September 2024.

Higher education

86. The Universities UK Taskforce published its report on tackling violence against women, hate crime and harassment in UK universities in 2016.⁸⁹

87. According to Dr Rachael Fenton, despite the UK Government writing to all vice chancellors asking them to take up the prevention programme, “very small numbers have actually tackled the agenda”. Dr Fenton highlighted a lack of senior management buy-in and investment and reported that some universities have

⁸⁹ [Changing the culture: Report of the Universities UK Taskforce examining violence against women, harassment and hate crime affecting university students](#), October 2016

“done nothing at all – nothing”.⁹⁰ Dr Fenton contrasted the situation with the United States:

“... there is primary legislation that requires federally funded universities to have in place bystander programmes and a whole other set of things like data collection, so we know what’s actually going on.”⁹¹

88. The Higher Education Funding Council for Wales (HEFCW) highlighted guidance issued to Welsh universities which encourages universities to strengthen preventative approaches to tackling GBV.⁹²

Our view

In light of the troubling evidence about a lack of progress in the higher education sector following the stark findings of the 2016 Universities UK report, the Minister for Education should request an update from higher education institutions in Wales regarding progress made since publication of the 2016 report and remind them of the Welsh Government’s expectations. As well as this, the Minister for Education should direct the Commission for Tertiary Education and Research to work with the sector to agree actions which strengthen preventative approaches to tackling GBV throughout higher education.

Action 5. The Minister for Education should write to higher education institutions in Wales to remind them of the Welsh Government’s expectations and direct the Commission for Tertiary Education and Research to work with universities to agree actions which strengthen preventative approaches across the sector.

Bystander interventions

89. The central premise of bystander interventions is that everyone can play a part in preventing GBV. Such interventions are about providing the tools and resources to encourage people to have the confidence to challenge or call out harmful behaviours and attitudes.

90. Dr Eisenstadt explained that a bystander is someone who receives information or witnesses a situation in which they are not directly involved as either the wrongdoer or the victim. Bystander training is about training people to

⁹⁰ Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 233

⁹¹ Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 234

⁹² [Letter from the Higher Education Funding Council for Wales, 20 July 2023](#)

skilfully intervene in some way, to either prevent further harm or respond to harm that has occurred. He added that a primary role of the bystander approach is challenging “misperceptions of social norms that inhibits us from intervening, which encourages wrongdoers to keep doing what they're doing”.⁹³

Active bystander interventions: prevention in practice

Dr Eisenstadt gave the example of someone telling a sexist joke: “When that happens and nobody calls it out, we look around the room and we misperceive the social norm. So, we look around the room and no-one is saying anything, and we think, 'Uh-oh, everyone else agrees.' In actual fact, most people in that room are probably thinking, 'I'm not okay with this, but I don't want to say anything, because I don't want to be the pariah. I don't want to be the one who's calling it out and I'm worried that no-one's going to back me up.' The wrongdoer's looking around the room, and they're getting a kind of false consensus, so they're looking around and thinking, 'Oh, everyone agrees with me. I'm going to keep doing this.’”

Bystander training is about equipping people to intervene in those situations. Dr Eisenstadt said “it's a kind of grass-roots approach to culture change”.

91. Lara Snowdon described bystander interventions as a key prevention programme with “quite considerable evidence” of effectiveness.⁹⁴

92. The National Advisers for VAWDASV highlighted their effectiveness and called for strategies to increase such interventions.⁹⁵

93. HEFCW reported that six out of eight universities in Wales have set aside funding for specific bystander interventions.⁹⁶ The Minister for Education said that two universities have “decided on a different way of delivering this”, and that their schemes had been assessed as “sufficient” by HEFCW. Dr Fenton and Dr Eisenstadt noted that quality control of delivery and fidelity to the bystander model is “absolutely essential for programme effectiveness.”⁹⁷

⁹³ Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 168

⁹⁴ Equality and Social Justice Committee, [22 May 2023, Record of Proceedings](#), paragraph 39

⁹⁵ National Advisers for VAWDASV, [written evidence](#)

⁹⁶ [Letter from the Higher Education Funding Council for Wales, 20 July 2023](#)

⁹⁷ Dr Rachel Fenton, and Dr Nathan Eisenstadt, [written evidence](#)

94. Chief Constable Amanda Blakeman cautioned that “bystander activity is an easy thing to say and a really complex thing to enact in terms of community and in terms of services as well. [...] You've got to create the right environment for people to feel supported to be able to do that.”⁹⁸

95. Welsh Women’s Aid completed a pilot of The Bystander Initiative in 2018 and said that the response was “overwhelmingly positive”. It continues to deliver bystander intervention to college and university students.⁹⁹

96. The Minister confirmed plans to roll out a national bystander intervention programme across Wales in early 2024. Funding of £230,000 over three years for the pilot programme would aim to create “genuine and lasting changes in societal attitudes to VAWDASV.”¹⁰⁰ She assured us that “a full evaluation will take place which will provide recommendations at completion”.¹⁰¹

97. Lara Snowdon from PHW stressed the importance of evaluation and hoped Wales could be “at the forefront of developing the evidence based bystander prevention programmes.”¹⁰²

Our view

The evidence suggests that bystander interventions can have a clear and beneficial impact on preventing GBV. However in order to be effective, training on such interventions needs to be delivered by professionals with a thorough understanding of the subject matter.

We are pleased that the Welsh Government is taking action to roll-out its bystander intervention programme. Robust monitoring and evaluation will be key to its success.

Action 6. The Welsh Government should publish the results of its bystander intervention initiative as soon as possible after completion.

⁹⁸ Equality and Social Justice Committee, [10 July 2023, Record of Proceedings](#), paragraph 124

⁹⁹ Welsh Women’s Aid, [written evidence](#)

¹⁰⁰ [Letter from the Minister for Social Justice and Chief Whip, 19 October 2023](#)

¹⁰¹ [Letter from the Minister for Social Justice and Chief Whip, 19 October 2023](#)

¹⁰² Equality and Social Justice Committee, [22 May 2023, Record of Proceedings](#), paragraph 39

Social media and harmful content online

98. Witnesses discussed online safety and social media, including concerns about “extreme misogyny” which is often disseminated and can influence the attitudes and behaviours of young people.¹⁰³ Our Advisory Group described social media as an “untamed beast”, with members explaining that children and young people need to be educated on what abuse looks like so that when people are exposed to it, they will choose not to engage with it. The Group also raised concerns about the nature and ease of accessibility of online pornographic content, which can distort what a young person considers to be a healthy and loving relationship.

99. Alexa Gainsbury from PHW said that the RSE and digital literacy codes should focus on equipping young people with the skills and strategies to challenge discriminatory behaviour online. PHW highlighted that the Digital Competence Framework includes “concepts of conscientious digital citizenship alongside critical evaluation of the digital world and one’s place within it,” and a specific element designed to prevent online bullying.

100. Anne-Marie Lawrence noted the role of online influencers and emphasised the need for sensitivity:

“There needs to be an understanding of what’s driving men and boys who are aligning with harmful attitudes and beliefs, and we need to listen to how they feel and what it is that’s influencing them, or what’s attracting them to, maybe, some of these more harmful influences.”¹⁰⁴

101. The Minister for Education said that online safety “is a critical part of the RSE code,” but that finding ways to refresh the message with voices who are trusted and “relatable” was a challenge.¹⁰⁵ The Welsh Government confirmed it is establishing a children and young people’s Advisory Panel for Digital Resilience.¹⁰⁶

¹⁰³ British Psychological Society, written evidence

¹⁰⁴ Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 46

¹⁰⁵ Equality and Social Justice Committee, [11 Sept 2023, Record of Proceedings](#), paragraph 46

¹⁰⁶ Welsh Government [evidence paper](#)

Our view

There is considerable evidence that sexist attitudes and misogynistic language are being espoused and normalised on social media. Recent high profile cases involving social media influencers have only served to heighten public concern about the harmful effects of online GBV.

Tackling the potential harms caused by the “untamed beast” of social media will require a multi-pronged approach involving individuals, technology companies, government and civil society. In schools, the Welsh Government is right to emphasise online safety and digital literacy. We agree that educating individuals about online safety and critical thinking and media literacy skills is crucial.

The Welsh Government should require its new Advisory Panel for Digital Resilience to agree its priorities and forward work programme at pace and provide indicative timescales for the sequencing of its work. In setting out its priorities, the Advisory Panel should include details of how it intends to take into account significant areas of non-devolved policy and legislation in relation to digital and online regulation. Any subsequent changes to policy and/or guidance should be reported to the Senedd to enable scrutiny.

Recommendation 7. The Welsh Government should require its newly established Advisory Panel for Digital Resilience to agree its priorities and forward work programme at pace and publish these by the end of April 2024. The Panel should clarify which areas it will prioritise, estimated timescales for sequencing of its forward work programme and how it will address the significant areas of non-devolved policy and legislation relating to digital and online regulation.

Healthcare settings

102. Healthcare professionals are often among the first – and sometimes only – points of contact for survivors of GBV. They often link survivors to other services including mental health support, social services, legal aid, and housing services. There are a number of ways healthcare professionals can play a preventative role in relation to GBV, including asking patients about the safety of their intimate and family relationships.

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103. The Royal College of General Practitioners (RCGP) noted the role that GPs can play, which often involve being a trusted confidant to patients.¹⁰⁷

The South Wales Hospital Based Violence Intervention Programmes: prevention in practice

Run by PHW's Violence Prevention Unit, which is located in Morriston Hospital and University Hospital Wales A&E departments. Violence Prevention Teams, led by nursing staff, support patients who attend A&E because of violence and then they refer them to NHS or local community services who can provide further advice, care or support. The intervention is currently being evaluated by Cardiff University.

104. The BPS called for the capacity of health services to be developed to address prevention of GBV, in particular in relation to intimate partner violence. They said “health budgets should explicitly allocate resources to the prevention of GBV”. They also want to see trauma-informed approaches embedded in medical school and psychiatry training.¹⁰⁸

105. We heard that strengthening the health services’ response to GBV requires:

- understanding the impact of GBV on the health and well-being of women and their children;
- supporting long-term efforts to train and support healthcare professionals at all levels to provide a safe and effective response to GBV survivors;
- integrating care for GBV survivors within health services rather than setting up parallel services;
- ensuring infrastructure for privacy and confidentiality and a referral network is in place;
- providing survivors of GBV with safe and compassionate care.

¹⁰⁷ Royal College of General Practitioners, [written evidence](#)

¹⁰⁸ British Psychological Society, [written evidence](#)

Ask and Act

106. Under the VAWDASV Act, the ‘Ask and Act’ duty requires relevant authorities (such as local authorities or the NHS) to follow a process of targeted enquiry to identify VAWDASV. Training on the duty is provided to staff via the National Training Framework on VAWDASV and the Minister for Health and Social Services told us that 27,000 professionals been trained so far.¹⁰⁹

107. The National Advisers for VAWDASV said that a potential lack of confidence by professionals in referral pathways was a challenge to implementation of Ask and Act. They also emphasised the need for a prompt response after disclosure stating: “it can be hugely damaging to a victim if they have to wait for services after being encouraged to disclose.”¹¹⁰

108. It was also unclear how many healthcare professionals have been trained to address these difficult issues with their clients and according to the Royal College of General Practitioners:

“While members who have received Ask and Act training find it useful, many members were not aware what it was or where they could access it. RCGP was not able to find clear guidance on how GPs should avail themselves of this training and would welcome further information to circulate to members.”¹¹¹

109. Welsh Women’s Aid has been responsible for the delivery of Ask and Act training since its development in 2016. They told us that potential expansion of the training beyond the devolved public sector to other services such as the police, housing and homelessness services and the private sector is currently under consideration.¹¹²

110. Dr Edith England of Cardiff Metropolitan University and Dr Josie Henley of Cardiff University noted that homelessness services are in a strong position to intervene, as GBV “is one of the main reasons why women and those of minoritized genders present to homelessness services”. However their research on Implementation of the Housing (Wales) Act 2014 found that workers often did not realise when applicants were experiencing gender-based violence. They said:

¹⁰⁹ Equality and Social Justice Committee, [11 September 2023, Record of Proceedings](#), paragraph 21

¹¹⁰ National Advisers for VAWDASV, written evidence

¹¹¹ [Additional evidence from the Royal College of General Practitioners](#), August 2023

¹¹² [Letter from Welsh Women’s Aid](#), 9 October 2023

“A strict focus upon whether an individual met the criteria for homelessness meant that opportunities to identify and intervene in situations where domestic abuse was occurring were often missed. We believe that this arose from a combination of a severe lack of time among frontline workers to speak with clients (meaning that they often did not move beyond the ‘presenting problem’ of homelessness) and a broader lack of awareness of ‘red flags’ for domestic abuse in a homelessness context.”¹¹³

111. The Minister for Health and Social Services pointed to an independent evaluation of Ask and Act which found that the duty was effective at placing VAWDASV on the agenda within organisations and that the consistency that the approach brings “was felt to be valuable”.¹¹⁴

112. The Minister for Social Justice noted the importance of the programme changing behaviour and “not just serving as a tick box for professionals on the front line”. She also agreed that “expansion of ‘Ask and Act’ to the wider public sector needs to take place”.¹¹⁵

Our view

Health and social care workers play a critical role in early intervention and prevention efforts. They must be supported to identify potential signs of GBV if early intervention initiatives are to succeed, and to enable appropriate care to be provided.

The Welsh Government should strengthen its action to ensure NHS Wales has the necessary tools, training and resources it needs to ensure healthcare professionals feel confident to help survivors of GBV access the care and support they need. In addition, the Welsh Government should make clear how it intends to promote public awareness that healthcare facilities are safe places for disclosure to healthcare professionals. There should also be safe spaces within healthcare facilities where staff can feel comfortable and confident disclosing their own experiences of GBV – either at home or in the workplace.

¹¹³ Dr Edith England of Cardiff Metropolitan University and Dr Josie Henley of Cardiff University, [written evidence](#)

¹¹⁴ [Letter from the Minister for Health and Social Services](#), 9 October 2023

¹¹⁵ Equality and Social Justice Committee, [18 Sept 2023, Record of Proceedings](#), paragraph 52

Despite the roll out of 'Ask and Act' training in health and care settings, we were not convinced by the evidence we heard from the Minister for Health and Social Services and Deputy Minister for Social Services that the duty is being implemented as effectively as it could be. Lack of awareness among GPs of the Ask and Act training was particularly troubling, but unsurprising given the lack of readily available guidance on how to access it. The 'Ask and Act' duty should be extended to a wider range of professionals, starting with GPs and homelessness services.

Recommendation 8. The Welsh Government should work with health bodies to enhance the ability of healthcare professionals to identify and respond to GBV. To give effect to this recommendation the Welsh Government should:

- extend the Ask and Act duty to other health and social care professionals and issue revised guidance to GPs in the first instance;
- track and publicly report statistics on the participation of staff in training programmes;
- collate and publish statistics on the timeliness of response times (between disclosure and being seen by a specialist) to Ask and Act referrals;
- and clearly outline the methodology for measuring the impact of training initiatives.

This work should be completed by March 2025.

4. Making prevention a collective responsibility

113. Several witnesses including the National Advisers and Plan International UK highlighted the need to shape attitudes and social norms in a range of settings such as workplaces, the media, sports and recreation, the arts and so on.¹¹⁶ However, we received very little evidence about ‘What Works’ in preventing GBV within these settings. This would seem to support Welsh Women’s Aid’s claim that many of “these organisations do not identify themselves as contributors to a public health approach to GBV”.¹¹⁷

114. Lara Snowdon described the failure to engage businesses and workplaces, where the majority of the population spend a large proportion of their time, as a “missed opportunity”.¹¹⁸

Workplaces

115. Our Advisory Group suggested that workplace interventions are needed to both support survivors and to call out sexual harassment.

116. Welsh Women’s Aid suggested that all employers should have “the skills to be able to provide trauma-informed and person-centred responses, whilst having policies and accountability mechanisms in place for those who perpetrate sexual harassment.”¹¹⁹

117. Lara Snowdon explained that evidence around what works to prevent GBV in workplaces was limited, adding that work to explore active bystander interventions in the workplace would be interesting to explore.¹²⁰

118. Dr Burrell agreed and noted that businesses and workplaces were crucial settings:

“Businesses can do things in the wider community in terms of raising awareness of these issues, speaking out about them, challenging some of these gender norms. So, if you think about the Gillette campaign—I don't know if anybody remembers that from a few years ago—called ‘The Best Men Can Be’, after the

¹¹⁶ Plan International UK, [written evidence](#)

¹¹⁷ Welsh Women’s Aid, [written evidence](#)

¹¹⁸ Equality and Social Justice Committee, [22 May 2023, Record of Proceedings](#), paragraph 58

¹¹⁹ Welsh Women’s Aid, [written evidence](#)

¹²⁰ Equality and Social Justice Committee, [22 May 2023, Record of Proceedings](#), paragraph 59

#MeToo movement, they put some adverts questioning some ideas about masculinity that exist in wider society, and asking questions about how men and boys can play a positive role.”¹²¹

119. Dr Eisenstadt emphasised the role of corporate social responsibility and cited the impact bystander training had “on the factory floor workforce of a large manufacturing company, which was almost exclusively men”; one man said “I’ve got a young son and a daughter, and I’m going to stop telling my son to “man up”—this has really made me think about it”.¹²²

Our view

We recognise the significant impact that businesses and workplaces can have in preventing GBV and promoting gender equality. The Welsh Government should establish a seventh workstream within the VAWDASV Blueprint whose mission will be to make ambitious recommendations on how businesses and organisations can implement policies that support a safe and equal working environment, including training on preventing harassment and violence. The group should operate in a spirit of social partnership with representation from employers and trade unions.

Recommendation 9. The Welsh Government should establish a seventh workstream within the VAWDASV Blueprint whose mission will be to make ambitious recommendations on how businesses and organisations can create safer and more equal workplaces. The workstream should cover practical information on the policies, procedures and training necessary to support this aim. The group should operate in a spirit of social partnership with representation from employers and trade unions.

Night-time economy

120. Another area of focus within the business sector was the night-time economy. A leading academic on this issue, Professor Zara Quigg, argued that “a broad suite of programmes is necessary to prevent sexual violence in the night-time environment”.

121. We took limited evidence on what effective interventions focussed on nightlife are. But we heard that prevention measures tend to focus on bystander

¹²¹ Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 52

¹²² Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 244

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interventions, awareness raising and media campaigns, and the role of alcohol policy.

122. Welsh Women’s Aid said there should be an “onus” on night-time economy industries to tackle GBV and to signpost accordingly. They said:

“This can be by ensuring that all staff have bystander training or relevant VAWDASV training to increase their confidence to be able to navigate a situation where an individual is in distress or discloses.”¹²³

The Good Night Out campaign: prevention in practice

Professor Zara Quigg and Charlotte Bigland evaluated ‘the Good Night Out Campaign’ in 2020, a social marketing campaign, supported by training for night-time economy staff—bouncers, door staff, bar workers, as well as people like street pastors, who might be out and about in the night-time economy, and taxi rank marshals—to be able to respond effectively if they witness GBV taking place.

The evaluation reported improvements in knowledge and attitudes towards sexual violence, and greater readiness and confidence to intervene in sexual violence amongst nightlife workers. The campaign provided guidance for licenced premises in London.

123. Policing in Wales Chair, Dafydd Llywelyn confirmed that Home Office Safer Streets funding had been used by Welsh Police Forces to improve the night-time environment with better CCTV infrastructure, and other measures to help “women feel safe in public spaces”. Chief Constable Amanda Blakeman added:

“To give a really good sense of what’s happening on the streets, we have officers deployed both overtly and covertly to try and identify predatory behaviour, and to support individuals who may be vulnerable. We’ve engaged extensively with businesses, training staff to be able to spot that themselves and be upstanders in relation to it, so that they’re able to flag that and identify it to us.”¹²⁴

¹²³ Welsh Women’s Aid, [written evidence](#)

¹²⁴ Equality and Social Justice Committee, [10 July 2023. Record of Proceedings](#), paragraph 50

124. Chief Constable Blakeman also highlighted the way Welsh police forces “work really closely with British Transport Police” and transport companies to promote safer public transport.¹²⁵

125. Alcohol use is widely acknowledged as a risk factor for GBV. A public health approach should consider the role of alcohol interventions in preventing alcohol-related intimate partner violence. We heard that the Cardiff TASC (Tackling Alcohol-related Street Crime) project had been effective in tackling alcohol-related violence. First developed in the late 1990s and early 2000s, Deputy PCC Emma Wools explained that TASC was “a police-led, multi-agency approach to preventing alcohol-related crime and disorder in Cardiff” which “involved a range of interventions including dialogue between the police and the licensing trade, measures aimed at improving the quality and behaviour of door staff, targeted policing operations and support for victims of alcohol-related assaults.” Deputy PCC Wools added: “Today, the Cardiff Violence Prevention Model, pioneered by Professor John Sheppard of Cardiff University, has been adopted by other cities in the UK and around the world.”¹²⁶

126. The Minister for Health and Social Services told us that the focus of alcohol policy is on working with partners on reducing the harms on individuals and families. She added:

“We have not seen any evidence that a specific approach to alcohol abuse is necessary to address the particular problem of VAWDSV, and of course our VAWDASV support is tailored to the needs and circumstances of the individual. However, my officials have not had any specific conversations with Public Health Wales on this topic or any potential changes to our approach to alcohol policy given the data from the British Crime Survey. I have asked that they pick this up and we can consider any adaptations to our approach that are necessary.”¹²⁷

Safer Streets Programme Wrexham: prevention in practice

Safer Streets and Safety of Women at night funding totalling just under £1 million was obtained to support initiatives such as

¹²⁵ Equality and Social Justice Committee, [10 July 2023, Record of Proceedings](#), paragraph 55

¹²⁶ [Letter from Emma Wools, Deputy PCC for South Wales](#), 25 August 2023

¹²⁷ [Letter from the Minister for Health and Social Services](#), 9 October 2023

installation and upgrades of new CCTV and street lighting sites in Wrexham City Centre, ensuring that arterial routes through the city centre have good coverage. Priority was given to those routes used by pedestrians to navigate from the city centre to poorly lit locations.

In addition to this, the partnership programme implemented several other prevention measures to reduce gender-based violence. These included bystander training with licensed premises through the 'Good Night Out' communications campaign, the Hafan y Dref Welfare Centre, providing help and support to people stranded, intoxicated, or suffering minor injuries.

The programme also implemented a street marshals scheme, and operation Vista was mobilised to ensure a visible police presence in the right locations at the right times.¹²⁸

Our view

We are pleased that the Minister for Health has agreed to work with Public Health Wales to consider whether a specific approach to alcohol abuse is necessary, and we would like to be kept updated about this stream of work. The Welsh Government should also set out whether it intends to commission research or data collection to better understand the relationship between alcohol and GBV given the recognised gap in the evidence base.

Action 7. The Welsh Government should report back on its work with Public Health Wales to consider whether a specific approach to alcohol abuse is necessary, and whether they intend to commission any research or data collection to better understand the relationship between alcohol and GBV given the gap in the evidence base. An update should be provided to the Senedd in the autumn term of 2024.

¹²⁸ [Letter from Emma Wools, Deputy PCC for South Wales](#), 25 August 2023

Sport

127. Although sport has an important, often unifying role in society, according to Dr Burrell there has not been “much conversation about gender inequality and sexism and how normalised that is in football stadiums or sports stadiums or in dressing rooms” and “sport has a long way to go in that regard”.¹²⁹

128. South Wales PCC Alun Michael emphasised the importance of “positive role modelling for children and young people,” particularly in male dominated environments such as sports clubs. He said:

“It is even more important for potentially isolated children and young people, who may have access to fewer positive role models and messaging, and whose peer networks may leave them vulnerable to negative external influences and stereotypes.”

129. Sport Wales acknowledged sport as having a role to play in preventing GBC stating that the development of “an inclusive sport system is [their] primary focus”. They told us that they had partnered with the NSPCC and the Ann Craft Trust to develop a range of resources, training and guidance and highlighted recent campaigns such as ‘Keeping your child safe in sport’ and ‘Listen Up, Speak Up’, as activities which support this vision.¹³⁰

130. Football Association Wales also acknowledged “the power and influence of football in relation to societal issues” and highlighted their campaign work aimed at tackling misogyny and challenging toxic behaviour. They also detailed the steps taken to ensure people feel safe at matches, which include providing supporters with information on how to report any incidents involving discrimination or safety concerns.¹³¹

131. Dr Eisenstadt told us that sport is both a challenge and opportunity:

“It's a challenge because we know about the locker room cultures and the harmful behaviours that go on in and around sport. And it's a huge opportunity because of the role that

¹²⁹ Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 81

¹³⁰ [Letter from Sport Wales](#), 11 July 2023

¹³¹ [Letter from Football Association Wales](#), 4 October 2023

sports players play as leaders, coaches, role models—not exclusively, but particularly, for men and boys.”

132. Dr Burrell agreed that sport can play a positive role due to its influence on fans, spectators and players.¹³²

133. Dr Fenton said their evaluation of bystander work with a football club had delivered “significant results”, including “massive shifts in their attitudes and their beliefs and their bystander behaviours from pre to post”. She added “there is definite evidence that it can work”.¹³³

134. Dr Fenton told the Committee that the Welsh Government’s active bystander intervention could work if it gets its communications and campaigning right:

“What I would really like to see, as the Welsh Government goes forward with its bystander programmes, is real leverage and, I guess, real comms and campaigning that makes corporates and really influential places like football clubs and rugby clubs, particularly in Wales, want to get on board, where they start to be perceived as being not on board if they're not doing it.”¹³⁴

135. Dr Fenton added that “role models can play huge part in this”, suggesting that high-profile sportspeople could be used by the Welsh Government to support a big public campaign and promote its messages. She explained “it's not that it has to be mandatory, but it has got to be this big thing that we launch in Wales that makes everybody want to buy into it”. Dr Burrell added:

“We put a lot of focus on the players, but what about all these powerful people in boardrooms who are invariably men in the sporting world and who have a lot of resources and power but aren't really talking about these issues.”¹³⁵

136. Ann-Marie Lawrence from Plan International UK agreed:

“It's up to the leadership of sport to set the culture and the tone for what happens within their sports and the areas that they control, and there needs to be a level of accountability, to ensure that our governing bodies and our sporting bodies in

¹³² Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 81

¹³³ Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 246

¹³⁴ Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 248

¹³⁵ Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 82

Wales are held accountable to setting the right culture within their organisations.”¹³⁶

Awareness-raising campaigns

137. Although some members of our Advisory Group were positive about the effectiveness of awareness-raising campaigns there were concerns regarding those of a relatively short length. They argued that to maintain momentum and embed key messages in public consciousness, campaigns needed to be of longer duration.

138. Lara Snowdon from PHW said “we need to increase the overall exposure to VAWDASV prevention messaging in the population in order to achieve population change”.¹³⁷

139. Plan International UK noted that public information campaigns can work better when combined with other, more direct interventions:

“Evaluations show that these types of campaigns can raise awareness and influence attitudes, but on their own they are unlikely to change behaviour. Instead, researchers recommend using awareness raising campaigns as part of a wider multicomponent intervention with other activities designed to change behaviour.”¹³⁸

Our view

Sport can powerfully influence social norms and culture. We were encouraged by examples of collaborative working including by the Football Association of Wales and the Welsh Government on campaigns to tackle misogyny and sexism.¹³⁹

We need to increase overall exposure to these messages and the Welsh Government should consider funding a nation-wide public awareness campaign with a top male sporting role model who can inspire other men and boys to take a stand against violence and promote positive values and behaviours. Ensuring that this person is well-informed about the issue and receives appropriate training

¹³⁶ Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 84

¹³⁷ Equality and Social Justice Committee, [22 May 2023, Record of Proceedings](#), paragraph 51

¹³⁸ Plan International UK, [written evidence](#)

¹³⁹ Correspondence from the Football Association of Wales – 4 October 2023

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to effectively communicate and advocate change will be crucial. An evaluation of impact should be undertaken as part of this.

Recommendation 10. The Welsh Government should consider funding a nationwide public awareness campaign with a top male, sporting role model who can inspire other men and boys to take a stand against violence and promote positive values and behaviours. It is important this person is well-informed about the issue and receives appropriate training to effectively communicate and advocate for change. An evaluation of impact should be undertaken at the end of the campaign.

Perpetrator programmes

140. According to Dr Eisenstadt there is “promising evidence” on the effectiveness of perpetrator programmes, which can reduce violent and abusive behaviours, and increase feelings of safety for victim-survivors.¹⁴⁰

141. Deputy PCC Emma Wools noted that “strong evidence for perpetrator programmes as part of a public health approach to preventing VAWDASV” and that “these programmes should exist at all three layers of prevention activity” and that the Blueprint “should ensure effective and sustainable commissioning arrangements”.¹⁴¹

142. Conversely, our Advisory Group lacked confidence in perpetrator programmes and raised concerns about their effectiveness and credibility.

143. Dr Eisenstadt warned that some organisations are not following the evidence-base, which he said is “critical to the effectiveness and safety” of the programmes, adding: “you can become a facilitator of a domestic abuse perpetrator programme with very little training”.¹⁴²

144. Dr Eisenstadt said it is difficult to say what a successful perpetrator programme looks like. Dr Jen Daffin also questioned the efficacy of some programmes, explaining they often do not get “deep enough to unpick some of that trauma and distress that's occurred”.¹⁴³

¹⁴⁰ Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 187

¹⁴¹ [Letter from Emma Wools, Deputy PCC for South Wales](#), 25 August 2023

¹⁴² Equality and Social Justice Committee, [12 June 2023, Record of Proceedings](#), paragraph 188

¹⁴³ Equality and Social Justice Committee, [22 May 2023, Record of Proceedings](#), paragraph 92

145. We asked police representatives how they refer perpetrators to programmes. Dyfed-Powys PCC Dafydd Llewelyn said “there is room for development”.¹⁴⁴ He told us:

“We are, at the moment, prioritising victims and the support to survivors, but a greater proportion of funding needs to go into that prevention space around changing behaviours.”¹⁴⁵

146. Policing in Wales provided us with detailed information on perpetrator programmes in each police force area which highlighted gaps and inconsistency in the availability of programmes. They noted that demand for programmes “far outweighs the budgets available to PCCs” and suggested that limited availability of appropriately accredited providers, low completion rates and the voluntary nature of non-statutory programmes were all having an impact on provision.¹⁴⁶

147. Policing in Wales said that the development of common approaches would be a key aim of its VAWDASV Task Force and that this work would include perpetrator programmes. They also said that recent changes in Ministry of Justice policy would allow police forces to adopt the CARA (Cautioning and Relationships Abuse) model, which should lead to “greater standardisation and places a requirement on perpetrators to engage.”¹⁴⁷ Deputy PCC Emma Wools told us that perpetrator programmes were a key workstream within the Blueprint:

“that's going to be very much a focus of activity, which is about how do we develop better referral mechanisms and response into a menu of perpetrator programmes—so, those from demonstrating very early harmful behaviours all the way through to some of the high-harm behaviour that we see coming through the court system and on statutory services.”¹⁴⁸

148. She also confirmed that work was underway to map existing provision and review quality standards.¹⁴⁹

149. The Minister acknowledged challenges in the provision of voluntary perpetrator programmes across Wales and reiterated that the Tackling

¹⁴⁴ Equality and Social Justice Committee, [10 July 2023, Record of Proceedings](#), paragraph 106

¹⁴⁵ Equality and Social Justice Committee, [10 July 2023, Record of Proceedings](#), paragraph 109

¹⁴⁶ [Letter from Policing in Wales to Chair regarding perpetrator programmes - 17 November 2023](#); [Letter from Emma Wools, Deputy PCC for South Wales](#), 13 October 2023

¹⁴⁷ [Letter from Policing in Wales to Chair regarding perpetrator programmes - 17 November 2023](#)

¹⁴⁸ Equality and Social Justice Committee, [10 July 2023, Record of Proceedings](#), paragraph 113

¹⁴⁹ [Letter from Emma Wools, Deputy PCC for South Wales](#), 25 August 2023

Perpetration workstream is “seeking to map all the relevant services in Wales, including their referral partnerships and funding streams”. The Minister made a further acknowledgement that “the budgetary limitations in trying to improve our ability to tackle perpetration and prevent VAWDASV” needed to be recognised. She said:

“Investing in early intervention and prevention activities in our communities will require a significant evidence base to inform our commissioning strategy and budget planning for the future.”¹⁵⁰

Driving Change

150. Having failed to identify a perpetrator programme during initial mapping, Cardiff Council had commissioned Safer Merthyr Tydfil to develop a fully-integrated and accredited domestic abuse perpetrator programme called ‘Driving Change’. We met with staff and clients of the Driving Change project in Cardiff.

151. Modelled on the work of Paul Wolf-Light from the Ahimsa project in Plymouth, Driving Change is an intensive model of intervention which takes at least six months to complete. The programme is for standard/medium risk adult male perpetrators of domestic violence and abuse with no criminal justice involvement.

152. The aim of Driving Change is to achieve and maintain the safety and wellbeing of women and children. It also aims to support male perpetrators of abuse to cease their harmful behaviours and develop more responsible, respectful, and loving relationships and attitudes with and towards others.

153. To be considered eligible for the program, clients must:

- demonstrate a basic recognition that they are behaving in a violent and abusive way in their relationships and show a level of motivation to change this;
- accept full responsibility for their own behaviour and actions; and
- commit to, and engage in the personal work needed, including regular attendance at sessions.

¹⁵⁰ [Letter from the Minister for Social Justice and Chief Whip, 19 October 2023](#)

154. A participant of Driving Change programme told us:

“A lot of the things we talk about is taking responsibility. Making the change because no one else can do it for you. Whether that’s a change in your behaviour or a change in your mindset. [...] It’s more than just a group where we talk about behaviour towards others . . . It’s a group of talking about emotions, how they affect us . . . It’s so much deeper than I expected it to be. It’s designed to make a lasting change.”

Our view

We were grateful to have had the opportunity to visit a perpetrator programme and meet some of those benefitting from it. The programme we visited had several elements which we were encouraged to see including staff with considerable professional experience and an approach informed by evidence.

Addressing GBV involves tackling deep-seated attitudes related to power and control and it can be challenging to tackle the root causes for violence such as unresolved trauma. So we were troubled by the lack of consistency in the delivery of perpetrator programmes across Wales generally, including how they are publicised and how referrals are made. We believe that under the right circumstances, men who are genuinely committed to change, who have recognised and admitted their abusive behaviour, should have the opportunity to benefit from good quality perpetrator programmes. It is therefore essential that perpetrator programmes are evidence-based; monitored for their quality and efficacy; and that facilitators are appropriately qualified.

The Welsh Government, through its perpetrator workstream, should undertake a rapid review of the perpetrator programmes that are available in Wales. The rapid review should aim to provide survivors and others with assurance that each programme considers their safety and can evidence effective rehabilitation. It should also consider different cultural and contextual factors that can influence the effectiveness of perpetrator programmes. The rapid review should be completed within the next six months and no later than June 2024.

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Recommendation 11. The Welsh Government perpetrator workstream should undertake a rapid review of perpetrator programmes designed to prevent GBV that are available across Wales. The review should seek to provide assurance that each programme considers the safety of survivors and can evidence effective rehabilitation. It should also consider different cultural and contextual factors that can influence the effectiveness of perpetrator programmes and be completed by June 2024.

Modelling behaviour and organisational culture

155. The Advisory Group presented examples where they felt that public services and organisations had failed to respond adequately to GBV – whether sexual harassment, domestic abuse, or sexual violence. Some of the women in the Group had lost confidence in the agencies that they had believed were there to support them.

156. We heard that the overall culture within organisations institutions is important in setting expectations.¹⁵¹

157. We asked the Welsh Local Government Association (WLGA) and Wales' Health Boards and Trusts to set out what procedures they have in place for handling allegations of GBV raised by or against employees.¹⁵² They provided us with examples of their individual approaches and guidelines for employees.

158. The Minister agreed that it is “vital that Welsh Government is an exemplar”, noting:

“The Welsh Government is White Ribbon accredited and our Permanent Secretary, Andrew Goodall, and Chief Operating Officer, Tim Moss, are proud White Ribbon Ambassadors, leading an enthusiastic and committed group of ambassadors and champions in raising awareness across the organisation and exemplifying the campaign’s messages.”¹⁵³

¹⁵¹ Written evidence, Policing in Wales

¹⁵² [Letter to the WLGA](#), 7 August 2023; [Letter to Welsh Local Health Boards and NHS Trusts](#), 9 August 2023

¹⁵³ [Letter from the Minister for Social Justice and Chief Whip](#), 19 October 2023

Our view

This inquiry has underlined the role we have to play in preventing GBV, by promoting women's rights and gender equality. It is right that the Welsh Government leads that change and it is important to acknowledge the influence and reach that it has in setting the overall tone of the approach to this issue. However, we firmly believe that each and every one of us has a collective responsibility to drive forward this agenda and that we should strive to ensure that we model the behaviour we are calling for: there should be no change about me, without me. Our final recommendation therefore is to ourselves as democratically elected Members. Given the role that Members of the Senedd play and our links with local communities and constituents, we recommend that all Senedd Members commit to undertake training on GBV prevention by the end of 2024. Alongside this Senedd Member Support Staff and Senedd Commission staff should be encouraged via the appropriate channels to participate in such training and we will highlight this in correspondence with relevant parties. And finally, the Welsh Government should work with local authorities to ensure that local representatives have access to similar training and resources.

Sourced from a best practice provider, this training should recognise and address cultural norms and practices that perpetuate GBV, whilst respecting cultural diversity.

Recommendation 12. All Members of the Senedd should commit to completing training on GBV prevention by the end of 2024. Alongside this commitment, Senedd Member Support Staff and Senedd Commission staff should be encouraged via the appropriate channels to participate in such training.

This should be sought from a best practice provider and seek to address cultural norms and practices that perpetuate GBV whilst respecting cultural diversity.

Action 8: The Welsh Government should work with local authorities and/or the Welsh Local Government Association to ensure that local councillors have access to similar training and resources aimed at tackling GBV and report back by the end of 2024.

Annex 1: List of oral evidence sessions

The following witnesses provided oral evidence to the committee on the dates noted below. Transcripts of all oral evidence sessions can be viewed on the Committee's [website](#).

Date	Name and Organisation
22 May 2023	Lara Snowdon, Violence Prevention Unit, Public Health Wales Dr Jen Daffin, Psychologists for Social Change Oliver Townsend, Platform Yasmin Khan, National Adviser for violence against women, domestic abuse and sexual violence Johanna Robinson, National Adviser for violence against women, domestic abuse and sexual violence
12 June 2023	Anne-Marie Lawrence, Plan International UK Dr Stephen Burrell, Durham University Dr Rachel Fenton, University of Exeter Dr Nathan Eisenstadt, University of Bristol
19 June 2023	Bethan Pell, School Health Research Network Dr Honor Young, School Health Research Network Alexa Gainsbury, Public Health Wales Emily van de Venter, Public Health Wales

Date	Name and Organisation
10 July 2023	Dafydd Llewelyn, Police and Crime Commissioner for Dyfed-Powys Emma Wools, Deputy Police and Crime Commissioner for South Wales Amanda Blakeman, Chief Constable, North Wales Police
11 September 2023	Eluned Morgan MS, Minister for Health and Social Services Welsh Government Julie Morgan MS, Deputy Minister for Social Services Welsh Government Jeremy Miles MS, Minister for Education and Welsh Language Welsh Government
18 September 2023	Jane Hutt MS, Minister for Social Justice and Chief Whip Welsh Government

Annex 2: List of written evidence

The following people and organisations provided written evidence to the Committee. All Consultation responses and additional written information can be viewed on the Committee's [website](#).

Reference	Organisation
PGBV 01	Estyn
PGBV 02	NSPCC Wales
PGBV 03	Older People's Commissioner for Wales
PGBV 04	Royal College of General Practitioners Wales
PGBV 05	Public Health Wales
PGBV 06	Welsh Women's Aid
PGBV 07	Policing Wales
PGBV 08	Barnardo's Cymru
PGBV 09	Natalie A. Russel and Dr Lora Adair, Brunel University London
PGBV 10	National Board of Catholic Women VAWG Committee
PGBV 11	Dr Edith England, Cardiff Metropolitan University and Dr Josie Henley, Cardiff University
PGBV 12	British Psychological Society
PGBV 13	Nottingham Trent University
PGBV 14	Learning Disability Wales
PGBV 15	Royal College of Psychiatrists and the Public Mental Health Implementation Centre
PGBV 16	Plan International UK
PGBV 17	Dr Claire Fox and Dr Caroline Miles, University of Manchester
PGBV 18	National Advisers for violence against women, domestic abuse and sexual violence
PGBV 19	Dr Stephen Burrell, Durham University

Reference	Organisation
PGBV 20	Psychologists for Social Change Cymru
PGBV 21	Platfform

Additional Information

Title	Date
Note of first advisory group meeting	June 2023
Note of second advisory group meeting	September 2023
Violence Prevention Unit Wales – additional evidence	May 2023
School Health Research Network, DECIPHer - additional evidence	June 2023
Surviving Economic Abuse - additional evidence	June 2023
Platfform - additional evidence	July 2023
Royal College for General Practitioners - additional evidence	August 2023
Lloyds Banking Group - additional evidence	June 2023
Dr Rachel Fenton on how British universities challenge sexual violence and harassment on campus - additional evidence	June 2023