Tyneside Rape Crisis Centre
Grace – Northumberland
Sexual Violence Project
Evaluation and
Sustainability Report
August 2011

Centre for Children, Young People and Families
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Executive Summary

Tyneside Rape Crisis Centre (TRCC) is the longest established, continuous Rape Crisis Service in the UK (Jones and Cook, 2008:9) with aims to: provide a service to women aged 16 and over who have been raped or sexually abused; raise awareness and provide training about sexual violence; improve service provision for women survivors; and promote the development of initiatives aimed at prevention of sexual violence (TRCC 2011).

Recently TRCC identified a gap in provision of services responding to sexual violence in rural Northumberland. Following a consultation with key agencies in Northumberland Grace: Northumberland Sexual Violence Project (hereafter Grace) was set up housed within TRCC to develop a new model of delivery that would address the particular needs of women living in a rural county.

- The aims and objectives of the Tyneside Rape Crisis Centre (TRCC) have been achieved:
  - Grace has raised awareness about sexual violence in Northumberland with partner agencies and potential service users;
  - Six counselling outposts have been developed across the county; and this mode of delivery is identified by stakeholders as a model of good practice for this kind of service;
  - 125 referrals to Grace have been received of which 68 women have received counselling;
  - Indirect and direct feedback about the counselling offered is extremely positive;
  - The waiting time is, on average, four weeks. Blyth’s waiting list is consistently the highest though none of the counselling outposts have reached full waiting lists;
  - Two training events on sexual violence have been run and both have received very positive feedback;
  - The location of Grace and its services (for women and training) within Northumberland has been positively received both by partner agencies, the volunteer and service users.

- The age profile of those referred to Grace suggests that more monitoring of this might prove fruitful for funding and development of work agendas. The (older) age profile of women referred to Grace seems at odds with the national trends about who experiences sexual violence. Whilst there is some evidence that messages are reaching younger women about seeking support for sexual violence, additional work is needed to target young women across the county. In keeping with other research, age is a factor in rural communities affecting victim/survivors’ help-seeking and the older age profile reflects
this. Being able to compare the age of the group that have been referred with the group that take up the counselling offered may shed further light on this.

- Most referrals are for those for whom child sexual abuse is a factor. This is in keeping with the national picture of Rape Crisis Centres but again may suggest that more work is required targeting young women experiencing sexual violence as adults.

- Most referrals come from health agencies but referrals from mental health agencies (both statutory and voluntary) are significant which suggests that there is recognition by these agencies that specialist services are required to meet the needs of victim/survivors of sexual violence. This may have implications for the development of Grace, its relationship with partner agencies, and future funding streams.

- The capacity of the development worker, counsellor and administrator should be monitored and reviewed. Maintaining multi-agency working relationships, ensuring the service remains visible and operating reasonable waiting lists may require increased hours for both roles. In addition, it may be useful to review the use of the administrative support, especially in terms of when, where and how it is available.

- The consensus amongst funding, partner and TRCC stakeholders interviewed is that sustainability of Grace will be best achieved, in the short to medium term at least, by remaining part of TRCC:
  
  o The current funding context means that the infrastructure, reputation, ethos and knowledge/skill base are crucial to future funding bids. However:
    
    ▪ It is crucial that the Northumberland identity Grace has created is retained and developed;
    
    ▪ The Grace project should also explore using alternative, web-based tools to: improve visibility across the county; maintain multi-agency working relationships; and provide different kinds of support and communication to those who may find travelling difficult.

- The database could be improved in three ways: decreasing the amount of missing data; changing the ways that referral sources are identified to facilitate more accurate data collection; and collecting data on those women who take up the counselling offered as well as those who are referred. The latter particularly would facilitate a comparative analysis between women who are referred to the service and those women who actually use the service.
Acknowledgements:

The evaluation team would like to thank the following people for their invaluable assistance with this work: the funder for this evaluation Northern Rock Foundation; the staff working with Grace and the TRCC, particularly the administrator who was extremely patient with all of our requests for further information; the evaluation steering group; and all of those who took part in the interviews, particularly the service users.
1.0 INTRODUCTION

This report provides the findings from the evaluation of Grace which includes addressing the questions of whether and how sustainability might be achieved over the coming three years. There are four parts to the report. The first part provides the context in which Grace provides a service with a discussion both about the prevalence of rape and sexual assault; a very short account of the history of Rape Crisis services nationally and regionally; the background to the development of Grace within the Tyneside Rape Crisis Centre (TRCC); and some key features of Northumberland, the county in which Grace provides a service. In the second part there is a brief overview of the methods used in the evaluation and a discussion about limitations. The third part discusses the findings in three sections: the achievement of aims and objectives; a profile of referrals to Grace; and a discussion about sustainability. Finally the fourth part provides a conclusion and recommendations addressing the evaluation and issues about sustainability.

1.1 The Context: Rape and Sexual Assault, Prevalence and Trends

Recent figures published from the 2009/10 British Crime Survey (BCS) [see appendix A] suggest that the prevalence of rape and sexual assault is either decreasing (overall percentages of any assault including attempts have decreased from 1.7% of the population of those aged 16-59 years of age in 2004/05 to 1.3% in 2009/10, with a peak of 1.9% in 2005/06) or remaining at the same rate (0.2% for those experiencing rape excluding attempts in 2004/05 through to 2009/10) (Smith et al, 2011). However, women, particularly those aged between 16-24 years, are at the highest risk of experiencing rape and/or sexual assault (overall 2.3% of women compared with 0.5% of men reported experiencing rape or sexual assault; and 13.5% of those aged between 16-24 report they have experienced rape or sexual assault compared to 2.1% of women aged between 25-34 years and 0.9% of women between 35-44 years. In the previous 12 months of the 2009/10 BCS survey, overall, perpetrators of sexual assault were strangers (58%) however, this reflects the majority of assaults which are classified as less serious (indecent exposure, sexual threats, and unwanted touching). Amongst women victim/survivors of serious sexual assault (rape, assault with penetration and attempts at assault including penetration) the most common perpetrator was the woman’s partner or ex-partner (54%). Serious sexual assaults were most likely to take place in the home of the victim/survivor (44%) or the home of the perpetrator (24%) (Smith et al, 2010) highlighting how misinformed common public myths about rape and serious sexual assault can be which identify ‘the rapist’ as a stranger who attacks their victims in public spaces.

The BCS (Ibid) also asks about the impact of experiencing serious sexual assault on victim/survivors. In all, 81% of those who said they had experienced serious sexual assault said that they had suffered some ill-effects as a result. In the main, impacts were on mental and /or emotional health (54%), problems trusting people or relationship difficulties (30%). Physical injuries were most likely to be minor bruising or a black eye (22%). Attempted suicide was reported by 6% and 4% said they had become pregnant as a result of the rape.
When looking at child sexual abuse a similar gender pattern exists. According to the work of Kelly et al (1991), 21% of young women have experienced sexual abuse with physical contact before the age of 18 compared with 7% of young men. Cawson et al (2000) similarly found that 21% of girls and 11% of boys had experienced child sexual abuse.

1.2 Responses to Rape and Sexual Assault: the Criminal Justice System

The BCS asks about whether victim/survivors of serious sexual assault have told anybody about their experiences. A large minority (38%) said they had not told anybody. Of those who had told somebody, most (44%) had told friends, relatives or neighbours. Only 11% of those experiencing serious sexual assault had reported their most recent experience to the police. This proportion is the same as that was reported in the 2007/08 BCS and though it is low, most of those who had reported to the police (65%) said that the police had been very or fairly helpful (Smith et al, 2010).

The successful prosecution of rape cases has historically been problematic with the decision about whether to proceed with a prosecution lying with the Crown Prosecution Service (CPS) which is charged with deciding whether a case has any chance of a successful prosecution. Research carried out by Kelly et al (2005) found that out of 2,643 reported cases only 322 (12%) were sent for trial. ‘This is equivalent to 14 per cent of all 2,244 reported cases where the outcome is known’ (Kelly et al, 2005:71). Kelly et al (2005) noted that survivor withdrawals contributed to a small number of cases being discontinued. In addition, in cases where a trial had taken place, ‘an acquittal was more likely to be the outcome than a conviction, and the acquittal rate in trials was twice as high as in those involving under-16s’ (Kelly et al, 2005:77). Of those convicted, half were due to a guilty plea rather than an actual verdict. The Fawcett Society (2011) argue that with at least 47,000 women being raped every year in the UK and the conviction rate at just 6.1% there has been a dramatic downturn in the conviction rate compared to 30 years ago when it was more than 33%. From 1985 to 2002, reporting of rape cases has increased but prosecutions and convictions have remained static (Kelly et al, 2005). In addition, regional variations exist in conviction rates so while convictions have risen in Northumberland since 2004 to 6.9% per cent (Fawcett Society 2006) in many areas conviction rates since 2004 have decreased with the worst being Bedfordshire which has fallen by over 60%. This has led the Fawcett Society (2008) to argue that women face a ‘post code lottery’ in obtaining justice for rape.

1.3 The origins of the Rape Crisis movement, England and Wales

The above statistics about sexual violence provide the rationale for the existence of Rape Crisis Centres. Not only do these Centres provide support to those women who have experienced rape and sexual assault as adults or in their childhood but they provide this support within a feminist, political framework that recognises, as Kelly and Radford (1998:53), amongst others, have argued, that rape and sexual assault are more than just sexual crimes: ‘sexual assault is one of the ugliest and most brutal expressions of masculine violence toward women’. The Rape Crisis movement in England and Wales has been supporting
women who have experienced sexual violence for over thirty years since the first voluntary Rape Crisis Centre opened in North London in March 1976 offering support to women and girls experiencing sexual violence. Rape Crisis Centres aim to:

Offer specialist support, advocacy, counselling and information to women and girls, free of charge and in confidence, in a safe and non-threatening environment (Rape Crisis, 2011).

Rape Crisis England and Wales is a registered charity and the umbrella body for all Rape Crisis Centres in England and Wales (Rape Crisis, 2011). This body works on lobbying for change at national level, contributing to the development of policy and law, providing guidance on best practice for the provision of the Rape Crisis model of provision for its member groups, providing training and resources for the development of best practice for its members and conducting raising awareness, dissemination and training events for practitioners in partner agencies.

The ethos of the Rape Crisis movement is to provide a women-only service (Jones and Cook, 2008) giving survivors a safe and secure place in which to come to terms with their experiences. Rape Crisis centers are, for many survivors, the first stage in acknowledging an experience of sexual violence since it is clear that many survivors do not report sexual attacks to the police. Indeed, Rape Crisis is a lifeline for the many that prefer the ethos of a women-centered approach rather than the response of the police, Sexual Assault Referral Centers and/or the courts. Core values include respecting a woman’s confidentiality and right to autonomy, believing women, not labeling but counseling survivors, and providing support where needed (Jones and Cook 2008). Believing survivors is a key issue for all those involved with Rape Crisis: this is something that many survivors may not have experienced when reporting assaults to the police in the past. Women for many reasons seek support in response to child abuse many years after the event and Rape Crisis Centres have traditionally provided a service to these women. About 65% of those who contact Rape Crisis Centres have experiences of childhood sexual abuse (Rape Crisis, 2011).

1.4 Tyneside Rape Crisis Centre

Tyneside Rape Crisis Centre (TRCC) was ‘founded in 1978 and is the longest established, continuous Rape Crisis Service in the UK’ (Jones and Cook, 2008:9). In line with the national Rape Crisis core values, the TRCC is an organisation run by women for women with a strong feminist ethos and aims to:

- Provide information, support and counselling for women aged 16 and over who have been raped or sexually abused;
- Raise awareness about rape and sexual abuse and provide training, education and outreach work;
● Contribute to policy initiatives aimed at improving service provision for women survivors;

● Support and help develop initiatives aimed at preventing/detecting child sexual abuse and adult rape/sexual assault (TRCC 2011).

1.5 Development of the GRACE Project

The TRCC has long been providing a specialist service to women in the Tyneside area but recently identified a gap in provision of services responding to sexual violence in rural Northumberland. Following a consultation period with key agencies in Northumberland including CEASE24; W.H.A.C2, 6080303 the sexual assault referral centre (REACH), community safety officers, the County domestic violence officer and Victim Support, a bid was put together for a pilot project that would address the gaps in rural Northumberland and ensure more equity and choice for survivors of sexual violence (TRCC, 2008). The project later became known as Grace. Housing Grace within TRCC allowed staff to draw on the expertise and knowledge from both Rape Crisis England and Wales and TRCC to roll out the new Rape Crisis service in Northumberland. However, it was also acknowledged that the rural nature of the county was a new aspect to the work and would require a different model of delivery.

1.6 Key Features of Northumberland

The area of Northumberland is the sixth largest county in England at the most northern edge bordering with Scotland, its eastern edges being the northern coastline, the western edges bordering on Cumbria and to the south bordering on County Durham and Tyne & Wear (Census, 2001). Almost a quarter of the county is protected by the Northumberland National Park which stretches from the Scottish borders and links with Hadrian’s Wall (Tourist Information, 2011). The national park breaks up the development and hamlets of the county thus isolating many communities and making access to services difficult. According to the Census (2001) the total number of residents in Northumberland is 307,186, with 157,231 females and 149,955 males. Table 1, below, shows the number of males and females in each age group that make up the population of Northumberland. The highest age groups for women are above the age of 30 with the most populated age groups here being those aged 50-54 years (Census 2001). This means that the county is an aging county.

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1 CEASE 24 is a domestic violence project based in Northumberland and was developed by the North Northumberland Domestic Violence Forum.
2 W.H.A.C is the Women’s Health Advice Centre that is based in Ashington, it is a registered charity that provides a service to women and adolescent girls in Northumberland.
3 608030 – SixtyEightyThirty a registered charity that was set up by local people in Northumberland to fill a gap in service provision in response to domestic violence.
Table 1: 2001 Census figures showing a breakdown in the population of Northumberland by age and gender.

<table>
<thead>
<tr>
<th>Age Range</th>
<th>Total</th>
<th>Males</th>
<th>Females</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 14</td>
<td>53910</td>
<td>27690</td>
<td>26220</td>
</tr>
<tr>
<td>15 - 19</td>
<td>18590</td>
<td>9482</td>
<td>9108</td>
</tr>
<tr>
<td>20 - 24</td>
<td>14220</td>
<td>7383</td>
<td>6837</td>
</tr>
<tr>
<td>25 - 29</td>
<td>15774</td>
<td>7874</td>
<td>7900</td>
</tr>
<tr>
<td>30 - 34</td>
<td>20132</td>
<td>9761</td>
<td>10371</td>
</tr>
<tr>
<td>35 - 39</td>
<td>23201</td>
<td>11437</td>
<td>11764</td>
</tr>
<tr>
<td>40 - 44</td>
<td>23202</td>
<td>11518</td>
<td>11684</td>
</tr>
<tr>
<td>45 - 49</td>
<td>22356</td>
<td>11161</td>
<td>11195</td>
</tr>
<tr>
<td>50 - 54</td>
<td>24653</td>
<td>12120</td>
<td>12533</td>
</tr>
<tr>
<td>55 - 59</td>
<td>19877</td>
<td>9980</td>
<td>9897</td>
</tr>
<tr>
<td>60 - 64</td>
<td>17237</td>
<td>8368</td>
<td>8869</td>
</tr>
<tr>
<td>65 - 69</td>
<td>15751</td>
<td>7624</td>
<td>8127</td>
</tr>
<tr>
<td>70 +</td>
<td>38287</td>
<td>15546</td>
<td>22735</td>
</tr>
<tr>
<td>Totals</td>
<td>307190</td>
<td>149953</td>
<td>157237</td>
</tr>
</tbody>
</table>

Whilst the population just exceeds that of Newcastle the map (figure 1) below shows the spread of population centres across the county which makes access to services difficult. It is important to describe the specific features resulting from the rural nature of Northumberland which can make it difficult for women to seek support. Living within a rural community presents issues that include geographical isolation, fears about breaches in confidentiality in close-knit communities, lack of accessible services and poor access to private or public transport (see also Donovan et al, 2010). The Grace project was charged with alleviating these difficulties as much as possible in the delivery of the service.
Figure 1  Map of Northumberland
1.7 Aims and Objectives of the Grace Project

The objectives of the GRACE project are:

- To enable women survivors of sexual violence to gain information and access to specialist, appropriate and sensitive counselling services through a pilot outreach service in rural areas of Northumberland;
- To help raise awareness about the new pilot outreach service through informal talks, outreach visits and circulating publicity materials in North and West Northumberland;
- To deliver a range of services in order to ensure choice for women in North and West Northumberland about the kinds of support they might want to access, for example, through the helpline or face to face counselling;
- Additional funding from Equality and Human Rights Commission (EHRC) enabled Grace to set up and deliver further counselling outposts in the North and West of Northumberland;
- To maintain a database of take up of the services and collect data on barriers to access.

Funding was secured from the Northern Rock Foundation and the Equalities and Human Rights Commission; and in the second year of the pilot the police fund of the County’s domestic violence partnership also allocated some funding. Whilst funding was initially for three years the EHRC has faced a budget reduction and revised remit. Subsequently TRCC has been informed not to expect the final year allocation.

The Grace project currently employs a part-time development worker (22.5 hours per week), a full-time counsellor (37 hours per week) and a part-time administrator (seven hours per week). The development worker’s role includes assisting in the development of the project, publicising the project, forging multi-agency working relationships with agencies around Northumberland, utilising the partnerships to raise awareness around sexual violence, raise awareness about the project and referral routes into the project, volunteer recruitment and training, and the management of the Northumberland Helpline.

The counsellor’s main role is to provide a counselling service to women survivors and make the service as accessible as possible across Northumberland. The role also includes managing the waiting list, contacting clients to arrange counselling sessions, deliver the counselling at the necessary outreach base, and maintenance of all paperwork relevant to the process. Both the development worker and the counsellor also deliver training about sexual violence and attend meetings for both the GRACE project and TRCC.

2.0 THE EVALUATION
The evaluation has used a mixed methodology gathering data from a number of sources to ascertain the extent to which Grace has met its objectives; and to explore possible routes to secure sustainability of Grace over the next three years. Quantitative and qualitative data has been collected and analysed. Quantitative data was provided by Grace from their monitoring database. Qualitative data was collected by interviewing key stakeholders; and by analysis of feedback from participants to awareness raising and training events. Twelve telephone interviews have been undertaken with: four external stakeholders from funding (two) and partner agencies (two), two staff members of Grace, a staff member of TRCC, a member of Grace Steering Group, a volunteer and two service users. Interviews were designed according to which stakeholder was being interviewed.

Whilst the evaluation has been conducted with due reference to the ethical guidelines of the University of Sunderland and the methodology has been developed with the TRCC Evaluation Sub-Group, there are some key limitations which should be kept in mind whilst considering the findings:

i. The data provided from the TRCC database only refers to the 125 referrals. It has not been possible to identify which of those 125 became service users and therefore the analysis identifying factors such as the age profile and referral source only relates to the 125 referrals to Grace.

ii. The database is well designed and, on the whole, well maintained. However, there are fields that have missing data, for example, fields saying what type of sexual violence a referral has experienced and what age they were at referrals and, most importantly, any information that is specifically about those who take up counselling. This means that some of the findings and conclusions derived from them must be read keeping in mind that the data available is limited.

iii. Attempts to recruit service users were largely unsuccessful. Letters written from the evaluation team to service users did not elicit any response. The two service users who took part responded to a personal invitation from the counsellor. This means that the data from service users is limited both in quantity and because it was not collected objectively.

3.0 FINDINGS

3.1 Achievement of Aims and Objectives

3.1.1 Raising Awareness

Outreach including raising awareness (both about rape and sexual violence and about Grace) with partner agencies, delivery of training, attendance at strategic meetings/forums and developing multi-agency working relationships with partner agencies in Northumberland has been successfully achieved. This is evidenced by the following:
i) Feedback from awareness raising and training events indicate that participants have been very positive about the sessions. Two training events have been conducted with 10 attending the first and eight the second. The majority of those attending the first training event said their expectations had been met by the training (all 10 attendees filled in a feedback form). Only two attendees completed feedback forms (which were posted out to participants after the training event) for the second training session and both were positive in their feedback. It was also mentioned that holding the training in Northumberland had made it easier for them to attend. One stakeholder from a partner agency told us:

_There was a couple of us went along to the training and actually they delivered what it said on the tin really. I know it’s a bit of a cliché but they did. And very informative. Raised awareness. Couple of things about the laws and things like that, that I wasn’t aware of, so I did learn some things. It wasn’t just like going to the same old training, I’ve heard this all before. And it was nice as well ‘cos it was actually a project that was based in Northumberland which would be able to provide training in Northumberland around sexual abuse. ... So yes it was really good training. It was useful and I’d recommend it._ (Stakeholder, Partner Agency A)

ii) The development worker has attended strategic meetings and other appropriate forums across Northumberland. Both the development worker and counsellor are known by name by partner agencies; and the development worker has developed multi-agency working relationships with partners across the county. For example, the following stakeholder from a partner agency was asked:

_I: Do you think [Grace is] raising awareness of the issues around sexual violence in Northumberland as well?_

_Partner Agency: Yeah. They do that through their training and they came as well when they started out, and did talks with the partner agencies. They came and kind of went around and introduced themselves and what they planned to do in Northumberland. So definitely yeah._ (Stakeholder, Partner Agency A)

iii) As at June 30 2011 and since October 2009, 125 referrals have been received for counselling or helpline support, of which 68 women have received counselling.

iv) Referrals have come from across the county and across partner agencies. The table (2) below indicates the sources of referrals to Grace. Most referrals have been from health services (N=36, 29%)4 with five being identified as mental health services. A further analysis of the referral sources indicates that mental health referrals are being under-

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4 All percentages have been rounded up or down around 0.5.
represented in the monitoring fields in the database\(^5\) since there are eight referrals identified as coming from community psychiatric nurses, six referrals from IAPT (‘improving access to psychological therapies’), five referrals from the partnership between Mental Health Concern and Oakdale (MHCO) and two referrals from MIND. In all, this means that at least 21 referrals came from mental health agencies (17% of the total number of referrals) and almost all (N=13 out of 15, 87%) of the referrals from voluntary agencies (as identified in the database) were from agencies dealing with mental health issues.

Self-referrals (N=32, 26%) are the second largest group of referrals which suggests that information about Grace is circulating across the County and that there is strong motivation among victim/survivors of rape and sexual assault to approach agencies such as Grace for support. Self-referrals are also in keeping with one of the core values of Rape Crisis England and Wales which promotes women’s autonomy in making decisions to seek support in relation to their experiences of rape and sexual assault (Jones and Cook, 2008).

Criminal justice system agencies or associated agencies together accounted for the third largest source of referrals (N=16, 13% made up of eight referrals from the police and eight from Victim Support, N=eight).

<table>
<thead>
<tr>
<th>Referral Source</th>
<th>Number of referrals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Police</td>
<td>8 (6%)</td>
</tr>
<tr>
<td>Self</td>
<td>32 (26%)</td>
</tr>
<tr>
<td>Health Services</td>
<td>31 (25%)</td>
</tr>
<tr>
<td>Mental Health</td>
<td>5 (4%)</td>
</tr>
<tr>
<td>Women’s Organisation</td>
<td>9 (7%)</td>
</tr>
<tr>
<td>Voluntary Sector</td>
<td>15 (12%)</td>
</tr>
<tr>
<td>Proxy</td>
<td>7 (6%)</td>
</tr>
<tr>
<td>College/School</td>
<td>4 (3%)</td>
</tr>
<tr>
<td>Social Services</td>
<td>4 (3%)</td>
</tr>
<tr>
<td>Victim Support</td>
<td>8 (6%)</td>
</tr>
<tr>
<td>Drug/alcohol</td>
<td>1 (1%)</td>
</tr>
<tr>
<td>Professional other</td>
<td>1 (1%)</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>125</strong></td>
</tr>
</tbody>
</table>

The fact that Grace has developed a new service alongside raising awareness about sexual violence was identified by a funding stakeholder as one of its strengths:

\(^5\) The database separates statutory from voluntary agencies generically but has not identified all psychiatric nurses as mental health referrals.
Well it seems to me that kind of it’s [Grace] managed to raise the issue of sexual violence in a way that helps agencies look at it because I think if you just kind of do the development and the awareness raising there’s a resistance because people are saying well, you know, if I talk to my clients about it, then where do I send them. Doing that alongside some service delivery means that, you know, this is the issue, this is the service that we’re providing. So I think that, you know, they’ve kind of got that balance right. (Stakeholder Partner Agency A)

v) Six counselling outposts have been set up across the county: two in Alnwick and Berwick, in the North of the county; two in the West of the county which is the largest service area and the most sparsely populated, in Hexham and, most recently, Ponteland; in the South East there is one in Blyth and in the most Southerly part of the county there is one in Morpeth which is the busiest outpost. The map (above) indicates where these outposts are and their coverage of the county.

3.1.2 Delivery of Counselling Sessions

Delivery of counselling service to victim/survivors of rape and sexual violence has been achieved. This is evidenced in four ways:

i) Sixty-eight women received counselling from Grace which represents 54% of those referred for support.

ii) There is a waiting list at several of the counselling bases which suggests that the Grace project is successfully providing a service to its target user group. Table 3 shows the end of the last three quarters of the year which indicates that waiting lists have been typically low. Blyth shows the most consistently high waiting lists:

<table>
<thead>
<tr>
<th>Table 3 Waiting Lists by Area: a Snapshot</th>
</tr>
</thead>
<tbody>
<tr>
<td>Base</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Hexham</td>
</tr>
<tr>
<td>Morpeth</td>
</tr>
<tr>
<td>Blyth</td>
</tr>
<tr>
<td>Alnwick</td>
</tr>
<tr>
<td>Berwick</td>
</tr>
<tr>
<td>Ponteland</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>

On average, clients have a wait of 4.3 weeks for the counselling service. The longest wait for clients to be seen by a counsellor was January 2011 but this can be explained by staff sickness. It is not clear whether any alternative arrangements are in place in such circumstances – for example being able to refer to other agencies.
The figures in the final column indicate a ‘full’ waiting list for each outpost and the counsellor has advised that this has not happened as yet in any area. The Ponteland base opened in June 2011 and clients from Morpeth can be offered a place at this outpost if necessary depending on where they live. Flexibility is used to ensure that all of the available counselling sessions each week are being used (N=16 counselling hours a week in total).

iii) Helpline: this was set up with an interim model which provides a telephone number that diverts calls to the Tyneside helpline until such a time that enough volunteers are recruited to run the helpline from a base in Northumberland.

- To date, three volunteers have been recruited and trained.
- The Northumberland helpline was to be set up in its Morpeth base in Autumn 2011.
- Helpline usage monitoring does not always capture the location of a caller as callers can be extremely distressed and may also choose to call the line anonymously. A dedicated Northumberland helpline will alleviate the situation in part but is still not guaranteed.

iv) Feedback from service users is positive. Interviews with stakeholders provided evidence of positive informal feedback from women they had referred to Grace.

*When we’ve had mutual clients they give positive feedback to say that they’re getting a lot of good support from Grace.* (Stakeholder, Partner Agency A)

Service Users too gave positive feedback both about the quality of the service, from referral through to the counselling received, and about its location. One service user also explained why she took part in the interview:

*My view was really that I wanted to take part in it really because I would like to see the service continue and develop. ... everything’s concentrated around Newcastle, maybe Gateshead. There isn’t a lot in more outlying areas really in terms of service provision for more specialist kind of things and probably particularly for this. I think it’s probably really quite important.* (Service User One)

*I’m happy with the service. It is a really good service. Especially being able to be in the local area.* (Service User Two)

**Learning from this work:**

- It takes a long time for a new service to become established. The low numbers of referrals in the early stages of the project were addressed by a raising awareness strategy which was put in place to ensure agencies were able to meet project staff
through talks, visits and also through regular mailings. A Stakeholder from the TRCC explained how this strategy enabled Grace to build a good reputation with partner agencies concerned about referring vulnerable potential service users:

*I think that it was the two workers going around and talking to people face-to-face ... That gave those frontline workers confidence that the service was going to be good and that they could, you know, trust the service ... referring women who are very vulnerable ... you want to be quite sure that the service you're referring them to will provide a good service ... I suspect there's a certain amount of word-of-mouth ... between ... women ... that actually, you known, the counselling is really good and helpful ... The trouble is, in a place the size of Northumberland, it takes a long time for that to build up.* (Stakeholder TRCC A)

- Awareness raising about the project has to be on-going, not time-limited work and this has implications for the workload of the development worker. One partner agency stakeholder commented on the difficulties of juggling the different aspects of the development worker’s role:

  *When I was talking to [the development worker] ... she’s obviously been spending a lot of time on the training of volunteers, and it almost feels like there’s a gap for that contact, that regular contact, because it’s so important to work with other potential partners ... and she was concentrating on the volunteering, which is a lot of work in its own right and I know that. But that means she can’t do the work that she’s meant to be doing out in the community, the other development work.* (Stakeholder, Partner Agency B)

- The model of delivery is successful: taking the work to the clients is seen as an extremely successful way of providing the service. Several stakeholders comment on the county-wide counselling bases as an exemplar of good practice for this kind of service in a rural area.

  *[S]eeing the clients in the different locations. I think that’s a really good thing. I think it’s something we would strive to do as well and I just think it’s a really good... Because it’s so remote, some of Northumberland, and that it’s a really hard thing to do. ... Which I think’s great. That’s really important that that happens and I do think that’s one of the strengths.* (Stakeholder, Partner Agency B)

- Time taken to recruit and train volunteers which has implications for sustaining Grace in the long term, particularly in terms of its helpline.
3.2 Profile of Referrals to Grace

3.2.1 Age Profile of Service Users

The age profile of the service users is higher than that of the profile of those experiencing sexual violence nationally. As discussed in the introduction, the British Crime Survey shows that, nationally, women aged 16 to 24 are more likely to have been sexually victimised compared to older women. However, the data available from Grace shows a more complex picture. Table 4 shows that the numbers of women aged 16-24 account for 36% (N=34) of those for whom ages at referral are known: the largest proportion overall. Yet, nearly half (N=47) of the referrals are aged between 25-44 years.

Table 4 Breakdown of Referrals by Age at Referral

<table>
<thead>
<tr>
<th>Age at referral</th>
<th>Number referred</th>
</tr>
</thead>
<tbody>
<tr>
<td>16-19 years</td>
<td>17 (18%)</td>
</tr>
<tr>
<td>20-24 years</td>
<td>17 (18%)</td>
</tr>
<tr>
<td>25-34 years</td>
<td>20 (21%)</td>
</tr>
<tr>
<td>35-44 years</td>
<td>27 (28%)</td>
</tr>
<tr>
<td>45-54 years</td>
<td>9 (9%)</td>
</tr>
<tr>
<td>55-64 years</td>
<td>5 (5%)</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>95</strong></td>
</tr>
</tbody>
</table>

Table 5 below shows that if the figures are taken as a proportion of the population of different age groups of women in Northumberland then it can be seen that referrals of women aged between 25-34 are the highest proportionally.

Table 5 Women Referred to Grace: Countywide percentages

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Numbers of women in Northumberland from 2001 Census</th>
<th>Referrals to Grace as a proportion of the county's age groups</th>
</tr>
</thead>
<tbody>
<tr>
<td>15-24 years</td>
<td>15,945</td>
<td>0.21%</td>
</tr>
<tr>
<td>25-34 year</td>
<td>18,271</td>
<td>0.26%</td>
</tr>
<tr>
<td>35-44 years</td>
<td>23,448</td>
<td>0.06%</td>
</tr>
</tbody>
</table>

There are two caveats to these calculations which may impact on their reliability. First the census organises age groups beginning at 15 years whereas the Grace Project only provides a service to those women aged 16 years and over. Second, the population figures come from the 2001 census which may now be inaccurate. However, there is some evidence to suggest
that referrals to Grace have a higher proportion of women aged 25-34 years than other age groups. This might be explained by the following factors:

- As the 2001 census shows, Northumberland is an ageing county. This may be being reflected in the older age profile of the referrals to Grace.

- As Donovan et al (2010) argued, and as mentioned above, it may be that women living in rural areas are more likely to live for longer with their experiences of abuse because of their circumstances: lack of access to services, fear of lack of privacy in close-knit communities; lack of access to public or private transport to access support outside their immediate community. The Grace project has provided a much-needed service to women who have lived with their experiences for a long time without any specialist support being available.

- Perhaps additional, more targeted, work is needed to reach out to younger women so that early intervention is possible.

- The age profile may reflect the referral sources to Grace which apart from self-referrals are predominantly health and mental health sources. Again this may reflect the age of the client group being worked with by these referral agencies, hence targeting women earlier might prevent the kinds of mental health impact associated with sexual violence.

### 3.2.2 Type of Abuse Precipitating Referral

Child sexual abuse is a factor for the largest numbers of referrals to Grace (N=52, 57% of those for whom this information is known). This is in line with figures reported by Rape Crisis England and Wales (see above).

#### Table 6 Type of Abuse

<table>
<thead>
<tr>
<th>Type of abuse</th>
<th>Number clients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Sexual Abuse (CSA)</td>
<td>50 (54%)</td>
</tr>
<tr>
<td>Suspected CSA</td>
<td>1 (1%)</td>
</tr>
<tr>
<td>Adult SA &amp; CSA</td>
<td>1 (1%)</td>
</tr>
<tr>
<td>Adult sexual assault</td>
<td>8 (9%)</td>
</tr>
<tr>
<td>Domestic Violence</td>
<td>8 (9%)</td>
</tr>
<tr>
<td>Rape</td>
<td>23 (25%)</td>
</tr>
<tr>
<td>Attempted Rape</td>
<td>1 (1%)</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>92</strong></td>
</tr>
</tbody>
</table>

The high incidence of child sexual abuse in referrals is also reflected in the time elapsed between the incident of rape or sexual assault experienced and the referral to Grace. Of the thirty-five referrals for whom information is available most (N=22) had experienced their rape or sexual assault more than one year prior to their referral and fifteen of these referrals
had experienced their sexual assault over fifteen years prior to their referral. However, of those who had experienced rape or sexual assault in the previous 12 months (N=13), eight (62%) were between 19-24 years thus suggesting that messages are getting through to younger women about seeking help in respect of recently experienced sexual violence.

3.3 Sustainability of the Grace Project

3.3.1 Benefits to Remaining with TRCC

All of those asked about whether or not Grace should remain part of TRCC said that, on balance, there are more benefits to remaining part of TRCC than not. The general message was that whilst it is important that Grace acquire and maintain a Northumberland identity the following factors are too compelling to risk becoming an independent organisation:

- The infrastructure provided by the TRCC;
- The reputation of the TRCC:
  
  Well it’s beneficial for a small project to be kind of like managed by a more established project, ‘cos I think Tyneside Rape Crisis has been going for over thirty years. So that proves sustainability and with GRACE being a new project, or newish project, it’s beneficial for them to have that stability behind them, especially in this current climate, because I think if you’re on your own, you’re much more vulnerable. Plus they can kind of use the management structures and policies they’ve got in place with Tyneside Rape, with like the policies and procedures and their payroll, their system, and financial system and things like that. (Stakeholder, Partner Agency A)

- The wealth of experience/expertise of the TRCC that is being shared with Grace;

- The benefits of being part of Rape Crisis England and Wales:

  [H]aving the backing of a national organisation, where you know you are firmly rooted in a particular culture and ethos, as a counsellor that’s really important to know that you’ve got that support behind you. So I can’t stress that enough really. The ethos is very important. (Stakeholder, TRCC B)

- The protection offered by being part of a bigger organisation within the current economic and funding context:

  A lot of it will depend on funding, ‘cos obviously if you’re looking to go alone you’ll probably be looking at some more roles to be put into place to keep it going. You might need more than just a development officer and the counsellor. … It may be the fact that funding can be found to keep the counsellor and the counselling service and possibly the development role, but I suppose you’ve got to look at eventually, you know, if it is going to be stand-alone, might have to adapt the timeline. (Stakeholder, Funder A)
The trend of new funding regimes to fund bigger rather than smaller, independent voluntary organisations means that being part of TRCC may make it more successful in the search for funding:

*I think it’s a very difficult world out there for very small voluntary organisations at the moment. I think that there is a will to not see any small Rape Crisis Centres close, but I don’t know that that is enough to make the argument for them to go off by themselves. And I think that there is something to be said for some of the economies of scale that being part of a slightly larger organisation can bring. So on the question of should GRACE be independent or part of another organisation, I think although there are arguments on either side, I would probably come down on they’d be better off in with another organisation, you know, because they would function, they get some help with fundraising. ... it’s a hard world out there for small voluntary organisations and they would gain, or they would retain, a lot of experience and a lot of additional capacity, that they would struggle to recreate I think.* (Stakeholder, Funder A)

Retaining an independent identity as a Northumberland project was identified by the majority as being crucial for the sustainability of Grace but the benefits accruing from developing this identity were not necessarily seen to be at odds with remaining part of the TRCC:

- Having a Northumberland identity – providing a service in Northumberland for and by women from the county – all of which is already being achieved by Grace and needs to be maintained and developed:

*I really do think it’s going to be a fantastic little organisation that’s going to provide the service that, you know, a lot of people would be apprehensive about approaching. It’s going to give people the confidence that it is a local provided service and, you know, there’s real people to actually listen to what they have to say and there is people that will support them and people who care enough, taking time out to provide their services in volunteering their role. So as I say, even if Grace remains part of TRCC, it’s great in itself, and even if it branches off on its own, then I really do think that it wouldn’t have any problems in coping on its own either.* (Stakeholder, Volunteer, our emphasis)

- Being able to respond to the particular needs of Northumberland as a rural county – this too is being achieved by Grace and needs to be built on:

*[T]he way GRACE has been set up, it’s, you know, the counsellor going to the client rather than the other way round, because Northumberland, as you appreciate, it’s the sixth largest county in England. Somebody from Berwick would have difficulty travelling to a counselling base in the southeast of Blyth, whereas the way the project’s set up, the counsellor goes around the county and they have bases, satellite
bases, where they provide the counselling in. So I think that’s important. (Stakeholder, Funder B)

3.3.2 Disadvantages of Being Part of the TRCC

One of the disadvantages of being part of the TRCC was a potential lack of flexibility. This was articulated in two ways:

i) Regarding the women-only ethos. Two stakeholders identified this as being a potential problem – not because of a disagreement with the feminist ethos - but in terms of the growing reluctance of funders to fund gender-specific work:

I appreciate the stuff that the feminist movement’s done over the years to support women, but I think for now people are now starting to look a bit wider. And I think when it comes to funding, it’s important to do that, without sort of losing obviously the important services to women, ‘cos they’re the majority of the victims. Sometimes you’ll appreciate there’s no services at all for men. (Stakeholder, Funder B)

Whilst this stakeholder may reflect some recent funding trends, it is also worth considering the statements made in the government’s Violence Against Women and Girls (VAWG) Action Plan (Home Office, 2011) that both identifies women and girls as the primary victim/survivors of interpersonal violence (‘[u]ltimately, the primary risk indicator is simply being female’ Home Office, 2011: 6) and cautions local funders that ‘VAWG services should not be the easy cut’ when it comes to looking for savings in local budgets (Ibid: 1).

ii) Another stakeholder felt that there is possibly a lack of flexibility about exploring different modes of delivery of the service. This stakeholder thought that TRCC, and therefore Grace, has been slow to explore the use of the web as a way of communicating with and possibly providing support to women; and has focussed on the provision of counselling and the helpline without exploring other modes of support, e.g., advocacy:

I do think actually another service which I think we need is ... a website presence, maybe Facebook, that kind of electronic presence, ‘cos I think that could be very useful, but we’re a bit behind. I think Tyneside Rape Crisis Centre as a whole is a bit behind the times at the moment in relation to Facebook and using those online social media stuff, but we are looking at that and I think that in Northumberland in particular, that can be useful again because of the geographical distances. So if women can contact each other or get information online, that would be good. (Stakeholder, TRCC A)
3.3.3 Other Factors Relating to Sustainability of the Grace Project

Other factors relating to the sustainability of Grace were:

i. Capacity of current Grace project staff:

- The workload of the development worker is fast outgrowing the amount of hours allocated and could be considered for expansion. Since referrals to the project have increased, awareness-raising has fallen entirely to the development worker. The development worker also explained that travelling time can take up a substantial amount of working time and has led to her not being able to attend as many meetings with partners as previously because it is not seen as the best use of the time available. Stakeholders commented on the breadth of the remit of the development worker (which also includes managing the helpline and volunteers) and the difficulties faced in consistently delivering on everything; and some had noticed that the development worker had not been attending as many partnership meetings as previously. Some stakeholders mentioned that they felt that communication about what Grace has achieved, maintaining relationships with partner agencies, and development of partnership working could all be improved. Having included many partner agencies in the development of the project some stakeholders had lost some of that sense of being ‘in the know’ about the project and some did not feel able to answer questions about whether or not Grace was achieving its aims and objective because they were not clear what these were. For example:

   *It appears to be a good service. Just need to know a bit more facts and figures at the stage we’re coming to now. As I say, I probably haven’t needed to know them, but we’re now looking at the longer-term funding issues and we need to know what it is.*
   (Stakeholder, Funder B)

Mitigating factors for this were also identified by different partner and funder stakeholders: changes in those who were in post at the time Grace was being involved, staff sickness, the inability of Grace development worker to attend all meetings because of capacity.

- The counsellor currently operates from six bases across Northumberland. The model which has taken the counselling to the service users is an aspect of Grace that all stakeholders held up as its biggest achievement. Waiting lists exist for some but not all areas within Northumberland which suggests not only that the development/outreach work done has been and continues to be successful but also that there may be a case for funding further counselling hours. Since referrals to Grace have increased it has become impossible for the counsellor to take part in any awareness-raising though she continues to be involved with training. As has been indicated, awareness-raising was believed to have been crucial in providing the reassurance some potential referrers have needed to believe in the credibility of the service being offered by Grace. Finally, travelling time takes about 11% of the counsellor’s working hours - not an insubstantial amount of time.
• More and/or more flexible administrative support could assist the smooth running of Grace. However there is a reluctance in both workers to, as they say, ‘give up control’ over that aspect of their work. This may be the result of only having support for one day a week and that being based in Newcastle.

• Review of meetings within TRCC: time taken for meetings within TRCC was raised as a possible problem as it is sometimes seen as a drain on a very limited resource. Whilst whole team meetings were seen as positive in so far as being part of the TRCC is seen as extremely beneficial, there were comments made that, on occasions, this time felt wasted because the focus was not the project in Northumberland.

• The project’s considerable success can be attributed to the commitment and enthusiasm of the two women in post as counsellor and development worker. After talking to both, it would seem that they are both extremely dedicated to the work and the women who use the service, and that a lot of the day to day details are carried in their heads. Their reluctance to use the administrative support more has already been referred to above. However this might prove problematic in the future – if one is on long term sick or leaves; or if their workloads grow any further there may be the possibility of ‘burnout’. In addition, the issue of capacity may have implications for monitoring and up-keep of the database.

ii. Ability to recruit volunteers:

It is intended to run the helpline with volunteers but difficulties with recruitment have meant that the helpline has, until July 2011, been diverted to the TRCC phone. Feedback from the volunteer who took part in the evaluation was extremely positive about the recruitment, training process and ethos of TRCC:

I don’t think there’s anything we can improve on right now. There’s not. There’s support when you need it. There’s adequate supervision. There’s adequate training. And apart from that, it is an organisation that’s sensitive to individual needs as well, because if you need to have time off, you know, you do get told that you go and deal with what it is you have to, the doors are open for you to come back if you need. … What more can an organisation offer? (Volunteer)

It was intended to make the helpline autonomous and located in Morpeth in Autumn 2011. Sustaining this will depend on recruiting and maintaining a group of volunteers from Northumberland which may pose challenges.

iii. Working with young women:

Statistics suggest that young women are not using Grace in the numbers that might be expected given the national profile of victim/survivors experiencing rape and sexual violence. This could be a focus for future work and may open up funding streams for a specific piece of work.
I think the reason that I would focus on young people is that there’s a lot of under-reporting and certainly kind of a lot of sexual violence from partners or people who are known so it is hard for young people. (Stakeholder, Funder B)

This stakeholder was not speaking specifically about Northumberland but more generally. It may be that Grace, because of its rural nature, will always have more older women using the service than other, more urban areas. However, it may also be that some specific targeted work with young women may be worth considering to develop and extend its reach.

iv. Development of Online Resources: Two stakeholders from within Grace believed that online resources could be explored for use with promoting Grace, providing different kinds of communication with and support for women across Northumberland and/or for attendance at meetings/keeping in contact with partner agencies.

v. Visibility of the project: one service user said that the project does not seem to have the same public visibility as other services for domestic violence. The number of self-referrals made to the project (self-referrals are the second most common) may suggest that given its resources the project is doing as well as can be expected.

vi. Data collection: The Grace project collects a lot of paper based monitoring data, which is difficult to analyse in an evaluation of this size and scope. The limited administrative time that is available to transfer paper based feedback to the database exacerbates this. The database is very well designed and overall it is well maintained and populated. It is of interest both for the development of the work and future funding streams that most referrals are older women, have experienced child sexual abuse and are not referred by the police and/or other criminal justice related agencies but more often by agencies related to health and mental health specifically. Three ways in which the database could be improved to provide more detail in relation to these findings are to decrease the amount of missing data across fields, collect data on those who take up the counselling offered so that comparative work can be done with those who are referred, and clarifying referral sources to facilitate the identification of the major types of referring agencies.

vii. Statutory funding: This is identified by several stakeholders as the only security Grace will have in the future. Discussions are being undertaken in Northumberland with the domestic and sexual violence coordinator, the Primary Care Trusts (PCTs) and tentative approaches are being made to the new GP consortia to establish how funding applications might be made. The fact that mental health agencies (both voluntary and statutory) are the largest source of partner agency referrals to the TRCC suggests that there is recognition that these service users require specialist services not being provided by the referring agency. This provides evidence of the need for Grace in Northumberland.
4.0 Conclusions

4.1 Achieving the aims and objectives of the Grace Project

The Grace project has successfully developed and provides access to specialist services for women experiencing sexual violence in six counselling outposts across Northumberland. This model of service delivery is identified as a best practice model for providing services in rural areas by stakeholders in this evaluation. The service took longer to establish than expected but continued, and face to face outreach, development and awareness raising (both about Grace and about sexual violence) has proved successful in establishing the service and eliciting referrals both from partner agencies and from service users themselves.

4.2 Sustainability

Information from Rape Crisis England and Wales providing a framework for considering the question of whether Grace is best served by remaining part of TRCC or becoming an autonomous agency reinforced the validity of the questions posed by the evaluation team: considering the benefits and disadvantages of autonomy – including financial, political, and capacity, and in terms of best meeting the needs of the victim/survivors of sexual violence in Northumberland. Analysis of the evaluation findings leads to the conclusion that Grace should remain part of the TRCC, at least in the short to medium term for reasons linked to funding, infrastructure, expertise and reputation.

4.3 Recommendations

i. Awareness-raising about Grace and sexual violence should be seen as an on-going part of the work of the project;

ii. The capacity of Grace should be kept under review and hours for each role possibly expanded in new funding applications;

iii. The evidence of the success of Grace model for practice, providing counselling outposts across the county of Northumberland should be used to acquire statutory funding;

iv. The fact that a significant number of referrals come from statutory and voluntary mental health agencies suggests that these agencies recognise the need for specialist services for those experiencing sexual violence. This should be capitalised on by targeting statutory health funders for future funding.

v. The age profile of women referred to Grace presents a slightly more complicated picture than the national profile of women experiencing rape and sexual assault. The older age profile of women using Grace may reflect the aging profile of Northumberland and/or other research that suggests that there are specific factors in rural areas that result in victim/survivors of domestic and/or sexual abuse being older than in more urban areas. Whilst there is some evidence that younger women are being reached by messages about sexual violence, additional, targeted, work is needed to reach-out to younger women. The age
profile of not just referrals but actual service users should also be kept under review to inform future funding and project development agendas.

vi. Whilst the consensus is that Grace should remain part of the TRCC it is also crucial that it retain its developing Northumberland identity. Feedback from all stakeholders, including service users and the volunteer, was that having a service based in Northumberland and in outposts serving different parts of the county is a strength that should be built on.

vii. Internet technologies should be explored to see how different kinds of information, communication, advocacy and support can be made available to women across Northumberland. Skype, websites, MSN, Facebook were all mentioned as possible tools for making Grace even more accessible - both for potential and current service users and to maintain multi-agency working relationships with partner agencies. This may be particularly useful in reaching younger women in the county.

viii. Data collection should be improved to address the question of missing data in fields such as referral sources; greater clarity and consistent grouping of referral agencies around specific needs being addressed (e.g., mental health); age and reasons for being referred to Grace; and data about those women who take up the counselling offered to allow comparative analysis between these and those women referred to Grace, particularly in terms of age, reason for referral and referral source.
BIBLIOGRAPHY


Appendix A

Prevalence of Intimate Violence in the Last Year Among Adults aged 16 to 59, 2004/05 to 2009/10, BCS

<table>
<thead>
<tr>
<th></th>
<th>2004/05</th>
<th>2005/06</th>
<th>2006/07</th>
<th>2007/08</th>
<th>2008/09</th>
<th>2009/10</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Victims once or more</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sexual assault (any assault including attempts)</td>
<td>1.7</td>
<td>1.9</td>
<td>1.8</td>
<td>1.7</td>
<td>1.4</td>
<td>1.3</td>
</tr>
<tr>
<td>Serious sexual assault including attempts</td>
<td>0.3</td>
<td>0.4</td>
<td>0.3</td>
<td>0.4</td>
<td>0.3</td>
<td>0.2</td>
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<tr>
<td>Serious sexual assault excluding attempts</td>
<td>0.2</td>
<td>0.3</td>
<td>0.2</td>
<td>0.2</td>
<td>0.2</td>
<td>0.2</td>
</tr>
<tr>
<td>Rape including attempts</td>
<td>0.2</td>
<td>0.3</td>
<td>0.3</td>
<td>0.3</td>
<td>0.2</td>
<td>0.2</td>
</tr>
<tr>
<td>Rape excluding attempts</td>
<td>0.2</td>
<td>0.2</td>
<td>0.2</td>
<td>0.2</td>
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<tr>
<td>Assault by penetration including attempts</td>
<td>0.1</td>
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<tr>
<td>Assault by penetration excluding attempts</td>
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<td>Less serious sexual assault</td>
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(Smith et al, 2010)