

**Consultation  
Response Form**

Your name: Professor Simon Murphy

Organisation (if applicable):

**DECIPHer: Centre for the Development and Evaluation of Complex Interventions for Public Health Improvement**

DECIPHer brings together leading experts from a range of disciplines to tackle a range of public health issues, with a particular focus on developing and evaluating multi-level interventions that will have an impact on the health and wellbeing of children and young people.

**The School Health Research Network** This is led from DECIPHer and is a policy-practice-research partnership between Cardiff University, Welsh Government (both health and education), Public Health Wales and Cancer Research UK. Over a 6-year period SHRN has recruited all maintained secondary schools in Wales and established a data collection and reporting infrastructure that meets health and wellbeing data needs at local, regional and national levels.

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Question 1	<p>Do you agree or disagree that the proposed set of indicators, as a whole, fully assess whether progress is being made in achieving the Objectives outlined within the VAWDASV National Strategy?</p> <p><b>DISAGREE</b></p> <p>At present, we do not believe the Objectives, inclusive of their Indicators as they stand, will as a whole, fully assess whether progress is being made in achieving the Objectives outlined within the VAWDASV National Strategy. We explain our reasoning below.</p> <p><i>Limitations to current Objectives:</i></p> <p>Objectives 1 and 2: The limitations associated with the wording of Objectives 1 and 2 relate to the focus on 'increasing awareness'. Measuring an Objective with a subjective outcome such as</p>
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	<p>'increasing awareness', without the use of measurable, objective outcomes 1) limits not only the objectivity of the data, but 2) limits the comparability of data across time and context (e.g. in different areas or countries), and importantly 3) does not relate to any positive action or change. However, we note that given that Objective 1 relates to the prevention of VAWDASV, we are pleased to see that the Indicator 1 (Objective 1) relates to increased reporting (a more objective measure) of VAWDASV.</p> <p><i>Limitations of current Indicators:</i></p> <p>At present Indicator 1 excludes the reporting of rates of VAWDASV by Children and Young people (as defined by the consultation) under the age of 16. Children and Young people are unlikely to report VAWDASV to the police, and so at present the indicators neglect accurate reporting from Children and Young people. Indicators 1 and 2 in particular (and the indicators more generally) exclude the measurement of experiences of Children and Young People, despite the Objectives stating that they are across the whole Welsh population. The Indicators (1 and 2 especially) fail to acknowledge the wealth of evidence that shows young people experience abuse in their intimate relationships, as they are only included (and only as measures of awareness) in indicators 3 and 4. This is consistent with limitations in the legal definition of domestic abuse (despite the recent expansion of the term to include 16 and 17 year olds (Home Office 2015)), which reflects and reinforces a (mis)perception of VAWDASV as a problem only experienced in adult relationships. To improve both the Objectives, Indicators and Measures we strongly suggest the inclusion of the experiences of relationship violence of Children and Young People, including the use of reporting data directly from Children and Young People. The experiences of Children and Young people should be explicitly referred to in the Indicators in order to fully assess whether progress is being made to achieve the Objectives outlined in the VAWDASV National Strategy, especially as the experiences of Children and Young people are intrinsic to the overall objective of prevention as outlined in the strategy. We outline below how we can support the inclusion of and reference to Children and Young People more explicitly within the Indicators through the use of SHRN pupil data as a source to measure these.</p> <p>We agree that Indicators 3 and 4 should remain focused on Children and Young People (albeit with changes to wording of indicators and measures - please see comments in Questions 2 and 6) given the focus of the corresponding Objective 2. However, Children and Young People also need to feature more prominently throughout the entire set of Indicators.</p>
Question 2	<p>Are there any indicators proposed that you think can be improved? Please confirm you have used the template provided at Annex B</p>

We have used Annex B to outline our proposed improvements to the indicators, which we consider in detail below.

Indicator 1 should be reworded to include reporting of all forms of VAWDASV by Children and Young People as well as adults (see discussion of measures below in Question 6). We suggest alternative wording of: Increase in reporting of all forms of VAWDASV by children and young people and adults.

Indicators 3&4 focus on an increased awareness in Children and Young People. Awareness, as a subjective measure, is difficult both to conceptualise and measure (See Question 1); an objective measure would be improve the reliability and validity of the measure and the meaning of the Indicators. We suggest rewording Indicator 3 to incorporate more objective, measureable outcomes and objectives relating to action and responses to VAWDASV by Children and Young People. This rewording should be focused on CYP's knowledge and understanding of abuse rather than awareness and should also include propensity to take action against VAWDASV (through reporting to an appropriate adult for instance).

Indicator 4 poses similar challenges to Indicators 2 and 3 (and Objectives 1 and 2) given that it focuses on 'increased awareness' that abuse is always wrong. This raises similar challenges to those previously identified, in addition to the inadequacy of available data sources to measure 'awareness'. Given the measurement problems outlined in Question 6, we suggest rewording the Indicator to include a more objective statement describing young people's knowledge, understanding and action in response to abuse in relationships rather than awareness. Additionally, the indicators for Objective 2 should also explicitly refer to abuse in *all* relationships, not just romantic relationships. It is possible that Indicators 3 & 4 could be combined, and several outcomes measured via data from the SHRN survey. The indicator could be reworded as follows 'Increased knowledge and understanding of Children and Young People of all forms of abuse (physical and non-physical) in all types of relationships and increased confidence to seek help or take action'. Alternatively, there could be one indicator focusing on knowledge, understanding and experience of all forms of abuse in all types of relationships, and another indicator focusing on action and help-seeking behaviour of Children and Young People. We would propose that the three issues we have identified (1. Knowledge, understanding and action of VAWDASV (physical and non-physical) rather than awareness; 2. Knowledge, understanding and action of abuse in all types of relationships (e.g. familial, online, etc.) and; 3. Help-seeking behaviour) are separately considered in a list of corresponding Indicators under Objective 2.

Indicator 7 focuses on enabling equal access to & availability of effective, evidence based early interventions as means of making

early intervention and prevention a priority (Objective 4). However, children and young people are not explicitly included in this indicator and the measures are all adult-focussed. Given the importance of young people for prevention and early intervention, they should be explicitly included in the indicator and resulting measures. Our proposed measures are discussed in Question 6. Furthermore, there are two separate aspects to early intervention to consider in relation to Children and Young People: firstly, as children who witness and experience domestic violence within the home; and secondly as victims in their own intimate relationships. It is important that the indicator and resulting measures consider both aspects of early intervention and prevention in relation to Children and Young People.

Indicator 8 could be improved to explicitly name those 'relevant job roles' and refer to teachers and other school staff. Teachers and other school staff have an essential role in providing effective, timely and appropriate responses to Children and Young People experiencing abuse at home, and in their intimate relationships; they are the primary agency having contact with Children and Young People. It is also important to recognise groups of professionals in the legal and social care systems, and as such it would be advisable to be explicit here about who are included as relevant job roles for the purposes of the Indicator. As with other groups of professionals receiving training relating to VAWDASV, this may result in an increase in disclosures from staff members being trained (e.g. health professionals, as highlighted in A Cry For Health, SafeLives Report, 2016).

Indicator 9 is about ensuring access to appropriate support, but at present is only focused on adults and neglects any indication of support for victims aged under the age of 16. As discussed in reference to Indicator 7, Children and Young People should be explicitly included in the Indicators and resulting measures relating to interventions, particularly in relation to support provided for Children and Young People who witness domestic abuse within the home and experience VAWDASV in their own relationships. This is about early intervention and prevention in as much as it applies to Children and Young People (as per Indicator 7), but it also about ensuring equal access to high quality, needs-led services (as per Indicator 9) for Children and Young People experiencing VAWDASV, a current provision gap. The likelihood of Children and Young People experiencing high severity abuse is no different to adults (in fact levels of high severity abuse may be higher for younger age groups- see *Safe Young Lives*, SafeLives, 2017). Therefore, for victims younger than 16, who must rely on very limited specialist services for Children and Young People, the visibility of victims is likely to be even lower.

We also suggest that Indicator 9 could be improved through reference to not only the importance of receiving support but, rather

	<p>the quality, timeliness and effectiveness of the support (in line with corresponding Objective 6). The measure should then also reflect this quality appraisal. There are tools that services use to measure the quality and service-user satisfaction of their service that could possibly be used to measure the quality of service provision across Wales from a service-user perspective.</p>
<p>Question 3</p>	<p>Are there any indicators proposed that you think should be excluded?</p> <p>We do not believe that any Indicators be excluded, however we have outlined in Question 2 our suggested changes to the Indicators.</p>
<p>Question 4</p>	<p>Are there any other indicators that you think should be included? Please confirm you have used the template provided at Annex B</p> <p>We would propose the inclusion of another Indicator for Objective 2 “Increased awareness in children and young people of the importance of safe, equal and healthy relationships and that abusive behaviour is always wrong?” As outlined in Question 2, we believe that Indicators 3&amp;4 should relate more to young people taking action, rather than awareness. We have suggested rewording the Indicators to take account of this and to incorporate the point that follows. However, if (as is our preference) the issues relating to Children and Young People form separate Indicators, an additional Indicator should address the recognition of all forms of abuse and gender-based violence, not just the current focus of the Indicators which relate to romantic relationships. Thus, supporting the objective of “Increased awareness in children and young people of the importance of safe, equal and healthy relationships and that abusive behaviour is always wrong,” should entail a recognition that abuse is wrong in <i>any</i> relationship, whereby relationships do not exclusively mean romantic relationships. This could, as stated above, be achieved by rewording the existing indicators and adding relevant measures; however, a separate explicit reference to non-romantic relationships in relation to Children and Young People would be particularly helpful.</p>
<p>Question 5</p>	<p>How do you think we should communicate the national VAWDASV indicators with the people and communities of Wales?</p> <p>Relevant information should be available in Welsh Language (see answer to Question 9 below). Young People friendly resources should be used to communicate the Indicators to Children and Young People in order to make this information accessible to them. Indeed, all communications should be co-produced with survivors and Children and Young People to ensure they are clear, relevant and understandable by everyone in Wales. Creative methods of communicating the indicators, such as animation, poetry, art etc., should be considered as tools to communicate them to Children and Young People. DECIPHer has extensive experience of Public</p>

	<p>Involvement and co-production of resources with Children and Young People and would be well placed to support this work. Our ALPHA (Advice Leading to Public Health Advancement) group, consisting of young people aged 14-25, is already established and used by DECIPHer to help us ensure research tools and outputs are relevant to young people. ALPHA are skilled at advising on public health research and have been involved in several studies relating to sexual health and relationship violence. It is important that communication of the Indicators is accessible and relevant to Children and Young People, which should be achieved through meaningful co-production. We would also suggest working closely with the Office of the Children’s Commissioner for Wales to ensure that indicators are communicated appropriately to the Children and Young people of Wales. It may also be appropriate to work with the small numbers of Children and Young person’s Independent Domestic Violence Advocates (IDVA) services who are experts in talking with Children and Young People about abuse and violence in relationships and who are skilled in developing appropriate resources.</p>
<p>Question 6</p>	<p>Are the proposed measures appropriate for reporting against the proposed National VAWDASV indicators? No</p> <p>At present the proposed measures are not appropriate for reporting against the proposed National VAWDASV indicators.</p> <p>The measures for Indicator 1 focus exclusively on the increase in reporting by adults (as per the Home Office definition i.e. for those aged 16 and above), and fail to consider reporting rates for Children and Young People (under 16) who experience abuse in their own intimate relationships. While we acknowledge that the Objectives and Indicators follow the Home Office definition of Domestic Abuse which is limited to those aged 16 above, consistent with early prevention it is important to measure any increase or decrease in the numbers of Children and Young People below the age of 16 who identify and report abuse in their intimate relationships. Similarly, there are limitations with using only the reporting of crimes/incidents deemed significant enough to report to the Police, and often collected retrospectively (e.g. Crime Survey for England and Wales), rather than directly from young people themselves.</p> <p>We therefore propose an additional measure (1.4) using the School Health Research Network data collected by DECIPHer at Cardiff University (See Question 11) as the data source to measure the numbers of children and young people (aged 11-16) who report victimisation or perpetration of emotional or physical relationship abuse, experiencing sexual harassment (name calling and groping) or experiencing unwanted sharing of sexual images. The role of technology and social media in facilitating VAWDASV in Children and Young People’s relationships has been highlighted by recent research (Ringrose <i>et al.</i>, 2012), and it is important to recognise that</p>

this form of abuse is particularly relevant to Children and Young People's experiences of VAWDASV. This is not currently captured in any of the proposed measures.

It is also important that the measures for Indicator 1 do not focus exclusively on reporting of physical and sexual violence, and that they include the recording of non-physical forms of abuse such as harassment, emotional abuse and coercive control (as per the recent Home Office expansion of the definition), and economic abuse (as per Briefing Paper from the House of Commons Library, 2018). We suggest explicitly including measures of these forms of abuse from Police Recorded Crime Data in Measure 1.2 order to assess any progress against the Indicator which explicitly states *all* forms of VAWDASV.

Putting aside the practical problems of measuring 'awareness', the measure (Measure 2.1) for Indicator 2 only focuses on physical violence, limiting the definition of violence against women to physical acts such as hitting and slapping. Given the recent expansion of the Home Office definition of Domestic Abuse to include controlling and coercive behaviour, we feel the focus on awareness of the unacceptability of solely physical acts limits the extent to which this measure reports against the Indicator and should be in line with the Home Office definition of 'domestic violence,' but extended to those under the age of 16. We would propose the development of further research beyond the questions available in the Crime Survey for England and Wales to ensure not only awareness across different groups is measured, but also knowledge, attitudes, understanding and action about the different forms of abuse and VAWDASV beyond physical forms of violence.

Notwithstanding the limitations of measuring 'awareness,' at present Measure 3.1 only establishes the numbers of young people attending awareness sessions, which does not necessarily equate to an increase in awareness. We question what evidence there is to support the notion that attendance at these sessions equates to an increased awareness and understanding in children and young people. While this measure is perhaps useful to ascertain the numbers of Children and Young People attending sessions, the measure would benefit from some objective measure of youth participation and involvement in developing strategies to address VAWDASV (e.g. in schools and communities). For example, this may include the number of schools and ages at which young people receive education about safe, equal and healthy relationships, young people's reported help-seeking behaviour, or reported activism (e.g. via student voice groups) on topics relating to VAWDASV. The SHRN school environment questionnaire collects data from schools about the action schools take to address VAWDASV. Actions most commonly cited are staff education, working in partnership with relevant agencies and student education. In the most recent 2017

survey <10% of schools said they had used the active participation of students to address VAWDASV. Despite the current limited focus on measuring 'awareness' we also propose the inclusion of an objective measure of children and young people's help-seeking behaviour. For example, the SHRN questionnaire collects data on the number of children and young people who report they would speak to a member of staff at school if relationships violence was happening to them or anyone they know.

As with Measure 2.1, Measure 4.1 focuses exclusively on physical abuse. However, the recent expansion of the Home Office definition now includes controlling and coercive behaviour. Any measure of Indicator 4 should also measure young people's awareness that non-physical forms of abuse are also 'always wrong'. Similarly, in line with the limitation of the Home Office definition, the data source (Crime Survey for England and Wales) is problematic in that it only includes young people over the age of 16. The SHRN questionnaire collects data on experiences of emotional and physical dating and relationship violence victimisation and perpetration from the perspectives of children and young people aged 11-16 (we have already proposed as a data source for Indicator 1). We are open to the possibility of including an attitudinal measure relating to the acceptability of VAWDASV within the pupil survey given the lack of appropriate data available to adequately measure this indicator.

At present the Measures for Indicator 7 do not adequately address the experiences of Children and Young People. We propose the inclusion of a set of measures which focus on measuring the access to early interventions for children and young people, given the importance of this for VAWDASV prevention. This may include, for example, levels of service provision for Children and Young People (e.g. the relatively new and not widespread development of Children and Young People's IDVAs and a mapping of this provision) and the numbers of young people referred to and accessing (i.e. uptake of) appropriate support via these services. The SHRN School Environment Questionnaire explicitly measures whether schools have processes and/or referral pathways in place which aim to provide additional health and wellbeing support to students experiencing domestic abuse.

Measures 8.1 and 8.2 measure the numbers of professionals completing relevant training (e.g. LHBs, LAs, NHS Trusts and Fire and Rescue Services). The education sector does not however feature strongly enough in the measures or indeed wording of Indicator 8; for example, the inclusion of teachers and school staff. This is again about ensuring abuse in the relationships of children and young people is recognised and appropriately responded to the same extent as that of adults by ensuring professionals involved with Children and Young People are included. The SHRN school environment questionnaire collected by DECIPHer collects data on



the numbers of teachers trained in recognising the signs, taking appropriate action and responding to disclosures of VAWDASV, whether schools have written policies about how to appropriately and effectively respond to young people experiencing VAWDASV, and whether the school takes a whole school approach to address VAWDASV. The SHRN student questionnaire also collects data on whether young people perceive teachers are appropriately responding to VAWDASV. This data provides more objective measures of whether school staff are responding appropriately than measuring the number of professionals completing training.

Additionally, it is at present unclear whether professionals in the legal system (police, CPS, judiciary, etc.) and social care system are included within this indicator. These roles are involved in decisions that are made about contact with any alleged perpetrator and a lack of recognition or poor response from these professionals could lead to a perpetuation of abuse. Measures for this indicator should therefore ensure a breakdown by sectors of the numbers of professionals completing relevant training.

Measure 9.1 focuses primarily on adults accessing support via refuges or community based domestic abuse services and fails to measure the extent to which Children and Young People aged under 16 who are witnesses/victims of abuse are able to access and receive appropriate support. The measures as they stand also fail to address the quality and appropriateness of service provision provided for adults (as well as Children and Young People) (as per the objective and the indicator). Research has shown a lack of service provision for Children and Young People experiencing domestic abuse, as many IDVA support services only work with victims over the age of 16 and many interventions, such as Multi Agency Risk Assessment Conferenced (MARACs), only consider those aged over 16. There are some support services specifically aimed at supporting young people experiencing abuse in their relationships (e.g. Children and Young Person's IDVAs), therefore the level of this service provision, numbers of referrals and uptake of these limited services would be an appropriate additional measure of Indicator 9 (if not already used for indicator 7), as well as measure of 'quality'. In order to ensure that objective progress on this indicator is measured for all age groups, over time, the SHRN school environment questionnaire collects data from schools about the proportions of schools with referral pathways and/or additional support in place for those pupils who experience domestic abuse. In line with Indicator 7, this data as an additional measure would assist in monitoring progress in ensuring adequate referral pathways and access to support through schools for Children and Young People who experience VAWDASV.

Additional measures for indicator 9 could also include the numbers of calls to the All Wales Domestic Abuse and Sexual Violence Helpline, and a measure of the quality of service provision from the service

	<p>user's perspective, as well as quality in terms of 'outcomes' as highlighted above.</p>
<p>Question 7</p>	<p>Are there any known 'data gaps'?</p> <p>The main data gaps in the current proposal relate to the objective measure of experiences relating to VAWDASV directly from children and young people (i.e. not retrospective accounts). The SHRN data provides a key resource to fill this data gap with nationally representative, high quality data directly from children and young people in Wales. The student survey has collected data on Children and Young People's experience of dating and relationship violence perpetration and victimisation and help-seeking behaviour, as well as a staff survey exploring school policy and practice relating to VAWDASV. The survey's bi-ennial repeated cross sectional design provides the ability to examine change over time at schools, which is enhanced by the development of a longitudinal cohort design (i.e. to explore change over time at a pupil level). The survey also has a cohort of students whose pupil data is linked with routinely collected data, thus enabling the examination of the impact on service use and educational outcomes through linkage with routinely collected data. For several of the Indicators discussed, we highlighted the lack of measures relating to 'quality' and 'needs-led' assessment of service provision, therefore the opportunities for data linkage to assess key outcomes against the objectives are a significant data gap in the current proposal (e.g. routinely collected health and educational data) and should be fully explored. SHRN also provides the ability to evaluate school policy and practices in relation to pupil outcomes over time to ascertain effective approaches.</p> <p>In terms of additional data gaps, there is very little data on knowledge/attitudes in relations to VAWDASV, especially in relation to children and young people. Notwithstanding the conceptual challenges of using 'awareness' as an indicator and measure, this data gap makes the measurement of 'awareness' especially problematic.</p>
<p>Question 8</p>	<p>Are there any areas that would benefit from additional, research (i.e. outside the scope of this indicator framework)?</p> <p>Research evidence on effective early interventions (particularly preventative interventions for Children and Young People) is lacking. The development and evaluation of appropriate interventions aimed at children and young people in Wales provides a significant evidence base on which to prevent and reduce harm relating to VAWDASV. At DECIPHer we have several projects evaluating the impact of interventions intended to reduce young people's experiences of abuse in intimate relationships.</p>

	<p>Working with the domestic abuse, education and health sectors, additional research is needed to identify intervention and service provision gaps and develop appropriately resourced, high quality, needs-led, strength-based and gender responsive services specifically for Children and Young People in Wales. In education more work is required in schools to support policy development, safeguarding and the delivery of the whole school approach to address VAWDASV. Appropriately resourced evaluation of these interventions are needed to ensure evidence-based development of appropriate and effective interventions, particularly within the education setting.</p> <p>Furthermore, research shows that the cycle of violence can perpetuate: Children and Young People may experience and witness DVA in the home, prior to ever being victimised or perpetrating DVA in a romantic relationship, so we need to promote positive and healthy relationships early. We have suggested that Indicators recognise all forms of abuse in all relationships, but there is more research needed here in terms of a high-quality evidence base for intervention development and evaluation of interventions that support Children and Young People exposed to, and experiencing, VAWDASV.</p>
<p>Question 9</p>	<p>We would like to know your views on the effects that Draft National Indicators would have on the Welsh language, specifically on opportunities for people to use Welsh and on treating the Welsh language no less favourably than English. What effects do you think there would be?</p> <p>How could positive effects be increased, or negative effects be mitigated?</p> <p>To ensure equal opportunities for people to use Welsh, the translation of key materials in relation to the Draft National Indicators and their communication is essential. Any relevant service providers should be supported in this translation process so as not to exclude key, high quality providers because they do not offer services or materials in Welsh.</p>
<p>Question 10</p>	<p>Please also explain how you believe the proposed Draft National Indicators could be formulated or changed so as to have positive effects or increased positive effects on opportunities for people to use the Welsh language and on treating the Welsh language no less favourably than the English language, and no adverse effects on opportunities for people to use the Welsh language and on treating the Welsh language no less favourably than the English language.</p> <p>See response to Question 9 above.</p>

Question 11	<p>We have asked a number of specific questions. If you have any related issues which we have not specifically addressed, please use this space to report them:</p> <p>Please enter here:</p> <p>We have indicated several concerns about the inclusion of the experiences of Children and Young People in the objectives, indicators and measures. In some places, we have suggested data collected by DECIPHer's School Health Research Network (SHRN) survey may help to address some of these gaps to provide some data regarding children and young people's experiences of VAWDASV. The School Health Research Network (SHRN) is a partnership between Cardiff University, Welsh Government, Public Health Wales and Cancer Research UK. All maintained secondary and middle schools in Wales are members of SHRN and are invited to take part in a Student Health and Wellbeing Survey and complete a School Environment Questionnaire every two years. The surveys are developed collaboratively by the SHRN partnership and are responsive to policy, practice and research data needs. In 2017, 103,971 students aged 11 to 16 years from 193 schools took part in the student survey and 161 schools returned an environment questionnaire. The nationally representative student data is used for regional and national health surveillance, policy monitoring and evaluation, local health action planning and research. The survey also has a cohort of students whose pupil data is linked longitudinally, and another cohort whose data is linked with routinely collected data, thus enabling the examination of the impact on service use and educational outcomes through linkage with routinely collected data. The opportunities for data linkage to assess key outcomes against the objectives are a significant data gap in the current proposal (e.g. routinely collected health and educational data) and should be fully explored. More information on SHRN can be found on the website <a href="http://www.shrn.org.uk">www.shrn.org.uk</a></p>
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Responses to consultations are likely to be made public, on the internet or in a report. If you would prefer your response to remain anonymous, please tick here:

Annex B: Please use this template if you wish to amend a proposed indicator, if you wish to replace one of the proposed indicators or propose an additional indicator. (complete one form per indicator)

<p>Is the proposed indicator a replacement indicator or an improvement to an existing indicator? Please tick one box:</p> <p>Replacement <input type="checkbox"/>      *Improvement <input type="checkbox"/>      New <input checked="" type="checkbox"/></p> <p>*Improvement can include changes to proposed measures or additional/changes to data sources</p>
<p>Which indicator does this proposed indicator improve upon or replace?</p> <p>The issues with Indicators 3&amp;4 were highlighted above in terms of the problems associated with measuring 'awareness' and the focus on physical abuse which is implicit as a result of the measure used to assess Indicator 4. We have suggested above (and below) some changes to these Indicators, including the possibility of combining the indicators, or to (preferably) introduce separate clear indicators relating to Children and Young People. We would propose that the three issues we have identified (1. Knowledge, understanding and action of VAWDASV (physical and non-physical) rather than awareness; 2. Knowledge, understanding and action of abuse in all types of relationships (e.g. familial, online, etc.) and; 3. Help-seeking behaviour) be separately considered in a list of corresponding Indicators. This would entail the addition of an Indicator under Objective 2. Alternatively, if the Indicators under Objective 2 are not improved/combined to include knowledge, understanding and awareness of <i>all</i> forms of abuse in <i>any</i> relationship, then we propose an additional indicator relating to Objective 2 as below.</p>
<p>What is the name of replacement or new indicator?</p> <p>Increased knowledge and understanding of, and action against, all forms of abuse (physical, sexual and emotional) in <i>any</i> kind of relationship (family, peer, romantic or otherwise).</p>
<p>What is the proposed measure(s) for the replacement indicator?</p> <p>The data source below collects several data points relating to Children and Young People's experiences of abuse which could be used as potential measures of young people's understandings and actions in relation to VAWDASV.</p>
<p>What is the data source for this Measure?</p> <p>SHRN Pupil Data collected by DECIPHer (Cardiff University)</p>

Which one of the 6 VAWDASV National Strategy Objectives does the proposed replacement, improvement or new indicator report against?

Objective 2

Please provide an explanation for why this indicator best measures the Objective of the Violence against Women, Domestic Abuse and Sexual Violence National Strategy in line with the criteria identified in Section 3.

The indicator should refer to a more tangible concept than 'awareness' and should explicitly recognise all forms of abuse beyond romantic relationships.

Is the proposed indicator a replacement indicator or an improvement to an existing indicator? Please tick one box:

Replacement  \*Improvement  New

\*Improvement can include changes to proposed measures or additional/changes to data sources

Which indicator does this proposed indicator improve upon or replace?

Indicator 1

What is the name of replacement or new indicator?

N/A

What is the proposed measure(s) for the replacement indicator?

Children and Young People's experiences of VAWDASV

What is the data source for this Measure?

SHRN pupil data collected by DECIPHer (Cardiff University)

Which one of the 6 VAWDASV National Strategy Objectives does the proposed replacement, improvement or new indicator report against?

Objective 1

Please provide an explanation for why this indicator best measures the Objective of the Violence against Women, Domestic Abuse and Sexual Violence National Strategy in line with the criteria identified in Section 3.

Indicator 1 should be reworded to include reporting of all forms of VAWDASV by Children and Young People and adults. This would recognise the wealth of evidence that shows Children and Young People below the age of 16 experience VAWDASV and including a measure of this would enable prevalence rates (of victimisation and perpetration of all forms of abuse using the SHRN survey) to be monitored.

Is the proposed indicator a replacement indicator or an improvement to an existing indicator? Please tick one box:

Replacement  \*Improvement  New

\*Improvement can include changes to proposed measures or additional/changes to data sources

Which indicator does this proposed indicator improve upon or replace?

As stated in Question 2 above, we feel Indicators 3&4 need to refer to more objective, measurable outcomes and objectives relating to action and responses to VAWDASV by Children and Young People. This rewording should be focused on CYP's knowledge and understanding of abuse rather than awareness and should also include propensity to take action against VAWDASV. We have suggested in Question 2 (and in Annex B above) rewording for indicators 3 and 4 to include tangible actions and all abuse in all types of relationships (and all forms of abuse), and also the possibility of combining the indicators to capture all these issues. However, we have also proposed the possibility of an additional indicator to clearly separate out these issues and enable them to be measured/monitored (see Annex B above).

What is the name of replacement or new indicator?

Indicators 3&4 could be reworded as follows 'Increased knowledge and understanding of Children and Young People of all forms of abuse (physical and non-physical) in all types of relationships and increased confidence to seek help or take action'. Alternatively, there could be one indicator focusing on knowledge, understanding and experience of all forms of abuse in all types of relationships, and one indicator focusing on action and help-seeking behaviour of Children and Young People.

What is the proposed measure(s) for the replacement indicator?

As stated above, there are several data points of the SHRN survey that could be used to measure progress against these indicators, including children and young people's perceptions and recognition of VAWDASV (all forms) amongst peers and their help-seeking behaviour.

What is the data source for this Measure?

SHRN pupil and school level data collected by DECIPHer (Cardiff University)

Which one of the 6 VAWDASV National Strategy Objectives does the proposed replacement, improvement or new indicator report against?

Objective 2

Please provide an explanation for why this indicator best measures the Objective of the Violence against Women, Domestic Abuse and Sexual Violence National Strategy in line with the criteria identified in Section 3.

We have stated throughout the problematic nature of 'awareness' as an indicator due to conceptual issues and difficulties in identifying appropriate data sources to measure this. Indicators therefore need to be more focused on experience, behaviours and actions of Children and Young People in relation to VAWDASV.

Is the proposed indicator a replacement indicator or an improvement to an existing indicator? Please tick one box:

Replacement  \*Improvement  New

\*Improvement can include changes to proposed measures or additional/changes to data sources

Which indicator does this proposed indicator improve upon or replace?

Indicator 7

What is the name of replacement or new indicator?

Rewording to include Children and Young People and adults

What is the proposed measure(s) for the replacement indicator?

Level of service provision for Children and Young People who a) witness domestic abuse in the home and b) experience VAWDASV in their own relationships. In addition, the level of engagement and numbers of Children and Young People referred and then accessing these services should also be measured. Some measure of effectiveness of the intervention(s) would also be preferable.



What is the data source for this Measure?

It is possible that services could directly report their referral and engagement figures to ascertain the numbers of Children and Young People accessing support.

SHRN pupil and school level data collected by DECIPHer (Cardiff University) could possibly support this measure. We have suggested above that the numbers of schools reporting support and referral pathways for Children and Young People experiencing domestic abuse (as witnesses or victims) from the SHRN school environment questionnaire could be a useful starting point for measuring the availability of appropriate referral routes from young people over time.

Which one of the 6 VAWDASV National Strategy Objectives does the proposed replacement, improvement or new indicator report against?

Objective 4

Please provide an explanation for why this indicator best measures the Objective of the Violence against Women, Domestic Abuse and Sexual Violence National Strategy in line with the criteria identified in Section 3.

The Objective focuses on making early intervention and prevention a priority. Interventions that focus on Children and Young People are very important aspect of this, given what we know about the cycle of violence and the exposure to and experience of VAWDASV in childhood and early adolescence. Ensuring that Children and Young People are explicitly referred to in the Indicator of this objective is therefore crucial and will ensure that appropriate measures are developed to monitor the levels of availability of and access to early interventions for Children and Young People.

Is the proposed indicator a replacement indicator or an improvement to an existing indicator? Please tick one box:

Replacement  \*Improvement  New

\*Improvement can include changes to proposed measures or additional/changes to data sources

Which indicator does this proposed indicator improve upon or replace?

Indicator 8

What is the name of replacement or new indicator?

Given the importance of education professionals to the support of Children and Young People experiencing VAWDASV, we feel that this group of professionals should feature more explicitly in the Indicator. The Objective 5 refers to relevant

professionals that provide support to victims, and for Children and Young People this will be school staff. The indicator wording focuses on staff being trained to recognise and appropriately respond but should also consider whether staff *are* recognising and responding appropriately as training does not necessarily correspond to action.

What is the proposed measure(s) for the replacement indicator?

As discussed above, the numbers of Children and Young People from SHRN data who perceive school staff to be recognising and responding to VAWDASV would ensure the indicator and the measures are more Children and Young People focussed, and objective. This measure could be used in combination with the SHRN measure of whether school staff *feel* appropriately trained to effectively respond would be more useful than a measure of the number of professionals trained.

What is the data source for this Measure?

SHRN pupil and school level data collected by DECIPHer (Cardiff University)

Which one of the 6 VAWDASV National Strategy Objectives does the proposed replacement, improvement or new indicator report against?

Objective 5

Please provide an explanation for why this indicator best measures the Objective of the Violence against Women, Domestic Abuse and Sexual Violence National Strategy in line with the criteria identified in Section 3.

Throughout we have highlighted that the experiences of VAWDASV by Children and Young People need to be more prominent in the wording of the Indicators and the resulting measures. The training of school staff to recognise and respond to VAWDASV is vital to ensure Children and Young People are identified and able to access appropriate support. At present, education professionals and the specific training they receive (and the actions this may result in) do not feature strongly enough in the indicator, given their central role in providing timely support and responding to VAWDASV experienced by Children and Young People.

Is the proposed indicator a replacement indicator or an improvement to an existing indicator? Please tick one box:

Replacement  \*Improvement  New

\*Improvement can include changes to proposed measures or additional/changes to data sources

Which indicator does this proposed indicator improve upon or replace?

Indicator 9

What is the name of replacement or new indicator?

This Indicator needs to explicitly refer to the support received by Children and Young People who experience VAWDASV (as witnesses in the home or victims in their own relationships). We would also suggest including 'high quality' in the wording of this indicator to ensure it meets the objective.

What is the proposed measure(s) for the replacement indicator?

See response in Annex B for Indicator 7. Some measure of service user satisfaction or quality (in relation to outcomes) will be needed here for adults (and Children and Young People) accessing VAWDASV services

What is the data source for this Measure?

Service-level reports (potentially SafeLives Insights data could be a useful starting point for assessing quality/outcomes).

Which one of the 6 VAWDASV National Strategy Objectives does the proposed replacement, improvement or new indicator report against?

Objective 6

Please provide an explanation for why this indicator best measures the Objective of the Violence against Women, Domestic Abuse and Sexual Violence National Strategy in line with the criteria identified in Section 3.

Indicator 9 is about ensuring access to appropriate support, but at present is only focused on adults and neglects any indication of support for victims aged under the age of 16. As discussed in reference to Indicator 7, Children and Young People should be explicitly included in the indicator and resulting measures, in relation to support provided for Children and Young People who witness domestic abuse within the home and experience VAWDASV in their own relationships. This is important because the Objective explicitly refers to 'equal access' and 'appropriate responses': the lack of provision for Children and Young People compared to adults is a significant equity issue that needs to be addressed, and the type of provision that is

'appropriate' is significantly different to the type of intervention that would be considered appropriate for adults.

We also suggest that Indicator 9 could be improved by reference to not only the importance of receiving support but, rather the quality, timeliness and effectiveness of the support (in line with Objective 6). The measure should then also reflect this quality appraisal.