

ORIGINATOR: POLICY OFFICER

DECISION NO. 43 - 2014

REASON FOR SUBMISSION: FOR DECISION

SUBMITTED TO: POLICE AND CRIME COMMISSIONER (PCC)

SUBJECT: VICTIMS' SERVICES GRANT FUND -- SUFFOLK
REFUGEE SUPPORT

SUMMARY:

1. In October 2014 the PCC assumed responsibility for commissioning of victims' services. The PCC's key objective is to deliver effective victims' services to all Suffolk victims of crime according to their needs and regardless of their geographic location or any other factor.
2. This report seeks approval for the award of a Victims' Services Grant to Suffolk Refugee Support in support of a project to address the risk and effects of Female Genital Mutilation (FGM) in Suffolk.

RECOMMENDATION:

It is recommended that:

1. The PCC approves a grant of £3,000 to Suffolk Refugee Support for the period January 2015 to March 2015.
2. That the grant is funded from the PCC's Victims' Services Grant Fund.

APPROVAL BY: ~~PCC~~ *Chief Executive on behalf of the PCC.*

The recommendation is agreed.

Signature



Date 23 December 2014.

DETAILS OF THE SUBMISSION

1 INTRODUCTION

- 1.1 In October 2014 the PCC assumed responsibility for commissioning victims' services. The PCC's key objective is to deliver effective victims' services to all victims of crime according to their needs and regardless of their geographic location or any other factor. The plans for commissioning of services for victims of domestic violence and abuse have therefore taken place against this backdrop.
- 1.2 The purpose of this paper is to recommend a grant be made to Suffolk Refugee Support to support a project addressing the risk and effects of Female Genital Mutilation (FGM) in Suffolk.

2 POLICE AND CRIME PLAN OBJECTIVES

- 2.1 Following the issue of the Police and Crime Plan 2013-2017, work has been on-going to develop a delivery plan to ensure that the Police and Crime Objective and the Plan's principal themes will be achieved.
- 2.2 Within the Police and Crime Plan the PCC sets out a clear commitment to providing services that meet the needs of victims of crime and vulnerable people.
- 2.3 Since the publication of the plan the PCC has engaged extensively to pursue the ambitions set out within the Plan, including the provision of high quality services to victims and ensure a joined up approach to prevent and respond to domestic violence and abuse including 'honour' based violence, female genital mutilation (FGM) and forced marriage.

3 SUFFOLK REFUGEE SUPPORT

- 3.1 Suffolk Refugee Support is a local charity based in Ipswich serving Refugees and Asylum Seekers in Suffolk. The charity supports individuals who have been forced to flee the atrocities taking place in their home countries to become fully functioning members of UK society.
- 3.2 The grant will be used to help fund a project aiming to tackle the issue and risk of Female Genital Mutilation in Suffolk, tackling the risk of this offence and providing pathways to support for victims. The project will address the issue amongst refugees, asylum seekers and members of at-risk ethnic minority communities, develop increased safeguarding against this illegal practice, and increase support for women and girls who have been victims of it.
- 3.3 The proposed project will assist towards meeting key aims of the Police and Crime Plan for Suffolk 2013-17: 'Preventing and Reducing Crime' and 'Caring for Victims and Vulnerable People'. The project will provide support to victims and their families and build capacity and capability.
- 3.4 Funding from the PCC will specifically be targeted at initial research and community engagement to be delivered between January and March 2015. More information on the proposed activity to be delivered with the funding from the PCC can be found in Appendix A. An outline of the complete project can be found in Appendix B.

4 OUTPUTS/OUTCOMES

- 4.1 In common with the PCC's policy for determining Crime and Disorder Reduction Grants, Victims' Services Grants will be awarded only where there is a robust business case which clearly sets out the success criteria (e.g. intended outcomes,

milestones, risks, etc.) and how the initiative for which funding is sought will deliver clear and measurable outcomes against the PCC's Police and Crime Plan objectives.

- 4.2 The PCC funding will be used to fund a project staff member to work with communities and focus groups as well as covering the cost of the focus groups. The work will develop and work with focus groups to inform the approach of the project.
- 4.3 The PCC would like to see evidence of work towards establishing the extent of FGM in Suffolk through partnership work with Public Health and through working with the community. Through community engagement, Suffolk Refugee Support will research cultural attitudes and prevalence of FGM within communities in Ipswich as well as possible discussions with victims.
- 4.4 The intended outputs and outcomes are set out below.
 - Establish 2 focus groups (one male, one female) to develop approach to community engagement and victim support.
 - Undertake initial community engagement to discuss approach to safeguarding, attitudes and victims
 - Undertake research with professionals to map service provision, pathways and gaps regarding FGM.
 - Conclude initial research and produce a report in order to inform project progression and contribute towards a wider understanding of FGM in Suffolk.
- 4.5 The grant award will be made on the basis that monitoring information will be supplied to enable the PCC to develop an understanding of demand and impact of the grant. Suffolk Refugee Support will keep the PCC informed of progress with the project following the completion of the initial activity funded by the PCC.

5 MISCELLANEOUS CONDITIONS OF AWARD

- 5.1 Full 'Conditions of Award' including conditions relating to transfer of funds, monitoring, and publicity and marketing are specified separately but include the following.
- 5.2 This award is a one-off award and is made on the condition that Suffolk Refugee Support uses the grant for the purposes described. In the event that the grant is not used for these purposes the monies must be repaid to the PCC.
- 5.3 Payment of the award does not confer any ongoing obligation by the PCC to make payments beyond the grant period to Suffolk Refugee Support.
- 5.4 Suffolk Refugee Support must be able to demonstrate that they are managing the grant in an efficient and effective manner, and are actively seeking to minimise bureaucracy and streamline processes in order to deliver the best possible outcomes.
- 5.5 Suffolk Refugee Support will formally report on progress including financial monitoring and the outputs/outcomes of the project. An end of year report on the award of grants and outcomes shall be submitted to the PCC on or before 14 April 2015.
- 5.6 Suffolk Refugee Support must notify the PCC as soon as reasonably practicable if the organisation ceases operation, the project does not go ahead, or if an underspend is forecast. All underspends must be returned to the PCC.

- 5.7 By accepting the award from the PCC, Suffolk Refugee Support makes a commitment to acknowledge the PCC's support publicly and must acknowledge their funding from the PCC in all promotional work.
- 5.8 Suffolk Refugee Support shall ensure that third party recipients have adequate insurance coverage (including but not limited to public liability insurance) in place and shall provide evidence of such insurance to the PCC on request.
- 5.9 The PCC accepts no liability to Suffolk Refugee Support or any third party recipients for any costs, claims, damage or losses, however they are incurred, except for to the extent that they arise from personal injury or death which is caused by the PCC's negligence.
- 5.10 Suffolk Refugee Support agrees to indemnify the PCC for any costs, claims, damages or losses which arise as a result of negligence by Suffolk Refugee Support or out of any breach of any of the conditions of award.

6 FINANCIAL IMPLICATIONS

- 6.1 It is proposed to award a grant of £3,000 for the period 1 January - 31 March 2015. The grant will support the first three months of the project, pay for a member of staff working 14 hours a week for 10 weeks, focus group expenses, community engagement and research.
- 6.2 The funding will be allocated from the Victims' Services Grant Fund.
- 6.3 To complete the project, Suffolk Refugee Support have secured additional funding from the Rosa Grant Giving Fund (£5,000) which is being matched by £5,000 by Suffolk Refugee Support. Further support for the project is being sought from Public Health.

7 OTHER IMPLICATIONS AND RISKS

- 7.1 There are no direct human resources implications or risks arising from the consideration of this report.

8 RECOMMENDATIONS

- 8.1 It is recommended that:
 - 8.1.1 The PCC approves a grant of £3,000 to Suffolk Refugee Support.
 - 8.1.2 The grant is funded from the Victims' Services Grant Fund.

ORIGINATOR CHECKLIST (MUST BE COMPLETED)	PLEASE STATE 'YES' OR 'NO'
Has legal advice been sought on this submission?	YES
Has the Chief Finance Officer been consulted?	YES
Have equality, diversity and human rights implications been considered including equality analysis, as appropriate?	YES
Have human resource implications been considered?	YES - NONE
Is the recommendation consistent with the objectives in the Police and Crime Plan?	YES
Has consultation been undertaken with people or agencies likely to be affected by the recommendation?	YES
Has communications advice been sought on areas of likely media interest and how they might be managed?	YES
Have all relevant ethical factors been taken into consideration in developing this submission?	YES

In relation to the above, please ensure that all relevant issues have been highlighted in the 'other implications and risks' section of the submission.

APPROVAL TO SUBMIT TO THE DECISION-MAKER

Chief Executive

I am satisfied that relevant advice has been taken into account in the preparation of the report and that this is an appropriate request to be submitted to the Police and Crime Commissioner.

Signature:



Date

22/12/2014.



Request for funding to Address the risk and effects of Female Genital Mutilation (FGM) in Suffolk, mainly Ipswich.

Supplementary information regarding PCC Funding (for delivery of initial research)

Amount requested from PCC: £3000

Timeframe: Funding to be spent at project start, between Jan-Mar 2015

Outputs for this funding and timeframe:

- Establish 2 Client Focus Groups: A Women's Group and a Men's Group. Initial meetings to start to develop approach for community engagement and victim support. Also initial input for training materials.
- Initial Community Engagement: Discussions held with SRS Existing groups including Women's groups regarding approach to safeguarding, attitudes and victims.
- Initial research with Professionals in Suffolk to map service provision, pathways and gaps regarding FGM. To include work with Police, Social Care, Education and Health professionals.

Budget for PPC Funding

Project Budget Item	Total Jan-Mar 2015
Staff Member working 14 hours a week at £13 an hour for 10 weeks. Salary + ENIC	£2150
Expenses and small remuneration for Focus Group members time. 2 Focus Groups x 15 members = 30 payments of £10	£300
Initial community engagement and research with Women's groups	£100
Management supervision and input, and Office Overheads inc. Phone, PC use and desk space.	£450
Amount Requested from PCC Funding	£3000

Funding for this project is being sought from The Rosa Grant giving Fund for £5,000 and we are match funding from our own funds with £5000, bringing the total project funding to £13,000. We are also seeking potential funding from other sources, to potentially extend and develop the timescale and scope of the project further.

We would like to request £3000 from PCC Funding to fully fund this project and enable us to start by January 2015.



Our request for funding to Address the risk and effects of Female Genital Mutilation (FGM) in Suffolk, mainly Ipswich.

Suffolk Refugee Support are seeking funding for a project Aiming to tackle the issue and risk of Female Genital Mutilation in Suffolk amongst refugees, asylum seekers and members of at-risk ethnic minority communities, to develop increased safeguarding against this illegal practice, and increase support for women and girls who have been victims of it. This will assist towards meeting key aims of the Police and Crime Plan for Suffolk 2013-2017; 'Preventing and Reducing Crime' and 'Caring for Victims and Vulnerable People'.

The main objectives of this project are:

- 1) To use our existing excellent links and relationships with the refugee community in Ipswich to raise awareness of risk, practices and illegality, and ultimately change attitudes and build opposition to FGM practices within their own communities to reduce risk to girls in the UK or being taken out of the UK for the practice.
- 2) To promote and develop pathways to support for women and girls who have been victims of FGM including counselling, medical intervention and peer support.
- 3) To identify training needs, and raise levels and knowledge of issues of FGM amongst professionals in Suffolk (police, social care, education, child services, health workers, GPs, midwives, children's centres, community workers etc) and ensure the development of procedures needed for an adequate referral process for child safeguarding, reporting, counselling and medical intervention required.

The Need for this work, and how it has been identified

There may be increasing numbers of existing victims of FGM moving to Ipswich and Suffolk, needing support or medical care. Suffolk Refugee Support has operated in Ipswich since 1999 and has developed excellent links with the refugee communities here, supporting an average of 600 refugees and asylum seekers each year. Suffolk Refugee Support has evidence some of our refugee and asylum seeking clients have been victims of FGM in their countries of origin. There are an estimated 1000-2000 Iraqi Kurds living in Ipswich, comprising 50% of our client group. Recent research has shown that up to 80% of Kurdish girls in Iraq may be victims of FGM

http://www.stopfgmkurdistan.org/html/english/fgm_study.htm.

We also have clients from other nationalities including Eritreans, Nigerians, Sudanese, Egyptians and Somalis. As Ipswich is a growing dispersal area for asylum seekers, we could potentially see clients from other FGM countries too. We know that some of our Kurdish clients as well as Eritrean and Nigerian women we work with have been victims of FGM.

There may be increasing numbers of girls at risk of becoming a victim of FGM. Suffolk Refugee Support has already made referrals for safeguarding children we believe were at risk of FGM practice in the UK. As a result of two workshops delivered to our International Women's Group, two women disclosed that they had been subjected to FGM practice as children. The issues were known about by many, and including the men spoken to at our Men's group. The sessions were well-received and highlighted the need to discuss these issues among the refugee and asylum seeking population of Ipswich. We are especially concerned about young single mothers with daughters who are vulnerable to the pressure from community members to have their daughters cut and will set up a self-managed support group for women if they express the need for this. We recently held a session on FGM delivered by Bal Howard from Suffolk Constabulary. This resulted in disclosures from two women and a referral to Suffolk Social Services for one of these women as she has a young daughter who is in danger of being a victim of this practice

Research data indicates girls are usually cut around the age of five and most people believed FGM was practiced for traditional, religious or social reasons. Complications to girls and women being victims of FGM may include infection, lifelong pain, internal injuries, complications during childbirth, pain during sexual intercourse or even bleeding to death; medical intervention is often needed afterwards.

Suffolk has a general population of 9% foreign born with a minority ethnic mix including people from FGM practising countries, and there may be girl infants or children at risk of FGM within these families.

Suffolk Refugee Support are aware of a lack of knowledge or clear protocol amongst professional regarding FGM practices, safeguarding risk, medical and mental implications for victims and a lack of procedures for referrals and managing risk.

The only training being delivered in Suffolk to non-health professionals regarding FRM is that delivered by Bal Howard of Suffolk Constabulary on an ad hoc basis. Discussions with her have revealed the need to extend her limited training resources in order to reach a wider audience of professionals and community members.

We have investigated teachers' in primary and secondary schools in Ipswich awareness of FGM to reveal that they are not aware of the risks and issues of FGM amongst their pupils despite Suffolk being 9% foreign born with a minority ethnic mix including people from FGM

practicing countries. Many of these are arriving under the asylum process and are clients of Suffolk Refugee Support already.

There are areas where Social Services staff have showed a lack of understanding of the issues and sensitivities involved with FGM; when trying to report a safeguarding concern, we were asked if FGM were the child's initials.

Multiple Disadvantages faced by Refugees and Asylum seekers

" Refugees and asylum seekers are a diverse group, with one thing in common; they are subject to forced migration, and are fleeing from persecution in their countries of origin. (*Aspinall and Watters, 2010, Uni of Kent, Equality and human rights commission research report series*)

Refugees and Asylum seekers face multiple disadvantages including;

- A 'culture of mistrust' towards asylum seekers in the UK, not helped by the media;
- Difficulties in accessing health care provision; there is uncertainty among service providers about asylum seekers' eligibility for secondary healthcare, which has resulted in concerns about the health of this population group, particularly during pregnancy. There is also low take-up of preventative healthcare measures, especially for women.
- Mental health problems, including post traumatic stress disorder (PTSD), depression and anxiety and low provision of specialist mental health services in Suffolk
- Education for refugee children is often hindered by dispersal, residential instability, financial difficulties and language issues.
- There are low levels of labour market participation among refugees,
- Asylum seekers are vulnerable to poverty because of the complexity of their casework.
- Issues of community integration and cohesion issues may result in higher incidences of harassment and assault.

Benefits and Outcomes as a result of this project

- Members of Suffolk's refugee community, Kurdish and other at risk nationalities, both men, women and community leaders, will have increased awareness of the medical and social impact of FGM practices, and that FGM is illegal in the UK or for girls to be taken out of the country for FGM. Communities will discuss attitudes and develop a stronger objection to FGM and increased willingness to report girls at risk.
- Women who have been victims of FGM will be more knowledgeable about where to seek medical and mental support. This will include a peer support group for women if numbers of disclosures are high, to ensure access to appropriate support, counselling and medical intervention where required or to support each other in resisting the practice for their own children.
- Professionals in health, education, social care and police will, as a result of the project training and our new Suffolk-based leaflets, be more aware of FGM practices,

risks and signs amongst their client / pupil groups. They will all be aware of the referral phone number and referral procedures.

- A strict protocol for reporting child safeguarding concerns will be developed and followed by all Social Services and the police in Suffolk, which is accessible to anyone with concerns.
- There may be increased numbers of referrals to Social Services/ police in Suffolk regarding infants or girls at risk of being victims of FGM, and increased numbers of disclosures from those who have been victims. This will result in increased safeguarding and support for victims.

Delivery of the Project and Measuring Impact

A FGM Project Manager (14 hours a week for 10 months) will manage the project, and will conduct initial research, promote and develop the project and ensure appropriate impact assessment measures are developed and monitored throughout the project lifecycle. An end of project evaluation report will also be written.

Work with At-Risk Communities;

- We will deliver a minimum of 4 two-hour community workshops to members of at-risk communities to provide guidance, support and awareness-raising. Existing community groups and leaders will be identified through our existing contacts and will include the African Women's Support Group and Kurdish women's groups.
- Levels of existing knowledge and attitudes will be recorded through group discussions and questionnaires at the start and end of the project. Any positive or negative impacts of the workshops will also be investigated.
- We will develop and distribute X1000 a community leaflet on FGM, linking it with Islamic teaching – to counteract some beliefs that FGM is an Islamic teaching. We work with JIMAS – a Muslim charity in the UK, its headquarters is based in Ipswich. It produces pamphlets, videos, classes, provides speakers, and holds conferences [on Islam](#), and we will involve them in the production of a community leaflet and promotion of the project to their community contacts.

Support for Victims and those at risk of being victims

- Any disclosures and referrals made as a result of the project workshops will be recorded.
- Counselling sessions when appropriate for victims will be facilitated using local mental health services.
- All women who participate in workshops will be more aware of support and medical help available to women who have been victims of FGM.

Training for Professionals;

- Baseline research will be completed; Research interviews with social workers, teachers, police and health professionals will ascertain the current awareness and

knowledge levels of FGM and reporting procedures. This will also determine the level of training and information needed and shape the development of the training we deliver.

- We will produce a Suffolk-based information leaflet for professional stakeholders regarding FGM practices, signs, and risks. The leaflet will also include referral procedures and phone number for any concerns amongst patient / pupil groups. We will distribute 1000 Information leaflets to every teacher (primary and secondary), GP, health visitor and social worker in Ipswich.
- Promotion and delivery of a minimum of 4 half-day training sessions for professionals by Bal Howard from Suffolk Police. Bal Howard is fully supportive of the project we are proposing and will play an integral part in the delivery of it. We will include Training on FGM, Risk and Reporting Procedures and also include the issues of forced marriage and honour based violence in the training sessions. We have good working relationships with many of the GP surgeries, health services (including Terrence Higgins Trust and Suffolk Marginalised Adults Health Team) and health visitors and Suffolk Social Care teams. They often refer to us for expert advice on dealing with refugee and asylum seeking individuals and families. We will also promote and deliver our training to Education and Police professionals.
- We will develop delivery of training sessions with Social Work and Nursing degree students from courses at University Campus Suffolk (UCS), building on our previous teaching on these courses.
- The number of referrals to Social Services/ police in Suffolk will be monitored to measure if numbers increase after distribution of the leaflet and delivery of the training.

Budget for the full project, and Amount Requested

Project budget item	Total
Staff member working 14 hours a week at £13 an hour for 43 weeks (10 months) Salary + ENIC	£8,600
Production and distribution of information leaflet for professionals 1000 copies	£1000
Management, training and overheads	£2000
Resources for training sessions (information packs, refreshments)	£800
Venue hire for 8 training sessions	£400
Travel	£200
Total project budget:	£13,000
Amount Requested from PCC	£3000

Funding for this project is being sought from The Rosa Grant giving Fund for £5,000 and we are match funding from our own funds with £5000. **We would like to request £3000 from the PCC to fully fund this project and enable us to start by January 2015.**

