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This response was submitted to the [Equality and Social Justice Committee](#) consultation on [The public health approach to preventing gender-based violence](#)

PGBV 12

Ymateb gan: Cymdeithas Seicolegol Prydain | Response from: British Psychological Society





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Consultation Response

Public Health Approach to Preventing Gender-Based Violence

April 2023

This submission sets out the British Psychological Society's (BPS) response to the Senedd's Equality and Social Justice Committee's call for evidence to inform their inquiry into the public health approach to preventing gender-based violence.

The BPS is the representative body for psychology and psychologists throughout the UK. We are committed to providing and disseminating evidence-based expertise and advice, engaging with policy and decision makers, and promoting the highest standards in learning and teaching, professional practice and research. We believe psychology has an important role to play in government policy and improving lives of the public. We are a registered charity with a total membership of around 60,000 – over 1,600 of whom are in Wales.

Email: Please send any enquiries to



Many of our members work with both survivors of gender-based violence and with people who commit gender-based violence. We have seen the advances in policy and legislation in Wales and it's clear that there is a real desire to address this issue. But while the overall intent is there (and we list a few examples of good practice in our response) we still feel more can be done to improve service provision and to support those working to support others. This can be done by:

- Embedding wellbeing in the culture of the school, not just the curriculum.
- Providing teachers with the support they need to address the impact on children of outside influences, particularly from online platforms and social media influencers.
- Extending the user empowerment mechanisms in the Online Safety Bill to cover children and young people, and extending the duty to take measures to address the risk of exposure to content that is legal but harmful to all platforms.
- Creating a sustainable model for funding services so that programmes can be piloted, researched, rolled-out, evaluated and updated in light of the latest and best evidence.
- Providing adequate resources to statutory and non-statutory organisations to enable them to work together.
- Recognising the importance of psychologists as a profession with valuable expertise.

1. What works in preventing gender-based violence before it occurs (primary prevention) and intervening earlier to stop violence from escalating (secondary prevention)?

Cultural Wellbeing

Childhood experiences shape our adult selves, and these developmental experiences affect cognitive and brain development.¹ Children spend a significant amount of time in schools so what they experience in the classroom, on the playground, and with their peers, will impact on their views and behaviours towards others. Schools are in a unique position to positively shape children's views through an awareness about safe, equal and healthy relationships and translating these into practice.

¹ [How adverse childhood experiences shape our brains | BPS](#)



Wellbeing has long been part of the curriculum in Wales but we question whether this has resulted in creating a culture of wellbeing in our schools and if negative attitudes towards girls are regularly challenged. If schools are pressured to perform well through good test results, the BPS is concerned that this will always be prioritised over a school's responsibility to create positive relationships.

We are pleased to see the roll out of a new Health and Wellbeing curriculum in Wales, with an emphasis on healthy relationships and how decisions made impacts our lives and those around us. We hope that when implemented this will go further to include an understanding what makes up relational health (the capacity to develop and sustain safe, stable and nurturing relationships) so that education professionals can create environments that are compassionate, kind and empathetic.

We would welcome an impact assessment and evaluation of the policy once the roll-out is complete in 2026. We would also welcome impact assessments on existing Welsh Government supported programmes that are designed to tackle gender-based violence in schools.

Supporting teachers

The BPS recognises that factors outside of school will also impact on children's development and behaviour towards others. Online influences and influencers have become mainstream and their messaging has the ability to reach a wide audience.

Many of our members have reported a rise in teachers requesting help to support children and young people exposed to 'toxic' extreme views of social media influencers. The BPS recognises that young people who lack the support mechanisms that can give them a sense of self-esteem and self-worth are more likely to be attracted to such views.

We offer advice to teachers and recommend that schools provide targeted learning for those most at risk of being drawn to influencers.² We advise that parents, carers and teachers are aware of the emotional impact on young people of comments addressing group culture that might see perpetrators of these as 'funny' or 'strong.' We encourage debate about the impact of belittling, degrading or sexualising others and about vulnerability as a strength and to discuss how peer pressure works and what fears people have about opposing a group view as well as how they can stand up for themselves.

We know parents and teachers cannot fully protect children from on-line harms so we are working with partners to press the UK Government to amend the Online Safety Bill in a number of areas:

² [How to talk to children about Andrew Tate and other toxic views online | BPS](#)



- We would like to see a proactive and empowering approach to online safety instead of relying on providers to mitigate risks or deal with issues after they occur. We're calling for an extension to the user empowerment mechanisms to cover not just adults but children and young people. This would give them greater power around who they interact with online.
- We are also calling to extend the child safety duty so that it covers any services likely to be accessed by a child.
- We would like to see an extension of the duty to take measures to address the risk of exposure to content that is legal but harmful in relation to adults to all platforms (not just the largest Category 1 platforms). Individuals can be encouraged to engage in behaviours that are dangerous to themselves and others in the “real world”. Psychology research from the University of Durham has demonstrated a link between exposure to content depicting risky behaviour- such as drug use, excessive alcohol use, disordered eating, self-harm, violence to others, and dangerous pranks - and users' own offline risky behaviour.³

Supporting Health professionals to support others

In 2020, a number of organisations including medical royal colleges, trade unions, and charities, signed a joint letter to the Secretary of State in 2020 urging for better funding for healthcare professionals to help the many people they see who are affected by domestic abuse in England.⁴ The letter states that, during the pandemic “...with few other outlets to disclose, victims are using their interactions with health professionals to disclose domestic abuse...” and called for funding programmes to tackle the problems of domestic abuse and for onward referrals.

We are pleased that some programmes for identification and further referral appear to be working well in Wales. According to the Violence Prevention Unit, the Identification Referral to Improve Safety (IRIS) – a programme in general practice launched by the Police and Crime Commissioner – resulted in improved identification and referral rates.⁵ However, the evaluation was in 2011 and we would recommend another review of the effectiveness of the programme.

The South Wales Hospital Based Violence Intervention Programmes (PREVIP) run by the Violence Prevention Unit, is located in Morriston Hospital and University Hospital Wales A&E departments. Violence Prevention Teams, led by nursing staff, were set up to support patients who attend A&E because of violence. They work with

³ [\(PDF\) Is exposure to online content depicting risky behavior related to viewers' own risky behavior offline? \(researchgate.net\)](#)

⁴ [Joint letter to the Secretary of State: prioritising the healthcare response to domestic abuse | Safelives](#)

⁵ Violence Prevention Unit (2021), Systematic Evidence Assessment – what works to prevent violence against women, domestic violence, and sexual violence, p. 16



patients to identify the causes of the violence and then they refer them to NHS or local community services who can provide further advice, care or support.

While this isn't a new initiative, the success of these programme has never been evaluated in the UK. Cardiff University has now been commissioned by the Youth Endowment Fund to provide a detailed evaluation of the set-up, delivery, and impact of the teams; how they involve other clinical staff, how they differ between UHW and Morriston, and how they can be rolled out across the UK.⁶

Domestic abuse can have a severe psychological impact with wide ranging implications for the affected person's psychological and physical wellbeing. Practitioner psychologists are often embedded within multi-disciplinary teams in the NHS and Third Sector with a diverse range of responsibilities including the support of team members to consider the psychological features of their work. For people affected by domestic violence, a trauma-informed approach to working with the person affected and the processes that may be necessary when supporting them is vital, for example safeguarding considerations. Psychologists can offer direct interventions, consultation and staff training to support health colleagues to deliver services which avoid re-traumatisation and offer a trauma-informed environment within which recovery from traumatic stress responses is optimised and in alignment with the Traumatic Stress Wales Framework.⁷

Working with those who offend or are likely to offend

The Drive Partnership was established in 2016, designed to develop sustainable, national systems that can respond to all perpetrators of domestic abuse.⁸ The programme brings together third sector and public sector partners. Forensic Psychologists work in His Majesty's Prison and Probation Service, providing consultation work either directly with patients or through the partnership organisations. A detailed evaluation on the programme by Bristol University shows that the number of Drive service users perpetrating abuse types reduced significantly with 82% fewer using physical abuse, 88% fewer using sexual abuse, 75% fewer using harassment and stalking and 73% fewer using jealous and controlling behaviours.⁹ A similar project (Adapt) is running in North Wales.

Wales Offender Personality Disorder Pathway (OPDP) is part of the wider NHS England and HMPPS Offender Personality Disorder Strategy. They provide a pathway of psychologically informed services for people with behaviours of concern who may reoffend.

⁶ <https://youthendowmentfund.org.uk/wp-content/uploads/2023/02/YEF-South-Wales-VPU-FINAL.pdf>

⁷ [Trauma-Informed Wales \(traumainformedwales.com\)](https://www.traumainformedwales.com/)

⁸ [National Systems Change – Drive Project](#)

⁹ [Evaluation – Drive Project](#)



Psychologists working within the OPDP support Probation Practitioners to work in a psychologically minded and trauma informed way with those who are on probation. Individuals that screen into the OPDP are likely to have personality difficulties that link to their offending, risk management and engagement with sentence plan. Psychologists work with Probation Practitioners to best support and manage people's risk and their well-being. Psychologists also deliver reflective practice sessions and training for Probation staff across Wales.

2. How effective is a public health approach to preventing gender-based violence and what more needs to be done to address the needs of different groups of women, including LGBT+, ethnic minorities, young and older people at risk of violence at home and in public spaces?

BPS is concerned that support services, particularly for different groups of women, aren't always available in the right place at the right time and what we often find is a one-size-fits-all approach. We know that people are reluctant to use services if they don't meet their specific needs, which makes certain groups harder to reach and unfortunately easier to ignore.

We believe that interventions need to adopt a whole systems approach so that they can be responsive to the cultural context in which they are delivered. Domestic violence services cannot operate in isolation and they must reflect the broader community in which individuals and their families live.

Funding models

Unfortunately, we find that many services in Wales face closure because there isn't a sustainable funding model for service provision that would enable providers to develop and deliver targeted and sustainable services through piloting, researching and evaluation. What we often see are quick tendering processes, which leave little time to develop a service that is sustainable. Many positive initiatives are often short-lived as service providers are forced to focus much of their efforts on securing the next round of funding, leaving service users searching for alternative support.

BPS advises that any new interventions should ensure they sit in the wider 'what works' evidence base, involve individual formulation, a strengths-based approach and consideration of how they are delivered.¹⁰ Robust equality impact assessments are carried out for all such services to ensure they aren't unintentionally disadvantaging any individuals or groups. The Welsh Government should enable this to happen.

¹⁰ Bates, E. A., Graham-Kevan, N., Bolam, L. T., & Thornton, A. J. V. (2017). A Review of Domestic Violence Perpetrator Programs in the United Kingdom. *Partner Abuse*, 8(1).



3. What is the role of the public sector and specialist services (including the police, schools, the NHS, the third sector and other organisations that women and girls turn to for support) in identifying, tackling and preventing violence against women, and their role in supporting victims and survivors?

Gender-based violence is complex, multi-faceted, endemic and wide-ranging, making it difficult to combat or eradicate. It's vital that everyone involved in the interests and welfare of women and girls takes responsibility for tackling gender-based violence.

Because of its complexities, all public, private, statutory and non-statutory organisations must show a commitment to prevention of violence and to work together to achieve this. But more importantly, to make a real difference, the Welsh Government must invest in tackling violence, assigning to strategic boards only top-level civil servants and policy makers who can speak across the sectors (health, education, housing, social care, justice) with support from clinical experts with specialist knowledge and experience.

Proper funding for VAWDASV

BPS acknowledges the huge strides the Welsh Government has made to enshrine in policy and legislation the protection of women and girls against violence. But given the enormity of the problem, the steps needed to tackle gender-based violence, and the health and financial costs to victims and society at large, we question if the VAWDASV budget is adequate.

We would like to see a review into the budget with comparisons made across other policy areas.

Joint working

The Integrated Offender Management Board “aims to deliver a coordinated approach to the management of individuals who have been jointly identified as a priority by partners. It aligns the work of public, private and voluntary sector agencies to target resources effectively towards these groups”.¹¹ The former framework to support positive change for those at risk of reoffending in Wales included a VAWDASV work stream, which enabled a multi-agency approach to addressing the related priorities, with support at a senior level. Since the end of this framework, however, some of the associated progress has been lost.

¹¹ [IOM Cymru](#)



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We would like to understand if the board continues to meet and to learn of their recent outputs, their long-term goals, and how they plan to achieve them.

Recognising the importance of psychology and psychologists

Psychologists are an integral part of the wider health and social care workforce and play a vital role in the prevention of violence against women. Psychologists work with school children who experience social and emotional problems caused by violence. They work with women from all backgrounds and ages, in health and social care setting, who have experienced domestic violence, sexual abuse, traumas and relationship issues. They also work with people who have offended or are at risk of offending, to help them address factors associated with risk of further offending and develop healthy, pro-social lives and contribute to a safer society. Psychologists have specialised knowledge of trauma and can support other staff who do not work in mental health to undertake their work in a trauma-informed way.

However, there is currently a shortfall of psychologists in the workforce in Wales and access to psychological therapies is patchy. We need to see sufficient numbers of applied psychologists including clinical, counselling and educational, working more directly in schools and want to see the wider psychological professions considered as integral part of the future workforce.