

Havering Violence Against Womens and Girls (VAWG) Strategy consultation Results 2025.

Introduction:

The VAWG consultation survey results report presents the findings from a comprehensive survey conducted to gather insights and opinions on violence against women and girls (VAWG) within the London Borough of Havering. The survey ran from 25 November 2024 to 17 January 2025 and received a total of 157 responses.

The primary aim of this consultation was to understand the community's experiences, perceptions, and suggestions regarding VAWG. The survey covered various aspects, including the respondents' connection to Havering, their gender identity, sexual orientation, faith, and whether they have a disability or health condition. It also explored their involvement in VAWG, experiences of VAWG, and the locations where VAWG is most likely to occur.

The report highlights key findings, such as the effectiveness of current VAWG services, critical issues that the VAWG strategy should address, and the most needed services and support to tackle VAWG in Havering.

Additionally, it provides recommended actions based on the survey results to enhance community outreach, improve access to services, and address the critical issues identified.

Survey Findings:

The survey results indicate that many respondents, 63.06%, live in the London Borough of Havering, while 32.48% are educated there, and 24.84% work in the area. A smaller proportion, 1.91%, visit Havering, and only 0.64% have other connections. Notably, no respondents left this part of the question unanswered. These findings highlight the diverse connections and strong ties that respondents have with the community, providing valuable insights into the local context of VAWG issues.

The survey's findings indicate that many respondents, 89.17%, identify as female, while 7.64% identify as male. A smaller proportion identifies as non-binary (0.64%), describes their gender in another way (0.64%), or prefers not to disclose their gender (0.64%). Notably, 1.27% did not answer this part of the question. These findings highlight the diverse gender identities of the respondents, providing valuable insights into the local

context of VAWG issues. Additionally, regarding sexual orientation, 78.98% of respondents identify as straight or heterosexual, 9.55% as bisexual, 3.18% as gay or lesbian, 1.27% describe their sexual orientation another way, 5.10% prefer not to say, and 1.91% did not answer this question.

The survey results reveal diverse demographics among respondents, with 89.17% identifying as female, 7.64% as male, 0.64% as non-binary, 0.64% describing their gender in another way, and 0.64% preferring not to disclose their gender. In terms of sexual orientation, 78.98% of respondents identify as straight or heterosexual, 9.55% as bisexual, 3.18% as gay or lesbian, 5.10% prefer not to say, and 1.91% did not answer.

The survey also found that 48.41% of respondents identify as Christian, 33.12% as having no religion, 8.28% as Muslim, 2.55% as Hindu, 0.64% as Jewish, and small percentages adhering to other religions or preferring not to say. The survey results indicated that 24.84% of respondents reported having a disability, impairment, or health condition, while 68.79% did not, 5.73% preferred not to say, and 0.64% did not answer.

Among the types of impairments reported, 5.10% identified as having sensory impairments such as mild deafness or partial sight, 2.55% had physical impairments like wheelchair use, 8.92% had mental illnesses including bipolar disorder, schizophrenia, or depression, 6.37% had developmental or educational conditions such as autism spectrum disorders, dyslexia, or dyspraxia, 0.64% had learning disabilities like Down's syndrome or cerebral palsy, 7.01% had long-term illnesses or health conditions like cancer, HIV, diabetes, chronic heart disease, or stroke, and 1.91% reported other types of impairments. Additionally, 75.16% of respondents did not answer this question on impairments.

The survey findings revealed that most respondents fell into the age brackets of 16-17 (36.31%), 55-64 (17.83%), and 45-54 (11.46%). The survey had a total of 157 responses. Other age groups included 18-24 (10.19%), 35-44 (8.92%), 25-34 (7.64%), and 65-74 (5.73%). Smaller percentages were seen in under 16 (0.64%) and those preferring not to disclose their age (1.27%). No responses were recorded for the age brackets of 75-84 and 85+. These results align with the ever-changing age demographic of Havering. It also shines a light on the efforts to ensure that younger voices are heard as a part of the VAWG consultation, given this is a key area of enquiry.

152 responded to the question relating to the locations where VAWG was most likely to take place. The majority indicated that home was the most common setting (37.58%), followed by public transport (26.11%), town centers (7.64%), open spaces (7.01%), pubs,

bars or restaurants (5.73%), and work (2.55%). Education and leisure facilities had minimal responses (0.64% and 0.00%, respectively), while "other" and "not answered" accounted for 9.55% and 3.18%.

In the last 12 months, 154 people responded about engaging in VAWG services, with 19 (12.10%) indicating they had used such services. Of these, 8 accessed Havering Women's Aid, 1 used MENDAS, 4 engaged with Victim Support, 3 with the Havering IDVA team, and 2 with Cranstoun. Eight respondents mentioned 'other' services, while 139 (88.54%) did not answer. Effectiveness ratings showed 6 (3.82%) found the services very effective, 9 (5.73%) somewhat effective, 4 (2.55%) neutral, and no respondents found the services ineffective. Notably, 138 (87.90%) did not provide a rating.

The survey provided a comprehensive list of options for respondents to select the critical issues they believed the VAWG Strategy should address. These options included sexual abuse, domestic abuse, stalking and harassment, female genital mutilation and forced marriage, so-called "honour-based" abuse, exploitation and trafficking, online abuse, sexual harassment and intimidation at work, in education settings and public places, and street harassment. Respondents also had the opportunity to select "other" and provide additional comments.

The findings illustrated a broad spectrum of concerns among the public, with the top three issues being sexual abuse, domestic abuse, and stalking and harassment. These issues highlight significant areas of concern for the participants of the survey. These are already key areas of focus within the draft strategy and action plan.

The survey findings revealed that 149 respondents identified several key needs to address VAWG in Havering. The top three areas of focus included the provision of counseling and mental health services, which 68.15% of respondents deemed necessary; education and prevention programs, supported by 64.33%; and emergency shelters or refuges, highlighted by 62.42%. These responses underscore the critical importance of mental health support, preventative measures, and immediate safety provisions in tackling violence against women and girls.

The key themes in the responses to the VAWG survey :

1. **Awareness and Education:** Many respondents emphasised the need for increased awareness and education about violence against women and girls (VAWG). This includes educating the community, professionals, and young people about the issues, triggers, prevention measures, and available support.

2. **Support for Victims:** There is a strong call for better support for victims of VAWG. Respondents highlighted the importance of providing comprehensive support services, including counseling, legal help, and practical assistance.
3. **Cultural and Societal Change:** Several responses pointed out the need for cultural and societal changes to address VAWG. This includes challenging harmful cultural norms, improving the legal system's response to VAWG, and promoting gender equality.
4. **Training for Professionals:** Respondents mentioned the need for better training for professionals, such as police, judges, and healthcare workers, to handle VAWG cases more effectively and sensitively.
5. **Prevention and Early Intervention:** There is a focus on the importance of prevention and early intervention to stop VAWG before it occurs. This includes educating young people about healthy relationships and respect, as well as identifying and addressing risk factors early on.
6. **Reporting and Accountability:** Some responses highlighted the need for better reporting mechanisms and accountability for perpetrators of VAWG. This includes anonymous reporting options and holding perpetrators accountable for their actions.
7. **Community Involvement:** The importance of involving the community in addressing VAWG was also mentioned. This includes community education programs, support networks, and collaboration between different sectors.

These themes reflect the diverse perspectives and experiences of the respondents, highlighting the multifaceted nature of addressing violence against women and girls.

Actions to Address VAWG in Havering based on the consultation results:

1. **Enhance Community Outreach and Awareness:**
 - a. Increase efforts to educate the community about VAWG and available support services.
 - b. Implement targeted campaigns to raise awareness in high-risk areas such as public transport and town centres¹.
2. **Improve Access to Counselling and Mental Health Services:**
 - a. Expand the availability of counselling and mental health services for victims and survivors of VAWG.
 - b. Ensure that these services are easily accessible and well-publicised within the community.
3. **Strengthen Emergency Shelters and Refuges:**

- a. Increase the number of emergency shelters and refuges available for victims of VAWG.
 - b. Provide adequate funding and resources to ensure these facilities can meet the demand.
- 4. Implement Education and Prevention Programs:**
- a. Develop and deliver education programs in schools and community spaces to prevent VAWG.
 - b. Focus on teaching young people about healthy relationships and consent.
- 5. Enhance Legal Assistance and Understanding of Rights:**
- a. Educate the community about their legal rights and the laws related to VAWG.
- 6. Support Perpetrator Change Programs:**
- a. Implement programs aimed at changing the behaviour of perpetrators of VAWG.
 - b. Focus on rehabilitation and preventing reoffending.
- 7. Address Critical Issues Identified in the Survey:**
- a. Prioritise addressing sexual abuse, domestic abuse, and stalking and harassment as the most critical issues
 - b. Develop specific strategies and interventions to tackle these issues effectively.
- 8. Improve Engagement with VAWG Services:**
- a. Increase efforts to engage the community with VAWG services.
 - b. Ensure that services are well-publicised and accessible to those in need.
- 9. Monitor and Evaluate the Effectiveness of VAWG Services:**
- a. Regularly assess the effectiveness of VAWG services and support in Havering.
 - b. Use feedback from the community to make improvements and adjustments as needed.
- 10. Collaborate with Various Stakeholders:**
- a. Work closely with local authorities, healthcare providers, law enforcement, and community organisations to address VAWG comprehensively.
 - b. Foster a collaborative approach to ensure all aspects of VAWG are addressed effectively.

In Conclusion:

The findings, key areas of enquiry and recommendations highlighted consultation survey and improve the overall response to VAWG in Havering. All of the above recommendations are contained within the draft VAWG Strategy and Action Plan prior to the consultation. This would allude that the strategy and action plan align with the desires of the residents of Havering. The VAWG strategic partnership will take ownership of the action plan and support its delivery. Whilst we would like to commit to growing services/provision, this can only commence with adequate funding. Given the current financial position of the local authority, additional funding to services is unlikely. Therefore, provision will be largely reliant of MOPAC funding and other funding streams.

Additional documentation:

The attached document will allow the reader to view the above written results in a graphic and numerical format.



digital result of
VAWG consultation su