

DISMANTLING DISADVANTAGE

Levelling up public services for
women with multiple unmet needs

Executive Summary

July 2023



CHANGING
LIVES

AGENDA
alliance

Foreword

We improve the lives of women in our communities by listening to them and taking action collaboratively. That's my belief as Police and Crime Commissioner.

Centring women's voices and valuing their lived experience doesn't just bring focus to our work, it gives us purpose. When we really listen, we truly learn.

My learning over the time that I have served the region in this role and as a participant in this vitally needed research has reinforced that approach.

I offer thanks to the Smallwood Trust for funding the phenomenal effort by Agenda Alliance and Changing Lives in championing the voices of women and girls in this project.

We know that over time circumstances change, such as the way that the pandemic decimated services women need to survive. To keep up with the impact this has on women and girls' lives, we must always maintain an understanding of their evolving and growing unmet needs. So, it is with the greatest admiration and thanks that I commend the peer researchers above all, whose trauma, lived experience and labour is at the heart of this work.

The specialism involved in helping women to trust and share their experiences can never be underestimated. Ensuring that our systems are transformed by understanding their needs is of the utmost importance. Acquiring knowledge and learning from that vital evidence-base requires commitment to approaches delivered with the sensitivity and compassion that women deserve.

We know under-reporting of crime and abuse remains prevalent and our voluntary and community sector partners additionally bear a tremendous responsibility as specialist services to ensure women do not slip through the cracks.

Our system continues to require serious change, investment and a shift in practice approaches to meet women and girls where they are in their individual journeys. I am endlessly inspired by their expertise in the delivery of such provisions.

But, like other parts of the country, we in the North East of England see that statutory services have long been subject to crippling austerity. Without appropriate resourcing, women's survival is dependent on the underfunded charities sector to deliver support in the context of a decimated public sector provision. For too long we have endured devastating austerity that directly affects the lives of our communities, and without significant investment in the North East's health, policing, social care and VCSE sectors, the disparities facing women and girls will endure, and this will only deepen without action.

As part of the mission to level up the country, we need greater investment in mental health services, sexual assault referral centres, recovery services, social prescribing pathways to specialist IDVA/ISVA support and development of the justice system in order to enable women to live safe and well. When we fully understand the current, long-standing, emerging and hidden needs of women and girls across communities, we can effectively build towards a future that will achieve better and better outcomes for them, informed by them.

And in many ways, the solutions are not difficult to put in place. Consistency, compassion, non-judgment and dignity are some of the principles we can put into practice immediately and if that is the starting point, then I am optimistic that transformation won't be challenging but instead inevitable.



It has been a true privilege to see and be a part of the coming together of the region's most dedicated women's services and practitioners in informing this project as it sets out a path for transformation. Together we absolutely can make an impact on those whose lives have been devastated by the pandemic and I look forward to supporting a shift that paves the way for a brighter future, led by and for women and girls.

A handwritten signature in blue ink, consisting of a stylized 'K' followed by a long, sweeping horizontal line.

Kim McGuinness, Northumbria Police and Crime Commissioner

1

Introduction

Across the country, women at the sharpest edge of inequality are being systematically failed by the systems and services that should be supporting them. Women experiencing multiple unmet needs face intersecting disadvantages, many of which are shaped by long-term experiences of poverty and deprivation, as well as trauma and abuse. Many of these women have experience of homelessness, substance misuse, contact with the criminal justice system, child removal, domestic and sexual abuse, and poor mental health. Disadvantage is further compounded by systemic discrimination based on characteristics such as age, gender, ethnicity, sexuality, disability, religion or belief.

Run in partnership by Agenda Alliance and Changing Lives, our Transforming Services for Women's Futures project focused on the ways in which women with multiple unmet needs in the North East experience public services.¹ The project brings together evidence gathered from women facing disadvantage, local practitioners, regional leaders, and national experts – alongside original desk-based research and data analysis. Our executive summary sets out the ways in which local, regional and national systems and services can be reformed to better meet the needs of the women most at-risk across our communities.

1. Our research has focused on the six local authorities of Newcastle upon Tyne, North Tyneside, South Tyneside, Gateshead, Sunderland, and Northumberland. We refer to these areas as Northumberland and Tyne and Wear, or the North East.

Too often, women with multiple unmet needs "fall through the cracks", left to face accumulating problems without receiving the holistic gender-, trauma-, age- and culturally responsive support that they need. In many tragic cases, this perpetuates a cycle of harm, resulting in some women being separated from their children, and other women dying prematurely. Far too often, the burden of responsibility is placed upon individual women, who are stigmatised and blamed for systemic disadvantage, rather than the widespread system failures that let them down.

Grappling with the triple-shock of over a decade of austerity, the COVID-19 pandemic and the cost-of-living crisis, public services are overstretched and failing to provide coordinated and meaningful support for many women. Against this backdrop, women with multiple unmet needs are made especially vulnerable, acutely experiencing both the impact of an increasingly strained welfare state and the escalating cost of living crisis. While the impact of this has been felt nationwide, it has a disproportionate impact on the most disadvantaged people and the most deprived regions.

As a region, the North East has the highest poverty rates in the UK, relies more on public services than other areas, and has been disproportionately impacted by austerity spending cuts. Women with multiple unmet needs in the North East are not only disadvantaged by their gender, complex needs and socio-economic status, but by their postcode and the impact of the country's geographical and regional imbalances.

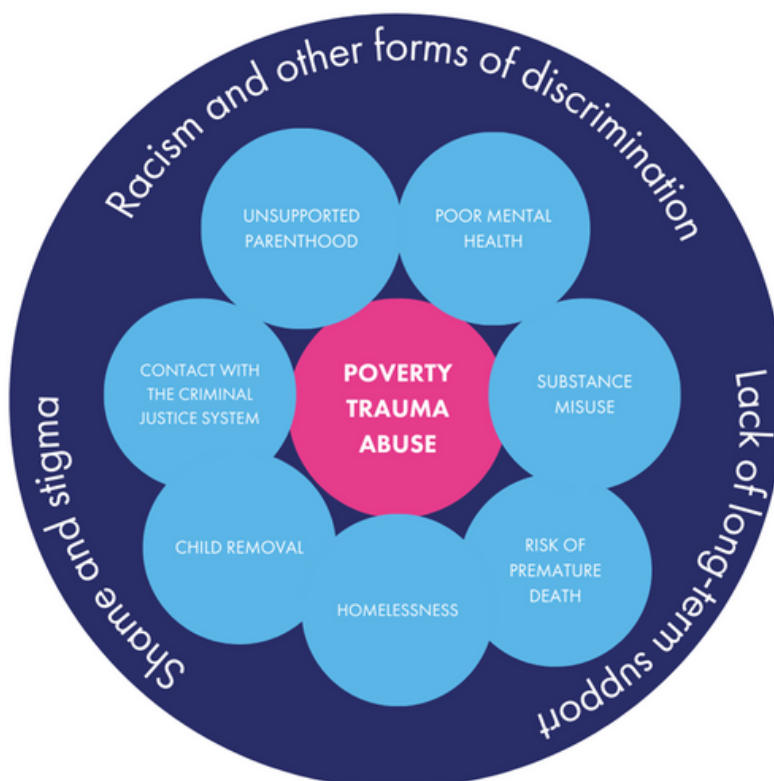
As we move beyond the legacy of the pandemic and collectively grapple with how to improve the lives of everyone in society, we are calling for across the board systems-change to make public services respond to the needs of the most at-risk women.

Methodology

Our research methodology was codesigned with a core group of women researchers with lived experience and included:

- 18 semi-structured interviews with local practitioners, regional leaders, and women with lived experience;
- two focus groups;
- 47 survey responses gathered from women service users in Northumberland and Tyne and Wear;
- desk-based research; and
- a costings analysis.

Who are women with multiple unmet needs?



We worked with women researchers living in Northumberland and Tyne and Wear, who have lived experience of multiple unmet needs, to collaboratively produce this visual that unpacks what this means to them.

2

Women's unmet needs and regional inequalities



We've all grown up with nothing, we all make do. We all struggle to survive but we do survive through it all. I think that's what makes the North East one of the best regions. — Nici

Across the UK, the impact of austerity since 2010 has been severe and local authorities have borne the brunt of cuts to public finances. As a result, public services have been pared back and the capacity of local authorities to address inequalities within communities has been greatly reduced. This has meant severe consequences for the most disadvantaged, with disproportionate impacts on women, especially women experiencing multiple unmet needs who feel this impact most sharply, partly because they are likely to be in contact with multiple services.

Existing research outlines the ways in which the effects of austerity and worsening socio-economic realities have been gendered.² Benefit and taxation changes have had disproportionate impacts on women for several intersecting reasons: women have relatively lower incomes; greater caring responsibilities; pregnancy and maternity needs; and they also represent the vast majority of lone parents in the UK. Gender inequality often intersects with prejudicial treatment based on certain concepts of identity, including age, class, disability, ethnicity, and sexuality.

2. Joseph Roundtree Foundation (2023) [UK Poverty](#).

- Research from the Runnymede Trust (2022) shows that on average (mean), **white women received £645 less a year** between 2011 and 2020 in cash benefits. Meanwhile, **Black, Asian, minoritised, and migratised women received £1,040 less a year** in cash benefits.³
- In the North East, women can expect to spend **over a quarter (26%) of their lives in "not good/ poor" health** compared to 23.3% of those in the country as a whole.⁴

The North East has been disproportionately impacted by austerity spending cuts, while the COVID-19 pandemic and ongoing cost-of-living crisis have added further strain to public services, leading to rising poverty rates and worsening inequalities. At its most fatal, the effect of this means that women living in the North East are more likely to live shorter lives, to spend a larger proportion of time living in poor health, and to die prematurely from preventable diseases compared to the rest of the country.

- Latest UK poverty rates by region show that **the North East has the highest poverty rate of all regions at 26%**.⁵
- During the pandemic, **34% of children in the North (around 900,000) were living in poverty**, compared with 28% in the rest of England. This equates to 160,000 extra children in poverty in the North.⁶

3. Runnymede Trust (2022) [Falling Faster amidst a Cost-of-Living Crisis: Poverty, Inequality and Ethnicity in the UK](#).

4. V Corris et al. (2020) [Health inequalities are worsening in the North East of England](#).

5. Joseph Roundtree Foundation (2023) [UK Poverty](#).

6. APPG Child of the North (2023) [Child Poverty and the Cost of Living Crisis](#).

The Government has recognised that regional inequality needs to be addressed and promises to "level up" the country. This agenda forms part of an ambitious government programme to improve opportunities and outcomes across the UK. The ambition to devolve more powers and decision-making to local areas is central to this mission and aims to create the conditions for sustainable growth, better public services and a stronger society.⁷ The North East Mayoral Combined Authority (NEMCA) deal offers an opportunity to achieve these ambitions, proposing a systems-based approach which empowers all local authorities involved, which could be transformative in meeting the needs of the most at-risk women.



The further up North you go, it's more deprived but some of the tightest communities I know come from the most deprived places. I love how everybody is so tight [here]. The downside is there's not enough money in services to help with some of the stuff that goes on. — Haley

7. The Devolution APPG (2022) [Levelling-up Devo: The role of national government in making a success of devolution in England](#).

3

Women's experiences of public services



It's never because [women] are hard to reach. It's because services aren't able to provide effective support: they aren't designed to. — Violence Against Women and Girls Service Manager

Women with multiple unmet needs repeatedly fall through the gaps between services and systems, dealing with escalating problems, confronting numerous barriers to accessing support, and dealing with the stigma and discrimination of being labelled as intrinsically "hard-to-reach." Far from "not engaging properly," our research reveals that systems are themselves failing women.

Inaccessibility of services

- Women with multiple unmet needs face a fragmented and complex picture of siloed service provision. The multiplicity of their needs can disadvantage them further as they try and navigate a confusing and inflexible "maze" of services and workers, providing multiple and sometimes competing strategies of support.

Of the women with multiple unmet needs that we surveyed, **44%** are currently in contact with **three or more workers** at once.



I had so many different workers and you're retelling your story, you're retraumatising yourself every single time you do that. — Erica

- These concerns about accessibility are amplified for women with No Recourse to Public Funds (NRPF) who cannot access most welfare benefits, women with children whose childcare needs often prevent them from seeking support, and those experiencing literacy and digital exclusion who struggle with low literacy skills and/or trying to access support online.

Living with trauma

- Mainstream services are ill-equipped to effectively engage those living with complex and multiple unmet needs as they are unable to account for their experiences of trauma, meaning that people with these needs often go without the help they need. Women with multiple unmet needs have often experienced forms of trauma, which may stem from: neglect; psychological, physical, and sexual abuse during childhood; community violence; and domestic violence and abuse.
- Offering generic and standardised support ignores the impact of trauma upon women's lives and may affect a woman's capacity to engage with and attend services, often perpetuating a cycle of harm.

Shame, stigma and discrimination

- Women tell us that they often feel looked down on and as if professionals are not able to understand their life experience, which can lead to women mistrusting all services and withdrawing altogether. Indeed, women experiencing multiple unmet needs routinely encounter stigma and discrimination when accessing services, including prejudicial treatment based on gender, age, ethnicity, class, sexuality, and other intersecting identities.

64% of women surveyed told us that they have felt judged or blamed by a practitioner when accessing services.

Systemic racism and the hostile environment

- Systemic racism within public services refers to the ways in which racism is embedded within the policies, procedures, and practices of public institutions and services, resulting in unequal treatment and outcomes for people of different ethnicities. This can have serious implications when it comes to public services meeting the needs of Black, Asian, minoritised, and migratised women.



When you're an asylum seeker, you have no opportunities. You're trapped and have no liberty. You can't get work experience or improve your situation. — Amie

Experiencing and reporting abuse within services

- Many services accessed by the most disadvantaged women, such as hostels for temporary accommodation and drug or alcohol services, are dominated by men, and are often sites of sexual harassment. Agenda Alliance research shows that **over 10% of women** who have experienced sexual harassment said it happened in a public service setting.⁸ This figure is likely to be disproportionately higher for women with multiple unmet needs, who tend to be in contact with a greater number of services more frequently.
- Services are routinely designed around the male service user, which can lead to women experiencing sexual harassment or being at risk of encountering a perpetrator. The consequences of this can be extremely damaging to women with multiple unmet needs, potentially stalling their recovery.

8. Agenda Alliance (2021) [Unsafe Spaces](#).

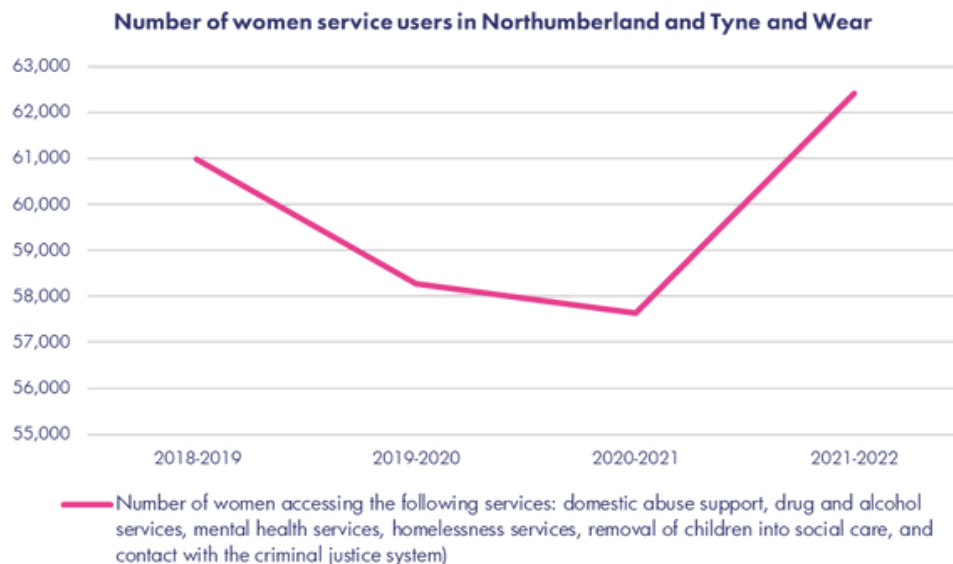
Women with multiple unmet needs face multi-faceted challenges trying to engage with services, which can include harmful and re-traumatising experiences that perpetuate disadvantage. Most mainstream services are designed around the needs of a supposed 'generic' service user, often failing to meet the needs of women – in particular Black, Asian, minoritised, and migratised women and those who experience the greatest disadvantage. It is clear that something must be done differently.



4

The scale and consequence of failing women

Women with multiple unmet needs often come into contact with multiple and wide-ranging services, which are too often disconnected and siloed. Looking at six service areas (domestic abuse, drug and alcohol services, mental health services, homelessness service, removal of children into social care, and contact with the criminal justice system), our original data analysis shows an increase in demand post-pandemic, demonstrating a growing strain on public services.⁹



9. We commissioned an external researcher to provide an overview of the current support available to women with multiple unmet needs in Northumberland and Tyne and Wear. For more on how this analysis was carried out, please refer to the methodology chapter and appendices of [the full report](#).

Despite this clear rise in demand, there is a severe discrepancy between the support that women at-risk need and available service provision at a regional level.

The scale and consequence of not meeting women's needs is severe, leading to cycles of disadvantage and ongoing trauma. Indeed, our costings analysis shows that in Northumberland and Tyne and Wear:

The annual combined expenditure for women across the aforementioned six service areas from 2018 to 2022 has been **£668,251,000**.¹⁰

Without meaningful intervention, many women become entrapped in a cycle of harm leading to harmful outcomes.¹¹



We have women call us and they feel desperate and are worried they might hurt themselves but it's so hard to get them support. — CEO from a women's health charity

Mental health

- This shocking gap between the scale of unmet needs and the support available was corroborated by the women with lived experience we spoke to, many of whom told us about long waiting lists, delays in support and missing out on help altogether. This was especially true for mental health, which can be a lifeline for women – yet our analysis demonstrates that:

Between 2021-2022 **81% of women** who needed mental health support in Northumberland and Tyne and Wear missed out on it.¹²

10. See previous footnote.

11. These themes have arisen from our primary research and been led by the priorities of our women researchers with lived experience and interviewees.

12. For further detail on this estimate, see chapter three and appendices of the final report.

Dual diagnosis

- Many of the women and practitioners we interviewed also discussed significant barriers in accessing mental health support for those with a "dual diagnosis" – women with both a substance use problem and mental health diagnosis. These co-occurring diagnoses affect one another so that, without mental health support, their addiction can get worse, and vice versa. Yet, mental health services and drug and alcohol services are hugely disconnected, with each being designed, commissioned and provided separately, resulting in concerning gaps in service provision.

Our data analysis shows that the number of women with a mental health need in Northumberland and Tyne and Wear accessing drugs and alcohol services has consistently increased between 2018 and 2022, rising **from 64% to 83%**. Furthermore, data suggests that **only 20%** of women in contact with drugs and alcohol services, who have mental health needs, are accessing mental health support.¹³

Abuse and violence

- Many women with a dual diagnosis have experienced domestic and sexual abuse, with trauma often leading victim-survivors to develop coping strategies that increase the risk of substance use and mental illness.¹⁴ While it is clear that experience of domestic and sexual abuse can underpin women's experiences of drug and alcohol addiction and mental ill-health, data suggests that:

Only 13% of women in 2022 reported abuse from their partner to the police.¹⁵

- There are many reasons for this, including fear of reporting, shame and low confidence in policing and judicial systems.

13. For more information on these figures, see chapter three and appendices of the final report.

14. Covington S. (2008) Women and Addiction: A Trauma-Informed Approach. J. Psychoactive Drugs.

15. Office for National Statistics (2022), [Crime Survey for England and Wales](#).

Cycles of criminalisation and offending

- Women in contact with the criminal justice system face significant disadvantage, many of their histories underpinned by trauma, violence and abuse.¹⁶ Black, Asian, minoritised, and migratised women in particular are over-represented within the system and face a double disadvantage, experiencing specific barriers on the basis of their ethnicity, religion, culture and immigration status. Cycles of criminalisation perpetuate harm, often leading to women experiencing further trauma, without adequate support to rebuild their lives and prevent re-offending.

Black women and women from 'mixed ethnic' backgrounds are **twice as likely to be arrested** when compared to their white counterparts in England and Wales.¹⁷

Removing children into social care

- For women with multiple unmet needs, one of the most devastating outcomes is having their children removed and placed into social care. By the time this happens, many mothers will have been failed by multiple public services, experiencing a harsh cycle of disadvantage. Women who experience child removal report experiencing a history of abuse, neglect or violence in the home, or having experience of the care system.¹⁸ Once child removal takes place, women often experience an exacerbation of complex needs, such as worsening mental health issues or an escalation of substance misuse.

16. For instance, over half of women in custody have faced emotional, physical or sexual abuse during childhood, itself likely to be an underestimate due to systemic under reporting: Ministry of Justice and HM Prison and Probation Service (2022) [Safety in custody: quarterly update to December 2021](#).

17. Prison Reform Trust (2017) [Counted Out](#).

18. Lancaster University and Centre for Child and Family Justice Research (2017) [Vulnerable Birth Mothers and Recurrent Care Proceedings](#).



When women get their children removed, [they shouldn't] just be dropped... There should be more peer support groups, there should be aftercare. It's a massive thing taking someone's children. — Steff

Avoidable mortality of women

- The consequence of this fragmented service provision means many women are trapped in a cycle of harm without receiving holistic and meaningful support. One of the most alarming ways in which this manifests is through premature death, a tragic outcome of the ways women with multiple unmet needs pay the ultimate price for systemic failure, demonstrating the urgent impetus for action and change.

- In the North East in 2021, the mortality rate for women due to suicide, drug and alcohol misuse, and domestic homicide was **1.7 times higher** than in England and Wales as a whole.¹⁹
- Between 2018 and 2021, the number of women who die in the North East as a result of suicide, drug and alcohol misuse, and domestic homicide **has increased by 15%**.²⁰
- Since 2019-20, the average age of the women who are known to have died whilst accessing Changing Lives services has fallen by almost 10 years, **from 46.8 to 36.9 years old**. This is under half of the typical life expectancy for women living in the UK.²¹

19. For more information on this data and how this analysis was carried out, please refer to chapter three and appendices of the final report.

20. See above.

21. Changing Lives (2022) [Make the link: The premature deaths of women experiencing abuse and exploitation](#).

5

Recommendations for systems change



They need to do something, and they need to do it fast otherwise there's going to be so many more disadvantaged women, more suicides, homelessness, child removal. It needs acting on. — Nici

In many ways, the COVID-19 pandemic illustrated that local services and systems can quickly galvanise around the clear goal of protecting the lives of vulnerable groups, particularly those experiencing multiple unmet needs. Our findings make a clear case for change, demonstrating the web of personal, social and economic costs that emerge because of inadequate, and sometimes harmful, service provision for the most at-risk women. Drawing from our research, we identify five ways in which services and systems can be redesigned to better meet the needs of women with multiple unmet needs.

Ending the cycle of trauma and harm so that women and girls can thrive

1) PRIORITISING PREVENTION AND EARLY INTERVENTION	<p>Late-stage interventions are costly, and our analysis shows the need for a different approach prioritising early intervention and prevention. Our research illustrates that women who repeatedly access services, or access numerous services at once, are often trapped in a cycle of escalating harm. Both the scale and growing rate of women's unmet needs demonstrates the social and financial cost of the failure to end the cycle of harm for women. It is clear there is an economic and social imperative to invest in earlier intervention and prevention to ensure stretched public services can respond more effectively.</p> <p>To achieve this, HM Government should form a cross-departmental Multiple Disadvantage Taskforce to develop a coherent, cross-cutting, and gendered national strategy that addresses the social, economic, and health challenges facing people experiencing multiple unmet needs, with a specific focus on women and girls.</p>
2) GENDER, TRAUMA AND CULTURALLY RESPONSIVE SUPPORT	<p>Rather than approaching services under the guise of 'neutrality', services must become gender, trauma and culturally responsive. Being gender and trauma-informed means taking account of women's gendered life experiences, and the ways in which trauma can impact on their lives, as well as their ability to form relationships and seek support from services. In addition, services must also recognise the barriers created by poverty, insecure immigration status, racism, disability, homophobia and transphobia, and provide culturally responsive care that is sensitive to cultural identity and heritage.</p> <p>To achieve this, HM Government should commit to the development of a cross-departmental strategy on the Development and Delivery of Trauma-Informed Practice, with a focus on meeting the needs of women and girls.</p>

<p>3) SERVICES WORKING TOGETHER</p>	<p>Public services must work well together to prevent the cycle of harm and ensure women receive the support they need and deserve. This means greater coordination and "silo-busting" between services so that national, regional and local systems become more responsive to the scale of challenges facing women with multiple unmet needs. Devolution provides a real opportunity for combined authorities to assume a 'helicopter view' of public services and ensure all strategies meet the needs of the most at-risk.</p> <p>To achieve this, combined authorities should form Tackling Disadvantage Working Groups that adopt a whole systems approach to tackling multiple unmet needs through coordination of local authority, health, criminal justice, voluntary, and community partners.</p>
<p>4) CO-PRODUCTION AND ADDRESSING POWER DYNAMICS</p>	<p>For systems-change to be most effective it must embed co-production throughout. This requires recognising the skills and insight that women with lived experience of systemic disadvantage can bring to solving what may seem like intractable problems. Having the right people at the table means fostering a culture of co-production across the designing, delivery, funding, commissioning, and evaluation of all public services. These efforts must be adequately resourced, so that all women receive the support they need to engage in the work, as well as financial compensation.</p> <p>To achieve this, all local authorities must develop localised understandings about the needs of women and girls facing multiple unmet needs to prevent them from being overlooked and turned away from public services.</p>

5) LONG-TERM AND SUSTAINABLE FUNDING AND COMMISSIONING

Long-term and sustainable service provision must be prioritised by funders and commissioners in order to provide meaningful support to women with multiple unmet needs. Government should provide ring-fenced, multi-year, and core funding for gender-specialist and community-based services to reach the most marginalised women, including "by and for" services. Our research suggests that this would reduce rising demand across statutory services while also addressing the escalating rates of women's unmet needs.

To achieve this, HM Government should ensure that all current and future programmes that have been set up to support those experiencing multiple unmet needs include gender-specific strands with sustainable and long-term funding.

6

Conclusion

Women with multiple unmet needs in Northumberland and Tyne and Wear experience a combination of systemic disadvantages linked to their gender and socio-economic status, which leads to overall poorer outcomes.

Pre-existing disparities in regional health and wealth have been exacerbated by the pandemic and cost-of-living crisis, with a significant impact on those at the sharpest edge of inequality – women with multiple unmet needs. As we move beyond the legacy of the pandemic and collectively grapple with how to improve the lives of everyone in society, Transforming Services for Women's Futures marks a timely contribution and provides concrete recommendations for change to make public services better meet the needs of the most at-risk women.

We now need to take stock and revitalise our public services so that they are meeting the needs of the most disadvantaged populations in the most deprived areas. To make the government's commitment to "levelling up" the country by addressing inequalities within and across regions a reality.

This research offers an opportunity for the North East Mayoral Combined Authority, and all prospective devolution deal areas, to consider the needs of women with multiple unmet needs to maximise the opportunities generated by devolution, investment from social care reform and wider changes to the health and social care system.

We urge all relevant players to maximise the opportunities generated by devolution, investment from social care reform, and wider changes to the health and social care system. The case for change is resoundingly clear; it is now for policymakers and government to act decisively and deliver boldly.

Acknowledgements

Agenda Alliance and Changing Lives wish to thank:

- The Smallwood Trust for funding this project;
- Co-production has been the bedrock of this research project and we wish to thank each and every woman with lived experience who contributed, whether it be through completing our survey, participating in our interviews, or attending a focus group, with special acknowledgment to our core group of researchers with lived experience, Deb, Erica, Gail, Haley, Lorna, Nici, and Steff, as well as Naima for her support with our Expert Advisory Group;
- All of our interview and focus group participants who shared their professional experience, regional knowledge and identified opportunities for change;
- Independent researcher: Dr Janet Howard;
- Project evaluators: Dr Hayley Alderson and Dr Ruth McGovern;
- Our Community of Practice: Judith Adams, Safeguarding adults (SGA) at Northumberland local authority; Abbi Buchanan, Office of the Northumbria PCC; Anna Capstick, Probation service; Sarah Charlton, Changing Futures; Joan Flood, Safe Newcastle; Suzi Jackson, Freeman Hospital; Beverley Hunter, Changing Futures; Lisa Jones, Sunderland local authority; Sam Keith, Safeguarding adults (SGA) at Newcastle local authority; Rachel Lawson, Northumbria PCC; Rosie Lewis, End VAWG consultancy; Natalie Maidment, Clinks; Emily Malcom, Action Foundation; Lesley Pyle, North Tyneside Domestic Abuse Coordinator; Gillie Robinson, Ben Hoare Bell; Naomi Kenneth, Clean Slate; Becky Rogerson, Wearside Women in Need; Deb Shiel, Homelessness at Newcastle local authority; Fabienne Thompson, NHS England; Claire Wheatley, Northumbria Police; Katie Wheatley, Wearside Women in Need;

- Expert Advisory Group: Baroness Hilary Armstrong, House of Lords; Octavia Aronne, Making Every Adult Matter Coalition; Dr Laura Bracey, Research in Practice; Pavan Dhaliwal, Revolving Doors; Leigh Elliott, Children North East; Brigid Featherstone, University of Huddersfield; Kenneth Ferguson, The Vardy Foundation; Alison Lowe, West Yorkshire Deputy Mayor for Policing and Crime; Joanne McGrath, Northumbria University; Kim McGuinness, Police and Crime Commissioner for Northumbria; Jasmine Mohammed, Safety for Sisters; Cathie Williams, Association of Directors of Adults Social Services;
- And the following individuals, who generously supported us during the development of this report and policy recommendations: Abbi Ayres, National Women's Justice Coalition; Christina Line, Nelson Trust; Richard Lewis, Making Every Adult Matter; Fabienne Thompson, North East and North Cumbria ICB; and Tabz O'Brien, Greater Manchester Combined Authority.



About us

Agenda Alliance exists to make a difference to the lives of women and girls who are at the sharpest end of inequality. We are an alliance of over 100 member organisations – from large, national bodies to smaller, specialist organisations – working in collaboration to influence public policy and practice to respond appropriately to women and girls with multiple, complex unmet needs.

Changing Lives is a nationwide charity helping people facing the most challenging of circumstances make positive change – for good. We believe that everyone deserves a safe home, a rewarding job and a life free from addiction or abuse. We know that given the right support, anyone can change their life for the better.



Agenda Alliance

First Floor West

35-47 Bethnal Green Road

London E1 6LA

adminsupport@agendaalliance.org

agendaalliance.org

Charity number: 1179417

AGENDA
alliance