

The Transforming Together Network

Commissioning and Funding Recommendations

(Advocating for women with multiple unmet needs across the North East)

Introduction

The Transforming Together Network <u>Transforming Together - Agenda Alliance</u> is a coalition of 60 professionals and women experiencing multiple unmet need in the North East. Our Dismantling Disadvantage report <u>TSWF Final Report</u> found that women are at greater risk of death in the North East when compared to the rest of the country. Following this, the Transforming Together network came together to implement real change for the most marginalised women in the region, understanding the barriers to progress locally and demonstrating the power of embedding lived experience across public service design.

Transforming Together recognises and responds to the need for systems-change within public services, to provide better support for women experiencing multiple unmet needs in the North East. The network and its members have focused work around three collectively agreed priorities:

- 1. Data, information sharing and evidence
- 2. Commissioning, funding and power sharing
- 3. Collaboration and convening

About this report

This report focusses on the work we've done and want to further develop in terms of our priority; commissioning, funding, and power-sharing. We convened as a subgroup within this thematic area and concentrated on two core areas of business;

- 1. A review of existing joint VAWG commissioning principles
- 2. Developing specific commissioning recommendations for women with multiple unmet needs

A review of existing joint VAWG commissioning principles

Over the last 18 months we have supported and co-led a review of existing joint Violence Against Women and Girls (VAWG) commissioning principles, which are being applied in the Northumbria area by collective statutory services that fund VAWG services. This essential evaluation asked organisations that support women to provide feedback on how services are funded and whether those funding standards are consistent with their own principles.

We co-led this evaluation with Represent Women Represent Women | Represent.

Amplify. Advocate. and together have supported the Office of the Police and Crime

Commissioner (OPCC) for Northumbria Homepage - Northumbria PCC to help

influence the direction and impact of joint commissioning arrangements that fund
specialised services for women and girls who have experienced violence and abused.

Together, Represent Women and Transforming Together seek to ensure that services for women and girls have the opportunity to assess current practices. Transforming Together is interested in and active in this initiative because it focusses on reforming services for women experiencing numerous disadvantages, who are frequently at the sharp end of inequality.

Developing specific commissioning recommendations for women with multiple unmet needs

In addition to the work detailed above, we have worked hard to co-develop commissioning recommendations, which we would like to explore with statutory and charitable funders in the region in our next phase of work. We regard these recommendations as effective methods to fund, sustain, and improve critical services that assist women suffering various forms of disadvantage.

If our network receives ongoing financial support, we hope to collaborate with local funders and commissioners to pilot and/or expand on these recommendations. We believe that excellent community standards set for women experiencing the lowest levels of inequality would help all women in our region. For far too long, women with multiple unmet needs have been viewed as 'too complex,' and we want to help dispel that myth by creating lasting funding opportunities that will make a significant difference in the lives of women in our region, as well as reducing the percentage of early, unavoidable deaths for women who deserve so much more across our region.

<u>Transforming Together commissioning and funding recommendations</u>

Below is an outline of the five recommendations we would like to build on in our next phase of work;

Commissioning and Funding Proposed Recommendations

- 1. Definition of multiple unmet needs based on gender and location
- 2. Staff Welfare and training: a non-negotiable foundation
- 3. Duty to collaborate and mapping expectations
- 4. Fund the Work That's Smart, Not Soft
- 5. Impact that leads

1. Definition of multiple unmet needs based on gender and location

The North East has higher rates of deprivation, health inequality, and social isolation than many other regions in the country. Women in this area are more likely to have numerous unmet needs due to structural disadvantages.

Women with unmet needs confront overlapping challenges, such as poverty, domestic abuse, poor mental or physical health, and a lack of safe housing, which are not fully addressed by existing services, particularly in areas with persistent inequality, such as the North East. To begin building services for this group of women, service specifications and new funding opportunities should be based on our definition, with an emphasis on how funding fulfils unmet needs.

Funders from statutory and charitable groups should review if new or current services are truly reaching and assisting women whose needs are not being met by mainstream provision.

To help funders make appropriate decisions about what needs to be funded, recommendations should be based on a clear, shared understanding of gendered multiple unmet needs. This definition should also include a supporting narrative about what systemic change should look like for this group of women. In this context, systemic transformation refers to tangible improvements in the lives of women who have many unmet needs, such as health, housing, safety, and welfare, particularly in places with higher inequality.

As a result, we urge that funders, commissioners, and charitable organisations adopt a refined, regionally relevant definition of unmet needs, taking into consideration the distinct inequities experienced by women in the North East. How contracts or grants are approved is also important. To promote equitable and fair processes, funders should employ a standard definition to support this process, ensuring the following:

- Transparent criteria based on evidence and local context
- There is involvement from independent experts and, crucially, women with lived experience of multiple unmet needs in the decision-making process
- Applicants have a helpful framework to demonstrate how their services address systemic trauma and local inequalities

There is additional concern that funders sometimes lack the necessary understanding of systemic trauma and the needs of women in these communities. Ongoing education and engagement with frontline organisations are essential, a definition would support this educational piece of work and ensure consistent learning.

2. Staff Welfare and training: a non-negotiable foundation

Staff welfare and training are not optional add-ons—they are essential, foundational elements in every funding opportunity. Adequate investment in these areas ensures staff can sustain the emotional and practical demands of supporting women facing multiple disadvantages.

Funding should be ringfenced in each contract to cover costs for regular, scheduled support sessions (e.g., monthly group supervision), provision for external counselling or mental health support, and staff time allocated to attend training and support sessions.

Why Is this a priority?

As Zoe Lodrick states, "staff wellbeing is paramount—staff first, then the people we serve. Staff who are well-supported provide better, safer, and more consistent care".

Prevention of burnout: without structured support and training, staff face high risks of emotional exhaustion, secondary trauma, and burnout, undermining both their own wellbeing and organisational effectiveness.

Quality of care: well-supported staff can offer compassionate, trauma-informed, and effective support, directly benefiting the women they serve.

The following should be embedded in all service budgets:

1. Reflective practice and expert emotional support

- Emotional, peer-based support with regular, facilitated reflective practice or peer supervision sessions
- Safe spaces for debriefing and sharing experiences
- Access to external counselling or mental health support when needed

2. Trauma-informed training

- Core principles of trauma-informed care and being trauma responsive
- Recognising vicarious trauma and self-care strategies
- Boundaries and safe working practices

3. Ongoing professional development

- Evidence-based training updates on relevant issues (e.g., domestic abuse, mental health, substance use)
- Access to resources and up-to-date best practice

4. Practical support

- Flexible working arrangements where possible
- Adequate time for breaks and annual leave
- Clear policies for workload management

Staff wellbeing and training must always be fully funded, never treated as an afterthought or secondary to service delivery. When staff are well supported, the quality of care for women facing multiple disadvantages is consistently higher, safer, and more sustainable.

3. Duty to collaborate and mapping expectations

The legal and ethical responsibility ("the Duty") seeks to guarantee that statutory organisations collaborate to commission and deliver community support services to victims of domestic abuse, sexual abuse, and serious violence.

This collaboration should address all types of violence against women and girls (VAWG), not just DA, to address prior gaps. The goal is to streamline the victim's experience, from initial disclosure (to any agency or group) to recovery, by removing barriers and ensuring support is available and coordinated.

Funded services should be specifically compelled to collaborate, including participation in forums such as a Women's Multiple Unmet Needs Forum (MUN). Forums like this one could help to establish a regional case management support system for women most excluded from VAWG processes. Statutory organisations must actively participate and be held accountable for the results.

If a forum like the one described above were established, there would be possibilities to collect data on the demography of women in each local authority region, and their needs. This would enable mapping demands based not only on gender but also on other intersecting criteria (race, economic status, geography, disadvantage, and so on). Mapping resources to the most marginalised groups would be a consequence, which in the future would aid in navigating and prioritising an intersectional analysis in all planning and commissioning initiatives.

4. Fund the Work That's Smart, Not Soft

Why trauma-informed models demand contract funding. We can use the power of the network to provide models of care that work and what we believe should be financed as core work for women's recovery and safety.

This approach acknowledges the pervasive impact of trauma, particularly for women with many unmet needs, and provides treatments that are safe, empowering, and therapeutic.

In the West Midlands, trauma-informed concepts are divided into three best-practice levels:

- Trauma-Informed: Being aware of and understanding the impacts of trauma.
- Trauma-sensitive: Changes to prevent recurrence of trauma.
- Trauma specialists provide highly competent therapies for complex trauma. All
 work with women experiencing various disadvantages should fall within the
 trauma specialist paradigm, where competence is valued and lives are
 transformed.

Why It matters

Historically, some of the most important services—particularly those that assist women—have been discounted as "nice to do." As a result, they frequently rely on short-term funding that do not appreciate their expertise or provide security.

We want to see more services supported through long-term contracts. Contract funding frames this job as important and expert, rather than optional or additional. It underscores the importance of constant, high-quality service delivery and long-term impact, which are not always guaranteed by grant financing.

The case for smart finance; quality over quantity: huge numbers served are not the only indicators of success. Quality work based on evidence and expertise leads to deep, long-term change—safety, healing, and rebuilding lives. This should be viewed as part of a trauma-informed paradigm for women who have numerous unmet needs.

In relation to the point above about quality, the simple things matter; seemingly small interventions, such as a creative arts session or a safe outdoor location, can have transformative results. These are not "extras"—they are essential for trauma recovery.

Smart methods of working—examples

A Story of Hope (Her Circle): Peer-led narrative work promotes trust and assists women in processing trauma. The Story Chair (Changing Lives): Creative storytelling helps women reclaim their voices. Tina's Haven: Nature-based therapy provides a safe space and reconnection, which are essential for trauma recovery. The Arts and Creative Sector: Long neglected, creative therapies have been shown to help with trauma healing, self-expression, and mental health. They must be completely integrated with trauma specialist services.

According to research, trauma-informed and trauma-specialist approaches prevent recurrent trauma, increase participation, and improve mental health outcomes. Trauma-informed, trauma-specialist, and creative interventions are not "soft"; they are necessary, evidence-based, and transformative. Funding them through contracts rather than grants recognises this reality and ensures the consistency and quality that women deserve.

5. Impact that leads

Storytelling humanises data, making it more accessible and relatable. Stories illustrate individuals' experiences, how they overcame challenges and real-world differences

made by services. Narrative reporting may motivate stakeholders and inform strategy by highlighting successes and lessons learnt.

Funders and commissioners must actively listen to the stories of women facing numerous unmet needs. Qualitative information, such as personal accounts, provides significant insight into what works and reveals gaps that quantitative data alone may overlook.

We recommend that storytelling be utilised more frequently and as a primary reporting metric for services that deliver the work. By integrating quantitative data (for example, the number of persons treated) with qualitative evidence (stories), we may assist services to better express their purpose and impact, whilst influencing strategy.

Collaborative learning and best-practice sharing enable regular, open platforms for exchanging successes and challenges. This would be a game-changing approach to share success stories with other sectors that support women facing multiple unmet needs.

Document and disseminate case studies or "impact stories" throughout organisations. Encourage peer review and collaborative working groups. A transparent and accessible procedure may include:

An online platform or dashboard open to all stakeholders that publishes reports on a regular basis in easy-to-understand language and graphics. Open call for partners and women to share their stories and perspectives. We can co-design a storytelling-based impact reporting template that could be transformational