

# Minutes of the APPG on Domestic Violence and Abuse Meeting

## Sexual Violence within Intimate Partner Relationships: How will the Domestic Abuse Bill Help?

**2-3:30pm, Monday 15<sup>th</sup> July**

Committee Room 6, House of Commons

**Chair:** Jess Phillips MP

Since the announcement of the Government's intentions to publish a domestic abuse bill, concerns have been raised about the limiting the focus to the form of abuse alone, including by this APPG. A siloed approach ignores the inherent overlaps and intersections with domestic abuse and other forms of violence against women and girls (VAWG), and does not reflect women's lived experiences of abuse.

The Government have published their draft domestic abuse bill, and the APPG wants to take the opportunity to examine the prevalence of sexual violence in domestic abuse cases, and discuss how we can improve the response to sexual violence in the upcoming legislation. It will also enable the group to discuss how the scope and remit of the proposed domestic abuse commissioner could be expanded to ensure the role's work reflect women's experiences and makes a difference to the response they receive. The meeting was chaired by Jess Phillips MP, and the other parliamentarians in attendance included –

- Helen Whately MP
- Baroness Lister
- Baroness Hamwee

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### Jess Phillips MP

Jess welcomed attendees to the meeting, and highlighted that the domestic abuse bill was due to be introduced into Parliament imminently. Jess noted that the meeting will be focusing on sexual violence within intimate partner relationships, and that as the group always have a survivor voice in the meetings the first speaker would be Annie.

### Annie, survivor and campaigner

Annie opened by emphasising how hard it is for survivors to talk about their experiences of sexual violence. She was with her ex-partner for 27 years, and thought he was 'perfectly charming' – and to begin with, that's all she experienced of him. Once he began to be abusive, almost all the violence Annie experienced was sexual and her ex used it as a tool to carry out his coercion and control over her. Annie added that she had experienced two separate assaults as a child, she was raped when she was 13 years old, and assaulted by her friend's step father when she was 15. She shared this history with her ex-partner at the

beginning of their relationship and reflected that he exploited this to amplify his sexual abuse of her.

Annie shared that she has read through both the draft domestic abuse bill and the victim's strategy, and was disappointed and saddened that reproductive abuse is not covered in either. She added that this form of abuse is much more prevalent than people realise, and she herself wasn't aware at the start that her ex had been monitoring her periods. As a result of her ex raping her, and ongoing experiences of reproductive monitoring and control, Annie fell pregnant. Despite leaving him at 8 months pregnant, she 'couldn't get rid of him' and the abuse and violence continued leading to an emergency caesarean and hospital visits post giving birth.

Any time Annie has felt that she was gaining control of her life again, he took that away and she has continued to suffer post-separation abuse. She has had to move for safeguarding, and as a result of a court case that went in her ex's favour she hasn't seen her children since 2014. Annie urged for survivors to be heard as the bill progressed, and for reproductive abuse to be given much more attention and action.

### **Dianne Whitfield, Rape Crisis England & Wales**

Dianne set out that Rape Crisis take a feminist approach, and are clear that sexual violence is a cause and consequence of women's inequalities. She highlighted that research indicates that 75% of domestic abuse victims have suffered sexual violence, but that only 20-30% of people who come into Rape Crisis centres report that the sexual violence for which they are seeking support has happened within an intimate partner relationship. Dianne noted that Rape Crisis and Women's Aid are sister organisations, with a shared understanding that sexual violence and domestic abuse can happen on a spectrum, and have a clear understanding of the specialism and expertise they have in each area.

Dianne set out that in response to the domestic abuse bill consultation, Rape Crisis advocated for the legislation, and the commissioner, to cover both sexual violence and domestic abuse. She added that the forms of abuse do need to be considered and dealt with separately, but when sexual violence is so prevalent it's not clear why it hasn't also been included. Dianne added that the lack of focus is evident in the lack of commissioning of sexual violence services, with services 'feeling invisible' despite that in the year 2017-18, there was a 17% increase in people using them from the year before (2016-17).

Dianne noted that people's increased confidence in reporting sexual violence, is not mirrored in their ability to achieve justice. She highlighted that while the number of rape cases reported to the police nearly tripled between 2014 and 2018, the number of cases charged and sent to court fell by 44% and there is currently a 4% chance of getting a rape case to court. Dianne concluded that it is not possible to ensure women get the support they need or any justice, and it's therefore vital for the commissioner's remit to include sexual violence, both within and outside of intimate partner relationships.

### **Jacqui Kilburn, Women's Aid Federation England**

Jacqui set out the history of the clear understanding of the prevalence and impact of sexual violence and rape within intimate partner relationships, but noted that this form of sexual violence is probably lower as it is invisible in statistics and/or recorded incorrectly. She added that the response on sexual violence needs to improve for survivors, particularly when

persistent poor attitudes and myths prevail; including research by EVAW which found that '1/3 of men do not believe a women can change her mind after sex has started'.

Jacqui shared a number of survivor's experiences with the group, and noted that survivors fear that they won't be believed and fear the repercussions of coming forwards. Jacqui added that this is why Women's Aid and Rape Crisis work all year round to support survivors, but that while survivors deserve support from these services, they also deserve national frameworks and to be on advisory advice boards to ensure their voices are listened to and that myths are dispelled.

Jacqui also set out that survivors are being let down by domestic and sexual violence are not being treated as a public health issue. She discussed the harmful impact of the two-child limit, which requires survivors to disclose their experiences of rape to access tax credits and is creating stark choices between poverty and safety. She advocated for a whole systems approach; such as Women's Aid's Change that Lasts approach, for services to be fully funded, perpetrators to truly be held to account, and to ensure that legislation that works for all survivors.

### **Dr Ravi Thiara, University of Warwick**

Ravi highlighted research that she has undertaken on the experiences of minoritised women. Most of the women had experienced regular sexual violence, but that this was often complex due to their intersectionality; for example, cases of trafficking where women had been targeted, bore children and were exploited and abused through their immigration status. Ravi added that minoritised women face barriers to accessing support, and face a significant lack of belief.

Ravi also set out that disabled women experienced a high level of sexual violence, despite often being viewed by society as asexual. She noted that for some disabled women and minoritised women, sexual violence is seen as a 'natural' part of an intimate partner relationship, and that this is reinforced in society through the incorrect belief that sexual violence is provoked by women's own behaviour.

Ravi emphasised that it's difficult for any survivor to talk about their experience, but there is a particular silencing of sexual violence survivors. She stated that this is reflected in the time it takes for some survivors to access the support they need, with it often taking between 2-7 years. She also noted that for survivors, justice does not always mean going down the criminal justice route. Ravi concluded that minoritised survivors of sexual violence needed wrap-around holistic support over a longer period, in services that included women who looked like them to help reduce their isolation.

### **Dame Vera Baird QC, Victim's Commissioner**

Vera agreed that it is statistically well proven that sexual violence is a part of intimate partner violence, but that it is much harder to speak about than other forms of domestic abuse. She highlighted that as two thirds of rape is not committed in an intimate partner relationship, it remains important to ensure a separate policy response to sexual violence - particularly due to survivors' different support needs.

However Vera noted that the domestic abuse bill is about to be introduced, and while it won't be able to include all forms of violence against women and girls, we need to be clear that

online forms of sexual abuse and exploitation must be covered by the bill. She added this would need to be done through amendments, but that this was crucial when the survivors were experiencing such a wide range of forms of online sexual abuse - including 'revenge porn', threats, image-based abuse, and deep-fake porn.

Vera highlighted that the government was currently leading an end to end review of rape cases, as a result of the appalling prosecution and conviction rates. She noted that the review is just focused on rape, and not rape within domestic abuse or child sexual exploitation, and recommended that the APPG write a letter to the government stating that the review should be broader than 'rape only'. She added her concern that the sub-group of the Criminal Justice Board involved in the review includes a defence representative but lacked a survivor voice. Vera has now secured a position on the sub-group and is pushing for at least two victim groups to also be included.

### Discussion

- It was highlighted that health is often a key opportunity for identification of abuse, but that this is missed due to the lack of domestic abuse and sexual violence workers in health settings.
- It was noted by the Chair that routine inquiry should not be a difficult ask of those working in health settings.
- There was much agreement about the lack of attention the Department of Health gives to domestic abuse and sexual violence.
- It was emphasised that the framing of domestic abuse as a 'criminal justice' issue was partly to blame, and it needed to be framed in a more sophisticated way reflecting how gender-based violence was a cross-cutting, whole of society issue.
- It was noted that the 'lack of teeth' on requirements on health bodies and the Department to take action on these issues was also a factor.
- There was a comment that if there is domestic abuse in a relationship, which involved sexual contact, then it should always be described as sexually abusive.
- It was highlighted that international standards should be used for sexual violence, as it makes clear that if you're suffering from fear then sex can never be consented to.
- It was suggested that the IRIS programme should focus on sexual violence as well as domestic abuse, and that training on these forms of abuse should be mandated for health workers.

### Action

- Joint letter by APPG and Victims Commissioner to Minister leading the end-to-end review of rape in the criminal justice system, requesting that the review look beyond 'rape only' cases.