

Placing Girls and Young Women at the Heart of Health

PREVENTION, PROTECTION AND PROVISION
OF SERVICES

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FORWARD
Safeguarding rights & dignity

Placing girls and young women at the heart of health: prevention, protection and provision of services

Introduction

This research conducted as part of the research agenda of the WHEC consortium follows on from the previous work done on the services available to young women and girls. Findings from recent studies undertaken by the Office of the Children's Commissioner (2013¹), FORWARD and Imkaan (2013²) indicate that girls and young women have an increased preference, feel safest and most heard in specialist services developed for girls and young people.

To gain further knowledge and insight into their perceptions of various services they have accessed, this research was undertaken focussing on young women.

The qualities and numbers of London-based services available to girls and young women survivors of violence, including FGM, intimate partner violence and sexual violence will be explored, via literature review, a mapping exercise and a focus group discussion where young women shared their experiences of accessing services.

The main aim of this research project is to promote equalities and reduce health inequalities between service provision to older clients compared to young women and girls, through an improved understanding of the gaps, as well as effective services targeted at girls and young women's wellbeing. The services being focussed on are services available to young women and girl survivors of violence – including intimate partner violence, sexual violence and FGM.

Literature review

Violence against women and girls (VAWG) is firstly a violation of their human rights. It is also a crime which can ruin our end lives³. Every country has legislation against violence against the person, and some have legislation specifically targeting GBV i.e. violence against women and girls simply because they are female. This includes those forms of violence usually described as 'harmful traditional practices' - which in this research will focus on female genital mutilation (FGM).

What is universal about GBV is the fact that many victims often suffer in silence and the abuse goes un-reported. GBV is an issue for every community in England and Wales and can affect individuals from any background or socio-economic demographic.

This was reported by Imkaan and Women's Aid Capacity Building Partnership⁴, which stated,

Women and children require support at every stage of their journey, from disclosure of abuse to accessing safety and support, and coping with and recovering from the abuse. Leaving a

¹ Office of the Children Commissioner - We Would Like to Make a Change: Children and young people's participation in strategic health decision-making, March 2013, http://www.childrenscommissioner.gov.uk/sites/default/files/publications/FINAL_REPORT_We_would_like_to_make_a_change_Participation_in_health_decisions.pdf

² Imkaan - Beyond the labels: Women and girls' views on the 2013 mayoral strategy on violence against women and girls. December 2013, <http://www.whec.org.uk/wordpress/wp-content/uploads/downloads/2013/12/Beyond-the-Labels-final.pdf>

³ Home Office - Briefing on Ending Violence Against Women and Girls, August 2015, https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/229477/VAWG_Brief_v3.pdf

⁴ The Imkaan and Women's Aid Capacity Building Partnership, 2015 <https://www.womensaid.org.uk/what-we-do/capacitybuilding/>

violent relationship or situation, or disclosing experiences of abuse, can take many months, even years.

The support of specialist organisations is often critical in helping women through periods of crisis, whilst also supporting them around understanding and recognising the dynamics of abuse, coping with and recovering from their experiences of violence.

A study conducted by Maternity Action and WHEC amongst black and ethnic minority (BME) women affected by violence reported that that

69% of the women who had experienced domestic violence did not seek help from their GP. There seemed to be little trust in the GP's ability to help⁵.

Several BME women who were involved with this research had had bad experiences of not being listened to by doctors. This was linked with language difficulties and not knowing the correct medical terminology. Two women, who had undergone FGM type III, spoke of highly traumatic experiences of childbirth, with doctors not knowing what to do to facilitate the delivery. The women said that these problems still persist, with embarrassment preventing women affected by FGM from accessing healthcare⁶.

According to research by Imkaan, many women fleeing conflict and war have experienced sexual violence, and may suffer severe mental distress as a result⁷. The stigma associated with mental ill health prevalent in some societies can make this already difficult issue even less likely to be reported and therefore addressed by healthcare professionals⁸. The research also suggested that women were unsure as to whether GPs could help with intimate partner violence.

Survivors' Rights: EAW Coalition Briefing Paper⁹ suggested that

Over several decades, a network of dedicated specialist services has been built, whose primary purpose is provide support to victim-survivors to ensure their protection and enable them to deal with the legacies of abuse, alongside prevention work to end VAWG.

Some of these services include Rape Crisis Centres, refuges and specialist domestic violence projects and services designed for, led and run by women from the communities they serve, including black and minority ethnic women. These services provide independent, local advice, advocacy and counselling services as well as sanctuary for women and girls affected by issues such as domestic violence, rape or sexual assault, trafficking, female genital mutilation, forced marriage, child sexual abuse and exploitation.

A third of local authority areas in the UK have no specialised support services at all for girls and women suffering violence.¹⁰ Less than one in ten local authorities have specialist services for women from minority ethnic communities; and most women in the UK have no access to a rape crisis centre.¹¹

⁵ Briefing: Women's voices on health: Addressing barriers to accessing primary care, WHEC, May 2014 <http://www.whec.org.uk/wordpress/wp-content/uploads/downloads/2014/06/Briefing-final.pdf>

⁶ Ibid.

⁷ Between the Lines Research Briefing: Service Responses to Black and Minority Ethnic Women and Girls Experiencing Sexual Violence, Imkaan and University of Warwick (SWELL) (2015)

⁸ Ibid.

⁹ Survivors' Rights - The UK's new legal responsibilities to provide specialist support for women and girls who have experienced violence: EAW Coalition Briefing Paper, 9 September 2015,

¹⁰ http://www.womensaid.org.uk/domestic_violence_topic.asp?section=0001000100220037

¹¹ Ibid

Benefits of specialist services

The benefits of specialist services for women and girls are stated in 'A Guide for Commissioning Services that Support Women and Children Survivors of Violence' published by Imkaan and Women's Aid Capacity Building Partnership¹². In funding independent dedicated specialist services, whose primary purpose is to address and prevent VAWG, commissioners can be assured of a holistic approach to addressing VAWG in their area. These specialist organisations strive to be agents of social change through supporting survivors as they seek to change public attitudes, raise awareness of professionals, educate children and young people, hold perpetrators to account and prevent future violence.

The Survivors' Rights EAW Coalition Briefing Paper explains that 'specialist women's services have led the way in creating an empowerment approach, which seeks to restore the control to women and girls that is stolen by violence'¹³. The support provided aims to create an environment in which survivors can exercise self-determination, whilst not feeling controlled by professionals. It is important that services are independent as women who have been affected by violence may lack trust in statutory agencies and the criminal justice system. According to research by the Women's Resource Centre, women prefer to use specialist services as they provide an independent, confidential, safe, women-only space¹⁴.

Out of 1000 polled respondents, eight hundred and forty women said an advantage of seeking out women-only services was that it made it easier to talk more openly about their lives and experiences. Other themes that emerged here were that women had a feeling of safety, of being listened to, being more confident to participate in discussions and empowered – all without the unwanted attention of men.

Providing support that is sensitive to the gendered dynamics of violence is a crucial component of specialist VAWG services. The poll confirmed that of the 1,000 questioned:

97% stated that a woman should have the choice of accessing a women-only support service if they had been the victim of a sexual assault; 78% thought it was important to have the choice of a woman professional for counselling and personal support needs.

Women from minority groups want to access services run by women from their own or similar, backgrounds who will have a better understanding of their experiences and issues, and who may have greater empathy than people who do not share their backgrounds. Such specialist services offer therapeutic support, counselling, peer groups and many services in languages other than English, given within a sensitive framework and a safe environment¹⁵.

Challenges facing specialist service organisations

The negative impact of cuts to funding has been aggravated by some commissioning processes that have failed to take account of service user needs or the contributions of specialist services¹⁶. When

¹² Successful Commissioning: A guide for commissioning services that Support Women and Children Survivors of Violence published by Imkaan and Women's Aid Capacity Building Partnership, 2014

<http://imkaan.org.uk/post/85013120171/successful-commissioning-a-guide-for>

¹³ Survivors' Rights: The UK's new legal responsibilities to provide specialist support for women and girls who have experienced violence EAW Coalition Briefing Paper, 2015

¹⁴ Why women only? The value and benefit of by women, for women services, Women's Resource Centre, 2007

¹⁵ Ibid

¹⁶ See 9

combined with limited capacity in the specialist VAWG sector to fully engage in commissioning processes, these results in huge challenges to such specialist organisations. Investment has focused on the “tip of the iceberg”, such as victims assessed as being at high risk of being murdered or those that choose to report to the police – with a corresponding lack of investment in the services which provide earlier interventions, longer term recovery, and which help prevent re-victimisation.

Findings by Women’s Aid and Rape Crisis¹⁷ suggest that the current model for funding specialist domestic and sexual violence services is not fit for purpose. Many services are under huge financial pressure and are drawing upon their reserve funds to survive, whilst some have already been forced to close. They predict that more services will be lost in the future if they continue to be funded in the same unpredictable manner. This report therefore recommends that government introduces a sustainable and secure funding model which ring-fences funds for specialist services. This will require cross-party support to ensure consistency and continuity of service provision.

Specialist services face other challenges; they are seen as niche, servicing only a few communities. There is an assumption that these specialist services are unable to provide services for mainstream communities although it is increasingly [mistakenly] being seen that generic service providers can just as easily provide the services Black, Asian, minority ethnic and refugee (BAMER) communities need. This colour blind approach has been proved to be an incorrect paradigm in other areas of race relations so it is unclear why this development is gaining ground when it comes to health services.

The issues that some BAMER services users are dealing with are complex and are compounded by elements of culture/tradition and religion. In many cases, unless a great deal of effort has been made by mainstream service providers to truly understand the context, BAMER service users will not get a service that truly meets their needs. A non-commitment to support for specialist services is seen by BAMER communities as a lack of prioritisation of their issues and to some extent of themselves.

Mapping existing services in London

It was a challenge to secure this information as there is no composite directory of voluntary sector organisations/services. The Greater London Council and local authorities used to produce directories of organisations/services in their boroughs. However with the demise of specialist units in local authorities like the community development, women’s, race relations and welfare rights units, the sources for up to date information on services to BMER communities have been lost.

There was an additional challenge in that there are very few services targeted solely at/for girls and young women. Services are usually generic for all females affected by violence irrespective of age. Where specialist services exist, the services are segregated by race, ethnicity or religion not age.

Across London there are a range of specialist organisations which provide women-only spaces for women and girls victims of violence from various ethnic minority communities. Women and girls using such services may be victims of gender-based or so called ‘honour-based’ violence and may be affected by different forms of VAWG. These services exist because language and cultural barriers may prevent victims seeking help; therefore specialist organisations play a significant role in

¹⁷ All Party Parliamentary Group on Domestic and Sexual Violence, Women’s Aid, Rape Crisis: The Changing Landscape of Domestic and Sexual Violence Services, 2015, http://www.academia.edu/12302583/2015_The_Changing_Landscape_of_Domestic_and_Sexual_Violence_Services_All-Party_Parliamentary_Group_on_Domestic_and_Sexual_Violence_Inquiry

supporting women and girls by providing culturally sensitive and empowering services, provided by skilled professionals who understand their needs.

Specialist services available include refuges, domestic violence support groups, drop-in centres, advice services, community outreach, campaigning, advocacy and lobbying activities.

The size and reach of the services available varies considerably. Some are very small, with only a couple of staff members (who may even be part-time) supported by volunteers, while others may be branches of larger, national organisations and therefore have greater capacity and a more diverse range of services.

Some organisations have expanded their services as their client-base has changed. For example, Latin American Women's Aid supports Latin American women and women from other Black and minority ethnic (BME) backgrounds and partners with other BME organisations to provide particular services. Another example of a service which supports a broader client-base than its name suggests is the 'Al Hasaniya Moroccan Women's Centre', which supports women from any Arabic background living in London – not just Moroccan women. It has a particular programme for women aged 16 – 25, which provides advocacy and support to clients who would not strictly speaking be women. IKWRO provides advice and support on issues of forced marriage, child marriage, so called 'honour-based' violence, domestic violence and FGM to not only Iranian and Kurdish women but also to Middle Eastern and Afghan women and girls.

There are a few well-established women-led organisations working on issues of violence (some of whom are listed below) which indicate the diverse range of organisations providing services to various communities.

Asha and the Kiran Project are organisations which supporting women of South Asian origin aged 16 and over, who are threatened with or experiencing violence

The Asian Women's Resource Centre (AWRC) works towards 'ending violence against women and girls' while ensuring that the needs of 'BAMER women are addressed in line with the ethos of "led by and for" '. AWRC provides domestic violence and advocacy services, including provision for women in emergency situations.

Ashiana Network specialises in helping BME women, in particular, women from South Asian, Turkish & Iranian communities, aged 16-30 years who are at risk of domestic violence and sexual violence. At the time of writing, their website indicated that they had closed their counselling waiting list from a particular area, which suggests that the service is oversubscribed. They offer specialist services to girls and young women who are affected by harmful practices such as forced marriage, honour based violence and FGM.

Newham Asian Women's Project supports South Asian women who are fleeing domestic violence, managing a number of refuges which can be accessed by women who meet certain criteria.

Karma Nirvana provides education on forced marriage and honour-based violence, as well as providing support for women and girls affected.

Other specialist organisations for BAMER young women affected by VAWG include IMECE, which works with Turkish-speaking women age 18+ by providing support, advice and advocacy to women and girls experiencing and escaping all forms VAWG.

Imkaan is another BME organisation which provides services for girls and young women, describing themselves as ‘providing a collective voice for the BME violence against women and girls sector’. They work strategically to ensure that policy and practice around violence against women and girls is reflective of their actual experience.

Southall Black Sisters, provides information, advice, advocacy, practical help, counselling and support to women and children experiencing domestic and other forms of gender-related violence. They are a long-established entity and have been supporting women for more than thirty years.

Jewish Women’s Aid provides support, advocacy and refuges for members of the Jewish community, ensuring that cultural and religious needs are taken into consideration as services are provided.

Holistic support is important for girls and young women experiencing VAWG and many specialist organisations aim to consider the broader aspects of care for the individual. LAWRS (Latin American Women’s Rights Service) supports Latin American women by empowering them to pursue personal and social change, so that women can assert their right to be free from all forms of discrimination and violence and so they can lead empowered and fulfilled lives.

Appendix 2 provides information by Borough (London only) of the services available to BME women affected by violence.

Services for girls and women affected by FGM

When examining voluntary organisations which focus on supporting girls and women affected by FGM in London, research indicates that there are surprisingly few.

Daughters of Eve, who provides holistic support targeted at young survivors or those at risk of FGM state on their website, ‘we at Daughters of Eve come from FGM practicing communities. We have heard all the opinions for and against the practice and know all about the social and health impacts’. Daughters of Eve provide support, advice and empowerment to the young women who access their services.

FORWARD (the Foundation for Women’s Health, Research and Development) works closely with migrant communities to frame FGM as a human rights violation, informing affected communities about the health implications and laws. FORWARD works through a series of comprehensive programmes including a Community Programme, Diaspora Programme and various youth programmes which educate young people about FGM and support young women to speak out against the practice. FORWARD also has a schools programme targeted at not only raising awareness among education professionals but also with the school children themselves – in 2015 the schools programme was extended to primary schools (where girls are most at risk). FORWARD also undertakes advocacy and campaigning with policy makers and provides training to professionals with child protection responsibility.

Black Women’s Health and Family Support (BWHFS) state on their website that they undertake awareness programmes specifically in Tower Hamlets, Newham, Hackney and Waltham Forrest as well as providing and support to affected women by telephone. BWHFS also hold coffee mornings that affected women can access for support.

Iranian and Kurdish Women’s Rights Organisation (IKWRO) work closely with FORWARD to campaign against FGM in order to ensure that professionals and policy makers do not solely associate FGM with African communities. IKWRO offers advice, support and free counselling.

The Dahlia project is a safe space and support group for affected women and girls. The project provides counselling and signposting to other services (if required).

There are health clinics that provide services –particularly de-infibulation services- for women with FGM type III, after counselling with respect to the process and aftermath. In 2014 UCHL opened the first specialist paediatric FGM service for girls under 18 suspected to have had or be at risk of FGM. See appendix 3 for list of clinics.

Focus Group

Structure and constitution

The focus group was made up of BME women of age under 30, who spoke freely and openly about their experiences of accessing various health services and gave their perspectives on available services they had used. All focus group members had some sort of association with FORWARD and a wide social circle. As well as drawing on their personal experiences, participants were encouraged to reflect and share experiences of friends and family who had sought out services, to enhance the discussion.

A ‘safe space’ was established at the beginning of the session, with facilitators explaining that if any participant felt uncomfortable at any point, or did not want to partake in a particular part of the focus group, she was welcome to leave the room and have some ‘time out’, in a safe and secure setting, with no obligation to re-join the discussion.

Introductions were made at the start. As well as participants, two facilitators attended, both of whom were working on the research and were therefore familiar with the topic, plus an observer. Notes were made throughout the session, with one facilitator leading on asking the questions and the other writing down what was said ‘verbatim’, which was later transcribed. It was felt that the material was potentially sensitive; therefore using recording equipment was not appropriate. Notes were taken anonymously. Direct quotes have been used throughout the write-up, indicated by indented, italicised phrases.

Methodology

Whilst the facilitators worked through a series of questions during the focus group, the group members were encouraged to speak freely on the topics and to refer to other subjects if particular topics touched on other relevant information that they were happy to share. The open ended questions had been prepared with the expectation that the topics would prompt further discussion. The discussion was to be free-flowing, with participants contributing when they wished; no one participant was put ‘on the spot’ or asked a direct question.

The Women’s Health and Equality Consortium was explained and contextualised as a strategic partner of the Department of Health. FORWARD’s involvement as a WHEC partner was explained and any queries raised were clarified.

The participants were informed that the purpose of the focus group was to build on the findings from recent studies undertaken by the Office of the Children’s Commissioner, FORWARD and Imkaan which showed that girls and young women have an increased preference, feel safest and most heard in specialist services developed for girls and young people.

The participants were informed that FORWARD was conducting a research called ‘Placing girls and young women at the heart of health: prevention, protection and provision of services’, the purpose of which was to explore the services available for girls and young women survivors of violence, including FGM, intimate partner violence and sexual violence. It was explained that this focus group

was a key part of the research, which included the mapping of services in London and a literature review as to the types of specialist services available for girls and young women.

The semi-structured focus group was in three sections – awareness of specialist services; benefits of using specialist services; barriers to accessing specialist services; and recommendations.

Findings

The focus group participants were aware of a number of specialist FGM services, mainly because of their various links with FORWARD via the Advocacy and Youth Programmes. The participants were not sure if other young women without similar links would have necessarily heard about such specialist services, although they were aware that sometimes such services are advertised in mainstream settings, such as in doctors' surgeries. One of the participants had done voluntary work in a women's-only service for victims of rape whilst she was at university, and had therefore become familiar with the services they offered.

Participants acknowledged that there was – in their opinion - a place for mainstream organisations.

Organisations like the Samaritans can be useful, as they are across the board. You might want to get pastoral support from them, or another mainstream source.

One participant suggested that she was more familiar with services geared to young people rather than young women specifically. The example given was of Genito-Urinary Medicine (GUM) clinics which have services designed for young people.

The Women and Girls Network (WGN) was also mentioned as a service for all young women. Participants reported that they provide a variety of free counselling to women in London who have experienced gendered violence, as well as advocacy services for women and girls who have experienced any type of sexual violence. The Women and Girls Network also runs the 'Young Women's Advocacy Project' for girls who have experienced or are at risk of sexual violence or exploitation, though this is restricted to young women with a connection to Ealing Borough and is therefore quite limited in its reach.

The focus group participants were also aware of Rape Crisis England and Wales, which supports girls and women who have been raped or experienced sexual assault.

The focus group participants were also familiar with Brook but were not sure if they were geared specifically to girls and young women. While none of the group had accessed their services, they were aware of them and the breadth of services available.

Another organisation which was mentioned was Eaves, which provided support and housing for women fleeing domestic violence, sex trafficking as well as women wishing to exit prostitution, which sadly, had had to close in October 2015 as a result of a lack of funding.

Women's Aid was mentioned as another mainstream organisation which group members were familiar with. The group mentioned that Women's Aid provided services specifically for women and girls affected by domestic violence, but did not have enough knowledge to elaborate on the types of services provided.

When asked about specialist services, especially the benefits of having specialist services, the focus group considered that such services had an important role to play in meeting the needs of girls and young women.

I think that specialist services for girls and young women are useful as they give women and girls additional options as to where they can turn if they are in trouble or need support.

There was a sense amongst the focus group participants that a specialist service rather than a generic service was preferable, due to the staff having a better understanding of the issues.

I knew of a woman who was sexually assaulted. She had to go into a shelter, but when she got there she found out that there were still men around, so it was not a good environment for her to be in.

The idea of culturally appropriate services meeting the needs of girls and young women more effectively was raised. In terms of organisations working exclusively for women, participants considered that women's community groups bring particular expertise.

Some girls and young women could feel lost if they weren't using a specialist service.

The importance of understanding the intrinsic links between culture and gender was also considered important by the participants. They mentioned some of the culturally-specific services they were aware of, such as IKWRO which provides advice, advocacy, referral and support to women who speak Arabic, Kurdish or Farsi. The Kurdish Refugee Women's Organisation also supports Kurdish and women from other parts of the Middle East, through providing a number of different services.

There were some interesting perspectives around the usage of women and girls specialist services available from community groups –

I was born and brought up here – I can use English, speak English. It's different for people who can't speak English.

There was a discussion about the knowledge base within specialist organisations – with one participant commenting that-

I'm not sure how broad the knowledge base would be in a [generic] community organisation.

Participants concluded that this could be seen as a negative or positive point, dependent on the context. They noted that while a community organisation may not have a huge breadth of knowledge of all issues; it is likely to have in-depth knowledge of the various particular issues affecting specific groups of people. They also thought that small community organisations are also likely to have developed their own networks to which they could refer, if they could not meet all the needs of their clients.

Small, specialist organisations were highly regarded amongst the group.

Some of these organisations are tiny, but what they achieve is incredible.

In terms of accessibility, the focus group participants agreed that there were various methods by which they heard about particular organisations.

A GP's surgery does have a lot of leaflets, photos, posters etc. In one of the youth centres near where I live, there are lots of posters and things, so the information is out there.

The internet was also considered a valuable tool for finding organisations which can provide support, although the breadth of the internet was considered a barrier as there is too much information available online, therefore ascertaining what is reliable can be time-consuming and complex.

I think the internet is definitely useful as a lot of organisations can have a social media presence. They are constantly raising their profile, so it's easy to come across them.

However, there is also a barrier presented by the fact that many small organisations do not effectively use the social media outlets available. They may have Twitter and Facebook platforms but they not be updating them frequently to make them engaging and interesting to girls and young women. Also new platforms are evolving every day and young people quickly learn how to use them and build new networks of contacts faster than most organisations can keep up.

An interesting point was raised by a focus group participant [who had in the past been referred by her GP to IAPT (Improving Access to Psychological Therapies, the mainstream NHS service for treating people with anxiety and depression)], who then made the decision to self-refer to a specialist service instead. The group acknowledged that self-referral is a favoured way of accessing services as it gives a sense of control to the individual.

Self-referral removes a barrier. You have to self-diagnose.¹⁸

The focus group participants clearly stated that specialist services can have very profound, positive impacts on girls and young women.

Specialist services are saving peoples' lives. In a lot of countries, these services are not available. If one woman's life is saved, they are doing some good.

The participants considered that the speaking of community languages amongst staff at specialist services was critically important for removing barriers. Women and girls are more likely to feel comfortable engaging with practitioners if they can speak in their mother tongue.

It's important to understand how culture and gender work to put things together, like at IKWRO, they can then provide services appropriately.

The participants were aware that there had been cuts to the specialist services which they prefer to use when possible.

With cuts and waiting lists, if it's a question of waiting a long time, that will be less helpful. Another example of specialist services is women's refuges – women's refuges have been hit very hard.

An example was given of a local organisation which a focus group member had accessed.

In Harrow where I live, there is an organisation which provides free counselling for Asian women. I self-referred and was told I would get an appointment within 6 weeks – but I had to wait 6 months. They are very short-staffed, volunteer-led, struggling with funding. They are a specialist service but they are really small.

The group were aware of the struggles which community organisations experience in trying to secure funding for their work.

Finding funding is really hard and all these organisations are competing for the same grants. The sector is really competitive. I think smaller charities have to reassess how they survive financially.

There was a discussion around large, mainstream charities which often have dedicated, paid fundraisers, whereas the smaller specialist charities are dependent on staffs who have a long list of other responsibilities, of which fundraising is just one. This means that fundraising cannot be prioritised sometimes even when they are in a constant situation of fire-fighting in order to sustain the organisation. Submitting grant applications is time-consuming and there is never any guarantee of a positive outcome.

¹⁸ To explain further – in that the individual has to have enough self-awareness about the challenges they are facing to be able to identify the best specialist service to help them.

The development of guidelines for funders was suggested, in order to provide smaller organisations with the funding they need to sustain and develop their existing services. One participant gave an example of a philanthropist she knew who raises her own funds [through her business], to be able to deliver tailored support services. This was cited as an example of good practice when it came to ways to thinking about innovative ways to fund specialist services for girls and young women.

The group were aware of the need for more refuge places for women.

If there are more cuts to refuges, women will be at risk and there will be more deaths. If women are facing mental health problems, there will be more issues. There is a lack of mental health services – not enough beds are available. This will lead to more suicides.

Mental health was an important theme within the focus group discussion.

When it comes to mental health – faith can be a big factor for some people. You've got MIND and places, but if you're a Muslim, their approach might be different – different values should be taken into consideration.¹⁹

There were some disturbing comments from participants about the way in which, from their experience, some young women from BMER backgrounds may remain in abusive relationships, suggesting that there are gaps in the provision of services for BMER women experiencing mental health problems.

No-one wants to talk about mental health. There is such a stigma – they want to brush it under the carpet. Whereas in other settings, if you've got a supportive family, there is some sort of resilience. I think that also equates with abusive relationships. As a young black woman, you grow up with the mind-set that you have to be strong. I witness that black women are a lot more likely to live with being abused. A lot of my black friends have developed depression. They will remain in the abusive relationship.

The group made some observations about the dangers of not treating mental health problems; they were clear in what they thought about the government's approach to treatment for mental health problems.

When it comes to mental health, the government don't realise that in not treating it [early], it will cost more in eventually. It saves money in the longer-run if they treat it when it occurs.

The theme of girls and young women remaining in abusive relationships continued. There was a discussion around what constitutes a 'normal' relationship and the societal expectations of girls in some settings / cultures which may make them feel that they should tolerate the way in which they are being treated. One of the participants summed this up succinctly -

People may not realise that they have a problem – they think it's normal. Or they are in denial.

Another factor mentioned was the actual experiences of some girls and young women which may not be in keeping with the cultural or religious expectations. One of the participants mentioned someone known to them who is in this situation -

I know of a young Muslim woman who is sexually active; she may not be accessing any services. A lot of Muslim families don't talk about that sort of thing. They could be lacking in knowledge. There are cultural barriers to accessing sex education.

¹⁹ Later analysis has shown that MIND do specific work with Muslim communities and have produced a guide called, 'The Qur'an & Emotional Health: An Introduction'; however the young woman who made the comment was not aware of this work, nor were any of the other focus group participants, raising questions as to how these services are promoted to target audiences

The focus group mentioned issues around girls accessing contraception. They were aware of the Gillick competency and Fraser guidelines which enable doctors to provide contraceptive advice/services for under-16s, providing that they satisfy certain criteria.

A focus group member reflected on an experience she had had, noting that the presence of men at women's events can have a significant impact on the women present. She shared that she had attended a women's conference for survivors of FGM, which was going well -

There was a certain dynamic amongst the women.

Then a male speaker took to the stage, at which point the atmosphere in the room completely changed and there was a sense that the participants were not comfortable in his presence.

There was a discussion about how important it is to give girls and young women a 'safe space' from men, where they are able to relax, feel confident and talk honestly and openly about how they are feeling and about the issues that concern them.

The act of accessing specialist services was considered brave -

I've had experience of getting counselling – you have to understand what it takes for women to get into a place where they are comfortable to seek support. I could have decided that I didn't want to go back. I kept going because I understood the gravity of the situation I was in.

Individuals known to the group had had bad experiences visiting some NHS services, with examples given of girls and women attending a service once, then not returning.

A woman needs to be embraced, not met with hostility.

There was concern expressed as to the mainstream nature of NHS services, which can have a negative impact on the individual -

I think sometimes it helps to work with people who are like you. I was in CBT and my therapist was from a different cultural background. That happens in NHS services.

GPs were themselves considered a barrier when it came to accessing services.

GPs are stretched – they are not going to refer you until you bug them. You have to do your own research, google things.

Focus group participants also considered that particular issues are simply not discussed in certain cultural settings –

I have a dual heritage [African and Caribbean]. Mental health, sexual health – they were off the table when I was growing up. I would not think of asking my mother.

Language can be another barrier to seeking support from mainstream services, meaning that specialist services are preferable -

Even if you speak English really well, you don't necessarily understand everything.

The group were asked about the nature of the specialist organisations they had experience of using.

I called the Muslim Youth Helpline – they seemed quite professional and knew what they were talking about.

Recommendations around good practice

Considering the Istanbul Convention as a logical spring board, which requires signatories to respond to VAWG using the key themes of Prevention, Protection, Provision and Prosecution, the recommendations made of this project on the way forward fit neatly into three of the themes i.e. Prevention, Protection and Provision.

Prevention of all forms of violence against women and girls:

The current ministerial structure of the UK Government could be improved to better coordinate the provision of domestic and sexual violence services. It is recommended that the government create a new Minister of State within the Cabinet Office whose portfolio would be dedicated to the prevention of violence against women and girls. The Minister's primary responsibilities would be the coordination of service provision on a needs-led basis and the introduction of a sustainable funding model to support and maintain services across the entire country.

At the service provider level, with increased resource provision, all services should integrate specialist interventions targeting girls and young women. This should be based on the expressed needs of girls and young women so that the interventions are exactly what they need. The interventions must include elements of self-empowerment and knowledge building such that girls and young women are empowered to resist all forms of VAW&G and to know where to go for help should they be affected. These interventions should be planned and budgeted for as part of service providers' strategic and business plans to ensure sustainability.

Protection of existing effective services:

Where provision is being made for BAMER communities specifically, the government needs to recognise that there may be particular issues within such communities which require specialist knowledge and understanding. Further, within the context of the communities there is also the need to develop age specialist services.

Building on the idea of a needs-led approach, evidence provided by stakeholders and survivors has demonstrated the need to fundamentally reform the way in which specialist domestic, sexual and Black, Asian and Minority Ethnic Refugee (BMER) services are commissioned. Many organisations have raised concerns that services are allocated using a 'one size fits all' approach that is based purely on financial criteria. The current system does not take into account the specific needs of individual survivors. An equitable, needs-led approach that will guarantee survivors are given access to the service best suited to them should be established.

The All Party Parliamentary Group on Domestic and Sexual Violence believes that joint guidance on the co-commissioning of domestic and sexual violence services should be issued by a coalition of government bodies consisting of the Department of Communities and Local Government, the Ministry of Justice, the Department of Health and local government authorities. Coordinated departmental guidance would ensure that local authorities and health commissioners are better informed about the UK's international and legal obligations to provide domestic and sexual violence services in every part of the country.

The End Violence Against Women Coalition has made a series of recommendations around the provision of specialist services for women²⁰. They recommend that the provisions of specialist VAWG series are provided as statutory. It was suggested that local specialist services should not have to be repeatedly competitively tendered for if their work is proven to be of consistently high quality and valuable to particular communities. Not only will this protect these unique services but

²⁰ See 6

would also result in savings in the tendering process, indicating a value for specialist services and possibly enhancing their reputation in the mainstream sector. This will also help retain staff with expertise in working with particular communities thus improving the quality of service provision.

The final recommendation was around educating commissioners around commissioning processes which will fit with providers offering specialist services at a local level. The specialist VAWG sector has its own quality assessment framework which measures the quality of the outputs of services and this should be made clear to those responsible for the commissioning processes.

Provision of BMER services

It is critical to identify the need for differentiation between specialist women's organisations and the mainstream third sector which is swallowing up funding from many of the smaller, specialised organisations.

The Women's Resource Centre has made a series of recommendations²¹ around how the women's sector can be enabled to develop and provide the specialist services need by communities. BMER groups have the expertise in service delivery but lag behind bigger mainstream organisations in navigating the tendering process. Enabling them to compete on a level playing field will focus on capacity-building to tender to provide services, appropriate resources to maintain services.

Imkaan and Women's Aid Capacity Building Partnership²² have also made a series of recommendations around funding for specialist services for BME girls and women, the nature of provision and staff training. In terms of funding, they recommend that national and local government establish specific funding streams geared at specialist services; for example, ending VAWG; supporting marginalised groups; noting that the safety of survivors is paramount and should be seen as such, regardless of geographical boundaries.

With respect to quality provision, it was recommended that services for women should be run entirely by women, with the staff reflecting the client-base, in terms of needs, identity or background, that services should be tailored to the communities/ groups using the service, both in terms of language provision and cultural awareness and understanding.

Quality provision should as a matter of course be confidential, holistic (as far as possible), incorporating advocacy, practical support, information and further assistance, all provided delivered in a physically comfortable environment.

There is a need for women-only services, particularly those designed to meet the needs of BMER women and girls, to be recognised as an effective way to enable integration and community cohesion, as contact with women-only services boosts self-esteem and confidence for girls and young women, due to the nature of specialist services.

Specialist services for women and girls are often under threat of merger with mainstream organisations which subsume them into generic service provision. It should be recognised that women-only services are very valuable and should have the same public recognition as mainstream services and such provision should be protected.

²¹ See 11

²² See 9

Focus group participants welcomed the opportunity to make recommendations regarding how girls and young women could be placed at the heart of health, in terms of prevention of VAWG, protection and provision of services.

Funding was a key theme which emerged, in respect of both the development of funding for smaller services and the diversification of funding sources. This is crucial to the survival and development of specialist services, which are often operating with very few staff and limited resources.

There doesn't seem to be much guidance for smaller charities applying for funding, but big charities seem to get what they want. This sounds Utopian, but I think we need sort some of strict guidance for funders.

The need for specialist services which reach all those who require them was another component of the discussion. The demise of the Women's National Commission was mentioned, as the participants were aware that it used to examine the impact of cuts on women and girls, but was absorbed into another government department when the Equality Act 2010 came into law and the impact of the WNC has been lost.

Equality needs to be at the heart of policy making.

There was a discussion around the importance of speaking with survivors of different types of violence, in order to specifically ask affected people what type of support they needed. Whilst this is an important exercise, it is often beyond the capacity of small organisations whose priority is to maintain their existing services, which may already be stretched.

There appear to be some ambiguities as to the actual functioning of some community organisations.

There are loads of BME organisations, but I'm not sure what they all do.

This suggests that such services are not successfully promoting themselves to those whose needs they are supposed to be meeting. Although an alternative explanation could be that they have a different target audience to the group who were involved with this particular discussion.

Another factor which came up was the availability of services specifically for girls and young women living in rural areas who may not have the same access to services as those living in urban areas, due to factors such as limited transport to access the service, awareness of and access to information about local services.

There was also a discussion around capacity building for specialist organisations, as focus group participants were aware that specialist organisations often consist of a very small number of staff who may have conflicting priorities in addition to service delivery. Building capacity of specialist organisations was seen as something which could be supported in an appropriate, non-patronising manner.

It is important to note the feeling amongst the focus group participants that specialist organisations often have staff who are experts in their field *and* are from particular backgrounds, and are therefore more likely to be familiar with the types of issues which attendees may be facing. Professionals in mainstream services may be qualified in their fields, but may lack the necessary insight into the needs of particular service users.

Focus group participants agreed that they would prefer to talk with some of a similar cultural background to themselves as they felt that they would feel more comfortable and confident that their issues were being understood.

Conclusions

There are a small number of specialist services in London which are specifically geared to girls and young women who are from BAMER communities. Whilst these services are present, many of them are very small and are operating at full capacity. Focus group outcomes suggest that while mainstream services have their place, that girls and young women interviewed have an increased preference, feel safest and most heard in specialist services developed for girls and young women.

The group are all aware that there is a need for specialist services, although there are capacity issues with many small services which lack the resources to meet the demands of BAMER communities. When specialist services have been used, the feedback is consistently positive, but there may be lengthy waiting lists, therefore the time between referral and self-referral and actually being seen, may be considerable, which is not ideal.

Appendix 1

Focus Group questionnaire

FORWARD Focus Group – 25/11/15 – 5pm to 6pm

- **Welcome everyone and set the ‘safe space’**
- **Encourage people to help themselves to food, snacks etc.**
- **Intro purpose of focus group**
- **Explain format of focus group**

Context

Findings from recent studies undertaken by the Children’s Commission, FORWARD UK and Imkaan show that girls and young women have an increased preference, feel safest and most heard in specialist services developed for girls and young people.

FORWARD is part of WHEC, the Women’s Health and Equality Consortium (WHEC), a partnership of organisations which share common goals of health and equality for girls and women. FORWARD is conducting research called ‘Placing girls and young women at the heart of health: prevention, protection and provision of services’, the purpose of which is to explore the services available for girls and young women survivors of violence, including FGM, intimate partner violence and sexual violence.

Part of the research involves analysing the types of services available, via a mapping exercise and literature review. Another part involves conducting a focus group to speak directly with young people about their experiences of accessing services.

The main aim of this research project is to promote equalities and reduce health inequalities through better or improved understanding of the gaps, as well as the effective services for girls and young women’s wellbeing.

Facilitator to explain that whilst we have some ‘set’ questions, they are really just a guide and that participants are free to talk freely

Intro questions

Are you aware of specialist services for girls and young women?

If so, how did you become aware of specialist services for girls and young women?

What do you think are the benefits of having specialist services for girls and young women?

Do you / your peers use specialist services for girls and young women?

(Respecting confidentiality), could you give some examples of specialist services you are aware of / familiar with?

How would you go about accessing such services? (e.g. GP referral, self-referral, via community group etc.)

Do you have any examples of good practice of using specialist services, either yourself, or amongst your peer group, friends, relatives etc. (example: practitioners who you really felt understood, perhaps due to their background / language accessibility, particularly cultural considerations etc.)

Have you / your peers experienced a lack of capacity amongst existing specialist orgs for girls and young women and if so, how has this affected you?

Could you suggest why there may have been a lack of capacity amongst these services?

Are you aware of any particular services reducing their service provision recently (in the last 2 years approx.)?

If so, can you describe the impacts of this reduction in service provision on either yourself, your peers or your community?

Are you / your peers aware of any barriers affecting access to specialist services for girls and young women?

(If so) please elaborate on the barriers which you / your peers have experienced - perhaps use these as prompts if need be (e.g. lack of availability, unsuitable timings, appointments difficult to obtain, taboo subjects prevent access, inexperienced / unreliable staff, language barriers, physical location, geographical location etc.?)

Is there any other comment you would like to make about the accessibility of specialist services? (thinking in relation to promoting equalities and reducing health inequalities through better or improved understanding of the gaps, as well as the effective services for girls and young women's wellbeing)

Recommendations

What recommendations would you make to improve the availability and accessibility of specialist health services for girls and young women in London?

Is there anything else you would like to say about anything we have mentioned tonight?

Thank you for attending.

Female Genital Mutilation Specialist Health

Services in the UK

London:

1. Acton African Well Women Centre

Hillcrest Surgery, 337 Uxbridge Road,
Acton,
W3 9RA

Tel: 0208 383 8761; 07956001065

Clinic times: Fri: 8:30am - 6:00pm

Contact: Juliet Albert (midwife):

julietalbert@nhs.net

Deqa Dirie (health advocate)

**2. Queen Charlotte's & Chelsea Hospital
African Well Woman Clinic**

Imperial College Healthcare NHS
Trust

Du Cane Road

London, W12 0HS

Tel: 07956 001 065 or 0208 383
8761 or 07730970738

Contact: Juliet Albert (Specialist
Midwife)

Health Advocates - Deqa Dirie and
Mushtag Kahin

Counsellor: - Melanie Mendel

**3. Guy's & St. Thomas's Hospital
African Well Women's Clinic**

8th Floor – c/o Antenatal Clinic

Lambeth Palace Rd.

London, SE1 7EH

Tel: 0207 188 6872

Mobile: 07956 542 576

Clinic time: Mon – Fri, 9:00am - 4:00pm

Contact: Comfort Momoh MBE

comfort.momoh@gstt.nhs.uk

4. St. Mary's Hospital

Gynecology & Midwifery Department

Praed St.

London, W1 1NY

Helpline: 0203 312 6135

Tel: 0207 886 6691 or 0207 886 1443

Open: 9:00 am – 15:00 pm

Contact: Suresh

5. UCLH

African Women's Clinic

University College Hospital

Clinic 3; Elizabeth Garrett Anderson
Wing

Euston Road, London, NW1 2BU

Tel: 0845 155 5000/020 3447 9411

Open: Monday afternoon 2 - 5 pm

Contact: Lata Kamble (consultant) and
Yvonne Saruchera (midwife): on
07944241992

Yvonne.saruchera@uclh.nhs.uk

6. UCLH

Paediatric FGM Clinic

Lower ground floor; Elizabeth Garrett
Anderson Wing

235 Euston Road,

London, NW1 2BU

Open: Once a month – Mondays*

Tel: 0203 447 7396 | Ext. 77396

Contact: Renara Begum -

Renara.begum@NHS.net

**Opening dates – UCLH Paediatric Clinic
Dates (see back page)*

7. Central Middlesex Hospital

Women's & Young People's Services

African Well Women's Clinic -

Antenatal Clinic

Acton Lane, Park Royal

London, NW10 7NS

Tel: 0208 963 7177; 0208 965 5733,
07825106086

Open: Fri. 9 am – 5 pm

Contact: Kamal Shehata Iskander or
Jacky Deehan:

Jacqueline.deehan@nhs.uk -

8. Whittington Hospital

African Well Women's Clinic

Antenatal Clinic Level 5
Magbala Avenue, Highgate Hill
London, N19 5NF

Tel: 0207 288 3482 /3483

Mobile: 0795 625 7992

Open: Last Wed of every month, 9am – 5pm

Contact: Joy Clarke or Huda Mohamed
joy.clarke@nhs.net or
h.mohamed@nhs.net

9. Mile End Hospital

Women's & Young People's Services

Sylvia Pankhurst Health Centre

(pregnant & non-pregnant women)

[GP/Gynae/ self-referrals accepted]

3rd floor, Gynaecology Building,
Bancroft Rd, London, E1 4DG

Tel: 0207 377 7870

Open: 1st Mon of the month, 1.30-4pm

Contact: Yvonne Wilson or Janet Barter
Janet.Barter@bartsheatlh.nhs.uk

10. Northwick Park & St. Mark's Hospital

African Well Women's Clinic -

Antenatal Clinic

Watford Rd.

Harrow

Middlesex, HA1 3UJ

Tel: 0208 869 2870

Open: Friday, 9am – 5pm

Contact:

kamal.shehataiskander@nwlh.nhs.uk

Chelsea & Westminster FGM Service

Provides sexual health, maternity and gynaecology advice and treatment for pregnant and non-pregnant affected by FGM, No GP referral required.

11. Chelsea and Westminster Hospital

Hospital Clinic

Gynaecology Outpatients

369 Fulham Road

London, SW10 9NH

Open: 1st and 3rd Wed of the month,
14:00-17:30

Gynaecology and maternity advice and appointments

Mob: 07812 378 363

Contact: Debora Alcaide- Specialist FGM Midwife

debora.alcaide@chelwest.nhs.uk

12. Charing Cross Hospital (South Wing)

Community Clinic

Fulham Palace Road

London, W6 8RF

Clinic times: 1st and 3rd Wednesday of every month 10:30 am – 1:00 pm

Sexual health advice and appointments

Tel: 020 3311 1579 (Health Advisors)

0208 383 0827; 07920 450045

(Appointments)

Contact: Lazara Garcia Dominguez

Lazara.DominguezGarcia@chelwest.nhs.uk

Email enquires (all aspects of the service): caw-tr.fgmwestlondon@nhs.net

Bristol

13. Charlotte Keel Health Centre

Minority Ethnic Women's & Girl's Clinic

Seymour Road, Easton

Bristol, BS5 0UA

Tel: 0117 902 7111 (direct line)

0117 902 7100 (switchboard)

Open: Drop-In Last Wed of every month,
13:30-15:45

Contact: Manika Singh or Sarah Bailey

14. Lawrence Hill Health Centre

Bristol Community Rose Clinic

Hassell Drive, Lawrence Hill, Bristol,

BS2 0AN

Phone: 07813 016911

Clinic time: Tuesday afternoon only

Contact: Dr Katrina Darke; Sara Roberts

bristolrose.clinic@nhs.net

Birmingham

- 15. Birmingham Heartlands Hospital**
African Well Women's Service
Bordesley Green East
Birmingham, B9 5SS
Tel: 0121 424 3909 or 0121 424 0730
Mob: 0781 753 4274
Open: Mon-Fri 9-5pm
Contact: Alison Byrne (Specialist FGM midwife)
alison.byrne@heartofengland.nhs.uk
- 16. Birmingham Women's NHS Foundation Trust**
Specialist antenatal clinic for women with history of FGM
Mindelsohn Way
Edgbaston, Birmingham
B15 2TG
Tel: 44 (0)121 472 1377 Ext. (407)
Clinic time: Thursday's
Contact: Natalie Shorthouse
Alison.byrne@bwhct.nhs.uk
Natalie.shorthouse@bwhct.nhs.uk

Liverpool

- 17. Liverpool Women's Hospital**
Multi-Cultural Antenatal Clinic
Crown St.
Liverpool, L8 7SS
Clinic time: Thursday morning
Tel: 0151 708 9988 ext.4612

Leeds

- 18. St. James's University Hospital**
Antenatal Clinic
Level 4, Gledhow Wing
Leeds
LS9 7TF
Tel: 0113 2065180

Manchester

- 19. St. Mary's Hospital**
The Warrell Unit
Manchester
Tel: 0161 276 6570

Contact: Dr Fiona Reid (consultant urogynaecologist)

Nottingham

Nottingham University Hospitals – 2 sites

- 20. 98, City Campus**
Hucknall Road
Nottingham, NG5 1PB
Tel: 0115 9691169 ext 55239
Clinic time: Thurs 9:00 – 12:30pm
Contact: Carol McCormick
Carol.mccormick@nuh.nhs.uk
- 21. Queens Medical Centre**
Derby Road
Nottingham, NG7 2UH
Tel: 0115 9249924 ext 61258
Clinic time: Thurs 13:30 – 16:30pm
Contact: same as above

Oxford

- 22. John Radcliffe Hospital**
Oxford Rose Clinic
Level 1 Women's Centre
John Radcliffe Hospital
Oxford, OX3 9DU
Tel: 01865 222969
Open: Monthly, Last Thurs or Fri of the month 10:00-13:00
Contact: Dr Brenda Kelly (Consultant Obstetrician)
Brenda.kelly@ouh.nhs.uk or
oxfordrose.clinic@nhs.net

Scotland

- Maternity services**
- 23. Royal Infirmary of Edinburgh**
51 Little France Crescent
Edinburgh
Tel: 07765 233179
Open: Monday – Friday 9.00 – 17.00
Contact: Dr Anne Armstrong (Consultant Obstetrician) or Vickie Davitt (Specialist FGM midwife)
Email: vickie.davitt@nhs.net

24. St John's Hospital (Howden)

Howden Road West
Howden
Livingstone
West Lothian
Tel: 07765 233179
Open: Monday – Friday 9.00 – 17.00
Contact: Dr Anne Armstrong (Consultant
Obstetrician) or Vickie Davitt (Specialist
FGM midwife)
Email: vickie.davitt@nhs.net

Gynaecology

25. Chalmers Sexual Health Centre

Chalmers Street
Edinburgh
Tel. 0131 536 1511 (or Vickie Davitt
above)
Consultant Gynaecologist – Dr Alison
Scott
Email:
Alison.m.scott@nhslothian.scot.nhs.uk

Opening dates – UCLH Paediatric Clinic

Dates

04/04/16
09/05/16
06/06/16
04/07/16
01/08/16
05/09/16
03/10/16
07/11/16
05/12/16

Appendix 3 London services in by Local Authority

London - wide services

Name	Address	Contact & opening hours	Clients	Services
Asian Women's Resource Centre	108 Craven Park London NW10 8QE	Tel: 020 8961 5701 Mon – Fri 10.00 – 17.00 info@asianwomenscentre.org.uk www.asianwomenscentre.org.uk	Asian women and children only across London	<ul style="list-style-type: none"> • Outreach surgeries • Domestic violence • Advocacy
Southall Black Sisters	21 Avenue Road Southall Middlesex UB1 3BL	Tel: 0208 571 0800 (helpline) Mon, Wed, Fri 9.30 – 16.30 (Closed from 12.30 to 13.30 for lunch) Tel: 0208 571 9595 (general enquiries) Mon – Fri 9:00 – 17:00 (Closed from 12.30 to 13.30 for lunch) info@southallblack.co.uk www.southallblacksisters.org.uk	Black women who face gender based violence, primarily in Hounslow, Ealing and Hillingdon	<ul style="list-style-type: none"> • Support re sexual and domestic violence • Immigration
NIA	P.O. Box 58203 London N1 3XP	Tel: 0207 683 1200 info@niaendingviolence.org.uk www.niaendingviolence.org.uk	Women, children and young people who have experienced male violence in East London	<ul style="list-style-type: none"> • Refuge and outreach services to women with substance misuse problems who have experienced gender based violence • Sexual violence prevention project
Ashiana	Suite 204 First Floor Oceanair House 750-760 High Road Leytonstone E11 3BB	Tel: 0208 539 0427 Mon- Fri 9:30- 12:00 & 13:00- 17:00 info@ashiana.org.uk www.ashiana.org.uk	Black and ethnic minority women and girls affected by domestic violence, sexual violence, forced marriage and honour based violence. Women with no recourse to public funds	<ul style="list-style-type: none"> • Refuge • Advice and counselling • Refuge services for those aged 16-30 years

The Havens	<p><u>Camberwell Haven</u> in south London, near King's College Hospital SE5 9RS</p> <p><u>Paddington Haven</u> in west London, Near St Mary's Hospital W2 1NY</p> <p><u>Whitechapel Haven</u> in east London, near The Royal London Hospital E1 5DG</p>	<p>Tel: 02032991599 (non-urgent) Mon – Fri 9:00 – 17:00</p> <p>Tel: 02032996900 (urgent) 24/7</p> <p>www.thehavens.org.uk</p>	<p>Sexual assault victims, male and female</p>	<ul style="list-style-type: none"> • Forensic examinations • Follow up care • Psychology • Counselling
Wellbeing Connect Services (formally Ebony People's Association)	<p>215 Fore Street Edmonton London N18 2TZ</p>	<p>Tel: 0208 803 2200</p> <p>info@wellbeingconnectservices.org</p> <p>www.wellbeingconnectservices.org</p>	<p>Black and ethnic minority families experiencing mental health and domestic abuse</p>	<ul style="list-style-type: none"> • Domestic abuse service • Mental health • Users carers their children and Family
Refugee Women's Association	<p>Print House 18 Ashwin street EG 3DL</p>	<p>Tel: 0207 923 2412 Mon- Fri 9:30 – 17:30</p> <p>simin@refugeewomen.org.uk info@refugeewomen.org.uk</p> <p>www.refugeewomen.org.uk</p>	<p>Refugee and migrant women</p>	<ul style="list-style-type: none"> • Immigration advice • Support to women suffering domestic violence/other violence

Solace Women's Aid	Unit 5-7 Blenheim Court 62 Brewery Road London N7 9NY	Tel: 020 7619 1357 Tel: 0808 802 5565 (helpline) advice@solacewomensaid.org www.solacewomensaid.org	London residents, women aged 16+ affected by domestic and sexual violence in an intimate relationship	<ul style="list-style-type: none"> • Advice, counselling and emotional support • Family & children's projects enabling survivors to live free from abuse • Refuges for women and children fleeing domestic violence
ADVANCE	Unit 6 162-164 Fulham Palace Road W6 9ER	Tel: 0208 741 7008 Tel: 0208 960 7016 angelou@advancecharity.org.uk www.advancecharity.org.uk	Women aged 13+ living in Hammersmith, Fulham, Kensington, Chelsea, Westminster who are affected by domestic violence	<ul style="list-style-type: none"> • Safety advice • Criminal justice/legal advice • Housing advice
Black Women's Rape Action Project	25 Wolsey Mews London NW5 2DX	Tel: 020 7482 2496 Mon-Fri 13.30 – 16:00 bwrap@rapeaction.net www.womenagainstrape.net	Women and girls who have suffered sexual, domestic and/or racist violence	<ul style="list-style-type: none"> • Support • Legal information • Advocacy
Kiran Asian Women's Aid	P.O. BOX 899 LONDON E11 1AA	Tel: 0208 558 1986 kiran.admin@kiranproject.org.uk www.kiranproject.org.uk	Asian women and children fleeing domestic violence	<ul style="list-style-type: none"> • Refuge • Children's Services • Outreach and resettlement support • Advocacy • Counselling
IMECE Turkish Speaking Women's Group	2 Newington Green Road London N1 4RX	Tel: 0207 354 1359 info@imece.org.uk www.imece.org.uk	BMER, particularly Turkish, Kurdish, Cypriot women	<ul style="list-style-type: none"> • Women only centre for crisis intervention, support and advice to domestic violence survivors • General advice and information for women

UK wide services

Name	Address	Contact & opening hours	Clients	Services
National Association for People Abused In Childhood	Herald House 15 Lamb's Passage London EC1Y 8TQ	Tel: 020 7614 1801 (office number) 9.00-17:00 Tel: 0800 085 3330 (support Line) Mon - Thurs 10.00 – 19.00 Fri 10.00 – 18.00 info@napac.org.uk	All adults	<ul style="list-style-type: none"> • Support line for adults who experienced child trauma of any type
Women in Prison Ltd	Unit 10 The Ivories 6 Northampton Street London N1 2HY	Tel: 0207 359 6674 admin@womeninprison.org.uk info@womeninprison.org.uk www.womeninprison.org.uk	Women in prison who are about to be discharged, and some who have just been discharged	<ul style="list-style-type: none"> • Advice & Counselling • Domestic violence • Housing advice • Mental health • Education / employment
DeafHope	5 Baring Road Beaconsfield Buckinghamshire HP9 2NB	Tel: 01494 687600 (head office) Voice/minicom 020 8772 3241 info@signhealth.org.uk deafhope@signhealth.org.uk www.signhealth.org.uk/deafhope	Deaf women and children who suffer from domestic abuse	<ul style="list-style-type: none"> • Refuge • Advice
Jan Trust	8-10 Bedford Road Wood Green, London, N22 7AU	0208 889 9433 info@jantrust.org www.jantrust.org	Women of all ages from Black African and minority ethnic and refugee communities	<ul style="list-style-type: none"> • Support on issues on violence against women • Support for hate crimes
Latin American Women's	The Printhouse 18 Ashwin street, London,	Tel: 0207 275 0321 Mon – Fri 09:30-13:00 & 14:00-17:30	Latin American women and migrants	<ul style="list-style-type: none"> • Refuge • Advice / information for domestic gender based violence

Aid	E8 3DL	<p>info@lawadv.org.uk</p> <p>www.lawadv.org.uk/</p>		<ul style="list-style-type: none"> • Special support for children affected by GBV
Rights of Women	52-54 Featherstone St., London, EC1Y 8RT	<p>Tel: 020 7251 6575</p> <p>Advice Lines: 020 7251 6577 (Family law) 020 7251 8887 (Criminal law) 020 7608 1137 (Women in London) 020 7490 7689 (Immigration and asylum law)</p> <p>info@row.org.uk</p> <p>www.rightsofwomen.org.uk/</p>	All women in England and Wales, though some advice lines are for just London	<ul style="list-style-type: none"> • Phone legal advice • Guides on legal issues such as domestic violence
Karma Nirvana	P.O. Box 515 Leeds LS6 9DW	<p>Tel: 0800 599 9247 (helpline)</p> <p>www.karmanirvana.org.uk/</p>	People who are affected by forced marriage and honour-based violence	<ul style="list-style-type: none"> • Helpline for advice and support
Jewish Women's Aid	P.O. Box 65550 London N3 9EG	<p>Tel: 0208 445 8060 Mon- Thurs 9.00 - 17.00</p> <p>Tel: 0808 801 0500 (helpline) Mon-Thurs 9.30- 21.30</p>	Members of the Jewish community who have suffered from domestic violence	<ul style="list-style-type: none"> • Confidential helpline • Refuge

London Borough of Camden

Name	Address	Contact & opening hours	Clients	Services
Hestia Camden Domestic Abuse Service (Hestia also has services across London)	9 th floor 5 Pancras Square Kings Cross	Tel: 020 7388 8542 camdensafetynet@camden.gov.uk beverley.howes@hestia.org www.hestia.org	Women and children affected by domestic and/or sexual violence across Camden	<ul style="list-style-type: none"> • Emotional and practical support • Refuge • Floating support service
Nafisiyat Intercultural Therapy Centre	Unit 4 Clifton House Clifton Terrace London NW4 3JP	Tel: 020 7263 6947 Mon 9:30 - 20:00 Tues – Fri 9:30 – 17:30 admin@nafisiyat.org.uk www.nafisiyat.org.uk	Ethnic minority groups from Camden, Haringey, Enfield, Islington	<ul style="list-style-type: none"> • Intercultural psychotherapy
West Hampstead Women's Centre	The Old Library 26-30 Cotleigh Road West Hampstead NW6 2NP	Tel: 0207 328 7389 info@whwc.org.uk www.whwc.org.uk/	All women in West Hampstead	<ul style="list-style-type: none"> • Crisis intervention • Asian/Somali/Irish women's support groups • Drop in sessions: Mon – Fri 10.30 – 13:00 and 14:00 – 16:00

City of Westminster

Name	Address	Contact & opening hours	Clients	Services
Angelou - A partnership of 9 specialised organisations	Unit 5 The Lancasters 162-164 Fulham Palace Road W69ER	020 8741 7008 Mon- Fri 10.00 – 16.00 Wed 18.00– 21.00 angelou@advancecharity.org.uk www.angelou.org	Women who have suffered domestic violence across Hammersmith & Fulham, Kensington & Chelsea and Westminster	<p><u>Advance</u> – advice for women who have experienced domestic abuse Tel: 02089607016</p> <p><u>African Women's Care</u> – health and social care to African refugee women, FGM specialists Tel: 020 8969 8389</p>

				<p><u>Al-Hasaniya</u> - Supports Arabic speaking women and Moroccan women who has suffered from domestic abuse Tel: 02089692292 (Mouna El Ogbani)</p> <p><u>Hestia</u> - Helping and empowering survivors of domestic abuse and their families to rebuild their lives Tel: 02076415923</p> <p><u>Solace</u> - specialist services including refuges, advice, counselling, advocacy, support groups and family & children's projects for women and children survivors of domestic abuse Tel: 02076191350 (Katherine Dunn and Dora Selkai)</p> <p><u>Women and girls network</u> – counselling, advocacy and advice for women and girls who have experienced gendered violence, including sexual and domestic violence Tel: 02034410179 (Georgina Robb: young women's advocate and Phoebe Crowder: African care centre) Tel: 02089698389 (Jane Lanyero: family support worker)</p> <p><u>Galop</u> - advice and support for everyone including LGBT who are affected by</p>
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				<p>violence and abuse Tel: 020 7704 6767 peter.kelley@galop.org.uk</p> <p><u>Women's Trust</u> – One to one sessions, self-development workshops and support groups for women affected by domestic violence Tel: 02070340303 +0304</p> <p><u>Standing Together Against Domestic Violence</u> - Delivering a Coordinated Community Response to end violence against women and girls</p>
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London Borough of Croydon

Name	Address	Contact & opening hours	Clients	Services
Family Justice Centre	69 Park Lane CRO 1JD	Drop in and appointments: Mon Tues Fri 9.00- 17.00, Wed 08.00 – 16.00 Tel: 0208 688 0100 (helpline) familyjusticecentre@croyden.gov.uk	Victims suffering from domestic abuse in Croydon, or those who are looking to flee to Croydon	<ul style="list-style-type: none"> • Safety planning advice support • Legal advice • Referrals to counselling • Housing advice

London Borough of Enfield

Name	Address	Contact & opening hours	Clients	Services
Enfield Muslim Women's Aid	P.O. Box 49007 London N11 2XD	Tel: 0208 920 3565	Women who have suffered domestic violence	<ul style="list-style-type: none"> • Refuge provision specifically for Muslim women

Greenwich Local Authority

Name	Address	Contact & opening hours	Clients	Services
Her Centre	Clockhouse Building Defiance walk Woolwich Dockyard Est. London SE18 5QL	info@hercentre.org www.hercentre.org/	Domestic violence & sexual violence victims in boroughs of Greenwich and Bexley	<ul style="list-style-type: none"> • Free and confidential advice and counselling

London Borough of Hackney

Name	Address	Contacts / opening hours	Clients	Services
North London Muslim Community Center	66-68 Cazenove Rd., London N16 6AA	Tel: 0208 806 1147 admin@nlmcc.org.uk www.nlmcc.org.uk/	Black and minority ethnic and refugee communities in Hackney	<ul style="list-style-type: none"> • Advocacy and advice on general social and welfare needs
Women's Health Counsellor	Homerton University Hospital Chatsworth House Homerton Row E9 6SR	Tel: 0208 510 7198 whcs@homerton.nhs.uk	Women	<ul style="list-style-type: none"> • Health counselling • Emotional support

London Borough of Hammersmith and Fulham

Name	Address	Contacts & opening hours	Clients	Remarks Services
Domestic Violence Intervention Project – Hammer-smith Office	65 Aspenlea Road Hammersmith W68LH <u>Main office</u> 164-168 Westminster bridge road SE1 7RW	Tel: 0207 633 9181 vpp@dvip.org info@dvip.org <u>Al-aman Women`s Support Service</u> Tel: 0208 563 2250 (Arabic speaking) <u>Yuva</u> Tel: 0208 222 8281 (Young people)	Domestic violence victims in London	<ul style="list-style-type: none"> • Support for victims of domestic abuse

London Borough of Haringey

Name	Address	Contacts & opening hours	Clients	Remarks Services
Hearthstone Domestic Violence Advice plus Support Centre	10 Commerce Road Wood Green N22 8ED	Tel: 0208 888 5362 Mon- Fri 9:00- 16:00 hearthstone.domesticviolence@homesforharingey.org.uk	Women or men escaping domestic violence	<ul style="list-style-type: none"> • Support • Legal/housing advice • Counselling
Haringey Migrant Support Centre	90 St. John Vianney Church, 386 West Green Road N15 3QL	Tel: 0754 4078 332 Call for appointment (phone is only monitored Mon & Tues) info@haringeymsc.org www.haringeymsc.org/	Migrants in Haringey borough	<ul style="list-style-type: none"> • Advice on immigration and welfare issues • Health advice and help in accessing NHS services

London Borough of Harrow

Name	Address	Contacts & opening hours	Clients	Services
Harrow Women`s Centre	Andrews close Off Bessborough Road, Harrow HAI 3GE	Tel: 0208 422 1100 www.harrowwomenscentre.org/	Women	<ul style="list-style-type: none"> • Free advice sessions: Mon, Wed, Fri 10:00 – 15:00 • Therapy treatments: Fri, Sat 13:00 – 17:30 • Counselling (appointment)
EACH		<p><u>Ealing</u> Tel: 0208 579 4529 ealing@eachcounselling.org.uk Vine House 1&2 Factory Yard Hanwell W7 3UG</p> <p><u>Harrow</u> Tel: 020 8861 3884 harrow@eachcounselling.org.uk Signal house 16 Lyon Road Harrow, Middlesex HA1 2AG</p> <p><u>Brent</u> Tel: 020 8795 6050 brent@eachcounselling.org.uk Bridge Park Community Leisure Centre Harrow Road, London NW10 0RG</p>	Everyone	<ul style="list-style-type: none"> • Recovery: addiction • Support: domestic violence • counselling • Housing: floating support service

The WISH Centre	Unit A4 Livingstone Court 55 Peel Road Wealdstone Harrow HA3 7QT	Tel: 0208 416 7277 Tel: 0783 477 979 info@thewishcentre.org.uk www.thewishcentre.org.uk/harrow	Anyone aged 10-25 as long as they can get to the centre to access the services Centres at Harrow and Merton	<ul style="list-style-type: none"> • Support for those who self-harm • Support for those who have suffered sexual and domestic violence
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London Borough of Havering

Name	Address	Contacts & opening hours	Clients	Services
East London Rape Crisis centre	P.O. BOX 58203, London, N1 3XP (Nia is the umbrella organisation)	Tel: 0207 704 2040 Tel: 0207 683 1210	Women and girls 13 upwards who have experienced sexual violence at any time in their lives	<ul style="list-style-type: none"> • Support re sexual violence • Info and support to family friends and partner agencies working with survivors
Havering Women's Aid	No address	Tel: 01708 728 759 (helpline) 24/7	Children and young people affected by domestic abuse	<ul style="list-style-type: none"> • Refuge • Outreach • Drop-in • Advice line • Floating support

London Borough of Hillingdon

Name	Address	Contacts & opening hours	Clients	Services
Hillingdon IDVA	Uxbridge Police Station	0208 246 1745 xh-hidvaf@met.police.uk	Residents of Hillingdon	<ul style="list-style-type: none"> • Domestic violence support

London Borough of Hounslow

Name	Address	Contacts & opening hours	Clients	Services
Hounslow Domestic and Sexual Violence Outreach Service	Hounslow Civic Centre, Lampton Road, Hounslow, TW3 4DN	Tel: 020 8583 2000 (office) Tel: 0208 247 6163 (Independent domestic violence advisors) Mon-Fri 8.00-16.00 Tel: 0208 247 6163 or 07775 540642 (Independent sexual violence advisor) Mon-Fri 8.00-16.00	Anyone affected by domestic and sexual abuse	<ul style="list-style-type: none"> • Free and confidential advice and support
Hounslow Assessment Team – Lakeside	Lakeside Mental Health Unit, West Middlesex Hospital Site, Twickenham Road, Isleworth, TW7 6AF	Tel: 0208 483 1556	Adults and older people living in Hounslow suffering from mental health issues	<ul style="list-style-type: none"> • Initial assessments • Sign posting to relevant services
Phoenix Counselling & Psychotherapy Service	Hanworth Road, Feltham TW135AF	Tel: 02088903133 office@phoenixcounselling.org	All members of Hounslow community of all ages	<ul style="list-style-type: none"> • Counselling services

		www.phoenixcounselling.org/		
Hounslow Youth Counselling Service	78 St John's Road Isleworth Greater London TW7 6RU	Tel: 020 8568 1818 ask@hycfcounselling.co.uk http://www.hycscounselling.co.uk/	Hounslow young people aged 11 to 25 years old	<ul style="list-style-type: none"> • Counselling services • Drop In Service: First Wednesday of the month 16:30 – 18.00
Asian Family Counselling Service	London main office Suite 51 Windmill Lane 2-4 Windmill Place Southall Middlesex UB2 4NJ	Tel: 020 8571 3933 or 020 8813 9714 Mon- Fri 9:00 17:00 afcs@btconnect.com www.asianfamilycounselling.org.uk /	All members of the South Asian communities in Hounslow (Also a branch in Birmingham)	<ul style="list-style-type: none"> • Counselling services

London Borough of Islington

Name	Address	Contacts & opening hours	Clients	Services
The Phoenix Futures Group	68 Newington Causeway London SE1 6DF	Tel: 020 7234 9740 info@phoenix-futures.org.uk www.phoenix-futures.org.uk/	Available to anyone, though borough orientated	<ul style="list-style-type: none"> • Support for people with drug /alcohol related problems

Royal Borough of Kensington and Chelsea

Name	Address	Contacts & opening hours	Clients	Services
Al-Hasaniya Moroccan Women's Centre	Bays 4 and 5, Trellick Towers, Golborne Road, London, W10 5PL	Tel: 020 8969 2292 contact@al-hasaniya.org.uk www.al-hasaniya.org.uk/	Arabic speaking women primarily in Kensington and Chelsea but also across London	<ul style="list-style-type: none"> • Domestic violence support • Support for women with mental health issues • Youth service

Royal Borough of Kingston upon Thames

Name	Address	Contacts & opening hours	Clients	Services
Kingston Community Safety Unit	Kingston Police Station, 5-7 High Street Kingston upon Thames, Surrey, KT1 1LB	Tel: 0208 7215916 or 07917 072 824 Mon 14.00-20.00 Wed 10.00-17.00 Thurs 14.00-20.00 vkcsu@met.police.uk	Anyone in the borough of Kingston	<ul style="list-style-type: none"> • Specialist investigation • Domestic violence • Racial and hate motivated crimes • Honour based violence • Offences between family members and partners
Wolverton Centre for Sexual Health	Kingston Hospital Galsworthy Road Kingston upon Thames Surrey, KT2 7QB	Tel: 020 8974 9331 Mon, Tues, Thurs, Fri 8.30 – 18.00 Wed 8:30 – 20:00 www.sexualhealthkingston.co.uk/	All residents in southwest London	<ul style="list-style-type: none"> • Free, comprehensive and confidential sexual health service

London Borough of Lambeth

Name	Address	Contacts & opening hours	Clients	Services
Refuge @ The Gaia Centre	The Gaia Centre 4 th Floor International House 1 St Katharine's	Mon-Fri 8.00-18.00 Outreach, IDVA and Sanctuary scheme: lambethvawg@refuge.org.uk Project based (drop in, counselling)	Male and female victims of gender based violence (Women and girls aged 13 and over, and men aged 16 or over)	<ul style="list-style-type: none"> • One to one confidential advice and counselling • Advocacy • Sanctuary scheme • Peer support

	Way London E1W 1UN	Tel: 020 7733 8724		
ASHA Projects	13 Shrubbery Rd, London SW16 2AS	Tel: 0208 677 9920 Tel: 0208 696 0023 (advice) advice@asha.org.uk www.ashaprojects.org.uk/	South Asian women and children fleeing violence	<ul style="list-style-type: none"> • Temporary accommodation • Confidential advice, support and information
Women's Well-being – Mozaic Project	Based at Guy's and St Thomas' Hospital	Tel: 020 7188 7710	Women who have or are still experiencing all forms of domestic abuse	<ul style="list-style-type: none"> • Advocacy service • Emotional support • Telephone support • Referrals to counselling and support groups • Practical advice and support (or referrals to specialist agencies)

London Borough of Lewisham

Name	Address	Contacts & opening hours	Clients	Services
Refuge @ Athena	No address	Tel: 0800 112 4052 lewishamvawg@refuge.org.uk	Male and female victims of gender based violence (Women and girls aged 13 and over, and men aged 16 or over)	<ul style="list-style-type: none"> • One-to-one confidential support • Specialist independent gender-based violence advocacy • Specialist service for 13-19 year-old girls • Group support • A peer support scheme
Deal with D.V.	No address	Tel: 07989 335800 info@dealwithdv.co.uk	Young people aged 13-19 years	<ul style="list-style-type: none"> • Information • Campaigns • Advice for domestic violence sufferers

London Borough of Merton

Name	Address	Contacts & opening hours	Clients	Services
The WISH Centre	2-14/2-15 Peel House 32-44 London Road Morden SM4 5BT	Tel: 020 3740 9175 or 07534 991931 merton@thewishcentre.org.uk www.thewishcentre.org.uk/merton/	Anyone aged 10-25 as long as they can get to the centre to access the services Centres at Harrow and Merton	<ul style="list-style-type: none"> • Support for those who self-harm • Support for those who have suffered sexual and domestic violence

London Borough of Newham

Name	Address	Contacts & opening hours	Clients	Services
Survivors Together	Forrest House. 63 Rowntree Clifford Close, Plaistow, London E13 8AB	Tel: 07961 351361 (Yvonne) or 07849 022001 (Helen) www.survivorstogether.co.uk/	Female survivors of sexual abuse	<ul style="list-style-type: none"> • Provides regular social activities for survivors • Not for direct help etc. It's an occasion to relax and socialise
Newham Asian Women's Project	661 Barking Road London E13 9EX	Tel: 0208 472 0528	Black and Minority ethnic, refugee women	<ul style="list-style-type: none"> • Young people's service • Counselling • Legal advice
Aanchal	No address	Tel: 0203 384 9412 Tel: 08454512547 (hotline) 24/7 info@aanchal.org.uk referral@aanchal.org.uk	Women experiencing domestic violence in the Newham and Redbridge	<ul style="list-style-type: none"> • Support and advice for • Counselling • 24 hour helpline • Workshops
Stay Safe East	Waltham Forest Resource Hub (South) 90 Crownfield	Tel: 0208 519 7241 Mon-Fri 10:00-17:30 director@staysafe-east.org.uk	Disabled and deaf people affected by domestic violence, abuse, hate crime, bullying, anti-social behaviour or sexual	<ul style="list-style-type: none"> • Long term support • Policy advocacy

	Road London E15 2BG	http://staysafe-east.org.uk/	violence Mainly Waltham Forest and Newham but London wide	
Beverley Lewis House	P.O. BOX 71561 <u>East Living</u> 29-35 West Ham Lane Stratford, London E15 4PH	Tel: 020 7473 2813 (Refuge) 24/7 Tel: 0800 432 0457 (Information and referrals) 24/7 blh@east-living.co.uk www.east-living.co.uk/blh	Women with learning disabilities who are at risk of or fleeing abuse	<ul style="list-style-type: none"> • Refuge provision Support work • Welfare activities • Temporary accommodation

London Borough of Redbridge

Name	Address	Contacts & opening hours	Clients	Services
AWAAZ (Education and Social Welfare Support Group)	136-138 Ilford Lane Ilford Essex IG1 2LG	Tel: 07956 661508 awaazgroup@hotmail.com http://awaaz.org.uk/	Any women with low self-esteem caused by domestic violence Caters for mentally and physically disabled women	<ul style="list-style-type: none"> • Empowering support to women • Hate crimes • Sexual abuse
Aanchal	No address	Tel: 0203 384 9412 Tel: 08454512547 (hotline) 24/7 info@aanchal.org.uk referral@aanchal.org.uk	Women experiencing domestic violence in the Newham and Redbridge	<ul style="list-style-type: none"> • Support and advice for • Counselling • 24 hour helpline • Workshops
Redbridge Action	No address	Tel: 07984 677384 (Refuge) Mon - Fri 9.30 - 16.00	Women and children affected by domestic abuse	<ul style="list-style-type: none"> • Advocacy • Face to face telephone support

Against Domestic Abuse (RAADA)		Tel: 07946 872734 (Outreach) Mon - Fri 9.30 - 16.00 outreach@raada.org http://www.raada.org/		<ul style="list-style-type: none"> • One to one play therapy • Support groups • Drop in sessions • Housing, benefits, civil and criminal legal advice
Safe Space Project (Redbridge Street Pastors)	The Salvation Army 15 Clements Road Ilford Essex IG1 1BH	Tel: 07581 020154 redbridge@streetpastors.org.uk www.redbridge.streetpastors.org.uk	Women involved in prostitution	<ul style="list-style-type: none"> • Drop in service with hospitality and support Mon 13:00 – 16:00

London Borough of Southwark

Name	Address	Contacts & opening hours	Clients	Services
Starfish project @ Bede House Association	351 Southwark Park Road London SE16 2JW	Tel: 020 7237 9162 ahlamlaabori@bedehouse.org www.bedehouse.org.uk/programmes/starfish	Southwark residents affected by domestic violence	<ul style="list-style-type: none"> • Support for sufferers of domestic violence and hate crimes

London Borough of Sutton

Name	Address	Contacts & opening hours	Clients	Services
Sutton Women's Centre	3 Palmerston Road, Sutton Surrey, SM1 4QL	Tel: 0208 661 1991 info@suttonwomen.co.uk	Local women victims of violence	<ul style="list-style-type: none"> • Counselling • Confidential telephone • Drop in centre: Wed 9.30-11.30

London Borough of Tower Hamlets

Name	Address	Contacts & opening hours	Clients	Service
Barkantine Domestic Violence Drop in Service	Barkantine GP Surgery 121 Westferry Rd., London E14 8JH	Fridays 10.00 – 13.00	Victims of domestic abuse	<ul style="list-style-type: none"> • Advice and information
Black Women's Health and Family Support	82 Russia Lane Bethnal Green London E2 9LU	Tel: 0208 980 3503 Mon – Fri 9:00 – 17:00 bwhafs@btconnect.com www.bwhafs.com	Women and children Tower Hamlet residents	<ul style="list-style-type: none"> • FGM project
LBTH Domestic Violence and Hate Crime Team	Safer Communities 6th Floor Mulberry Place 5 Clove Crescent London E14 2BG	Tel: 0207364 4986 (Duty Number) Tel: 0800 279 5434 (advice line) Mon - Fri 9:00 – 17:00 domestic.violence@towerhamlets.gov.uk hatecrime@towerhamlets.gov.uk	Local residents	<ul style="list-style-type: none"> • Information and advice and signposting

NB the Local Authorities not specifically mentioned have services provided by the London or UK wide organisations.