

Written evidence submitted by The Nia Project [GRA1476]

The Nia Project evidence to the Women and Equalities Select Committee Inquiry into Reform of the GRA

November 2020

1. About nia

1.1 nia has been delivering services to women and children who have experienced domestic and sexual violence, including prostitution, since 1975. The organisation has three main aims, which are to provide services for women, children and young people who have experienced male violence, working to end male violence against women and girls, and to inform and influence policy and public awareness.

1.2 Presently, nia is delivering a range of services across London, primarily in the East and North of the city. Our services are continually evolving in order to respond to the needs of women who face multiple disadvantage and barriers to accessing services, they currently include:

- **East London Rape Crisis** for women and girls who have experienced any form of sexual violence -including rape, sexual assault and child sexual abuse - regardless of when it occurred, who it was perpetrated by and whether or not it was reported to the police.
- **The Emma Project** - a pioneering service for women who are escaping domestic and sexual violence and who use substances problematically
- **Daria House** - a refuge for women who have been sexually exploited, with a particular focus on supporting women who have been exploited through involvement in prostitution.
- **Independent Domestic Violence Advocacy (IDVA) Services** - We currently operate IDVA services in Haringey and Hackney
- **IRIS** - a GP training programme and advocacy support to improve the health care responses to domestic violence and abuse. nia delivers the service in Hackney and Haringey.
- **The Anita Project** – East London Exiting and Advocacy Service supporting women to exit prostitution.

1.3 nia holds the following quality standards:

- Rape Crisis England and Wales National Service Standard
- SafeLives Leading Lights
- Women's Aid Federation (England National Quality Standard
- Advice Quality Standard (Casework)

1.4 In the year between **April 2019 and March 2020**, nia provided one-to-one support to **1,488** women, girls and children plus we also supported 5 men and 2 people who identified as transgender.; and in addition, a further 1,063 women and/or family/friends/agencies enquiring on behalf of victim-survivors of sexual violence were supported through our helpline.

2. We wish to respond to the consultation in response to wider issues concerning transgender equality and current legislation, in particular the impact on women and girls accessing services from those who have subjected to sexual and domestic violence and abuse, including prostitution.

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2.1 Are the provisions in the Equality Act for the provision of single-sex and separate-sex spaces and facilities in some circumstances clear and useable for service providers and service users? If not, is reform or further guidance needed?

As a provider of single-sex services for women and girls who have been subjected to sexual and domestic violence and abuse, including prostitution, we know that already there is confusion over application of the exemptions and fear of repercussions if they are used. We know that some of our sister organisations are fearful of expressing the view that they think single-sex services for women are important. We are unusual in having a clear policy that sets out our position with regards to applying the exemptions and prioritising the well-being of women and girls subjected to men's violence. We are frequently requested to share this policy.

We are aware that some organisations who support the provision of single-sex services have been subjected to vexatious complaints.

Most but not all of our services are funded by local and regional government. In several cases, services purportedly for women are required to provide services also to males, including those who identify as transgender. In these cases, the Equality Act provision of single-sex and separate-sex spaces and facilities is undermined. We believe further reform is required so that service providers of specialist services are not required by contract to provide services to male, including those who identify as transgender.

We know that some organisations have decided that they will not apply the exemptions and that some victim-survivors of men's violence including but not only FOVAS (Female-Only, Violence and Abuse Survivors) <https://fovas.wordpress.com/> feel that their needs are not being met, nor indeed that they have not been consulted by organisation taking this approach.

It was clear when our chief executive, Karen Ingala Smith, gave oral evidence at the WESC on 22 May 2019, that second tier organisations such as Women's Aid Federation England did not have a clear understanding of the single-sex exemptions and in the evidence given by Janet McDermot, Women's Aid Federation England confirmed that they had not given member organisations guidance on the application of, or indeed the need for, the exemptions.

The provision of examples in the previous guidance was often interpreted as an exclusive list of where the exemptions could be applied and this meant that some service providers did not feel able to utilise them.

Further guidance should include the provision of sanctions for those who provide interpretations of the guidance which obfuscates the law, for example in some instances guidance by bodies such as Stonewall and Gendered Intelligence.

The terms gender and sex are sometimes used interchangeably in the GRA 2004 and this does not facilitate clear interpretation of the Equality Act.

We are concerned that the current consultation prioritises the needs of transgender people at the detriment of women who have been subjected to men's violence, and that women's needs are still not universally understood, and are definitely not adequately met.

We believe there is inadequate understanding that trauma informed services for women and girls must be single-sex services and that this lack of understanding is to the detriment of women. The support of single sex services is often presented as a lack of empathy with trans people, this is not

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the case. Women who have been subjected to men's violence may develop a trauma response. These sometimes develop after a single incident of violence, particularly with regards to sexual violence, though sometimes it can develop after years or months of abuse. Post-traumatic Stress Disorder (PTSD) can develop in response to trauma that may have occurred recently or in the distant past. Those who have experienced sexual trauma, especially whilst young are at greater risk, with victims of multiple forms of childhood abuse and neglect most at risk of lifetime trauma[i] Women victim-survivors of child sexual abuse are at least twice as likely to experience adult sexual victimisation[ii]. 51% of adults who were abused as children experienced domestic abuse in later life and approximately one in six adults who were abused as a child had been subjected to domestic violence and abuse in the previous year[iii].

Studies of women involved in prostitution found that between 63-80% reported being subjected violence in the course of being prostituted[iv]. One study found that women in prostitution were murdered at a rate 12 times above that of non-prostituted women[v]. Many women in prostitution describe sexual encounters as non-consensual, coerced or economically coerced rape. Two-Thirds of women in prostitution suffer PTSD.[vi]

After trauma, the brain can be triggered by something that would barely register for someone else, interpreting something that for many people would be unthreatening as a serious threat or danger, for example the presence of a man, particularly where not expected. PTSD/trauma responses happen in a part of the brain called the amygdala. The amygdala detects a threat or perceived threat and can activate a "fight or flight" response. This releases adrenaline, norepinephrine, and glucose into the body, and if the threat continues, cortisol. A part of the prefrontal cortex (an area in the front of the brain that processes emotions and behavioural reactions) assesses the threat and can either calm or reinforce the fight or flight response. People suffering trauma/PTSD have a hyper reactive amygdala and a less effective calming prefrontal cortex reaction. The brain becomes overwhelmed by the trauma (pre-frontal cortex shutdown) leading to disorientation and confusion as the higher brain functions of reasoning and language are disrupted. Thinking and reasoning can be drowned out by feeling and being. Prolonged stress can lead to permanent change in the prefrontal cortex.

A trauma-informed safe space creates space for action and recovery from violence and abuse and places the woman victim-survivor in control and in the centre. The trauma response described earlier is the antithesis of a space for action and recovery, so a trauma informed approach is based on understanding the physical, social, and emotional impact of trauma caused by experiencing violence and abuse. For many women this means excluding men from their recovery space, it does not matter whether or not these males identify as transgender, nor does it matter whether they themselves are or have been abusive. Women experiencing trauma after violence and abuse will, like most of us – almost always instantly read someone who might be the most kind and gentle trans identified male in the world – as male; and they may experience a debilitating trauma response as a result. This neither hate, bigotry or transphobia, but a biological impact of abuse. Specialist women-led women-only organisations supporting victim-survivors of men's violence are rarely funded to the extent that we can meet the levels of need that exist. All too commissioners do not understand the critical importance of women only space.

i] Widom et al. 2008.

[ii] Classen, Palesh, & Aggarwal, 2005

[iii] ONS Impact of child abuse on later life, Crime Survey for England and Wales, year ending March 2016

[iv] Kinnell, 1993; Barnard et al., 2002, Campbell & Stoops, 2010

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[v]Ward, Day & Weber, 1999

[vi] Farley, 1998.

2.2 Does the Equality Act adequately protect trans people? If not, what reforms, if any, are needed?

And

What issues do trans people have in accessing support services, including health and social care services, domestic violence and sexual violence services?

The Equality Act rightly and justly protects trans people. We are concerned that a simplification of the process, has the potential to put young people, in particular, young women at risk of harm through expediting access to irreversible surgery or the irreversible effects of hormone treatment. For the same reasons, the age limit should not be lowered.

We wish to see greater provision of sexual and domestic violence services for all people, we know, as a provider of specialist services for women, we are unable to meet demand.

If the Equality Act is to adequately protect trans people, it should set out the need for separate and funded specialist services, such as those provided by Galop.

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