

Men to Men

- Q1. The term 'sexual violence' may not be appropriate. Sexual offending is of a particular type. RAPE is a crime of **violence** – not a 'perception' of being sexually unwanted or inappropriate. The **sexual** element is incidental to the violence (power/control).
- Q2. Page 21 Prevention 'box' – should include "Management of risk of identified offenders" as part of the strategy.

General public is reluctant to engage with this issue, especially men. Why?

- 2.6 The research and investigation processes can also induce trauma/distress.
- 2.7 Altho LOW, what can be done to enable men to report?
- Q4. is alarming! – see 2.6 above
- Q6. No – use community/voluntary agencies
- Q7. Drama and 'Soap' material can be very effective.
- Q3. Drama writers
BBC NI
Theatre Groups
Writers' Groups
- Q4. Should NOT go down this line.
- Q5. Encourage sharing of (initially) low level info to all community groups – and invite participation in development of support services for children and vulnerable adults – that are NOT EXCLUSIVELY focussed on sex offending.
- These community groups may be key partners in the development of regional strategy further down the line.
- Q6. NO
- Government should use voluntary and community sector groups to challenge old partners of collusion.
- Q7. Much media input in UK has been unhelpfully alarmist. But sober and balanced content can help in a process of increased awareness eg BBC2 recent programme/drama on a 'normal' sex offender.

Q8. Are desirable even when they are not absolutely achievable.

There is a recurring theme of children of a parent now in a 'new' relationship – and how that can be exceptionally distressing for a child.

Q9. Church and secular youth clubs
BB/GB
Guides and Scouts

} Voluntary Sector

Q10. Support the statutory and CVS sectors with resources, in relation to direction and expected outcomes.

Q11. Voluntary sector can accumulate good information – monitoring and evaluation – so long as this does not compromise client integrity.

Q12. Alcohol – perhaps an 'ad' showing how the disinhibited person's inappropriate behaviour leads to a prosecution and social stigmatisation OR this can be done within a soap drama.

Q13. Using community and personal safety agenda to incorporate issues of sexual risk.

Q14. a. We can't – but we can reduce risk.
b. Promote good parenting and social fabric
c. Unsure whether media can be harassed appropriately?

Q15. If we cannot PROTECT our children then our society has failed.

Q16. Look to restorative justice as a way that allows relationships to change and future to be safe.

Manage offenders with integrity and clarity.

Q17. Review educational programmes on sex and relationships. Ensure that truants are included in the education – as sometimes their truancy can be a factor/symptom of distorted relationships.

Q18. This is a difficult area. If we have got the awareness issue right with adults, maybe children will not be so vulnerable?

Q19. 1. Acknowledge that a significant number of perpetrators (or would be perpetrators) have themselves been victims – and this has become their 'norm' around sexual contact.

2. Provide Circles of Support and Accountability (as in Canada and now England) which significantly lower risk of re-offending.

Q20. Through respect – collaboration as an inter disciplinary level. Recognising that the statutory services are servicing the PUBLIC – not political matters!

- Q21. 1. Separating VIOLENCE our
- as in RAPE or anticipate RAPE
 - or domestic violence
2. Addressing sexual offending in a case-sensitive way.
3. Reducing RE-offending, reduces victims.

Q22. Taking our ALL gender bias. Stop using “sex” when you mean “gender” and include ‘sexual orientation’ as a factor, since same gender couples are not free of violence.

Q23. -

Q24. **Perpetrators** will often require support services similar to those identified for **survivors** (omit “victims” – unhelpful terminology).

Counselling/psychotherapy can evidence successful outcomes for both groups.

NSPCC and Barnardos evidence good care for children. Rape Crisis interventions provide much needed support at key stages. Women’s Aid and Men to Men complement other services.

Q25. What are desired outcomes? If family re integration, then that will entail a range of services. If emotional support for a mother of a survivor, then that would be another.

Q26. Good! Yes – see Q25 but based more on what is required at the time, rather than prescriptive pigeon-holing.

Q27. Through partnership agencies based on equality – and resourced adequately from central funds.

Q28. That would really be up to the outcomes agreed by Partnerships identified in Q27.

Q29. Why have TWO “models”. If the DHSSPS one needs reviewing, then do so – with the intention of having a single (biannually reviewed) assessment model.

Q30. Yes, probably – and it will probably be used more if it is managed within the voluntary sector and statistics maintained for statutory purposes.

Q31. By resourcing the agencies concerned to promote their services.

- Q32. Statutory services are obliged to meet statutory standards. V of C Sector services need to declare how each is going to maintain and monitor standards.
- Q33. a. Training should help them identify their own distresses, so that these do not affect their interactions with survivors/perpetrators.
- b. The support they need may be long-term counselling – long after the events they encountered, sometimes.
- Q34. This should be addressed by a partnership of statutory and VCS agencies as in Q27.
- Q35. Maybe – not necessarily.
- Q36. Para 3.63

“indeterminate sentences could, if necessary, be detained indefinitely”. This has HR implications, unless FM were to sign a “natural life” detention, which itself may be open to challenge.

This sentencing framework needs to look at ways of **resolving** issues, not just institutionalising them.

Additional Comments

Para 3.65 Perhaps this modular programme is a **better** model than SOTP?

Page 47/Para 3

Consciously develop a line which changes the “take no sweets from strangers” to one which recognises the potential risks within family and other social groups.

Page 25/2.14 I have serious concern about “more explicitly” raising awareness of 4 year olds? This is potentially as damaging to children as inappropriate touch. It is in effect an inappropriate touch on their childhood.

Page 17/1.42 £250-300 million in NI. This is a ???? questionnaire and should not be used in any publication without well defined back-up figures. Other factors are at work in NI which may change the figure significantly UP or DOWN.