



LAUNCH REPORT:

Dr Caroline Crowley: *Listening to Survivors of Sexual Violence and their Supporters in West Cork*

CELTIC ROSS HOTEL, ROSSCARBERY, WEST CORK 31ST MAY 2022



Listen to me. Support me. Believe me. Help me
Listening to Survivors of Sexual Violence and their Supporters in West Cork

CAROLINE CROWLEY, PHD with
MICHELLE NAGLE, MIAHIP, REG ICP



Over 75 people gathered for West Cork Women Against Violence launch of Dr Caroline Crowley's most recent research [*Listening to Survivors of Sexual Violence and their Supporters in West Cork*](#) in the beautiful setting of Rosscarbery at the end of May 2022.

In attendance were survivors who had contributed to the research, along with representatives from:

- Accompaniment Support Services for Children
- Accountancy Firm
- An Garda Siochana
- Clonakilty Community Resource Centre
- Clonakilty Friends of Asylum Seekers
- CoAction
- Cois Cheim SHEP
- Cork County Council
- CYPSC
- Family Resource Centres – The Caha Centre, Beara West, Dunmanway and Middleton FRCs
- Harbour Counselling Services
- Holistic practitioner
- HSE Community Addiction Services
- Kerry Rape and Sexual Abuse Centre
- Local GP services
- MABs
- National Learning Network, Community Mental Health Nurse & Psychotherapist
- NOVAS
- Sexual Assault Treatment Unit, South Infirmery Victoria University Hospital
- Sexuality Insights
- South Infirmery Victoria University Hospital
- Southern Star
- Students from MTU, UCC, UL & TCD
- Therapists: Counsellors, Psychotherapists & Art therapists
- Tusla: DSGBV Services, Team Leaders, Principal Social Workers, Prevention Partnership and Family Support and Child and Family Support Networks
- UCC, Departments of Law & Applied Psychology
- West Cork Counselling and Support Services
- West Cork Development Partnership
- West Cork Traveller Centre
- West Cork Women Against Violence
- Wisser Marketing
- Yana North Cork Domestic Violence Project

Marie Mulholland, CEO of West Cork Women Against Violence welcomed all to the event, gave a brief background to the research and spoke of the plans for development of a new Sexual Violence Community Project in West Cork. She noted that, notwithstanding the last 2 years of Covid-19, the event was a rare gathering of agencies, service providers, interested parties and survey participants and one which she hopes will herald the beginning of new collaborations and partnerships to bring about support and justice for survivors and to reduce the occurrence of sexual abuse and violence in West Cork.

Michelle Nagle, Psychotherapist and Counsellor and advisor to the research then honoured and thanked the survivors of sexual violence, and the supporters, who contributed to the research. She spoke of their strength and generosity and their willingness to be part of the solution. Michelle acknowledged that the event could be triggering and called on all to take care and to seek support and connection if needed, including from specialist support services detailed on the day.

Louise Crowley, Professor in Family Law at the School of Law, UCC gave the opening address in which she commended the bravery of the victims of domestic, sexual and gender base violence and for providing an insight into the lived reality of survivors through the research. She spoke of how powerful a vehicle for change the research can be, as it hears the voice of those who suffer abuse and understands their journeys and obstacles faced, identifies the need for local, accessible trauma- informed and wraparound support services; and highlights the need for dedicated training on sexual violence for all services.

Dr Caroline Crowley, independent researcher working in the fields of social and geographical research, then presented findings and key recommendations of her research, [*Listening to Survivors of Sexual Violence and their Supporters in West Cork*](#). She explained the background to the research and estimated the thousands of people in West Cork who are thought to be suffering in silence, including children and teens. An overview of the survivors who took part in the research was followed with a brief look at their experiences of sexual violence, of seeking support in response and the lifelong consequences for them. The audience heard from survivors in their own words through quotes. After outlining the four recommendations of Care, Train, Share and Sustain, the presentation ended with a call to action for everyone to put their shoulder to the wheel in order to bring about zero tolerance for sexual violence through solidarity, collaboration and coordination.

All of the speakers' presentations are copied below and Dr Crowley's PowerPoint presentation on her research and its findings is included in the pack. The presentations were followed by small group reflections on the research findings and discussions on the themes of the four research recommendations. These deliberations are collated and detailed at the end.

SPEAKER PRESENTATIONS:

Marie Mulholland, CEO West Cork Women Against Violence

Good morning everyone and thank you so much for being here with us in West Cork today. My name is Marie Mulholland, and I am the CEO of WCWAV. Today's launch and related discussions are the culmination of several years of research, surveys and interviews with survivors of sexual violence and abuse and those who have tried to support them.

WCWAV embarked on this path for several reasons: a Tusla Needs Analysis Survey of DV & SV services in Cork City and County in 2018 showed that in West Cork there was a gap in the provision of supports for sexual violence victims; in the absence of any other local service, gardai would refer sexual violence victims who needed support to West Cork Women Against Violence. As a DV service we were also aware of the overlap between coercive control and sexual coercion and rape within intimate relationships. It had also not escaped our notice that in a significant number of DV cases, some women who were in abusive partnerships had been victims of child sexual abuse in their past and this made them vulnerable to abusive men in adulthood. WCWAV operate a Children & Young People's Therapy Programme for children of our clients who are impacted by the experience of living with domestic abuse, because of this initiative, we found ourselves more recently, being asked could we help with children who had suffered child sexual abuse.

Given all of these realities, it was clear that what our organisation could provide was piecemeal, reactive and fell far short of what was required and to be perfectly honest, this area of work was not our area of expertise. Fortunately, I knew a few people who could help and who like me, had a desire to do something much more comprehensive and far-reaching. You will meet my partners in this endeavour throughout the morning. But one of the best decisions we have made is that of recruiting Sandra Byrne, the development worker who many of you will have been in contact with over recent weeks. In 3 short months since she began, she has delivered on and developed the ideas we had to such an extent that we are here today with this in our hands and you at the tables; she has negotiated with funders, liaised and co-ordinated with training bodies, interagency fora and gathered support and information throughout West Cork to bring about the next phase of this project which you will also hear about today. And it's only the 31st of May. Thank you, Sandra from all of us in the Steering Group.

Let me clarify that it is NOT our intention to establish a rape crisis centre for West Cork, that would be an unnecessary duplication of what is available in Cork city and in Kerry. And in some ways that keeps the consequences of sexual violence hidden, leaving it to a group of overworked, under-resourced, highly dedicated individuals elsewhere to manage. The rest of us don't then have to acknowledge the problem

until we encounter it in our classroom, family, workplace, sports team, social group or neighbourhood. Survivors deserve more. They deserve a community where there is a responsibility to provide practical, meaningful supports and healing. A community that is pro-active, taking ownership for creating safer spaces, eradicating stigma and shame, that works to prevent and to educate, puts the needs of the abused at the centre of decision-making and service provision, invests in community resources and listens to what is said in the space between silence and hurt.

Here, today, there is an exceptional range of agencies, service providers, interested parties and survey participants in this West Cork room, the last 2 years notwithstanding, this is a rare gathering. This morning although the research will rightfully be central stage, an equally important component is all of you. So the small group discussions after the coffee break are absolutely key and I would ask you all to stay with us for that. It is my firm hope that this marks the beginning of new collaborations, new partnerships aimed at bringing about support, services, safety and justice for survivors and in the long run, a reduction overall in the occurrence of sexual abuse and violence in West Cork. I know there is a willingness in West Cork. I have had the privilege of working with many of you, I know from direct experience that our Chief Superintendent, Con Cadogan operates an open door policy to partnerships and the possibilities of collaborative working: we have a Child & Family Support Network that has forged mutually supportive, successful relationships across the community and statutory sector in West Cork, small local organisations with little resources but massive hearts, individuals with skills, specialisms and insights. We need all of you to bring to the table what you have and what you can do in the service of survivors.

Before, I introduce you to some women who have been instrumental in kick starting this journey, I would first like to say thanks on behalf of the Project Steering Group to the funders who resourced aspects of this work and today's event: The Irish Human Rights and Equality Commission and especially Fidelma Joyce of that agency for financing the research, Our Lady of Charity Trust administered by the Community Foundation of Ireland and from the HSE through the Sexual Assault Treatment Unit .

Importantly, I would stress the ongoing financial support of the Domestic Sexual & Gender Based Violence Unit of Tusla whose findings about the need for services in West Cork laid the groundwork for this project. They may not have expected us to take the road we have, nevertheless they have continued to travel alongside and I am personally grateful for their continued interest and backing.

Yet again, graphic designer, Jenny Dempsey who has made all West Cork Women Against Violence publications look professional and readable for the last 10 years has worked her magic once more.

Now, let me introduce to our colleague and advisor to the research and to other aspects of the project: Michelle Nagle. Michelle is a Psychotherapist and Counsellor who works with teenagers and adults in West Cork. She has specialist training in the treatment & transformation of trauma and of sexual trauma in particular.

Let me introduce our Louise who will give our opening address. Louise Crowley is Professor in Family Law at the School of Law, UCC. Louise is a national voice on intimate partner violence having published widely on the adequacy of legal responses to the challenges of gender-based violence and she works with service providers and state agencies to highlight the need for greater and targeted investment in service provision. Louise is the Director of the LLM (Children's Rights and Family Law) at UCC and has also developed UCC's campus-wide Bystander Intervention initiative which seeks to educate and empower staff and students to challenge the normalisation of sexual abuse and to recognise their role as pro-social bystanders to effect change and bring about a new normal of safety and respect. Louise was present and very much a key partner in the 2018 NAPS survey undertaken by Tusla to explore DV & SV services in Cork and County. She has always been generous with her time, insights and academic support in the service of combatting sexual and domestic violence. So, there is a lovely serendipity to her involvement today and her willingness to lend her not inconsiderable gifts to our work.

Michelle Nagle: Psychotherapist, Counsellor and advisor on the research

It's inevitable that for some, the material here this morning will be triggering, - just being here may be triggering in itself, if this is you -I'm here with you also, we all are. Together. That's quite amazing.

We've done everything possible that we could think of in order to provide as much comfort today for people as we could in light potential triggers, love and care were at the heart of the project from the outset, much thought was given to today's venue, the comfort break areas, the format and the refreshments, etc.

There may be enough comfort in that, or maybe not. We have put up some contact numbers here behind me, please take note of them if the material here today troubles you and you need to talk to someone about it.

We hope that you will come and go as you need, take a comfort break, sit at the side for a while if you wish, or go get some air and return when you like – or not at all, there will be no judgment.

I'd like to honour those who filled out questionnaires, we are deeply grateful, and we are all here with you in solidarity, today would not have been possible without your strength, your generosity, your courage and your willingness to be part of a long-awaited solution.

I'd like to acknowledge the many people who live with the impact of sexual abuse in West Cork, generations past, people who did not make it, people who still struggle.

It makes sense that people who have been hurt by people keep doors to people closed. If your door is still closed or you're just beginning to open it I'd like to invite you and everyone here today to peep around the room now, see the number of people who are here to support each other, make eye contact if it feels comfortable and absorb a little of the good intention here. Offer care and support in your gaze and an intention to show up where it wasn't possible to before.

Go home today with a memory of the face of someone who came here to honour your work, to learn from it and to contribute. Make a connection, take a phone number, reach out. Let that be a resource to add to your toolbox whether you are a survivor or a supporter, or both.

Louise Crowley: Professor in Family Law at the School of Law, UCC

It is a real honour to be invited to speak to you this morning on the launch of this incredibly important research. I have had the pleasure of working with Marie and the great people at West Cork Women Against Violence on a number of occasions over the last five years. In 2017 I was a member of the Cork city and county Needs Analysis project Advisory group which gave me incredible insights into the importance and the impact of the work done by service providers to support survivors of sexual harassment and violence. In 2018 I had an opportunity to work with some of the women supported by West Cork Women Against Violence and delivered a workshop on managing access to a parents support group organized by the West Cork Women Against Violence in Skibbereen.

In late 2008/2009, arising from the work of the advisory group it was evident that there was a very real need for training for all service providers and first line responders across Cork city and county. We identified the range of services required for a robust wraparound care system, all informed by the user experience and the experiences of the service providers. However, it was evident that this need was most acute in West Cork.

The research being launched here today provides that vital user-informed insight. This research is powerful it is the raw, honest, visceral, and brave testimony of victims of domestic sexual and gender-based violence. It is powerful because we hear their voices. Ireland has seen significant social legal changes over the last 20 years these changes have been driven by the voices and experiences of individuals and families. Marriage equality and repealing the 8th amendment captured the hearts and minds of ordinary Irish citizens who realized the devastating impact of inappropriate or outdated laws, the devastation of an inability of laws and policies to respond to the needs of individual citizens.

This is where we are with domestic gender and sexual based violence. And I believe this research can be a vehicle for change. **This research**

1. Hears the voice of those who suffer abuse
2. Understands their journey and the obstacles they face
3. Understands what enablers of support look like through eyes of those who need that support
4. Identifies the need for a wraparound care model that is accessible, and trauma informed.
5. Highlights the need to provide dedicated training to all support services that may have contact with victims of domestic abuse.
6. Clearly identifies the need for geographically close and accessible services.

Again, it is critical that we must not exacerbate the trauma suffered by making access to the necessary supports difficult or onerous.

The silence that gives rise to non-disclosure is such a devastating enabler for domestic gender and sexual based violence. We need to hear the voice of victims and we need to respond to their needs.

There are Multiple reasons for non-disclosure – lack of understanding and/or fear of legal system causing an inability to navigate it, ongoing fear of victims of abuse, the actions of abuser, negative experiences of seeking help, inability to seek/secure help, stigmatisation, self-blame, hope for change and desire for a better future, absence of faith in the reporting/legal process. And nowhere to go.

Our inability to adequately respond fails victims of abuse. On foot of this research, we need to do better.

The 2022 National Strategy to address domestic sexual and gender-based violence is crafted based on the four pillars of the Istanbul convention:

Protection, prevention, prosecution, and coordination of policies.

Protection - our support services and first responders must be fully enabled to provide protection for all who need it. This requires **funding support** and a recognition of the 'whole of Ireland' need for adequate response. In terms of legal remedies those needing protection must have access to the courts, they must be supported in seeking relief and they must be assisted in understanding their rights and the processes involved to secure legal protections. Those adjudicating on cases must be properly trained in a trauma informed way and those who are hearing and adjudicating on cases must have adequate and appropriate training.

Prevention

Education is critical - Victims need to be able to recognize the fact and nature of offences. Coercive behaviour must be identifiable. Early warnings must be recognizable. It is not enough to require the victim to take steps to prevent behaviour, we need to tackle those who offend, we need to create an environment through education that recognises the responsibility on all of society to identify and call out unacceptable behaviour.

Prosecution

The criminal justice system is not victim friendly. We have long called for separate legal representation.

Necessary reforms include:

- Criminalization of domestic violence
- Ongoing meaningful implementation of the Victims of Crime Act
- Judicial training
- Adequate sentencing

Coordination of policies

In developing and implementing effective policies we need to ensure that we develop accessible, comprehensive robust wraparound services that are fully funded and fully resourced

In recognition of the significance of the issue of sexual harassment and violence in Irish society, I repeat my call for the establishment of a dedicated full cabinet Minister for Domestic Gender and Sexual based violence. This issue impacts upon, and requires support from across all aspects of Government, including the Departments of Justice, Health, Housing, Social Protection, Finance and Education.

We must facilitate and support victims to exercise agency and choice and to ensure this, provide them with options and support. This research is a vehicle for change and can inform how we can develop our laws, supports and services to provide a gold standard system of support.

This research has powerful role honest visceral and above all is based on the bravery of the victims of domestic sexual and gender-based violence who have come forward to speak to Dr Caroline Crowley, to share their stories, to share their journeys and to provide an insight into the lived reality of those who live through harrowing and often life-threatening circumstances. We need to provide for their survival, we need to support their survival and the survival of all victims of this abuse. This research presents the gold standard approach to listening to victims of gender sexual and domestic based violence.

It will and must inform change. I absolutely commend the West Cork Women Against Violence as always, for their incredible commitment to the people of West Cork, and their never-ending pursuit for better.

Congrats to Dr Caroline Crowley and to Michelle Nagle for bringing such an incredibly robust, and at times devastating, but incredibly powerful piece of research to us all, with a clear ambition for change.

SMALL GROUP DISCUSSIONS:

8 groups reflected on the presentation of the research findings and explored some of the key elements in implementing the key recommendations; and then identified some of the main challenges and potential points of collaboration in that work. Collated below are the key reflections and outcomes/discussion points, themes

General reflections on the research findings

Participants reflected how **the survivor's voice is so important**. Some participants, who don't directly work in the area, expressed **shock at the level of sexual violence being perpetrated** as reflected by the research. It was noted that the statistics are likely to be an underestimation of the scale of the problem but as reported 1 in 6 people likely to have experienced sexual violence and the implications of this affected everyone around the table. Although there are rising trends in reporting which indicate more awareness and the evolution of supports, the issue of underreporting remains, and education is key to addressing it. **Also shock that half of survivors who took part in the survey reported that they didn't feel supported**. Another noted that although stark, the figures weren't shocking for some as many practitioners working in this area can be desensitised.

Some stories were very harrowing particularly hearing the numbers of children affected. Shock was also expressed at the number of adults who suffered sexual violence for the first time in childhood and then went on to experience it in adulthood; **that the majority of survey participants had also experienced sexual abuse as children**. It was noted that this reality lends itself to no longer thinking in silos with regard to child and adult supports.

Participants noted that the research strengthens the arguments for the Barnahaus models, and the material can be used to evidence the need for integration of support services. The Barnahaus Project is such a one-stop shop with all of the relevant specialists under one roof where victims have just one interview. It will comprise a multidisciplinary team engaged in meaningful collaborative practice (not siloed). Interpretation services will be included. Following Galway, one is being developed in Cork led by Tusla with An Garda Síochána, contingent on funding and a suitable location.

Also shock at the research finding that most survey participants who suffered sexual abuse in childhood or adolescence first disclosed to another child or young person. Participants stressed the urgent need to not only support children and young people who have experienced sexual abuse, but also the need to support peers who may hear disclosures. **We need to ensure all feel safe and to know to pass on this information to appropriate adults. However, it was also noted that some adults struggle with receiving a disclosure and need clear information and support to respond appropriately and where to signpost and access services. Parents also need information and support to identify the signs of abuse and sexual violence**.

There also **needs to be awareness around protecting people who do disclose**, who may at risk of being victimised within their community, friendship group, culture etc. Frontline workers are concerned for Ukrainian female refugees in terms of sexual violence and human trafficking. Some 20-30,000 people, mainly women with children are arriving into Ireland and will have needs in this area.

Participants agreed that education and awareness raising are paramount to addressing sexual violence. There is a need to educate whole sectors, families and professionals. We need education for parents to support children's capacity to negotiate and be autonomous within appropriate boundaries. Sexual health, relationships and consent education need to be provided at a younger age than currently delivered. Children are getting involved in sexual activity at younger ages **and so delivery in schools etc should be age appropriate at primary and post primary levels**. It was noted that children are witnessing porn at increasingly much younger ages.

Trauma informed training is needed for all public services, child protection social workers, the community and voluntary sector, the judiciary and An Garda Siochana in how to recognise, how to best respond and how to support the survivor access help. One participant noted that it was interesting that some survivors are not looking for an overly emotional response from professionals. Training is also needed for the judiciary, and they need to participate in forums like this. A trauma informed approach seeks to support and not to retraumatise a survivor e.g., by having to repeatedly tell their story.

Collaboration is key to responding to sexual violence – not just one service. There is a **need for community awareness raising campaigns, including ‘flooding campaigns’ targeting young people with direct messages** e.g., ‘Listen, Understand, Seek Help’. Campaigns should be community wide – targeting all sectors – libraries, sports clubs etc, and should aim to break the secrecy around sexual violence, including that against children, and address the issue of consent. Campaigns could also work to fundraise as well as raise awareness – something similar to the ‘Darkness into Light’, a solidarity walk but something symbolic of preventing, surviving sexual violence.

Awareness raising initiatives should be inclusive of minority communities, including for ethnic minorities and migrant communities. There may be reluctance to disclose for some communities because of particular fears – fear to report when living in tight-knit communities or in confined communal spaces. There may also be a fear of state authorities. **Services and support also need to be inclusive of diversity, and diverse ethnic and cultural groups need to see themselves in the professions,** (e.g., legal) and social support services. One example is [Black Therapists Ireland](#). Ways to support minorities into professions and services include scholarships and anti-racism training in schools and at third level.

We need to be inclusive of people with disabilities in all that we do and ensure they are prioritised.

We need to **empower young men** and programmes such as the **'bystander programme' in UCC** should be rolled out to other groups who may not be at university.

The focus should be a move towards pressure on the perpetrator and for them to leave rather than victimisation of survivors and their supporters

The cultural context of growing up in rural and small-town Ireland was raised – how people knew about sexual violence growing up but how this was ‘accepted’. This highlights the importance of education and knowing the appropriate language at an early age to be able to discuss and challenge it. The ecological model was good framework to use and the importance of the community within this – perpetrators are often known in small communities. **We need more critique;** community needs to be critiqued as to why they continue to provide a cloak of secrecy around the perpetrators. An Garda Siochana needs more critique particularly around victim blaming.

The significant distance many areas in West Cork are from services is retraumatizing and revictimizing survivors – costing them in terms of time, the financial cost and emotional distress.

People are asking themselves ‘how to begin’

Discussion on establishing a West Cork Sexual Violence Support Service:

Key elements needed:

Overall, it needs to be accessible and integrated, with a multi-sectoral and multi-agency approach. It needs support from national policies and strategies, and high-level management support at local, regional and national levels.

It needs to be:

- Local and accessible: for all with a model based on a hub with outreach services including childcare facilities, court accompaniment, legal advice, therapeutic supports, forensic service and supports for parents/guardians/carers and natural supports in how to support the abused child/adult.
- Safe and confidential: All family/community/primary care centres have a space; make sure the model of delivery fits the family. A person could be seen as accessing health or community group, so privacy maintained - access the SV service within another service, discretely. Perhaps a mobile unit could be possibility?
- Welcoming and inclusive: Getting through the door is a massive piece – it needs to be welcoming to all. Training, including anti-racism training for all professionals and support staff including front of house, so that people can have faith that they will get a welcome from all
- Friendly and warm: with a personal connection: Relationship with one person is essential – just to sit with that person and really be with them; ensuring that they know they are believed. Having a cup of tea, being with the person in their distress, being present with them is essential
- Person centred approach: Listening to the person is essential - really listening – letting them know they are being heard – most important and fundamental
- Community based: Should be community approach, owned by the community, embedded in the community

It requires:

- Interagency approach: with clear terms of reference for each agency regarding their role in the service. Clear boundaries to ensure work is not duplicated. Induction training across all agencies regarding the roles and responsibilities of each agency and where these roles end and another begins, including own role within own agency. Need training in language and how to respond appropriately. Communication between the services with clear and simple pathways to refer to a key person – a personal connection is fundamental
- Recruitment of qualified, experienced staff
- Peer-support groups
- Quality support for front-line workers working to support survivors.
- Resources!
- Information about the processes involved in sexual violence to be made available to frontline services – what happens in SATU, what does SIT do? What happens in Child Protection, what part do the Gardai play? Where does the DSPU fit in?
- Helping children when they've heard a disclosure, so children automatically know what to do.
- Promotion: Notification that the support service exists – promote it through HSE, CIS, MABs information material etc

Key challenges:

- Increasing levels of violence including sexual violence and sexual violence against children; also issue of children committing sexual offences

- Huge issues around technology and young people's access to the internet and therefore to pornography; young people accessing pornography at a very early age
- Need to work across the age spectrum when dealing with these issues
- Also, use of drink and drugs – link to sexual violence but not the underlying cause
- Need to put the issue of sexual violence on all agendas
- Resources! Short length of therapeutic supports available (6-12 sessions). We need a model like Pieta (30 sessions for anyone affected by suicide)
- Overall lack of funding, should be ongoing so can plan and develop
- Recruitment of qualified, experienced staff
- Pay and conditions for staff in funded agencies (e.g., pensions, employee welfare, employee protections)
- Access is a key challenge given geographical nature of West Cork and the lack of transport links, limited-service times for routes that do exist, and the cost of local transport. Need creative approaches to address lack of transport – e.g., Cancer Connect, dedicated taxi drivers.
- Lack of childcare and afterschool provision. FRC's with their childcare provision could be key to delivering a support service. Making 'spaces' within the community (GP visit, parent and toddler group, youth club, scout group, sports club, school) for disclosures to take place.
- Lack of trust/confidence in services. Survivors often don't have confidence that will get the support they need. A lot of the community and youth supports are gone– for example community mothers – that would have provided a safe and familiar space to disclose. Services, community groups staff/volunteers etc meeting the dedicated support workers/workers – so they know who they are referring onto – inspires confidence for the service and the survivor – familiar face and direct numbers
- Working to ensure inclusion of all – Travellers, migrant and ethnic minority groups, people with physical disabilities and intellectual disabilities, mental health issues, other vulnerabilities. The service also needs to open to all age cohorts.
- Needs to be explicitly open to Travellers, visibly welcoming, anti-racism policies, keeping the communication and opportunity to access the supports open so that when the time is right for them, they will access.
- Online services/hub – webchat – could be useful in reaching hard to reach communities and make it accessible for others, women with young children etc – it could work to build up confidence before direct meeting
- Ensuring confidentiality: Often people have a limited sphere where they are comfortable in West Cork – so outreach is essential; but privacy isn't always secured by going to another town in West Cork as good chance people will know you in that town also
- Cork is such a close-knit community, and the family often close in to protect the perpetrator – so very difficult for the survivor to disclose, to look for support, to look for justice

Discussion on the sexual abuse of children and what is needed to respond:

- GDPR should not be permitted to override child protection issues. The current system allows alleged abusers to have access to child's statements/notes etc. Support systems for the child are vying with family support emphasis at times, bearing the weight of father being removed from the home, leaving room for 'daddy to be forgiven' and permissions still being sought from alleged abusive parents.
- The conversation turned to Safe Spaces and once a child/young person/adult at risk has been removed/ wants to leave the family home- where then do they go, the need for other agencies to collaborate and provide responses: housing, access to employment/education/income? What else is available? Who else is out there? Gardai often don't know what services are available and need information and training on where victims can access advocacy and supports. This led to discussion

about a Safe House style model for survivors of sexual abuse/families needing safe space with opportunity to identify needs, look at options, stay safe while doing so and help to do all that. How do you 'hold a safe space- handhold a family when they need it' How can that be done in somewhere for example like Castletownbere? Is there a model of safe house for sexual abuse victims?

- How could the meitheal model be adapted/developed in a situation of sexual abuse against a child?
- One Stop Shop (OSS) where victims get accompaniment and advocacy to navigate the journey through the services they need- where they do not have to walk the road alone. A multi-disciplinary team to support so that they do not have to keep re-telling their story. There are too many obstacles for victims- they need a one stop shop with simple, accessible information and routes to services. The OSS need not be site-specific - it can also be a virtual space for OSS.
- Retrospective disclosures of sexual abuse in childhood are difficult because of mandatory reporting- need to address this as survivors are disengaging with supports because of it.
- The demands on therapeutic services will always be there but not all children require therapy and in its place psycho-educational work with family could help and be done while waiting for therapy.
- There are layers of need- acute issues, crisis, people who have not disclosed and layers in between- the trauma is what needs to be addressed.

Discussion on training and support, supervision and self-care strategies for professionals and staff:

- Everyone needs trauma informed training with all organisations working collaboratively. That trauma informed training for all sectors, professions, staff and volunteers is needed, is well recognised. However, workers also need to 'feedback and debrief'.
- Professionals, staff and volunteers (in particular those who are in receipt of disclosures including Garda, Paramedics, GPs, Nurses and Doctors, and other frontline responders) also need support and dedicated supervision; and help in developing self-care strategies. It was noted that psychotherapists and counsellors have mandatory 'supervision' and established practices in terms of one-to-one and / or group supervision.
- A significant concern for professionals and staff etc is who do they turn to for this support
- Organisational cultures must ensure that workers are comfortable with seeking support and showing their vulnerability in the face of trauma. Open Dialogue¹ is an approach developed in Finland where employees are encouraged and supported to turn to colleagues for help. Local therapist with experience of this practice recommended how it helps colleagues to truly know and care for each other.
- An Garda Síochána has recognised how its traditionally macho culture has not encouraged members to access support services. The need for organisational change has been highlighted further by suicide rates among serving members with 7 in 2019 and 6 in 2020. Working in collaboration with the Garda Representative Association (GRA), measures added to its Employee Assistance Programme (EAP) now include: a phone counselling service available to staff directly and confidentially (bypassing managers) 3-day peer support training to encourage effective mutual support among gardai, a Wellness App, a debrief (every few years), a detailed selection process for specific staff roles to ensure good fit for more challenging positions, training on trauma in the Garda Training College.
- NOVAS is an organisation supporting people experiencing homelessness and multiple traumas. It has rolled out trauma-informed training across the organisation. The training was delivered to all staff from the CEO and Board to frontline support workers, office staff, cleaners, etc. Training content and language was tailored to the group. The trauma-informed practice initiative is overseen by a steering committee that meets monthly, while all in the organisation meet quarterly

¹ Local expert is West Cork HSE Clinical Psychologist Dr Iseult Twamley: <https://dialoguerevolution.com/about-us/driseult-twamley-bio/>

in relation to it. Be aware that it is hard work, it is a journey, an art form. It is growing awareness in the service that it is not 'us and them'. Positive outcomes of trauma-informed training have included a decline in incidences of aggression among service users with benefits in terms of staff, resources, better relationships between staff and service users and better outcomes for service users.

- Ways to broaden out trauma awareness and trauma-informed care and self-care across society and professionals and staff are to:
 - Ensure practice is embedded among trainee staff from the outset
 - Integrate into professional training programmes e.g., for teachers, guidance counsellors, chaplains, guards, solicitors, barristers, GPs, etc.
 - Include modules at third level across academic programmes e.g., social care, social work, medical, legal, business, political, etc. or start by making it an optional module as per the Bystander Intervention initiative at UCC
 - Include in the national education curriculum in schools
 - Roll out programmes for community and sports groups e.g., expand the Children First training delivered to Designated Liaison Person already receives Children First training, so add in trauma-informed care and self-care
 - Widen out to all of the community through public workshops
 - Expand parenting programmes from current offer of dealing with challenging behaviours to supporting parents in general with 'how to support them to support their children'.
 - Key role for Family Resource Centres (FRCs) but no FRC in Bantry and Clonakilty. Such local services need to be in the communities in which we work to provide vital universal family supports.

Discussion on rolling out a relationship/sexual education and awareness programmes:

A key question is: Who will design and roll out the programmes?

Key elements needed:

- It's good to see that there is some educational awareness
- Identification of resources
- Variety of age-appropriate programmes with trained staff within schools
- Some good models already out there which would be useful to map, we need to know what's working already
- Needs to be linked to policy/ a framework; for example, UCC workshops are mandated – seen as key
- There needs to be a top down and bottom-up approach to education and awareness
- Peer co- facilitation model examples such as UCC bystander training and a Dublin private school 'whole school approach' these were seen as models of good practice which could be replicated
- Importance of a community approach – schools and the community 'buy in'
- Young people's voices need to be heard including those more marginalised and those home schooled; Youth led pieces, use of creativity/animations etc.
- Range of training needed to include parents as well as teachers and young people ○ Some schools very proactive in their educational pieces, but parents should be educated too especially helping them to deal with their fears and embarrassment and how to deal with issues with social media.
- Integrating this education in parenting classes. This was challenged by one participant who queried if parenting classes are reinforcing or challenging stereotypes. What is the model being used? They suggested that the programmes need to be more critiqued to see what is being promoted. Who is teaching the class, does it need a new name? If it is too small it becomes restrictive, needs to be more inclusive not just for teenagers.

- New parents need information (gender-based violence increases in pregnancy - 'parenting pack' could be provided) – Intervention at different stages is needed with a variety of approaches is required.
- Parents, myths, perceptions need to be challenged.
- Good promotion and use of media
- Visibility of services/programmes
- 'Rites of Passage' training – Transition periods e.g., Junior to Senior. Having trusted adults and agreed level of responsibilities
- Culturally competent programmes required
- Need people to have the information and understand what is safe and what isn't safe from a very young age.
- Get rid of sense of entitlement with young children, e.g., they have the right to say no to a kiss.
- Is there a role for an intergenerational piece with education? Grandparents have a huge influence on their grandchildren. They grew up in a time when DSGBV was acceptable but need education too. The older generation can be very reluctant to discuss around sexuality.
- When developing programs, we need to be aware of all ages, their understanding of cultural norms and beliefs around marriage and women's roles. The older generation of women have not been able to say no. Address the cultural issues.
- Ensuring we respond to the messages that survivors have told us
- Instead of being grateful for what is there we need to say that it's not enough.
- Trying to teach women to navigate the system
- Not accepting the negative language, start with the smaller pieces. A need for advocacy services, someone who can navigate through the issues.
- Being informed allows to start the conversation. The more people can start the conversation the better.
- Can be difficult for people to hear and learn to navigate. We need to learn from the top.
- Encourage discussions-many don't know what to say, many don't recognise sexual violence
- Extend the education to other organisations.
- For rolling out education and awareness raising: We need to know who is doing what, mapping of the programmes and frameworks being used. Dr Louise Crowley sits on the National Advisory Council NWCI regarding higher education institutions, can we feed into this?
- We need visibility –can we hold a conference with principals/parents and school counsellors to present research, highlighting what support is available, impact of SV, how to handle disclosure and training available etc.
- Call out to the community to get involved?
- Start local and pilot a model in West Cork

Key challenges:

- Sourcing funding
- We are not valued as a sector therefore no funding available and we don't have resources.
- Collaborative is best practice, but every service is stretched therefore difficult to find the time to attend training and provide training.
- Need to be more collaborative but difficult when overworked. In the UK if the police are called to a home because of DV the child's school is informed the next day. This means that the child can be supported. We need a joined-up service like this. The ownership these services to maintain connectivity. There is room for a larger process in place. The National strategy is not enough.
- Coordination across the county
- How to ensure quality roll out of programmes?

- Cultural challenges, acknowledging culture within some schools and gendered roles in society
- Reaching marginalised children
- In small rural schools maintaining confidentiality is difficult. Teachers may know the parents personally, and this could mean less likely to believe a disclosure or reluctance to report. We need to call out indiscretions, anonymous people are making life changing decisions for vulnerable people- garda/community leader knowing the parent/suspect-no consequences.
- Something is failing if the reports are so low. An example was given with CASP that perpetrators have a right to respond but if the timelines are not adhered to (and they can be quite unrealistic) the perpetrator can go to the high court and have it quashed. It's all so legislative and prescribed, not of benefit at all to the patient.

Discussion on resourcing appropriate community-based prevention and early intervention:

Key elements needed

- Training is essential to give practitioners the skills they need to help survivors. Especially since Family Resource Centres are so stretched already. Many groups already collaborate well in relation to sexual violence, but training would further support these relationships and aid inter-agency work. There is increasing numbers of cases being handed down from child protection and many of the service users may have experienced sexual abuse. This is even more reason to motivate training. Need funding to get this training
- Community training to prevent sexual abuse from occurring, going unnoticed and to aid those who receive disclosures
- Use creative ways to educate children and the community on consent; Support groups or one to one sessions do not work for everyone so creative ways can be used to access these people; Drama groups that address youth consent have been effective in New Zealand and similar groups in Galway
- Using gentle methods, such as youth clubs etc to create bonds with the youth may work for some. Something similar was used in The Glen and it allowed teens to rehearse responses in relation to consent
- Use imagery/advertising, e.g., share messages on milk bottles
- Using technology has allowed hard to reach people, such as single mothers to attend counselling appointments etc. It has also worked for childcare counselling
- Systems in the past such as Coisceim worked as it was low-cost counselling (Possible €5 a session), yet if people could not afford this they did not charge. Childcare was offered on site
- Wherever new services are developed, the location should be well-thought out. Perhaps use primary care centres. By using a joint location, it further protects the privacy of the service users, especially in some local communities in West Cork.
- It is important to note that while it is good that low-cost counselling is on offer and that an array of services can be used to support survivors, there should also be a high level of professionalism and accreditation.

Key challenges:

- Resourcing and funding.
- Reaching families that speak different languages. Kids translating for parents.
- Maintaining a balance between developing good relationships and dealing with disclosures.

Discussions on how we can collaborate on all of this work:

- Training: Interagency induction training for all public services; trauma informed training for all public services CPD workshops accredited with CPD points
- Events and campaigns
- Not keeping our work in West Cork – spread the word
- Scaling up: Write up the model we develop for dissemination and replication; Not keeping our work in West Cork – spread the word
- Pick up the phone to your colleague or another service for advice and support on rolling out trauma-informed care.
- Networks like the West Cork Child & Family Support Network (CFSN) create intentional reflective spaces for sharing work and life experiences. These are vital spaces for collaboration and for mutual support in rural areas, especially for lone workers. CFSN: very strong, connectivity very strong and this has come from the ground up. Increase and encourage this, collaboration is key, developing networks and signposts to help each other. If I don't know where to go for help, I know someone who does.
- New CYPSC Interagency subgroup –clear TOR, identification of key stakeholder
- There are lots of information and resources across the different services so share that knowledge widely in terms of: good examples, best practice, stories
- Leadership is important.
- Media has a responsibility to share positive news and developments like this to reach the wider public and help to create social change. Other platforms are free advertisers (e.g., West Cork People) and social media.
- Each community has multiple groups e.g., 60 community and sporting groups in Kinsale, each with its own WhatsApp group. Identify and connect with two representatives from each group to help spread knowledge and awareness.
- Ultimately, build up momentum to develop cross-sectoral, trauma-informed practice protocols across organisations.
- Create solid groups to develop specific plans – WCWAG has led the way in this already
- Today is a starting point and there is great solidarity. There is a strong community in West Cork.
- There are already many volunteers and willingness, we just need the resources
- Do a survey on what people want and what creative methods can be used. We need to know what each of the organisations/individuals here at the launch can offer. We could design a template for completion by members to capture a variety of information to support collaboration
- Approach different people to develop community supports
- Link with local politicians to push for the resources that is needed
- Research solutions that have worked in other countries
- Set up a mailing list of allies, share what's working, what expertise there is etc
- Involvement of the Corporate sector, e.g., Chamber of Commerce show the research and the impact on businesses
- Is the County Mayors dinner a Platform?
- Open up the conversation on why people attempt suicide, raise the profile/education/prevention