

ESHE

**Equally Safe
in Higher Education**



GBV Policy Development

16 November 2016

**Report from Initial
Discussion Session**

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Session Briefing

Equally Safe in Higher Education

The University of Strathclyde is currently undertaking a two-year pilot project to implement the Scottish Government's Equally Safe Strategy in a higher education setting. Based in the School of Social Work and Social Policy, the Equally Safe in Higher Education (ESHE) project is part of a growing national and international trend of campus-based work which began in the US. The project has the overall aim of producing an Equally Safe toolkit for challenging gender-based violence (GBV) on University campuses and is funded by the Scottish Government for that strategic purpose.

ESHE is adopting a partnership approach to implementation across four work-streams: GBV Prevention; Early Intervention; GBV Corporate Policy, Campus Safety and Staff Development; Curriculum Development and Knowledge Exchange. This work is supported by the ESHE Research Team.

Corporate GBV Policy, Campus Safety and Staff Development

This work stream aims to ensure a strong basis from which to build a coordinated campus-wide approach to the prevention of GBV. This will involve policy development and include implementing procedures to ensure sensitive responses to disclosures, support pathways for those affected and interventions with perpetrators. ESHE aims to incorporate, where possible, good practice examples developed from Scotland's successful coordinated multi-agency approaches to GBV into a higher education setting.

A working group has been formed with representation from University of Strathclyde H.R. Directorate, Organisational and Staff Development, ESHE, Scottish Women's Rights Centre, Glasgow Rape Crisis Centre and Zero Tolerance Scotland. The group will lead on a collaborative GBV Policy development and consultation process with representatives of university staff and students and other key internal stakeholders.

October 2016

Report from the GBV Policy Session

A facilitated discussion session was held on 16 November 2016 to discuss potential ways of developing and taking forward a new GBV specific policy. Below is a summary of the main findings organised by theme.

I – WHO DOES THE POLICY APPLY TO?

The policy should cover both ‘victims’ and ‘perpetrators’ and be applied to everyone who has affiliation with the university. This is to include Students, Staff (for example permanent, sessional, externally contracted), placement organisations and students on placement or internships. Guidance for any other external organisation who works for/within the university should also be included.

II – DEFINITION OF GBV TO BE USED

Discussion suggested that any definition should include potential psychological impacts of GBV. GBV in the workplace should be defined carefully to ensure a balance between personal/professional boundaries

III – RECOGNISING IF SOMEONE HAS BEEN/IS EXPERIENCING GBV

Points raised in the session suggest that it is firstly important that everyone understands what GBV is, so that they can recognise it if it’s happening to themselves.

In students, some signs to look out for included changes in performance; missing classes; isolating themselves from their peers. Also, it was suggested that students submitting mitigating circumstances/extensions could be asked questions/given a space to talk about issues.

In the case of staff, several of the same signs were highlighted, e.g. a change in performance and isolation.

Overall, it appears the creation of an environment/space where discuss of GBV is safe and taken seriously would aid disclosure of incidents.

IV – EARLY INTERVENTION & SUPPORT (Students)

With the highest response rate, discussion surrounding the student case study fell into roughly 5 sub-themes. These can be identified as

- What to Say/Do in Light of a Student Disclosure

Issues here included ensuring that the student felt comfortable, was being listened to and taken seriously. Several questions came up, exploring ideas around how the student would feel around a number of issues such as campus safety; feasibility of continuing studies; feasibility of transferring to another university and whether they would feel comfortable reporting the incident to the police. The main message from the notes was that of staff facilitating discussion about the best options, to help the student make tough decisions about their future/studies and move forward.

- Support Services That Can Be Offered

Ideas for useful general support services were proposed:

- A crisis team approach to first response to triage on a case-by-case basis and to re-empower the survivor
- Immediately available emergency appointments with teams such as Student Counselling service
- Ensure existing services are signposted and easily accessible to the student
- Visible on-campus support, such as a Rape Crisis drop-in
- An advocacy service that will support the survivor from disclosure onwards
- Partnerships with specialist external support agencies

- A joined-up approach between the University and external support agencies (so information need only be disclosed by the survivor once and shared as necessary and if required with consent)
- Setting up a student survivor group to facilitate peer support

As well as ways of supporting the survivor with their studies:

- Revising their study plan and exploring flexible ways of delivering education (e.g. online/mixed mode learning) for those who don't feel comfortable on campus
- Offering financial support to the student
- Facilitation of a move to another university if requested

- Dissemination of Information Across Campus / Staff Training

The importance of communicating knowledge about GBV and any policies/procedures/support put in place across campus was highlighted, with the suggestion of creating a searchable, organised webpage to house all the information e.g. policy documents, support service information and other resources.

Several training needs were also identified. Examples of these include:

- Appropriate language to use when addressing a survivor (e.g. not labelling 'right' and 'wrong' actions, avoiding victim blaming)
- How can we recognise cultural diversity?
- How to create an environment in which a survivor would feel comfortable talking (ensuring people know they will be responded to positively and taken seriously)
- How to maintain confidentiality (and when it's appropriate to break it)
- Who does what across campus and what lines of support/processes should be followed?

- Responsibilities of Staff Handling Disclosures

The role of staff in handling disclosures of GBV was explored and a few of their responsibilities were suggested. These included:

- Academic staff ensuring the survivor gets all the academic support available and to help them remain on track with their studies as much as reasonably possible.
- Ensuring support was offered covering the survivor's health (including mental health)
- Risk management and safeguarding other students on campus i.e. alerting the appropriate people to the incident and ensuring campus safety measures put in place.

- Impact on Staff Handling Disclosures and How to Support Them

Finally, consideration was made to supporting the member of staff who receives the disclosure, in making them aware of the Employee Assistance Programme and providing some sort of debrief after a disclosure has been made.

IV – EARLY INTERVENTION & SUPPORT (Staff)

Discussion around the Staff focused case study was still robust, with a different focus/outlook to the student case. From this it could be useful to think about having separate policies focusing on GBV for staff and students. The broad themes that came up here were as follows:

- Personal Responsibility

Noticing the warning signs and informal methods of support were discussed from the point of view of a colleague of the survivor. In all cases, it was decided acting with discretion was essential and the most important way of supporting a colleague seemed to be creating an open environment where they could discuss/disclose to you without fear. It was decided that no formal policy could be put in place to dictate the actions of colleagues, but this may be where formal training would be useful – in instructing staff in their possible role in supporting a colleague in this situation.

- Managerial Responsibility

Should a member of staff wish to disclose the incident/their situation to their line manager, further formal action could be taken such as:

- Having a discussion and ensuring their working environment is as safe as possible, including ensuring minimal contact with the accused/perpetrator at work
- Ensuring they are aware of the support available to them i.e. the Employee Assistance Program, Occupational Health referral, flexible working.
- Offering personal safety systems such as a panic alarm or similar to help them feel safe on campus

It would also fall to the manager to determine whether wider university services need to be informed with regards to campus safety etc.... and to keep people safe within the department

- Impact on Staff Handling Disclosures and How to Support Them

The effects of a disclosure on the health/wellbeing/safety of the manager would need to be addressed and a formal route of escalation drawn up in serious cases.

- University Responsibility

There was also discussion around the wider university's role in making sure GBV is addressed appropriately and consideration of campus safety (with a potential harasser on campus) and the need to protect the survivor at work.

In both the staff and student cases it was important to note that there is no requirement that a survivor disclose anything to the university and should they decide to do so, no pressure should be put on them to report the police if they do not wish to.

V – GBV PERPETRATORS

Several different victim/perpetrator combinations came up in conversation – i.e. student – student / staff – staff / staff – student / student – staff, and considerations were made about where incidents could occur i.e. on campus, out on placement, in the workplace, at home.

In discussion, it was suggested that each type of incident should have a specific response pathway, depending on the severity of the incident and the risk it would pose to individuals and/or others or the university community.

Support for perpetrators was discussed, with a suggestion that they should be supported, especially in the case of student perpetrators. This support would be separate from the support of survivors, but operative between both services e.g. parallel but separate service track.

In the case of a member of staff perpetrating an incident, serious consideration surrounding their suitability to work/hold professional accreditations or other positions would be considered and dealt with at the appropriate level.

VI – RECORDING & MONITORING GBV

The necessity of officially recording GBV was called into question, as it was difficult to find justification for it. If it were to be recorded there would need to be very clear guidelines outlining exactly why a record was being kept and how to handle, file or share the data in a safe/legal manner.

VII – GBV POLICY IMPLEMENTATION

Discussion highlighted that any policy should be consistent across all Faculties/Departments and hold all levels of staff to the same standards. It should also be specific to GBV - so can build on existing policies (i.e. complaints procedure) - but stand alone; also, be linked with existing policies where appropriate (e.g. Student Discipline Policy).

The policy should be written in simple language accessible to all and lay out information clearly using tools such as flow charts. It should also be easy to find and a searchable repository should be created to allow users to access information quickly and easily.

In implementing the policy, it is important that we make as many people as possible aware of its existence and ensure that those who perform specific roles within the policy (including for example Student Advisors, Line Managers, Placement Leads) are aware of their responsibilities with regards to the policy.

To this end training should be rolled out to staff in how to respond to GBV, students in how to recognise and report/access support for GBV and all affiliated parties with responsibility for student safety and wellbeing (including for example USSA, Halls of Residence)

APPENDIX A - SESSION PROGRAMME

Gender-Based Violence (GBV) Policy Development Session

16th November 2016

1.00pm - 4.30 pm

Room CW507B – Cathedral Wing, Business School
University of Strathclyde

1pm	Welcome and Introductions (Alison Locke)
1.05	Aims of the Session
1.15	ESHE (Anni Donaldson)
1.20	Glasgow Rape Crisis Centre (Isabelle Kerr)
1.35	Scottish Women’s Rights Centre (Katy Mathieson)
1.45	Zero Tolerance Scotland (Amy Marshall)
1.50	Human Resources Directorate (Alison Locke)
1.50 – 2.55	Small Group discussions - Case Study 1 Katy Mathieson
2.55 – 3.15	Coffee
3.15 – 4.00	Small Group discussions - Case Study 2 Isabelle Kerr
4.00 – 4.25	Plenary - Summarise and any other questions Group Facilitators Feedback
4.30pm	Closing Remarks Alison Locke

APPENDIX B - FACILITATORS NOTES

ESHE Campus Policy Development Session 16 November 2016 Facilitator Notes

Facilitators

- 1 Amy Marshall
- 2 Katy Mathieson
- 3 Isabelle Kerr
- 4 Alison Locke

Co-facilitators

- Maureen Noor
Fiona Drummond
Kelly Claffey
Lauren O'Donnell

As a facilitator, you have a key role in ensuring that your group produces their summarised thoughts on each of the key GBV Policy themes (I-VII) below. These will be written on individually numbered flip chart sheets and posted around the room. Please guide the discussion to ensure that:

- Participants are clear about the tasks set;
- Everyone in the group has a chance to participate;
- The discussion moves forward, keeping to the short timescales set for each section of the case study, whilst ensuring that key ideas are not missed;
- Each of the key GBV themes below are discussed, taking the opportunity to introduce them, where appropriate; and the group's ideas are summarised and recorded appropriately.

Group Exercise: Case Study 1: 2.00 – 3.00

One facilitator and one co-facilitator at each table

Materials:

- Green post-its and pens
- Case Study 1 Parts 1-4 (on separate sheets)
- Printed list of Themes I-VII (for reference)

Katy will read out each of the four parts of Case Study 1 to the whole group in turn.

Instructions for facilitators:

- give out each part of the case study after Katy reads it out.
- facilitate a 15-minute group discussion to answer each of the five questions in turn
- co-facilitators should note/summarise main point of discussion
- during discussion encourage group members to note their thoughts on the key themes as they arise - these should be written on green and pink coloured post-it notes.
- Please ensure post-it are marked Case Study 1 + the relevant Theme number I-VII.
- ask group if they have any additional points they would like to add and note these
- summarise key points from the discussion for the plenary feedback session at the end of Case Study adding in any additional points made by the group. Note that the facilitator (or their delegate) will be asked to verbally summarise the main thought(s)/idea(s) relating to each GBV Theme at the plenary session in no more than 5 minutes.

3.00 – 3.15 Coffee Break: Facilitators please get together for a quick debrief ahead of Case Study 2

Group Exercise: Case Study 2: 3.15 – 4.10

One facilitator and one co-facilitator at each table

Materials:

- Yellow and orange post-its and pens
- Case Study 2 Parts 1-4 (on separate sheets)
- Printed list of Themes I-VII (for reference)

Isabelle will read out each of the four parts Case Study 2 to the whole group in turn.

Instructions for facilitators:

- give out each part of the case study after Isabelle reads it out.
- facilitate a 15-minute group discussion to answer each of the five questions in turn
- co-facilitators to note/summarise main points of discussion
- during discussion encourage group members to note their thoughts on the key themes as they arise – these should be written on yellow and orange coloured post-it notes.
- each post-it should be with marked Case Study 2 and the relevant Theme numbers I-VII.
- ask group if they have any additional points they would like to add and note these
- summarise key points from the discussion for the plenary feedback session at the end of Case Study 2 adding in any additional points made by the group. Note that the facilitator (or their delegate) will be asked to verbally summarise the main thought(s)/idea(s) relating to each GBV Theme at the plenary session in no more than 5 minutes.

GBV Policy Themes to identify during discussions. Please note that the “Discussion points to note” sections below are for facilitators only, to assist in questions to ask the group.

I. Who Does the Policy Apply To?

Discussion points to note: all full time and part time staff, all full time and part-time students, sub-contractors, sessional staff, staff/students on placement, internships, secondments, exchanges.

II. Definition of GBV to Be Used

Discussion points to note: what do people think GBV is, what’s included/not included?

III. Recognising if someone has been/is experiencing GBV

Discussion points to note: what are the signs/evidence to look out for if any; who needs to be able to know this, what actions to take following disclosure and what support do they need in the event of disclosures?

IV. Early Intervention and Support

Discussion points to note: What support/response pathways exist/ gaps for those affected; for those supporting them e.g. line managers. How aware are people of internal and external services/sources of support, relevant policies? What procedures to follow in an emergency/ where incident reported to police/not reported to police? How well is risk assessment, safety planning and risk management understood for each form of GBV? What is the relevant HR trail, is the situation recorded, where, by whom, shared and for what purpose?

V. GBV Perpetrators

Discussion points to note: assessing and managing risk from perpetrator, implementing safety measures; lines of accountability; GBV policy fit/compatibility with existing disciplinary policy/robust codes of conduct/other relevant. Coordinating SEES and USSA responses, internal/external responses including police/criminal justice; organisational boundaries. Corporate response to staff and student perpetrators – reputation management.

VI. Recording and Monitoring GBV

Discussion points to note: thresholds of confidentiality for survivors: confidentiality and information sharing/ data protection/information sharing protocols.

Referrals in and out and which services?

What is recorded and why? What is info/data used for? Who gets to see it?

Anonymised data/information sharing

Data collection/recording and monitoring

Internal and external information sharing/data protection

Service uptake data; legal requirements re court proceedings.

Information storage

VII. GBV Policy Implementation

Discussion points to note: campus GBV primary prevention and awareness raising campaigns, staff development, training and support needs identification; what training, CPD, resources/guidance do staff/students need?

APPENDIX C - CASE STUDIES

Case Study 1: Scottish Women's Rights Centre Case Study Oct 2016



Part 1

A meeting is requested with xxx from a 1st year student named Claire. When Claire attends the meeting, she is anxious and hesitant but after some reassurance goes on to explain that something has happened to her. Claire tells you about an attack that happened 2 weeks previously. Claire had been on a night out with friends from the halls, they had been drinking throughout the evening and went on to a party in a friend's flat. Whilst at the party Claire passed out in a bedroom. She woke up when a fellow student penetrated her. Claire becomes very distressed speaking about the attack, she froze when she woke up and was unable to move or shout out. She lay still until he finished and he left the room without saying a word. Claire was terrified and didn't know what to do. After some time, she got dressed and fled from the flat. By the time she got back to the halls it was 4.20am. She showered and stayed locked in her room for the next day.

Claire has not spoken about what happened to anyone else, she has not reported to the police or sought any medical attention.

*How might you respond to Claire's disclosure?
What issues do you need to consider for Claire?
What issues may be around for you?
What are your responsibilities?
What actions do you take and who do they apply to?*

Part 2: 3 Months Later

Claire continues to attend lectures but her course work is suffering and her grades drop. She has moved out of student halls because the person who attacked her also lives there. She struggles to afford her flat and has taken on a p/t job to pay for it because at least she feels safe there. Claire says that people on her course and in the halls think she slept with the person who attacked her. She struggles to cope and feels that she is being judged. Claire says she reported to the police 2 days ago. She asks for extensions to her work and asks if there is anything the Uni can do about the rumours. Claire goes from sounding really clear and strong to being very distressed, she says she no longer goes out, she's not coping well and that she doesn't know where to turn.

*How might you respond to Claire's disclosure?
What issues do you need to consider for Claire?
What issues may be around for you?
What are your responsibilities?
What actions do you take and who do they apply to?*

Part 3: 12 Months After the Attack

Claire comes to speak with you again at the start of her 2nd year, she is not looking well and at one point you think you see cuts on her arms. The person who attacked her has been charged with rape but denies this, you were interviewed as part of the investigation. She has not seen him on campus since returning but has seen his friends who were previously talking about her. One of them was in the flat at the time of the rape and has been called as a witness. He is saying she lied and is intimidating her, following her and making comments. Claire says that she didn't want to return to Uni, she had to take resits over the summer and just got through. She is terrified

about the upcoming trial. She has had telephone support with RCS Helpline and is due to start in person support at GRCC, they have an Advocacy worker who will be able to support Claire at the trial.

How might you respond to Claire's disclosure?

What issues do you need to consider for Claire?

What issues may be around for you?

What are your responsibilities?

What actions do you take and who do they apply to?

Part 4: 18 Months Later

Claire comes to see you following the trial. The perpetrator was charged with rape but pled not guilty. Claire talked about how difficult it had been to give evidence. Although she had special measures – a screen which meant she could not see the perpetrator whilst giving evidence – this process was traumatic as she had to recount in detail what had happened during the attack to the court with the full knowledge that she was going to be cross examined by his defence. Unfortunately, a Not Proven verdict was returned at the conclusion of the case.

The friend of the accused (who was also a fellow student) was a witness in the criminal trial. He was accused of perjury by the trial judge and required to appear before her with his own solicitor – he was given a warning by her but no charges were brought. During and subsequent to the trial, the fellow student began harassing Claire. This was reported to the police but due to the nature of the incidents and the lack of corroboration, they were not able to take any action. Claire felt that her ordeal was never ending and that she was now subject to the abuse of another perpetrator. Claire is still having support at GRCC and they have arranged for her to see the SWRC solicitor who intends to apply for a Non-Harassment Order to help safeguard Claire.

Understandably Claire is unable to concentrate on her studies, she is suffering from anxiety and panic attacks. It is difficult to cope with being in the same or close environment as her harasser and she is aware that he has told other people about what he thought of the trial of his friend and the subsequent difficulties he found himself in following the perjury accusation. Claire does not see how she can continue her studies because she feels judged both because of the Not Proven verdict and because her harasser was not charged following the perjury accusation.

How might you respond to Claire's disclosure?

What issues do you need to consider for Claire?

What issues may be around for you?

What are your responsibilities?

What actions do you take and who do they apply to?

Final discussion points – whole group:

What early interventions would have been possible?

What would / could you have done differently?

Who else could have helped?

Case Study 2: Rape Crisis Centre



Part 1

Professor Julie Lewis is a senior academic in the university. She is married to Dr Steven Lewis who is a respected researcher and academic in the Social Work and Social Policy school.

Professor Lewis has spoken to colleagues about health problems she's had over the past two years.

In the past she had travelled to conferences overseas to speak or present research papers but she now avoids travelling as much as possible.

She is also becoming more and more withdrawn and less likely to stop for a chat when she meets colleagues. She never socialises with colleagues or attends leaving or retirement parties.

At a recent performance review, Professor Lewis's absences from work and reluctance to attend conferences away from home have been picked up. She has cited her health as the reason.

What issues would you need to consider for Professor Lewis?

What issues may be around for you?

What are your responsibilities?

What actions, if any, would you take at this point?

Part 2: A Month Later

Yesterday you bumped into Professor Lewis in the kitchen. She was distressed and when you asked her what was wrong you could see that she was close to tears. She has confided in you that her husband is physically abusive and he's also controlling.

You mention that you've noticed a change in her and that she seems withdrawn and ill. She tells you that she's finding it difficult to cope with everyday issues.

How might you respond to Professor Lewis's disclosure?

What issues would you need to consider for Professor Lewis?

What issues may be around for you?

What are your responsibilities?

What actions, if any, would you take at this point?

Part 3: Three Months Later

Professor Lewis has been off work sick for just over three weeks. Colleagues have tried to get in touch to see how she was and offered to visit with flowers etc. but she has put all of them off.

When she returns to work you discover that she has moved out of the family home and is living with her mother. She has her 14-year-old son with her.

When you ask her how she is doing, she tells you that her husband's latest assault has been reported to the police. You also find out that during the assault, her son tried to intervene and was injured. The injury was visible to the police when they arrived and Dr Lewis was taken into custody overnight.

*How might you respond to Professor Lewis's disclosure?
What issues would you need to consider for Professor Lewis?
What issues may be around for you?
What are your responsibilities?
What actions, if any, would you take at this point?*

Part 4: One Month Later

There is an ongoing investigation into the assault upon Professor Lewis. The university has been contacted by the police because it has been revealed that Dr Lewis regularly sent threatening emails from to his wife at her work email account. The police also want to speak to the Professor's PA and to the Dean.

*How would you respond to this information?
What issues might arise for the Professor?
What are your responsibilities?
What actions, if any, would you take at this point?
What is the university's responsibility as Professor Lewis's employer?
What is the university's responsibility as Dr Lewis's employer?*

APPENDIX D - Summary of Participant Feedback on The Session

Participant feedback from the session was generally very positive, with praise given to the structure, content and networking opportunities. Participants were particularly complimentary about the opportunity to explore detailed case studies within a diverse group ranging from experts to those who had not considered the issue before.

The involvement of external organisations such as Rape Crisis and the Scottish Women's Rights Centre was also highlighted as useful to the conversation.

Concerns arising from the discussion included the lack of information staff/students already had and a recognition that this was an area that needed strengthening. Also, the common place nature of GBV and the realistic situations depicted in the case studies were surprising to many participants and illustrated how close to home these issues are.

Participants learning outcomes were varied and included - the importance of a partnership/team approach; the impact the GBV can have; prejudices that can affect how survivors are treated; gaps in current policy that need to be addressed; support services available; how to better deal with disclosures of GBV.

There were very few criticisms of the session and suggestions for improvement included involving students and upper management in the conversation.

Many participants also asked whether they could be involved in the development going forward, which was really encouraging to hear!

Selected positive feedback:

“Enjoyed exploring case studies with group and listening to the views, thoughts and experiences of others ... was very informative to be in a group with colleagues who have expertise in this area”

“ESHE will have a large impact in the future”

“Very pleased to learn about the crisis response team being formed by University”

“Can we do it again? Really interesting”

“Structure was excellent; presentations, case studies, generate discussions”