



POSITION STATEMENT

VIOLENCE
AGAINST
WOMEN
AND GIRLS



The Royal College of
Midwives

POSITION STATEMENT VIOLENCE AGAINST WOMEN AND GIRLS

RCM POSITION

The RCM believes that Violence Against Women and Girls (VAWG) in any form is a hate crime and a violation of their Human Rights. Midwives and the maternity services have a duty to support each and every individual who seeks help as a result of VAWG, treating them with compassion, respect and dignity.

There needs to be:

A co-ordinated multi-agency approach to prevention and dealing with all forms of violence against women and girls and its consequences.

Adequate funding for commissioning and delivery of comprehensive services at a local level to deal with the short and long term consequences of violence against women and girls – and provision of long term psychological therapy and support for victims of violence is vital.

Provision of appropriate training and support for midwives to routinely enquire about all forms of violence against women and girls; to include a package of measures – clear referral pathway and signposting for victims, access to community resources and links to multi-agency risk assessment conferences and independent domestic violence advisor.

Provision by employers of designated services and support for midwives who may themselves be victims of violence.



BACKGROUND AND CONTEXT

Violence against women and girls (VAWG) exerts a toll on the lives of the victims and has a significant impact upon society. The economic cost of violence against women and girls in the United Kingdom each year is estimated to be around £36.7 billion.

The costs are related to providing health and social care services and include legal costs; however, they exclude the cost to the victims in terms of unfulfilled potential and the impact on their long term physical, emotional and mental wellbeing. Violence against women and girls impacts on families, communities and the wider society. These impacts can continue to create cycles of abuse that if not addressed can become inter-generational. Physical and sexual violence and abuse have direct health consequences and are risk factors for a wide range of short and long-term health problems. The NHS spends more time dealing with and treating the consequences of violence against women and children than almost any other agency.



Violence against women and girls is a gender based crime which includes domestic abuse –intimate partner violence¹, rape and sexual violence², honour based violence³, forced marriage and female genital mutilation (FGM). The United Nations defines violence against women as “any act of gender-based violence that results in, or is likely to result in, physical, sexual or mental harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.”

In 2010/2011:

- **an average of two women a week were killed by a current or former male partner. This constituted around one-third of all female homicide victims.**
- **domestic violence accounted for 18% of all violent incidents reported in England and Wales and 7% of women reported domestic abuse. This is equivalent to approximately 1.2 million female victims of domestic abuse.**
- **repeat victimisation accounted for 73% of all incidents of domestic violence, 44% were victimised more than once and 24% of victims had been victimised three times or more.**
- **approximately 130,000 children are living with the impact of domestic abuse.**

Pregnancy can trigger or exacerbate male violence and the impact of violence during pregnancy is a significant contributing factor to maternal and fetal mortality and morbidity. The causes and consequences of VAWG are complex and increasing. Midwives are faced with these issues and have a key role in identifying and referring women as appropriate for early intervention and support. The most important factor is awareness of all forms of violence; in particular, being able to recognise the presence of physical violence, identify women or girls undergone FGM or forced into marriage and offer appropriate help, support or referral.

1 Behaviour by an intimate partner or ex-partner that causes physical, sexual or psychological harm, including physical aggression, sexual coercion, psychological abuse and controlling behaviours.

2 Any sexual act, attempt to obtain a sexual act, or other act directed against a person's sexuality using coercion, by any person regardless of their relationship to the victim, in any setting. It includes rape, defined as the physically forced or otherwise coerced penetration of the vulva or anus with a penis, other body part or object.

3 Honour based violence, including 'honour' killings, is any type of physical or psychological violence committed in the name of 'honour' predominantly against women for actual or perceived immoral behaviour, which is deemed to have shamed their family or community.

REFERENCES

Walby, S (2009) *The Cost of Domestic Violence Up-date 2009* Lancaster University, www.lancs.ac.uk/fass/doc_library/sociology/Cost_of_domestic_violence_update.doc

Working Together to Safeguard Children: A guide to multi-agency working to safeguard and promote the welfare of children <http://publications.education.gov.uk/eOrderingDownload/00305-2010DOM-EN.PDF>

United Nations (UN) Declaration (1993)

Lewis and Drife (2001, 2005); McWilliams and McKiernan (1993), cited in Home Affairs Committee, Domestic violence, forced marriage and 'honour'-based violence: Volume 1, 2008, p23

Chaplin, R., Flatley, J., & Smith, K. (2011). *Crime in England and Wales 2010/ 11: findings from the British Crime Survey and Police recorded time (Vol. 2)*. London

Smith, K., Osborne, S., Lau, I., & Britton, A. (2012). *Homicides, firearm offences and intimate partner violence 2010/ 2011: Supplementary volume 2 to Crime in England and Wales*. London.

CAADA. (2010). *Saving lives, saving money: MARACs and high risk domestic abuse*. Bristol.

CAADA. (2012). *A place of greater safety: Insights into domestic abuse 1*. Bristol.



15 Mansfield Street
London W1G 9NH
0300 303 0444
info@rcm.org.uk

www.rcm.org.uk
