



**The Commission for
Victims & Survivors**

**Extension to the Strategy for Victims and
Survivors (2009-19) and Programme Funding**

Policy Advice Paper

November 2019

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1. Executive Summary

- 1.1. This policy advice paper sets out to make recommendations in relation to an extension of the Victims and Survivors Strategy (2009-2019) and Programme Funding. This advice recommends extending the Strategy for two years with the option of a further short extension if necessary to finalise the new strategy.
- 1.2. This advice consists of two complementary elements. The first part will address the need to extend the Strategy for Victims and Survivors based on supporting evidence from stakeholder consultation and continued focus on addressing the needs of victims and survivors and their families in the years ahead. Secondly, in making a clear and supported rationale for extending the Strategy for a specified timeframe, the paper will then discuss and recommend the continuation of Programme Funding to inform how services are delivered up to March 2022.
- 1.3. The ongoing absence of a Northern Ireland Executive places limitations on the scope of this advice. The Northern Ireland (Executive Formation and Exercise of Functions) Act 2018 and subsequent advice from Government require that decisions follow the priorities and decisions of the previous Executive. Therefore this advice highlights areas where changes which exceed this scope should be considered when there is a Minister in place; realistically this will be in context of a new Strategy. In the absence of Ministers, the Commission remains committed to providing direction to the Executive Office, and other departments and governments, on matters concerning victims and survivors
- 1.4. In producing this advice the Commission has taken into consideration recent research, policy positions, engagement with strategic partners through the Collaborative Design process, the review of monitoring and evaluation information, ongoing consultation with the Victims and Survivors Forum, feedback from individuals and engagement with service deliverers.
- 1.5. The key policy positions and research informing this advice include:
 - Consultation response to the Health and Social Care Board consultation on the establishment of the Regional Trauma Network, Commission for Victims and Survivors (September 2019);
 - Victims and Survivors Pension Arrangement (VASPA), Advice Paper – Commission for Victims and Survivors (May 2019);

- Addressing the Legacy of Northern Ireland's Past, Advice Paper - Commission for Victims and Survivors (January 2019);
- Commission for Victims and Survivors Module of the September 2017 Northern Ireland Omnibus Survey (September 2017);
- Victims and Survivors Strategy Mid-Term Review Project, produced by PACEC on behalf of the Commission for Victims and Survivors.
- Victims and Survivors Delivery Model for 2017-2020, Policy Advice Paper - Commission for Victims and Survivors (August 2016);
- Personalised Budget Pilot Evaluation - Commission for Victims and Survivors (February 2016):
- The Impact of the Individual Needs Programme - Commission for Victims and Survivors (February 2015);
- The Impact of the Victims Support Programme – Commission for Victims and Survivors (February 2015);
- Advice on Jurisdictional Issues - Commission for Victims and Survivors (November 2013);
- Independent Assessment of the VSS - WKM Solutions (February 2014);
- Independent Assessment of the VSS - CIPFA (February 2014); and
- Comprehensive Needs Assessment - Commission for Victims and Survivors (February 2012).

1.6. The timing of this advice cannot be viewed in isolation and the absence of mechanisms to effectively deal with the longstanding legacy issues continues to have an impact. The Commission's policy position is set out in *Addressing the Legacy of Northern Ireland's Past, Advice Paper - Commission for Victims and Survivors (January 2019)*. Recommendations are made for a substantial number of changes to the draft legislation, nevertheless the view of the Commission is that proposed measures set out in the Stormont House Agreement should be implemented as soon as possible. In the meantime, the support services offered by the Victims and Survivors Service cannot be expected to fill the needs left by the absence of measures such as a pension for the severely injured, a fully operational Regional Trauma Service and broader forms of acknowledgement and reparation on offer through the proposed legacy mechanisms.

- 1.7. This advice on the extension of the Strategy for Victims and Survivors and Programme Funding comes at a time when there are other significant strategic initiatives happening that will have to be taken into consideration. These include the development of the Regional Trauma Network; the ongoing additionality being delivered by PEACE IV funding; the implications of the United Kingdom’s exit from the European Union; the impact of welfare changes and conversations regarding outstanding legacy-related matters.
- 1.8. This advice comes at a time when new practices have become embedded to address bespoke needs and realise better outcomes for victims and survivors, with the new service delivery model having been operational since April 2017.
- 1.9. This advice paper will therefore reflect the fact that much work has been done in terms of service delivery and the implementation of the Strategy for Victims and Survivors. Therefore, commentary and recommendations are focused on providing practical recommendations to the Executive Office prior to a formal evaluation of the Strategy for Victims and Survivors and emerging findings from PEACE IV-funded research. It will also highlight other issues for consideration outside of this advice.

2. Recommendations

2.1 The Commission recommends the following:

Extension to the Victims and Survivors Strategy	Paragraph
<p>1) The Commission recommends the formal extension of the existing Strategy for Victims and Survivors for two years with the option of a further short extension if necessary to finalise the new strategy. The extension period should permit the development of a new Strategy for Victims and Survivors informed by an independent formal review of the existing Strategy and further advice from the Commission to be delivered in July 2020. The extension period will also allow for the continuation of vitally important strategic and operational work, including significant research studies in the areas of dealing with the past and building for the future while supporting ongoing high quality and effective service provision to victims and survivors.</p>	<p>5.28</p>

Programme Funding	Paragraph
2) Recognising the efforts made to ensure service delivery is maintained and the realities of constraints on public finances, the Commission recommends that the current budget for INP and VSP remains in place for the 2020/21 and 2021/22 periods.	6.6
3) It needs to be acknowledged that if legacy mechanisms are agreed and progressed, there will be an inevitable increase in demand for support services. This will not necessarily be solely in relation to advocacy support, but across all other health and wellbeing and social support services. The Commission therefore recommends that the Department is mindful that if legacy mechanisms are established during the period from March 2020 to March 2022 conversations are initiated between CVSNI, VSS, TEO, the Department of Justice and the Northern Ireland Office, on how best to meet the potential increase in demand.	6.8
4) The Commission recommends that the current support schemes continue to be delivered during 2020/21 and 2021/22. This would recognise the efforts made in the delivery of the needs-based approach and provide continuity to service provision during the extension period.	6.13
5) Considering the positive feedback on the service delivery model, the Commission recommends that needs-based approach of delivering support continues during this extension period.	6.22
6) The Commission is mindful that the Advocacy and Health and Wellbeing Case Manager and Caseworker positions are PEACE IV-funded. Given their key role in the delivery of the needs-based approach, the Commission would highlight the requirement to discuss arrangements after March 2022. The Commission would therefore recommend that the Collaborative Design partners engage as matter of priority and develop a plan to address future funding and the delivery of advocacy and needs-based approaches.	6.23
7) It is the Commission's view that Transition Payments, having been operational for 3 financial years, has had a sufficient period of operation. With the recommendation to continue Self-Directed Assistance and Additional Needs Payments, and continued support delivered directly through the VSS and funded service deliverers, the Commission recommends that Transition Payments should not be continued.	6.37

8) The Commission recommends that the Home Heating Framework continues for this period for existing recipients and that a full review of the scheme is conducted during 2020-22 in order to assess its viability after this extension period.	6.40
9) The Commission recommends that TEO engages as a matter of priority with relevant stakeholders regarding how best to progress adequately addressing the needs of victims and survivors living outside Northern Ireland. It is the Commission’s view that that must be a priority issue for all partners and needs to be addressed comprehensively as part of any new Strategy.	6.58
10) In line with the requirement detailed in the Strategy for Victims and Survivors, the Commission continues to recommend that standards continue to feature in the conditions of grant aid under both VSP and PEACE IV-funded programmes.	6.66
Gaps and Other Emerging Areas	
11) Given the findings from the population survey, and feedback reflected during the consultation process, the Commission recommends consideration is given to how best to communicate the availability of VSS-funded services.	7.9

3. Policy Context and Background

- 3.1. The Commission for Victims and Survivors for Northern Ireland (the Commission) was established in June 2008 under the Victims and Survivors (Northern Ireland) Order 2006, as amended by the Commission for Victims and Survivors Act (2008).
- 3.2. The Commission is a Non-Departmental Public Body of the Executive Office (TEO). The principal aim of the Commission is to promote awareness of the interests of victims and survivors of the Northern Ireland conflict. It has a number of statutory duties that include:
- Promoting an awareness of matters relating to the interests of victims and survivors and of the need to safeguard those interests;
 - Keeping under review the adequacy and effectiveness of law and practice affecting the interests of victims and survivors;

- Keeping under review the adequacy and effectiveness of services provided for the victims and survivors by bodies or persons;
- Advising the Secretary of State, the Executive Committee of the Assembly and any Body or person providing services for victims and survivors on matters concerning the interests of victims and survivors;
- Ensuring that the views of victims and survivors are sought concerning the exercise of the Commission's functions; and
- Making arrangements for a forum for consultation and discussion with victims and survivors.¹

3.3. In November 2009, the Office of First and deputy First Minister (now TEO) introduced a ten-year strategy for victims and survivors. This strategy provides a comprehensive approach for taking forward work on a range of issues relating to victims and survivors. The strategy acknowledges the uniqueness of our circumstances and need for a victim and survivor centred approach:

- The pain and suffering which has occurred;
- The long-term impact of violence on victims and survivors;
- That victims and survivors are individuals and therefore there is no single approach which will suit everyone; and
- The need for victims and survivors to be invited to play a part in building a more peaceful future, but that as people who have suffered most they should feel safe, should be treated with dignity and should move at their own pace.²

3.4. The strategy's aim is to put in place comprehensive arrangements to ensure that the voice of victims and survivors is represented and acted upon at a governmental and policy level and continues to shape the landscape for service delivery.

Ongoing legacy

3.5. It is recognised that many years of violence have created a society where much work needs to be done to deal with the legacy issues. This is most evidenced when addressing the needs of victims and survivors; those whose lives have been disproportionately affected by conflict-related incidents.

¹ The functions of the Commission relate to those set out in the Victims and Survivors (Northern Ireland) Order 2006 as amended by the Commission for Victims and Survivors Act (Northern Ireland) 2008.

² Office of the First Minister and deputy First Minister (2009) *Victims and Survivors Strategy*, Belfast: The Stationery Office: 2.

- 3.6. The Commission recognises that victims and survivors are a diverse group, and that many have unmet needs that must be addressed when addressing the legacy of the past. The Commission also recognises the scale of the task that is to be undertaken in order to address legacy issues. The lasting impact of the Troubles on society in Northern Ireland has been profound:
- In 2017, 26% of the Northern Ireland population said either they or a family member continue to be affected by a conflict-related incident³;
 - Between 1966 and 2006, 3,720 conflict-related deaths occurred leaving these families mourning the loss of a loved one⁴;
 - 40,000 people have been left injured⁵; and
 - 213,000 are experiencing significant mental health problems.⁶
- 3.7. Behind statistics are individuals affected by Troubles-related bereavement, physical and/or psychological injury or by providing care for a loved one.
- 3.8. The provision of services and support for victims and survivors has been evolving since the Victims and Survivors Service (VSS) was established in 2012 and took over the roles from the Community Relations Council and the Northern Ireland Memorial Fund. Since that time the Individual Needs Programme and the Victim Support Programme, now complemented by PEACE IV funding, have been developing steadily and improving.
- 3.9. It has been well documented how Northern Ireland is emerging from over forty years of conflict. The Troubles have had a significant impact on society and its people and as a result today we see evidence of high levels of trauma, high levels of mental health problems and suicide, and high levels of unemployment and benefit dependency. Twenty one years after the Belfast/Good Friday Agreement our society is still divided along sectarian lines and this in the main has a negative impact on economic, social and political development.

³ NISRA (2017) *Commission for Victims and Survivors Module of the September 2017 Northern Ireland Omnibus Survey*, NISRA.

⁴ McKittrick et al (2007) *Lost Lives*, Edinburgh: Mainstream Publishing.

⁵ Smyth et al (1999) *The Cost of the Troubles Study – Final Report*, INCORE: 37.

⁶ CVSNI (2015) *Towards a Better Future: The Trans-generational Impact of the Troubles on Mental Health*, CVSNI.

- 3.10. The Commission is aware that change is unsettling for individuals and will try to keep the impact of any changes to a minimum. However, changes are required in order to take account of feedback from victims and survivors, to improve the quality of the services provided and also to adapt to the current situation of increasing demand for schemes and the need for better outcomes.

The right approach

- 3.11. It is the Commission's view that service provision should be nuanced to the needs of those impacted by conflict-related incidents.
- 3.12. It should be recognised that service providers have been to the fore in developing a model of support that is victim-centred and holistic. This approach has enabled an empathy and understanding of the impact of the Troubles and demonstrated the continued need for appropriate health and wellbeing and social support. It is therefore essential that any new mechanisms ensure that support is victim-centred and mindful of the unique needs of those impacted by the conflict.
- 3.13. In March 2015, members of the VSF agreed a series of principles that reflected their views and aspirations for the legacy proposals contained in the Stormont House Agreement. These were refreshed by the VSF in June 2017 to recognise and include existing organisations and processes.⁷
- 3.14. The VSF's five principles that are required to deliver effective and appropriate truth, justice, acknowledgement and reparation processes:
- Co-design and collaboration;
 - Victim-centred and victim-led;
 - Inclusive;
 - Independent and impartial; and
 - Fit for purpose.
- 3.15. It is the Commission's view that these principles provide an outline for a coherent and comprehensive approach for taking forward work on a range of issues relating to victims and survivors.
- 3.16. The VSF's principles are used by the Commission when reviewing the adequacy and effectiveness of law, practice and services and have informed and shaped this policy advice paper.

⁷ CVSNI (2017), *Key Guiding Principles for Existing and Proposed Organisations and Processes Dealing with Past*, CVSNI.

4. Engagement Activity

- 4.1. In order to provide stakeholders with an opportunity to provide feedback the Commission initiated a consultation period which ran for four weeks between 9 August and 6 September 2019.
- 4.2. The consultation process was focused on asking respondents to consider the following:
 - For the duration of the extension period, if there are any aspects of the current Strategy that could be improved;
 - If the current service delivery model meets the needs of victims and survivors;
 - If there is any gaps in services; and
 - Any other comments.
- 4.3. Feedback was primarily sought through a consultation survey which was communicated through the following channels:
 - Published on the Commission's website and social media platforms;
 - Emailed to VSS-funded organisations;
 - Emailed to non VSS-funded organisations and other relevant stakeholders;
 - Provided to the VSF;
 - Communicated to the Panel; and
 - Issued to individuals on the Commission's database.
- 4.4. The Commission also held a workshop with the Victims and Survivors Forum and attended a dedicated session of the Victims and Survivors Practitioners Workshop in order to obtain feedback and inform this advice.⁸
- 4.5. In addition to the above, the VSS have provided the Commission with feedback informed by consultation and engagement with funded organisations, their staff and board, and individual victims and survivors.⁹

⁸ A workshop with the Victims and Survivors Forum took place on 23 August 2019 and the Victims and Survivors Practitioners Working Group was held on 15 August 2019.

⁹ Victims and Survivors Service (2019) *VSS Health and Wellbeing Service Delivery Model 'Consultation Based Evidence' August 2019*, Victims and Survivors Service.

- 4.6. Those wishing to inform the Commission's advice were provided with an opportunity to provide feedback through the consultation survey or through direct engagement with the Commission.¹⁰ The Commission received a total of 88 survey responses.¹¹
- 4.7. In addition to the 4 week consultation process, the Commission has also reflected on recent engagement with a range of stakeholders. The Commission has a robust communications and engagement plan and in the past eighteen months has held 499 engagements which has informed this advice.¹²
- 4.8. Although the methodology employed during this engagement was wide ranging, it was developed within the context of the advice, detailed in the Policy Context and Background section of this paper. It is recognised that feedback obtained through engagement and the survey is a relatively small sample of the entire victims and survivor's community and, consequently, the results are meant to be illustrative only and cannot be regarded as being representative of the wider victims and survivors' population. However, despite these limitations, it should also be noted that the stakeholder engagement process has produced a high degree of consistency in feedback obtained from a wide range of sources.

5. Extension to the Victims and Survivors Strategy

Strategy for Victims and Survivors 2009

- 5.1. The Strategy for Victims and Survivors (hereafter referred to as 'the Strategy') comes to an end in October 2019. In the absence of a functioning Executive, Ministers are currently not in place to agree and sign off on a new Strategy. Operating an extension to the existing Strategy provides sufficient time to independently review the Strategy for Victims and Survivors 2009-19 and for current funding of the Victims Support Programme and Individuals Needs Programme to maintain continuity of services to victims and survivors. The independent review of the Strategy by TEO and further advice by the Commission to be delivered in 2020 will inform the development of a new Strategy for Victims and Survivors that can be considered by Ministers in the future.

¹⁰ The consultation survey can be found in Appendix A.

¹¹ An overview of the questions 1 to 4 can be found in Appendix B.

¹² A breakdown of engagements can be viewed in Appendix C.

- 5.2. Considerable work including extensive consultation was undertaken throughout 2016-17 as part of the Mid-Term Review of the Strategy for Victims and Survivors. This included collating the views of over 190 stakeholders who attended a two-day conference in March 2016. The final report produced by RSM McClure Watters on behalf of the Commission in 2017 contains a number of findings and recommendations that supports an extension to the current Strategy to March 2021. Some of these findings will be outlined within this section. A key conclusion of the report was that consultees were unanimous that there was a need for a strategy beyond the end of the current one.¹³
- 5.3. The main justification for extending the current Strategy is clearly to support the continued delivery of strategic and operational work to promote the interests and support the needs of victims and survivors. This section outlines how the work of the Strategy will continue to deliver in key strategic areas throughout the extension period against the background of significant political developments that will directly and indirectly affect the interests and wellbeing of victims and survivors.
- 5.4. A central element of the current Strategy was the adoption of a new approach that would underpin the delivery of work to promote the interests and address the needs of victims and survivors. Progressing this approach was to be guided through the delivery of work in three key strategic areas namely:
- Dealing with the Past;
 - Service provision (with the funding and delivery of services to be informed by the Comprehensive Needs Assessment); and
 - Building for the future.
- 5.5. Importantly, the Strategy noted that there would be a 'high level of interrelationship' across all three areas and that work 'needs to be taken forward in a coordinated manner which recognises this interrelationship.'¹⁴

¹³ PACEC (2017) *Victims and Survivors Strategy Mid-Term Review Project*, CVSNI,; 21.

¹⁴ OFMDFM (2009) *Strategy for Victims and Survivors*, OFMDFM: 6.

Addressing the Legacy of the Past

5.6. The Mid-Term Review Report highlighted how stakeholders acknowledged that making progress in the area of dealing with the past is dependent on political developments.¹⁵ Since the publication of the Report, there has been some progress in moving forward with the proposed legacy mechanisms contained in the Stormont House Agreement. Following the completion of the Addressing the Legacy of Northern Ireland's Past consultation in 2018, the Northern Ireland Office (NIO) published a report in July 2019 containing a high-level overview of the key themes emerging from analysis of over 17,000 responses to the consultation. The report noted that the overall message from their analysis was clear, that 'the current system needs to be reformed and we have an obligation to seek to address the legacy of the past in a way that builds for the future.'¹⁶ The NIO report also noted that:

Government will work closely with a newly restored Executive – or in the absence of an Executive, the Northern Ireland parties – to discuss the key issues raised and to agree a way forward. The people of Northern Ireland and others affected by the Troubles deserve to see progress on this important issue and the Government is determined to deliver that progress.¹⁷

5.7. Despite movement on the legacy consultation and reporting by the NIO this year, there is currently no political agreement on progressing the implementation of the proposed legacy mechanisms contained in the Stormont House Agreement. From consultation feedback received as part of the Mid-Term Review of the existing Strategy, it was acknowledged that if and when new legacy agencies and processes were established 'significant challenges could emerge'. This would include the capacity of existing Advocacy and Health and Wellbeing service providers to meet demand where increasing numbers of individuals and families engage with legacy inquests or interface with new legacy agencies including the proposed Historical Investigations Unit and the Independent Commission for Information Retrieval. Where there is political agreement to progress the implementation of new mechanisms and agencies to deal with our troubled past during the period of extension it will be important to monitor existing resources supporting provision of advocacy services to victims and their families.

¹⁵ PACEC (2017) *Victims and Survivors Strategy Mid-Term Review Project*, CVSNI: 14.

¹⁶ Northern Ireland Office (2019) *Addressing the Legacy of Northern Ireland's Past – Analysis of the consultation responses*, NIO: March 4.

¹⁷ Ibid.

- 5.8. The Effective Advocacy Services Research Project that will complete in December 2020, is examining the effectiveness of advocacy services for victims and their families in Northern Ireland and the Border Region of Ireland accessing support in the area of historical investigation and information recovery. The two-year qualitative study will work directly with individuals and families who are engaging with existing legacy agencies and receiving support from the PEACE IV funded Advocacy Service Network. Findings and recommendations from the research project will inform the development of Advocacy and Health and Wellbeing Services throughout the period of extension and have the potential to contribute to a victim-centred approach to dealing with the past.
- 5.9. The Commission's policy position is set out in *Addressing the Legacy of Northern Ireland's Past, Advice Paper - Commission for Victims and Survivors (January 2019)*. Recommendations are made for a substantial number of changes to the draft legislation, nevertheless the view of the Commission is that proposed measures set out in the Stormont House Agreement should replace the widely recognised unsatisfactory 'piece-meal approach' to dealing with the past. The Commission and the VSF will continue to advocate for the full implementation of the Stormont House Agreement in the months ahead. The Commission (and the VSF) will continue to work with political parties in Northern Ireland and at Westminster and other stakeholders to support ongoing and future efforts to establish an agreed approach to putting new agencies and processes in place.

Building for the future

- 5.10. The Mid-Term Review Report highlighted that compared to the strategic areas of Dealing with the Past and the provision of services to victims and survivors, the area of Building for the Future only gained momentum from 2014 onwards. The Report noted that work in this area had the potential to form key elements of the existing Strategy and in the development of a new Strategy for Victims and Survivors in the years ahead.¹⁸
- 5.11. In recent years, the Commission have continued to progress work in the area of Building for the Future. This work continues and is guided by the implementation and continued updating of a Building for the Future Action Plan. The outworking of the Plan recognises the importance highlighted in the Strategy to ensure the 'high level of inter-relationship' between Building for the Future, the delivery of high quality service provision and Dealing with the Past. The Plan recognises that Dealing with the Past and timely access to high quality services are linked with the broader ambition of building a

¹⁸ PACEC (2017) *Victims and Survivors Strategy Mid-Term Review Project*, CVSNI, March: 21.

better future for victims and survivors and wider society in Northern Ireland and elsewhere. Equally, the Action Plan also recognises the importance of enhancing knowledge and understanding of the intergenerational impact of the conflict's legacy including the potential negative consequences on children and young people.

- 5.12. Work in this area reflects the learning drawn from previous Commission research relating to the trans-generational impact of the legacy of the conflict. This includes the *Toward a Better Future Report* produced by Ulster University on behalf of the Commission in 2015. A key recommendation from the report was that the mental health legacy of the Troubles cannot be addressed in isolation but requires a long-term strategic plan focussing on two complementary objectives. These are supporting timely and effective access to evidence-based treatment and support to victims and their families while comprehensively recognising and tackling outstanding legacy issues including their continued trans-generational impact on children and young people. In tackling enduring conflict-legacy issues including ongoing paramilitarism the Report affirmed the necessity of a cross-government and cross-sectoral commitment to reduce their impact on victims and survivors and wider society in Northern Ireland.
- 5.13. During the period of extension work in the area of Building for the Future will be progressed by the different strategy partners including the Commission and the VSF in a number of key areas set out below.

PEACE IV Research Programme

- 5.14. In the year ahead the Commission will manage to completion three comprehensive research studies comprising the PEACE IV Victims and Survivors Research Programme. Each of the three projects in the areas of trauma services, advocacy support services and the trans-generational legacy of the Troubles will make a significant contribution to the Building for the Future Action Plan.
- 5.15. Firstly, the Review of Trauma Services will improve knowledge and understanding of the clinical impact of psychological therapy and other trauma related services in the treatment of conflict-related mental health conditions in Northern Ireland and the Border Region of Ireland. Research findings and recommendations from the study will directly benefit the lives of victims and their families who require access to trauma-focussed psychological therapy and other support services to assist their mental health recovery. In this sense, the study will assist the building of a better future for individuals and families and subsequently help reduce levels of conflict-related mental ill-health at an individual, family and community level.

- 5.16. Secondly, the Trans-generational Legacy and Young People study is currently investigating the continuing intergenerational impact of the conflict on the lives of children and young people aged 14-24 and their parents throughout Northern Ireland and the Border Region of Ireland. The project is working closely with young people across different generations in urban and rural locations over a significant time period and will analyse any changes in attitudes, perceptions and behaviours relating to the current and future impact of legacy issues including paramilitarism and sectarianism. Another important element of the study is the examination of the existing policy and programmes aimed at reducing the impact of conflict legacy issues and building a more stable and reconciled society in Northern Ireland and the Border Region of Ireland. This study will assess current, relevant departmental strategies and operational programmes including Together: Building a United Community (T:BUC) and the Tackling Paramilitarism Programme. This part of the literature review will be critically examined in relation to the views and experiences shared by young people, parents and community workers and gain important insight on how complex legacy issues can be addressed in the years ahead.
- 5.17. Thirdly, the Effective Advocacy Services research project as highlighted above is providing an important and timely opportunity to enhance knowledge and understanding relating to the experience of victims and their families receiving Advocacy support as they engage with current legacy processes and agencies. Given the significant backlog of unresolved legacy cases over four decades, many generations will potentially engage with current and future legacy mechanisms. In drawing together the direct experiences of families involved in historical investigations current and future legacy agencies can integrate the learning from this study into their own engagement with victims and survivors.
- 5.18. Throughout the extension period, the PEACE IV Research Programme will make an important contribution to each of the key strategic areas of the current Strategy including building for the future. The Programme will deliver three research reports that can influence the future design and delivery of trauma-informed services for victims and survivors in the key areas of mental health and historical investigation and information recovery. Equally, the studies will contribute to building a better future by delivering informed empirical analysis and recommendations that can enhance existing programmes and actions to tackle complex legacy issues including paramilitarism and sectarianism.

Victims Payment Scheme

5.19. During the extension period there is a strong possibility that the legislation providing the statutory basis to the Victims Payment Scheme will come into force. This will represent a significant legislative and policy development for individuals who have endured living with severe physical and psychological life changing conflict-related injuries for many years. Throughout the formative phase of the operation of the new Victims Payment Scheme that is due to come into operation from May 2020, there will be a need to monitor and review its implementation and the experiences of individuals and their carers. The Scheme will also receive significant public scrutiny from potential applicants, funded organisations supporting victims and survivors, political parties and other stakeholders.

Regional Trauma Network

5.20. The year ahead will also be an important period for the establishment of the new Regional Trauma Network (RTN), another key measure in the Stormont House Agreement intended to improve the health and wellbeing of victims and survivors of the Troubles. Operating on the basis of genuine partnership working between HSC partners, the Victims and Survivors Service and funded community-based service providers the RTN can be a highly effective and responsive service to address the complex psychological needs of victims and survivors.

Implications of EU Exit

5.21. A small number of survey respondents highlighted how the future wide-ranging impact of exiting the EU cannot be ignored in the important policy area of promoting the interests and addressing the needs of victims and survivors of the conflict. The social, economic, political and security implications need to be seriously recognised in the context of a society still transitioning from decades of conflict. Respondents expressed the view that strong consideration must be given to the potential destabilising impact of a 'hard Brexit' where the UK Government withdraws from the EU without a negotiated bi-lateral agreement. In the event that this may occur in the months ahead respondents have highlighted the importance of ensuring concerted efforts are made to maintain cross-community stability and that there is respect for the plurality of identities across Northern Ireland, the UK and the island of Ireland.¹⁹

¹⁹ Information accessed from responses to the Survey.

- 5.22. An interesting point reflected in a survey response refers to how the extension of the Strategy provides a timely and important opportunity to 'affirm the strength and quality of relationships' built between the Strategy partners (TEO, VSS and CVSNI) in the past decade. The response continues that in the current uncertain circumstances the 'integrity of the process' of extending the current Strategy to deliver positive outcomes for victims and survivors and wider society is critically important.²⁰ Therefore extending the strategy for two years with the option of a further short extension if necessary to finalise the new strategy will allow for these positive outcomes to be progressed and achieved.
- 5.23. The outworking of the final negotiated agreement or a non-agreement scenario between the EU and the UK Government will have profound and long-lasting implications for the social, economic and political life in Ireland and Northern Ireland in the years ahead. From a victims and survivors perspective and to quote the agreed position of the VSF, 'the past must never happen again'. It is therefore critically important that whatever scenario unfolds in the months ahead it does not contribute to a heightening of communal tension or to an escalation in paramilitary violence in Northern Ireland including the Border Region of Ireland.
- 5.24. During the extension period the Commission will continue to monitor the implications of exiting the European Union and its impact on both the wellbeing of victims and survivors and wider society in Northern Ireland. It is anticipated that the impact of EU exit on community life in both urban and rural areas across Northern Ireland and Border Region of Ireland is a theme that will be explored in the Trans-generational Legacy and Young People research study. Findings and recommendations from the study will represent an important source of data that can inform the current Strategy and the development of a new Strategy. Extending the strategy for two years with the option of a further short extension if necessary to finalise the new strategy will allow for the implications of EU exit to continue to be monitored by the Commission and the VSS.

Engagement with Government Departments

- 5.25. Throughout the extension period members of the VSF recommended that all strategy partners should continue to build on the constructive engagement with government departments that has been progressed in recent years. Enhanced partnership working between government departments notably TEO and the Department of Health, the Department of Justice and the Department for Communities as well as the Northern Ireland Office have facilitated significant policy and service

²⁰ Information accessed from responses to the Survey.

development. These included the development of the Regional Trauma Network, the Victims Payment Scheme, and the development of legacy mechanisms, and processes and legislation and in the area of social security reform.

- 5.26. Throughout the extension period, the Commission would encourage TEO to continue to build partnership working with these and other government departments including also the Department of Education where it is appropriate to do so.

Summary

- 5.27. Extending the current Strategy for Victims and Survivors for two years with the option of a further short extension if necessary to finalise the new strategy, provides a timely and important opportunity to continue significant work in promoting the interests and supporting the needs of victims and survivors. As highlighted in this section, the extension of the strategy is required to continue to deliver key work under the three strategic areas of dealing with the past, services (including funding and delivery) and building for the future. Further, this vital work is being progressed in the context of significant political developments including the need to implement outstanding legacy mechanisms and other measures contained in the Stormont House Agreement and increasing uncertainty linked to the implications of Brexit. Substantive work will continue throughout the extension period by the strategy partners including the Commission to both monitor and positively support the establishment of key measures, including the Regional Trauma Network and the Victims Payment Scheme. Equally, the Commission will continue to effectively manage the PEACE IV Research Programme with significant empirical analysis and recommendations from each of the three research studies that will inform the development of a new Strategy for Victims and Survivors in the years ahead.
- 5.28. The Commission **recommends** the formal extension of the existing Strategy for Victims and Survivors for two years with the option of a further short extension if necessary to finalise the new strategy. The extension period should permit the development of a new Strategy for Victims and Survivors informed by an independent formal review of the existing Strategy and further advice from the Commission to be delivered in July 2020. The extension period will also allow for the continuation of vitally important strategic and operational work including significant research studies in the areas of dealing with the past and building for the future while supporting ongoing high quality and effective service provision to victims and survivors.

6. Programme Funding

Sustainability

- 6.1. A key concern facing those involved in delivering services over the years has been sustainability. These concerns were echoed in the Commission's 2016 advice, which highlighted that if the numbers of individuals accessing services continued to increase there was a possibility that service delivery may become unsustainable in the short term.
- 6.2. As of 31 March 2019, circa 6,000 individuals are registered with the VSS and accessing services through the Individual Needs Programme (INP). The number of individuals accessing support via organisations through the Victims Support Programme (VSP) is estimated at over 12,000.²¹
- 6.3. The table below outlines the funding awarded under INP and VSP programmes from April 2013 (rounded to the nearest £0.1m):

Table 1: Programme Funding²²

Financial year	INP	VSP	Total
2013/14	£4.4m	£6.1m	£10.5m
2014/15	£4.3m	£6.0m	£10.3m
2015/16	£4.9m	£6.5m	£11.4m
2016/17	£5.4m	£6.3m	£11.7m
2017/18	£4.5m	£6.9m	£11.4m
2018/19	£4.8m	£6.7m	£11.5m
2019/20 (projected)	£4.8m	£6.7m	£11.5m

- 6.4. The Commission welcomes the sustained commitment to protect funding for victims and survivors, annually, and in 2017/18 for a three year funding period, in line with the Commission's advice in August 2016.
- 6.5. It needs to be acknowledged that sustainability is not solely about funding alone. Since March 2017 all partners have sought to address the issue of sustainability, not just in terms of reviewing eligibility and growing demand for services, but also in terms of improvements to service delivery practice and processes. The Commission is pleased to see that this has been acknowledged through the new Health and Wellbeing Caseworker approach and subsequent efforts made to embed collaborative working across the sector.

²¹ Referred to at the Steering Group meeting, Formal Evaluation of the 2009-19 Strategy (8 July 2019).

²² Figures provided to CVSNI on 13 September 2019.

- 6.6. Recognising the efforts made to ensure service delivery is maintained and the realities of constraints on public finances, the Commission **recommends** that the current budget for INP and VSP remains in place for the 2020/21 and 2021/22 periods.
- 6.7. In a more favourable budget environment the Commission would like to see increased levels of funding to sustain the increasing numbers coming forward, and most importantly to meet the complex needs of victims and survivors, which has been ably facilitated by the new needs-based approach. However, the Commission does accept that maintaining current levels of funding in itself is a positive outcome.
- 6.8. It needs to be acknowledged that if legacy mechanisms are agreed and progressed, there will be an inevitable increase in demand for support services. This will not necessarily be solely in relation to advocacy support, but across all other health and wellbeing and social support services. This view was echoed by the VSF, with particular concern regarding arrangements once PEACE IV-funded advocacy support ends and continuity of service provision if 'PEACE Plus' arrangements are made. The Commission therefore **recommends** that the Department is mindful that if legacy mechanisms are established during the period from March 2020 to March 2022 conversations are initiated with VSS, the Department of Justice and the Northern Ireland Office, on how best to facilitate potential increase in demand.

Service delivery model

- 6.9. The introduction of the new service delivery model in 2017/18 has brought with it a number of significant changes to how individuals are supported.
- 6.10. The support schemes being delivered has embedded a needs-based approach that provides greater choice and flexibility to the individual and recognises more complex needs.
- 6.11. In line with the needs-based approach, the following health and wellbeing support services are being delivered through INP, VSP and PEACE IV funding (support services are detailed under the four agreed strategic outcomes for victims and survivors):

Table 2: Improved the health and wellbeing of victims and survivors²³

	Prog.	2019/20 (year to date/ cumulative)	2018/19	2017/18
Talking Therapies	VSP	458	2,436	2,109
Complementary Therapies	VSP	349*	3,024	3,227
Social Support	VSP	2,166*	10,669	9,061
Transgenerational Activities	VSP	39*	478	369
Disability Aids	INP	27	92	46
Persistent Pain	INP	184	844	589
Psychological Support	INP	53	61	6
Trauma-focused Physical Activity	PEACE IV	60	136	34

Table 3: Victims and Survivors, and those most in need, are helped and cared for²⁴

		2019/20 (year to date/ cumulative)	2018/19	2017/18
Welfare interventions	VSP	600	2,756	2,428
Self-Directed Assistance (SDA) Payments	INP	5,784	5,849	5,920
Additional Needs Payments	INP	1,457	1,470	1,499
Transition Payments	INP	1,269	1,296	1,308
PIP claims supported	VSP	15	400	221

Table 4: Victims and survivors, and their families, are supported to engage in legacy²⁵ issues

	Prog.	2019/20 (year to date/ cumulative)	2018/19	2017/18
PIV Advocacy	PEACE IV	115	1,461	512
Truth, Justice & Acknowledgement	VSP	241	823	872

Table 5: Improved access to opportunities for learning and development²⁶

	Prog.	2019/20 (year to date/ cumulative)	2018/19	2017/18
Personal & Professional Development	VSP	259	3,382	3,170
Education & Training	INP	31	108	76
1-1 Literacy & Numeracy	PEACE IV	5	21	7
Social Isolation	PEACE IV	6	43	0
Volunteering	PEACE IV	4	10	4

²³ Figures provided to CVSNI and TEO on 28 August 2019 (note: *figures relate to April and May 2019 period only).

²⁴ Figures provided to CVSNI and TEO on 28 August 2019.

²⁵ Ibid.

²⁶ Ibid.

- 6.12. The Commission is pleased to see the rollout of this approach to service delivery, with support being delivered through funded organisations, the Health and Wellbeing Caseworker Network and directly via the INP.
- 6.13. As detailed in the tables above, the new approach facilitates the delivery of a needs-based approach in line with the 2016 policy advice and reflects the direction of travel envisaged by strategic partners. Further, the ongoing collation of CORE Net data, MYMOP, the Working and Social Adjustment Scale and qualitative case studies has provided the Commission and TEO have assurance of demonstrating impact. The Commission therefore **recommends** that the current support schemes continue to be delivered during 2020/21 and 2021/22. This would recognise the efforts made in the delivery of the needs-based approach and provide continuity to service provision during the extension period.²⁷
- 6.14. Key to the implementation of the need-based approach has been the introduction of the Health and Wellbeing Caseworker Network, funded by the PEACE IV Programme. Under this programme, a network of Health and Wellbeing Caseworkers has been employed across the region to ensure that individuals have their needs identified and addressed in a holistic and coordinated way. As part of this network, new mechanisms including partnership arrangements, processes for defining needs, and referral and signposting between the VSS, statutory health service providers in Northern Ireland and the border region, and wider community and voluntary services have been established. This work has been taken forward by Health and Wellbeing Caseworkers employed and line managed by the community and voluntary sector across the region. They have been supported and led by five Regional Health and Wellbeing Case Managers, alongside a Casework Coordinator employed by the VSS.
- 6.15. The Commission would like to take this opportunity to highlight the key role that both Health and Wellbeing Case Managers and Caseworkers have played in the successful rollout of the needs-based approach. Since their introduction, the Health and Wellbeing Case Managers have been responsible for key aspects of the assessment, co-ordination, implementation, and effective delivery of service delivery. Of particular note has been the collaborative nature of engagement between Case Managers and Caseworkers. These relationships have resulted in embedding partnership approaches that work directly with individuals in a proactive way to facilitate engagement with support within the community, voluntary, and statutory sectors, in keeping with their needs.

²⁷ Note that this does not include Transition Payments (please see specific recommendation under INP).

- 6.16. The Commission would also highlight how the Health and Wellbeing Caseworker Network has enabled the VSS to expand the nature of support available and provided to individuals living in Northern Ireland, the border region of Ireland, and in Great Britain. This is particularly welcome for individuals residing in Great Britain and the Republic of Ireland, who continue to experience a different level of service provision to victims and survivors in Northern Ireland.
- 6.17. The Commission recognises that the new approach to delivering services represented significant change. The introduction of the needs-based approach represented an important moment for service delivery by addressing the varying needs of victims and survivors in a tailored way. This would not have been possible without the VSS's extensive communication with service deliverers regarding the new service delivery model. This engagement was essential in ensuring that the rollout of the new service delivery model was as smooth as possible and expectations managed accordingly from March 2017 onwards.
- 6.18. It has been acknowledged that moving away from a grant-led approach to a needs-based approach for victims and survivors takes into account changing needs and the unique circumstances of each individual. Much work has been done to arrive at this approach and since its introduction the VSS has continued to develop support schemes.
- 6.19. Feedback received by the Commission has indicated that the service delivery model has been key to ensuring victims and survivors are supported in a timely manner to discuss and identify their needs, and engage with relevant support. Results from the Commission's survey indicated that the current approach does meet the needs of victims and survivors, with 55% of respondents advising that it did. Those who indicated that the current approach did not meet needs were invited to provide commentary. Themes identified in the narrative responses included:
- Apprehension to access services due to a belief that some support schemes involve administrative processes;
 - Highlighting the ongoing need for psychological therapy provision for children and young people;
 - Exploring the requirement for family therapy service provision;
 - Further exploration of the needs of victims and survivors living in rural and/or isolated areas;

- A need to highlight support services from the VSS and through funded organisations in order to access those unaware of support;
 - Requirement to provide adequate support for those residing outside Northern Ireland; and
 - Options for those wishing to access support from non-funded service deliverers.
- 6.20. The Commission notes the commentary and issues highlighted during the consultation process. Whilst some areas can be addressed through policy advice, many can be taken forward through the Commission's engagement with TEO and the VSS.
- 6.21. Recognition that the model is the appropriate approach to service delivery has also been echoed in the feedback received by the VSS. Of particular note has been the recognition that three year funding has provided stability to service provision. The feedback received by the VSS highlights that this stability has led to the ability to build relationships of mutual trust and recognition, establish increased collaboration and partnership working within funded organisations and to enable planning and developing services in the short to medium term. Importantly, the feedback received by the VSS has also acknowledged the developments made in approaches to monitoring and evaluation. Importantly, the feedback received by the VSS has stated that there is an overall view that no significant changes should be made over the next two years.
- 6.22. Considering the positive feedback on the service delivery model, the Commission **recommends** that needs-based approach of delivering support continues during this extension period.
- 6.23. The Commission, however, is mindful that the Advocacy and Health and Wellbeing Case Manager and Caseworker positions are PEACE IV-funded. Given their key role in the delivery of the needs-based approach, the Commission would highlight the requirement to discuss arrangements after March 2022. The Commission would therefore **recommend** that the Collaborative Design partners engage as matter of priority and develop a plan to address future funding and the delivery of advocacy and needs-based approaches.

Individual Needs Programme

- 6.24. The Commission's 2016 advice made a number of recommendations in relation to the support delivered directly to individuals. These recommendations were informed by the Personalised Budget Pilot Evaluation of February 2016 and the Impact of the Individual Needs Programme and Survivors, completed in February 2015.
- 6.25. With the new approach being operational for just over two years, this advice provides a timely opportunity to reflect on its operation and identify potential gaps in service provision. Therefore commentary will only focus on specific support schemes where recommendations are suggested to the department.

Self-Directed Assistance, Additional Needs Based Awards & Transition Payments

- 6.26. The Commissioner's advice in August 2016 recommended that a new self-directed support payment should be introduced along with a new complex needs assessment for those who have complex needs and choose to avail of this option. The rationale for this recommendation was that eligibility issues and means testing would be resolved and funding would be more focused on addressing needs. This recommendation was also intended to address the issue of increasing demand on services.
- 6.27. Since March 2017, the VSS has operated a number of schemes to aid the transition to a needs-based delivery model. This has resulted in three levels of financial support: Self-Directed Assistance; Additional Needs Based Awards; Transition Payments. Individuals receive an annual payment(s) of between £500 and £1,000 depending on their circumstances. This support has been available to individuals registered with the VSS and eligible for direct financial support by 31 March 2017. In line with the policy direction, direct financial payments to new individuals seeking support from April 2017 onwards were not available. Those individuals were offered needs-based support schemes.
- 6.28. The Commission has welcomed the new streamlined approach, which has enabled support to be delivered without means testing or the requirement for individuals to provide further information once their eligibility had been confirmed. Importantly, there has also been provisions available to those who have required support to transition to the new needs-based approach.

6.29. Whilst significant changes have been made to all support schemes, financial support has witnessed arguably the most significant change. It should be noted that it was anticipated there may have been disappointment by some individuals who witnessed a reduction in cash terms of the value of their awards, in comparison with support received in 2016/17. Equally, it was expected that new individuals wishing to access financial assistance, may be disappointed with the new needs-based framework. Efforts from the VSS to ensure that key messages were understood across the sector in relation to the new delivery model needs to be acknowledged. The communication of consistent advice to individuals by VSS staff and Health and Wellbeing Caseworkers has ensured expectations were managed appropriately.

6.30. The total budget, and the value of each award, are as follows²⁸:

Table 6: Financial support budget & value

	Total Budget & Award Value		
	2019/20	2018/19	2017/18
Self-Directed Awards	£2,895,000 Value: £500	£2,921,000 Value: £500	£2,948,171 Value: £500
Additional Needs	£733,500 Value: £500	£744,500 Value: £500	£748,500 Value: £500
Transition Payments	£126,900 Value: £100	£194,250 Value: £150	£261,600 Value: £200
Total	£3,755,400	£3,859,750	£3,958,271

6.31. Feedback received by the Commission has indicated there is an appreciation of the greater independence for addressing practical needs. This is echoed in the feedback received from the VSS, which stated that when asked ‘how do you feel about the support we offer?’ that of those surveyed, 91% said ‘very helpful’ and 8% stating ‘helpful in some ways’.²⁹ The responses also included a number of qualitative responses indicating satisfaction with the support scheme and specific reference to the removal of the requirement to provide receipts and procurement from the individual.

²⁸ Figures provided to CVSNI by VSS on 13 September 2019.

²⁹ In February 2019 the VSS conducted a survey of just over 10% of 5,848 in receipt of Self-Directed Assistance payments, with 265 responses received.

- 6.32. In terms of the operational processes, the VSS has advised that the new approach has reduced administrative operational pressures, enabling staff to focus on other elements of service delivery.
- 6.33. Whilst feedback, on the streamlined process and approach, has been positive the Commission does acknowledge that many individuals are dissatisfied that eligibility only extends to those registered with the VSS up to 31 March 2017. The VSS, as a result of their engagement process, has stated that the overwhelming feedback they received has indicated the deadline must be extended. A number of respondents to the Commission's survey also echoed this view, as have a number of individual VSF members.
- 6.34. The Commission does recognise the disappointment expressed by a number of individuals, and their representatives, regarding ineligibility. The Commission also recognises the positive feedback and complementary nature of the support delivered through the service delivery model. Equally important is the need to be mindful of budgetary constraints and the overall direction of travel regarding needs-based service delivery.
- 6.35. Importantly, the Commission is mindful of the restrictions regarding exercising governmental functions in, or in relation to, the absence of Northern Ireland Ministers. This does have an impact upon changes to policy matters that were previously agreed by Ministers.³⁰ The Commission recognises that this is an important area that needs to be considered when any new Strategy is developed, with a particular focus on the needs of the bereaved and carers.³¹
- 6.36. The Commission was pleased to see the introduction of Transition Payments as a mechanism to mitigate against the maximum financial loss associated with the changes to the delivery of financial support. It has been recognised that this level of support would be a temporary measure, used alongside health and wellbeing and social support.
- 6.37. It is the Commission's view that Transition Payments, having been operational for 3 financial years, has had a sufficient period of operation. With the recommendation to continue Self-Directed Assistance and Additional Needs Payments, and continued support delivered directly through the VSS and funded service deliverers, the Commission **recommends** that Transition Payments should not be continued.

³⁰ Northern Ireland (Executive Formation and Exercise of Functions) Act 2018.

³¹ The needs of the bereaved and carers has been highlighted by the VSS as a matter that requires attention. The VSS advises that since the introduction of the new service delivery model there has been a significant under-representation in accessing support (299 identifying as bereaved and 34 carers).

- 6.38. The Commission would also take this opportunity to highlight the ongoing developments regarding the delivery of Victims Payment following the Commissioner's advice to the UK Government in May 2019.³² At the time of this advice, the Northern Ireland Office had engaged in cross-departmental work in line with requirements detailed in the Northern Ireland (Executive Formation etc) Bill 2019. Whilst outside the scope of this advice, the Commission would highlight potential implications for those in receipt of any arrangement if receiving Self-Directed Assistance payments.

Home Heating Framework

- 6.39. It is the Commission's view that this element of the Persistent Pain Framework provides valuable support to those living with significant physical and psychological injuries. However, the Commission is aware of concerns regarding the financial sustainability and operation of the Home Heating Framework.³³
- 6.40. The Commission **recommends** that the Home Heating Framework continues for this period for existing recipients and that a full review of the scheme is conducted during 2020-22 in order to assess its viability after this extension period.

Victim Support Programme

- 6.41. The service delivery model established in April 2017 brought a number of changes to how support is delivered to individuals through VSS-funded organisations.
- 6.42. Through a network of 54 funded organisations support is delivered at a local level to 12,000 individuals per year. This includes: Befriending, Complementary Therapies, Personal/Professional Development Programmes, Social Support Activities, Talking Therapies (counselling, psychological therapies, life coaching), Transgenerational Activities (activities for young people), Truth, Justice and Acknowledgement (including Advocacy Support, and Remembrance and Commemoration Activities), and Welfare Support.
- 6.43. Similar to the discussion and recommendations for INP support, commentary will only focus on where recommendations are suggested to TEO.

³² CVSNI (2019) *Victims and Survivors Pension Arrangement (VASPA) Advice Paper May 2019*, CVSNI.

³³ The VSS has advised that Health and Wellbeing Case Workers have consistently reported challenges with the Home Heating Framework; that in the absence of Self Directed Assistance Payments there has been a conflation with acknowledgement; and it is becoming clear it is not sustainable. It is noted that 776 awards were made during 2018/19 and 549 in 2017/18. Concerns highlighted by the VSS can be accessed in Victims and Survivors Service (2019) *VSS Health and Wellbeing Service Delivery Model 'Consultation Based Evidence' August 2019*, Victims and Survivors Service.

Accessing support outside Northern Ireland

- 6.44. It is widely acknowledged that the Troubles had a profound impact on people's lives; those injured, bereaved and witnesses of traumatic events. This impact is long lasting and permeates through to the present day for these individuals as well as the next generation. This applies to all, regardless of geographical location.
- 6.45. Whilst the vast majority of conflict-related incidents took place in Northern Ireland, there were a number of incidents in other locations, particularly in Great Britain and the Republic of Ireland. Further, there are a number of individual victims and survivors residing outside of Northern Ireland who have been impacted by the Troubles.
- 6.46. The Stormont House Agreement contained a commitment to taking steps to ensure that victims and survivors have access to high quality services, with a specific reference to those who do not live in Northern Ireland. The Commission welcomed this commitment, as it echoed the Commission's policy position that there should be an equitable approach to dealing with victims and survivors, regardless of where they live.
- 6.47. In February 2014, the Commission submitted advice to Ministers on accessing funding and services for victims and survivors outside of Northern Ireland. This advice made a number of recommendations, including that groups should be able to apply and be considered under the criteria and competition that applies to all other groups in the application and assessment process and that geographical location is not considered a barrier to applying.³⁴ This position was echoed in August 2016, when the Commission recommended to TEO that organisations from outside the jurisdiction should be eligible to apply to both the Victim Support Programme and PEACE IV Programmes simultaneously.³⁵ As part of advice to the Secretary of State in January 2019, the Commissioner highlighted the Commission's position that there is an inconsistency in the current policy and recommended that Government engages as a matter of priority with relevant stakeholders regarding how best to progress.³⁶

³⁴ CVSNI (2014) *Accessing Funding and Services for Victims and Survivors Outside of Northern Ireland*. CVSNI.

³⁵ CVSNI (2016).

³⁶ CVSNI (2019) *Addressing the Legacy of Northern Ireland's Past (January 2019)*, CVSNI: 53.

- 6.48. There were 3,720 conflict-related deaths between June 1966 and November 2006. Of that figure, 267 deaths took place outside Northern Ireland, the majority in Great Britain and the Republic of Ireland³⁷. Further examination of these figures show the distribution of civilian deaths outside Northern Ireland as England (70), Republic of Ireland (67), Holland (4), Germany (1) and France (1).³⁸
- 6.49. It is estimated more than 300,000 military personnel served in Northern Ireland as part of Operation BANNER. The majority of those who served during the period from August 1969 to July 2007 were from regiments based in Great Britain, with losses noted as 503 (non-Ulster Defence Regiment/Royal Irish Regiment). In addition, a number of deaths of personnel in other services including 4 members of the Royal Air Force, 1 Royal Navy officer and 6 members of police forces in Great Britain. In addition to UK security force personnel, 12 members of An Garda Síochána were killed, together with 1 member of the Irish Army.³⁹
- 6.50. Research conducted in this area has traditionally only referred to those affected in Northern Ireland. There has been no similar extensive studies conducted for those impacted outside of Northern Ireland. In 2003 the Tim Parry Jonathan Ball Trust collated a chronology of incidents that have impacted upon residents of Great Britain. This analysis detailed incidents which people in Great Britain had been bereaved, injured or affected as a result of the conflict. This piece of work stated that 245 incidents took place between October 1971 and November 2011 in Great Britain and of that figure 88 incidents resulted in deaths or casualties.⁴⁰
- 6.51. In November 2018, Survivors Against Terror published a survey detailing the experiences of attacks. Its findings advised that survivors of attacks rated the support they received highly, with most services being rated by 80% of respondents as good, very good or exceptional. The report also highlighted that 76% of respondents highlighted mental health services as requiring improvement.⁴¹ Whilst the report covers all incidents, and not specific to Northern Ireland-related incidents, it does provide an insight into the experiences of victims and survivors living in Great Britain and echoes feedback to the Commission.

³⁷ McKittrick, D. et al (2007).

³⁸ Ibid.

³⁹ Ibid.

⁴⁰ Tim Parry Jonathan Ball Trust (2003) *The Legacy: A study of the needs of GB victims and survivors of the Northern Ireland 'Troubles'*. Warrington: Tim Parry Jonathan Ball Trust: 99-120.

⁴¹ Survivors Against Terror (2018) *Giving Voice to Survivors: a survey of the views of survivors of terrorist attacks*, London: Survivors Against Terror.

6.52. The Commission highlights the fact that geographical location does not deem an individual ineligible to apply for support under the INP. The VSS has advised the Commission that the total number of clients awarded support under the INP during 2018/19 are as follows⁴²:

Table 7: INP access outside Northern Ireland

Location	Individuals
England	141
Scotland	20
Wales	4
Guernsey	1
Jersey	2
Isle of Man	1
Republic of Ireland	100
USA	8
Canada	3
France	1
Netherlands	1
Germany	1
Spain	2
Total	285

6.53. A total of 285 individuals accessing support reside outside of Northern Ireland; the majority resident in Great Britain and the Republic of Ireland. It should be stressed that the above figures only relate to individuals that have received support through the INP.

6.54. The Commission is pleased that PEACE IV-funded support has provided additional capacity within the sector to address advocacy support alongside the proposed legacy institutions and also provide care and support to protect the health and wellbeing of victims and survivors engaged in these processes. This is particularly welcome for individuals residing in Great Britain and the Republic of Ireland, who continue to experience a different level of service provision to victims and survivors in Northern Ireland.

⁴² Figures provided by the Victims and Survivors Service (information correct as of 05/06/2019).

- 6.55. It needs to be acknowledged that many individual victims and survivors access support outside of VSS arrangements. These would include accessing support through charities or directly through the statutory sector. The use of the third sector, or charities that also receive government funding to deliver services, would be particularly evident regarding former Service personnel.⁴³
- 6.56. Despite the above, the Commission's engagement with individuals, and their representatives, outside Northern Ireland has consistently indicated that there is a sense of isolation and inequality and that awareness levels are very low regarding entitlement, access to support and general assistance. This view was also reflected in the feedback received by the Commission, with responses highlighting concern regarding appropriate mental health support, impact of legacy-related judicial processes and the fact that individuals cannot avail of similar services or peer support through organisations. There was also a view reflected that there should be input from the UK and Irish governments regarding supporting the needs of victims and survivors outside of Northern Ireland; a view that the Commission has recognised and reflected in the *Addressing the Legacy of Northern Ireland's Past* advice in January 2019.
- 6.57. Despite support being available through PEACE IV, the Commission remains concerned that victims and survivors outside of Northern Ireland continue to experience a different level of service provision. This sense of disparity will be accentuated if legacy mechanisms are established. No recognition or practical support can ever compensate for the loss of a loved-one or the devastation of the past. However, an equitable approach to dealing with health and wellbeing and social support needs, regardless of where they residency, should be of primary importance.
- 6.58. The Victims and Survivors (Northern Ireland) Order 2006 contains no impediment to engaging and supporting victims and survivors outside Northern Ireland. The Commission does understand there are both resource and administrative constraints that need to be considered further. The Commission **recommends** that TEO engages as a matter of priority with relevant stakeholders regarding how best to progress adequately addressing the needs of victims and survivors living outside Northern Ireland. It is the Commission's view that that must be a priority issue for all partners and needs to be addressed comprehensively as part of any new Strategy.

⁴³ Some of these organisations include the Royal British Legion, Combat Stress and SSAFA. These support groups operate nationwide and also deliver support to former personnel living in the Republic of Ireland.

Monitoring and evaluation

6.59. Monitoring and evaluating remains a key focus for the Commission. The need for evidence-based information is central to demonstrating improvement in the lives of victims and survivors and the sustainability of service provision. This is also in line with the Commission's statutory duty to keep under review the adequacy and effectiveness of services provided to victims and survivors. This position was reflected in the Commission's 2016 advice.

6.60. The Commission recognises the efforts made by the VSS since April 2017. This has included ongoing engagement with service deliverers to establish agreed frameworks, ongoing collation of CORE Net data for Talking Therapies and MYMOP data for Complementary Therapies and demonstrating impact through the Working and Social Adjustment Scale and qualitative case studies. Additionally, Importantly, reporting data shard with TEO and the Commission are reviewed against an agreed collective set of strategic outcomes for victims and survivors:

- Improved health and wellbeing of victims and survivors;
- Victims and survivors, and those most in need, are helped and cared for;
- Victims and survivors, and their families, are supported to engage in legacy issues; and
- Improved access to opportunities for learning and development.

6.61. The Commission notes the progress made since the introduction of the new service delivery model.

Standards for service delivery

6.62. In October 2011 the Commission published a Minimum Practice Framework as a guide to organisations providing services in the victims sector in order to identify the standards expected. This was in line with the Commission's statutory duty to keep under review the adequacy and effectiveness of services provided for victims and survivors. As part of this review process the Commission has worked on refreshing these standards in order to bring them up-to-date and reflect changes to service delivery within the sector. The Commission published a refreshed set of standards in November 2016.⁴⁴

⁴⁴ CVSNI (2016) *Standards for Services Provided to Victims and Survivors*, CVSNI.

- 6.63. In the Commission's 2016 advice, it was recommended that the updated standards form an integral part of the call for applications under the VSP and PEACE IV Programmes and should also be part of the letters of offer/contractual arrangements as part of the conditions of grant aid under both programmes.
- 6.64. Since April 2017 the Commission was pleased to see how the current standards have been key to the implementation of the service delivery model. This has included ongoing liaison between organisations and VSS Programme Officers regarding compliance and monitoring and evaluation requirements. Feedback provided by the VSS has stated that practitioners feel the corporate and clinical governance requirements ensure high quality service provision and that the training provision through the Workforce Training and Development Plan is working well, building capacity and skills to meet the needs of victims and survivors.
- 6.65. Additionally, a Standards Working Group has been operational since October 2017 to ensure that they are reviewed periodically in order to ensure that they are fit for purpose.
- 6.66. In line with the requirement detailed in the Strategy for Victims and Survivors, the Commission continues to **recommend** that these standards continue to feature in the conditions of grant aid under both VSP and PEACE IV-funded programmes.
- 6.67. The Commission envisage that the *Standards for Services Provided to Victims and Survivors* will be refreshed in Quarter 4 of 2019/20, in line with the extension to Programme Funding for 2020/21 and 2021/22.

7. Gaps and Other Emerging Areas

- 7.1. The submission of this advice provided a timely opportunity to review the operation of the new service delivery model and ascertain if there any gaps in service provision. Whilst the purpose of this paper is to provide advice, with appropriate recommendations, some of the areas can be addressed through operational planning and re-profiling of resources.
- 7.2. In addition, a number of other policy-related matters were highlighted during the consultation process. Whilst there are not policy recommendations for TEO, the Commission would highlight these matters in the context of strategic direction to inform any new Strategy and approaches to service delivery.

7.3. Of those who responded to the Commission's survey 55% indicated that there were gaps in services. Areas identified in the narrative responses included:

- The requirement for the Regional Trauma Network to be victim-centred;
- Greater recognition of gender-based issues in relation to accessing support services;
- Additional support for those impacted by Welfare Changes;
- A need to look at the needs of the bereaved, particularly those recently bereaved having previously been a carer for a loved one;
- Looking at the needs of those who have not been able to access support to date; and
- How best to support those who wish to access services from non-funded organisations.

Ageing population and the recently bereaved

7.4. The Commission recognises that victims and survivors are part of an ageing population and with this, needs may change.

7.5. The Commission is aware that the issue of carers becoming bereaved has been highlighted as a concern for many delivering support. The Commission acknowledges that an individual, who has dedicated many years to care for a loved one, many find themselves ineligible for financial support after a death. This issue has been raised with the Commissioner directly by individuals and has been reflected in the feedback provided by the VSS.

7.6. It is expected that these areas would be reviewed during the evaluation of the Strategy and subsequent recommendations regarding the future of Self-Directed Assistance payments.

Awareness of services

7.7. The consultation process highlighted a view that there could be greater awareness of support services.

7.8. In the 2017 Omnibus Survey, the Commission inserted two questions that asked respondents about access to funded services for victims and survivors. Only respondents who had previously answered that they had been affected or have a family member affected by a conflict-related incident were asked these questions. Firstly, responding to the question, *'Please indicate if you have accessed any of these services that are delivered for victims and survivors in the past 12 months'*, 17% of

respondents stated that they had accessed at least one of the following funded services: psychological therapies, complementary therapies, advocacy support or welfare advice and support (in the past 12 months). 88% of respondents stated that they had not accessed any of these services. When asked the question, '*Why did you not engage with these services?*' 73% stated that they did not need such a service', while 20% stated they *were not aware of such services.*' While not all of these respondents may have wished to avail of funded services for victims and survivors, there is a need to ensure that any individual and/or family who is entitled to receive support is aware of the services available to them.

- 7.9. Given the findings from the population survey, and feedback reflected during the consultation process, the Commission **recommends** consideration is given to how best communicate the availability of VSS-funded services.

Welfare changes

- 7.10. The Commission recognises the important role that welfare support provides to victims and survivors. This is all the more important considering a significant number of victims and survivors are part of an ageing population who have suffered psychological and physical health conditions that explain their dependence on welfare support. The Commission is acutely aware that many victims and survivors are currently living in fear and anxiety in relation to ongoing and impending assessment processes and the outcomes of those processes. This is a view that has been highlighted by the VSF and communicated frequently by individuals engaging with the Commission and organisations funded to deliver welfare support.⁴⁵
- 7.11. Since November 2012, the Commission has engaged with officials to ensure that the impact of welfare changes is minimised where possible on the victims and survivors community. In addition, the Department for Communities (DfC) have made efforts to engage with the VSF in order to highlight the lived experiences of those physically and psychologically injured engaging with welfare support. This engagement has been complemented by VSS-coordinated engagement between DfC, Capita and service deliverers.

⁴⁵ The Commission's position on matters relating to this area can be accessed in our response to DfC's review of how the Personal Independence Payment assessment is working in Northern Ireland: *Commission for Victims and Survivors Response to PIP – Independent Review of the Assessment Process (March 2018)*, CVSNI.

- 7.12. Welfare advice and support delivered by 10 organisations plays a role for individuals requiring assistance, particularly with the continued rollout of welfare changes. From April 2018 to March 2019 a total of 1,473 individuals engaged in Welfare Advice and Support (an increase of 192 individuals from the period of April 2018 to March 2019). In addition to the annual increase, demand for accessing this service has witnessed an increase each quarter.⁴⁶ It is recognised that the increase can be attributed to individuals going through the PIP assessment process and rollout of Universal Credit.
- 7.13. A number of responses during the consultation process highlighted the ongoing impact of welfare changes on victims and survivors. The Commission recognises that these concerns have been addressed by the VSS in terms of funding allocation and ongoing engagement with service deliverers.
- 7.14. Given the concerns highlighted by the VSF, service deliverers and individuals during the consultation process, the Commission believes that efforts should be made for Collaborative Design partners to reengage at a strategic level with DfC.

Gender-based issues

- 7.15. The Commission notes the view of the VSS relating to the adoption of a 'gender lens' to inform the design and delivery of services for the bereaved and carers. It also notes that the VSS has bid for PEACE IV slippage funding to deliver training that would be aligned to the 2015 Report by the Legacy Gender Integration Group *Gender Principles for Dealing with the Past*.
- 7.16. The Commission would welcome the funding and delivery of this bespoke training under the VSS Workforce Training and Development Plan for funded practitioners. Drawing on the learning from the delivery of this training and feedback from practitioners and service users, the VSS in partnership with the Commission could determine the nature and scope of any future training to be delivered in this area.

⁴⁶ Cumulative totals individuals accessing Welfare Advice and Support under VSP for 2018/19: quarter 1: 462; quarter 2: 698; quarter 3: 1,039; quarter 4: 1,473.

Addiction support

7.17. The Commission notes the comment contained in the Victims and Survivors Service paper that ‘there is a need to significantly improve addiction services for victims and survivors’. Consultation feedback from sectoral stakeholders highlighted previously that there was a gap in service provision in relation to counselling for addictions. Data from the Victims and Survivors Service (Corenet) also shows that 1 in 3 victims and survivors has reported a level of addiction. Further detailed scoping is required to establish the additional support and services required for trauma-related addictions and to develop more timely and effective access to professional addictions services in both the statutory and non-statutory sectors. With the establishment of the Regional Trauma Network in the months ahead further learning can be captured and reviewed on how individuals engaging specialist trauma services in the statutory sector access addictions services as part of their package of care and support. Throughout the extension period further scoping work will be undertaken to ascertain both the level of need and the possible service-related response to enhance access to addiction services for victims and survivors. A further important source of information that will inform this scoping exercise is the PEACE IV-funded Review of Trauma Services research study that includes a literature review relating to interventions for conflict-related co-morbid PTSD and addictions.

Appointment to the Victims and Survivors Forum

7.18. A small number of survey respondents expressed a view that individuals with a conviction for a Troubles-related offence should not be allowed to join the VSF. Whilst acknowledging this view it remains a legal requirement that VSF members are appointed under the definition of a victim and survivor as outlined within the Victims and Survivors Order 2006. Currently the Commission are engaged in a process to replenish the current membership of the VSF. The Commission will notify all stakeholders when the Expression of Interest application process opens in the period ahead and seeks to ensure that all views are represented on the VSF, including those of individuals who disagree with the legislation.

Ends



Consultation Survey

Advice on an extension to the Strategy for Victims and Survivors 2009-2019 and Programme Funding

Dear Consultee,

The Executive Office has asked the Commission for Victims and Survivors to provide advice on:

- An extension to the Strategy for Victims and Survivors 2009-2019; and
- An extension to Programme Funding to inform how services are delivered up to March 2022.

In order to inform my advice, I am seeking your views.

I would be extremely grateful if you would complete this survey, which should take no longer than 10 minutes.

If you have any questions about the survey, or would like to meet to discuss any aspects of this advice, please contact Neil Foster or Peter Mann at the Commission on 028 9031 1000.

All completed questionnaires should be sent to the following email address: commission@cvsni.org

Alternatively, you can complete it online: <https://www.smartsurvey.co.uk/s/FFJK8/>

Or by post: Commission for Victims and Survivors, 4th Floor, Equality House, 7-9 Shaftesbury Square, Belfast, BT2 7DP

The closing date for responses is **6th September 2019 at 4pm.**

Please note that **no individual or organisation will be identifiable through their response to this survey.** Although the information you provide may be reflected in my advice, it will be combined and presented with other feedback in an overall summary of findings.

Your help and input is very much appreciated.

Judith Thompson
Commissioner for Victims and Survivors

Survey Questions

1. Are you?

Please tick all that apply

- A victim/survivor
 - I have been injured (physically or psychologically)
 - I have been bereaved
 - I am a carer
 - I have witnessed a conflict-related incident
 - I have provided medical/emergency assistance to an individual in connection with a conflict-related incident
- Representative of a Victims and Survivors Service (VSS) funded organisation
- Representative of a third sector/civic society organisation
- Representative of a Government body
- An academic
- Other (please specify):

2. In what capacity are you completing this survey?

- A victim/survivor
- Representative of a Victims and Survivors Service (VSS) funded organisation
- Representative of a third sector/civic society organisation
- Representative of a Government body
- An academic
- Other (please specify):

3. About you

Postal district (BT1, BT2 for example)

Age

18-25

26-35

36-45

46-55

56-65

66-74

75+

Gender (please specify)

4. Extension to the Strategy for Victims and Survivors

The aims of the Strategy for Victims and Survivors are to:

- Put in place comprehensive arrangements to ensure that the voice of victims and survivors is represented and acted upon at governmental and policy level;
- Secure through the provision of an appropriate range of support services and other initiatives a measurable improvement in the wellbeing of victims and survivors;
- Assist victims and survivors, where this is consistent with their wishes and well-being, to play a central role, as part of wider society in addressing the legacy of the past; and
- Assist victims and survivors to contribute to building a shared and better future.

The Strategy established a new approach for victims and survivors work, focusing on three key areas: dealing with the past, building for the future and services. This work has been taken forward by the Commission for Victims and Survivors, the Victims and Survivors Service and the Victims and Survivors Forum, in partnership with The Executive Office.

You can read the Strategy here: <https://bit.ly/2YKuoBL>

As the Strategy is coming to the end of its ten-year timeframe, The Executive Office plans to commission an independent evaluation to:

- Assess the impact and extent to which the current Strategy has delivered on its overall aims and principles; and
- Inform the development of any new Strategy.

A formal evaluation of this strategy was a key recommendation from the Mid-Term Review of the Strategy in March 2017. A formal evaluation is expected to commence later this year and any new Strategy will be developed in partnership and collaboration with victims and survivors through a co-design process.

It is planned to extend the current Strategy to allow time for it to be evaluated and any new Strategy developed. The extension will enable the continuation of support services, and the coordination of issues relating to victims and survivors including outcomes from the Commission's PEACE IV Victims and Survivors Research Programme.

For the duration of the extension period, are there any aspects of the current Strategy that could be improved?

Yes

No

If you answered 'yes', please comment below:

5. Delivering services

The Victims and Survivors Service (VSS) provides practical day-to-day support and services with a focus on improving the health and wellbeing of victims and survivors.

A new way of delivering services was introduced in 2017, moving away from a grant-led approach to a needs-based approach for victims and survivors to take into account changing needs and the unique circumstances of each individual.

A three year funding programme (April 2017 to March 2020) was secured and we are providing advice to extend this for a further two years to allow the evaluation of the Strategy to be undertaken and a new Strategy developed.

The VSS provides support directly to 6,000 individuals per year and includes financial support for eligible individuals, and access to services to meet needs in relation to Psychological Therapies, Persistent Pain, Disability Support, Education and Training, or Advocacy.

Through a community network of over 50 funded organisations further support is delivered at a local level to 12,000 individuals per year. This includes: Befriending, Complementary Therapies, Personal/Professional Development Programmes, Social Support Activities, Talking Therapies (counselling, psychological therapies, life coaching), Transgenerational Activities (activities for young people), Truth, Justice and Acknowledgement (including Advocacy Support, and Remembrance and Commemoration Activities), and Welfare Support.

You can find out more about services here: <https://bit.ly/2YnbPav>

Does the current approach meet the needs of victims and survivors?

Yes

No

If you answered 'no', please comment below:

Are there any gaps in services?

Yes

No

If you answered 'yes', please comment below:

6. Other comments

If there are any further comments you wish to make, please comment below.



7. Keep informed

The Executive Office plans to commission an evaluation later this year, in order to inform the development of any new Strategy for Victims and Survivors. This will involve a process of consultation and engagement.

If you would like to be kept informed of the evaluation or the development of any new Strategy for Victims and Survivors, please provide your details:

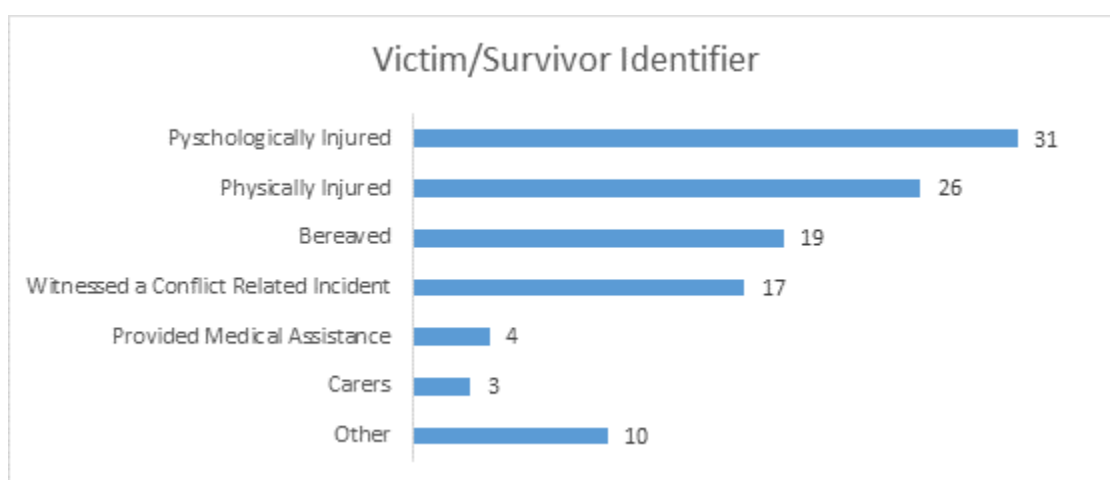
Name _____
Organisation (if applicable) _____
Email _____
Address _____

Thank you for taking time to complete this survey.

Q.1. Are you?

There were 58 participants who identified as a victim/survivor, 27 who were a representative of a Victim and Survivor Service-funded organisation.

If you are a Victim or Survivor can you please specify; I have been injured (physically or psychological); I have been bereaved; I am a carer; I have witnessed a conflict-related incident; I have provided medical/emergency assistance to an individual in connection with a conflict-related incident



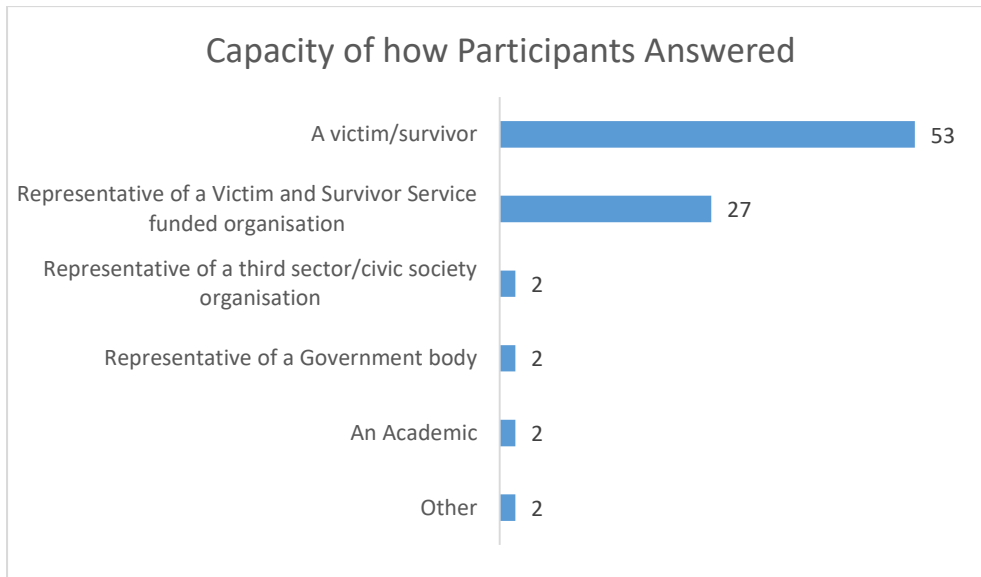
Of those who identified as a victim/survivor, 54 stated how they categorised their identity:

- The majority of respondents had been injured psychologically (31) or physically (26);
- There were 19 who had been bereaved;
- 17 had witnessed a conflict-related injury;
- 4 provided medical assistance; and
- 3 were carers.

This was a multiple response question so there is a higher response rate than survey participants:

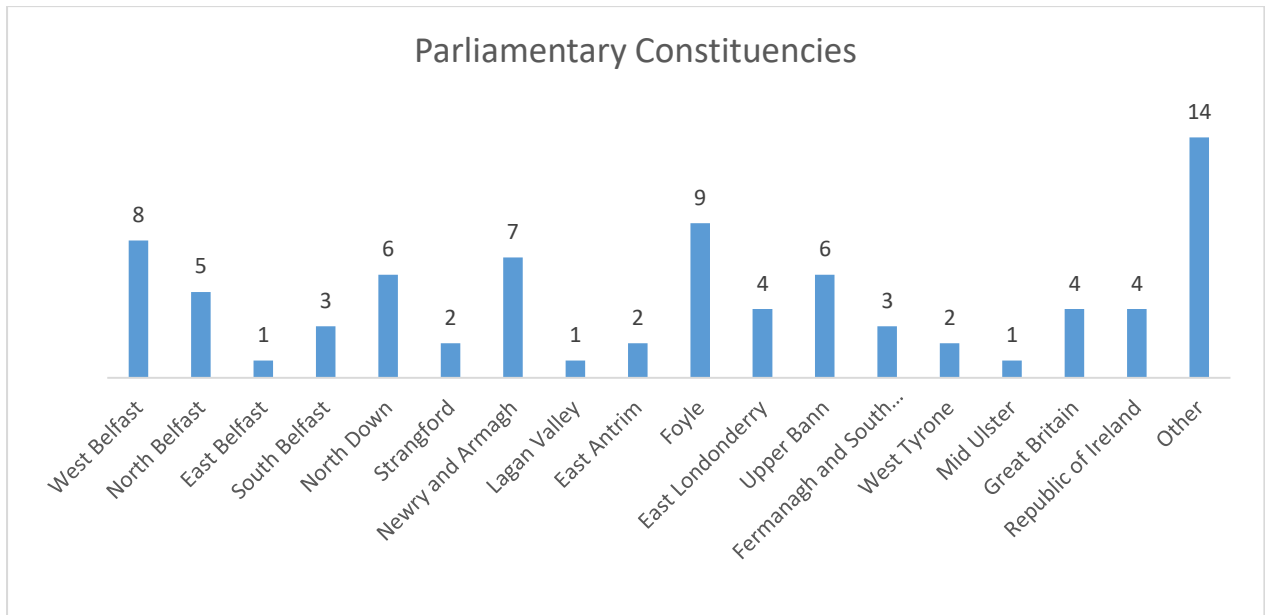
- Many of the respondents gave multiple responses when asked how they identified as a victim/survivor;
- The majority of those stated that they had been both physically and psychologically injured;
- Four had suffered bereavement and a psychological injury;
- Two had stated they had been injured physically, witnessed a conflict-related incident and provided medical assistance;
- Five had been either psychically and psychologically injured, had been bereaved and had also witnessed a conflict related incident;
- One respondents had been bereaved, witnessed a conflict related incident and are a carer;
- A respondent stated they were injured physically and are also a carer; and
- While 2 has been both injured physically and psychologically, had witnessed a conflict-related incident, provided medical assistance and had been bereaved.

Q.2. In what capacity are you completing this survey?



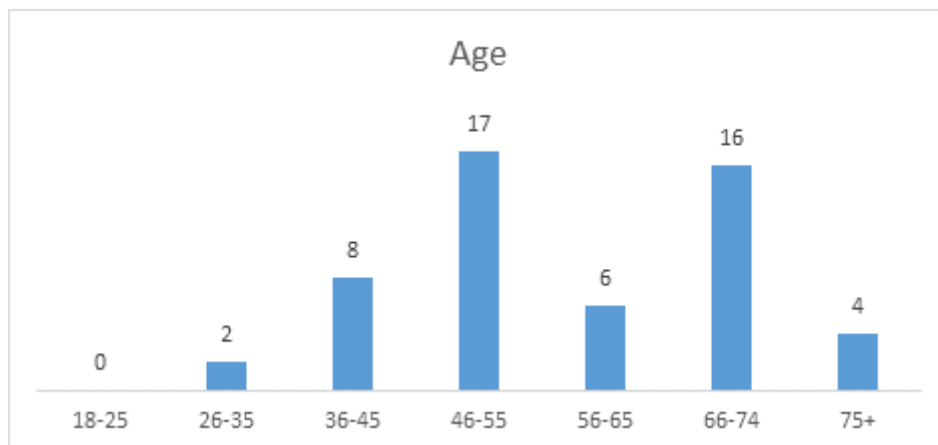
- There were 53 (60%) participants which completed this survey who identified as a victim/survivor;
- There were 26 (31%) respondents who completed this survey in the capacity of a Representative of a Victims and Survivor Service-funded organisation; and
- While the remaining 9% which includes those who completed the survey as a representative of a third/civic society organisation (2), within the capacity of an academic (2), and as other (2). There were 3 respondents who skipped this question.

Q.3. About your postal district (BT1, BT2 for example)



- 82 respondents submitted their postal district;
- Foyle was the highest parliamentary constituency that responded to the survey, with 9 responses;
- West Belfast was next highest with 8 respondents completing the survey, with Newry and Armagh following with 7 participants;
- There were 8 respondents who came from outside of Northern Ireland (4 from Great Britain and 4 from the Republic of Ireland);
- There were four respondents who skipped this question; and
- Those categorised as 'other' fell into two different parliamentary constituencies due to respondents only being asked for the beginning of their postal district, which meant that we were unable to break the area down further.

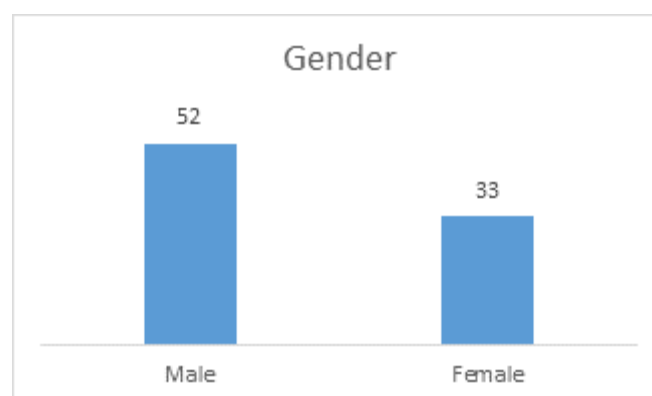
Q.4. Age



A total of 83 participants answered this question, with four individuals opting to skip it.

- There were no respondents that were aged between 18 and 25 who completed the survey;
- There were 2 responses from those that were aged fell in the age category of 26-35 that completed the survey;
- Eight respondents completed the survey who were aged between 36 and 45;
- Seventeen respondents completed the survey that were aged between 46 and 55;
- The most popular age demographic that participated in the survey were aged between 56 and 65, with 36 participants answering the survey questions;
- There were sixteen participants who answered the survey between 66 and 74; and
- There were four participants aged 75 and over who completed the survey.

Q.5. Gender



There were 85 participants who answered this question of those there were 52 (61%) respondents who were 'Male' and 33 (39%) 'Female', with 3 people choosing to skip this question.

Appendix C

Engagements Informing the Development of Advice on the Extension of the Strategy and Funding Programme for Victim and Survivors

In April 2018 the Commission implemented a monitoring and reporting system to track its engagements and relate these to the overall outcomes of the organisation.

Total engagements April 2018 – September 2019	581
Engagements feeding into V&S Strategy (Outcomes 1*-4)	499

The Commission has had a total of 581 engagements across the period of April 2018 when this reporting mechanism was implanted, to September 2019 when this advice was submitted to The Executive Office.

Of these engagements, 499 have fed directly into the development of advice on an extension to the 2009-19 Strategy for Victims and Survivors.

Engagements which have not related directly to the Strategy are those in relation to governance, function and development of the Commission office in corporate Outcomes 5 and 6 ('Improved access to opportunities for learning and development', and 'The Commission is and effective and efficient organisation').

Breakdown of Engagements by Corporate Outcomes	
Outcome 1* <i>Improved health and wellbeing of victims and survivors</i>	91
Outcome 2 <i>Victims and survivors and those most in need are helped and cared for</i>	164
Outcome 3 <i>Victims and survivors and their families are supported to engage in legacy issues</i>	306
Outcome 4 <i>Children and grandchildren of victims and survivors are given the best start in life</i>	33

*Engagements attributed to Key Action 5.2 under Outcome 5 in relation to Standards for Services have been accounted for under Outcome 1, 'Improved Health and wellbeing of Victims and Survivors'.

