Women and girls at risk: developing a new alliance:

Tender specification

Introduction
Since 2008, a group of funders with an interest in a better criminal justice system have been collaborating through the Corston Independent Funders’ Coalition (CIFC) to improve the response of statutory services to women and girls either in, or at risk of entering, the criminal justice system. In its first phase, CIFC focussed on community alternatives to custody, but more recently it has been reflecting on whether to broaden its scope away from women already in the criminal justice system, and look at how to prevent number of women and girls entering it in the first place. CIFC has been reviewing the changing landscape and, in partnership with Clinks (the infrastructure organisation for the Criminal Justice VCS) has carried out extensive consultation about this change of focus with practitioner organisations working with vulnerable women and girls.

Funders and practitioners alike recognise that going into custody is just one of a range of negative outcomes for vulnerable women and girls. We know that a constellation of structural and individual risk factors, in childhood and as adults, lead too many women and girls to the criminal justice system and prison, secure psychiatric accommodation, chronic use of drugs and alcohol, street sex work, homelessness and other poor life trajectories. We know that the risk factors for such women and girls are multiple and frequently extreme, and the services that aim to support them too often fail: at worst, some services can have the effect of reinforcing earlier traumatic experiences and causing further harm. We also recognise that many women overcome early problems to lead fulfilling and successful lives, and that some services provide exemplary support.

Following its consultation with Clinks, CIFC is confirmed in its view that that the focus of work over the next few years should be moved “upstream”. It recognises that if the number of women and girls ending up in negative life trajectories is to be reduced, it needs to look not only at the criminal justice system, but at a broad network of systems and interventions.

The consultation demonstrated that there was widespread support among practitioner organisations for this broader focus, and an appetite for developing an alliance of funders, practitioners and others to identify or develop an evidence base of effective practice, and create a convincing case for systems change so that (a) the needs of vulnerable women and girls can be met at an earlier stage and (b) where interventions fail, health, criminal justice and other statutory services are improved so that they are able to break negative cycles.

CIFC has developed a draft theory of change, and gathered together a transitional working group to take the idea forward. We now wish to recruit a consultant who can support the development of the alliance and help set the direction for its programme of work.

More information about the background and our proposed approach can be found in the supporting documents which are attached as appendices to this tender:
1. Report on the consultation commissioned by Clinks and CIFC
2. Draft Theory of Change

Language and culture
A word on definitions and the culture we seek to create as we build the alliance is important. Those involved in putting together this programme of work talk about “vulnerability” and also about “women and girls at risk”. By this terminology we mean women and girls whose current circumstances have roots in unresolved damage at earlier stages of life. Such women and girls can end up following damaging life trajectories including offending,
intractable mental health problems, long term drug or alcohol abuse etc. Some in the sector use the language of “trauma” to describe this pattern of damage. Many practitioners embrace the theory of “trauma informed services”, and the steering group is drawn to this approach. However it is also recognised that the use of this language has drawbacks when describing structural disadvantage, and that there is more than one route to a damaging life trajectory. More on the theory linking childhood trauma with long-term serious problems can be found in Appendix 1.

It is important to note that many of the women and girls who this programme of work aims to support would not identify themselves as vulnerable, damaged or traumatised. We are aware of the need to pay attention to language so as not to label women and girls as victims, or deny their personal agency.

The proposed alliance and its dynamics
The transitional working group is very mindful of the power dynamic that inevitably exists between funders and those seeking funds, and also of the tensions that exist between organisations working in overlapping fields who are both allies and competitors. It is therefore essential that if the alliance and its programme of work are to be successful, a collaborative, consultative culture is built from the start. We have a good grounding for this, through the consultation already undertaken, and there is considerable enthusiasm among a broad group of funders and practitioner organisations for a partnership approach. However, the consultant selected for the project will be expected to demonstrate a collaborative and inclusive approach, and explain in their submission how they intend to overcome any tensions both between funders and those (potentially) funded, and between practitioner organisations that are both partners and competitors for funding, as well those who have diverse approaches.

The consultancy tasks and objectives
There are a number of tasks to be undertaken in order to ensure that the Alliance has a sound basis for action. These will be undertaken by the consultant, in close consultation with a transitional steering group of funders and practitioners. The tasks include:

- Development of a working draft of a vision, a set of values and principles to guide the alliance, and a shared language;
- The identification of a suitable governance model and structure for the alliance;
- Development of a set of outcomes and measures of success;
- Preparation of an outline strategy for the first 3-5 years;
- Preparation of an outline communications strategy and alliance identity;
- Mapping existing policy, key players and probable changes over the next period; identifying potential levers and opportunities for influence; and identifying any complementary activity currently being undertaken, so as to ensure there is no duplication of effort;
- Identification of initial areas where additional evidence or data is needed in order to progress the aims of the alliance;
- Refinement of the draft theory of change for the programme;
- Facilitating the development of the alliance and any associated groupings that will oversee and deliver the programme.

These elements will support the creation of a clear business case and direction of travel to put to potential funders of the core costs of the alliance and any project work it undertakes.

The tasks are grouped into five discrete, but interlinked deliverables for the project.

Deliverable 1: Governance model and structure
The consultant will explore different options for how the alliance might be set up, prepare costed models and assist the transitional working group to select the most appropriate.
It is likely that the structure for the alliance will include a small secretariat, and a formal alliance of interested organisations including funders, voluntary sector organisations and others, although we are open to other ideas. There may also be a need and appetite for a wider group of members/supporters. Consideration also needs to be given to how funding decisions will be made and what the options for funding structures might be.

In developing its ideas, Clinks and CIFC have been mindful of other successful alliances and coalitions, including Still Human, Still Here; End Violence Against Women; the Transition to Adulthood Alliance; the Changing Minds and Child Sexual Exploitation funders’ collaboratives; and of course the CIFC itself. Working relationships and cross-fertilization with other coalitions/initiatives (see also Deliverable 4 below) should be explored. It should be noted that there is strong support among practitioner organisations for the development of an Alliance. There is equally strong concern about the constraints on its financial and human resources, and the potential drain on those resources that participation in joint action might create and this will need to be borne in mind when considering structures and support.

**Deliverable 2: strategy, outcomes and measures of success**

The consultant will be responsible for developing an initial strategy and direction of travel.

If the alliance is to succeed, it needs a clear vision and a shared set of values. Taking the consultation and the resultant recommendations as a starting point, the consultant will identify and test the overall vision and values to ensure they are clear, well understood and shared by key partners. This element of the work will include developing a shared language, including testing the terminology of “trauma” and “trauma informed services” as a way of describing the project’s theory of change.

We envisage that at this development stage, the strategy will be in outline form (strategic direction) which will be refined as the work progresses. We see the alliance as a long-term project, so will need a strategic direction for the first 3-5 years, with a more detailed plan for priority activities in the first year. The consultant will help the transitional steering group identify its measures of success, which are likely to include policy and practice shift. Although we accept that change can take a long time, it is important that realistic and achievable short term goals are set so that progress can be made within a realistic funding cycle.

A more detailed work plan will be needed for the first year of the project. This will include securing funds, putting the secretariat and any other associated posts in place, and starting to build/present the evidence base to policy makers. This last point will require the identification of priority areas for attention where additional evidence is needed, and, associated with this tender, we are also issuing a tender for a literature review (of which more below). The consultant will be expected to use the literature review to identify initial areas of work and sub-projects.

**Deliverable 3: Proposed identity and communications plan**

The consultant will be responsible for developing an initial communication strategy (with milestones for 12-18 months) closely linked to the overall strategy above. We envisage that this will be directional and in draft form – identifying the key audiences, messaging areas, dissemination methods and required resources to communicate effectively.

Working with the transitional steering group, the consultant is expected to lead a process to name the alliance and as part of the communications plan and governance model, outline steps that need to be taken to create an appropriate identity and branding.
**Deliverable 4: Existing policy, activity and key players**
The consultant will produce a report mapping existing policy and partnership initiatives, scanning the horizon to identify potential levers for change, and identifying key policymakers, opinion formers and opportunities for influence to identify the points of entry that are most likely to result in change.

Alongside this, the report should identify any complementary activity being undertaken to ensure there is no duplication of effort or funding, and to identify how the alliance might interact or work with other initiatives. These should include as a starting point:

- **MsUnderstood** - a partnership between the University of Bedfordshire, Imkaan and the Girls Against Gangs project, formed by Carlene Firmin to challenge young people’s experiences of gender inequality.
- **Paul Hamlyn Foundation** – work is being undertaken to develop a strategic approach to supporting girls and young women involved in or at risk of involvement in the criminal justice system through developing evidence, leadership and participation.
- **Rebuilding Shattered Lives** – A St Mungo’s campaign to raise awareness of women’s homelessness, to showcase good practice and innovation and, ultimately, to improve services and policy for the future.

**Deliverable 5: Refining the Theory of Change**
CIFC has developed a draft theory of change based on trauma/unresolved negative early experiences, which is attached to this tender. We anticipate that this will change and develop as the work progresses, particularly as it has not been widely shared with practitioner groups. During their tenure, the consultant will develop and refine the Theory of Change, informed by the literature review and development activities undertaken.

**Deliverable 6: facilitating the development of the alliance**
By the end of this consultancy, we expect to have arrived at a governance model and structure for the alliance. Throughout the development period, however, it is important that the consultant works with, the broad network of practitioner organisations and keeps them informed of how the work is progressing. This will include testing out and co-developing the deliverables listed above, the establishment of a culture and approach to partnership work and the building of a set of shared values and understanding of the scope, issue definition, aims and overarching ambition of the project, with a set of tools that will enable partners together and separately to deliver an initial programme of work which will be built on over time.

**Associated project: literature review**
A separate tender will run alongside this one to review the literature and published evidence base as a starting point for the alliance’s work. We expect the consultants leading the two projects to work closely together and keep each other informed. The literature review will have a shorter timescale than the work covered by this tender, so that the findings can be used to inform the deliverables required here. The communications plan should cover the dissemination of the literature review findings.

We are open to one consultancy carrying out both briefs, but decisions will be made on the skills, evidence base and approach demonstrated through the two application processes.

**Management of consultancy**
This project will be overseen by a transitional steering group comprising funders, practitioner organisations and independent experts. It is anticipated that the steering group will meet monthly. The consultant will be responsible for arranging, providing the secretariat for, writing up and following up actions from these meetings.
Day to day management of the project will be by Lisa Reed, Programme Director, Lankelly Chase Foundation. A hot desk and facilities such as IT, photocopying etc will be available at the Foundation if needed, but no secretarial or other support.

**Budget and timescale for delivery**

We anticipate that this work will be undertaken over a six month period. There is a maximum budget of £25,000 for the project, which is exclusive of VAT but inclusive of expenses. We are open to single or joint bids (in the case of the latter, with one clear lead consultant who will be responsible for ensuring quality and delivery of the outputs).

**Submitting a tender**

You should submit a fully costed tender, including:

- a response to our draft Theory of Change
- project plan and process you propose to follow
- a timetable for the work, showing dependencies and linkages between the different project elements
- a timeline for delivery
- proposed methodology
- CVs of all those involved in project delivery, along with details of their responsibilities and the time they will each allocate to working on the project
- How you anticipate working with the consultant reviewing the literature.
- Budget

The chosen consultant will need to demonstrate an appropriate range of skills, knowledge and experience, including:

- A thorough understanding of the issues facing girls and women with multiple vulnerabilities
- Understanding of theory and practice in relevant areas
- Knowledge of relevant statutory sectors and key players
- Experience of having undertaken similar commissions in the past
- Excellent facilitation skills and ability to develop common cause among diverse organisation
- Knowledge of governance and operational issues
- Experience of working with funders and practitioner organisations
- Project management skills

**Deadlines and process**

The deadline for submission of tenders is 5pm on 9th December. Tenders or enquiries should be sent to: Lisa Reed, Programme Director, Lankelly Chase Foundation, lisa@lankellychase.org.uk.

Shortlisted applicants will be invited to attend an interview on 19th December 2013.

The appointed consultant is expected to start in January 2014.
Appendix 1: Trauma, and trauma-informed services

We know enough about the constellations of problems faced by women and girls at risk to begin to construct a hypothesis around the causal relationship of unaddressed childhood trauma (taking a broad definition here to include abuse, neglect and seriously disrupted attachment) with a profound effect on different types of functioning¹. Trauma is defined as both an event and a particular response to an event and can start in adulthood as well as childhood. It is recognised that engagement with services, such as prison or inpatient mental health treatment can be re-traumatising in itself. It is becoming more apparent that services should be ‘trauma-informed,’² taking trauma into account, avoid triggering trauma reactions, and support coping capacity and the management of trauma symptoms.

We are unsure whether trauma is the most appropriate term due to it being used loosely in popular discourse to refer to stress. Trauma can be conceptualized usefully as extreme stress lying at the end of a continuum with no clear line demarcating trauma from non-traumatic stress. The word trauma is often used in a way that blurs event and response. It’s helpful to distinguish between them but in practice is not so straight forward because of individual subjectivity. It’s not the event but the meanings the event has to the individual which determines whether it will be traumatic.

Whilst there is no disagreement that the services working with women and girls should be trauma-informed in their approach, there are concerns about using the phrase in the new alliance’s external communications for a range of reasons:

- We are not clinicians or academics and lack the necessary expertise to make this judgement and not least because trauma must be defined by the person who experiences it.
- Trauma may suggest an event rather than prolonged or cumulative neglect
- It could risk pathologising a women and girls’ experience of abuse and violence, rather than thinking about harm in the context of discrimination – describing the effect rather than the causes
- That a trauma based approach or framework could be said to apply equally to men and that men’s violence against women and girls is exacerbated by his own trauma

We need to find appropriate terminology for complex and individual collections of extremely negative childhood and adult experiences, often including abuse of different kinds, which have long-term effects. Work is needed to find language to describe this in an accurate, understandable way which makes sense to survivors, honours their experience and does not further stigmatise them, and can be understood by a wide audience.

Gender responsive/women-centred services

Covington defines gender-responsive/woman-centred services as “the creation of an environment (through site selection, staff selection, program development, and program content and materials) that reflects an understanding of the realities of women’s and girls’ lives and that addresses and responds to their challenges and strengths.”³ Some of the organisations that will be engaged with the alliance will run or advocate services that are women-centred within this definition, whilst others will run mixed sex services (such as generic homelessness or substance misuse services) but want to ensure that the needs of women and girls are adequately met. The alliance will need to engage both types of organisation, and help build the evidence base for effective practice in women-centred services and other gender responsive approaches in wider services.

1 For example: Bessel, A Van der Kolk, MD “Developmental Trauma Disorder: towards a rational diagnosis for chronically traumatized children.” Psychiatric Annuals May 2005
3 Covington, S Ibid