Turning Pain into Power

A Charter for Organisations Engaging Abuse Survivors in Projects, Research & Service Development

This charter has been produced by a national survivor-led organisation *Survivors' Voices*, in partnership with King's College London and the Wellcome Foundation. The authors are all '*survivor activists*' trying to turn the pain of what has happened to them into power that changes things.

As people with experiences of abuse and interpersonal trauma, we face ongoing struggles to get what we need to recover. We want to be part of a solution that changes things for others. This has tapped a deep well of motivation to shape research, policy and practice with our experiences and wisdom.

The Charter has been developed through research and consultation with our Survivors' Voices Research Group and others with lived experience of abuse and trauma.

Who is the charter for?

This guidance is for people working in research and academia, healthcare and psychological therapy settings, legal, educational and social care organisations as well as broader areas of public life such as media, arts, religious and community organisations. It explains concepts and how organisations can engage positively with survivors of abuse.

What does the charter do?

The charter outlines ***7 principles for good survivor engagement*** *and* ***7 areas of good practice guidance*** aimed at encouraging active, safe and meaningful involvement of abuse survivors in:

- research and development
- services and projects
- development of policy and practice standards
- events, training and conferences.

When and how to use the charter:

- as a discussion starter when shaping any projects, research, services and events engaging with survivors
- as a guide and checklist for research ethics applications involving survivors
- as a planning and evaluation tool for organisations who are seeking to be intentionally survivor-safe, survivor-sensitive, survivor-empowering and trauma-informed
- as a tool for survivor activism and survivor-led projects.

Definitions:

Abuse: *can include profound neglect; bullying; emotional/psychological & narcissistic abuse; physical, sexual and spiritual abuse; organised, institutionalised and discriminatory abuse; being exposed to or witnessing violence and living under coercive control. All abuse involves a misuse of power within interpersonal relationships. The power may be due to age, relationship, strength, personality, profession, role or position. These experiences can occur in a variety of social settings including families, schools and communities. We understand that different forms of abuse can all have a deep and long-lasting effect on us as children and adults and this can be even more profound if it occurs in early years and within significant relationships.*

***Survivor*:** the term 'survivor' developed to signify people moving away from being passive 'victims' to active overcomers of their experiences. We follow common practice and use it as a shorthand for people who have experienced abuse and interpersonal trauma whilst recognising that many people with such experiences have not heard the term "survivor" or do not describe themselves as having been 'abused' or being a 'survivor', for complex and valid reasons.

Interpersonal Trauma: *we recognise that both individual incidents and prolonged exposure to abusive or self-negating environments can cause trauma, particularly when such experiences occur within significant relationships and during childhood. We understand interpersonal trauma to be a deeply distressing or disturbing experience that occurs between people and threatens life or sense of self. Trauma overwhelms a person's ability to cope and can have profound consequences that impact physical, emotional, sexual and spiritual wellbeing. It can lead to conditions such as post-traumatic stress disorder (PTSD). The level and type of impact will be affected by the interaction of the severity of the trauma experience, the attachment to the perpetrator, the vulnerability of the person and society's ability to acknowledge it and respond appropriately with support.*

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Why is this charter important?

Survivors of abuse are a significant but often 'hidden' population. National Society for the Prevention of Cruelty to Children (NSPCC) statistics report 1 in 20 children experience sexual abuse and 1 in 14 experience physical abuse. 1 in 3 children did not tell anyone (Radford et al., 2011). According to the Crime Survey for England & Wales, between 7-9% adults report having experienced either childhood psychological, physical or sexual abuse at the hands of an adult or witnessed domestic abuse in the home. Of these, almost 50% had experienced 2 or more types of abuse. 28% of women and 14% men have experienced domestic abuse and 20% women and 4% men sexual assault in adulthood (CSEW; ONS, 2016 & 2013/14).

Due to the fear, shame and secrecy which characterises abuse, in reality these figures are likely to be higher due to under-reporting – many people never disclose their abuse. Given the prevalence, it is likely that most statutory, third sector or community organisations offering services will be engaging with people who are living with the aftermath of abuse. Child abuse is a risk factor cited in the causes of most mental health conditions and large population studies indicate that 'adverse childhood experiences' also increase risks of physical ill health (Felitti et al., 1998). In other words, abuse is "hidden in full view". All services should take account of this and the needs of survivors whether an individual chooses to disclose or not.

Despite being a significant population, there is very little research that directly asks survivors of abuse about their lived experience: the impact of the abuse and what has helped and hindered them in the journey out of abuse. There is scant evidence of survivors' voices informing the decisions of policy-makers and service providers, let alone of active and intentional involvement of survivors in shaping research, professional training, practice development and other areas of public and communal life. When any organisations engage with survivors, it is important that the engagement is as safe and positive an experience as possible.

All work with all people affected by abuse and trauma needs to look unlike and be the opposite of abuse - otherwise it can inadvertently replicate the dynamics of abuse and cause harm. Our charter reflects this.

Good engagement *of survivors in research, projects, events & service development is transparent about the benefit of involvement (including the benefit of being heard, making a difference and feeling empowered). The agenda for engagement is one of authentic enquiry, active listening & evaluating work in the light of survivors' lived experiences. Researchers, project staff and organisations are able to be empathic partners with survivors whose full experiences and voices are heard, heeded and allowed to have significant impact. There is an active effort by the organisation to stand shoulder-to-shoulder with survivors, creating an environment of collaboration and intentionally looking out for attitudes and actions by the organisation that can inadvertently cause harm.*

Poor engagement *of survivors can be silencing, re-abusing, excluding, dis-empowering and inauthentic. The agenda may be driven or diverted by vested interests, rather than open, true enquiry. Organisations, researchers and policymakers can be afraid to ask the important questions for fear of 'opening Pandora's box' - and so survivors' experiences and voices are not heard. Survivors may be excluded because they are pre-judged as too 'unstable' to be involved at all. Sometimes, even when survivors are asked, they are not really listened to or their answers are not acted upon.*

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Charter Principles: our organisation will ensure survivor engagement is:

☑ **Safe**: abuse is inherently unsafe. It leaves a long legacy of fear. Many survivors remain frequently triggered into 'flight, fight, freeze or appease' responses. Some survivors will still be in situations of on-going abuse and risk of harm. Thus, the first priority for engagement is a safe environment that begins with providing attentive listening and connections that are warm, collaborative and relational, which recognise and minimises triggers and may include safety protocols. Dedicated time is given to building trust and safety with individuals and survivor groups.

☑ **Empowering:** people who are abusive dominate and take away personal power. Good engagement should be collaborative and must empower survivors to have control of decisions about their own involvement. This includes the decision about their capacity to participate in events, research or projects (within boundaries of being able to keep themselves safe and support the maintenance of safety for other participants). Research, events or training may be survivor-led or co-produced with supporter organisations. Survivors should have a significant influence from the outset on the process of a survivor-engagement project e.g. setting agendas, scoping courses of action, terms of reference, devising research questions, event schedules, evaluations...

☑ **Amplifying the voices of survivors:** abuse is silencing. Engagement should help release and amplify survivors' voices, experiences and expertise. Good engagement will make it ok for survivor issues and viewpoints to be on the agenda. It creates intentional space for dialogue with survivors, gives and shares organisational platforms with survivors and evaluates projects, events and research findings *with* survivors' voices as a key input, allowing them to be the 'experts by experience'. 'Participation' should not being reduced to 'recruiting' study participants or representatives 'round the table' with no attention to power dynamics that diminish true participation.

☑ **Promoting self-care:** abuse is self-negating, destroys self-worth and damages well-being. Many who have been abused experience times of fragile mental and physical health and may find it hard to practice self-care. Engagement in research-activism can impact coping mechanisms - thus radical self-care should be normalised by example as well as in organisational processes. This includes recognising that many survivors are both 'ok' and 'not ok' at the same time (often masking distress). Resilience and 'pathology' are intertwined (e.g. self-harm, dissociation, overwork) and are often coping strategies to participate in life despite the pain. Organisations should support and not pathologise workers and participants who are survivors, enabling them to be real about struggles and 'not-ok' days and ensuring sufficient 'back-up' (e.g. aiming to have two facilitators for survivor-led activities).

☑ **Accountable and transparent:** abuse is hidden, and abusers often act with impunity. Engagement with survivors must have clear lines of communication and accountability, including to survivor-participants and survivor communities. Processes and decision-making should be relational, honest, real, transparent and open to feedback and dialogue.

☑ **Liberating:** abuse restricts and arrests healthy growth, imprisoning people in physical, mental and emotional shackles. Engagement must be a totally voluntary process and easy to withdraw from at any point (without fear of permanent exclusion). Good engagement is liberating, dynamic, life-giving and helps survivors experience a sense of possibility and life beyond the aftermath of abuse.

☑ **Creative and joyful:** abuse is corrosive, restrictive and soul-destroying. Engagement should be a creative process. Good engagement focuses on positive experiences and strengths as well as negative ones and can increase capacity for joy, creativity and imagination. Where appropriate, projects should include elements of fun and celebration of achievements and landmarks in the lives of individuals and in survivor groups and wider social justice movements for survivors.

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Charter Good Practice Guidance for organisations engaging with survivors

1. **Our organisation will seek to actively involve people with lived experience of abuse in relevant projects, research and development.** This may involve supporting survivor-led or co-produced projects. We will be transparent about the benefit of involvement both to our organisation *and* to survivors (e.g. financial, 'therapeutic' benefits of having a voice, meeting other survivors and 'turning pain into power' by improving things for others). We commit to sharing power, processes, access to information and resources to help liberate the power of survivors to help each other and wider society. We will seek workers who understand nuances about abuse and safety, e.g. survivor-researchers/speakers or people who have accompanied survivors as 'enlightened witnesses' and are survivor-sensitive. Survivor-researchers will have support, including co-facilitators for focus groups, a support person to talk to and debriefing after events.

2. **In our work, we will describe and define abuse both in its broadest sense as well as specific types of abuse, in order to help people who do not readily recognise that what they have experienced is abusive and to ensure that individual experiences are not minimised, ranked or denied**. We will use inclusive terms (*people who've experienced abuse)* alongside shorthand terms (*survivors*). If our project is necessarily limited to one category of abuse (e.g. sexual), we will explain why so that we don't feed into dynamics that silence or minimise. We will acknowledge that every experience of abuse is unique (informed by different social contexts) and that many survivors have experienced multiple forms of abuse, making it hard to 'fit' their experience and its impact into an abuse category (i.e. physical or sexual or domestic violence).

3. **Our organisation will recognise the intertwined nature of the transformative *power* and *pain* of breaking the silence of abuse.** We will acknowledge that individual and organisational fears about the risks of '*opening Pandora's Box*' can silence survivors and prevent meaningful dialogue, engagement and partnership with survivors. Enabling dialogue about abuse *may* cause distress, however, **distress does not automatically lead to damage**. Instead of avoiding the subject of abuse, we will learn to ask well, work collaboratively and give choice in a safe and supportive atmosphere.

4. **Our inclusion criteria for projects will not automatically exclude people from involvement because of fears about their vulnerability and will recognise that 'negative' coping strategies are often a sign of resilience.** Within boundaries of safety, survivors will decide whether or not they have the capacity for involvement in projects.

5. **When running projects and events, will ensure that all participants know in advance what the purpose of the engagement is, that it is entirely voluntary and what will happen.** In research, we will discuss how data will be recorded (being aware that video may be triggering), stored and shared and send participants results. We understand 'consent' as an ongoing process and will make it easy for participants to opt out of participating or recording a particular contribution. We will guarantee anonymity as well as supporting those who wish to identify their contribution.

6. **Our organisation will intentionally work to create safety for survivors to engage and share their experiences, taking time to build trust, paying attention to the physical environment and ensuring processes that share power**. We will offer deep listening, empathy and non-judgemental acceptance, acknowledging our intent to be helpful and actively inviting survivors to voice anything that feels uncomfortable or triggering. To support 'safety/threat' evaluation, we will try and communicate face-to-face as much as possible. We will invite people to share only what feels safe and respect their pace. We will make it easy to leave (and return to) discussions, agreeing 'time out' signals when needed (e.g. in groups). We will be aware of our own reactions and the need to be authentic, connected and hold appropriate boundaries. We will ensure safety protocols are in place to deal with current risks, support available for any distress/flashbacks and signposting is available before and after conversations about abuse.

7. **We will enable people to describe the full range of their experiences of abuse and recovery, both helpful and unhelpful.** We understand that at times people's descriptions of abuse and recovery are not always linear, neat or coherent. We will use terms such as 'story', 'narrative' and 'alleged' with caution, to avoid any implication that survivors have made-up things up. Words such as 'experiences', 'accounts' and 'journey' may be preferable**.**

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