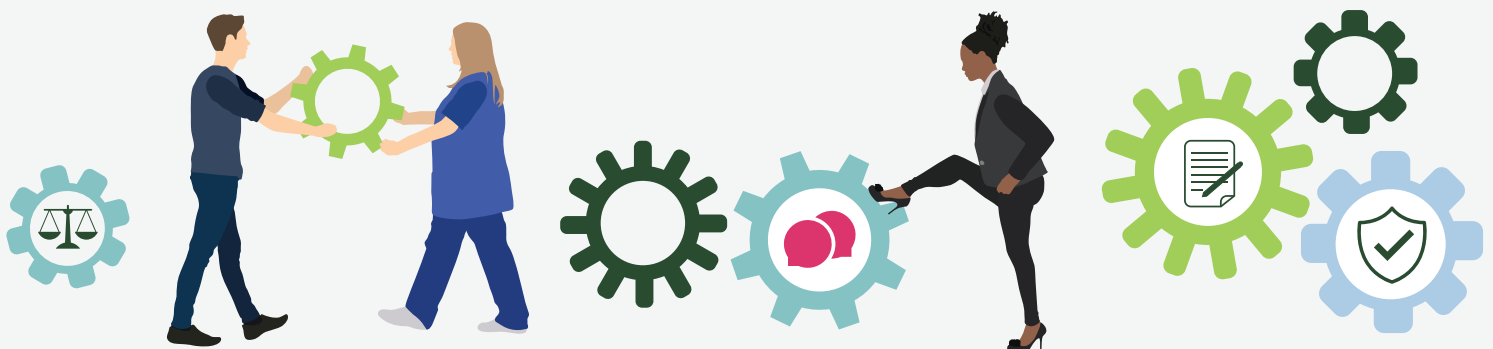


Independent Sexual Violence Adviser and ISVA managers' survey

Report of findings





Established in 2011, LimeCulture is a leading national safeguarding and sexual violence specialist organisation.

We work locally, nationally, and internationally with professionals and their organisations to improve safeguarding, prevent, and respond to sexual violence and abuse, and build safer cultures through our training and development initiatives, research, and consultancy services.

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1 EXECUTIVE SUMMARY

- 1.1** LimeCulture undertook a national survey of Independent Sexual Violence Advisers (ISVAs) and ISVA managers to gain a deeper understanding of the current challenges, pressures, and support needs facing the workforce.
- 1.2** As the leading provider of ISVA training and the sole accrediting body for ISVA services against the Quality Standards for ISVA Services¹, LimeCulture regularly hears powerful anecdotal evidence about both the positive impact and the emotional strain associated with the ISVA role. To complement these accounts with robust data, these surveys were designed to capture meaningful insights that could inform conversations at a national level, influence policy development, and support practical improvements – all while keeping high-quality care for victims/survivors at the centre of service delivery.
- 1.3** Two tailored online surveys – one for ISVAs and one for ISVA managers – were distributed nationally, collecting 150 individual responses from services operating in 91% of Police and Crime Commissioner (PCC) areas. The survey findings provide a detailed picture of workforce demographics, service delivery models, caseloads, access to training and supervision, and the challenges of frontline delivery.
- 1.4** The survey findings, which highlighted a dedicated but overwhelmed workforce, have been shared with ISVAs at the National ISVA Conference 2025 hosted by LimeCulture (on 7 May 2025), the LimeCulture ISVA Managers Network (on 8 May 2025), and the LimeCulture Network for Sexual Violence Commissioners (on 14 May 2025).
- 1.5** Many survey respondents report facing real-term cuts to their services due to funding remaining static and short term. Increased demand was a major theme – ISVAs reported increasingly complex caseloads, with caseloads of up to 90 clients and nearly half of the respondents said their caseloads had increased by 20–50% in the past year alone. These pressures appear to be compounded by the diminishing capacity of other statutory and voluntary services, often leaving ISVAs to fill support gaps beyond their original remit. The cumulative effect is a cycle of depleting resources, rising demand, overstretched staff, high turnover, and the dilution of ISVA services – ultimately impacting the consistency and quality of support provided to victims/survivors of sexual violence.

¹ <https://limeculture.co.uk/wp-content/uploads/2023/03/Quality-Standards-for-ISVA-Services-Information-Sheet-.pdf>

- 1.6** The challenges outlined in this report are wide-ranging but interconnected and include the following themes:
- **Funding instability:** Continues to threaten service sustainability, workforce retention, and long-term planning – leaving ISVAs underpaid, overstretched, and services unable to sustainably plan for the future.
 - **Caseloads:** ISVAs are managing increasingly complex and growing caseloads while compensating for gaps in external service provision. This leads to staff burnout and reduced service quality.
 - **Training:** Despite high completion rates of core training, many ISVAs face barriers to continued professional development due to limited budgets, time constraints, and inconsistent access to specialist training.
 - **Supervision:** While most ISVAs receive regular supervision, deeming it ‘essential’, a minority of ISVAs find it specifically tailored to their role. Limited access to peer support or reflective spaces further undermines wellbeing and resilience.
 - **Staff wellbeing and retention:** Is compromised by inconsistent access to tailored supervision, limited time for reflection, and a lack of structured emotional support. Due to high levels of reported burnout and the risk of vicarious trauma, staff wellbeing and retention remain major concerns. While many ISVAs remain deeply committed to their roles – driven by a passion for justice and victim/survivor empowerment – many expressed fears that without structural change, they may be unable to continue in the role.
 - **The Criminal Justice System (CJS):** Remains a major source of frustration and disillusionment amongst victims/survivors and the ISVA who support them. Delays, retraumatising CJS processes, and poor communication between professionals contributes to ISVA burnout and the erosion of victim/survivor trust in the process.
 - **Collaboration with external agencies:** Is hindered by a poor understanding of the ISVA role and the limited capacity of wider support services. This results in blurred professional boundaries for ISVAs and fragmented care for victims/survivors.
 - **Emotional support:** Despite clear expectations for ISVAs to deliver trauma-informed emotional support, inconsistent training, unclear role boundaries, and a lack of official guidance on the emotional support element of the role has led to wide variation in practice and confidence across the ISVA workforce.
 - **Quality of support:** Ultimately, the quality of support is at risk as services are forced to stretch beyond their limits – undermining the consistency, responsiveness, and the trauma-informed ethos that victim/survivors deserve.

- 1.7** Despite these challenges, the survey findings show that there is strength, innovation, and hope. ISVAs and ISVA managers provided clear, actionable solutions throughout the ISVA Surveys and during the Strength in Solutions session at the National ISVA Conference 2025, which included the following:
- Secure, long-term funding is essential to support service stability, manage caseloads and retain experienced staff.
 - ISVAs must be recognised as skilled professionals, with fair pay and development opportunities.
 - More effective caseload management, centred around risk and need, is required.
 - CPD opportunities, stronger peer support and effective multi-agency support structures should be put in place.
 - Victims/survivors must remain central to every reform – no systemic change should come at the cost of quality care.
- 1.8** The ISVA workforce is at a critical point – committed, capable, and essential – but under unprecedented strain. This report offers a powerful evidence base for action – informing strategic investment, workforce development, and national policy.

Listening is no longer enough. It's time to invest. It's time to act.

2 ACKNOWLEDGEMENTS

- 2.1** LimeCulture extends sincere thanks to the many ISVAs and ISVA managers who generously shared their views and experiences with us through this survey. Your openness and honesty have been invaluable in helping us better understand the current realities of the role and the steps that are required to deliver effective ISVA services.
- 2.2** We are also grateful to the ISVAs, ISVA managers, commissioners and all those who attended the National ISVA Conference for their valuable contributions in collaboratively exploring solutions. Your insights, dedication, and commitment to improving support for victims/survivors of sexual violence have played a crucial role in shaping the findings of this research.

3 BACKGROUND AND METHODOLOGY

- 3.1** The Independent Sexual Violence Adviser (ISVA) role was established to provide specialist, independent support to victims/survivors of sexual violence, regardless of whether they make a report to the police. ISVAs play a crucial role in helping individuals understand their options, access other support services, and navigate the Criminal Justice System.
- 3.2** Over time, the ISVA role has evolved, with increasing recognition of its importance in improving victim/survivor outcomes and experiences. Government guidance has aimed to define and standardise the ISVA role, attempting to ensure quality and consistency across services – initially through the Home Office’s Essential Elements (2017)², and most recently the Ministry of Justice Independent Sexual Violence Adviser Statutory Guidance (2025)³. These national documents have set out expectations for training, supervision, and the scope of ISVA duties to maintain professional standards and improve victim/survivor outcomes.

Our work with ISVAs

- 3.3** The Quality Standards for ISVA Services were developed by LimeCulture in collaboration with victims/survivors of sexual violence, ISVAs, service providers and commissioners in 2018. The Quality Standards aim to ensure every victim/survivor of sexual violence can access a high-quality, well managed ISVA service wherever they are in the country irrespective of their engagement with the Criminal Justice System.
- 3.4** The Quality Standards provide a benchmark for services to monitor their provision against, and describe the standards required for the delivery of a safe and effective ISVA service. They are the only Quality Standards that are focused solely on ISVA services.
- 3.5** The Quality Standards are supported by an Independent Accreditation Programme, which awards an independent quality mark to ISVA services that achieve good practice.
- 3.6** The Quality Standards were updated in 2022 to explicitly capture the key elements of delivering high-quality support for children and young people, recognising the way in which ISVA services for children and young people have developed and evolved in recent years.
- 3.7** Through our extensive work with ISVAs across England and Wales, LimeCulture is uniquely positioned to hear – often through powerful personal accounts – the realities and challenges faced by ISVA services. These insights are gathered through our ISVA training programmes, specialist consultancy in sexual violence, our national accreditation programme, and the professional networks we host for ISVAs, ISVA managers, and sexual violence commissioners.

2 No longer available online

3 <https://assets.publishing.service.gov.uk/media/6822fd12d9c9bb76078f7f8f/isva-guidance.pdf>

- 3.8** While we regularly receive valuable anecdotal feedback, we recognised the importance of moving beyond informal conversations to gather structured, evidence-based insights. This approach enables us to understand the challenges currently facing the ISVA workforce and, crucially, to champion their role and impact more effectively.

Purpose of the survey

- 3.9** To better understand the pressures facing the ISVA workforce and to amplify their voices, LimeCulture developed two national surveys – one for ISVAs and one for ISVA managers – with the aim of identifying what is needed to effectively resource and support ISVA services now and in the future, ensuring they are equipped to deliver high-quality, victim/survivor focused care.
- 3.10** The survey was designed by LimeCulture’s Sexual Violence Consultancy team, with input from our Training Managers and Accreditation Managers. The draft survey questions were then circulated to a subgroup of ISVA managers for feedback and suggestions.
- 3.11** The final surveys explored the following areas:
- **About ISVAs** – Demographic information to ensure diverse and representative responses.
 - **Role and Services** – Details about respondents’ roles, responsibilities, service models, and client groups supported.
 - **Training and Professional Development** – Access to training, CPD opportunities, and identification of individual or service-wide knowledge gaps.
 - **Capacity, Caseloads, and Allocation** – Exploration of workloads, how cases are allocated, service capacity, and demand management.
 - **Management and Supervision** – Quality and availability of management oversight, clinical supervision, and support structures.
 - **Challenges, Outcomes, and Role Satisfaction** – Reflections on work-related challenges, job satisfaction, client outcomes, and service impact.
 - **The Year Ahead** – Anticipated future pressures, development opportunities, and workforce sustainability.
- 3.12** The Survey for ISVAs was launched online on 25 February 2025 and the Survey for ISVA Managers was launched on the 20 March 2025. ISVAs and ISVA managers were asked to complete it by the 21 April 2025 deadline.

- 3.13** During the analysis of our survey findings, the Ministry of Justice published the Independent Sexual Violence Adviser Statutory Guidance (on 8 May 2025, under the Victims and Prisoners Act 2024). This Guidance reinforces the critical importance of the ISVA role and mandates that relevant agencies consider it when commissioning and delivering ISVA support services. It emphasises trauma-informed, victim-centred practice and highlights the value of 'by and for' services, cultural competency, and a coordinated multi-agency approach. Where relevant, we have referenced the Guidance throughout our findings to contextualise both the challenges and opportunities within ISVA practice and service delivery.
- 3.14** Insights from the survey have been shared with ISVAs, their managers, and ISVA commissioners through our networks and the National ISVA Conference 2025, which brought together ISVAs and ISVA managers from across the country. These sessions enabled the co-production of tangible solutions and practical ways forward. These sessions also provided an opportunity to build consensus around areas requiring further strategic, financial, or political support to improve the quality and consistency of victim/survivor care. The findings from these sessions are shared within this report.

4 FINDINGS

- 4.1** The national surveys of Independent Sexual Violence Advisers (ISVAs) and ISVA managers gathered 150 individual responses from services operating in 91% of Police Force areas in England and Wales. The findings provide a detailed picture of the ISVA workforce, its structure, pressures, and experiences.

Individual and service demographics

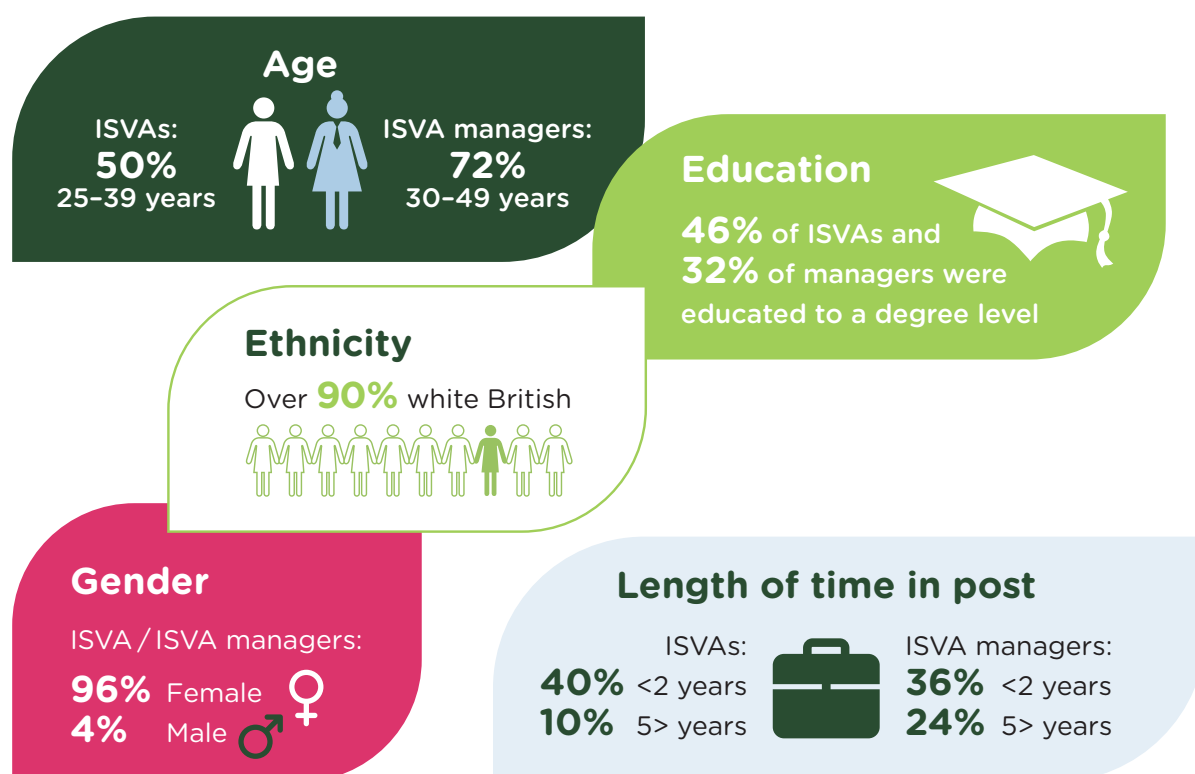


Figure 1: Summary of ISVA demographics

- 4.2** The ISVA workforce is predominantly female, white, highly educated, and under the age of 40. The prevalence of younger ISVAs may point to the profession's growing relevance among early-career practitioners, though this trend also underscores challenges in ensuring workforce sustainability, experience retention, and diversity.
- 4.3** A significant number of ISVAs are relatively new to the role, which may indicate a growing interest in the profession. However, this also raises concerns about workforce retention, as well as the cost and resource investment required to appropriately train new staff – something that can divert capacity from already stretched services.

- 4.4** Half (50%) of all the ISVAs who responded are aged between 25 and 39. Only 6% of ISVA respondents are aged over 60. In comparison, ISVA managers tend to be slightly older, with 72% falling into the 30 to 49 age group, and 8% are aged over 60. This may suggest a natural progression in career development but also highlights potential gaps in age diversity, particularly among frontline ISVAs.
- 4.5** The survey shows that the sector significantly lacks ethnic diversity. A substantial 90% of ISVA respondents and 92% of ISVA managers identified as White/British. Representation from other ethnic groups remains low: Asian/Asian British (0.8%), Black/Black British (1.6%), Mixed/Multiple ethnic groups (4%), and other ethnic groups (1.3%). These figures point to an urgent need for targeted recruitment and retention strategies to diversify the workforce and ensure sufficient representation and culturally responsive support for victims/survivors from all communities.
- 4.6** The role continues to be overwhelmingly dominated by female ISVAs, with 96% of both ISVAs and managers identifying as female. Just 4% identified as male, while 0.67% identified as non-binary and another 0.67% as genderfluid/genderqueer. While the female majority may reflect the sector's origins in women's support services, these figures also suggest a need to ensure that the role is inclusive and welcoming to professionals of all genders.
- 4.7** The ISVA workforce is highly educated, with 46% of ISVAs and 32% of managers educated to degree level. In addition, over a quarter of ISVAs (25%) and 16% of managers hold postgraduate qualifications. This strong academic profile highlights the professionalisation of the role and the depth of expertise ISVAs bring to their work. However, it also raises questions about barriers to entry for those with lived experience or vocational backgrounds.
- 4.8** Workforce stability remains a concern. Nearly 40% of ISVAs have been in their role for less than two years, while 36% of managers fall into the same category. Only 10% of ISVAs have remained in post for more than five years, compared to 24% of managers. The average length of service is three years for ISVAs and five years for managers. These figures suggest challenges around workforce retention, and potential implications for continuity of care for victims/survivors.

Provision of ISVA services

- 4.9** The ISVA Statutory Guidance (2025) emphasises that ISVA services can operate within a variety of organisations. While nearly 90% of ISVA services are currently based in voluntary or charitable organisations, a small number of services are based in universities, Police and NHS services.
- 4.10** Most ISVA services are small to medium in size, typically comprising 5–10 ISVAs (53%). Only a small proportion (2.4%) have teams larger than 20 ISVAs.
- 4.11** The majority of services support a wide spectrum of client groups including women, men, children and young people, LGBTQ+ individuals, marginalised ethnic communities, people with disabilities and/or multiple and complex needs, sex workers, prisoners, military personnel and/or veterans, and those affected by sexual violence in a healthcare or faith-based contexts.

- 4.12** The ISVA Statutory Guidance (2025) also highlights the needs for ISVAs to collaborate with specialist services, including 'by and for' organisations – those led by and for specific communities to ensure that ISVA services are inclusive, culturally competent and tailored to the diverse needs of the victims/survivors they support.

Strengths and opportunities

- 4.13** ISVA services demonstrate growing inclusivity by reaching a broad and diverse range of client groups. While workforce diversity remains an area for improvement, the sector's expanding partnerships with community-led and 'by and for' organisations is a promising step. These collaborations are key to providing safe, culturally competent support to the lived experiences of those accessing the service. This approach not only strengthens trust and engagement, but also helps to reduce barriers to accessing justice and recovery for all victims/survivors.

Training and continued professional development

- 4.14** The ISVA Statutory Guidance (2025) sets out clear expectations for ISVA training to ensure support is safe, high-quality, and victim-centred. The Guidance states that ISVAs “should receive specialist training so they have the right skills and knowledge to support victims. This involves undertaking a Level 3 regulated qualification at a minimum, which is relevant to their work supporting victims of sexual violence and sexual abuse”.
- 4.15** Critically, the ISVA Statutory Guidance (2025) highlights the importance of specialist training that enables ISVAs to support clients with a range of specific needs. This includes training in supporting children and young people, and additional, specialised training to help ISVAs provide more specialist support to those with specific needs such as survivors who are older, disabled, male, or from the LGBTQ+ community.
- 4.16** Conducting effective risk and needs assessments is central to the ISVA role, enabling the development of tailored support plans that consider individual factors such as age, disability, ethnicity, gender identity, sexual orientation, and mental health. Therefore, it is important that ISVAs must be able to identify both immediate and long-term risks, adapt support accordingly, and work in partnership with other agencies to ensure a coordinated, trauma-informed response. The ability to tailor support plans through culturally competent and intersectional practice is central to delivering meaningful support to victims/survivors in a way that respects their unique experiences and needs.
- 4.17** The ISVA Statutory Guidance (2025) also stipulates that initial training should be supplemented by ongoing and continued professional development to help ISVAs maintain their competence and adapt to emerging best practices.

ISVA training and continued professional development

- 4.18** The survey results show that 87% of ISVA respondents have completed their initial ISVA training, with an additional 7% currently booked on to training but yet to complete it.
- 4.19** Amongst managers, 88% reported completing specific management training, reflecting a strong uptake of leadership development.
- 4.20** LimeCulture was identified as the predominant provider of ISVA training by respondents, indicating our continued central role in setting high training standards for the sector.
- 4.21** Although the ISVA Statutory Guidance (2025) recognises the importance of additional specialist training for supporting particular client groups, the survey results highlight a significant training gap: more than 50% of ISVAs are supporting specific client groups without having received targeted training to understand and meet their unique needs. This training gap is particularly pronounced in supporting marginalised ethnic groups, people from the LGBTQ+ community, individuals with learning disabilities or multiple/complex needs, and those in hospital, prison, or military settings.

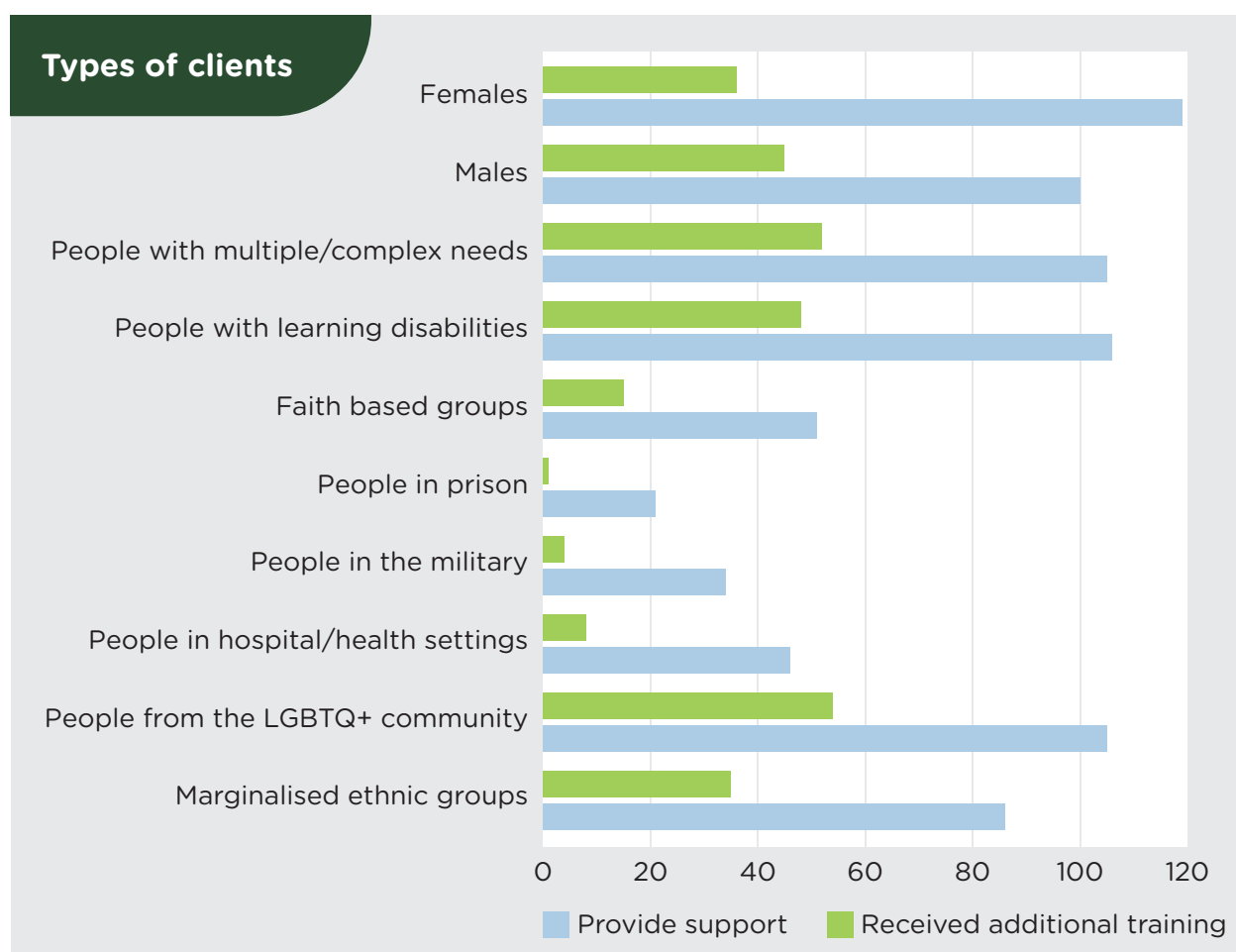


Figure 2: Graph to show client groups supported vs training received by ISVAs

- 4.22** Refresher training remains an area of concern. Among ISVAs who had been in post for over three years, 32% reported not having completed any refresher training, while 10% expressed interest but had not yet attended. Only 12% had booked or planned to attend such training. These findings highlight the need for better access to, and encouragement of, refresher training to ensure ISVAs remain up to date with evolving practices, guidance, and developments within the justice system.
- 4.23** The survey showed that Continued Professional Development (CPD) training is highly valued by service leadership – 95% of ISVA managers stated it is essential for both staff development and maintaining service quality. Around 90% of managers reported that their staff had access to both internal and external training, and over 85% actively encouraged staff to identify and pursue their own training interests. These interests are typically reviewed during supervision or annual appraisals and are tracked through development plans or internal training matrices.
- 4.24** While 88% of ISVA respondents reported they have accessed some form of CPD training in the past year, this was partly due to the increased availability of funded training made possible through the IDVA/ISVA Training and Infrastructure Support Grant funding (2024/2025). However, this central funding allocation is no longer proposed to continue, highlighting concerns about future access to CPD training for ISVAs. Among ISVAs, 90% accessed free external training, 78% participated in internal training, and only 38% engaged in paid external CPD.
- 4.25** ISVAs expressed a strong desire for structured, ongoing CPD that covers both specialist client groups and broader systemic knowledge, such as legal processes and trauma-informed practice. However, many reported gaps in training – particularly in areas such as supporting clients with complex needs, including those experiencing mental health crises, individuals who are non-binary, transgender, or neurodivergent, survivors of child sexual exploitation, and those from closed or faith-based communities. Additional training needs highlighted also included working with sexual trauma, self-care, and the prevention of burn-out and vicarious trauma.
- 4.26** Although 95% of respondents reported using a risk and needs assessment tool, only 66% of ISVAs said they had received specific training in how to use it. This discrepancy raises concerns about the consistency and quality of how risk assessments are being utilised, particularly given the complexity of ISVA caseloads and the importance of risk management in safeguarding victims/survivors.

Training and CPD challenges

- 4.27** Continuing professional development opportunities for ISVAs remain inconsistent and frequently underfunded across the sector. CPD plans for the year ahead vary widely: while some ISVAs have no training currently planned – often due to high workloads, limited funding, or forthcoming changes in role, many are actively engaging with free or low-cost opportunities.

- 4.28** Over 90% of managers reported supporting ISVAs in accessing CPD. Some ISVAs pursue formal qualifications, such as the ISVA Development Programme or counselling certifications, while others rely on peer-shared opportunities, ad-hoc CPD, and informal learning. In-house training and sessions with specialist guest speakers are also used to enhance development in some teams. However, tight budgets and limited capacity continue to restrict participation in specialist, paid external training, leading to significant variation in the availability and quality of CPD across services. These constraints have created a reliance on informal learning and internal resources, which vary significantly between services.
- 4.29** Many services struggle to commit to paid external training due to ongoing budget pressures and real-terms funding cuts. As a result, they rely heavily on experiential learning and free or low-cost CPD options. The lack of dedicated training budgets continues to restrict access – particularly when relevant courses come at a cost, leading to significant disparities in professional development opportunities across the sector. Without sustained investment in ISVA training, there is a risk that essential skills and knowledge will remain inconsistent, potentially undermining the quality and consistency of support provided to victims/survivors.

“No training budget”

“I have requested specific training but due to the cost of this we are not able to attend”

- 4.30** Furthermore, ISVAs also reported significant capacity issues that impact their ability to engage in training. High caseloads, large geographical coverage, and competing responsibilities – such as court attendance or multi-agency work, leave limited time for continued professional development. This lack of protected learning time further compounds the challenge of accessing and benefiting from training opportunities.

“None planned as my caseload is too high to complete training at this time”

“I often have to cancel training if client needs come first, such as a trial”

Strengths and opportunities

- 4.31** The ISVA workforce demonstrates a strong and sustained commitment to professional development. The vast majority of ISVAs responding to the survey have completed their initial training, and many services actively support CPD through a combination of internal and external training opportunities, as well as regular appraisals.

- 4.32** Managers overwhelmingly recognise the value of CPD in maintaining high standards of care, and ISVAs are proactive in seeking opportunities to expand their knowledge – often engaging with free or low-cost learning despite significant time, capacity, and funding constraints.
- 4.33** There is significant potential to strengthen the quality and consistency of support through structured, accessible CPD opportunities that support ISVAs to undertake their role. ISVAs have expressed clear interest in training that addresses complex and specific client needs, trauma, and legal processes. Ringfenced CPD funding, allocated personal training budgets and embedding protected time for learning would support fair and consistent access.
- 4.34** Additionally, ensuring ISVAs can attend refresher training would improve confidence and competence across the workforce – ultimately enhancing service quality and outcomes for victims and survivors.

Caseloads and service capacity

- 4.35** The ISVA Statutory Guidance (2025) does not prescribe specific caseload numbers, but it places strong emphasis on the need for ISVA services and managers to ensure workloads are manageable to maintain high-quality, safe support for victims/survivors. While no numerical limits are set, the Guidance advises organisations to actively monitor caseloads to avoid overwhelming staff, which can jeopardise service quality and client safety. It also highlights the importance of regular supervision, ongoing training, and organisational support to help ISVAs manage their responsibilities effectively.
- 4.36** The survey found that ISVAs typically manage caseloads ranging from 30 to 60 clients for full-time staff, though some carry fewer cases due to being new to the role or working part-time. However, survey respondents report that in recent years, caseloads have increased significantly, with over 50% of ISVAs reporting a 20–50% rise in caseloads over the past year. This growth appears to be largely driven by a surge in referrals, delays in the criminal justice system – (particularly court delays), which prevent timely case closures, increasingly complex client needs, and persistent staffing shortages.

“Incoming referrals have been increasing each quarter for over a year, whilst case closures have dropped due to court adjournments etc. This has caused a huge deficit in our demand/capacity, which has led to increased caseloads. As a result, we have experienced a higher number of safeguarding referrals (client complexity), higher staff sickness and burnout, and a reduction in the service we provide to our clients”

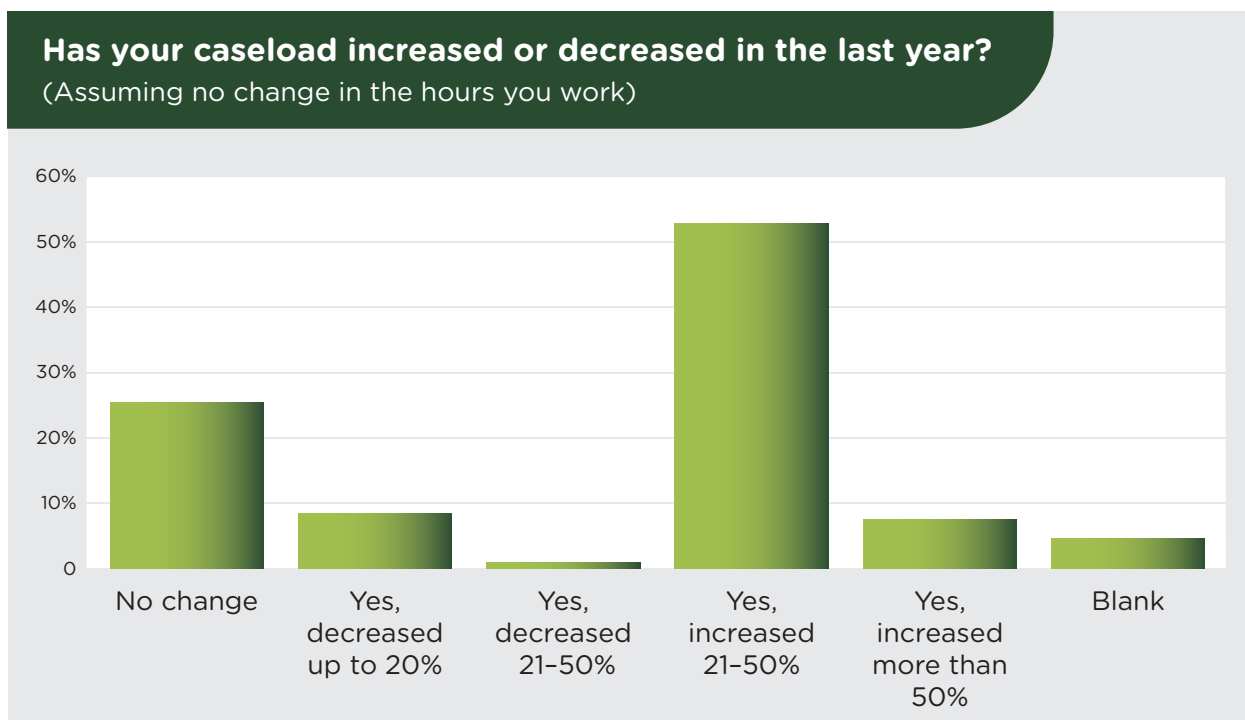


Figure 3: Graph to show the increase in caseloads reported by ISVAs

- 4.37** These growing pressures are having a clear impact on the quality of support ISVAs can provide. 35% percent of respondents indicated that high caseloads are compromising the overall quality of support. Many reported a reduction in their ability to deliver specific services, including court support (30%), attendance at multi-agency meetings (48%), and the provision of emotional support (58%). Both ISVAs and their managers pointed to several common factors contributing to these challenges, such as a sharp increase in referrals (75%), large geographical areas requiring extensive travel, more complex and long-term client needs, and a lack of sufficient staffing (52%).
- 4.38** Client contact frequencies also reflect these pressures. 41% percent of ISVAs reported contacting their clients monthly, 12% every six to eight weeks and 16% on a weekly basis. Meanwhile, 67% of managers noted ongoing challenges with meeting initial client contact timeframes, further highlighting the strain on service delivery.
- 4.39** Despite these difficulties, 60% of ISVAs still rated their caseloads as “somewhat manageable.” This was a surprising finding, given the capacity issues frequently cited. However, it appears that many services have already taken steps to adapt to increasing demand and maintain caseload control. According to managers, 65% of services have introduced waiting lists to manage demand, with 17% having closed their waiting lists entirely. In addition, 7% of services have adjusted their access eligibility criteria, and 52% have scaled back or adjusted (limited) the support they offer.

- 4.40** Notably, 81% of managers stated that without these adaptations, the consequences would have been severe – including reduced service quality, significant delays, or gaps in victim/survivor support, and even unsafe or ineffective practice. These findings underline the urgent need for sustained investment and structural support to ensure ISVAs can continue to meet the needs of victims/survivors effectively and safely.

Understanding the impact of high caseloads

- 4.41** ISVAs consistently describe how high caseloads prevent them from delivering the quality of support clients need, particularly to children/young people and those with complex needs. The sheer volume often forces ISVAs to prioritise basic administration and crisis responses over consistent, quality care.

**“I am no longer able to offer outreach sessions...
now I can only offer phone calls/video calls/messaging”**

**“Due to caseloads the support has been reduced so much we are even
asked to try not to go to court with clients... I feel passionately about
delivering a high standard of service, but I don’t have capacity”**

Inconsistent and infrequent contact

- 4.42** ISVAs report that high caseloads, time constraints, and large geographical areas mean victims/survivors often receive support on an inconsistent basis – this can lead to disengagement and risks of not meeting victims/survivors emotional and/or safeguarding needs.

**“It is virtually impossible to manage a caseload of 70 children...
my clients go months without contact... emotional support is rare”**

**“I would like to see my clients monthly... it’s now not possible
some clients get seen every 2–3 months... it feels like I’m letting
my clients down”**

Emotional toll and risk of burn-out

- 4.43** Burnout and poor mental health were cited by 75% of ISVAs, with increased staff absence and departures due to unmanageable workloads emerging as a consistent theme across both surveys. ISVAs feel they are constantly under pressure and often express guilt, anxiety, and frustration due to their inability to support victims/survivors as much as they would like. This emotional strain contributes to feelings of burn-out and disconnection from their role.

**“I constantly feel bad at my job and that I can’t give people the
support that they need”**

“I feel afraid that I will miss something important for my clients, despite being organised within my working day, there are so many things required of me by each client that I fear I may fail them due to so much pressure”

Caseload numbers don't reflect case complexity

- 4.44** Basic caseload numbers do not reflect the level of complexity, risk, or intensity of support required. High-risk clients, outreach cases, children and young people, and those needing multi-agency involvement demand significantly more time and resource to support effectively.

“I'm not able to give everybody the same level of service. Complex clients require more support. Also, high caseload contributes to burn out which then impacts level of service I feel able to offer. I'm not able to check in as much with clients or complete as regular updates to risk assessments”

“My clients all have complex needs and require complex support. If my caseload is too high, I cannot provide enough support/good quality support to all my allocations and things start getting missed”

Impact on multi-agency work and system coordination

- 4.45** Respondents reported that large caseloads limit their ability to attend multi-agency meetings and engage meaningfully with other professionals – a critical aspect of safeguarding clients.

“I'm still sometimes unable to join social care/multi-agency meetings due to high caseloads”

- 4.46** Ultimately, ISVAs are reporting rising referral rates without staff increases, leading to reduced service quality and growing professional strain. Time is consumed by administration, travel, and urgent safeguarding, leaving limited time for holistic support. Many reported feeling overwhelmed, under-supported, and fearing they are letting down clients or missing critical needs.

“We've undertaken everything we can think of, the service has been cut back to its bare bones. It is really sad to think, that due to capacity we may have to move back into the shadows, and not be front and centre advocating for, and supporting clients”

Strengths and opportunities

- 4.47** It is clear from the survey that ISVA services are facing growing pressures due to increased referrals, high caseloads, staffing shortages, and inconsistent national standards. These challenges are significant and widespread, contributing to burn-out, vicarious trauma, and the loss of experienced staff, which ultimately compromises the quality and continuity of support for victims/survivors.
- 4.48** A key challenge is the lack of national consistency around caseload sizes, which vary significantly across services and regions. Without clear benchmarks, workforce planning becomes difficult, and ISVAs are often left trying to meet complex client needs with insufficient time and resources. While the Statutory Guidance avoids setting maximum caseloads, it appropriately emphasises that capacity should reflect the intensity and complexity of each case – a stance that aligns with LimeCulture’s longstanding approach.
- 4.49** To address these challenges, services and stakeholders have identified several practical, evidence-informed solutions to mitigate and manage caseloads:
- **Structured triaging and risk assessment tools:** such as RAG (Red-Amber-Green) traffic light systems, are effective in helping services prioritise caseloads according to the level of client risk and the urgency of support required.
 - **Regular case reviews:** Ideally conducted every six weeks, promote timely case closures, help reinforce professional boundaries, and prevent cases from drifting without contact or progress.
 - **The inclusion of non-case-holding roles:** Such as administrators or triage coordinators, enables ISVAs to concentrate on their specialist, client-facing work by significantly reducing the administrative burden.
 - **Flexible working arrangements:** Including the option for remote support—where appropriate—can enhance staff efficiency and improve access for clients who may find in-person attendance challenging. Technology was recognised as a valuable tool for increasing accessibility, particularly for those facing barriers to attending face-to-face sessions.
 - **Clear policies and procedures:** for managing Did Not Attend (DNAs) and signposting inappropriate referrals help ensure that limited ISVA time is preserved for clients who are actively engaged with support.
 - **Temporary case holds:** Implemented with informed consent from clients who may be awaiting other outcomes or in receipt of other support, provides short-term relief to services under extreme pressure without withdrawing ISVA support entirely.
 - **Increased collaboration:** between local services including training, tools, shared resources, and best practice to enhance resilience across regions and reduce the duplication of effort.
 - **Staffing support:** Providing emotional support to ISVAs through regular clinical supervision is vital in mitigating the effects of vicarious trauma and reducing the risk of staff burn-out (see 4.6).

- **Accessible support:** To ensure continued quality of care, ISVAs and ISVA managers emphasised the need for flexible, accessible support that addresses the varied needs of victims/survivors. Offering drop-in sessions and online communication tools can improve engagement at different stages of support.

ISVA data set and feedback

- 4.50** Despite the ongoing recognition of the critical role that ISVAs play in supporting victims/survivors, the absence of standardised data collection presents a significant barrier to assessing service accessibility, effectiveness, and overall impact information. Currently, services collect and report data in varied formats, making it difficult to draw meaningful comparisons or demonstrate consistent outcomes across regions.
- 4.51** This inconsistency hampers the ability to evaluate whether services are meeting the needs of diverse communities or identify gaps in provision. It also restricts insights into the long-term outcomes of ISVA support, such as engagement with the criminal justice system or improvements in safety and wellbeing.
- 4.52** For commissioners, this lack of robust, comparable data presents real challenges in demonstrating value for money. In a climate of heightened scrutiny and budget pressures, the ability to quantify impact and efficiency is increasingly necessary to secure and sustain funding.
- 4.53** Without reliable metrics on performance, case throughput, or victim/survivor outcomes, services can struggle to evidence their effectiveness or justify investment. Moreover, gaps in data hinder the development of a clear national picture of provision, preventing coordinated planning and investment at a system-wide level.

Strengths and opportunities

- 4.54** Feedback from ISVA managers and commissioners has repeatedly highlighted the potential benefits of introducing a Minimum Data Set (MDS). Managers' report that such a tool would enhance case management by enabling more consistent tracking of client journeys, risk levels, and outcomes. Commissioners have expressed that a MDS would allow for more confident benchmarking, improved commissioning decisions, and better strategic oversight. By providing a shared foundation for reporting, it would also support transparency, accountability, and collaborative learning between services.
- 4.55** The introduction of a MDS would improve monitoring and reporting and support continuous service improvement. It would provide a clearer understanding of what works, for whom, and in what contexts – enabling services to be more responsive to local needs while contributing to a more coherent national strategy for ISVA provision. In short, a MDS is a critical step toward securing the sustainability, quality, and visibility of ISVA services in an increasingly client outcomes-focused environment.

- 4.56** It is important to note that while the Statutory Guidance provides valuable clarity on the role and responsibilities of ISVAs, it does not address the collection of data, outcome measurement, or client feedback. These areas, however, have been central to the development and implementation of the Quality Standards for ISVA Services.

Supervision for ISVAs

- 4.57** The Statutory Guidance (2025) outlines clear expectations for both management and clinical supervision to ensure effective support for ISVAs and the victims/survivors they support.
- 4.58** The Statutory Guidance states that “management supervision should be provided by a senior practitioner or ISVA manager who should provide oversight of their caseload, development, and wellbeing. Appropriate support and supervision are important for ensuring that ISVAs feel safe and supported in delivering this challenging role, and that victims/survivors receive a consistent and high-quality service. ISVAs should be feel confident to raise concerns with their line managers or via the organisation’s whistleblowing policy”.
- 4.59** Clinical supervision is a distinct process from line management, providing ISVAs with a safe, reflective space to explore casework and its emotional impact. It supports their wellbeing, helps manage stress, prevents burnout, and identifies signs of vicarious trauma. Through this reflective practice, ISVAs can gain new insights, enhance safe and effective support for victims/survivors, and identify ongoing professional development needs.
- 4.60** The Statutory Guidance states clinical supervision “can be individual or group supervision and should be at least quarterly on a mandatory or optout basis. Best practice would see this delivered by an external provider to ensure a separation between the confidential relationship and management structures”.
- 4.61** Supervision is a cornerstone of safe and sustainable ISVA practice, supervisory structures are essential for maintaining professional standards, supporting ISVA wellbeing, and ensuring the delivery of effective services to victims/survivors.
- 4.62** Data from the ISVA survey affirms supervision is of critical importance. A significant majority of ISVAs (97%), reported accessing internal line management supervision, while 90% accessed clinical supervision. Of those receiving clinical supervision, 67% accessed it externally and 30% internally, with 80% engaging with it every 4–8 weeks. However, a small proportion of respondents remain without consistent access to clinical supervision: 4% reported that clinical supervision was unavailable in their service, 4% opted not to access it, and another 4% received it only “as and when” needed.

- 4.63** Clinical supervision is widely regarded as crucial to the ISVA role, with over 70% of ISVAs describing it as essential for managing stress, maintaining mental health, and sustaining their work long-term. It was consistently described as “vital,” “essential” and a “lifeline” – a reflective space that supports emotional processing and enhances self-awareness. As one ISVA explained:

“Clinical supervision is absolutely essential as it helps me cope with the emotional toll of being an ISVA. I feel free to express my worries and concerns and it allows me to reflect on my practice in a safe space”

- 4.64** Despite its value, only 30% of ISVAs felt the clinical supervision provided was specific to their ISVA role. This raises significant concerns, as supervision lacking relevance may reduce its perceived value, leaving ISVAs frustrated or disengaged—particularly when high caseloads limit their time and capacity. Many ISVAs emphasised the importance and value of having supervisors with direct experience of the ISVA role, citing the value of shared understanding and contextual insight.

- 4.65** Concerns were also raised about internal clinical supervision, particularly regarding impartiality and confidentiality:

“I would prefer to have external clinical supervision as at times my clinical supervisor has displayed biased thoughts as she works here as a counsellor”

- 4.66** Furthermore, some respondents described their supervision as inconsistent, infrequent, or poorly structured. When supervision is limited to group formats or delivered irregularly, it risks becoming ineffective. Some respondents noted difficulty in preparing for sessions or questioned the usefulness of supervision amid overwhelming workloads:

“I don’t have adequate time to prepare for it and never really know what to bring. Often, I’d rather spend the time getting on with my work.”

- 4.67** The survey showed that peer support and reflective networks remain underutilised, with just 55% of ISVAs reported accessing some form of professional peer support, and only 24% of ISVAs having engaged in reflective practice.
- 4.68** Notably, 55% of ISVAs reported that they do not attend any network meetings with their professional peers, despite 95% agreeing that such spaces could be beneficial for sharing knowledge, discussing challenges, and reducing professional isolation.
- 4.69** These insights point to a critical concern; the absence of regular, structured, and high-quality supervision specific to the ISVA role poses risks not only to ethical and effective client care but also to the wellbeing and retention of ISVAs.

Strengths and opportunities

- 4.70** There is strong agreement across all data that both clinical and managerial supervision are highly valuable to ISVAs. Supervision supports emotional resilience, ethical practice, and professional development.
- 4.71** The LimeCulture Quality Standards for ISVA Services recommend ISVAs to have access to regular clinical supervision, of no less than 1.5 hours every 4-6 weeks⁴, recognising the emotionally demanding nature of the role. Given the intensity of the work and the vulnerability of clients, high-quality, accessible, and role-specific supervision should be a core component of ISVA service delivery.
- 4.72** There is a clear need for further clarity around the structure and content of clinical supervision to ensure it effectively meets the unique demands of the ISVA role. Without this clarity, the benefits of supervision may be diminished, particularly when it lacks relevance, consistency, or psychological safety. Establishing a clear, structured framework for supervision—tailored to the ISVA role—will be key to ensuring that support remains both meaningful and impactful.
- 4.73** ISVAs strongly supported the development of national and regional forums and networks specific and relevant to their role. These platforms offer valuable opportunities to share best practices, solve common challenges, and coordinate responses to wider issues affecting victims/survivors. ISVA-specific forums would help to ensure consistency in service delivery through the sharing of positive practice developments and encourages innovation in victim/survivor-centered care.

Emotional support for clients

- 4.74** The ISVA Statutory Guidance (2025) defines the role of an ISVA as providing “specialist, victim-centred emotional and practical support to victims.” This support should be trauma-informed, non-judgmental, and tailored to each victim’s individual needs. While the Guidance offers further detail and examples concerning the delivery of practical support, it provides little clarity on what constitutes emotional support.
- 4.75** The survey found ISVAs employ a wide range of emotional support strategies in their roles, with several approaches consistently used across the workforce. The most frequently reported methods include providing active listening and regular check-ins (98%), emotionally preparing victim/survivors for justice interventions (98%), validating experiences and emotions (96%), challenging myths and stereotypes (94%), encouraging self-compassion and recovery (95%), and empowering decision-making and autonomy (89%). A significant proportion (78%) also reported offering trauma-focused coping strategies.

4 Applies to ISVAs working full-time.

- 4.76** However, the survey found that the provision of psychoeducation is far more inconsistently used by ISVAs. Only 48% of respondents said they offer trauma psychoeducation. Notably, the survey responses reveal that access to training and confidence in delivering such interventions varies widely.
- 4.77** While some ISVAs reported feeling confident to deliver emotional support, there is a clear disparity when it comes to more specialised approaches. Among those offering trauma-focused coping strategies, a substantial number (over 50%) reported doing so without formal training, instead relying on experience from previous roles, peer support, or internal resources. This lack of structured learning has led many to feel unsure and lacking in confidence. Significantly, only 30% of ISVAs reported feeling confident or very confident delivering trauma-focused emotional support. Moreover, some ISVAs described feeling out of their depth, often describing themselves as “winging it.”

“I have had no training, and I feel like I am winging emotional support all the time, and when my basic strategies don’t work I am unsure what to do”

“Limited specific training, moderately confident but don’t feel I can offer emotional support at the level they need”

“Waiting lists for therapy and eligibility being stricter means we pick up more emotional support needs, despite not being as qualified”

- 4.78** Time constraints and unclear role boundaries appear to further contribute to the inconsistency around the provision of emotional support. Many ISVAs highlighted difficulties delivering emotional support due to high caseloads and limited session time, with some only able to offer brief conversations or signposting to resources. Several ISVAs reported that their services discourage or even prohibit ISVAs from providing interventions such as psychoeducation, grounding or breathwork, deeming it to be therapeutic, reinforcing a separation between practical and emotional support.
- 4.79** In summary, the survey found that while foundational emotional support practices are generally consistently delivered by ISVAs, the availability and confidence to provide more specialist trauma-focused interventions—such as psychoeducation and coping strategies for emotional dysregulation remains uneven. This inconsistency appears to stem largely from gaps in training, varying personal experience and confidence, time limitations, and differing interpretations of the emotional support element of the ISVA role and professional boundaries across services.
- 4.80** Crucially, the absence of any official guidance or definition of what constitutes as ‘emotional support’ contributes significantly to this ambiguity, leading to widespread inconsistencies in both the scope and delivery of trauma-focused emotional support across the ISVA workforce.

Strengths and opportunities

- 4.81** ISVAs consistently deliver foundational emotional support rooted in empathy, validation, and empowerment. Strategies such as active listening, myth-challenging, and autonomy-building are widely used and recognised as essential to trauma-informed practice.
- 4.82** ISVAs show strong relational skills and a clear commitment to supporting the emotional recovery of victims/survivors, even under high caseload pressures. Their ability to build trusting relationships is a key strength that enhances engagement, promotes resilience, and builds survivor confidence throughout the support journey.
- 4.83** There is a clear opportunity to improve clarity, confidence, and consistency in the understanding and delivery of emotional support provided by ISVAs. ISVAs have requested clearer guidance and role-specific training—particularly in trauma-focused interventions such as psychoeducation and emotional regulation. As such, national guidance on the emotional support component of the ISVA role, alongside accessible training, would strengthen ISVA confidence, enhance national consistency, and help avoid role ambiguity. This would not only protect professional and evidential boundaries but also improve the quality and depth of emotional support for victims/survivors – many of whom routinely face long waits for mental health and therapeutic services.
- 4.84** It is clear; strengthening the ISVA role, supporting them to deliver appropriate, trauma-informed emotional support will help to keep victims/survivors safe, improve coping strategies, and ensure earlier intervention in periods of emotional distress or dysregulation.

ISVA motivation and wellbeing

- 4.85** Many ISVA respondents shared that they were drawn to the ISVA role by a powerful mix of personal experience, a commitment to justice, and a desire to offer compassionate, trauma-informed support.
- 4.86** A strong theme across survey responses was a rejection of impersonal, "tick-box" systems in favour of empathetic, client-centered approaches. For many, their work is deeply personal and often rooted in their own or a loved one's experience of trauma. For example, some ISVAs expressed a strong motivation to be the support they never had, or to give back after finding healing themselves. As one ISVA stated:

"I healed from my own trauma and could use those gifts for the good of others"

- 4.87** ISVAs also described a deep frustration with systemic injustice and a desire to help victims/survivors feel heard, validated, and empowered. Others spoke of simply wanting to be a steady presence for someone in their darkest moments, especially for children and marginalised communities, helping them to reclaim their voice.
- 4.88** For some, ISVA work emerged as a deeper extension of previous roles in social care, domestic abuse services, or crisis response. They viewed the role of an ISVA as a more focused expression of their purpose.
- 4.89** Emotional investment and sense of purpose are central to why ISVAs undertake the role. Many reported finding the work deeply meaningful and rewarding, particularly when they witness positive outcomes or receive appreciation from clients. As one ISVA shared:

“I love this role and it’s been a privilege”

- 4.90** However, the same passion that sustains ISVAs can also become a source of strain. Many reported having overwhelming caseloads, emotional exhaustion, and the toll of repeated trauma exposure.
- 4.91** Sadly, ISVAs reported that burn-out is a common experience, often causing ISVAs to question their ability to continue. One respondent shared;

“The role is extremely demanding, and the vicarious trauma does have an impact”

- 4.92** In addition to emotional fatigue, ISVAs frequently reported feeling guilt and anxiety – worrying about missing something critical or feeling professionally undermined when systemic barriers prevent them from offering the level of support they know is needed.
- 4.93** Many ISVAs reported that they are forced to fill gaps left by other under-resourced services, pushing the boundaries of their role beyond the ISVA scope.
- 4.94** The survey shows that the emotional demands of the ISVA role are significant. High caseloads, vicarious trauma, and the cumulative stress of supporting victims/survivors through prolonged and often distressing justice processes appears to be contributing to burnout.
- 4.95** Without consistent access to supervision, reflective practice, and a supportive organisational culture, ISVAs report feeling emotionally exhausted and undervalued. Staff wellbeing appears to be often overlooked, and the absence of embedded self-care systems places long-term sustainability at risk.

Strengths and opportunities

- 4.96** While the ISVA Statutory Guidance (2025) highlights the importance of addressing wellbeing risks, it does not provide detailed strategies or protocols for mitigating vicarious trauma and burn-out. Instead, it implies the necessity for ISVA services and organisations to implement appropriate support mechanisms, such as supervision, training and access to self-care resources or support.
- 4.97** ISVA and their managers also proposed some practical solutions:
- **Embedding wellbeing in organisational culture:** Wellbeing should be fully embedded within organisational culture by maintaining manageable workloads, fostering open communication, and demonstrating visibly supportive leadership. Managerial empathy was highlighted by ISVAs as a crucial factor in supporting staff wellbeing and creating a work environment where they feel genuinely valued.
 - **Rest, recovery, and team building:** Protected time for rest and recovery – especially after difficult cases or challenging court outcomes is essential to maintain resilience and prevent burn-out. Team-building activities, protected breaks, and wellbeing-focused social time were also valued for boosting morale and fostering a supportive workplace community.
 - **Practical, meaningful support beyond tokenism:** ISVAs stressed the need for practical support that truly meets their needs. Frequently requested measures included:
 - Flexible working policies and fair pay reflecting the emotional labour of the role;
 - Ringfenced budgets for training and wellbeing;
 - Regular wellbeing days and dedicated self-care time during working hours;
 - Comprehensive mental health support packages, including counselling, mental health leave, and wellbeing resources.
 - **Specialist training and supervision:** There was a strong call for vicarious trauma training and specialist supervision tailored to the specific needs of different client groups, to ensure support is relevant and effective.
 - **Safety and support for lone workers:** Lone-working ISVAs particularly emphasised the importance of enhanced safety measures and regular external wellbeing check-ins to reduce the risks associated with working in isolation.
- 4.98** During the early stages of the COVID-19 pandemic, LimeCulture was funded by the Ministry of Justice to provide ‘Coping & Connecting’ online sessions for ISVAs, providing the opportunity for ISVAs from different services to come together in a supportive space to reflect, share experiences, and focus on self-care and resilience. Feedback was overwhelmingly positive, with almost all participants finding the sessions valuable and willing to recommend them to colleagues.

The Criminal Justice System

- 4.99** The ISVA Statutory Guidance (2025) recognises that ISVAs play a pivotal role in supporting victims/survivors of sexual violence throughout their interaction with the criminal justice system. They provide tailored, independent, and impartial support, helping victims/survivors understand and navigate complex processes such as police investigations, court proceedings, and safeguarding measures.
- 4.100** Moreover, research shows that victims/survivors supported by ISVAs are 51% more likely to remain engaged with the justice process, increasing the chances of achieving justice.⁵
- 4.101** However, the survey shows that the criminal justice system remains a major source of frustration for ISVAs. Respondents cite delays, trial adjournments, poor communication, low conviction rates, and a lack of trauma-informed approaches as limiting the effectiveness of ISVA support and can lead to further re-traumatisation. They report that these systemic challenges often leave them, and their clients disillusioned, with many practitioners expressing a sense of powerlessness and emotional burden as they struggle to drive change within an inflexible system. As one ISVA reflected:

“I have no faith in the system and it’s difficult to stay optimistic for victim/survivors”

Strengths and opportunities

- 4.102** While targeted improvements to ISVA services and practice are crucial, survey respondents acknowledged that these efforts alone are insufficient. Developments must be considered within the broader framework of national strategies – such as the Violence Against Women and Girls (VAWG) Strategy, Operation Soteria, and other initiatives aimed at enhancing the criminal justice system’s response to victims/survivors of sexual violence. Structural change at the systemic level is essential to meaningfully address the challenges faced by both ISVAs and the victims/survivors they support.
- 4.103** A key theme from the survey and ISVA discussions was the need to strengthen interactions between ISVAs, victims/survivors, and the criminal justice system. Respondents strongly supported increasing ISVA representation and influence in multi-agency forums, such as RASSO (Rape and Serious Sexual Offences) working groups and court user meetings, to ensure their professional perspectives inform systemic reforms. Additionally, the introduction of a shared digital platform was proposed to enable real-time case updates between ISVAs and criminal justice partners, aiming to reduce administrative burdens and improve communication.

5 Victims’ Commissioner for England and Wales. (2024). Going Above and Beyond: Victim Advocates and the Criminal Justice System. <https://victimscommissioner.org.uk/news/going-above-and-beyond>

- 4.104** There was a strong call for the development of transparent, localised pathways for victim/survivor feedback and complaints, with ISVAs playing a supportive role in navigating these processes. To enhance the effectiveness of their support, respondents recommended specialist training for ISVAs on criminal justice procedures. One such process identified as a priority was Criminal Injuries Compensation Authority (CICA) claims. Respondents emphasised the need for ISVAs to be equipped to guide victims/survivors through the process and advocate for broader CICA reform to ensure the system is fair, accessible, and trauma-informed. Additionally, support is needed to empower ISVAs to challenge poor practice within the system, while maintaining collaborative relationships with partner criminal justice agencies.
- 4.105** ISVAs, managers, and commissioners are aware of the imminent implementation of the Independent Legal Advisors for rape victims, which was part of the Labour Party's Manifesto and is now being implemented by the Ministry of Justice. Many ISVAs and commissioners expressed concerns about this new function and how it will interact with ISVAs and the wider criminal justice system. They emphasised the importance of ensuring that the initiative enhances the provision of advice and support for victims/survivors without creating duplication or complication within an already complex system.

Multi-agency collaboration

- 4.106** The ISVA Statutory Guidance (2025) outlines best practices for interagency working, placing a clear emphasis on victim/survivor centred, trauma-informed approaches. It defines the ISVA role as one grounded in advocacy and safeguarding rather than therapeutic intervention and highlights the importance of proactive communication, shared protocols, and mutual respect between agencies. The guidance recommends ISVA services participate in case coordination meetings, information sharing (within legal and ethical boundaries), and joint training, to ensure cohesive support for victims/survivors. By promoting these collaborative practices, the guidance seeks to embed ISVAs more effectively within the broader network of statutory and voluntary services, thereby improving outcomes for victims/survivors and enhancing professional collaboration across sectors. ISVAs and their managers have welcomed the Guidance as a valuable resource to help address specific multi-agency working challenges where they exist at a local level.
- 4.107** In some areas, poor interagency protocols and siloed working practices continue to limit the effectiveness of coordinated care. ISVAs are sometimes excluded from crucial safeguarding meetings or are consulted too late in the criminal justice process, leading to fragmented support for victims/survivors.
- 4.108** Many external professionals still appear to lack a clear understanding of the role of ISVAs, often mistaking them for counsellors or mental health practitioners. This can lead to inappropriate referrals, misplaced expectations, and blurred boundaries, which can further hinder effective collaboration.

- 4.109** Due to systemic gaps in service provision elsewhere – such as long waiting lists for mental health services or overstretched safeguarding teams – ISVA services are often left to “pick up the slack.” This can result in role creep, with ISVAs informally taking on responsibilities that fall outside their remit, contributing to burn-out and reducing the quality of support they can provide.

Strengths and opportunities

- 4.110** Enhancing collaboration with external partners was highlighted as vital for improving service delivery and impact. Making the ISVA Statutory Guidance widely available and actively sharing it with external stakeholders will have significant benefits. ISVA service managers and commissioners have identified this as a top priority for improving working relationships and building professional recognition. Key benefits include:

- **Improved professional understanding:** Shared guidance reinforces that ISVAs are independent advisers whose primary role is to support victims/survivors through the Criminal Justice System and beyond. Their function is not to provide therapy or replace other specialist services, but to offer informed advocacy and safeguarding support.
- **Clearer role boundaries:** With a shared point of reference, agencies can align expectations, reduce duplication of work, and avoid misunderstandings that strain interagency relationships.
- **Stronger partnerships:** When agencies understand how ISVAs contribute to safeguarding and recovery, they are more likely to include them in joint decision-making, leading to better-coordinated and more holistic support for victims/survivors.
- **Empowerment of ISVA teams:** Clear, shared guidance gives ISVAs a tool to confidently assert the scope and limits of their role, reducing inappropriate demands and supporting professional resilience.

- 4.111** In addition, the following areas were proposed as areas of additional opportunity:

- It was recommended that **regular joint case progression meetings** be established between ISVAs, police, Crown Prosecution Service (CPS), and other relevant statutory partners. These meetings aim to improve case coordination, enhance victim/survivor support throughout the criminal justice process, and facilitate the early identification and resolution of any issues or delays. In addition, **increasing ISVA attendance at multi-agency risk assessment and safeguarding meetings** – such as MARACs (Multi-Agency Risk Assessment Conferences) or MAPPA (Multi-Agency Public Protection Arrangements), was considered vital for ensuring victims/survivors needs are fully considered in wider safeguarding plans.

- Furthermore, the co-location of ISVAs within police stations and CPS offices was proposed as a means to strengthen collaboration, build trust, and improve real-time communication. Co-location arrangements must be carefully considered, particularly in relation to the importance of their independence from criminal justice agencies. However, being physically based within these settings might allow ISVAs to build a better rapport with criminal justice professionals, better understand procedural challenges, and advocate more effectively on behalf of victims/survivors.
- 4.112** The guidance also highlights the importance of raising the profile and visibility of ISVA services. This includes engaging in proactive community outreach, participating in local events, and building relationships with both statutory and non-statutory partners to increase awareness. Greater visibility encourages earlier referrals from professionals and helps victims/survivors feel more confident in accessing support. Establishing a recognisable ISVA presence within the community is seen as essential for building trust and strengthening referral pathways.

Funding and job instability

- 4.113** ISVAs and managers reported that their services continue to face chronic funding insecurity, often operating under short-term contracts or routine procurement processes that offer limited financial stability.
- 4.114** Commissioners highlight that central funding allocations are often fragmented and uncertain, leading to uncertainty, which is passed on to the commissioned services. Funding shortfalls have also resulted in staff cuts and increased workloads, further straining already stretched services.

“Our region is expected to enter a round of re-commissioning over the next 12 months which adds a layer of uncertainty regarding future funding/provision that impacts not only our client group but our staff team”

“Current services have been extended for a period of 12 months, however, there has been no uplift in funding so in reality, due to increases in costs, this is a reduction of funding”

- 4.115** This instability undermines workforce retention, restricts service development, and results in many roles being underpaid despite the high level of responsibility. Practical concerns such as job insecurity, low pay that does not reflect the emotional labour required, and a lack of clear career progression weigh heavily on staff.
- 4.116** The survey asked ISVAs how long they foresee themselves remaining in the role, revealing a varied landscape of commitment and concern. Many ISVAs remain deeply committed to their work despite challenges. Their passion for supporting

victims/survivors continues to drive them, even in the face of systemic obstacles and personal strain. Approximately 30% of respondents expressed a strong intention to stay long-term, with many stating they had no plans to leave, hoped to remain until retirement, or would continue as long as funding allows.

- 4.117** However, 36% were ambivalent, indicating their decision depends on factors such as funding stability, burn-out, work-life balance, and limited opportunities for progression. A significant 33% reported that they are either actively seeking to leave or expect to do so within the next year, voicing concerns about their future without substantial change in addition vicarious trauma, stress, poor pay, lack of organisational support, and funding cuts.

“I would like to stay... but the salary will become very difficult for me in the future”

“I want to stay—but the burnout is making that harder each day. If nothing changes with caseloads, I feel my hands are tied”

- 4.118** Finally, the survey asked ISVAs and ISVA managers to share three words capturing how they feel about the year ahead. Their responses revealed a powerful mix of hope, passion, and motivation – tempered by anxiety, uncertainty, and exhaustion. This reflects a workforce that is deeply committed, yet under immense and growing pressure.
- 4.119** While there is significant concern about the future of ISVA services – driven by funding insecurity, emotional strain, and systemic obstacles, there is also a strong undercurrent of optimism. Many remain determined to meet these challenges with resilience, focusing on growth, sustainability, and continued support for the victims/survivors they serve. It is therefore important that, where possible, wider systemic issues are addressed.

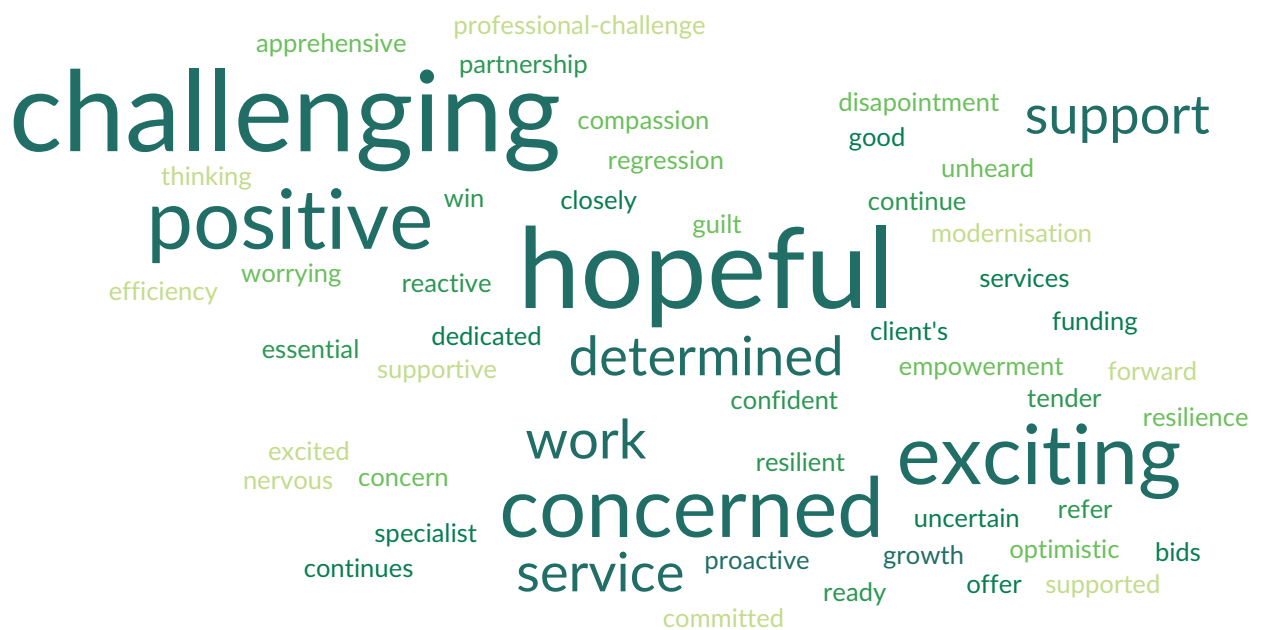


Figure 4: ISVAs share three words capturing how they feel about the year ahead



Figure 5: ISVA managers share three words capturing how they feel about the year ahead

Strengths and opportunities

- 4.120** Despite ongoing funding insecurity, ISVA services have demonstrated remarkable resilience, adaptability, and commitment to sustaining support for victims/survivors. Many have continued to innovate and deliver high-quality support through internal restructuring, strategic prioritisation, and careful resource allocation. ISVA managers and staff have remained focused on service delivery, often absorbing additional responsibilities and managing rising demand without guaranteed long-term funding. While this dedication highlights a deep belief in the value and impact of the ISVA role, it also raises concerns. Managers taking on more than their role requires—though sometimes necessary and undoubtedly admirable—is not a sustainable solution. There is a risk of boundary drift, which, as leaders, can set unrealistic expectations and contribute to burn-out and feelings of helplessness across the team.
- 4.121** There is a critical opportunity to stabilise and strengthen the ISVA workforce through longer-term, sustainable funding models. Multi-year commissioning, inflation-linked funding uplifts, and the inclusion of workforce development and wellbeing costs included within commissioning frameworks would significantly improve retention and service quality. Additionally, establishing clear pay structures and career progression pathways within services could help retain experienced staff and ensure that the complexity of the role is appropriately recognised and rewarded.

5 KEY RECOMMENDATIONS

- 5.1** This report highlights the expertise, resilience, and ongoing commitment of the ISVA workforce. However, this vital workforce is increasingly under threat due to systemic underinvestment, growing demand and shifting expectations.
- 5.2** The following recommendations, based on the survey findings and frontline insights from the National ISVA Conference 2025, aim to support both immediate improvements and longer-term sustainability of ISVA services. Government, Local Commissioners, and ISVA service providers each have a critical role to play in securing the future of ISVA service provision and improving outcomes for victims/survivors of sexual violence.

Key recommendations for government

1. Provide sustainable, multi-year funding for ISVA services

The Government should commit to long-term, multi-year funding for ISVA services to ensure stable, equitable delivery across all regions. Short-term and fragmented funding cycles undermine planning, service continuity, and workforce retention.

Sustainable funding will:

- Enable consistent access to high-quality ISVA support regardless of geography.
- Allow services to plan, innovate, and improve over time.
- Support workforce stability through secure employment and career progression.

2. Invest in National ISVA infrastructure to support sector-wide development

The Government should prioritise investment in national infrastructure to strengthen ISVA provision across the country. This includes support for training, professional networks, operational tools, and systems that enable quality and consistency.

Infrastructure investment will:

- Support universal access to high-quality, trauma-informed care.
- Promote shared learning and continuous improvement across the sector.
- Strengthen the foundation for a sustainable and professional ISVA workforce.

3. Create a national ISVA service specification to support consistent local commissioning

The Government should develop a national ISVA service specification to support consistent, high-quality commissioning across regions. A unified specification will ensure all victims/survivors receive appropriate support from an ISVA regardless of where they live. The specification should also be capable of being adapted to reflect local needs and context, ensuring services remain relevant and responsive across different communities.

A national service specification will:

- Provide a clear framework for local commissioners to benchmark quality and delivery.
- Reduce geographic disparities in ISVA support.
- Enable performance monitoring and drive service improvements across the sector.

4. Support the development of a national minimum data set for ISVA services

The Government should support the development and implementation of a national Minimum Data Set (MDS) to ensure consistent and high-quality data collection across ISVA services. This will provide a stronger evidence base for policy and practice.

A national MDS will:

- Enable transparent monitoring of service quality and impact.
- Inform evidence-based commissioning and policy decision.
- Promote national consistency and equitable access to ISVA services.

5. Ensure ISVAs are involved in criminal justice reform

The Government should embed ISVA expertise in the design, delivery, and evaluation of criminal justice reforms relating to sexual offences. ISVAs provide essential insight from frontline experience and trauma-informed practice.

ISVA involvement in reform will:

- Ensure changes reflect the needs and experiences of victims/survivors.
- Strengthen cross-sector collaboration and trust in the justice system.
- Promote accessible, empathetic, and survivor-centred legal processes.

Key recommendations for local commissioners

1. Commission ISVA services that meet National Quality Standards

Local Commissioners should prioritise the commissioning of ISVA services that meet the LimeCulture ISVA Service Quality Standards to ensure victims/survivors consistently receive high-quality, trauma-informed support.

Commissioning against the nationally recognised Quality Standards for ISVA Services provides a clear benchmark for quality and ensures services are safe and professional.

Commissioning to these Quality Standard will:

- Ensure consistent and equitable service provision across local areas.
- Reinforce professional governance, supervision, and professional practices.
- Support long-term service development through accountability and continuous improvement.

2. Enable effective caseload management that protects quality and workforce wellbeing

Commissioners should work with their providers to ensure ISVAs have manageable, realistic caseloads that reflect the complexity and intensity of their work. This requires investment in systems, workforce planning, and a shared understanding of ISVA workload drivers.

Effective caseload management will:

- Protect the quality and scope of support provided to victims/survivors.
- Support ISVA wellbeing and job retention in a high-demand sector.
- Enable data-informed service planning based on real client needs and trends.

3. Invest in local ISVA infrastructure to drive quality and innovation

Local Commissioners should ensure that commissioning of ISVA services includes adequate funding for infrastructure to support the development of ISVA services over time. This includes funding for training and CPD, supervision, data collection systems, quality assurance, and innovation.

Investment in infrastructure will:

- Strengthen the capacity of local providers to deliver safe, effective services.
- Support the professionalisation and sustainability of the ISVA workforce.
- Enable innovation in response to changing survivor needs and local contexts.

4. Promote ISVA leadership in multi-agency systems

Commissioners should facilitate the representation of ISVA service leaders in key multiagency forums and raise awareness of their statutory role across local systems. This includes embedding the ISVA Statutory Guidance (2025) and actively promoting the ISVA service participation in safeguarding and criminal justice partnerships.

Empowering ISVA services within local systems will:

- Enhance coordination and consistency in the response to sexual violence.
- Ensure the experience of ISVA services are embedded in safeguarding and local service provision.
- Promote early intervention, improved outcomes, and appropriate referral pathways.

5. Embed a data-driven and victim/survivor-centred approach to service monitoring

Commissioners should implement robust monitoring frameworks that captures key data from ISVA services (e.g., referrals, service uptake and engagement, client risk and need levels, outcomes) and alongside quantitative and qualitative feedback from victims/survivors who have engaged with the ISVA service.

Monitoring should be transparent, meaningful, and used to drive improvement.

This approach will:

- Provide a strong evidence base for commissioning decisions.
- Enable service benchmarking and performance management.
- Ensure victim/survivors' voices shape ongoing service development and delivery.

Key recommendations for ISVA service providers

1. Collect and use data to drive quality and evidence impact

ISVA services should implement robust systems to collect data on client risk levels, interventions, outcomes, and survivor feedback. A data-driven, victim/survivor centred approach supports accountability, service development, and sustainability.

High-quality data collection will:

- Enable outcome tracking, benchmarking, and improved case management.
- Demonstrate service impact to commissioners and funders.
- Ensure victim/survivor voice shapes service design and continuous improvement.

2. Implement risk and needs led caseload management

Providers should adopt structured caseload management approaches that prioritise risk and needs, complexity, and geographic factors – not volume alone. Regular case reviews are essential to maintain safe and manageable workloads.

Effective caseload planning and allocation will:

- Protect ISVA wellbeing and maintain high standards of support.
- Enable equitable distribution of cases across the workforce.
- Ensure resources are aligned with victim/survivor needs and case complexity and intensity.

3. Prioritise comprehensive training and ongoing professional development

ISVA services should ensure that all ISVAs have access to accredited initial training, regular and ongoing CPD, and refresher training. Opportunities should be consistent, accessible, and designed to meet the evolving needs of diverse client groups.

Investment in training will:

- Equip ISVAs to support victims/survivors with confidence and competence.
- Promote consistency and quality across all service delivery.
- Support a culture of learning, development, and professional excellence.

4. Strengthen the emotional support offer

All ISVAs should be trained and supported to deliver high-quality emotional support as a core part of their role. This includes trauma psychoeducation, coping strategies, and emotional regulation techniques.

A consistent emotional support offer will:

- Ensure all victims/survivors receive trauma-informed, holistic care.
- Reinforce the ISVA role function as both practical and emotional support.
- Build victim/survivor coping and resilience to improve long-term outcomes.

5. Embed structured supervision and wellbeing support

ISVA services should provide regular, high-quality external clinical supervision, alongside reflective practice and peer support. Additional wellbeing measures should include recovery time after court or traumatic case exposure.

Comprehensive supervision and support will:

- Promote staff resilience, job satisfaction, and retention.
- Reduce the risk of burnout for ISVAs undertaking this emotionally demanding role.
- Support long-term sustainability and high-quality service delivery.

6 CONCLUSION AND NEXT STEPS

- 6.1** This report highlights both the strengths and systemic challenges facing the Independent Sexual Violence Adviser workforce and sets out a clear, achievable path forward. It will be shared with key stakeholders – including Ministers, the Ministry of Justice, the Home Office, and Police and Crime Commissioners – to raise awareness of the pressures ISVA services face and promote practical, evidence-based solutions developed by ISVAs and service leaders.
- 6.2** Despite rising demand and increasingly complex caseloads, ISVA services continue to deliver high-quality, trauma-informed support. Their unwavering commitment to victims/survivors is commendable – but it must now be matched by sustainable investment, strategic workforce planning, and structural reform to protect the future of this critical workforce.
- 6.3** LimeCulture is committed to supporting the ISVA service sector and will seek support and funding to deliver the following improvements:
- Development of a national Minimum Data Set (MDS) for ISVA services to support consistent, high-quality data collection.
 - Revision of the Safety and Support (SAS) Assessment Tool, including a tailored children and young person framework which will include updated guidance on caseload and capacity management.
 - Creation of new guidance and training for ISVAs on the delivery of emotional support and stabilisation for their clients.
 - Development of specialist training for Clinical Supervisors who support ISVAs and other non-therapeutic roles.
- 6.4** In addition, LimeCulture will continue to:
- Deliver accredited training and uphold the Quality Standards for ISVA Services and the accompanying Independent Accreditation Programme.
 - Facilitate national networks for ISVAs, ISVA managers, and commissioners to support professional development and shared learning.
 - Advocate for the needs of the ISVA workforce at a national level.
- 6.5** The ISVA Statutory Guidance (2025) offers a renewed opportunity to clarify roles, raise standards, and embed consistent, high-quality practice across all services.
- 6.6** To secure the future of this workforce and improve outcomes for survivors, coordinated action is now essential. This includes:
- Long-term funding commitments to stabilise service delivery.
 - Recognition of the emotional complexity and professionalism of the ISVA role.
 - Ongoing investment in training, supervision, and workforce wellbeing.
- 6.7** With sustained commitment from government, local commissioners, and service providers, real and lasting progress is within reach.

Victims and survivors deserve nothing less.

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