

# SCRUTINY PROJECT – DOMESTIC VIOLENCE

## SUMMARY OF FINDINGS AND RECOMMENDATIONS

*“Domestic violence causes far more pain than the visible marks of bruises and scars. It is devastating to be abused by someone that you love and think loves you in return.”*

### KEY FOCUS

1. The following were identified as areas of focus for the scrutiny investigation into domestic violence:
  - The extent of domestic violence in County Durham (including domestic violence in the BME and LGBT communities and against men)
  - The impact of domestic violence on families and particularly children
  - The extent of abuse of the elderly in County Durham
  - The level of support provided to those victims who seek to flee domestic violence in County Durham
  - The agencies which provide support services and how, where and when they provided
  - How can earlier involvement of agencies be achieved?
  - How can closer working of partner agencies be developed?
  - What arrangements are in place for refuges/housing for those fleeing domestic violence?
  - What Policies and Strategies are in place to support the victims of domestic violence?
  - What is the County Council’s specific role in supporting victims of domestic violence?
  - How can perpetrators of domestic violence be more speedily and effectively dealt with?
  - What work is underway to change attitudes locally in relation to domestic violence?
  - The extent of best practice in the field of domestic violence nationally?
  - Are we achieving value for money through our existing approach?

### KEY MESSAGES

2. Domestic violence is common, but is hidden. Most of us will have someone in our family, or circle of friends who is a victim or perpetrator, but are unlikely to know it. It afflicts people regardless of class, culture, faith, gender, sexual orientation or wealth.
3. Domestic violence is more than just violence perpetrated by men upon women – it includes violence in same-sex and transgendered relationships, violence perpetrated by women against men, abuse of vulnerable older people and the impact of domestic violence upon children and young people.
4. There is a need for greater analysis of the existing domestic violence data to determine trends, areas for action and targeting of resources. There is little statistical information about domestic violence against men, in same sex-relationships, within the BME community and where children are affected.

These areas need to be addressed. Data on elder abuse exists, but recording and analysis needs to be strengthened.

5. LGBT representatives felt there was a lack of awareness and support across agencies dealing with domestic violence about LGBT issues, as well as a lack of understanding in some sections of the LGBT community itself. There is also significant under-reporting of domestic violence – greater publicity and awareness of domestic violence issues could help address this. There were also awareness issues about domestic violence generally and a need for awareness-raising (including within the Council – members and officers, and within schools) was highlighted, including information for members at a local level about domestic violence in their own Divisions.
6. Refuges provide a valuable service to victims fleeing violence, but are often full – demand for places is greater than provision. There is no refuge in Sedgefield Borough (where levels of recorded domestic violence appear to be the highest), although there are a number of “safe” houses in the Borough. “Target hardening” of households, where victims wish to remain in their own home with increased security measures, has proved to be successful, but most funding is time limited and mainstreaming of this type of funding is difficult. There is no specific refuge provision in the County for those from the BME and LGBT communities, for men, or for women with older male children. Provision of floating support for those have been re-housed after leaving home or a refuge is important in enabling them to re-build their lives.
7. Some victims turn to alcohol, prescribed drugs or street drugs because of their experience of domestic violence. Some may have mental health problems. Refuges are not geared towards support for this and whilst there are some services available for drug dependency, the provision of services for alcohol problems is limited. This may require more engagement from the DAAT.
8. Criminal injuries compensation work is offered and undertaken by Victim Support. This is an area of support that has not yet been fully developed, yet offers a significant opportunity for victims to obtain what can sometimes be substantial compensation.
9. The new definition of what constitutes “significant harm” in relation to children who witness domestic violence will have implications for support and resourcing of services for children in need. Domestic Violence Forums and the Victim Support Service have already recognised the need to do more work with children as victims, but there are funding difficulties around this area of development. Other areas identified for more support for children include:
  - Support for young people during domestic violence court proceedings
  - Provision of services such as counselling in non-stigmatising settings (i.e. generic drop in centres)
  - Increased support for children and young people who are victims via mentoring by students
  - Refuges – there are issues of loss and separation when young people move into refuges with a parent/carer and a subsequent need for support for these children
  - A greater say for young people in how services are developed

10. Confidentiality issues – there are issues about health data in particular. Sharing data is essential and there is a need for multi-agency protocols to be developed. The MARACs should help to address this problem.
11. Elder Abuse is an increasingly recognised area of domestic violence which incorporates a wide range of behaviours from, lack of support for the elderly with feeding in hospital, resulting in malnutrition in some patients, to abuse by relatives of finances and assets. It is estimated there is 4-5 times under-reporting of such abuse. There is a need for more rigorous recording and analysis of data, and stronger governance by the Council (including member involvement and support) in its safeguarding role of vulnerable adults. As with LGBT, BME and young people's issues, there is a need to raise awareness about elder abuse.
12. There is a lack of evaluation of the effectiveness of publicity material or media coverage and a need to review where additional information should be targeted – i.e. at young people and information in the LGBT and some "newer" (i.e. Eastern European) BME communities.
13. The importance of continuing financial support for Refugees from the Supporting People Programme
14. Local Authorities should be at the heart of any domestic violence partnerships. The Police, Health, District Councils and particularly the Voluntary Sector have significant roles to play. The County Council also, via its involvement in CDRPs, as lead partner in the LAA, the domestic violence core strategy group, and as provider of support services to children and to adults affected by domestic violence has itself a key role. However, there is a need to champion domestic violence as an issue corporately across the Council and to appoint a lead officer/member(s) to this role.
15. The police and partners need to consider how data about suicides arising from domestic violence is captured and the issue addressed
16. Co-location of staff and inter-agency working such as at Croydon Family Centre results in provision of more holistic services and significantly better provision

## **KEY FINDINGS**

### **What is Domestic Violence?**

17. Domestic Violence is - 'Any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are or have been intimate partners or family members, regardless of gender or sexuality.' Research shows that the incidence of domestic violence is not defined in terms of class, faith, culture or income - it affects all sections of our society. Nor is domestic violence just perpetrated by men upon women, but also includes:
  - Abuse perpetrated by women upon men (and children)

- Abuse between partners in same sex relationships
  - Abuse between siblings or by young people upon their parents
  - Abuse of the elderly
18. Recent research has shown that levels of domestic violence in same sex relationships are at similar levels to those in heterosexual relationships, i.e. about 25%. There is very little data about domestic violence in the BME community or about domestic violence perpetrated towards men in heterosexual relationships.
  19. Domestic violence against vulnerable older people is an issue that is only now being fully recognised – it can be perpetrated not just by family, but also by carers and in institutional settings such as care homes and hospitals.
  20. Children are often the victims of domestic violence – whilst they are less likely to suffer physically, research shows that they are more aware of issues than is often appreciated by parents/carers and can suffer emotionally.
  21. Domestic violence is common, representing 25% of all violent crime. Studies show that one in four women and one in six men will experience domestic violence during their life. It takes many forms including physical, sexual, emotional or financial abuse, and being cut off from family and friends. It can also include forced marriage, genital mutilation and so-called “honour crimes”. Police estimates indicate that nationally they get a call every minute from someone who is a victim of domestic violence. Nationally, domestic violence claims the lives of 2 women a week and there are more repeat victims for domestic violence than for any other crime. Most victims are assaulted 35 times before reporting the matter to the police. Domestic violence costs £23 billion a year nationally.
  22. There were 6508 recorded incidents of domestic violence in County Durham in 2005/06 of which 2316 were repeat victims (repeat victim figures may include 2 or more offences in relation to the same household).

### **Who Supports the Victims of Domestic violence?**

23. For victims of domestic violence, there is a need for:
  - Support to ensure that they and any children are protected and are able to stay in their own home if they so wish, with their friends and family around them; or
  - A place to go to, and help to rebuild their lives for those who need to flee domestic violence and abuse.
24. Tackling domestic violence and supporting victims can require significant multi-agency working.
25. The **police service** is often that which has first contact with the victims (and perpetrators) of domestic violence. Durham Constabulary has introduced a number of new innovations, such as head mounted video cameras to better capture evidence at the scene of domestic incidents with a view to securing more prosecutions.
26. All of the **Crime and Disorder Reduction Partnerships** include tackling domestic violence as a theme within their Crime and Disorder Reduction

Strategies (in the case of Derwentside this is included in the reducing crime section of the Strategy) and have objectives/aims/targets linked to this.

27. One of the most difficult issues confronting those who flee domestic violence is finding accommodation. **Refuges** provide accommodation for women who have experienced violence, threats or abuse from someone who lives with them or used to live with them. There are 4 refuges in County Durham at Durham, Consett, Peterlee and Bishop Auckland. There is no specific refuge in Sedgefield Borough, which has the highest number of incidents of domestic violence, but there are a number of "safe houses." 75% of residents in refuges are children. Most refuges are staffed by women. Key funding for County Durham refuges comes from the national Supporting People programme, administered via the local Supporting People Partnership, as well as housing benefit for residents.
28. There is no specific refuge provision in the County for men, for those fleeing domestic violence from same sex relationships, or for those from BME communities. There may also be age limits on older male children in some refuges.
29. For those who do need re-housing, either when fleeing violence, or after a period of time in a Refuge, there are a number of support services available. **Housing Options officers** in the **District Councils** work closely with housing providers (both social and private landlords) and may also involve workers from local domestic violence forums as part of the support arrangements. Re-housing is only one stage in the process as it is essential to provide floating support for victims who are re-housed to enable them go forward and re-build their lives.
30. **Domestic Violence Forums** provide a range of practical and emotional support systems for women and children affected by domestic violence. This ranges from a listening service/helpline, to giving practical support for those fleeing domestic violence by accompanying women to solicitor's appointments, or accessing appropriate counselling services. The outreach service seeks to meet the individual needs of each woman. Most forums receive the largest number of referrals direct from victims. In East Durham Forum there were 125 referrals from January to mid November 2006. Funding for the Forums across County Durham comes from a variety of sources, much of it external time-limited grant. Members heard that Derwentside Domestic Violence Forum had lost a significant funding stream in 2006.
31. Support for domestic violence victims/witnesses is provided locally by **Victim Support**, an independent national charity which helps people cope with crime. It has a network of local branches across England, Wales and Northern Ireland. In County Durham, there is a Victim Support Community Service with 50 volunteers and 3 outreach workers; and a Witness Service supporting those who appear in court, staffed by 60 volunteers; together with the national support helpline. In the period April to September 2006 domestic violence victims to the Witness Service had risen to 8.7% of all referrals. Referrals came from the police crime management unit, and other agencies, as well as from direct approaches. Both male and female victims were supported.
32. **Health** professionals are often the first point of contact for those who have suffered domestic violence, as they are likely to be admitted more often to

hospital than those who are not abused and to have more prescriptions. For some victims, a healthcare professional may be the only professional person they see who can identify abuse and thus provide a lifeline to the support needed. A person's health records can also play an important role in identifying domestic violence/abuse.

33. The Working Group heard that one of the greatest difficulties was that of sharing information, and there were limitations in what health professionals could do, due to medical confidentiality issues. Much training has been undertaken within the service about the recognition of domestic abuse, and one area of particular note was that, often, domestic abuse started when a woman was pregnant with her first child.
34. Bringing perpetrators of domestic violence to justice is key to ensuring that those who commit offences are punished (and/or receive treatment) and those who might seek to inflict such violence are deterred from so doing. The **Crown Prosecution Service (CPS)** and **Magistrates' Courts** in County Durham (and Darlington) via the Local Criminal Justice Board (Police, Courts Service, CPS, Probation Service, Prison Service and Youth Engagement Service) introduced **Sensitive Issues Courts** in 2005 in County Durham and Darlington, being the first area in the country to do so. Sensitive Issues Courts are Magistrates' Courts, which deal with cases of domestic violence, racist or religious offending and homophobic or transphobic offending.
35. In 2005/06, the first full year after the courts were set up, the number of cases of the 3 types set out above increased from 464 to 817 (a 76% increase). These figures are projected to increase further in 2006/07. The success rate for domestic violence prosecutions has risen to 67% from the 50% set out above, but had fallen back slightly towards the end of 2006, because of victims refusing to give evidence.
36. Following a national review of domestic violence homicides, a number of significant risk factors in relation to domestic violence had been identified. These issues were considered by MARACs (multi agency risk assessment conferences) which were being established at local level involving key partners to consider potential risks against victims of domestic violence.
37. The role of a **MARAC** is to share information between statutory and voluntary agencies, draw up multi-agency action plans; reduce the risks to victims and children and monitor and review cases. Evaluations of the MARAC process have shown that 63% of victims interviewed had not experienced further violence or abuse at the 6 month point; this had fallen to 42% at 12 months. The remaining 58% had called the police earlier and had confidence that the criminal justice system could deliver.
38. The **Children in Need Service** is located within the **Children and Young People's Service** and consists of 1 initial assessment team and 12 locality children teams across the County. The role of the Service is to provide assessment, care planning and reviewing of the most vulnerable children in Durham.
39. The **Local Safeguarding Children Board (LSCB)** also plays an important role. Local Safeguarding Children Boards were established under Section 14(1) of Children Act 2004 and are the key statutory mechanisms for ensuring

that relevant partner organisations co-operate to safeguard and promote the welfare of children in their areas. The County Durham Board comprises representatives from Health, the Police, Children and Family Court Advisory and Support Service (CAFCASS), Connexions, Probation, District Councils, Secure Training Centres, and the Voluntary and Community Sectors. LSCBs have a unique, independent statutory role, which involves:

- Agreeing policies and procedures
  - Monitoring and evaluating
  - Reviewing serious cases
40. Section 120 of the Adoption and Children Act 2002 has amended the definition of “significant harm” in the Children Act 1989 to include: “Impairment of health or development caused by witnessing ill treatment of another”. In terms of domestic violence, this will have a significant impact on caseloads and resources.
41. There is limited information about the numbers of children and young people affected by domestic violence in County Durham. A Wear Valley and Tees Community Safety Partnership Survey in 2003/04 showed children resident in 41% of households where domestic violence was reported, and of these, 61% had witnessed the violence. An Internal Audit of Child Protection Conferences in 2006 had found that out of 30 cases, 14 had involved domestic violence as a key feature (47%), and 11 out of the 30 cases had involved domestic violence **and** physical abuse of children.
42. Domestic violence is often perpetuated through learned behaviour, i.e. boys whose fathers are violent towards their partners are more likely to do this themselves in adulthood. There is currently no specific **CAMHS** provision for young people affected by domestic violence other than in Darlington. There are issues about how CAMHS can equip and support staff in those other agencies and services which deal with children’s domestic violence issues.
43. Training for **Schools** has been provided through a number of events, including ‘Open Door’ Domestic Violence conferences held in March and November 2004 for Secondary schools (provided free) and a Conference for Primary Schools, ‘Opening the Door’ held in September 2005, Direct support in relation to young people’s issues is provided via Pupil Services Officers, Guidance and advice about individual cases, Level 1 Child Protection Training (provided free to schools), a Safeguarding Newsletter posted on the schools’ extranet and local Safeguarding Children’s Board courses.
44. In relation to **Adult and Community Services** role and involvement in relation to elder abuse, 341 cases were referred to the Service between January and December 2006 from a care setting. This is believed to be an underestimate of the true incidents of abuse, because recording systems are not yet robust enough, and there is still a lack of understanding of the safeguarding adults agenda in some services. The elderly population is the most rapidly increasing group and therefore potentially, this is an issue the authority needs to plan for. Adults with learning difficulties also form a significant part of those referred.

## Domestic Violence Plans and Policy

45. There is currently a **County Durham and Darlington Domestic Violence Core Strategy Group** on which a Senior Community Safety Officer represents the County Council (and currently chairs the Group). The group has wide representation from agencies involved in supporting the victims of domestic violence and has now produced a draft Domestic Violence Strategy for County Durham and Darlington. The draft Strategy for 2006/8 sets out a number of key objectives and is underpinned by an Annual Countywide Action Plan. Its aim is to provide a framework to ensure the active contribution of partner agencies in tackling domestic violence and supporting victims.
46. The Senior Community Safety officer has no specific responsibilities in relation to domestic violence as part of her job description, nor is there any one specific officer/member champion or team with domestic violence responsibilities. The approach to date has been to look at domestic violence as a crime and thus responsibility has evolved within the County Council's Community Safety Team in Adult and Community Services
47. The raised profile of domestic violence in recent years has resulted in the development of a number of national policy documents and legislation. Government action on domestic violence is led by an Inter-Ministerial Group on Domestic Violence, set up in 2003, which includes Ministers from key Departments. The Government's strategic approach to tackling domestic violence was set out in the consultation paper "Safety and Justice – The Government's Proposals on Domestic Violence" published in June 2003. This set out three strands for tackling domestic violence based around - prevention, protection, and justice and support for domestic violence victims. The consultation paper formed the basis of the **Domestic Violence, Crime and Victims Act 2004**, the most significant legislation on domestic violence in over 30 years.
48. In 2005 the Government published its first **National Report for Domestic Violence**, containing the framework of the National Delivery Plan, which identified five key outcomes and seven work objectives that would be pursued in 2005/06. The Plan provides direction to local partnerships, agencies and communities on how to protect adult and child victims and bring perpetrators to justice.
49. The County Durham Domestic Abuse Strategy is not a standalone document, but will be co-terminous with the seven **Community Safety Strategies** across County Durham, produced by the Crime and Disorder Reduction Partnerships, in which domestic abuse features as a key strategic priority.
50. Delivery of Domestic Violence Services is measured by a **Best Value Performance Indicator (BVPI) 225** which aims to assess the overall provision and effectiveness of local authority services designed to help victims of domestic violence and to prevent further domestic violence. The BVPI applies to metropolitan authorities, London boroughs and unitary authorities. County Councils are not included. The Government rationale for omission of County Councils from the indicator was because of the complexity of the indicator and the difficulty that their inclusion would cause.



This ignores the role of County Councils in providing services and does not provide any incentive for Counties to drive up performance in this area.

51. The **County Durham LAA** recognises domestic violence as an issue with specific references in the Children and Young People's Block about ensuring that children and young people are safe from domestic violence (Staying Safe 4) and an indicator under SSC1 of the Stronger Safer Communities Block (to reduce crime, to reassure the public reducing fear of crime and anti-social behaviour and to reduce the harm caused by illegal drugs) about increasing the number of reported domestic violence offences that are brought to justice.

## **KEY CONCLUSIONS**

### **Leadership and Awareness**

52. The County Council should identify a lead officer/member (together with appropriate support) to champion domestic violence issues across the Council.
53. The Council needs to consider how it can better promote awareness and understanding of domestic violence by providing development/training opportunities for members and officers, including more information for local members about domestic violence in their own areas.

### **Better Data**

54. The proposals above in relation to development/training/awareness-raising should not overlook the fact that domestic violence is also present at the same levels in same-sex and transgendered relationships, can be perpetrated against men by women, occurs in BME communities and affects children and vulnerable adults. Specific awareness-raising opportunities in these areas should be considered.
55. There is a lack of information about the incidence and nature of domestic violence, particularly in relation to that in the LGBT and BME communities and perpetrated by women against men; the numbers of children and young people affected by it and the extent of vulnerable adults impacted by it. Collection and analysis of data needs to be improved and research undertaken in these areas.

### **Enhanced Partnership Working**

56. Tackling domestic violence in all its forms requires true cross-cutting partnership working with a wide number of agencies involved and a key role played by the voluntary sector at a local level. The Council needs to review its existing role in the partnership bodies such as the Domestic Violence Core Strategy Group, Supporting People Programme, the CDRPs and LAA to consider how it can improve its effectiveness, promote the involvement of under-represented, under-served groups and better serve victims of domestic violence.

## **Improved Support for Victims and Perpetrators**

57. The Council should review its existing engagement mechanisms with service users in relation to the services it provides to support the victims of domestic violence to ensure that service users (including LGBT and BME, young people and vulnerable adults, wherever possible) have the opportunity to shape the development and delivery of services for victims.
58. The Council should consult with partners and consider whether there is a need to develop perpetrator or anger management programmes which are specific to LGBT/BME perpetrators, women perpetrators and young people/carers who are perpetrators.
59. Alcohol and drugs can play a role in the instigation of domestic violence in some incidents. Less well recognised is the over-consumption of alcohol and drugs by the victims of domestic violence which can result. There are issues of support for victims around this issue which may need to be addressed and the attention of the County Durham DAAT Strategic Partnership Board should be drawn to this issue in relation to the role of the DAAT.

## **RECOMMENDATIONS THAT IDENTIFY FINANCIAL IMPLICATIONS**

60. The following might potentially have financial implications:
  - (i) Awareness raising, development/training/publicity and research about domestic violence
  - (ii) Development of specialist perpetrator programmes