

Newcastle JSNA: Domestic Violence November 2008

Where are we now?

Domestic violence is a major public health problem. There is a considerable and growing body of research which highlights the significant impact domestic violence has on the health of adults and children. Domestic violence cuts across all agencies and themes, health, housing, crime children and young people. There are various strategies which include domestic violence, Homelessness, Housing, Supporting People, Children and Young People. The over arching Domestic Violence Reduction strategy is managed by Safe Newcastle, the Crime Disorder Reduction Partnership for Newcastle.

Who's at Risk and Why

In 2005 the Government agreed a core definition of domestic violence as follows

“Any incident of threatening behavior or abuse (psychological, physical, sexual, financial or emotional) between adults who have been intimate partners or family members, regardless of gender or sexuality”.

Government also made explicit that issues such as Forced Marriage, Female Genital Mutilation and “So Called Honour Base Violence” should be encompassed within this definition.

Domestic violence can be experienced by anyone however research firmly ¹ evidences that the majority of domestic violence is abuse of women by men, but domestic violence also occurs in same-sex relationships, in heterosexual relationships when men are abused by women and in caring and other family relationships, for example when grown up children use violence against their parents. Lack of relevant research means that much less is known about these forms of domestic violence.

Domestic violence also affects those people who are not being directly abused. It harms children, damages family relationships and causes friendships to break down. The costs to the survivor and those around them are extensive.

Victims and survivors do not want to be abused, nor do they actively seek out violent partners and people, but perpetrators are sometimes skilled at identifying people who may be vulnerable.

¹ British Crime Survey: England and Wales (2000). London: Home Office
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Domestic violence is experienced differently according to gender, age, ethnicity or race, social class, religion or sexual identity. Societal oppression and discrimination, such as sexism, racism and homophobia make it harder for victims and survivors to protect themselves or get support and therefore make it easier for perpetrators to get away with using violence.

Domestic Violence and Women

Whilst it is difficult to quantify the prevalence of domestic violence for a myriad of reasons it is generally accepted that one in four adult women will experience abuse in their lifetime.

We also know that 70% of domestic violence incidents result in injury (Dodd et al 2004) and two women are murdered every week by their partners or former partners.

The cost of treating physical health of victims of domestic violence (including hospital, GP, ambulance, prescriptions) is £1,220,247.00 which is 3% of the total NHS budget (Walby, 2004).

Evidence suggests it is not only short term physical wellbeing which is affected but also longer term mental issues.

Domestic violence, mental ill health and substance misuse

About half of all women being treated for mental illness will have experienced domestic violence. Statistics reveal abused women are more likely to suffer depression, anxiety and eating disorders. Between 50%-60% of women using mental health services have experienced domestic violence and up to 20% will be experiencing current abuse (D.O.H. 2003). Domestic violence commonly results in self harm and attempted suicide: one third of women attending emergency departments for self harm were domestic violence victims; abused women are five times more likely to attempt suicide (Stark and Flitcroft 1996).

Women who experience domestic violence are 15 times more likely to abuse alcohol. Approximately 45% of perpetrators of domestic violence are under the influence of alcohol. However evidence also suggests that perpetrators are equally likely to abuse their partners when sober. (Stella 2006).

Domestic violence and pregnancy

Domestic violence also has consequences for sexual health with increased rates of unintended pregnancy and termination being identified (Gazmararian et al 2004). Domestic violence has been identified as a key cause of miscarriage or still birth and of maternal death during childbirth. Pregnancy is often a time where domestic violence either begins or intensifies. Lewis et al (2001) identified that 30% of domestic violence starts during pregnancy.

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Links between Child Abuse and Domestic Violence

There is a strong link between child abuse and domestic violence which is now firmly acknowledged and embedded in the Government's approach to safeguarding children. Research demonstrates that children and young people can be negatively affected by domestic violence in all aspects of their lives; however service responses are inconsistent and frequently fail to address children's needs. Statistics show that up to one third of child protection registrations result from children experiencing or witnessing domestic violence. On both a national² and local level, ³we know that serious injury or death occur as a consequence of domestic violence.

The Adoption and Children Act 2002 established that children suffer harm as a result of witnessing violence and abuse. The Children Act 2002 imposes new duties on Local Authorities to ensure local cooperation to improve wellbeing, make arrangements to safeguard children and to improve information sharing.

Links between Adult Abuse and Domestic Violence

There is a strong link between the abuse of vulnerable adults and domestic violence; currently in Newcastle 30% of referrals into Safeguarding procedures are as a direct result of domestic violence. Safeguarding procedures have been utilized successfully to prevent further abuse to victims with additional needs and vulnerabilities and this has included victims of Forced Marriage and women with no recourse to public funds.

Who commits domestic violence?

There is no typical perpetrator. Just as anyone can become a victim of domestic abuse, so perpetrators come from a range of social backgrounds, can be men or women, heterosexual, lesbian or gay. Research shows that most perpetrators of domestic violence are men.

Perpetrators choose to use systematic violence against others because they have learnt that this enables them to maintain their control. Perpetrators make a conscious decision to abuse people; it does not happen because they are out of control or because they are provoked

Facts and Figures

Domestic violence and abuse are hidden crimes taking place within the home. It is endemic within society and the prevalence rate, both locally and nationally, is high. In

² Reder P and Duncan S (1999), Lost innocents. A follow-up study of fatal child abuse. London, Routledge.

³ Part 8 enquiries.

Newcastle there were 5,522 reported incidents of domestic violence between 2007 and 2008. Of these, 1,117 offences were crimed. The repeat victimisation rate is currently recorded as 48%. Domestic violence crimes account for 15% of violent crime. Alcohol is often associated with these incidents.

Domestic violence continues to be under reported, with only 24% of domestic violence incidences reported to the police⁴, although in Newcastle we have a slightly higher reporting rate than in most cities of our size.

Trends

Violent Crime

The Government's action plan⁵ highlighted that approximately 16% of violent incidents are characterised as domestic violence related (Home Office, 2008:13). These offences have fallen substantially since 1995. Domestic violence is particularly harmful because it has an extremely high rate of repeat victimisation, with approximately 42% of victims being victimised more than once (Home Office, 2008:14).

Crime reduction has been a priority of the Government's agenda; traditionally prosecutions resulting from domestic violence crime have been low. The introduction of 'fast tracking' and special court services may have impacted on the number of reported incidents. There was a 15% increase in the number of domestic violence cases being prosecuted in 2006/07 compared with 2005/06, and successful prosecutions rose from 59.7% to 65.2% in the same period (Home Office, 2008:21).

Homelessness

Annually there are a significant number of victims forced to flee their home as a result of domestic violence. Most, but not all of these victims are women, often with children. Domestic violence can often lead to homelessness and repeat homelessness. Communities and Local Government (CLG) reported that between 1997 and 2004 more than 146,000 homeless households were re-housed as a result of domestic violence (Sustainable Communities: Settled homes: Changing Lives, 2005).

The Strategic Housing Service responsible for homelessness within Newcastle reported that during 2007/08 there were 81 homelessness applications resulting from domestic violence. A further 34 homelessness applications were made where violence was reported from an associated person. There were 41 advice cases resulting from

⁴ Walby and Allen (2004), Domestic Violence, Sexual Assault and Stalking: Findings from the British Crime Survey

⁵ Home Office (2008) Saving Lives Reducing Harm Protecting the Public, Action Plan for Protecting the Public 2008/11)

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domestic violence, with a total of 169 domestic violence presentations following violence from a partner.

Women with no recourse to public funds

The Home Office Crime Reduction Strategy recognised victims of domestic violence who are still subject to immigration control. Applications are flagged and given priority consideration by the Immigration & Nationality Department (IND). While applications are being considered by IND, victims of domestic violence still subject to immigration control cannot have access to public funds for the period until the application has been decided.

Women's Aid research report in 2004 (Survey of Domestic Violence Services (England)), funded by the Office of the Deputy Prime Minister, highlighted a rise in the numbers of women fleeing domestic violence who have no resource to public funds due to their insecure immigration status. The report highlighted that 18,569 women and 23,084 children stayed in domestic violence refuges during 2003/04; an increase of nearly 8% from the 2002/3 survey. Of these 368 had no recourse to public funds which is an increase of over 18 % since 2002/03 showing a continuing trend of women experiencing domestic violence who have no recourse to public funds. To date there is no local data available on the extent of this concern in Newcastle however anecdotal reports suggest the problem is growing.

Targets

Historically few targets relating to domestic violence were measured and reported, the emphasis was largely placed upon partnerships and local authorities to set their own priorities. However, in recent years government has implemented targets through Best Value Performance Indicators (BVPI) and more recently in 2008/09 introduced the new Public Service Agreements (PSAs) which are measurable through the National Indicator Set (NIS) and Assessment of Policing and Community Safety (APACS), this has further increased the priority of tackling domestic violence.

Performance

Newcastle launched its first ever domestic violence strategy in 2006. The strategy identified three main priorities with SMART⁶ measures and milestones. The strategy was clearly aligned to the national Best Value Performance Indicator 225. During the strategy period Newcastle's compliance to the actions outlined in this measure increased from 45% to 100% in 2007. This helped lay the foundations for improved services for victims of domestic violence across the city.

Indicators

⁶ A SMART objective is one that is specific, measurable, achievable, relevant and time-bound
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In Autumn 2007, government released its new Public Service Agreements (PSAs) under the 2007 Comprehensive Spending Review. PSA 23 priority action 1 is 'Reduce the most serious violence including tackling serious sexual offences and domestic violence'. There are many NIS contributing towards this PSA, two of which are directly domestic violence related, they are;

- NI 32 – repeat incidents of domestic violence
- NI 34 – domestic violence – murder

In addition the Newcastle Local Area Agreement (LAA) sets out its priorities for the next three years through 35 negotiated priorities. Newcastle recognised the importance of tackling domestic violence and agreed that two linked measurable indicators be included in the 2007/08 LAA which cover the more serious as well as lower level abuse, they are;

LAA Priority objectives	Measured by	Baseline	2008/09 target	2009/10 target	2010/11 target
Reducing violent crime including domestic violence and alcohol related violence	NI 15 Serious violent crime rate (*35 target LAA)	Baseline to be established July 2008 (estimated rate = 0.45)	0.43	0.42	0.40
	NI 20 Assault with injury crime rate (*35 target LAA)	Baseline to be established July 2008 (estimated rate = 9.60)	9.31	9.03	8.76

Discussions are underway to include the directly domestic violence related indicators in its annual refresh.

Local views

A recent audit published by the Community Safety Research Unit (July, 2005) highlighted notable gaps in service provision which need to be urgently addressed. The recommendations identified that:

- i. That a strategic partnership approach was essential to the delivery of improved responses in relation to domestic violence.
- ii. The Newcastle Domestic Violence and Abuse Partnership (NDVAP) needs to establish a consistent approach to supporting victims, raising awareness of services and creating a climate of non tolerance of domestic violence across Newcastle.
- iii. The partnership in conjunction with the NDVAP needs to address the current gaps identified as:
 - Appropriate support for victims, including those within the BME communities
 - Appropriate support for children who witness domestic violence and preventative work in schools and youth groups.

- Measures that challenge perpetrators of domestic violence, including the development of non-court mandated group work programmes.
- Suitable and secure accommodation for victims, primarily women and their children

National and local strategies

Domestic violence now has a high government profile including:

- Home Office National Action Plan
- Domestic Violence, Crime and Victims Act 2004
- Guidance for Homicide Reviews

Domestic violence has local cross party political support and is seen as a priority.

Central Government has delegated a statutory responsibility to Local Authorities via the Crime and Disorder Act 1998 to reduce crime and disorder. As domestic violence accounts for between 16-25% of all violent crime addressing domestic violence is clearly a huge part of this target. This a key part of Central Government strategy and the Home Office domestic violence delivery plan.

The Safer, Stronger Communities Block of the CPA includes domestic violence, as well as Section 17⁷ compliance as key lines of enquiry. Newcastle's negotiation to agree a Local Area Agreement should include domestic violence as an issue which cuts across at least three of the defined blocks.

The Local Government Association in its description of the Tavistock Institute research into domestic violence states that local authorities should be showing leadership around the domestic violence agenda⁸.

Other important factors are the Every Child Matters framework and The Children Act 2004 which firmly establish that domestic violence is a major cause of vulnerability for children and that it has a negative impact on their ability to achieve their full potential. Statistics show that it is common for 75% of children on the child protection register to witness or experience domestic violence.

In order to improve outcomes for children a range of measures will need to be introduced. Evidence and recently published commissioning guidance recommends that effective interventions focus on meeting the needs of children by supporting the non abusive parent (i.e. the victim). This approach is embedded in the Newcastle Domestic Violence Reduction Strategy. In addition, a range of other responses will need to be

⁷ Section 17, Crime and Disorder Act, 1998

⁸ Learning from Domestic Violence Partnerships, an LGA publication

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introduced. The needs of children and young people at risk due to domestic violence should be explicitly addressed within new structures for Children's Services

Current activity and services

Safe Newcastle recognises that we cannot have safe communities while so many people are not safe in their own homes. In September 2006 Newcastle launched its first ever stand-alone Domestic Violence Reduction Strategy; a refresh of the action plan took place in 2008. This document and its associated delivery plan enabled the coordination of services and responses, increasing levels of support to those at greatest risk. Our strategy is organised around 3 central themes: -

Prevention

Prevention of domestic violence is a key concern. In order to achieve this aim the Domestic Violence and Abuse Partnership (DVAP) have: -

- Campaigned city-wide to raise awareness of domestic violence, key message being domestic violence cannot be tolerated and that there are services to assist victims to exit violent relationships
- Worked with Educational Welfare Office providing training to enable staff to recognise and respond to young people at risk due to domestic violence.
- Delivered training to all key agencies to improve core practice – to date 900 professional have received training.

Protection

Robust risk assessment/management plans, delivered on a multi-agency basis, afford the best protection to victims. In order to achieve this aim the DVAP have:-

Developed and implemented MARACS (Multi-Agency Risk Assessment Conferences).

1. The MARAC is a multi-agency group that meets on a fortnightly basis to develop action plans to safeguard victims at high risk of further serious harm or homicide
2. This process ensures an effective community response to Domestic Violence and allows current risk information and a comprehensive assessment of the victim's needs.
3. To be shared; ensuring that they are linked directly to the provision of services for victims, their children and the perpetrator.

To date 13 core agencies have signed up to participate in MARACS. Since November 2007, over 200 of the highest risk victims and their children have received protection via the MARAC process.

Provision

Providing easily accessible services appropriate for the needs of all victims is key to protecting victims. In order to achieve this aim the DVAP have: -

Established Sanctuary Schemes to enable victims to remain in their own homes wherever possible. The Sanctuary Scheme is an innovative approach to both risk and homelessness prevention. Professionally installed security measures allow those experiencing domestic violence to remain in their own accommodation where it is safe to do so, where it is their choice and where the perpetrator no longer lives in the home. Since the development of this service in December 2006, over 100 families have benefited from this intervention.

Developed services for male perpetrators of domestic violence who are committed to addressing their behaviour. DVPP is a service that works with male perpetrators of violence and abuse, their female partners and ex partners and their children who live in Newcastle. The aims of the service are to keep women and children safe through the work with men. The project can be accessed by any man who wants to change his violent behaviour toward female partners.

Coordinated support for women partners and ex partners is provided throughout the whole period that the men attend. Women contribute to the assessment process and are given updates on the man's progress including cross checking whether men are making progress. They can also be supported individually or through group work.

The project accepts stand alone referrals for children age 3-14 years who no longer reside with the perpetrator. Again depending on need the children are offered individual sessions for either non direct play therapy or directive work or group work. the children's service received 82 referrals in its first year from a variety of sources. We currently have 50 children on the register waiting for a service.

Developed Independent Domestic Violence Advocacy (IDVA) Service

IDVAs are trained specialists whose goal is the safety of domestic violence victims. While IDVAs will accept all referrals, their focus is on providing a service to victims at medium to high risk of harm to address their safety needs and help manage the risks that they face. Their medium to high risk remit means that the majority (if not all) of their cases are women victims. IDVAs tend to come in at the point of crisis for a victim ie just after a police call out or Accident and Emergency attendance.

Key elements of an IDVA service

There are a number of elements present within an IDVA service. These are:

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- **Crisis Intervention:** advisors work from the point of crisis with a survivor and offer intensive support to help assure their short and long term safety.
- **Risk:** the service is based on assessment and understanding of risk and its management. IDVAs must be trained to assess risk and respond in a way that is appropriate to the level of risk that the victim is experiencing. IDVAs have to be willing to involve other agencies when the victim or the children of the victim are in danger.
- **Independent:** from both the justice system and local government, in order to focus on safety and not other targets which statutory agencies must bear in mind when providing a service. Victims need support from someone who can give impartial advice on their safety options.

Evidence Base

For specific interventions or services

Value for money and return on investment

Investing in managing high risk domestic violence and long term investment in preventative work is cost effective across all sectors, including employers who lose staff to sickness absence

Based on the population of Newcastle, the costs of domestic violence to services are in total £128,835,800.00.

Breakdown of this figure is as follows:

Services	17,526,300
Criminal Justice	5,729,400
Health Care	6,873,000
Mental Health	991,500
Social Services	1,284,500
Housing and Refuge	890,100
Civic and Legal Costs	1,575,700
Employment	15,053,100
Human Costs	96,256,400

Source: Professor Silvia Walby (Leeds University)

Co-ordinated response to domestic violence

Home Office estimate that if Newcastle refer 400 high risk cases to MARAC each year, there will be a cost saving of approximately 2 million to services as the number of high risk cases reduce.

Sanctuary Scheme

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The Sanctuary Scheme enables victims of domestic violence to remain in their own homes. The average cost of a homeless application in Newcastle due to domestic violence can be up to £6,000.00, the total cost of an average Sanctuary (including support staff and capital cost for security) is £3,000.00 therefore achieving a potential saving of £3, 000.00 per case.

What is this telling us?

What are the key inequalities

Domestic violence cuts across all classes and ethnicities, it also affects men and those in lesbian, gay, bisexual, and transgender (LGBT) relationships. An increase in reporting by all groups is required however some groups have proved consistently to be harder to reach than others, these include:

- BME communities, in particular refugees, asylum seekers, travellers and new immigrants.
- Elders
- Disabled survivors including those with mental health issues
- LGBT survivors
- Substance misusers
- Young people
- Sex workers

Notably whilst there is an acceptance that children are significantly affected by both experiencing and witnessing domestic violence there remains a grave shortage of services for children and young people.

What are the key gaps in knowledge/services?

Improved data collection, evaluation and reporting across all agencies is required.

Early Identification of Domestic Violence

Early identification of domestic violence is vital, by identifying victims at the earliest opportunity problem solving is likely to be more successful. Routine enquiry is fundamental to ensuring a consistent approach to domestic violence. A clear policy of routine enquiry should be in place and agreed by relevant personnel at a sufficiently senior level across the PCT and all health trusts. An effective roll out of training should be in place to support staff to deal with and understand:

- dynamics of abuse
- the effects of abuse on victims and their children

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- risk assessment and risk management
- referral to specialist agencies
- information sharing.

It should be noted that whilst training is key, policies and procedures need to become fully embedded in everyday practice to ensure domestic violence remains a central concern. In Newcastle there are sites of good practice for example Midwifery, Accident and Emergency and Health Visiting. However roll out beyond these services has stalled due to lack of coordination and investment.

What are the risks of not delivering our targets?

The NDVAP faces significant challenges in the coming year in terms of target realisation. Neighbourhood Renewal Fund (NRF) and New Deal For Communities (NDC) projects, have, as an interim measure met the strategic and in part, service needs in Newcastle. The Local Authority has demonstrated significant leadership and commitment in the allocation of mainstream funds to support the delivery of services. However sustainability remains an issue and current projects require investment if we are to retain the improvements made in service delivery over the past two years.

The risk associated with failure to deliver targeted appropriate services are

Homicide Reviews

A new area of risk will be the introduction of homicide reviews in 2008. These are an excellent means of improving partnership performance but have the capacity to reveal failings on the part of the agencies involved with any form of response to the victim. The nearest equivalent is the process of serious case reviews for children.

Protection of Children

Failure to improve responses to domestic violence will have a considerable effect on the Authority's ability to fulfill their duties in line with E.C.M and the Children Act (2004). Research demonstrates that the number of children on the child protection register in Newcastle is high when compared with other comparable cities.

Is what we are doing working?

The development of a coordinated approach to tackling domestic violence has not fully matured. Significant achievements have been made, however it is too soon to evaluate overall impact.

What is coming on the horizon?

Specialist Domestic Violence Courts (SDVC) have been promoted by the Home Office as an essential part of a coordinated community response to tackling domestic violence.

Discussions with relevant criminal justice agencies are due to take place Autumn 2008 with a view to meeting this current gap in service in Newcastle.

What should we be doing next?

Since 2006 there have been many improvements in the responses of a range of agencies to Domestic Violence. In the next 3 years we want to build on the work of the original strategy and ensure that our initial phase of effort is consolidated and embedded across agencies. The inclusion of Domestic Violence National Indicators 32 (repeat incidents of domestic violence) and 34 (domestic violence homicide) could assist in raising the strategic profile and access to resources needed to support the strategy.

Main priorities for action include:

1. Strengthen and increase the IDVA [Independent Domestic Violence Advisors service] in line with national best practice recommendations from Government
2. Launch a Specialist Domestic Violence Court which will:
 - Bring more perpetrators of domestic violence to justice
 - Improve support, safety and justification of victims
 - Increase public confidence in the Criminal Justice System
3. Improve services for BME victims by:
 - Piloting a specialist forced marriage court
 - Developing advocacy series in the New Deal Communities area
 - Launching a phone line for victims of forced marriage
4. Strengthen and develop non-court mandated perpetrator programmes including developing specialist programmes for young men on the periphery of offending

For full details of the timescales involved, please see the Domestic Violence Action Plan