

**Lancashire Domestic Violence Strategy
2007 - 2012**

For Julie

"I said have I got to be dead before you take me seriously?"

"I realise that it is happening to other women and it happens to women from all walks of life"

"my self worth was so low, you know I was considering suicide and stuff like that and then I come into a place like this (local domestic violence support service)"

Comments from a woman in one the focus groups of survivors of domestic violence, who later committed suicide.

A stark reminder to us all of the urgency of getting it right & working together to help prevent further tragedies

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Throughout the strategy there are quotations taken from the focus groups held across Lancashire with women survivors about their experiences of domestic violence and service provision.

With the police and the courts solicitors I've got everything that I wanted. The judge even asked me what I would like, would I like him to have some contact. I said no and she granted it. He's got no contact

I didn't even realise I'd been abused until someone actually pointed it out. So you can actually go through it and not realise

I had to become quite resourceful, and I was quite amazed at how resourceful you have to be in order to survive

I think you only learn things aren't going to change if you see things aren't going to change and you don't know, do you, until you've been through it.

I never approached anybody...I was frightened.

I remember when I was 7 month pregnant I was just covered in black bruises and the first time he ever hit me and it just made me feel so different about myself...I thought well he won't do it again...and in my head he would never do it again

I did toy with the idea and I was looking at these phones thinking "They are not going to want to know about me" but having done it, it felt like such a big step, it was like a giant weight

I think it's good that people do get together and contribute to each other...there's other people out there, and it's not just you, because you always feel like you've done something wrong

the predators are going on, carrying on doing it, they'll find other victims

his control over me was isolation. He got rid of my sisters, he got rid of my friends, everybody.

I've really enjoyed it (the focus group), thank you. I never thought that I'd be sat talking like we all are.

(Interpreter) Two or three months after she moved to this country the domestic violence started. She coped with it for quite a while, for at least a year or two, because of being not able to speak English, not knowing what services were involved, who the police were, how to contact them, so she felt she didn't have no support at all.

Whenever people meet him, it's like "what a nice man" and he'd do anything for them. You ask him to do it and it's "will you shut up nagging". So nice to everybody, and they use that when the police come.

my solicitor says I've never know anyone to have gone through what you are, you're fighting for your house, your children, proving your sanity, your business, your car, your whole life, you are fighting for everything.

This has been good for lots of people to sort of like get stuff out into the open & feel like other people are in the same position & that's been helpful & to speak about what's

going on. But I think for me it is that it should be heard by somebody who's in a position to make changes & actually be accountable.

it wasn't until I got an outreach worker who got to work with me - that I started to sort of you know turn my life around

I must admit I can't remember the amount of times I left him. Leave him once, go and stop at a friend's house and he'd end up putting a window through. My friend had three children and she was pregnant with her fourth and he was threatening to fire bomb the house and threatening to kill her and all the children.

you have to think at all the time how are you going to protect yourself, not just at that point in time, but in the future.

He raped me...It absolutely frightened me to death to the point where I covered in the house for two days.

I'd just started drinking quite heavily. Started drinking at the night first of all but he was threatening to hurt my friends back home...I wouldn't leave the house before I'd had a drink in the morning.

It all comes down to the woman because the woman is the one who's got to pick up the pieces with the children, the house, everything, all the responsibility is on you.

The Police didn't even interview me for a statement, the interviewed him and then, like I said, were laughing and joking outside and again he told them "she's crazy, she's not with it,

I have been having so many different health problems because I have live with anxiety and stress for so many years...I have a severe heart condition, which is due to panic attacks constantly

1. Foreword

Domestic violence can have truly devastating effects – not only upon victims themselves, but upon any children who witness it. The costs, in terms of service, lost economic output, and sheer human misery are huge.

The importance of tackling this evil cannot be overstated, and the Lancashire Domestic Violence Partnership was created with that very purpose in mind. One of its first acts was to hold a multi-agency conference to inform the way forward. Key recommendations from the conference were that a county-wide strategy be drawn up; and that the Partnership should develop and deliver this with the support of a dedicated co-ordinator.

Over the years, voluntary sector agencies and local fora have been at the cutting edge of service provision and have devised many innovative and effective responses. Statutory agencies too have made great strides such as the establishment of Specialist Domestic Violence Courts.

The purpose of the Lancashire Domestic Violence Strategy is not to replace existing strategies or any of the excellent work being carried out around the county. It is to build upon these and promote effective partnership working.

The key to tackling domestic violence is multi agency co-operation. Survivors need to be protected and provided for by a wide range of services. Perpetrators need consistent messages on the unacceptability of their behaviour, reinforced by agencies and the community.

For many years, violence taking place within a relationship was considered to be a private matter, not a crime. Though a good deal of progress has been made, research conducted fairly recently shows that 78% of people would take action if they saw someone kicking or mistreating a dog; only 53% would do so if they saw someone kicking or abusing their partner. Obviously, much work remains to be done.

Making this strategy work will take courage, determination and perseverance on the part of all agencies. By joining our efforts and working in harmony, we will realise the goal of making all homes in Lancashire safe homes.

Vivien Mumford
Chair, Lancashire Domestic Violence Partnership
District Crown Prosecutor, Crown Prosecution Service

2. Executive Summary

This strategy details how all Lancashire agencies can respond more effectively to domestic violence by working together in cooperation with the Lancashire Domestic Violence Partnership.

Introduction

Domestic violence is a complex social problem with devastating consequences. The impacts of domestic violence on our society are huge and varied. Due to the widespread nature of domestic violence it will impact on the work of every single Lancashire institution or organisation with relation to service users and/or employees. Apart from the enormity of the task facing us, co-ordination of responses is vital if we are to save lives and prevent harm. This strategy is intended to build on the excellent work already taking place in Lancashire. Its purpose is not to replace any of the existing strategies or work currently carried out but to develop a more effective partnership approach, focussing on collaboration with local fora and specialist domestic violence services. It is also designed to compliment or influence existing strategic work in other that will overlap with work to tackle domestic violence.

Lancashire Vision

A shared belief in working towards a future Lancashire where ALL homes are safe homes.

In the short term, there is a commitment to collaborative partnership working to reduce the impact of domestic violence on our communities. It is recommended that all interventions ensure, or uphold the principles of, survivor and child safety and perpetrator responsibility.

It is acknowledged that the task ahead of us all, both individually and collectively, is a huge one. The creation of a clear agenda for the prevention of domestic violence in Lancashire will take courage, determination and co-operation.

Aims for Lancashire

The strategy's aims are centred around the following areas:

- promote a shared philosophy;
- uphold adult and children survivors' safety and protection as the overriding priority (recognising that the vast majority of adult survivors/victims are women abused by their male partners or ex-partners);
- develop initiatives to work towards preventing domestic violence;
- raise the profile of domestic violence;
- strengthen and unify existing efforts to tackle domestic violence throughout the county, co-ordinating those services that are county-wide;
- encourage a high quality of both general and specialist service provision (according to need);
- promote positive solutions to dealing with perpetrators;
- make effective use of existing resources and assist in securing additional funding;
- continue to consult with those affected by domestic violence, prioritising women & children survivors, and ensuring that their experiences underpin service provision;
- increase public confidence in the Lancashire-wide response to domestic violence;
- support initiatives to transform the societal attitudes that fail to challenge domestic violence adequately.

Guiding Principles for Intervention

The strategy contains information on several principles for Lancashire agencies to take into consideration when informing their day-to-day work or practice. These are as follows:

- Pattern & Context of Tactics
- Children & Young People
- Gender
- Diversity
- Barriers for Black and Minority Ethnic (BME) Women
- Specific recommendations from survivors of domestic violence (suggestions taken from focus groups held across Lancashire for ALL agencies to take into account where possible).

What is the Lancashire Domestic Violence Partnership?

This document is the result of several years' collaboration between a number of agencies in Lancashire. This is currently promoted by the Lancashire Domestic Violence Partnership which operates Lancashire-wide.

The Scale of Domestic Violence

National Statistics	Source
Violence against women "is a serious a cause of death & incapacity among women of reproductive age as cancer, & a greater cause of ill-health than traffic accidents & malaria combined."	<i>(World Development Report, 1993)</i>
1 in 4 women experience domestic violence over their lifetimes, and 1 in 10 in any year.	<i>Council of Europe, 2002 (from 10 studies)</i>
Where there is domestic violence, children witness about ¾ of the abusive incidents. About 1/2 the children in such families have themselves been badly hit or beaten.	<i>Royal College of Psychiatrists, 2004</i>
The British Crime Survey (BCS) in 2000 cited the figure of 1 in 6 men experiencing domestic violence in their lifetime. However, research conducted with male respondents to the Scottish part of this BCS found that 13 out of 46 men re-interviewed said they had actually never experienced any form of domestic abuse & 13 out of 22 of the men who said that they were victims of domestic violence, were also perpetrators of violence. They re-estimated that 6% of men experience domestic abuse in their lifetime, and 1.5% in any year. (N.B. There may be differences in men's risk of victimisation in terms of whether their relationship is with a man or a woman.)	<i>Scottish Executive CRU, 2002</i>
It is estimated that prevalence for domestic abuse is 25% in same-sex relationships.	<i>Broken Rainbow Conference, 2002</i>
45% of all female homicide victims were killed by their current or ex-partner compared with 6% of male homicide victims. (2 women die every week nationally – Home Office)	<i>Coleman, K. et al, 2006</i>

Lancashire Statistics	Source
Using findings from national studies, it is estimated that 1 woman in 10, nearly 60,000 women are experiencing domestic violence in Lancashire in any year.	Council of Europe (2002); Stanko (1998); British Crime Survey 1998.
For half those experiencing domestic violence, there are children aged under 16 in the household. If an average of 2 children per woman is assumed, at least as many children are living with domestic violence in any year.	Mirrlees-Black, 1999

The Financial Costs for Lancashire

National research figures from 2004 have been translated into the yearly costs for Lancashire which are estimated at a total of **£622 million** for Lancashire **every year**. This breaks down as follows -

Services: The total for costs to services amounts to nearly **£85 million**.

Economic Output: The cost of sickness absences/time off work due to injuries is estimated at **£73 million**.

Human and emotional cost: comes to **£464 million**. This is an estimate of the human costs, borne by individual victims/survivors of 'pain, suffering and fear' not counted in the cost of services.

The potential gains of a joint investment process are considerable and much detailed in this strategy could be achieved by re-allocating resources, rather than requiring additional ones. This would result in savings actually being made, as this will result in the earlier and more effective responses.

Priorities & Key Interventions

These have been identified by prioritising the results from focus groups with women survivors of domestic violence. Work has been further informed by feedback from stakeholders at a county wide conference, the LDVP action plan, mapping of specialist domestic violence service provision and funding and identified best practice, both nationally and locally. They are:

Priority	Key Interventions
A: Awareness raising & training	<ol style="list-style-type: none"> 1. Employer responses – guidelines, policy and training 2. Awareness raising & practical training sessions for staff at all levels 3. Prevention work in schools 4. Community awareness raising
B: Identifying & pooling resources	<ol style="list-style-type: none"> 1. Provision of advocates or independent domestic violence advisers (IDVAs) 2. Co-ordination of funding 3. The identification of sustainable or mainstream funding for specialist services 4. Engaging the business sector
C: Provision of services & interventions	<ol style="list-style-type: none"> 1. Support for survivors 2. Groupwork with women

	<ol style="list-style-type: none"> 3. Interventions for children and young people experiencing domestic violence 4. Mother/child relationship 5. Work with perpetrators 6. Interventions for people who identify as Lesbian, Gay, Bisexual and Transgender 7. Substance Use
D: Co-ordinating an inter-agency response (within & outside of the Criminal Justice System)	<ol style="list-style-type: none"> 1. Feedback from women and children 2. Accountability and Safety Audits 3. Risk & safety interventions 4. Information sharing <ol style="list-style-type: none"> a) Data collation b) Sharing of personal information c) Multi-Agency Risk Assessment Conferences (MARACs) 5. Specialist Domestic Violence Courts and Co-ordinated Community Response 6. Routine enquiry

Implementation and Monitoring

Evaluating inter-agency work is notoriously difficult & still at a development stage in many ways, but the following are suggested as starting points (Hague, 2000):

- ✓ Improvements in safer choices for survivors (especially women and children who are most at risk)
- ✓ Improvements in service provision, take up and delivery
- ✓ Concrete changes in policy and practice, especially increase in pro-active approaches
- ✓ Involvement with and consultation of service users
- ✓ Service user satisfaction with multi-agency initiatives
- ✓ Development and take up of comprehensive domestic violence strategies.

Collecting meaningful data continues to be a challenge. The LDVP will continue to work to improve this situation. Multi-Agency Risk Assessment Conferences & the Home Office Specialist Domestic Violence Court Programme will need to be evaluated in line with national standards and requirements with reference to the Home Office Domestic Violence National Plan.

In order not to lose the benefits of multi-agency monitoring, the Lancashire Domestic Violence Partnership has adopted the Government 'core' definition of domestic violence as a definition to collect monitoring data.

Conclusion

This comprehensive vision depends on the professional engagement of agencies and partnerships across Lancashire.

In order to develop and maintain a high standard of partnership working it is essential that all strategic groups and agencies are fully committed to this strategy.

To this end the formal adoption of and sign up to this strategy is required by all related organisations and partnerships.

3. Introduction

Domestic violence is a complex social problem with devastating consequences. Throughout history, it has been accepted, tolerated and, at various times, even promoted. This has been rooted in traditions that encouraged ideas of men's rights to ownership of and entitlements to power over women and children. This included servants in the past. However, the use of violent and coercive behaviour does not always reflect these conventional power relations. This accounts for domestic violence perpetrated by or against lesbians, gay men, bisexual or transgender people and the minority of cases where heterosexual men are also targeted.

There are connections and overlaps across the many forms of violence against women, for e.g. a woman may be coerced or manipulated in prostitution by her abusive partner. Furthermore, some of the tactics used by domestic abusers may be similar to other forms of mistreatment in our communities, such as bullying.

Although there have been considerable challenges to the acceptability of domestic violence, forms of tolerance still exist. For example, popular messages in the media present images of the role of women in our society which contributes to attitudes toward women and the violence perpetrated against them.

The impacts of domestic violence on our society are huge and varied. Amongst many others, these can be:

- loss of life;
- untold pain and distress to survivors, their children and families;
- a wide range of other short and long term detrimental effects on quality of life for those directly affected;
- emotional and financial impact on friends or family offering support to survivors;
- lost employment or productivity at work;
- a drain on the resources of public and voluntary services.

Due to the widespread nature of domestic violence, it affects the work of every single Lancashire organisation in relation to its service users and/or employees. Domestic violence has links with many issues. The following are only some examples: child contact; homelessness; crime; child protection; animal abuse; anti-social behaviour; bullying; fear of crime; low public confidence in the criminal justice system; poverty; self harm; rape and sexual assault; social exclusion and disadvantage; mental health problems; children's education, social development and behaviour; substance use; divorce; suicide; truancy; sexual exploitation; forced prostitution; forced marriage; female genital mutilation; so called "honour" crimes; trafficking; disability and women's offending.

Domestic violence has been mostly hidden and is surrounded by secrecy, which is still the case to some extent. Up until very recently, there has been reluctance from communities and services to intervene, and sometimes still is. These factors, have led to the high prevalence rates and impacts on society that we live with today. Until relatively recently, there has been a lack of sanctions, for e.g. legal consequences have rarely been enforced until the 1970s and not regularly until the 1990s. All this, together with the lack of co-ordination of any domestic violence interventions before the 1980's, means that addressing the devastation that domestic violence causes is in its early stages in so many ways.

Multi-agency co-operation is key to tackling domestic violence. Survivors of domestic violence need to be protected and provided for by a wide range of services. Perpetrators need consistent messages on the unacceptability of their behaviour, reinforced by

agencies and the community. Co-ordination of responses is vital if we are to save lives and prevent harm.

This strategy is intended to build on the excellent work already taking place in Lancashire. Its purpose is not to replace any of the existing strategies or work currently carried out but to develop a more effective partnership approach. This strategy takes into account that the local domestic violence fora are key to achieving results. The involvement of the domestic violence voluntary sector is central & should be prioritised in these arenas, as they have the strongest knowledge & expertise. Furthermore, the consultation and contribution of survivors can ensure the most effective approaches are implemented and act as evaluation/feedback mechanism. However, this should only be done in line with identified best practice.

Further reasons for a Lancashire-wide strategy are:

- a Lancashire voice to support actions with the national agenda where this reflects local priorities and to advocate for change where this is not the case;
- that BV225 does not cover everything required to respond to domestic violence;
- that all services' responses to domestic violence should be of a consistent high quality across Lancashire;
- to harmonise the range of local, county and national targets and performance indicators;
- that many agencies work Lancashire-wide and the need for work to be directed from that level.

3.1 Benefits for Lancashire

Potential gains for Lancashire of better collective agency and community efforts to tackle domestic violence are:

- the saving of lives;
- the eventual saving of millions of pounds annually;
- greater public confidence in the Criminal Justice System;
- earlier interventions that can limit the untold suffering of women & children;
- increase in service user satisfaction and effective agency accountability to them;
- translation of policies into action;
- safer communities;
- reduction in the prevalence and severity of domestic violence;
- upholding of the commitment to upholding Human Rights;
- a reduction in crime;
- a more integrated, and therefore effective, response in offering protection to survivors and challenging perpetrators;
- more effective policy and procedure;
- better inter-agency collaboration;
- raised awareness of the problem and a decrease in social acceptance of domestic violence (including family & friends who offer the most support);
- valuing and encouraging innovative practice.

4. Vision and Aims

4.1 Lancashire Vision

A shared belief in working towards a future Lancashire where ALL homes are safe homes.

In the short term, there is a commitment to collaborative partnership working to reduce the impact of domestic violence on our communities. It is recommended that all interventions ensure, or uphold the principles of, survivor and child safety and perpetrator responsibility.

It is acknowledged that the task ahead of us all, both individually and collectively, is a huge one. The creation of a clear agenda for the prevention of domestic violence in Lancashire will take courage, determination and co-operation.

4.2 Aims

To transform the vision into a reality, agencies will work together to:

- promote a shared philosophy;
- uphold adult and children survivors' safety and protection as the overriding priority (recognising that the vast majority of adult survivors/victims are women abused by their male partners or ex-partners);
- develop initiatives to work towards preventing domestic violence;
- raise the profile of domestic violence;
- strengthen and unify existing efforts to tackle domestic violence throughout the county, co-ordinating those services that are county-wide;
- encourage a high quality of both general and specialist service provision (according to need);
- promote positive solutions to dealing with perpetrators;
- make effective use of existing resources and assist in securing additional funding;
- continue to consult with those affected by domestic violence, prioritising women & children survivors, and ensuring that their experiences underpin service provision;
- increase public confidence in the Lancashire-wide response to domestic violence;
- support initiatives to transform the societal attitudes that fail to challenge domestic violence adequately.

5. Guiding Principles for Intervention

Lancashire agencies are asked to take the following information and principles into consideration when informing their day-to-day work or practice -

5.1 Pattern & Context of Tactics

Some behaviours are illegal acts, such as threats, assaults, murder, manslaughter and damage of property. However, there are many tactics used in addition to or instead of these that give abusers use to control their partners. The abuser sets up a significant gap in power between themselves and their target, severely compromising the victim's autonomy and causing an erosion of self and/or degradation of their victim.

One of the drawbacks of focus on single acts is that different forms of abuse are often ranked in terms of "severity" in that physical attacks are often seen as 'more serious' than emotional abuse. However, in national and local research many abused women define the psychological impact of living with "emotional terrorism" as having a more profound effect on their lives than physical attacks, sometimes even where there has been life threatening or disabling physical violence.

Focus on single incidents is sometimes necessary for decisions on the type of intervention needed, for example the criminal justice system is, by design and necessity, directed this way. However, this often presents an incomplete picture, as an individual act can have a very different meaning depending on the motive behind it, the context and frequency. This is one of the most significant ways in which acts of domestic violence differ from other forms of violence. For purposes such as bail or sentencing hearings the legal system must be able to differentiate in order to tailor its responses to their acts and to ensure that the system's handling of cases is effective.

In order to intervene effectively in domestic violence cases, it is important to understand both the complex issues of violence within intimate relationships and how such the violence is being used in a given situation. The circumstances in which violence is used can inform us as to whether the motive is self-defence or coercive. The key elements to consider include:

1. the context in which an act of domestic violence occurred;
2. the particulars of the incident,
3. how much violence, coercion or intimidation preceded the event.

Therefore, domestic violence is best understood as a pattern of controlling, coercive, intimidating, and violent behaviours, rather than as a single incident or even a series of incidents, through which the abuser seeks to control their target. In this way, the issue of power over others is addressed and the cumulative effects can be more fully appreciated.

5.2 Children & Young People

Domestic abuse destroys family life by creating a climate of fear and oppression, creating instability and insecurity, in the place of trust and mutual respect. Where there are children or young people in the family, they are **always** involved in the dynamics, in a variety of direct or indirect ways. These include the following: co-occurrence of child abuse and domestic violence; children can be accidentally injured; children are often used by the abuser to blackmail or gain compliance from the rest of the family; relationships between the non-abusing parent, usually the mother, and the children are often damaged by harassment, intimidation or manipulative tactics. Even after separation, contact and residence disputes can be misused to continue the abuse.

Furthermore, children can be greatly distressed with regard to what they hear or witness, and can experience short term or long-term physical and emotional effects, such as post

traumatic stress. Recent changes in the Children and Adoption Bill 2005 reflect knowledge that exposure to domestic violence is harmful. Research also shows that experience of domestic violence can lie behind the offending or “difficult” behaviour of some children and young people.

Children and young people often show great resilience and resourcefulness in coping with their experiences, for example, they are always reactive to or active in domestic violence situations. They report several ways in which they do this, such as:

- try to protect themselves;
- think about the behaviours;
- try to help their mother;
- get help or talk to someone.

5.3 Gender

Gender plays a role in domestic violence in terms of need and service provision. Data on incidence & access of services show that the overwhelming majority of domestic violence consists of violence by men against women, (‘Domestic Violence: A National Report’ Home Office 2005). Although it is clear that domestic violence also occurs in lesbian, gay, bisexual and transgender relationships & that heterosexual men can be abused by heterosexual women.

One commonly cited figure on domestic violence suggests that 1 in 4 women and 1 in 6 men experience domestic violence which might suggest a degree of similarity in terms of prevalence. However, recent research found that women are more likely to be subject to repeat abuse, in that 47% of male victims experienced a single incident with an average of seven incidents per victim compared with 28% of female victims experiencing a single incident with an average of 20 incidents per victim. In the year prior to the research interviews, there were an estimated 12.9 million incidents of domestic violence acts of nonsexual threats or force against women and 2.5 million against men in England and Wales (‘Domestic violence, sexual assault and stalking: Findings from the British Crime Survey’, Walby and Allen 2004).

Not all victims/survivors are female and all abusers male, but the gender of both survivor and perpetrator is relevant in terms of the tactics used. For example, women are more likely to be: injured; frightened and murdered. Gender also influences the type of abuse, for example, male perpetrators are far more likely than females to abuse after separation. Indeed this is the most common high-risk situation for women, in that when an abused woman attempts to leave a violent man, the violence, intimidation and coercion often escalate.

Although most specialist domestic violence services, predominantly based in the voluntary sector, cater for women and their children, almost all other generic services are available to both genders. For example, it should also be noted that most housing options are available to and used by both men and women. Moreover, the capacity limitations of refuge provision mean that, nationally, only approximately 15% of women homeless due to domestic violence can be accommodated by them.

As very few domestic violence services are gender or sexuality specific, the suggestions in the Lancashire Strategy will aspire to improve service provision for both genders, all sexualities and within family relationships.

5.4 Diversity

Domestic abuse is widespread throughout our society. Research suggests that domestic abuse occurs in all sections of society irrespective of race, wealth, geography, culture, nationality, religion, sexuality, disability, age, class or education level. Most women encounter a number of barriers to leaving an abusive relationship or seeking help, but those from disadvantaged groups may face particular difficulties in accessing services. These include, but are not limited to, women: who are disabled; living in rural communities; using substances; with mental health problems; travellers or those with insecure immigration status.

The difficulties may come from:

- the abuser using the woman's social situation against her;
- barriers in the woman's own community;
- from stereotyping and prejudice outside of her immediate circles or by the agencies she approaches.

The isolating tactics used by abusers may be compounded in specific situations, for example: in rural areas; within ethnic minority communities in a county where the white inhabitants account for some 93% of the population or for lesbians, gay men, bisexual or transgender people living in a predominantly heterosexual community.

5.5 Barriers for Black and Minority Ethnic (BME) Women

(Interpreter) Two or three months after she moved to this country the domestic violence started. She coped with it for quite a while, for at least a year or two, because of being not able to speak English, not knowing what services were involved, who the police were, how to contact them, so she felt she didn't have any support at all.

(Quotation from a woman in Lancashire wide focus groups)

The experience of specialist groups shows that BME women can experience specific or extra difficulties. This may be compounded by the lack of specific agencies for BME women or that, on average, BME women contact 17 agencies before obtaining the help they need. This compares to 11 agencies for all women (Hanmer J. 1994). The suicide statistics suggest that some women in minority communities are more likely to turn to suicide and self-harm rather than leave abusive situations.

The focus groups held in Lancashire identified several issues:

- There are specific problems for all women around: lack of help for children; being kept safe, informed and supported throughout the Criminal Justice response; being offered appropriate help by generalist agencies; lack of sign-posting to appropriate support agencies and lack of availability of housing. For BME women there are further problems with: no recourse to public funds, therefore to refuge space and benefits; length of time taken to sort out legal status; lack of availability of interpreting and information/publicity.
- Women don't know about the services that could help, there are extra difficulties for women out of the country: not knowing how systems work; not speaking English or not being able to read.
- Problems for women with no recourse to public funds with time taken to deal with legal status.
- Extra barriers for women from BME communities in terms of pressure not to involve the police.
- Women who have come to this country to get married and are still within the two year rule have immigration worries about official involvement.
- Translation services for both parties (abuser and victim) are sometimes supplied, sometimes not.

- BME women (and women from more rural areas) can face disapproval or on a wider community basis.
- Lack of quick access to specific BME counsellors.

5.6 Specific recommendations from survivors of domestic violence

The following are suggestions taken from focus groups held across Lancashire. These are points of action for ALL agencies to take into account where relevant:

- Practitioners should consider sensitive and respectful ways of helping women to define their experiences as domestic violence.
- Domestic violence should be understood as a pattern of behaviour designed to achieve power and control rather than as a single incident or even a series of incidents. In this way, the cumulative effects of abuse can be more fully appreciated.
- Each survivor has a set of unique circumstances which can affect the tactics used against her and how she responds to these. Services need to be sufficiently flexible to take account of these while also being sufficiently standardised to provide a similar response to similar circumstances.
- Local and national help available should be advertised at every opportunity.
- Workers should be aware of the relevant DV services and how to access them.
- Interventions have the potential to be dangerous, even fatal, if insufficient priority is given to safety issues. Victim safety *must* be the over-riding priority at *all* times, even if the woman has left the relationship.
- Thought should be given to being able to offer safety planning for women & children.
- Responses and interventions will only be effective if they offer something substantially different from the perpetrator:
 1. The abuser is unpredictable; services must offer certainty.
 2. The abuser is judgemental; services must be accepting.
 3. The abuser instils fear; services must foster trust.
 4. The abuser induces confusion; services must offer clarity and transparency (e.g. in terms of information given).
 5. The abuser denies responsibility for his actions; services must be accountable for theirs.
 6. The abuser is manipulative, coerces and controls; agencies should work with the women to maximise her choices. (The most effective interventions are ones that support the victim and which increase choices, building where appropriate, on positive coping strategies already developed.)

6. What is the Lancashire Domestic Violence Partnership?

6.1 Background

In Autumn 2003 several agencies across Lancashire collected a response to the Government's "Safety & Justice" consultation on tackling domestic violence. Initial discussions were held on the way forward for Lancashire, leading to the creation of a multi-agency steering group.

A high profile conference was held 25th March 2004 with a large & diverse range of stakeholders/delegates to explore good practice and consider ways forward. Many issues were highlighted at the conference and the workshops specifically considered the issue of a County-wide approach. The conference established widespread support for a county-wide strategy which would add value to and support local strategies being developed by Community Safety Partnerships/Local Strategic Partnerships. It also established a consensus on the following issues: an experienced specialist should be appointed to develop and co-ordinate the Strategy; the requirement for strong leadership; an agreed definition and policy framework; mainstreaming the issue by integration into key policies, plans and programmes; exercise on the full cost of domestic violence for Lancashire; effective working between statutory and voluntary services & a structure with clear communication channels to strategic and local partnerships forums and agencies.

By October 2004, partners agreed to fund a county-wide co-ordinator post for three years. The Co-ordinator has subsequently been appointed and took up the role in September 2005. The Lancashire Domestic Violence Partnership (LDVP) has now been formed from the former Multi-Agency Domestic Violence Steering Group, to direct the strategic work Lancashire-wide.

6.2 Purpose of LDVP:

The purpose of the LDVP is to provide strategic direction to individual agencies, DV fora and partnerships across Lancashire. It will drive the implementation, the review and evaluation of the Lancashire Domestic Violence Strategy.

The LDVP is committed to:

- ✓ Ensuring that domestic violence is viewed by all agencies, both statutory and voluntary, as a major priority.
- ✓ Setting the work schedule for the Domestic Violence Strategy Co-ordinator.
- ✓ Identifying the specific and diverse needs of the community and exploring the range of services required to meet these needs.
- ✓ Developing and delivering a five year Domestic Violence Strategy with an Action Plan to be reviewed annually.
- ✓ Providing a mechanism where by information can be exchanged and discussions on current issues can take place.
- ✓ Developing and maintaining high levels of engagement from its partner agencies in the delivery of domestic violence work across agencies.
- ✓ Ensuring that domestic abuse services and initiatives for both survivors and perpetrators are co-ordinated. It is vitally important that those approaching the helping agencies receive a consistent and appropriate response from adequately trained staff.

7. The Scale of Domestic Violence

National Statistics	Source
Violence against women "is a serious a cause of death & incapacity among women of reproductive age as cancer, & a greater cause of ill-health than traffic accidents & malaria combined."	<i>(World Development Report, 1993)</i>
1 in 4 women experience domestic violence over their lifetimes, and 1 in 10 in any year.	<i>Council of Europe, 2002 (from 10 studies)</i>
Where there is domestic violence, children witness about ¾ of the abusive incidents. About 1/2 the children in such families have themselves been badly hit or beaten.	<i>Royal College of Psychiatrists, 2004</i>
The British Crime Survey (BCS) in 2000 cited the figure of 1 in 6 men experiencing domestic violence in their lifetime. However, research conducted with male respondents to the Scottish part of this BCS found that 13 out of 46 men re-interviewed said they had actually never experienced any form of domestic abuse & 13 out of 22 of the men who said that they were victims of domestic violence, were also perpetrators of violence. They re-estimated that 6% of men experience domestic abuse in their lifetime, and 1.5% in any year. (N.B. There may be differences in men's risk of victimisation in terms of whether their relationship is with a man or a woman.)	<i>Scottish Executive CRU, 2002</i>
It is estimated that prevalence for domestic abuse is 25% in same-sex relationships.	<i>Broken Rainbow Conference, 2002</i>
45% of all female homicide victims were killed by their current or ex-partner compared with 6% of male homicide victims. (2 women die every week nationally – Home Office)	<i>Coleman, K. et al, 2006</i>
A review of domestic violence murders in London found that 76% occurred after the victim had ended the relationship.	<i>Metropolitan Police, 2003</i>
Research comparing the outcome of perpetrator programmes with other criminal justice sanctions in Scotland found that after 3 months, 30% of the men on the perpetrator programme had been violent as compared to 62% with other criminal justice sanctions. After a year, 33% on the programme had been violent as opposed to 70% of the others.	<i>Dobash & Dobash, 2000</i>
1 in 5 young men and 1 in 10 young women think that abuse or violence against women is acceptable in some circumstances.	<i>Zero Tolerance, 1998</i>
Questioned about their own response to someone who was kicking or mistreating their dog, 78% said they would intervene or call the RSPCA or the police. But when it came to someone kicking or mistreating their partner, only 53% said they would intervene or call the police.	<i>ICM Poll, 2003</i>

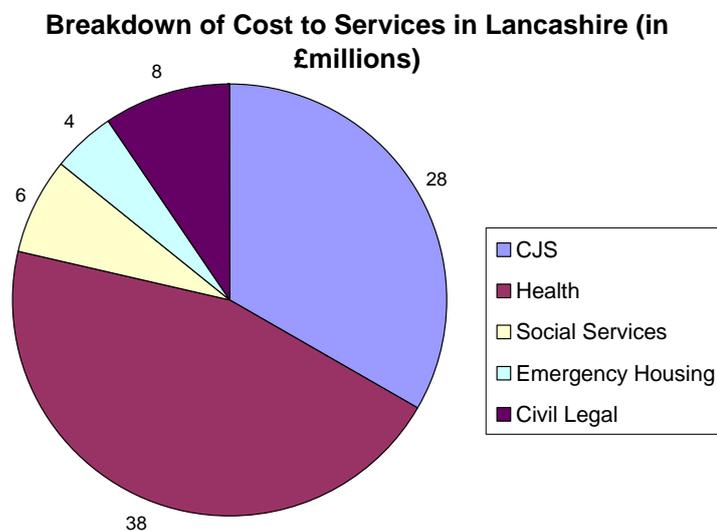
7.2 Lancashire Picture

In Lancashire, it is estimated that nearly 60,000 women are experiencing domestic violence in any year. This is likely to be a conservative estimate as much domestic violence is not disclosed. For half those experiencing domestic violence, there are children aged under 16 in the household (Mirrlees-Black, 1999). With an average of 2 children per household, we can estimate that at least as many children are living with domestic violence in any given year.

The Financial Costs for Lancashire

2004 saw the first national research on the economic impact of domestic violence, using nationally recognized data & methodology (Walby 2004). These figures have been translated into the yearly costs for Lancashire which are estimated at a total of **£622 million** for Lancashire **every year**. This breaks down as follows -

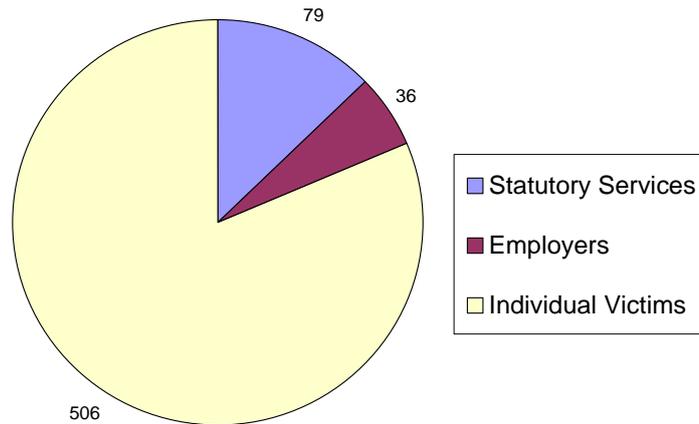
Services: The total for costs to services amounts to nearly **£85 million** broken down as follows:



Economic Output: The cost of sickness absences/time off work due to injuries is estimated at **£73 million**.

Human and emotional cost: comes to **£464 million**. This is an estimate of the human costs, borne by individual victims/survivors of 'pain, suffering and fear' not counted in the cost of services and constructed using the established Home Office approach of the public's willingness-to-pay to avoid these costs.

Who Bears the Costs in Lancashire (in £millions)



The true costs are likely to be much higher as there are some costs of domestic violence for which there was insufficient data to enable reliable estimates to be made and some others where only token sums were included.

As can be seen from the information above, what we are really costing is the lack of action to tackle domestic violence adequately. A great deal of the money spent as detailed above could be more efficiently used and to greater effect. For example, the evaluation of the Specialist Domestic Violence Courts (Cook et al 2004) shows that independent domestic violence advocates or advisers can reduce the number of unsuccessful criminal justice outcomes. Any intervention that can provide an earlier and more effective response can save highly expensive, lengthy processes.

It is suggested that statutory agencies in Lancashire consider the implementation of an "invest to save" philosophy and that much detailed in this strategy could be achieved by re-allocating resources, rather than requiring additional ones. This would result in savings actually being made and also for the public as well, as this will result in the earlier and more effective responses. If the prevalence of domestic violence were also lowered savings would be huge. The potential gains of a joint investment process are considerable.

8. Priorities & Key Interventions

This has been good for lots of people to sort of like get stuff out into the open & feel like other people are in the same position & that's been helpful & to speak about what's going on. But I think for me it is that it should be heard by somebody who's in a position to make changes & actually be accountable.

(Quotation from focus group participant)

These have been identified by prioritising the results from focus groups with women survivors of domestic violence (refer to appendix A for further details). Work has been further informed by feedback from stakeholders at a county wide conference, the LDVP action plan, mapping of specialist domestic violence service provision and funding and identified best practice, both nationally and locally.

Key areas for work in the first five years of the strategy have been grouped under four priority areas.

8.1 Priority One: Awareness raising & training

Why?

The equipping of employers, staff & communities to respond appropriately is vital to the success of an integrated response to domestic violence.

Key Interventions

8.1.1 Employer responses – guidelines, policy and training.

Workplaces can be a place of safety for women, thus an area for effective interventions to be developed, such as information in induction packages & helpline numbers on payslips. The focus should be on improved workplace policy, awareness and response across all, but importantly large employers. Unions may be able to help promote a workplace response.

8.1.2 Awareness raising & practical training sessions for staff at all levels.

Any county programmes should promote a multi-agency model and should build on and support training already carried out by local areas.

8.1.3 Prevention work in schools.

This will challenge misconceptions about domestic violence (in staff and pupils), help schools fulfil their legal and national curriculum obligations and to understand how domestic violence affects children and young people's schooling. It will also have the effect of supporting any young people living with or escaping domestic violence and advising all young people in their present and future relationships.

Programmes should avoid the common misconception that children who have violent fathers automatically grow up to be abusers or survivors themselves. There is no evidence to suggest this is the case, in fact, some research has suggested that the opposite, i.e. that these children may grow up to fully understand and actively oppose domestic violence, may be just as likely an outcome (Mullender et al, 2002). This misguided approach further stigmatises child survivors of domestic violence, rather than seeing them as worthy of support and understanding because of their own experiences.

8.1.4 Community awareness raising.

Importantly, many women from the focus groups said they confided in friends or family members (even when they also officially reported). Therefore skilling up family and friends to offer informal support is also imperative. Raising awareness in and

involving all the communities of Lancashire will help to tackle the common misunderstandings about domestic violence.

8.2 Priority Two: Identifying & pooling resources

Why?

The services most valued by the women in the focus groups are often the ones who are struggling the most for funding. These services meet a wide range of targets (e.g. increased reporting), and can reduce human and service cost by earlier intervention, support and preventive measures. Identifying and securing resources to strengthen specialist service provision is a priority.

Key Interventions

8.2.1 Provision of advocates or independent domestic violence advisers (IDVAs).

The LDVP has identified a gap in service, with regard to the Specialist Domestic Violence Court System and the Co-ordinated Community response, in terms of provision of safety and support for victims and witnesses.

8.2.2 Co-ordination of funding.

This is to be aimed for, wherever possible.

8.2.3 The identification of sustainable or mainstream funding for specialist services.

Most specialist services are based in the voluntary sector are funded on a short term basis. Accessing better funding set-ups remains problematic but should be encouraged and sought after at every opportunity.

8.2.4 Engaging the business sector.

This remains a previously untapped source of possible funding for domestic violence initiatives, especially taking into consideration the costs of domestic violence for Lancashire employers.

8.3 Priority Three: Provision of specialist services & interventions

Why?

According to very recent work on domestic violence and child protection by Stanley and Humphreys (2006), an effective response to both issues would mean that every area should have the following services, which should all be accessible to disabled women and children:

- refuge;
- outreach service;
- groups for children;
- specialist services accessible to black and minority ethnic women;
- counselling;
- 24 hour helpline;
- substance use programme which acknowledges & addresses domestic violence;
- perpetrator programme that meets minimum standards;
- a supervised contact centre
- and an integrated criminal justice response.

Clearly many areas fall short of this service provision, which outlines how important it is for partnerships at local and county level to have service development as a key remit.

Key Interventions

8.3.1 Support for survivors.

This is vital to increasing reporting, prioritising safety and preventing homicide. Lancashire has a mixture of service provision. Every effort should be made to keep the service provision at its current level and expand this wherever possible, bearing

in mind that specialist services for women should be reflective of need, diversity and be of consistent high quality.

8.3.2 Groupwork with women.

On evidence from the focus groups, another area for development is giving women the opportunity to meet other women in the same situation. This would combat the sense of isolation plus offer them a structured, crucial form of peer support. Ideally this should be based on the philosophies used in the focus groups and promoted in Our Best Interests curriculum developed by the Duluth Domestic Abuse Intervention Project in the U.S..

8.3.3 Interventions for children & young people experiencing domestic violence.

As a big picture, these should run in line with recommendations from the “Vision for services for children and young people affected by domestic violence” (See tiers of need diagram in Appendix B). This should take into account that there is no one syndrome associated with experiencing domestic violence, the impact depends on individual child’s level of understanding, personality, circumstances, coping strategies and degree of support. Children may show distress in a variety of ways (even within same family), as with anything else, although there can be age and gender specific components (Mullender 2006).

Most services or interventions are geared towards domestic violence perpetrated by adult abusers, for example, data is mostly collected on those 17 or 18 or over, depending on the agency. Consideration should be given to how Lancashire can promote positive solutions for teenagers perpetrating or experiencing domestic violence in their own relationships.

Groupwork with children and young people to help them with their experiences of domestic violence, as part of a wider intervention, is a key area for development. These should be aimed solely at those children who we know have experienced domestic violence, as opposed to preventative work aimed at all children and young people.

8.3.4 Mother/child relationship.

One very recent area of development nationally is the recognition of the damage domestic violence does to the relationship between the non-abusing parent, usually the mother, and her children. This also fits with research by Kelly (1994) that if we keep the mother safe this can help her keep any children safe.

Lancashire should explore ways in which we should make use of the available materials to help repair this mother/child relationship (Talking to My Mum: A Picture Workbook for Workers, Mothers and Children Affected by Domestic Abuse & Talking About Domestic Abuse: A Photo Activity Workbook to Develop Communication Between Mothers and Young People, by Humphreys et al, 2006)

8.3.5 Work with perpetrators:

There is general recognition that services for survivors are accessible and effective but that without attention to the cause of the problem we risk only alleviating its symptoms. The National Probation Service in Lancashire is responsible for the mandatory domestic violence programme, for men who are the court orders attendance on such a programme. Lancashire runs the Community Domestic Violence Programme (CDVP).

At the present time there is only one programme in Lancashire that offers this on a voluntary basis, and ways of developing further voluntary perpetrator programmes should be explored.

8.3.6 Interventions for people who identify as Lesbian, Gay, Bisexual and Transgender:

There are estimates that a substantial number of people identifying as lesbian, gay, bisexual and transgender either commit or are on the receiving end of domestic violence. These situations should not be seen as the same as men's violence towards their female (ex)partners (taking into account that some lesbians & bisexual women will be in this situation) neither the direct opposite of this. This is an oversimplification of the dynamics in these situations and the context within which this abuse occurs. The sense of entitlement does not always exist in the same way or may be linked to factors other than a historic assumption of ownership.

Interventions need to take into account that identifying the abuser (i.e. the primary or predominant aggressor) is vitally important in same sex relationships. Attention also needs to be paid to the interconnectedness or overlap of homophobic and domestic violence, for example, a young person being abused at home because of intolerance of their sexuality.

Further work should be undertaken in Lancashire to establish how this work should be taken forward.

8.3.7 Substance Use

Coping with the physical and emotional pain of domestic violence can cause or exacerbate substance use for survivors, as well as the coerced or forced substance used as a tactic by their partners.

The relationship between domestic violence and substance use for perpetrators is more complex. Although it is a popularly held view, the notion that abusers' violent behaviour is caused by alcohol is actually a misconception. It misunderstands the nature of domestic violence, reference to the misuse of power and control being key in this regard. The most we can say about perpetrators and substance use is that the two problems co-occur, but this does mean that interventions need to take both issues into account.

The domestic violence and substance use sectors need to strengthen their co-working. Both sectors also need to be aware of services and issues relating to each of them. Ways should be considered on how this can be taken forward in Lancashire; one possible model is the Stella Project based in the Greater London Domestic Violence Project.

8.4 Priority Four: Co-ordinating an inter-agency response

Why?

The scale of domestic violence is such that almost every agency in Lancashire is impacted on in some way. Therefore, most agencies that deal with domestic violence in their day to day work are not specialist domestic violence services. These agencies, as well as the specialist services, are also key in an integrated response to domestic violence. Responding to all of a woman and children's needs always takes into account the use of many services (for e.g. refuges, housing, benefits, children's services, health visitors, etc.). Their safety, as do the ways in which abusers are held accountable, also has to be a shared philosophy and practice to the same principles across all agencies, as part of a consistent and co-ordinated response.

Key Interventions

8.4.1 Feedback from women and children.

Survivor feedback is critical to adapting existing and developing new services or interventions. This should be done through the use of women's anonymous participation focus groups, adequately resourced, with results then fed back by the group facilitators. It is vital to strengthen individual voices by facilitating service users to speak collectively, a process that is in itself empowering.

Local fora in Lancashire should be encouraged to obtain (if they do not already) women and children survivors' feedback and involvement, but **only** in line with best practice. Work in Lancashire should be undertaken to ascertain and then act on the views of children and young people who have experienced domestic violence and their views on service provision. The LDVP should consider ways of further involving women and children's views in any reviews of existing interventions or in the development of new multi-agency initiatives.

8.4.2 Accountability and Safety Audits

Integrated work is key to the success of a co-ordinated community response, however, effective collaborative evaluations on a multi-agency level do not really exist. To this end, Lancashire should consider the use of Accountability and Safety Audits as developed in Duluth, Minnesota, led by U.K. people trained in this method. There is currently no other way of working that can combine: inter-agency collaboration on problem solving; planning detailed and practical steps to improve a local response and evaluation of systems and institutional response (NOT workers). Whether working on one part or several of an institutional response, the process further promotes: single and multi-agency investment in the process and the outcomes and the accountability of agencies not only to service users but also to other agencies.

8.4.3 Risk & safety interventions.

A pro-active multi-agency response focussing on safety should be promoted. Encouraging a shared philosophy and practice on the following areas is essential: risk factors (including children); safety planning (for women and children) and in engaging perpetrators. The LDVP should work on the development of joint principles, guidelines and multi-agency training around all 3 areas.

8.4.4 Information sharing.

This has two distinct forms: the collation of anonymous data for monitoring purposes and the sharing of personal information between agencies, i.e. referrals or multi-agency meetings.

- a) Data collation. At present, very few agencies routinely collect data on the prevalence of reported domestic violence. Systems need to be developed and implemented for recording anonymous information in all agencies, where this does not currently exist. Data needs to be collected to the Home Office definition and making use of the Multi-Agency Data Exchange (MADE) project. This will help to make the case for allocating appropriate resources and to start monitoring the following: local trends; improvements in practices and the impact of any initiatives.
- b) Sharing of personal information is fraught with both opportunities and difficulties. Processes should take into account the following issues:
 - the need for more than one agency's intervention in dealing with all the issues a family faces, women, men and children;
 - the need for tight confidentiality with regard to storage of information;

- the Human Rights/ Data Protection issues of information being shared without consent;
- the legal responsibilities to share information to prevent crime or to identify and apprehend offenders through the Crime and Disorder Act 98, section 115;
- abusers' misuse of records (even just names and addresses) to track women and children;
- the fact that survivors continue to be tracked down as a result of "human error" and that some policies can also be misused for this purpose;
- the responsibilities to share information with regard to the Children Act 1989 and the possibility that sharing information may collude with the perpetrators' threats, e.g. to get children taken off her.

Taking all these factors into account means that information sharing will only be successful if it results in safer choices and better services for women and children. Women need to feel that they are fully involved in information about them (in the vast majority of cases) and experience the benefits, most importantly protection. If not, we risk sanctioning a process that puts her in more danger, and:

- discourages rather than gives women confidence in reporting;
- replicates the patterns of control over her that she is already experiencing from her partner, thus re-victimising her
- and may lead to the perpetrator preventing her from seeking help if access to outside help is found out.

Any sharing of information or referral should be made with informed and true consent, as opposed to consent that appears to be linked to the receiving of services, e.g. signing a waiver form at first contact. Any policy of blanket referrals is also not advised, as this may result in more danger rather than less to the women and children as it may then be impossible to prioritise cases in terms of levels of risk and appropriateness of intervention. As, usually, no one agency has all the information; risk will need to be assessed by several agencies to be truly effective.

- c) Multi-Agency Risk Assessment Conferences (MARACs). The purposes of these are to focus attention on:
- women and children's safety;
 - tackling high risk offenders;
 - inter-agency joint risk management plans;
 - improving agency accountability and support for staff involved in high risk cases.

These should be the only places where personal information is shared without consent, apart from referrals in line with the Children Act 1989 and agencies' Child Protection policies, taking into account the information in point II. Lancashire Constabulary are the lead agency on this intervention, committed to taking this forward in partnership at Lancashire (strategic) & local level (operational). MARACs should link into the SDVC programme and sit as part of a co-ordinated community response as proposed by the Home Office in the updated National Plan. The LDVP will work on the roll-out of a joint risk assessment form to support this process.

8.4.5 Specialist Domestic Violence Courts and Co-ordinated Community Response

Improvements within the criminal justice system will reduce attrition rates and increase prosecution numbers and success rates. The commitment and hard work of the Lancashire Domestic Violence Courts Steering Group has ensured that Lancashire has a robust practical domestic violence court set-up on which to build further work.

The LDVP should expand on the existing DV courts to establish the multi-agency Specialist Domestic Violence Court (SDVC) model as part of a co-ordinated community response as proposed by the in the updated Home Office's National Plan.

8.4.6 Routine enquiry

Research shows that 30% of domestic violence starts or escalates in pregnancy (*Mezey & Bewley 1997*), and that 80% of women experiencing domestic violence seek help from the health services at least once (*DOH report, Adam 2000*).

The 5th report of the Confidential Enquiry into Maternal Deaths 'Why Mothers Die 1997 -1999', recommended routinely asking all pregnant women about domestic violence, as this can help women disclose or identify their experiences as such. Further identified good practice and work nationally, shows that routine enquiry could be carried out by all health professionals (of all women accessing health services, in privacy and over some time). Many services are adopting this practice, for e.g. midwives, health visitors. This could easily be extended to other areas of health, including mental health and substance use services.

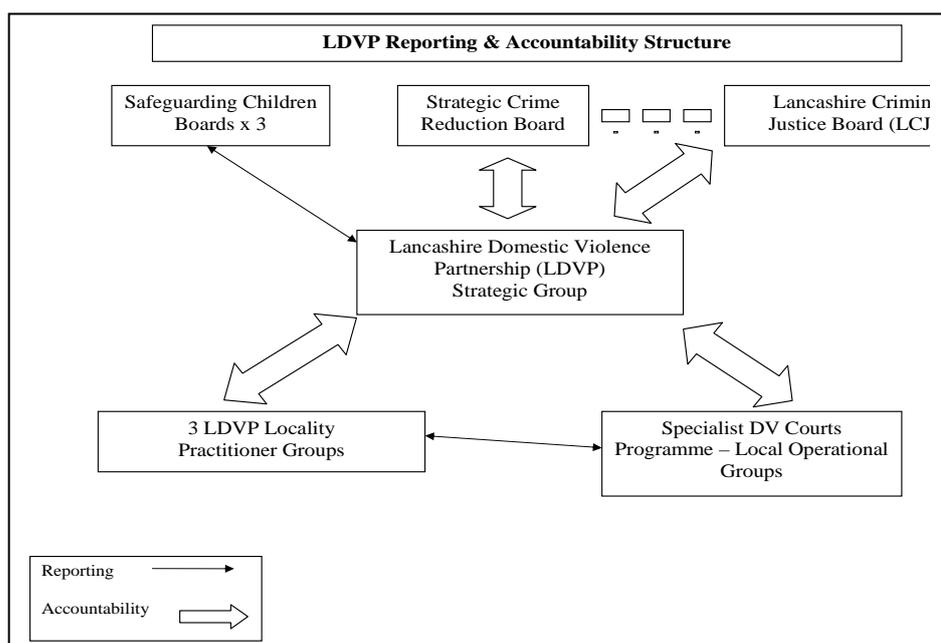
On recommendations from best practice, routine screening cannot be effective without: policies; training; support for frontline workers; basic safety planning and effective referral systems/care pathways in place.

8.5 Action Planning

The LDVP has translated these priorities and key interventions into an action plan, which contains a mixture of single and multi-agency actions. This is designed to complement work being carried out at a local level.

The action plan will be reported on and subsequently updated on a yearly basis.

9. Implementation & Monitoring



9.1 LDVP Reporting & Accountability Structure

- Clear lines of communication and reporting need to be set up between the LDVP and the groups listed on the diagrams.
- To further aid communication, it is suggested that the work and priorities of the LDVP should sit as standing item on the appropriate existing groups.

9.2 Two Tier Set-up (strategic & operational levels)

The LDVP has identified a need to establish an effective two-way exchange of information on domestic violence across the county. This would present a way of linking up local and county wide agendas.

Strategic Group

- Representation at this group needs to be at the right level, i.e. representatives must be of a senior enough level to be able to influence decisions and budgets in their relevant agencies or partnerships.
- Administration is by the Community Safety Team from Lancashire County Council.

Operational Groups

These are larger meetings set to take place earlier than strategic group, thus to feed into the agenda for the strategic group. Each group is chaired by the domestic violence voluntary sector, who then sit on the strategic group. It is the responsibility of the chair to sort out administration of the group (which would consist of a record is of key issues and action points).

3 locality groups are:

- Burnley, Pendle, Rossendale, Ribble Valley, Hyndburn, Blackburn with Darwen.
- Preston, South Ribble, Chorley, West Lancashire.
- Lancaster, Fylde, Wyre, Blackpool.

9.3 Task & Finish Groups:

- Small, time limited groups will be set up as and when required to move work forward.

- These may take up themed or geographical concerns and relevant membership will be drawn from both levels of the LDVP.

Evaluating inter-agency work is notoriously difficult & still at a development stage in many ways, but the following are suggested as starting points (Hague, 2000):

- ✓ Improvements in safer choices for survivors (especially women and children who are most at risk)
- ✓ Improvements in service provision, take up and delivery
- ✓ Concrete changes in policy and practice, especially increase in pro-active approaches
- ✓ Involvement with and consultation of service users
- ✓ Service user satisfaction with multi-agency initiatives
- ✓ Development and take up of comprehensive domestic violence strategies.

Collecting meaningful data continues to be a challenge. The LDVP will continue to work to improve this situation. Multi-Agency Risk Assessment Conferences & the Home Office Specialist Domestic Violence Court Programme will need to be evaluated in line with national standards and requirements, with reference to the Home Office Domestic Violence National Plan. The LDVP suggests the following:

9.4 Monitoring definition (for use in data collection):

In order not to lose the benefits of multi-agency monitoring, the Lancashire Domestic Violence Partnership has adopted the Government 'core' definition of domestic violence as a definition to collect monitoring data. The definition is as follows:

'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.'

This means that data should be separated into the following categories: age, sexuality, ethnicity, gender and relationship to the abuser or abused party (partner, ex, mother, father, son, daughter, brother, sister, and grandparents, in-laws or stepfamily). This definition incorporates forced marriage, dowry related abuse, female genital mutilation and so called 'honour' killings, as well as elder abuse when committed within the family or by an intimate partner.

In Lancashire we are keen to pay particular attention to the presence of children & encourage agencies to collect additional data on incidents where children or young people are involved, either directly or as witnesses.

Explanatory Notes

It is understood by the partnership, that Government definition is an *over simplification* & only useful in terms of collecting & collating data not in terms of understanding the complex issues or informing interventions. For example,

1. LDVP are clear that actual incidents will be much higher than monitoring information shows, as not all incidents are reported.
2. The data captured will reflect presentations to agencies rather than actual incidents.
3. Given the definition, monitoring may capture some data that is not an ongoing pattern of power & control.

10. Conclusion

As a whole, implementing this comprehensive vision depends on the professional engagement of agencies and partnerships across Lancashire.

In order to develop and maintain a high standard of partnership working it is essential that all strategic groups and agencies are fully committed to this strategy.

To this end formal adoption of and sign up to this strategy is required by all related organisations and/or partnerships.

Appendices

Appendix A Glossary

We have chosen the following terminologies:

- Domestic violence (DV)

This includes all forms of abusive and violent behaviour relating to the reinforcement of a pattern of power and control over another (for details refer to Guiding Principles for Intervention).

- Victim/survivor

These terms are used interchangeably throughout the document. This is not to suggest that there is a “journey” from victim to survivor, as “survivor” is a term for use instead of “victim”. This term was developed as some saw “victim” as a demeaning term and “survivor” reflecting the strength and resourcefulness of those individuals experiencing domestic violence. However, many use “victim” in meaning a victim of crime. Furthermore, the use of the word “victim” reflects that many do not survive domestic violence (i.e. murder or suicide).

- Abuser/perpetrator

These terms are used interchangeably throughout the document to reflect the current different terms used. This is not to suggest any (false) differences in “types” of abuser. On the other hand, there is no one “universal” perpetrator, perpetrators come from all different kinds of backgrounds and there will be similarities and differences in both their backgrounds and behaviours.

- Women/women and children

This is used as shorthand, to reflect that the vast majority of domestic violence is perpetrated by men against their wives or female partners/ex-partners. A long history of unequal power relations between men and women account for this. However, this is not to suggest that domestic violence is always about women being targeted by men, there are intimate and family relationships where men abuse men and women abuse women, and men can be abused by women - these situations refer to lesbians, gay men, bisexual and transgender people (LGBT) and heterosexual men.

When we refer to “women” we are including an awareness of domestic violence for lesbians, gay men, bisexual and transgender people, along with the impact on and inclusion of children. We ask people to understand this and hold onto these complexities whilst reading this document.

- Men

This is used as shorthand, to reflect that the vast majority of domestic violence is perpetrated by men against their wives or female partners/ex-partners. This is not to suggest that all men are abusive or violent in their personal and/or family relationships, as most men chose to treat women with equality and respect. Please also refer to previous point for further explanations.

Appendix B

Evidence from Lancashire-Wide Consultation with Women Survivors of Domestic Violence

Fourteen focus groups were held with a total of 115 women survivors of domestic violence drawn from over the whole of Lancashire (each of the 14 areas), with an average of 8 women in each group.

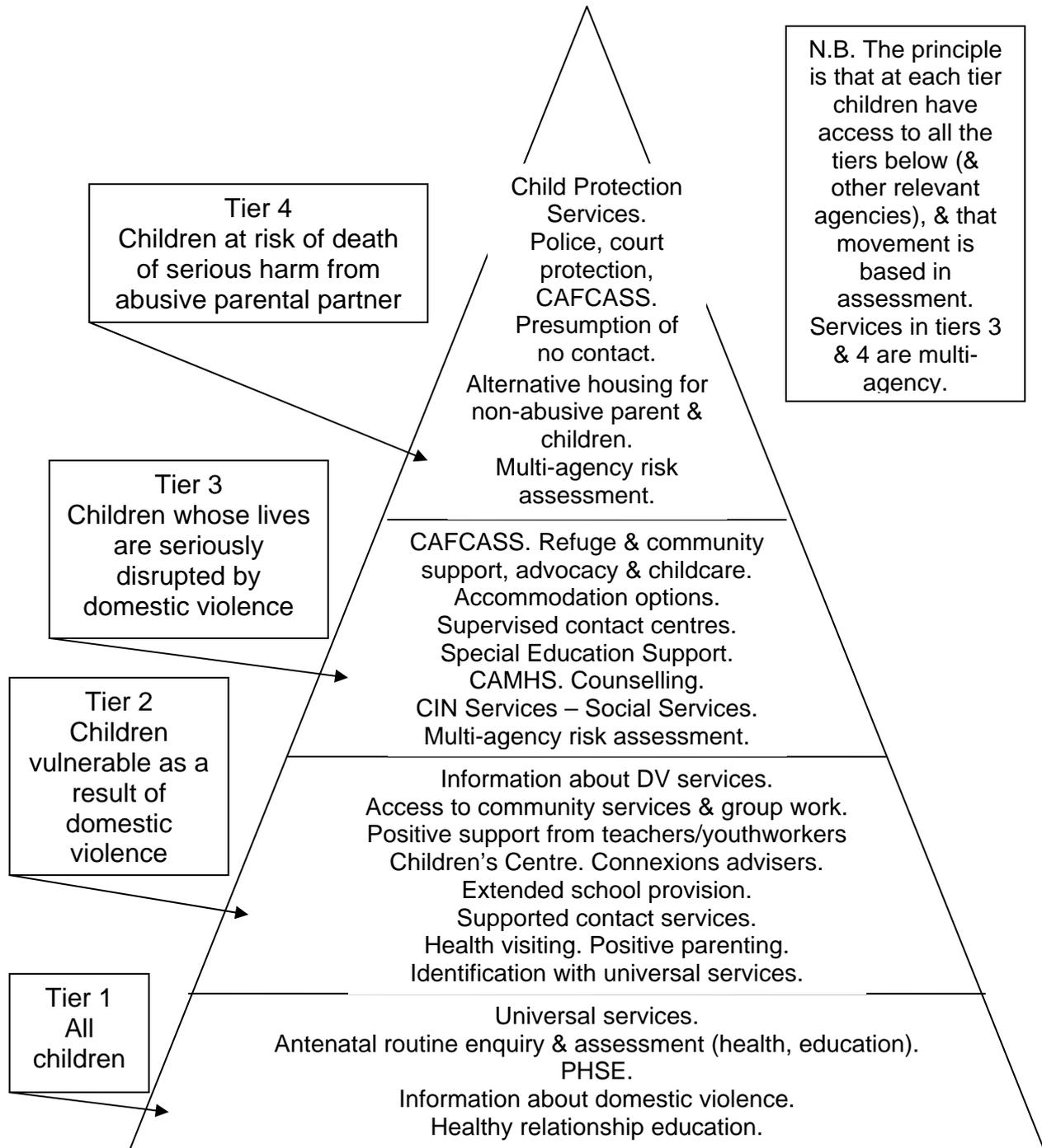
Executive Summary

- Most women had been abused by male partners or husbands, a few by family members (some as well as by partners) & one woman by her female partner.
- Women reported very similar tactics used against them by their male (ex)partners or family members. Always a mix of psychological, physical, financial & sexual violence/abuse & always a pattern of coercive &/or manipulative behaviour designed to control them.
- Women experienced difficulties after leaving the relationship, specifically: post separation violence (abuser continues abuse after relationship ends); poverty; & lack of support.
- There is still much stigma & shame around the label of being a “victim” of domestic violence. Women felt guilty for the abuse perpetrated against them & often blamed themselves.
- Women do not always identify their experiences as domestic violence or themselves as experiencing this. Professionals need to develop sensitive & supportive ways of asking, information needs to be everywhere that actually explains the behaviours.
- Women expressed that they need a sensitive & professional approach, sometimes over some time, to build up trust. There are still problems with women not being believed by agencies when they disclose, also women are still being blamed or judged for the abuse perpetrated on them.
- Women were very complementary about the support from the specific domestic violence services, citing them as the only services that consistently meet their needs. Most of the specialist domestic violence projects (e.g. refuges, community-based services), are based in the voluntary sector. Many women stated they would not have been alive, safe, supported or kept informed without these services.
- Generally, women did not feel adequately protected by the statutory agencies & feel that these particular systems fail them in this regard. These services were acknowledged as generally better “these days” but a consistent professional response is still experienced as hit & miss.
- The women stressed the devastating impact of psychological abuse & the difficulty in getting help to address this. Therapeutic help was greatly valued, especially quick referral to counselling.
- Long term recovery needs to be addressed, especially with regard to post traumatic stress disorder & impacts on mental health, e.g. panic attacks; women also reported feeling like a different person, underlining the effects on their whole selves.

- There are specific problems around: lack of help & support for children; being kept safe, informed & supported throughout the Criminal Justice response; being offered appropriate help by generalist agencies; lack of sign-posting to appropriate support agencies & lack of availability of housing (especially emergency accommodation). For black & minority ethnic women there are further problems with: no recourse to public funds, therefore to refuge space & benefits; length of time taken to sort out legal status; lack of availability of interpreting & information.
- There was some evidence of unsuitable interventions from some services, e.g. coercion for women to leave a relationship. Sometimes agencies were operating at odds with each other in that interventions contradicted each other, e.g. ordered child contact undermining efforts to escape abuse.
- There are few or no interventions aimed at abusers/perpetrators, and at making them accountable for their actions.
- Women reported varying responses from family & friends; some found informal help life-saving or invaluable; some received limited understanding & support; others experienced outright hostility. Some women (especially rural & black & minority ethnic women) faced disapproval or difficulties on a wider community basis.
- Some women recommended new services but others stressed that we have plenty of services, they just need to be working more effectively with women & children. Women recommended:
 - More publicity, more information sources.
 - Easy access to English classes with crèche facilities.
 - More confidential places to meet.
 - More opportunities to meet other women in the same situation.
 - Transport to & more access to safe places.
 - Help to talk to children about experiences.

Appendix C

Tiers of need & intervention: adapted from Hardiker, Exton & Barker 1991 in “Vision for services for children and young people affected by domestic violence”
<http://www.lga.gov.uk/Documents/Publication/visionforservices.pdf>



CAFCASS – Children and Family Court Advisory and Support Service
 CAMHS – Child & Adolescent Mental Health Services
 CIN – Children in Need
 PHSE – Personal, Social and Health Education

Appendix D

SOURCES OF INFORMATION

- Cheshire Domestic Abuse Partnership Strategy 2006-2009
(<http://www.cheshire.gov.uk/NR/rdonlyres/C78D9506-D25D-4B54-86FB-8F32819258D8/0/FinalStrategy.doc>)
- Domestic Violence & Child Protection: Directions for Good Practice, eds. Humphreys & Stanley 2006.
- Making the Grade: An independent analysis of Government initiatives on violence against women 2005
(<http://www.endviolenceagainstwomen.org.uk/documents/Making%20the%20Grade.pdf>)
- Respect Statement of Principles & Minimum Standards
(http://www.respect.uk.net/respect_docs/Respect%20Statement%20of%20Principles%20and%20Minimum%20Standards%20of%20Practice%202004.pdf)
- Rethinking Domestic Violence: The Social Work & Probation Response, Audrey Mullender 1996.
- The Cost of Domestic Violence: Sylvia Walby 2004
(http://www.womenandequalityunit.gov.uk/research/cost_of_dv_Report_supt04.pdf)
- The Second London Domestic Violence Strategy 2005
(http://www.london.gov.uk/mayor/strategies/dom_violence/strategy2.jsp)
- What a Waste: the case for an integrated violence against women strategy, Liz Kelly & Jo Lovett 2005
(<http://www.endviolenceagainstwomen.org.uk/documents/What%20a%20Waste.pdf>)
- Work by Praxis International on Safety & Accountability Audits
(http://www.praxisinternational.org/SA_frame.html)
summary at <http://data.ipharos.com/praxis/documents/audit.doc>
- The 5th report of the Confidential Enquiry into Maternal Deaths 'Why Mothers Die 1997 -1999' published Dec 2001 (RCOG Press)
recommended that: 'All pregnant women should be routinely asked about domestic violence as part of their social history and should have the opportunity to discuss their pregnancy with a midwife in privacy without their partner present at least once during the antenatal period' (p 15).