

NORTH EAST LINCOLNSHIRE SAFEGUARDING CHILDREN BOARD  
**DOMESTIC VIOLENCE AND ABUSE**

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## 1. DEFINITION

The definition of domestic violence and abuse now includes young people aged 16 - 17 and aims to increase awareness that young people in this age group do experience domestic violence and abuse.

"Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass but is not limited to the following types of abuse:

- Psychological;
- Physical;
- Sexual;
- Financial;
- Emotional.

Controlling behaviour is: a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

Coercive behaviour is: an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim."

This definition includes Honour Based Violence, Female Genital Mutilation and Forced Marriage, and is clear that victims are not confined to one gender or ethnic group.

While the cross-government definition above applies to those aged 16 or above, 'Adolescent to parent violence and abuse' (APVA) can involve children under 16 as well as over 16. See: **Information Guide: Adolescent to Parent Violence and Abuse (APVA), Home Office.**

Where there is Domestic Violence and Abuse, the wellbeing of the children in the household must be promoted and all assessments must consider the need to safeguard the children, including unborn child/ren.

For more details of the national plans to tackle domestic violence and abuse - see: **Ending Violence against Women and Girls Strategy 2016 – 2020, March 2016.** This is intended to set out a life course approach to ensure that all victims – and their families - have access to the right support at the right time to help them live free from violence and abuse.

## 2. RISKS

The emotional responses of children who witness domestic violence and abuse may include fear, guilt, shame, sleep disturbances, sadness, depression, and anger (at both the abuser for the violence and at the other parent for being unable to protect them).

Physical responses may include stress-induced aches and pains, bedwetting, and inability to concentrate. Some children are the direct victims of other types of abuse or injured while trying to intervene on behalf of their parent or sibling.

The behavioural responses of children who witness domestic violence and abuse may include acting out, withdrawal, or anxiousness to please. A change in achievement or behaviour at school can be an indicator of problems at home.

Domestic violence and abuse may have a long term psychological and emotional impact in a number of ways:

- Children may be greatly distressed by witnessing (seeing or hearing) the physical and emotional suffering of a parent, or witnessing the outcome of any assault;
- Children may be pressurised into concealing assaults, and experience the fear and anxiety of living in an environment where abuse occurs;
- The domestic violence and abuse may impact negatively on an adult victim's parenting capacity;
- Children may be drawn into the violence and themselves become victims of Physical Abuse.

For children living in situations of domestic violence and abuse, the effects may result in behavioural issues, absence from school, difficulties concentrating, lower school achievement, ill health, bullying, substance misuse, self-harm, running away, anti-social behaviour and physical injury, difficulties in forming friendships/relationships.

During pregnancy, domestic violence and abuse can pose a threat to an unborn child as assaults on pregnant women often involve punches or kicks directed at the abdomen, risking injury to both the mother and the foetus. In almost a third of cases, domestic violence and abuse begins or escalates during pregnancy and it is associated with increased rates of miscarriage, premature birth, foetal injury and foetal death. The mother may be prevented from seeking or receiving anti-natal care or post-natal care. In addition if the mother is being abused this can affect her attachment to her child, more so if the pregnancy is a result of rape by her partner.

Young people themselves can be subjected to domestic violence and abuse perpetrated in order to force them into marriage or to punish him/her for 'bringing dishonour on the family'. This abuse may be carried out by several members of a family increasing the young person's sense of isolation and powerlessness.

## 3. INDICATORS

Professionals should be alert to the signs that a child or adult may be experiencing domestic violence and abuse, or that a partner may be perpetrating domestic violence and abuse. Professionals should always consider during an assessment the need to offer children and adults the opportunity of being seen alone and ask whether they are experiencing, or have previously experienced, domestic violence and abuse.

Professionals who are in contact with adults who are threatening or abusive to them need to be alert to the potential that these individuals may be abusive in their personal relationships and assess whether domestic violence and abuse is occurring within the family.

Considerations in assessments where domestic violence and abuse may be present include:

- Checking whether domestic violence and abuse has occurred whenever child abuse is suspected and considering the impact of this at all stages of assessment, enquiries and intervention, this should include

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checks with the Police unit responsible for vulnerable people and any domestic violence and abuse screening process;

- Identifying those who are responsible for domestic violence and abuse, in order that relevant family law or criminal justice responses may be made;
- Providing victims with full information about their legal rights, and about the extent and limits of statutory duties and powers;
- Helping victims and children to get protection from violence, by providing relevant practical and other assistance;
- Supporting non-abusing parents in making safe choices for themselves and their children;
- Taking into account that there may be continued or increased risk of domestic violence and abuse towards the abused parent and/or child after separation especially in connection with post-separation child contact arrangements;
- Working separately with each parent where domestic violence and abuse prevents non-abusing parents from speaking freely and participating without fear of retribution;
- Working with parents to help them understand the impact of the domestic violence and abuse on their children.

### 4. PROTECTION AND ACTION TO BE TAKEN

The Domestic violence and abuse is a complex issue that needs sensitive handling by a range health and social care professionals. The cost, in both human and economic terms, is so significant that even marginally effective interventions are cost effective. (NICE 2014)

Working in a multi-agency partnership is the most effective way to approach the issue at both an operational and a strategic level. Initial and ongoing training and organisational support is also needed. (NICE 2014)

When responding to incidents of domestic violence, the practitioner should always find out if there are any children in the household or any children who would normally live in the household. The Police or other agencies should ensure the children are seen and their safety established whenever they attend a domestic violence and abuse incident. Where there are concerns a referral should be made to Children's social care in accordance with the Referrals Procedure.

The following guidance is based on the pan London LSCB Risk Matrix, which explores areas of risk and protective factors in relation to perpetrators, victims and children and suggests levels of intervention. The younger the children in the family, or the presence of special needs, the higher the risk to their safety. In North East Lincolnshire agencies are using the DASH risk assessment tool to help determine the level of risk to the victim of Domestic Abuse.

Babies under 12 months old are particularly vulnerable to violence. Professionals who become aware of an incident of domestic violence and abuse in a family with a child under 12 months old (even if the child was not present) or in families where a woman is pregnant, should always complete a risk assessment to determine what action is required including consideration of whether a referral to Children's social care should take place.

The following indicators are provided to aid professional judgement when assessing risk:

Level 1: Factors which may indicate the potential risk of harm to the child/ren to be moderate:

- Single or up to 3 minor incidents of physical violence which were short in duration and the victim did not require medical treatment;
- Occasional intense verbal abuse;
- Children were not present or not drawn into the incident;
- Victim's relationship to the child is nurturing, protective and stable;

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- Abuser accepts responsibility for the abuse/violence indicating remorse and willingness to engage in services to address abusive behaviour.

Level 2: Factors which may indicate the potential risk of harm to the child/ren to be moderate to serious:

- History of minor/moderate incidents of physical violence of short duration;
- Victim received minor injury that did not lead to medical attention being sought;
- Evidence of intimidation/bullying behaviour to victim but not towards the child/ren;
- Destruction of property;
- Family, relatives, neighbours report concerns regarding the victim and children;
- Intense verbal abuse;
- Abuser attempts to control victim's activities or movements;
- Children were present in the home during the incident but did not directly witness it;
- Mental health issues for victim or abuser;
- Substance misuse for victim or abuser;
- Victim's relationship to the child is nurturing, protective and stable and, despite abuse, was not prevented from attending to the child/ren's needs;
- Significant other nurturing adults in the child's life provide protective factor;
- Older children able to identify coping/ protective strategies.

At Level 2 the professional should consult with the manager/child protection adviser within their agency and check if Early Help been completed by another agency; if not, with the parents' consent, complete a refer to Early Help under local arrangements for a Early Help Assessment to be completed. If the parent does not consent to the completion of a Early Help Assessment make a notification or referral to Children's Social care services.

Planning at Level 2 must also include safety planning for the child/ren and victim and consideration of referral to an appropriate resource for the perpetrator if there is willingness to engage with services to address abusive behaviour.

Level 3: Factors which may indicate the potential risk of harm to the child/ren is assessed as serious:

- Incidents of serious and/or persistent physical violence increasing in severity, frequency and duration;
- Victim and/or children indicate that they are frightened of the abuser;
- Victim required medical attention or explanation for injuries implausible;
- Requests for police intervention;
- Incidents of violence occur in presence of children;
- Threat of harm to children/and or adult victim;
- Physical assault on a pregnant woman;
- Abuser has history of domestic abuse in previous relationships;
- Mental health issues for victim or abuser;
- Substance misuse by victim and/or abuser;
- Strong likelihood of Emotional Abuse of children e.g. may display behaviour problems/ self-harm;
- Abuser suspected of physically abusing child/ren;
- Minimisation by abuser, lack of remorse/guilt;
- The police identify the level of risk as High using assessment tools and there are children in the household.

Protection factors in these circumstances are limited and the children may have suffered, or are likely to suffer, Significant Harm. Professionals should make a record of their assessment and the information which underpins it, inform their line manager and refer to Children's social care.

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In all cases where a referral is made for a Multi-Agency Risk Assessment Conference (MARAC) to plan intervention in relation to a high risk domestic violence situation if there are children in the family, a referral must be made to Children's social care.

In situations when the adult victim has left the perpetrator taking the child/ren, professionals need to be alert to the on-going potential for risk. The dynamics of domestic violence are based on the perpetrator maintaining power and control over their partner. Challenges to that power and control, for example, by separation may increase the likelihood of escalating violence. Statistically the period following separation is the most dangerous time for serious injury and death. Professionals in contact with children and their families in these cases would need to consider:

- The previous level of physical danger to the adult victim and in particular the presence of the child during violent episodes;
- The previous pattern of power, control and intimidation in addition to the physical violence;
- The level of coercive or manipulative behaviour of the parent who was violent;
- Any threats to hurt or kill family members or abduct the child/ren;
- Any information about parental drug or alcohol misuse, or poor mental health;
- Any reported stalking or obsession about the separated partner or the family;
- The motivation of the parent in seeking/ maintaining contact with the child/ren - is it a desire to promote the child's best interest or as a means of continuing intimidation, harassment or violence to the other parent;
- The child/ren's views about contact and whether they have any worries about the contact taking place;
- Has there been a shared decision regarding the arrangements for contact including location;
- The likely or reported behaviour of the parent during contact and its effect on the child;
- The partner's level of care and supervision of the child/ren in the past;
- The attitude of the parent to their past violence and capacity to appreciate its effect, and whether they are motivated and have the capacity to change;
- Be alert to cultural issues when dealing with ethnic minority victims and that, in leaving a partner, they may be ostracised by family, friends and the wider community increasing the risks to their safety.

The Serious Crime Act 2015 created a new offence of controlling or coercive behaviour in intimate or familial relationships. Controlling or coercive behaviour does not relate to a single incident, it is a purposeful pattern of behaviour which takes place over time in order for one individual to exert power, control or coercion over another. Such behaviours might include:

- Isolating a person from their friends and family;
- Depriving them of their basic needs;
- Monitoring their time;
- Monitoring a person via online communication tools or using spyware;
- Taking control over aspects of their everyday life, such as where they can go, who they can see, what to wear and when they can sleep;
- Depriving them of access to support services, such as specialist support or medical services;
- Repeatedly putting them down such as telling them they are worthless;
- Enforcing rules and activity which humiliate, degrade or dehumanise the victim;
- Forcing the victim to take part in criminal activity such as shoplifting, neglect or abuse of children to encourage self-blame and prevent disclosure to authorities;
- Financial abuse including control of finances, such as only allowing a person a punitive allowance;
- Threats to hurt or kill;
- Threats to a child;
- Threats to reveal or publish private information (e.g. threatening to 'out' someone);

- Assault;
- Criminal damage (such as destruction of household goods);
- Rape;
- Preventing a person from having access to transport or from working.

## 5. DOMESTIC VIOLENCE PROTECTION ORDERS AND THE DOMESTIC VIOLENCE DISCLOSURE SCHEME (CLAIRE'S LAW)

### DOMESTIC VIOLENCE PROTECTION ORDERS

Domestic Violence Protection Orders (DVPOs) were implemented across England and Wales in March 2014.

They provide protection to victims by enabling the police and magistrates to put in place protection in the immediate aftermath of a domestic violence incident.

With DVPOs, a perpetrator can be banned with immediate effect from returning to a residence and from having contact with the victim for up to 28 days, allowing the victim time to consider their options and get the support they need.

Before the scheme, there was a gap in protection. If the police couldn't charge the perpetrator due to lack of evidence there was no protection offered in the form of bail conditions, in addition injunctions took time to obtain.

### DOMESTIC VIOLENCE DISCLOSURE SCHEME ('CLARE'S LAW')

The Domestic Violence Disclosure Scheme (DVDS) (also known as 'Clare's Law') commenced in England and Wales in March 2014. The DVDS gives members of the public a formal mechanism to make enquires about an individual who they are in a relationship with, or who is in a relationship with someone they know, where there is a concern that the individual may be violent towards their partner. This scheme adds a further dimension to the information sharing about children where there are concerns that domestic violence and abuse is impacting on the care and welfare of the children in the family.

Members of the public can make an application for a disclosure, known as the 'right to ask'. Anybody can make an enquiry, but information will only be given to someone at risk or a person in a position to safeguard the victim. The scheme is for anyone in an intimate relationship regardless of gender.

Partner agencies can also request disclosure is made of an offender's past history where it is believed someone is at risk of harm. This is known as 'right to know'.

If a potentially violent individual is identified as having convictions for violent offences, or information is held about their behaviour which reasonably leads the police and other agencies to believe they pose a risk of harm to their partner, the police will consider disclosing the information. A disclosure can be made if it is legal, proportionate and necessary to do so.

## 5. ISSUES

There are many risk assessment models and 'tools' available. Practitioners need to be confident that the use of a particular tool has been adopted and supported by the agencies in their area. Any assessment tool is both culturally sensitive and also explicitly considers the risks to children and is not exclusively adult focused. In North East Lincolnshire agencies are using the DASH risk assessment tool to help determine the level of risk to the victim of Domestic Abuse.

The full extent of the impact on children of exposure to domestic abuse is often not fully understood until a child feels safe; they will need several opportunities over a period of time to talk about their experiences.

Children can also experience domestic violence and abuse within their own relationships. Girls are more likely than boys to report experiencing abuse in their intimate relationships, and younger adolescents are just as likely as older adolescents to experience it. Most children do not tell an adult about this abuse.

The issue of domestic violence and abuse should only ever be raised with a child or mother when they are safely on their own and in a private place.

Information from the public, family or community members must be taken sufficiently seriously by professionals in statutory and voluntary agencies. Recent research evidence indicates that failure to do so has been a contributory factor in a significant number of cases where a child has been seriously harmed or died.

Risk of violence towards professionals should be considered by all agencies who work in the area of domestic violence and abuse and assessments of risk should be undertaken when necessary. It is acknowledged that intimidatory or threatening behaviour towards professionals may inhibit the professional's ability to work effectively. The importance of effective supervision and management is highlighted and agencies should take account of the impact or potential impact on professionals in planning their involvement in situations of domestic violence and abuse.

## 6. FURTHER INFORMATION

**NE Lincs SCB Domestic Abuse Webpage**- this includes the Domestic Abuse Strategy and Practice Guidance

**SafeLives**

**Multi-Agency Risk Assessment Conferences (MARAC)**

**The Hideout** - a resource created by Women's Aid to help children understand domestic violence

**Royal College of Nursing - Domestic Abuse: Professional Resources** - which covers resources providing guidance and advice for anyone who will encounter people impacted by domestic abuse

**NICE PH 50 Domestic Violence and Abuse** - various tools and guidance

**Responding to domestic abuse: a resource for health professionals (DOH 2017)** - looks at how health professionals can support adults and young people over 16 who are experiencing domestic abuse, and dependent children in their households.

**Statutory Guidance Framework: controlling or coercive behaviour in an intimate or family relationship**

**Domestic Violence Disclosure Scheme (GOV.UK)**

**Ending Violence against Women and Girls Strategy 2016 – 2020, March 2016**