

THINK FAMILY
Safeguarding

improving lives

Oxleas
NHS

Recognising and Responding to Domestic Abuse, an introduction

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Need to talk?

- Call CiC (confidential in care)(free) on 0800 085 1376
- Your GP
- The Samaritans 116 123
- National Domestic Abuse Helpline 0808 2000 247
- National Association for People Abused in Childhood 0808 801 0331

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Purpose of the Session:

- What is Domestic Abuse (DA)? A definition and exploration of types of DA
- Asking routinely about DA
- Considering an intersectional approach
- High risk factors
- How to respond to DA
- Oxleas DA strategy

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Statutory Definition of Domestic Abuse: DA Act 2021

Behaviour of a person ("A") towards another person ("B") is "domestic abuse" if— A and B are each aged 16 or over and are personally connected to each other, and the behaviour is abusive.

Behaviour is "abusive" if it consists of any of the following— physical or sexual abuse; violent or threatening behaviour; controlling or coercive behaviour; economic abuse, psychological, emotional or other abuse.

It does not matter whether the behaviour consists of a single incident or a course of conduct.

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Who does this affect?

Anyone can experience Domestic Abuse (DA) regardless of gender, age, sexuality or ethnicity, however women are more likely to be seriously harmed or die as a result of domestic abuse.

There are some groups of people who are more likely to be victims of abuse including those people who are deaf or disabled, have poor mental health, those identified as LGBTQ+, young people and older people.

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Domestic Abuse Data (known)

Approximately 1 in 15 children under the age of 17 live in households where a parent is a victim of domestic abuse.

Around one in four women aged 16 to 74 had been a victim of domestic abuse in their lifetime, compared with around one in seven men.

It is estimated that the social and economic costs of domestic abuse to be in the region of £78 billion (2022).

2 women a week are killed by their partner (ex partner)

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Types of Domestic Abuse

- **Intimate partner abuse**-most commonly takes place in intimate partner relationships, including same sex relationships.
- **Abuse by family members** - may also be perpetrated by a family member: by children, grandchildren, parents, those with "parental responsibility", siblings, or extended families including in-laws
- **Child-to-parent abuse** - Also commonly referred to as Adolescent to Parent Violence/Abuse. Can be adult children. Includes abuse toward siblings, grandparents, aunts, uncles as well as other family members such as those acting as kinship carers.

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Coercive Control

A pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim. This controlling behaviour is designed to make a person dependent by isolating them from support, exploiting them, depriving them of independence and regulating their everyday behaviour.

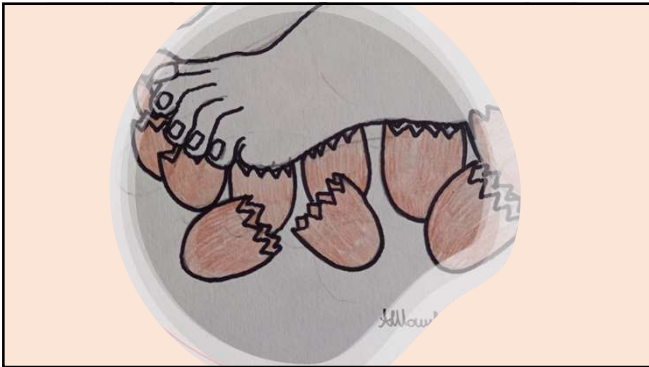


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Coercive Control



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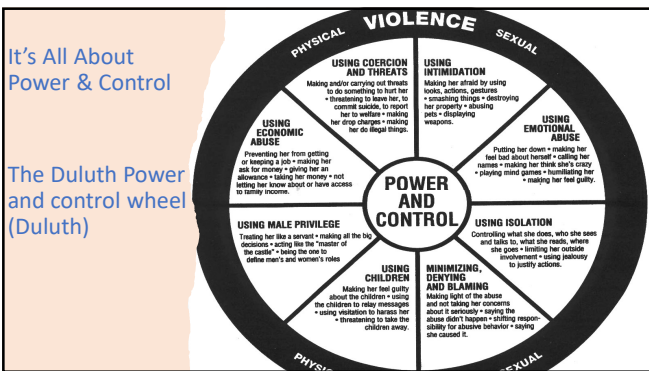


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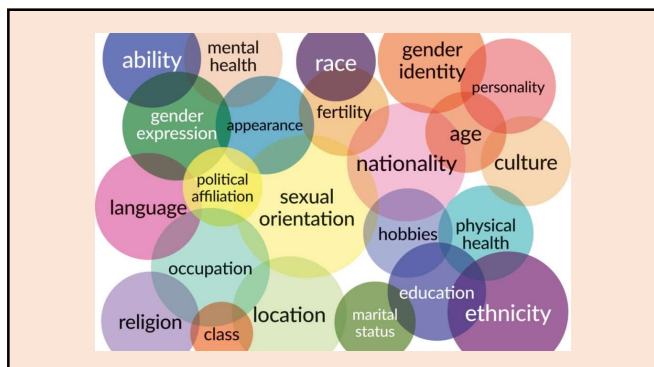
Economic Abuse

- Limit access to Wifi, phone line, finance for mobile
- Control heating thermostat
- Create debt to impact credit rating
- Take out loans without victims being fully aware
- Refuse to sign papers , unable to move
- Housing in perpetrators name
- Cancel insurance policies including car , so can't drive
- No money for bus or petrol
- Stop child maintenance/ limit money for children's needs
- No pet food/ insurance /vet bills

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1.1 Oxleas DA Policy 2023
 Oxleas NHS Foundation Trust will support staff in the identification and management of Domestic Abuse (DA) issues. The safety of members of staff and service users will be seen as a priority and identification of risk will be a core business for the Trust.

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What can I do?

- It is important that we **ask about DA within assessments routinely** (routine/safe enquiry) when safe to do so.
- Repeated findings from domestic homicide reviews have highlighted that **health professionals can offer patient survivors a safe place to disclose and seek support at an earlier opportunity** (Pathfinder 2020).

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Identify

- Injuries with poor or no explanation and minimised or concealed injuries.
- A partner or family member who is unwilling to allow the person to be alone with professionals.
- Anxiety, depression and being withdrawn, particularly if this is not usual for the person.
- Increased contact with health professionals with non-specific history.
- Poor engagement with services. This may relate to the trauma the victim has experienced, or being denied access by the perpetrator (including withdrawal or money to travel or telephones).

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Is it safe to ask?

- Is the client alone? This includes children over the age of 2
- Always use an interpreter to ask about DA
- Consider how safe remote access may be

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ASK

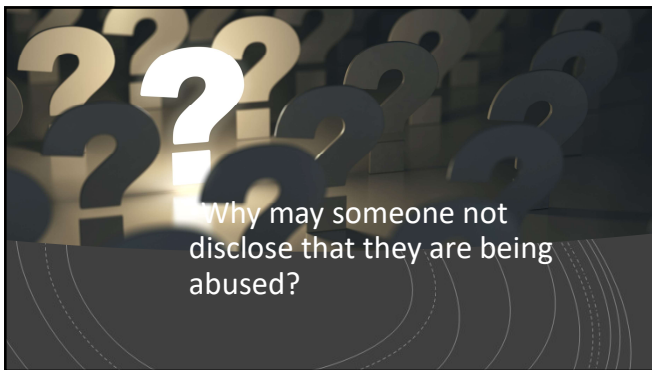
- **Framing your assessment carefully** will ensure you are able to ask all clients about their risk of domestic abuse when safe to do so. All clients may be at risk of domestic abuse and it is suggested that they may need to be asked many times before a disclosure is made.
- **Firstly, normalise your question**
As we are aware that many people are harmed by those they have a relationship with, such as partners or family members, so we ask all our clients about their possible experiences.
- **Possible** Questions to ask (this needs to be clear and direct):
- *"Has anyone close to you made you feel frightened?"*
- *"Has anyone close to you ever hurt you?"*
- *"Does anyone close to you bully you, control you or force you into things?"*

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Ask additional direct questions to adults with care and support needs

- "Has anyone prevented you from getting, food, clothes, medication, glasses, hearing aids or medical care?"
- "Has anyone prevented you from being with the people you want to be with?"
- "Has anyone tried to force you to sign papers against your will?"
- "Have you been upset because someone talked to you in a way that made you feel ashamed or threatened?"
- "Has anyone taken money belonging to you?"
- If someone has an injury asking them "Did someone do this to you?" is more likely to support disclosure than a more general question such as "How did you hurt yourself?"

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Validate



- Listen
- **I BELIEVE YOU**
- You have the right to live free from violence and abuse
- Abuse is not your fault
 - You are not alone
- We can help you find support
- Holding perpetrator to account

"[When you tell them that you have been sexually abused] you need someone to say 'I believe you'. That's the most important thing. Anything after that is great."

Survivor. The report of the Taskforce on the Health Aspects of Violence Against Women and Children, March 2019

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Assess- High risk factors

- Recent separation or intention to leave
- Pregnancy or young child
- Escalation of abuse
- Cultural isolation
- Threats to kill (self or victim/family)
- Use of weapon
- Stalking or harassment (Harassment includes repeated attempts to impose unwanted communications and contact upon a victim in a manner that could be expected to cause distress or fear) sexual abuse, threats to kill or strangulation.

- If trained and confident to do so, complete a Safelives/DASH risk assessment to support professional judgement of risk

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Think family

- Are children present, names, ages. Are they in regular contact or living in the family home?
- Children are victims of DA by either being directly harmed by the perpetrator of the abuse, or by the harm caused by witnessing the abuse of others (even if not seen) (DA Act 2021).
- Always consider needs of family members within risk assessments.
- [Follow Oxleas' safeguarding children policy](#) to ensure children remain safe from harm (Children Act 1989, Working Together to Safeguard children 2023).

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Act

- If the situation is urgent (risk of immediate harm) - call 999
- Follow the trust safeguarding adult and children policies to ensure the victim and family are safe from harm.
- Do not tell the victim to leave as they are at most risk of harm when leaving the perpetrator.
- Check if they are safe to go home as refuge provision may be needed (via DA services)
- Choice – survivors are supported in taking control of their lives. The first step is enabling survivors to choose how they access the support that is offered. Empowerment

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Refer

- If high risk refer to MARAC (Multi Agency Risk Assessment Conference). If unsure call the local DA service provider or Oxleas Safeguarding Team (01322625009)
- Direct or refer victim/perpetrator (if safe to do so) to local DA services for further support.
- Follow adult /children safeguarding processes (section 42, Care Act) MASH referral (Multiagency safeguarding hub/ LA front door
- Follow up disclosure to ensure the person has accessed the support required.

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Record

- Practitioners must not reinterpret or reword the experience of domestic abuse victims. They must use the person's own words to describe what they have said has happened (adult and child)
- Practitioners must not use language such as 'claims or alleges' when a person reports domestic abuse. To do so minimises and diminishes the experience of the adult and child living with the impact and trauma caused by abuse. While it is for the court to determine the facts, it is important that practitioners set out exactly what has been said . Record **"he/she /they told me"**

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Oxleas response

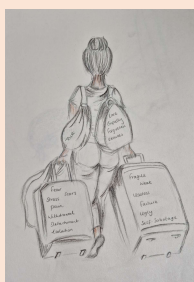
- Service users voice
- Staff DA guidance handbook and DA policies including staff DA policy
- CYP focus
- Posters and intranet awareness raising
- Training /updates for all staff
- Embedded DA routine enquiry
- Posters in client facing areas for access to DA service details
- MARAC review
- DA Champions network (inc staff voice of lived experience)
- Learning from Domestic Abuse Related death reviews (DARDRs, previously DHRS)

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Standing together against domestic abuse

I am not defined by the baggage I carry, but by the courage to keep moving forward, I carry my past, yet I walk towards healing with my head held high.



be kind
be fair
listen
care

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Looking after yourself

- Be aware of your own needs. If you have experienced or know someone who has experienced DA this can impact on your own feelings and wellbeing and potential ability to help (re traumatising).



- Use supervision for emotional support and planning.

- Access local DA services, CIC, HR as needed.

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Local DA Flow chart

- [Domestic Abuse – Pathway](#)
- Intranet resources – Go to the Ox
- [Domestic Abuse \(The Ox\)](#)

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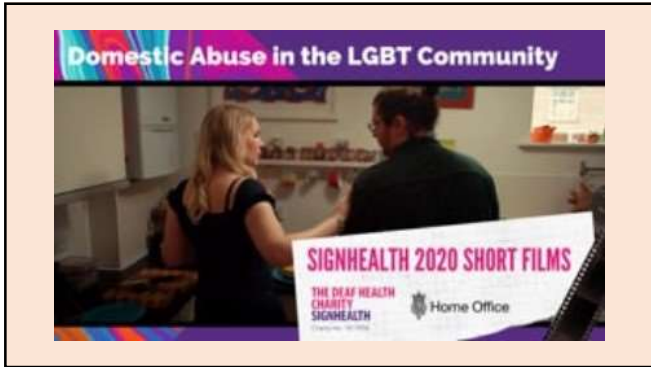
we're **kind** we're **fair** we **listen** we **care**

Please do share any ideas or feedback you may have to continue to embed good practice across our organisation.

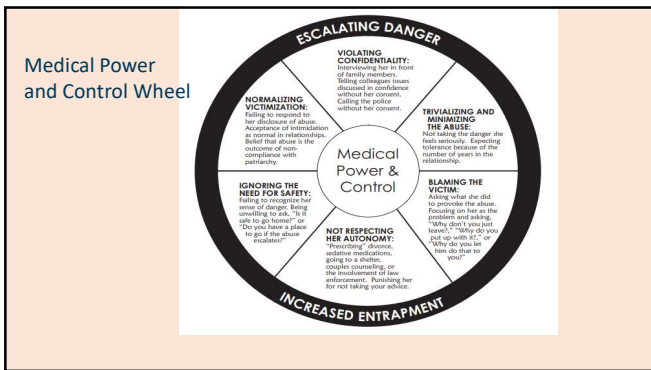
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