

Multi-agency Domestic Abuse Handbook/Protocol Resource pack for practitioners

Rotherham 2021

Rotherham
Metropolitan
Borough Council



The Safer Rotherham
PARTNERSHIP

Date	Amended by	Job role	Next review date
15.2.18	Amanda Raven	DA Coordinantor	
26.7.18	Amanda Raven	DA Coordinator	2019
11.11.21	Amanda Raven	DA Theme Lead	2021

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Chairs Statement

Domestic abuse is a hugely damaging problem which impacts on both adults and children and requires a structured and co-ordinated response. It is deeply embedded in some communities so that victims, perpetrators and children may not even recognise or define their experience as domestic abuse and this constitutes a barrier to seeking help.

Evidence tells us that domestic abuse is a key indicator for child abuse and neglect and has also been found to co-exist with child sexual abuse. There are also a worrying number of domestic abuse incidents involving older people, including abuse by partners, sons, daughters and other family members.

Vision

In Rotherham we do not tolerate domestic abuse and as agencies, we will consistently:

- Identify risk
- Work to protect victims
- Address offending behaviour

In communities, we will promote the value of positive relationships and identify need, in order to focus on preventing conflict and abusive behaviours. Our services will work together to be responsive, evidence based and informed by those affected.

Rotherham's approach seeks to focus on improving the quality of relationships in the borough, whilst working to protect and support those already affected by domestic abuse.

This protocol provides front line practitioners with important information and guidance to assist them in tackling the dynamics and effects of domestic abuse and demonstrates the importance of a multi-agency response.

The Protocol is a "One Stop Shop" of resources and information that are designed for all staff and managers working within any Rotherham service that supports adults and/or children who may be affected by domestic abuse.

It outlines practical and good practice approaches for responding to adults and families who are affected by domestic abuse. This protocol should be referred to alongside internal policies and procedures and Safeguarding Board policies and procedures.

Aim

Domestic Abuse continues to be a priority for the Safer Rotherham Partnership. Through the work of the partnership, progress has been made in improving the delivery of provision; but evidence highlights that more is needed, and further improvements are required. This protocol seeks to work and focus development towards common goals. Making best use of the resources available by working together will enable a rigorous and proactive approach to improving the quality of relationships across Rotherham and reducing harm caused by domestic abuse.

Domestic Abuse has a significant impact on individuals, families, and our communities. It also has major implications for service providers and agencies across Rotherham and increases the demand on our services and organisations. Nationally, nearly 1 million women experience at least one incident of domestic abuse each year. 1 in 10 men report they have experienced domestic abuse, and at least 750,000 children a year witness domestic abuse. Accordingly, staff working within our universal and targeted services, as well as the general public, can be affected; whether through intimate partnerships, family members, friends, or our colleagues at work.

By working together, we can:

1. Reduce the number of people who experience domestic abuse;
2. Reduce the length and severity of abuse for victims;
3. Reduce the number of perpetrators of domestic abuse through prevention programmes and criminal justice interventions.
4. Create a culture that never tolerates domestic abuse

The guidance outlined in this document recognises that our priority in this area is the safeguarding of children and vulnerable adults. It does not replace existing safeguarding children or adults procedures. As such, this protocol should be read in conjunction with;

- **Multi-agency Risk Assessment Conference (MARAC) Operating Protocol.**
- **Multi-agency Safeguarding Children Board Policies and Procedures**
- **Multi-agency Safeguarding Adults Board Policies and Procedures**
- **Agency policies and procedure**

Definition of Domestic Abuse (2019)

The cross-government definition of domestic violence and abuse is:

Any incident or pattern of incidents of controlling, coercive, 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. The abuse can encompass, but is not limited to:

Psychological/Emotional – intimidation and threats, e.g. about children or family pets, social isolation, verbal abuse, humiliation, constant criticism, enforced trivial routines, marked over intrusiveness.

Physical – slapping, pushing, kicking, stabbing, damage to property or items of sentimental value, attempted murder, or murder.

Sexual - Any non-consensual sexual activity, including rape, sexual assault, sexual exploitation, refusing safer sex, or human trafficking.

Financial - stealing, depriving, or taking control of money, running up debts, withholding benefits books or bank cards.

Controlling behaviour: 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: 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, which is not a legal definition, includes so called 'honour' based violence, female genital mutilation (FGM) and forced marriage, and is clear that victims are not confined to one gender or ethnic group.

Background

Domestic Abuse affects thousands of women, men and children every day. National statistics state that there is a report of domestic abuse to the police every minute. It is known that much domestic abuse goes unreported and that these figures represent just a quarter of the estimated number of victims.

29% of male victims do not tell anybody about the abuse they endure, compared to 17% of female victims.

Tackling domestic abuse is a priority in Rotherham with agencies committed to heightening awareness of domestic abuse and providing guidance and support for practitioners and managers to reduce the occurrence of domestic abuse and its effects on the communities they serve.

Domestic Abuse - Rotherham (2020)

Whilst we know that Rotherham is a unique place with its own identity and history, there are many parallels in relation to domestic abuse when comparing with the national picture.

The police recorded a total of 1,3 million domestic abuse-related incidents and crimes in the year 2020.

In 2020, South Yorkshire Police received 6,878 calls relating to domestic abuse for Rotherham. The Home Office Reckoner suggest over 20,000 women and girls in the Rotherham area have suffered abuse in their lifetime. The suspected underreporting is something we need to understand more.

The satisfaction rate in relation to how Police manage domestic abuse, has remained at 81% from 2017 to 2020.

There were 1465 victims who accepted support from Domestic Abuse services. With 556 cases being discussed at MARAC. There is a continuing challenge for services to meet demand effectively.

During 2019-2020, there were 3,941 contacts for families to the early help Service, with 'family relationships' being amongst the top three cited needs. Almost a third (32.5%) of cases are identified by social care services or the police, suggesting missed opportunities for earlier identification and intervention. Young people are also at risk of suffering or perpetrating domestic abuse within teenage relationships, according to a report conducted by the South Yorkshire Criminal Justice Board which made several recommendations to support closer working between domestic abuse and younger people services.

Sexual abuse and rape also occur as part of the domestic abuse in a relationship. The perpetrator can also be an acquaintance – a colleague, a friend, a neighbour – but it is rare that they are complete strangers. For many adults getting support, the abuse may have taken place when they were children. Whether the perpetrator is well known to the victim or not, the violation, shame and stigma will have a terrible impact on health and wellbeing and feeling able to seek support for the aftereffects may be a process that takes many months or years.

Professional Curiosity

Many Domestic Homicide Reviews and Serious Case Reviews refer to a lack of professional curiosity or respectful uncertainty. Practitioners need to demonstrate a non-discriminatory approach and explore the issues and formulate judgements that translate into effective actions in their dealings with children, adults, and families. This should be matched by an organisational culture which supports its staff in open-ness, constructive challenge, and confidence to practice sensitive and challenging circumstances at the front line. It is vital that professionals understand the complexity of domestic abuse and are curious about what is happening in the child, adult, and perpetrator's life.

Professional curiosity is the capacity and communication skill to explore and understand what is happening within a family rather than making assumptions or accepting things at face value.

Practitioners should never avoid asking the difficult questions, sharing concerns with colleagues or your supervisor as a "fresh pair of eyes". Looking at a case can really help to maintain good practice standards and develop a critical mind-set.

Professional curiosity is much more likely if practitioners:

- are supported by good quality training to help them develop

- have access to good management, support and supervision when working with challenging situations of domestic abuse which will impact on staff working with families
- walk in the shoes' (have empathy) of the child and/or adult to consider the situation from their lived experience
- remain diligent in working with the family and developing the professional relationships to understand what has happened and its impact on all family members

Practitioners should always try to see all parties separately. However, when that is not possible, and particularly when a victim is not being seen alone, professionals should also be alert to the following behaviours they may observe. If these signals are present, the practitioner should find a way of seeing the suspected victim alone:

- The victim waits for her/his partner to speak first
- The victim glances at her/his partner each time (s)he speaks, checking her/his reaction
- The victim smooths over any conflict
- The suspected perpetrator speaks for most of the time
- The suspected perpetrator sends clear signals to the victim, by eye/body movement, facial expression or verbally, to warn them
- The suspected perpetrator has a range of complaints about the victim, which (s)he does not defend

Staff must be cognisant to the needs of young people (aged 16 years or above) who may be experiencing inequality and/or violence in their relationships and be able to advise on their right to pursue actions under the revised guidance.

Professionals, however curious, cannot protect children and adults by working in isolation. Domestic abuse requires a multi-agency response, and families and communities also have a vital role to play in protecting children and adults. If any professional suspects or becomes aware of domestic abuse, they must notify their manager with their concerns, whether they work directly with members of the public or not.

Disguised Compliance

As part of professional curiosity, practitioners should be aware of disguised compliance and use their professional judgment to question what is really going on.

Disguised compliance can take a number of different forms and parents, adults, or perpetrators can use these techniques to avoid raising suspicions, to allay professional concerns and to delay or avoid professional intervention. Examples include:

- Focus on engaging well with one set of professionals (e.g. education,) to deflect attention from their lack of engagement with other services
- Criticise other professionals to divert attention away from their own behaviour
- Promise to take up services offered but then fail to attend

- Promise to change their behaviour and then avoid contact with professionals

If disguised compliance is suspected this should be carefully recorded with evidence.

Asking the Question

Victims of domestic abuse are often too afraid or uncomfortable to raise the issue of abuse themselves. Practitioners should be prepared to ask questions sensitively, but directly.

For example:

- Can you tell me what's been happening?
- You seem upset. How are things?
- Are you frightened of someone/something?
- How are things at home?
- Did someone hurt you?
- How did you get those injuries?
- Are you in a relationship in which you have been physically hurt or threatened by your partner?
- Have you ever been in such a relationship?
- Do you ever feel frightened by your partner or other people at home?
- Are you (or have you ever been) in a relationship in which you felt you were badly treated?

In what ways...

- Has your partner destroyed things that you care about?
- Has your partner ever threatened to harm your family? Do you believe that he/she would?
- What happens when you and your partner disagree?
- Has your partner ever prevented you from leaving the house, seeing friends, getting a job or continuing in education?
- What would happen if you wanted to go out with friends?
- Does your partner restrict your access to money or access your Child Benefit or allowances?
- Has your partner ever hit, punched, pushed, shoved or slapped you?
- Has your partner ever threatened you with a weapon?
- Does your partner use drugs or alcohol excessively? If so, how does he/she behave at this time?
- Do you ever feel you have to walk on eggshells around your partner?
- Have the police ever been involved?
- Have you ever been physically hurt in any way when you were pregnant?
- Has your partner ever threatened to harm the children? Or to take them away from you?

Basic Principles:

Make sure that the time and place is appropriate when asking the question, e.g. not when he/she is about to pick the children up, go to work or an appointment, or there are other people around. If you suspect domestic abuse, make sure that the perpetrator is not likely to interrupt you/come home. If you need to complete a risk assessment, make sure you have plenty of time - there are 27 risk factors to go through.

Risk Assessment

If you have evidence of domestic abuse, a disclosure has been made to you or an agency or a member of the public has shared concerns with you relating to domestic abuse you, or a competent practitioner within your agency, must make every effort to complete a DASH risk assessment with the victim. This will help you to explore the risks to the victim. There may be occasions when it is not possible to undertake a DASH risk assessment, e.g. victim denies there is any abuse, you don't have any evidence or the individual leaves the service before a DASH has been completed. In these circumstances you must ensure that you have tried to follow up any safeguarding concerns with the individual and, if required, followed Adult and Child safeguarding process. You should also provide information about support services and that you have carefully documented what you have done and the reason why the DASH has not been completed. Your decision needs to be defensible.

Practitioners must be aware that the responsibility for safeguarding and managing risk does not end once a referral has been made to another agency or multi agency arena.

The DASH allows professionals to assess risk relating to domestic abuse and ultimately can help determine the course of action that is required. The assessment should be carried out at once, by the practitioner who identifies the concern wherever possible and safe. Where this is not appropriate, the assessment should be carried out as soon as possible by the practitioner who identifies the concern, or the colleague identified in the organisation's internal procedures.

There are 27 questions, so please ensure that you are in a safe environment and that there is sufficient time to listen to the victim and complete the assessment. It is important that you document the answers and keep a record of the outcomes in line with your own agency protocols. Please refer to Appendix Three for the full DASH risk assessment.

Additional Factors

There are several factors that have the potential to increase the risk of abuse in relationships and accordingly increase the risk of harm to victims, children, dependents and perpetrators.

The impact of mental health problems/issues, problematic drug and alcohol use should be considered as additional risk factors which should be planned for accordingly in collaboration with the client and relevant professionals where they are involved.

It is highlighted in Serious Care Reviews and in statutory safeguarding guidance that known risk factors for families are where problematic alcohol and/or drug use and parental mental health problems co-occur with domestic abuse.

Nearly a third of mothers (31%) and a third of fathers (32%) had disclosed mental health problems, problematic drug and alcohol use, or both. (*SAFELIVES, In plain sight: The evidence from children exposed to domestic abuse, February 2014*)

What Happens Next and Referral Pathways

On completion of the risk assessment, you should decide on your course of action. The DASH risk assessment will help you to determine the most appropriate course of action and what response is required. It is important that practitioners become familiar with this risk assessment and referral pathways so that resources and intervention can be allocated accordingly.

Risk assessment and risk management will not remove the risk entirely, but it can help to reduce the probability of harm. Always consider whether you need to take any immediate action to safeguard the victim, any children or vulnerable adults, or share any information with agencies to safeguard the victim/family.

On completion of the risk assessment you will be able to make a judgment of whether the victim is at high risk of significant harm or death. This is when:

- As a guide if there are 14 'yes' answers or more
- If there is a high risk of serious harm or homicide the case should then be referred to the MARAC
- You can see escalation of the abuse, either in frequency or severity and/or;
- Using your professional judgement, you believe that the victim is high risk.

If you believe the victim to be at imminent high risk of significant harm or death and a crime has been committed you must contact the police, call 999 and make an emergency referral to the Multi-Agency Risk Assessment Conference (MARAC) and the IDVA service.

If further significant harm or death is not considered to be imminent you should still encourage the victim to report the abuse to the Police and make a referral to MARAC. If a crime has been committed, but there is no immediate danger, dial 101.

If safe to do so, tell the victim that you are making a referral to MARAC and that he/she will be contacted by an Independent Domestic Violence Advisor (IDVA). Please refer to the MARAC referral process section below.

If you do not consider the victim to be high risk of serious harm and that the risk is not imminent then you should always ensure that details of specialist domestic abuse services are provided. Please refer to the specialist services referral process below.

If there are children linked to the victim or perpetrator and you believe that a child or children are being affected by domestic abuse, then please refer to the Children's referral process below.

High Risk Referral Process (MARAC)

Multi-Agency Risk Assessment Conference (MARAC) - The MARAC process ensures a timely risk assessment of the circumstances affecting a victim of domestic abuse, ensures that those individuals believed to be at high risk of serious harm or death are linked directly with appropriate services, providing a co-ordinated multi-agency response to high risk domestic abuse cases in a single meeting.

You must tell the victim if safe to do so that you are making a referral to MARAC and that he/she will be contacted by an Independent Domestic Violence Advisor (IDVA). The role of the IDVA is to discuss risk and safety, provide information about options available and be the voice of the victim at the MARAC.

If the victim has already been heard at MARAC and there has been a further incident with the same perpetrator, a repeat referral should be made to MARAC. See the MARAC Operating Protocol for 'repeat referral' criteria and procedures.

Risk is dynamic and can change very quickly. If you feel that the victim is NOT at high risk of significant harm or death you should still, ensure that they are referred or given information about local specialist domestic abuse services. Consider whether you need to share information with any other agency to safeguard the victim/family or prevent a crime.

Specialist domestic abuse services have experienced staff that work with victims and survivors of domestic abuse. They are independent organisations, often charities, and will provide practical and emotional help and support.

If you are concerned that someone you know is experiencing domestic abuse and they are not at immediate harm, or support and advice about a concern, please contact the specialist domestic abuse services.

Adult Safeguarding Process

According to the Care Act 2014, the local authority **must** make enquiries, **or** instruct others to do so, if they reasonably suspect an adult who has care needs is experiencing, or is at risk of, abuse or neglect.

Where domestic abuse is the only presenting factor, and no other additional vulnerabilities (for example mental health issues, physical disabilities) are identified, there is no need to consider making a referral to the local authority safeguarding team. If, however, when you are talking through the questions on the DASH risk assessment with the individual, it becomes apparent that the individual may, for example, need to be assessed for adult care services, i.e. an assessment for admittance into a care home, nursing home or a re-ablement (home care package) or a well-being service – then please discuss this with your client and if they are willing for you to make a referral for this type of service.

Contact the Local Authority's Single Point of Access (SPA) on **01709 382121**. If it is outside normal office hours you can contact the Out of Hours (OHH) on **01709 822330**. The main issue is that during your conversation with the client, you identify with the clients which are the best services to assist them with the domestic abuse, their additional vulnerabilities and what the individual would like to do, in order to inform their decision-making.

For all Safeguarding Adults Policies and Procedures go to the RASB website.

Early Help for Children

The process has been designed to help practitioners assess needs at an early stage and then work with the child/young person, their family and other practitioners and agencies to meet these needs. As such, it is designed for use when:

- You are worried about how well a child / young person is progressing
- You might be worried about their health, development, welfare, behaviour, progress in learning or any other aspect of their wellbeing
- A child/young person or their parent/carer raises a concern with you
- The child's or young person's needs are unclear, or broader than your service can address alone; and/or
- The child or young person would benefit from an assessment to help a practitioner understand their needs better.

If you have any of these concerns complete an Early Help Assessment with the child and family. If you are unsure what action to take you may want to have a consultation with an Early Help Advisor - telephone Children's Services Early Help Triage **01709 336080**. As the DASH form is an assessment tool for adult victims, practitioners need to consider using a risk assessment for the child(ren) with regards to the impact of the domestic abuse. Please consider the following tools for practitioners:-

- Barnardo's 'Assessing the risks to children from domestic abuse' [Risk Identifications Matrix]
- The Signs of Safety model, incorporating the direct work tool 'The Three Houses' 'Wizards and Fairies' [Templates for working with children]
- The practitioner should also consider Safety Planning with the victim, child(ren) and young people.

Safeguarding Children Referral Process

If you believe a child or young adult under the age of 18 years might be suffering, or is likely to suffer, significant harm (including any emotional harm, mistreatment or abuse), contact the MASH (multi agency support hub) number is **01709 336080**. There are 4 options to choose from. Out of Hours is **01709 336080**. You will speak with a children's worker who will ask for details and if the concern meets the threshold then a contact will be created. As a professional you will be asked to send in writing your concerns. Once completed, this needs to be sent to the MASH referral box:

MASH-Referral@rotherham.gcsx.gov.uk

If your concern is in relation to an unborn child, then you should follow the Rotherham Safeguarding Children Board Pre-birth protocol.

For all safeguarding children policies and procedures go to the LSCB website.

Domestic Violence Disclosure Scheme (DVDS)

The Domestic Violence Disclosure Scheme is a mainly police led scheme, with two routes available 'Right to Ask' & 'Right to Know'. The applications are managed and held by South Yorkshire Police, with all applications processed and managed by the Public Protection Unit (PPU). A monthly Decision Making Forum (DMF) will ensure that all the applications are discussed within the required timeframe. Should a disclosure be agreed, the exact form of wording and how that will be delivered is managed by the Domestic Abuse Detective Sergeant.

The DV Disclosure Scheme has the following key principles:

- Introduce recognised and consistent procedures for disclosing information to persons with concerns about a current partner. It enables a current partner of a violent individual to make informed choices about whether, and how, to take forward that relationship
- Disclosure is considered if it is lawful, necessary, and proportionate to protect a potential person at risk from harm
- Disclosure **MUST** be accompanied by a robust safety plan, based on all relevant information, which delivers on-going support to the potential person at risk

As a practitioner, if you believe someone you are working with, or know, is at risk of harm and could be eligible under the scheme, you should refer a person/case to South Yorkshire Police as follows:

- Members of the public (person at risk, third party i.e. guardian, parent) telephone South Yorkshire Police on 101 (non-emergency).
- Practitioners can also refer cases they are working on if they believe a disclosure may be required by contacting the dedicated telephone line **0114 2196954**.

Should someone be at immediate risk of harm, always call 999 in an emergency. For further information on the scheme see the South Yorkshire Police website.

Information Sharing With and Without Consent

General guidance:

Knowing when and how to share information is not always easy, but it is important to get it right. Families need to feel reassured that their confidentiality is respected. In most

cases you will only share information about them with their consent, but there may be circumstances when you need to override this.

If you are not sure, but in your view there is a risk of abuse to someone, you should speak to your supervisor, safeguarding professional, or Information Governance Lead.

The Seven Golden Rules for Information Sharing:

1. Remember that the Data Protection Act is not a barrier to sharing information, but provides a framework to ensure that personal information about living persons is shared appropriately: <http://www.legislation.gov.uk/ukpga/1998/29/contents>
2. Be open and honest with the person (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.
3. Seek advice if you are in any doubt, without disclosing the identity of the person where possible.
4. Share with consent where appropriate and, where possible, respect the wishes of those who do not consent to share confidential information. You may still share information without consent if, in your judgement, that lack of consent can be overridden in the child's/adults/public interest. You will need to base your judgement on the needs of the child/adult facts of the case.
5. Consider safety and well-being: base your information sharing decisions on considerations of the safety and well-being of the person and others who may be affected by their actions.
6. Necessary, proportionate, relevant, accurate, timely and secure: ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those people who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely.
7. Keep a record of your decision and the reasons for it – whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.

Points for Consideration:

- Is there a legitimate purpose for sharing information?
- Does the information enable a person to be identified?
- Is the information confidential?
- If so, do you have consent to share?
- Is there a statutory duty or court order to share the information?
- If consent refused/there are good reasons not to seek consent
- Is there sufficient public interest to share information?
- If the decision is to share, are you sharing the right information in the right way?
- Have you properly recorded your decision?

MARAC – Information Sharing and Consent

For further guidance on information sharing please refer to the Domestic Abuse Information Sharing Agreement and the MARAC Operating Protocol.

Specific Considerations in Relation to Children and Adults – Information Sharing/Consent

- There may be circumstances where a parent is not informed that a safeguarding referral is being made if you suspect: Sexual abuse, organised abuse or fabricated illness or injury (FII).
- It isn't possible to contact parents without causing undue delay in making a referral.
- The risk of destroying evidence.
- Possibility of increased risk of domestic violence.
- Possibility of the family moving to avoid professional scrutiny.

It is always essential in safeguarding to consider whether the adult at risk is capable of giving informed consent in all aspects of their life. If they are able, their consent should be sought. This may be in relation to whether they give consent to:

- An activity that may be abusive – if consent to abuse or neglect was given under duress (e.g. as a result of exploitation, pressure, fear or intimidation), this apparent consent should be disregarded.
- A Safeguarding Adults enquiry going ahead in response to a concern that has been raised. Where an adult at risk with capacity has made a decision that they do not want action to be taken, and there are no public interest or vital interest considerations, their wishes must be respected. The person must be given information and have the opportunity to consider all the risks and fully understand the likely consequences of that decision over the short and long term.

The recommendations of an individual protection plan being put in place.

- A medical examination
- An interview
- Certain decisions and actions taken during the Safeguarding Adults process with the person or with people who know about their abuse and its impact on the adult at risk

If, after discussion with the adult at risk who has mental capacity, they refuse any intervention, their wishes will be respected *unless*:

- There is an aspect of public interest (e.g. not acting will put other adults or children at risk); and/or
- There is a duty of care on a particular agency to intervene, for example the police if a crime has been, or may be, committed.

When an agency works alongside a victim to complete a MARAC referral, their ability and capacity to give informed consent to the information within the referral should be considered. Victims must be made aware that the information shared will be discussed

with the other agencies at the MARAC meeting and these agencies will also share information which is relevant to the abuse and protection of the victim and their family.

The fact that agencies who work with the perpetrator will also receive the information needs to be made clear, the purpose of this being so that all agencies can work to protect victims and their families. Information will not be shared directly with the perpetrator without the victim's expressed consent and all agencies store this information securely and in line with the Data Protection Act (1998).

Safety Advice and Planning

It is important that all agencies work with victims to plan ahead and stay safe so that in times of crisis decisions are made easier and safer. It is expected that where an Independent Domestic Violence Advisor is not involved with the victim, the agency aware of the domestic abuse will provide the function of safety planning and advice.

Victims of domestic abuse are at increased risk when they are planning to leave a relationship or have just left.

You should be very clear about who is at risk and consider other people in the household, other friends and/or relatives. If you have identified risks, you should ensure that appropriate actions are taken to acknowledge, remove or reduce the risk of harm. This may include:

- Contacting, or supporting the victim(s) to contact the Police
- Find suitable alternative accommodation, either with a safe and trusted friend, relative or through emergency temporary housing or refuge
- Referral to Rotherham Metropolitan Borough Council Children's or Adult Services
- Liaising with partner agencies to share relevant information that may reduce the risks
- Referral to health agencies

Here is some safety advice that you could discuss with a victim.

- Dial 999 in an emergency and teach your children to call 999 in an emergency and what they would need to say (for example, their full name, address, and telephone number)
- Ask her/him to plan in advance how they might respond in different situations, including crisis situations

Think about the different options that may be available.

- Do they have trusted neighbours, friends, or family nearby where they could go in an emergency? If so, tell them what is going on, and ask them to call the Police if they hear sounds of a violent attack

- Rehearse an escape plan, so in an emergency they and their children can get away safely. Pack an emergency bag for themselves and their children and hide it somewhere safe, for example, at a neighbour's or friend's house
- Try to avoid mutual friends or family
- Try to keep a small amount of money on them at all times, including change for the telephone and for bus fares
- Ensure they have a safe mobile phone, try to keep it with them and charged up
- Keep credit on her/his phone
- Set up speed dials for emergency telephone numbers
- Memorise telephone numbers, or keep them in a place of safety
- Have Caller ID on their telephones where possible

If appropriate, set up signals or codes with neighbours and friends, for example:

- Lights on/off in a certain room
- Windows open/shut
- Blinds/curtains half shut or half open
- Sentences such as "I won't be able to come over for coffee as my Mum is here."
- Discuss with your neighbours when you would want them to call the Police (for example if they see your partner at your house)
- Pack a bag with important things that you would need if you had to leave in a hurry – this should include money, passport, medication, birth certificates and a change of clothes for children. Put the bag in a safe place or leave it with someone
- Keep any court orders, injunctions and emergency numbers with you at all times
- Diary/log any abuse including abusive calls, texts, emails, etc

If you are at home and being threatened or attacked:

- When in danger always ring 999 – you may want to ring other support agencies but remember, this may delay help arriving
- Try to stay calm and use a calm voice (even though you may not feel calm inside!)
- Do not fight back – it will make you more unsafe (although you can still defend yourself)
- Try to stay near a door/exit
- Try to stay near a phone
- Be aware of rooms with potential hazards (stairs, windows etc.)
- Be aware of rooms with weapons such as knives, blades, etc
- Exit as quickly as possible
- Go to a neighbour, friend or shop and seek medical help if needed

If you do leave in a hurry without taking important things, don't worry. Agencies can help you to retrieve them at a later date.

Keeping yourself safe at work

- Tell your line manager what is happening – you may be able to change duties/venue if necessary
- If possible, give a copy of the abuser's photo to the security guard or reception staff
- Keep a copy of any court order, injunctions etc. at work
- Report any incidents to your line manager
- Do not go to lunch alone
- Ask someone to walk you to the car or bus
- Diary or log any contact that the abuser has with you at work via telephone, e-mails, visits, etc

Staying safe in your car

- Check around visually while you are parking the car and also before you get out
- Park your car so you can drive straight off without making any manoeuvres, for example reverse into parking spaces and don't park behind closed gates
- Park as near to a street light as possible
- Keep the doors locked when driving and remember that when you have windows open fully anyone can reach in
- Always check water to avoid breaking down
- Join a breakdown organisation, or keep the number of someone you can call in the event of a breakdown
- Keep your mobile phone charged, in credit and in reach (i.e. not at the bottom of a cluttered bag)
- If you are not sure about finding your destination, get the directions before you set out

Safety when walking alone

- Walk as confidently as possible – hold your head up and try not to look frightened
- Don't walk down alleyways, short cuts, or across wasteland
- Stick to routes that are well lit and near to residential areas if possible
- If possible, tell someone where you are going, which way you are going and when you are expected to arrive
- Keep your mobile phone charged, in credit and handy in a pocket or at the top of your bag
- Have a torch with you and keep the batteries charged up. Check that it still works from time to time
- Have a personal alarm with you if the Police or a domestic abuse agency has provided you with one

Safety planning and children

- Talk to the children about what is going on – whatever you may think, children do know about it and do hear it. If you don't talk to them, they will come to their own conclusions which may not be accurate
- Try to be honest without frightening them
- Talk to the children about why you have left, or why you haven't left – this is important as some children feel angry and upset when the victim does leave, but some children feel unprotected and let down when victims don't leave the abuse
- Do not encourage children to join in with the abuse – this includes things like name calling
- Do not tell children they are just like their father/mother when they are showing frustration or anger about the abuser

Remember:

Children will feel more secure with one parent in a stable environment than with two parents in an unstable and violent environment. Any plans undertaken with children must **NEVER** give them responsibility for anyone else's safety. If appropriate, while making plans with your child, it is important to:

- Go through an escape plan with them – plan and find safe routes out of the home and to somewhere safe.
- Discuss how you would leave at different times, days and situations. Leaving in the dark or middle of the night would be different to leaving in the daytime
- Discuss places they would run to or hide at in an emergency (such as a neighbour or corner shop) and agree a plan if you get separated from the children
- Encourage the child to have a bag packed as well – this could include favourite things that they don't want to leave behind
- Encourage children to stay out of the way during episodes of abuse
- Show them how to use the telephone, including making a 999 call. Find somewhere for them to keep telephone numbers of who they can ring for help, e.g. supportive family/friends
- Discuss signals or codes, for example, agreed sentences, lights on/off, position of lamp, etc. These can help everyone living in the house. Also think about how children can raise the alarm to neighbours and/or family
- Discuss who is going to know at school – this is important to a child who will usually be reluctant to talk about the abuse
- Make sure the school knows who they can and can't talk to and that they have copies of any necessary paperwork such as court orders, injunctions etc
- Discuss who will be picking the child up from school and possibly who they must never go with, even if there is a good story, e.g. "mum is poorly so 'X' has got to pick you up"
- Discuss which family, friends, babysitters, etc. who they can talk to or go to in an emergency – this is important to a child who may be confused about the abuse
- Talk to the child about what to do if they see the abuser while at school or while with family or friends
- Discuss not giving out addresses and phone numbers
- Discuss what they can and can't say to the abusing parent (for example where they are living)

- Discuss safety during contact visits
- Do activities with them that may encourage good conversation about what is happening
- Perhaps encourage the child to keep a journal of how they are feeling, what has happened and what makes them scared/sad
- Where possible, discuss any realistic options of the child having a telephone (including speed dials)
- Suggest your child looks at websites for children experiencing domestic abuse, for example: www.thehideout.org.uk

Staying safe after the abuser has moved out

- Change the locks where possible – make use of security support that is available free of charge (see below)
- Where possible, shop and bank in a different place to before
- Cancel any bank accounts, credit cards etc. that you have shared
- Keep any court orders, injunctions, and emergency telephone numbers with you
- Keep a mobile phone with you at all times – try to keep it with credit on. Emergency calls can still be made without credit, and support agencies will accept reverse charges – but remember your battery needs to be charged!
- Set up speed dials for emergency telephone numbers
- Change your regular travel routes/habits
- Diary any abusive calls, visits, texts or email

Mobile/internet safety and digital stalking

You can pick up an inexpensive pay-as-you-go phone at a supermarket for about £10. It is a good idea to try to get one and get it charged up with a small amount of credit on it before you leave. Once you are safe then you should clean the old information from your usual telephone.

- Clean your telephone: back-up your photographs, music, address book and any apps you want to keep then you should do a factory reset. This will delete any unwanted software. (If safe, do this after the Police have reviewed your telephone for evidence.)
- Secure your telephone: set the telephone so that if it isn't used for more than a minute you have to put in a PIN to use it. Make sure that your telephone is set to hide your Caller ID. Change your login name and password on your Google/iCloud/iTunes account
- There are mobile telephone applications that will block calls. Choose an application that offers a 'whitelist' feature. This means that it will only accept calls from those in your contact list. If you are using a whitelist then remember to add contacts such as the doctor's practice, school, solicitor and your police contact details
- Choice of phone: a low cost telephone (not a smartphone) is the safest. If you have to have a smartphone think about using two telephones. A low cost one for texting and calling and a smartphone for internet browsing, games, music etc

Gather evidence:

Save all texts but also take pictures or screenshots of any threatening messages on your telephone. That way if anything happens to your telephone, you still have evidence of the text. Make a recording of all voicemails left on your telephone. Mobile operators limit how long they will keep the voicemail on the system (on average one week). Once that time is expired, they delete the voicemail and that evidence is gone.

Safety plans should be personalised so information above should all be considered and discussed with the victim where relevant. Any other additional risks and means of mitigating these should also be discussed with the victim.

- Emergency safety plans should be in place whilst assessments, referrals and interventions are being progressed
- In some cases where there is a severe risk of harm to the child/ren, the emergency safety plan/strategy should be for the child/ren and, if possible, the non-abusive parent, not to have contact with the abuser
- It is important that Practitioners do not work in isolation and utilise the skills and expertise of specialist services in assessing, intervening and safety planning for the victim and the child(ren)

Emergency accommodation for victims fleeing domestic abuse

Some victims will not be able to stay in their current home because they might not have a legal right to remain or the risk to them is too high.

Refuge

You can contact any of the Borough specialist domestic abuse providers or refuge for advice and availability. If it is not safe for the victim to remain in the Borough, or it is out of normal working hours, contact the National 24-hour domestic helpline for availability of refuge accommodation throughout the Country. Tel: **0808 2000 247**.

For support, information and advice, about emergency accommodation and longer-term housing options and solutions. Contact housing at **RMBC 01709 336009**.

Improved home security for victims of domestic abuse

The scheme sometimes called 'Sanctuary' or 'Target Hardening' aim to provide additional security measures to deter and prevent someone from entering the property and reducing the fear for victims at risk of further harm.

The schemes are often run in partnership with South Yorkshire Police and RMBC, who will advise on crime prevention, and with the specialist domestic abuse services which will look at risks and provide practical safety planning advice as well as emotional support.

Improved security measures could include:

- Door chains
- Covering over letterboxes and fitting external fire-retardant letterboxes
- reinforcing exterior doors
- Extra door and window locks
- Alarms
- Smoke detectors and fire safety equipment

Victims of domestic abuse can find out more about what is available in their area by asking their Domestic Abuse Support Worker or by contacting RMBC Domestic Abuse Coordinator **01709 255011**.

Associated Forms of Domestic Abuse:

Teenage abusive relationships

A recent NSPCC survey showed that 25% of girls and 18% of boys have experienced physical violence in a relationship.

As with adults, abuse in teen relationships doesn't just cover physical violence. Other examples of this type of abuse include:

- Pressuring you into having sex
- Controlling behaviour including what friends you can see or speak to and where you go
- Jealousy or anger
- Threatening to put lies, personal information, pictures on social networking sites
- Constant name calling and comments

Research completed by the NSPCC into partner exploitation and partner violence in teenage intimate relationships revealed that for girls in particular, having an older partner, and especially a "much older" partner, was a significant risk factor. Overall, three-quarters of girls with a "much older" partner experienced physical violence, 80 per cent emotional violence and 75 per cent sexual violence.

In those circumstances where the victim is under 18 years old and the perpetrator is 18 years or above, or if both victim and perpetrator are under 18 years, this should also be treated as a child safeguarding concern. A referral/signposting can also be made to specialist domestic abuse services when deemed appropriate. In the event that a child is known to be involved in a violent relationship, the practitioner should consider undertaking an Early Help Assessment.

Should the practitioner subsequently decide they would like a consultation with an Early Help Triage regarding their next steps this should be arranged. During the course of any such discussions the practitioner may find it helpful to consider with the Early Help Triage whether the matter meets the threshold for social care intervention.

If the practitioner believes the child is at immediate risk then they should contact the police and initiate child protection procedures by contacting the Multi Agency Support Hub (MASH) on **01709 336080** and reporting a safeguarding concern; e.g. a child involved in a relationship with a violent girlfriend/boyfriend. Outside of normal working hours contact should be made to the Emergency Duty Team on **01709 336080**.

Teenage Relationship Abuse Campaign 'Disrespect Nobody'

The PSHE Association (with Government Equalities Office and Home Office) has produced a campaign aimed at 12 to 18 year old boys and girls with the aim of preventing them from becoming perpetrators and victims of abusive relationships, by encouraging young people to re-think their views on violence, abuse, controlling behaviour and what consent means within their relationships.

The campaign literature has been written in a gender-neutral way, so as not to ignore same sex or transgender relationships, and therefore provides advice for all young people on abuse within relationships. More information and resources to download go to:

<http://www.smartcdn.co.uk/homeofficeR4/mailresponse.asp?tid=9858&em=10033598&turl=http://www.disrespectnobody.co.uk/>

Child Sexual Exploitation and Domestic Abuse

A person under 18 years is sexually exploited if they are coerced into sexual activities by one or more persons who have deliberately targeted them due to their youth, gender, inexperience, disability, vulnerability and/or economic or social position. The process usually involves a stage of 'grooming' involving the use of a variety of manipulative and controlling techniques to target a vulnerable person.

Like domestically abusive relationships, sexually exploitative relationships are characterised by an imbalance of power and the use of controlling behaviours to maintain a young person's subordinate or dependent position, and to regulate his or her everyday behaviour. Coercive behaviours are also extremely common, including the use of assault, threat, humiliation and intimidation as a means of ensuring the compliance of a victim.

Child sexual exploitation can occur through the use of technology without the child's consent or immediate recognition. A central mechanism for offenders to extend their control of their victim is through the use of mobile technology.

If you believe that a child/young person is at immediate risk, this should be reported without delay to the Police:

- For emergencies use 999, or;
- For urgent/immediate reporting 101
- Contact the Multi Agency Support Hub (MASH) on 01709 336080, or
- Emergency Duty Team on 01709 336080 if it is outside normal working hours.

Adolescent to Parent Violence

The official definition of domestic abuse covers individuals from the age of 16 years and is used for MARAC purposes. However, there are occasions of familial abuse where the parent/victim is over the age of 16 years but the child/perpetrator is under that age, the IDVA service will provide advice.

The child perpetrator should be referred through the Multi Agency Support Hub (MASH). (It is important to note that whether a child is a victim or perpetrator of domestic abuse, a referral should be made to Children's Services.)

If the concerns do not meet the threshold for a social work assessment under the Children Act (1989), the practitioner may be advised by the MASH to consider early help support. The practitioner can also discuss any screening decisions given regarding their safeguarding referral with an Early Help Advisor.

Stalking and Harassment

Stalking can be defined as persistent and unwanted attention where the victim feels pestered and harassed. There are many forms of harassment, ranging from unwanted attention from somebody seeking a romantic relationship, to violent predatory behaviour.

The British Crime Survey (2006) suggests that up to five million people experience stalking or harassment in any given year and that many victims will suffer up to 100 incidents before talking to the police.

The most common forms of stalking/harassment are:

- Frequent, unwanted contact, e.g. appearing at the home or workplace of the victim
- Telephone calls, text messages or other contact such as via the internet (i.e. social networking sites)
- Driving past the victim's home or work
- Following or watching the victim
- Sending letters or unwanted gifts to the victim
- Damaging the victim's property
- Burglary or robbery of the victim's home, workplace, vehicle, or other
- Threats of harm to the victim and/or others associated with them (including sexual violence and threats to kill)
- Harassment of people associated with the victim (e.g. family members, partner, work colleagues)
- Physical and/or sexual assault of the victim and even murder

Is someone at risk?

If someone is unsure that what is happening to them is stalking, then there are a set of questions which can be considered.

For more information go to <http://www.protectionagainststalking.org>

If someone feels they are at immediate danger, call **999**.

The National Stalking Helpline can help with advice and support. Tel: 0808 802 0300
email <http://www.stalkinghelpline.org>

Abuse through technology – i.e. Sexting

As a professional, the case you are involved with may have elements of online/digital abuse. Many of us now use mobile, social media, e-mail and shop online for example. If someone wants to upset, scare or intimidate another person they may use technology to do it.

This abuse can take various forms: bullying, harassment, stalking, domestic abuse, trolling, and/or hate campaigns.

Questions you may wish to consider:

- Is the victim being abused in multiple ways and means?
- How long has it been going on for?
- Is it escalating?
- What is the motivation of the abuser?
- What is the victim worried will happen?
- Mental state of the victim – are they afraid/suicidal?

You may wish to refer to the Get Safe Online website for further advice as a professional, or to guide the person who is being abused online to advice on the steps they can take to improve their online security.

Visit: <https://www.getsafeonline.org/>

Child Exploitation and Online Protection (CEOP)

CEOP is a National Crime Agency department designed to pursue those who sexually exploit and abuse children, prevent people becoming involved in child sexual exploitation, protect children from becoming victims of sexual exploitation and sexual abuse, and prepare interventions to reduce the impact of child sexual exploitation and abuse through safeguarding and child protection work.

CEOP focuses on organised criminal groups profiteering from the publication or distribution of child abuse images, supports local police forces with computer forensics and covert investigations and provides authoritative investigative advice and support to maximise UK law enforcement's response to crimes of child sexual abuse and exploitation.

CEOP has a wealth of online resources to support the work of professionals to protect children from harm: <https://www.ceop.police.uk/>

Diversity

This section includes additional barriers, risks or considerations for practice relating to diversity including:

- Cultural and language barriers
- Disability
- Female Genital Mutilation
- Forced Marriage
- Honour Based Abuse
- LGBT
- Male Victims
- Older People

Cultural and language barriers

Consideration should be given by all school staff of cultural differences between people from communities within the UK and from other countries as they could impact on the recognition, disclosure, and prevention of DA.

Appropriate advice should be sought by school staff when dealing with cultural differences as these are significant to their seeking help. This may include traveller communities, different religions, and a range of beliefs about marriage, divorce, gender, sexual orientation, and domestic abuse as a taboo issue.

Limited English language may also be a significant barrier for victims of abuse seeking assistance from support agencies. Where there are language barriers school staff should always use an appropriate interpreter. Family and friends should not be used to interpret in domestic abuse cases. Click on the link below for good practice guidelines on the use of interpreters for domestic abuse situations.

http://www.standingtogether.org.uk/fileadmin/user_upload/standingUpload/Publications/bestpractice1_checklist.pdf

Disability

If a person has a disability, whether male or female, their chances of experiencing domestic abuse are greatly increased:

Disabled women are twice as likely to experience domestic abuse as non-disabled women. (Women's Aid 2012). Disabled men and men with mental health problems are at greater risk of domestic abuse than non-disabled men (Respect, 2014).

- Studies show that 80% of disabled women have been sexually abused (Women's Aid 2012)
- 48% of cases involving older adults are those that cannot physically care for themselves (WA 2012)
- 1 in 4 women experience domestic abuse. Therefore 50% of disabled women experience domestic abuse

Often the carer is a partner or family member. Research by Women's Aid (2008) found that many people with disabilities were afraid to speak out about the abuse due to fear of the carer (who is a partner or family member) leaving and them being left alone. They were reliant on the perpetrator for care and support, they were also afraid of losing their independence, and losing their care package.

Many people were afraid of not being believed as the perpetrator who the carer was seen by friends and family as a 'hero' and 'selfless.' The ability to disclose may be reduced if the carer/perpetrator attends all appointments and is at all contacts.

Research has also found that sexual abuse was used as another form of control and power over women with disabilities as well as being used to humiliate and degrade.

Abuse can include with-holding medication, over medicating, refusing care e.g. taking to the toilet, washing, not feeding the person, threats to leave. The person's impairments are used to belittle and exercise control. Disabled victims of domestic abuse are more likely to develop care and support needs including mental health, substance misuse and long-term health effects.

Female Genital Mutilation

Female genital mutilation (FGM) is child abuse and violates the rights to health, security, and physical integrity of the person and to be free from torture and cruel and degrading treatment. Professionals have a duty to safeguard everyone, including women and girls, which means tackling FGM is an integral part of their role. Effective action must be taken to do so, without allowing themselves to be inhibited by fear of doing or saying the wrong thing. FGM is sometimes known as 'female circumcision' or 'female genital cutting'. FGM is illegal in the UK. It is also illegal to take a British national or permanent resident abroad for FGM or to help someone trying to do this. Mandatory reporting of FGM has been in place since October 2015.

Useful Key Resources:

- The latest statutory guidance on FGM, published 1st April 2016:
<https://www.gov.uk/government/publications/multi-agency-statutory-guidance-on-female-genital-mutilation>
- The Home Office resource pack on FGM
- The Home Office FGM E-Learning Module
- <https://www.gov.uk/government/publications/female-genital-mutilation-resource-pack>
- The Department of Health Publications:
- Safeguarding women and girls at risk of FGM - This document provides practical help to support NHS organisations developing new safeguarding policies and procedures for FGM.
- FGM E Learning – for Health colleagues is also available via LSCB/LSAB training
- The NSPCC runs a specific FGM Helpline: Email: fgmhelp@nspcc.org.uk or Telephone: 0800 028 3550

If you know someone in immediate danger, contact the Police. If you believe a child or young person under the age of 18 years might be suffering, or is likely to suffer significant harm (including any mistreatment or abuse), contact the Multi Agency Support Hub (MASH)

The latest statutory multi-agency guidance on female genital mutilation should be read and followed by all persons and bodies in England and Wales who are under statutory duties to safeguard and promote the welfare of children and vulnerable adults.

This guidance should be considered together with other relevant safeguarding guidance, including (but not limited to):

- Working Together to Safeguard Children (2015) in England
- Safeguarding Children: Working Together under the Children Act 2004 (2007) in Wales

It is not intended to replace wider safeguarding guidance, but to provide additional advice on female genital mutilation. The information in this guidance may also be relevant to bodies working with women and girls at risk of FGM or dealing with its consequences.

Forced Marriage

A forced marriage is where one or both people do not (or in cases of people who lack mental capacity, cannot, consent to the marriage and pressure or abuse is used. The practice of Forced Marriage is recognised in the UK as a form of violence against women and men, domestic/child abuse, and a serious abuse of human rights.

The pressure put on people to marry against their will can be physical (including threats, actual physical violence and sexual violence) or emotional and psychological (for example, when someone is made to feel like they're bringing shame on their family). Financial abuse (taking your wages, or not giving you any money) can also be a factor. There are national guidelines for responding to cases of forced marriage.

Multi-Agency Statutory Guidance for dealing with forced marriage 2014. Practitioners should pay particular attention to Chapters 5 and 6. Multi-Agency practice guidelines: Handling cases of forced marriage 2014

Any case of Forced Marriage must be reported to the Police by calling **999**.

- If the victim is under the age of 18 years, a referral should also be made to Rotherham Children's Services. Telephone: **01709 336080**
- If the victim is over the age of 18 years and has additional care and support needs, a learning disability or there are any concerns about mental capacity referral should be made to Rotherham Adult Services Telephone **01709 822330**.

Additional support is available by contacting the Forced Marriage Unit:
<https://www.gov.uk/forced-marriage> Telephone: **020 7008 0151**

The Forced Marriage Unit has also developed an e-learning package: eLearning training for professionals. Information for people directly affected by forced marriage is also available.

Honour Based Abuse

Honour based abuse refers to crimes or incidents committed to protect or defend the honour of a family and/or community. It can take many forms including harassment, criminal damage, arson, sexual assault, forced marriage, kidnap, and even murder. When dealing with potential victims it is important to recognise the **seriousness immediacy of the risk**.

Consider the possibility of forced marriage, abduction, missing persons, and murder. Incidents that may precede a murder include:

- Forced marriage
- Domestic violence
- Attempts to separate or divorce
- A pre-marital relationship
- Pre-marital conflict
- Pregnancy
- Threats to kill or denial of access to children
- Pressure to go abroad
- House arrest and excessive restrictions
- Denial of access to the telephone, internet, passport, and friends

When dealing with victims, do not speak with them in the presence of their relatives. Women that return to their families should be offered escape plans. Please seek further advice from the Police and if someone is at immediate danger then call **999**.

Karma Nirvana provide information and support for male and female victims of forced marriage and honour-based abuse. Telephone: **0800 5999 247**

[Website: www.karmanirvana.org.uk](http://www.karmanirvana.org.uk)

Lesbian, Gay, Bisexual, Transgender and Queer (LGBTQ)

Q stands for Queer: Individuals who experience fluidity in their experience of sexuality or gender and therefore do not identify strictly as LGB or T. The term 'Queer' can also include those who do not identify as either gender.

There may be additional barriers to reporting domestic abuse for lesbian, gay, bisexual, transgender and queer people. Approximately 25% of LGBTQ people suffer through violent or threatening relationships with partners or ex-partners, which is the same rate as in heterosexual women. As with all types of domestic abuse, the problem is under-reported, but in same sex relationships the victim is often afraid of revealing their sexual orientation or the nature of their relationship.

There are a number of aspects that are unique to LGBTQ domestic abuse. The perpetrator may threaten to 'out' the victim to friends, family, colleagues, and others as a method of

control. For some people they may have been made to believe that they are experiencing this abuse because they are lesbian, gay, bisexual, transgender, or queer. In addition, a lot of national publicity about domestic abuse has historically been about heterosexual relationships, which could mean that there is a lack of understanding of domestic abuse by people in same sex relationships. This lack of understanding means that some people may not:

- Believe it happens in LGBTQ relationships
- Recognise their experience as domestic abuse if it does happen to them
- Know how to respond if they see domestic abuse being experienced by their friends

Male Victims

There are myths about men who suffer domestic abuse, with some people thinking that it doesn't happen to men. Men who are victims are not 'real men' and that the law only protects women. These myths are of course completely untrue, but it is possibly why 29% of male domestic abuse victims do not tell anybody about the abuse (Crime Survey England and Wales).

Older People

On average, older victims experience abuse for twice as long before seeking help as those aged under 61 and nearly half have a disability. (Safelives 2016). Older people might not identify themselves as victims of domestic abuse, particularly if the abuser is not their husband/wife. There is an increase in adult child to parent abuse - some research suggests in up to 25% of cases where older women are abused. Financial abuse is also a common factor, particularly when an adult child is the abuser.

There may be fewer services involved with older people and they could be more isolated, making it difficult to report the abuse or have someone else who will notice and report the abuse.

Additional barriers facing older people could include:

- Abuser may also be their carer
- The victim may care for the abuser, making them feel additional guilt for leaving
- The abuser may be his/her child(ren) – additional barriers to reporting a child and criminalising a son or daughter
- Many older survivors have lived in the same area, or even house, for many years. It may be more difficult for them to access new social networks and facilities
- Refuges are often not equipped to accommodate people with mobility problems or complex health problems

Perpetrators of Domestic Abuse

Safer Rotherham Partnership is responding to the needs of all domestic abuse perpetrators through the development and delivery of training and interventions

(perpetrator programmes) aimed to reduce interpersonal violence. Individuals who use violence often have difficulties with emotional management, substance use and mental health which, if addressed, may reduce the likelihood of ongoing domestic abuse.

Some perpetrators of domestic abuse may not be motivated to seek help. Engagement with support and intervention is significantly increased if professionals remain open and non-judgmental in their attempts to understand the perpetrators' reasons and motivations for using abusive behaviours.

Continuing to increase our understanding of the complex reasons for domestic abuse is an essential part of reducing the harm caused to the lives of those affected by it.

People can be abusive without using physical violence, and this can have a devastating impact on families.

Some perpetrators can appear to be caring and co-operative with agencies. Practitioners should be aware that some perpetrators may also try to manipulate professionals, their partners and other family members. Perpetrators may deny or minimise abuse, focus on the actions of others as the reason for their behaviour or avoid contact with those who seek to challenge them.

Domestic abuse has traditionally been understood as a crime perpetrated by dominant controlling men against vulnerable women. In reality, the reasons for abuse occurring within intimate and familial relationships involve far greater complexity than this assumption would suggest.

Research spanning over 50 years has consistently found that men and women self-report perpetrating domestic abuse at similar rates, but women are twice as likely as men to be injured or killed during a domestic assault. Like all behaviours, interpersonal violence is best understood as being on a continuum of severity, and those at different points on that continuum require different approaches.

Respect, an organisation aimed at promoting best practice in work with perpetrators, has produced the following guidance for working with male perpetrators: [Respect-Guidelines-for-Working-with-Male-Perpetrators.doc](#)

Domestic Violence Protection Scheme

The Crime and Security Act 2010 provides the Police with additional powers to protect victims of domestic violence and abuse, with the objective of securing a co-ordinated approach across agencies for the protection of victims and the management of perpetrators. The DVPN/DVPO process is not intended to replace the Criminal Justice system in respect of charge and bail of a perpetrator.

A DVPN will be issued in circumstances where no enforceable restrictions can be placed upon the perpetrator. A DVPO can then be applied for from HM Magistrates Court Lincoln for a maximum period of 28 days. The Police will consider a DVPN/DVPO for all Domestic Abuse prisoners who are being released from custody with no further action being taken.

MAPPA and Domestic Abuse

MAPPA stands for Multi-Agency Public Protection Arrangements. It is the process by which Police, Probation and Prison Services work together with other agencies to manage the risks posed by violent and sexual offenders living in the community in order to protect the public. This process focuses upon the perpetrator of the domestic abuse (or other offender) and managing their risk of serious harm and re-offending in order to protect current, previous and future victims.

Police, Prison and Probation make up the Responsible Authority which has a duty to ensure the risks posed by specified sexual and violent offenders are assessed and managed appropriately. There is a wide range of agencies with a duty to participate in MAPPA.

Should you feel that the perpetrator is high risk, and then consideration should be given to referring the individual to MAPPA. If the individual is already involved with another agency, such as mental health services, Probation or the Prison Service, it would be most appropriate to discuss a referral with the lead agency worker first.

Should you require any guidance to complete the referral form, or wish to discuss a case which you feel needs to be managed through MAPPA, you are able to contact the MAPPA Unit at South Yorkshire Police Headquarters on: **01142 523377**

Support for Perpetrators

Assisting Rehabilitation through Collaboration (ARC)

The ARC (formally known as Integrated Offender Management) team has been developed to include a wide range of crime types, including domestic abuse. The ARC process accesses and streamlines a wide range of support and services in order to most effectively manage the risk factors which contribute to repeat offending behaviour. There will be specialist psychological oversight of cases where domestic abuse is part of the person's offending repertoire, with direct psychological intervention where this cannot be provided elsewhere. The safety and support for victims of IOM perpetrators is also core to the initiative.

Building Better Relationships (BBR)

A programme for male perpetrators of violence and abuse, within a (heterosexual) intimate relationship. BBR is run within prison and community delivery sites and aims to increase understanding of motivating factors in domestic violence reduce individual risk factors linked to violence and develop pro-social relationship skills. Access to this programme is through the court following a conviction of a domestic abuse related offence, or through the family court and CAFCASS.

Respect Phone line

The Respect Phone line is a confidential and anonymous helpline for domestic abuse perpetrators looking for help to address their behaviour. The main focus of the Respect

Phone line is to increase the safety of those experiencing domestic abuse by engaging with the abusers to reduce the risk.

The Phonenumber

Helps men and women in heterosexual or same-sex relationships who want to stop being violent and/or abusive towards a partner or ex-partner. It's also available for frontline workers who engage with domestic violence perpetrators in their work.

Contact details of Respect for resource section

Opening hours: the Respect Phone line is open Monday - Friday 9 a.m. – 5 p.m.

Call: free phone **0808 802 4040**

Email: info@respectphonenumber.org.uk

Website: www.respectphonenumber.org.uk

Resources

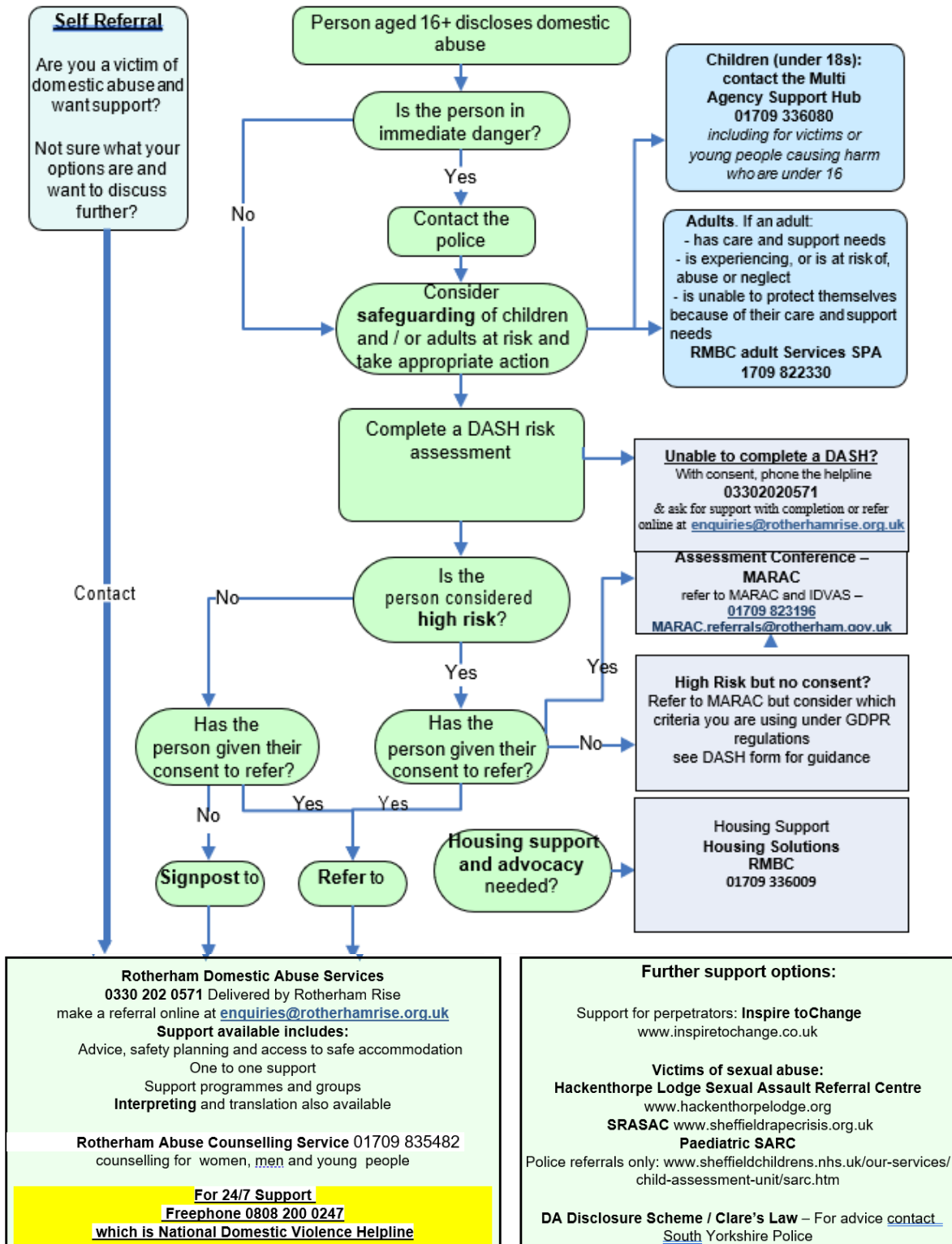
24-hour national Domestic Abuse Helpline www.womensaid.org.uk 0808 2000 247	Shelter www.shelter.org.uk 0808 800 4444
Forced Marriage Unit www.foc.gov.uk/forcedmarriage 020 7008 0151 9 a.m. to 5 p.m. Mon - Fri	Samaritans www.samaritans.org.uk 08457 90 90 90
Men's Advice Line www.mensadviceline.org.uk 0808 801 0327	Victim Support 0300 303 1976 www.victimsupport.org.uk
Mankind www.mankind.org.uk 01823 334244	Network for Surviving Stalking www.nss.org.uk
Galop Support helpline for LGBT victims of domestic abuse www.galop.org.uk , 0300 999 5428	Information for children and young people: www.thehideout.org.uk www.nspcc.org.uk www.disrespectnobody.co.uk

SARC [Sexual Assault Referral Centre]:

Provides a safe environment where victims of Rape, Sexual Assault or Sexual Abuse can get support and advice. They also provide the possibility of making a report to the police and undertaking a forensic examination. They are open to all victims, regardless of whether they want to report a crime to the police or not.

Tel. **0330 2233193** south.yorkshire@mountainhealthcare.co.uk

Rotherham Domestic Abuse Pathway – January 2020



Rotherham Domestic Abuse Services
 0330 202 0571 Delivered by Rotherham Rise
 make a referral online at enquiries@rotherhamrise.org.uk
Support available includes:
 Advice, safety planning and access to safe accommodation
 One to one support
 Support programmes and groups
 Interpreting and translation also available

Rotherham Abuse Counselling Service 01709 835482
 counselling for women, men and young people

For 24/7 Support
Freephone 0808 200 0247
 which is National Domestic Violence Helpline

Further support options:

Support for perpetrators: **Inspire toChange**
www.inspiretochange.co.uk

Victims of sexual abuse:
Hackenthorpe Lodge Sexual Assault Referral Centre
www.hackenthorpelodge.org
SRASAC www.sheffieldrapecrisis.org.uk
Paediatric SARC
 Police referrals only: www.sheffieldchildrens.nhs.uk/our-services/child-assessment-unit/sarc.htm

DA Disclosure Scheme / Clare's Law – For advice contact@SouthYorkshirePolice

Domestic Abuse Charter 2017

The Safer Rotherham Partnership has agreed a multi-agency Domestic Abuse Charter outlining 10 standards that partner agencies should aim to achieve in order to effectively respond to victims, perpetrators and families affected by domestic abuse. The Charter is a quality assurance and best practice tool.

	Standard
1.	That the agency I represent understands the realities of domestic abuse, the amount of and impact on the services of Domestic Abuse.
2.	Domestic Abuse material is displayed by the agency/department I represent relevant to local communities. Information about domestic abuse is included on respective agencies websites.
3.	That there is an effective domestic abuse policy/protocol or guidance in place detailing how the
4.	That risk identification, risk assessment and risk management processes, for victims, perpetrators and children are fully embedded within the agency/department I represent in line with the Rotherham Domestic Abuse Protocol.
5.	That there is full participation by the agency I represent within the MARAC process.
6.	That all appropriate referral/signposting pathways are in place for all victims of Domestic Abuse.
7.	That staff who require Domestic Abuse training have been identified and the level of training required assessed and that all identified staff have completed the training to the required level
8.	Front line workers routinely discuss safety measures with the victim/children and provide relevant information and support.
9.	That there is regular attendance and participation at the Domestic Abuse Priority Group.
10.	The agency has guidance within their employee policy for staff experiencing or perpetrating domestic abuse.

DASH Question	What to consider when asking the question
1) Has the current incident resulted in injury?	Is medical assistance required? How does this compare to previous injuries? Consider emotional trauma. Be mindful that in cases with no physical abuse you might want to re-word this question so that it doesn't appear to belittle their experiences.
2) Are you very frightened? 3) What are you afraid of? Is it further injury or violence?	Establish the victim's perceived level of risk. Victims often play down the level of risk; if they say they are frightened this should be taken very seriously.
4) Do you feel isolated from family / friends? Does (...) try to stop you from seeing friends / family / GP or others?	Consider support networks, Honor Based Violence and Female Genital Mutilation. Victims may believe that they have chosen to stop seeing friends and family due to manipulation .
5) Are you feeling depressed or having suicidal thoughts?	Has the victim made any attempt at suicide or has any plans? Consider the risks to the victim and any children. Do you need to take any immediate action?
6) Have you separated or tried to separate from (...) within the past year?	Victims are at increased risk when they are planning to leave or have just left the relationship. Ask if the victim is planning to leave and if the perpetrator is aware of this.
7) Is there conflict over child contact?	This maintains communication between the victim and the perpetrator. Are the children being used as a tool/weapon against the victim?
8) Does (...) constantly text, call, contact, follow, stalk or harass you?	Domestic stalkers are more dangerous as they know more about the victim. Consider cyber abuse and whether the perpetrator has access to information about them via email accounts, social networking sites etc.
9) Are you pregnant or have you recently had a baby (in the past 18 months)?	Domestic abuse often starts or escalates during pregnancy. You need to consider the welfare of the child/unborn child. You will need to make a referral to Children's Services.
10) Are there any children, step-children that aren't in the household? Or are there other dependents in the household i.e. older relatives?	Has everyone at risk been considered? You may need to make a referral to Children's or Adult Services .
11) Has (...) ever hurt the children/ dependents?	Domestic abuse and child abuse are often linked. Share this information with Children and Adult Services

DASH Question	What to consider when asking the question
12) Has (...) ever threatened to hurt or kill the children/dependents?	Could the perpetrator abuse any vulnerable adults? Share this information with Children and Adult Services
13) Is the abuse happening more often?	Previous abuse is the most effective indicator that further abuse will occur. Try to ascertain if anything is happening in the relationship that might be triggering more abuse.
14) Is the abuse getting worse?	It is possible that the abuse will escalate.
15) Does (...) try to control everything you do and / or are they excessively jealous?	Power and control, leading to dominance and isolation. Record ways in which the victim is being controlled and any implications for practitioners working with them currently or in the future.
16) Has (...) ever used weapons or objects to hurt you?	Consider all potential weapons including household objects, mobility aids, tools, sports equipment etc. as well as more obvious ones such as knives and guns. This is useful information to help protect the welfare of professionals as well.
17) Has (...) ever threatened to kill you or someone else and you believed them?	Even though the perpetrator may never have any intention of carrying this out the fact that the victim believes the threat demonstrates the power and control the perpetrator has.
18) Has (...) ever attempted to strangle / choke / suffocate / drown you?	Restriction of the airways is dangerous and could easily lead to death. This is the second most common way for females to be killed in domestic homicides.
19) Does (...) do or say things of a sexual nature that make you feel bad or that physically hurt you or someone else?	Also consider threats made by the perpetrator to post naked photographs on the internet or send to family or friends. Consider grooming and Child Sexual Exploitation.
20) Is there any other person who has threatened you or that you are afraid of?	Consider HBV or FGM. If this is relevant do not speak to the family as they may be involved.
21) Do you know if (...) has hurt anyone else?	Consider previous partners, family members, colleagues and friends.
22) Has (...) ever mistreated an animal or the family pet?	There is a link between cruelty to animals and to people. The family pet may be used as a tool to control the victim.
23) Are there any financial issues? For example, are you dependent on (...) for money / have they recently lost their job / other financial issues?	This could pose additional risks to the victim if money is withdrawn from the perpetrator. You may need to look for emergency funds to help the victim escape.
24) Has (...) had problems in the past year with drugs (prescription or other), alcohol or	The victim may conceal this information if they are also using drugs or rely on the

DASH Question	What to consider when asking the question
mental health leading to problems in leading a normal life?	Perpetrator for drugs. Record what problems and how it affects them. This is important information that could be shared with other agencies to reduce risk. Also ask if the victim has alcohol or drug issues and whether they want help and support.
25) Has (...) ever threatened or attempted suicide?	There is a link between the perpetrator threatening suicide and homicide. Others may be in danger e.g. they may harm the children as a way of inflicting pain on the victim.
26) Has (...) ever breached bail / an injunction and / or any agreement for when they can see you and / or the children?	This may indicate whether the perpetrator has any respect for authority and the law. It may also mean that the victim is skeptical about legal interventions if they have previously been ignored.
27) Do you know if (...) has ever been in trouble with the police or has a criminal history?	This may be an opportunity to gather new information that has previously gone unknown. It may be that the victim is not aware themselves of the abusive person's previous history.