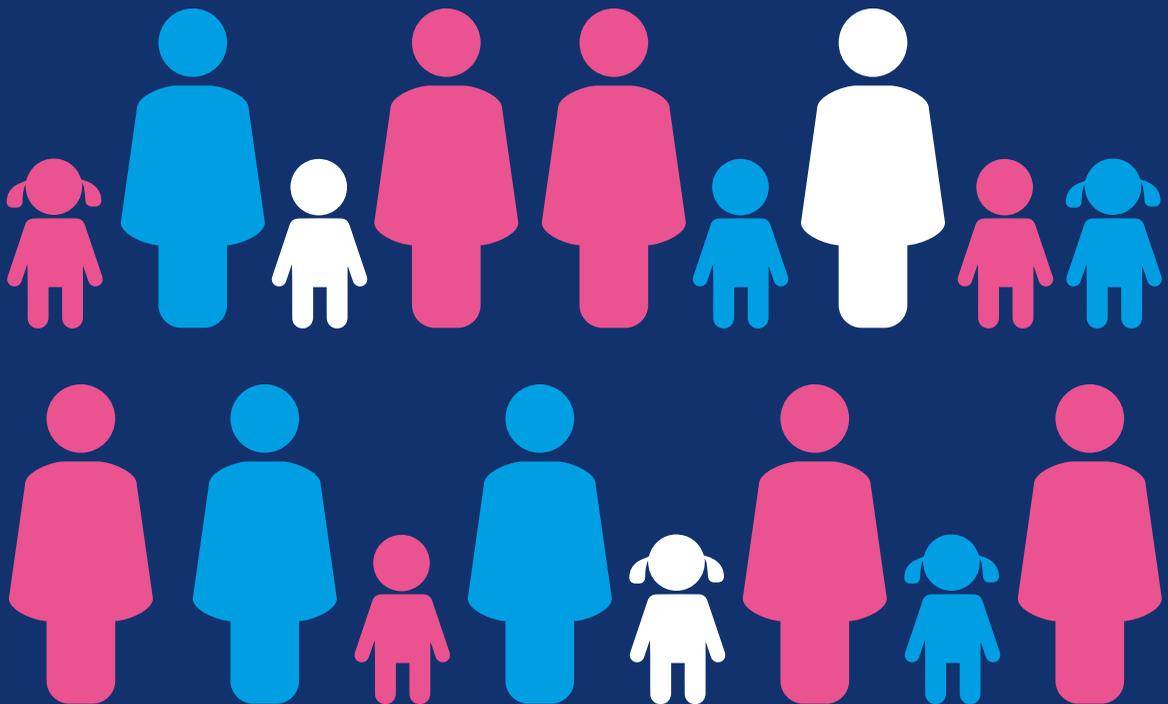




Ending domestic abuse

Getting it right first time

Executive Summary





Executive summary

From a response to high-risk victims to a response for all victims and children

The SafeLives approach has transformed how high-risk domestic abuse is addressed in the UK. Last year our work supported more than 50,000 adults parenting around 70,000 children all of whom were living with high-risk abuse. More than 60% of victims receiving support through this approach reported that the abuse stopped.

But, of course, this system is effective only for victims of high-risk domestic abuse. It is not – nor was it intended to be – a response to all victims and their families. The clarity of the national approach to high-risk victims has not been matched by a similar focus on other victims and family members. And few areas take a strategic overview of how they respond to domestic abuse.

SafeLives is starting a programme to understand how to create the full system change we need to stop domestic abuse and save lives. We will start by looking at how we can identify every family where there is domestic abuse as quickly as possible – the topic of this paper.

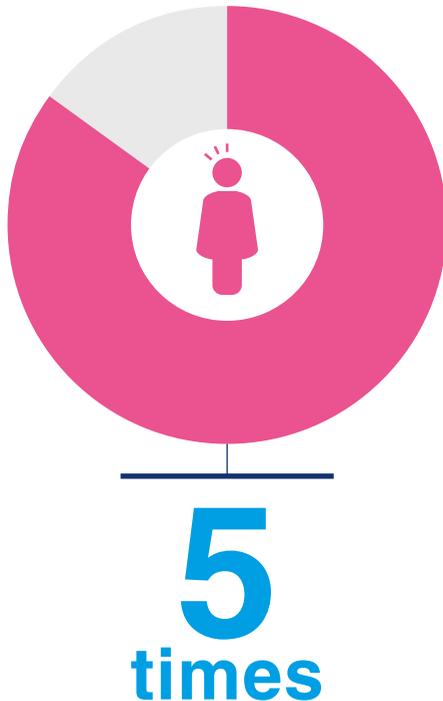
We have to find every family where there is domestic abuse much more quickly

Why do we need to find families earlier?

The impact of domestic abuse on the victim and on children – even once they have achieved safety – is severe and long-lasting. And families live with domestic abuse for too long before getting effective help – on average 2.6 years for high-risk abuse, and three years for medium-risk. Given that many children living with domestic abuse are very young, the impact on them is severe.

At the point when a victim gets help, the abuse is likely to be escalating in either frequency or severity or both. Cutting the time it takes to find and help victims and their families is critical to stop murder, serious injury, and enduring harm. As the cost per family where there is domestic abuse is £18,730, it is also expensive for the taxpayer.

85% of victims sought help from professionals on average



in the year before they got effective help to stop the abuse



Many victims do try to get help, but don't get the right help

It is not inevitable or acceptable that victims should try repeatedly to stop the abuse before they get the help they need. There are still far too many missed opportunities to get help for families experiencing domestic abuse.

In the year before they got effective help:

- Four in five high-risk victims (78%) and two-thirds of medium-risk victims (62%) reported the abuse to the police.
- Nearly a quarter of high-risk victims (23%) and one in ten medium-risk victims went to an accident and emergency department because of their injuries. In the most extreme cases, victims reported that they attended A&E 15 times.

New SafeLives data shows that 85% of victims sought help five times on average from professionals in the year before they got effective help to stop the abuse. Regardless of whether the contact was about the abuse, each contact represents a chance for us to help the victim disclose and get help – a chance that was missed, leaving the family to live with abuse for longer.

A quarter of the children living with high-risk domestic abuse



under 3 years old



of children are also directly harmed

How can we find families sooner?

All agencies must proactively identify families living with abuse

In recent years, an increasing number of victims and families have been identified by other agencies such as health and children's social services. But still too many families are only getting help when the abuse reaches crisis point and the police are called – and not every family gets the right help then.

Other professionals may also suspect that domestic violence is happening, but not know what to do

There are likely to be many more victims and families in contact with other statutory agencies, but they are not identified as living with domestic abuse. There is considerable potential in locating domestic abuse specialists in mainstream services, like hospitals. Programmes in GP surgeries and advice agencies have shown that it is possible to significantly increase identification. And these programmes may also reach a group of victims and families who are different to – and in some cases, more vulnerable than – those identified by other routes.

Children and adult risk are not linked together – so we don't find and stop domestic abuse

Four in five of the families where a child is exposed to domestic abuse are known to at least one public agency. But too often agencies do not link up what they know about risks to each individual in a family, so other children or adults at risk of domestic abuse are not identified. Children's services must actively link the risks between mother and child in cases of domestic abuse. And agencies focussed on adults – whether the victim or on the perpetrator – must make sure that they consider the risks to any children in the family.

Some victims of domestic abuse are not identified as readily

Particular groups of victims may be less visible to services or be given less priority. These include young people, victims from black, Asian and minority ethnic (BAME) backgrounds, male victims and LGBT victims. Services may miss victims who remain in a relationship with their abuser, a higher proportion of whom may be BAME. Some of this group may later leave the relationship, but effective help should be available to those victims at the point they seek it. Services may also not identify victims who do not have children living with them. Significant numbers of victims have high

Families live with domestic abuse for



on average

Some victims suffer

over
50

incidents of domestic violence
before getting the help they need

levels of complex or multiple needs related to mental health, drugs and alcohol: specialist mental health and substance misuse services should be proactive in identifying them.

Friends and family are often the first people to whom victims or children disclose abuse, but they may not know what to do

Although friends and family may be the first to know about abuse, they may not know how to get help. And if they do use local or national websites or helplines to seek support, these may not be linked to local systems of support, so they might not get the right response.

Recommendations

We need to create the system to find every family as quickly as possible, and get the response right, first time, for every family.

- All mainstream services should create an environment where any member of the family can tell someone about domestic abuse, and know that it will be acted on appropriately.
- Services should make identifying domestic abuse part of their everyday practice.

- There should be more specialist domestic abuse services based in the community – eg Idva services in A&E.
- Services should proactively seek out victims from diverse backgrounds – by locating support in the community for example.
- We should judge the success of local domestic abuse strategies on whether they have cut the duration of domestic abuse.
- There should be meaningful ways to seek help for individuals and for friends and family if they are worried about someone else.
- Services must see and respond to the whole family – the child, the victim and the perpetrator.
- Identifying abuse must result in action that helps the family become safe. And every area should have enough capacity to respond to every identified victim and family living with abuse.
- SafeLives will investigate the potential of a One Front Door approach to increase identification.



We are SafeLives, a national charity dedicated to ending domestic abuse. Previously called Co-ordinated Action Against Domestic Abuse (CAADA), we chose our new name because we're here for one simple reason: to make sure all families are safe.

Our experts find out what works to stop domestic abuse. Then we do everything we can to make sure families everywhere benefit. It works: after getting the right help more than 60% of victims tell us that the abuse stops.

SafeLives
0117 317 8750
queries@safelives.org.uk
safelives.org.uk

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