



**Reducing
the Risk**
of Domestic Abuse



Ealing

Domestic Abuse & Primary Care

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Reducing the Risk



- **Since 2007, Reducing the Risk has dedicated itself**
 - **to the safety of adults and children at risk of domestic abuse and to the empowerment of support of professionals, volunteers and communities who support them.**
- **High Risk**
- **Court-Based IDVA Service**
- **RtR Domestic Abuse Champion Networks incl Primary Care Network**
- **DA Friends Network**
- **Employee Certification**
- **Training and Consultancy**

Remember, if this presentation impacts on you its ok to:



- **Leave if you need to**
- **Reach out to colleagues or friends to talk.**
- **If you need further anonymous emotional support 'Shout' is a free mental health charity that supports through text and is available on 85258**

Learning Aims



- **To inform and inspire**
- **To improve insight in Primary Care to support identification of people experiencing Domestic Abuse**
- **Discuss confidentiality of patients whilst supporting safety**
- **To increase awareness around risk assessment and referral**
- **Insight risk to babies, children and young people**



2021 DEFINITION OF DOMESTIC ABUSE

Behaviour of a person towards another person is “domestic abuse” if:

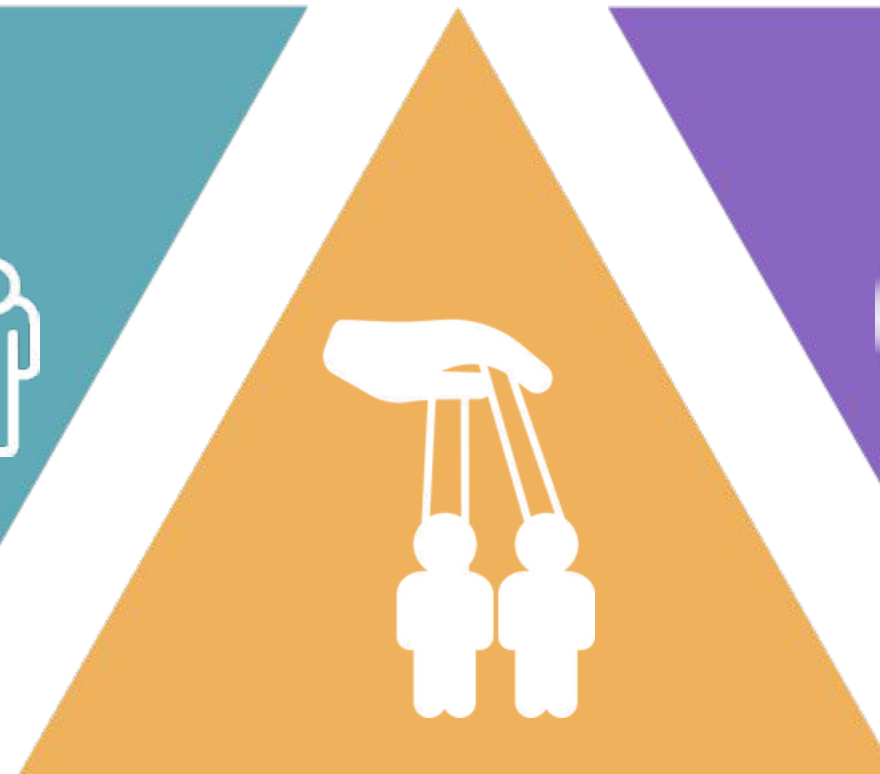
Both parties are each aged 16 or over and are personally connected to each other, and the behaviour is abusive. Abusive Behaviour includes abuse which is:

Violent or Threatening

Economic



Physical or Sexual



Controlling or Coercive



**Psychological, Emotional or
other abuses**

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

Personally Connected

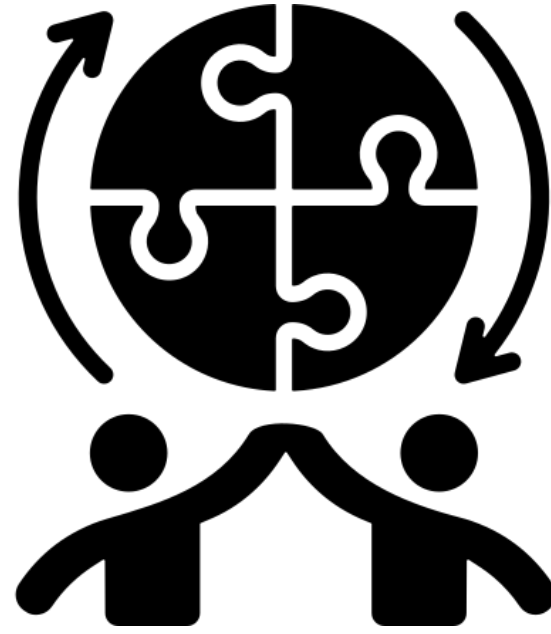


A	they are, or have been, married to each other	B	they are, or have been, civil partners of each other
C	they agreed to marry (whether or not the agreement has been terminated)	D	they entered a civil partnership agreement (whether or not the agreement has been terminated)
E	they are/have been, in an intimate personal relationship with each other	F	they each have/had, a parental relationship in relation to the same child
G	they are relatives		

Tactics - ownership, control, entitlement



Psychological
Emotional/tech



Culture



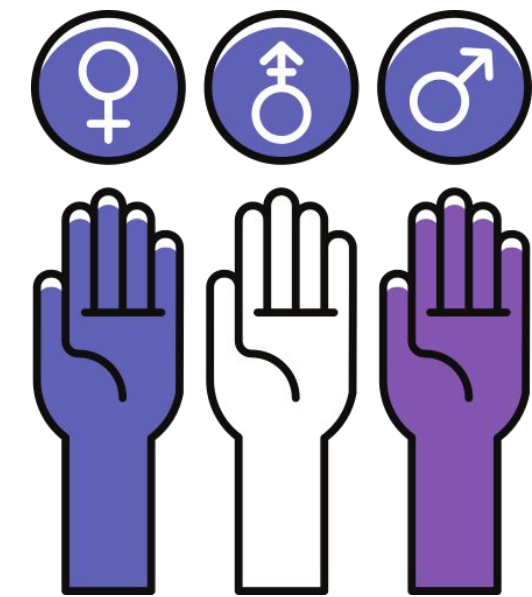
Physical



Economic/tech



charm - charisma
occasional indulgences



sexual abuse

National Learning - DHRs



Home Office Quality Assurance Panel September 2021 and October 2022.



- In the 129 DHRs reviewed there are 132 victims
- 50% the relationship with the perpetrator was partner or ex-partner
- 24% had a familial relationship with the perpetrator
- 26% died by suicide

• <https://www.gov.uk/government/publications/key-findings-from-analysis-of-domestic-homicide-reviews>

National Learning -Age



- **The average age of familial abuse victims was 55 years,**
- **the average age of familial perpetrators which was 35 years**
- **Intimate partner victims were on average 38 years old**
- **Intimate partner preparators average 43 years years old**
- **The average age of victims who died by suicide was 36 years.**

Prevalence

General Population v Primary Care Population

25%

Lifetime prevalence *

5%

Adult will be victim of domestic abuse in the last 12 months *

19%

said it's where they get their initial source of information from.***

47%

healthcare professionals were the primary point of disclosure for male victims



41%

women Lifetime prevalence in GP patients

17%

Attendees at GPs were victims of DA in Previous year*

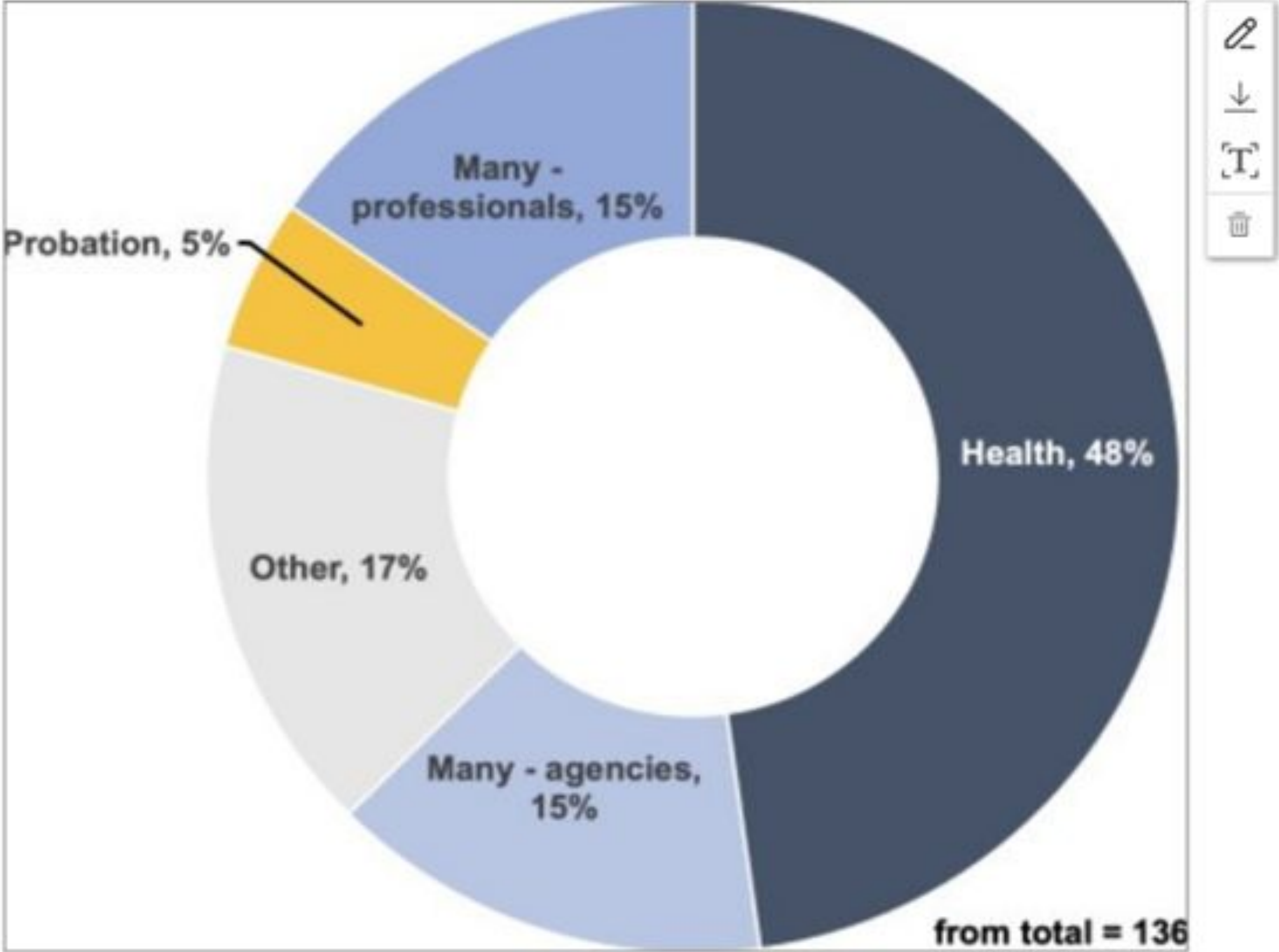
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female victims per dr per day when seeing 25 pts per day - 70% female

43%

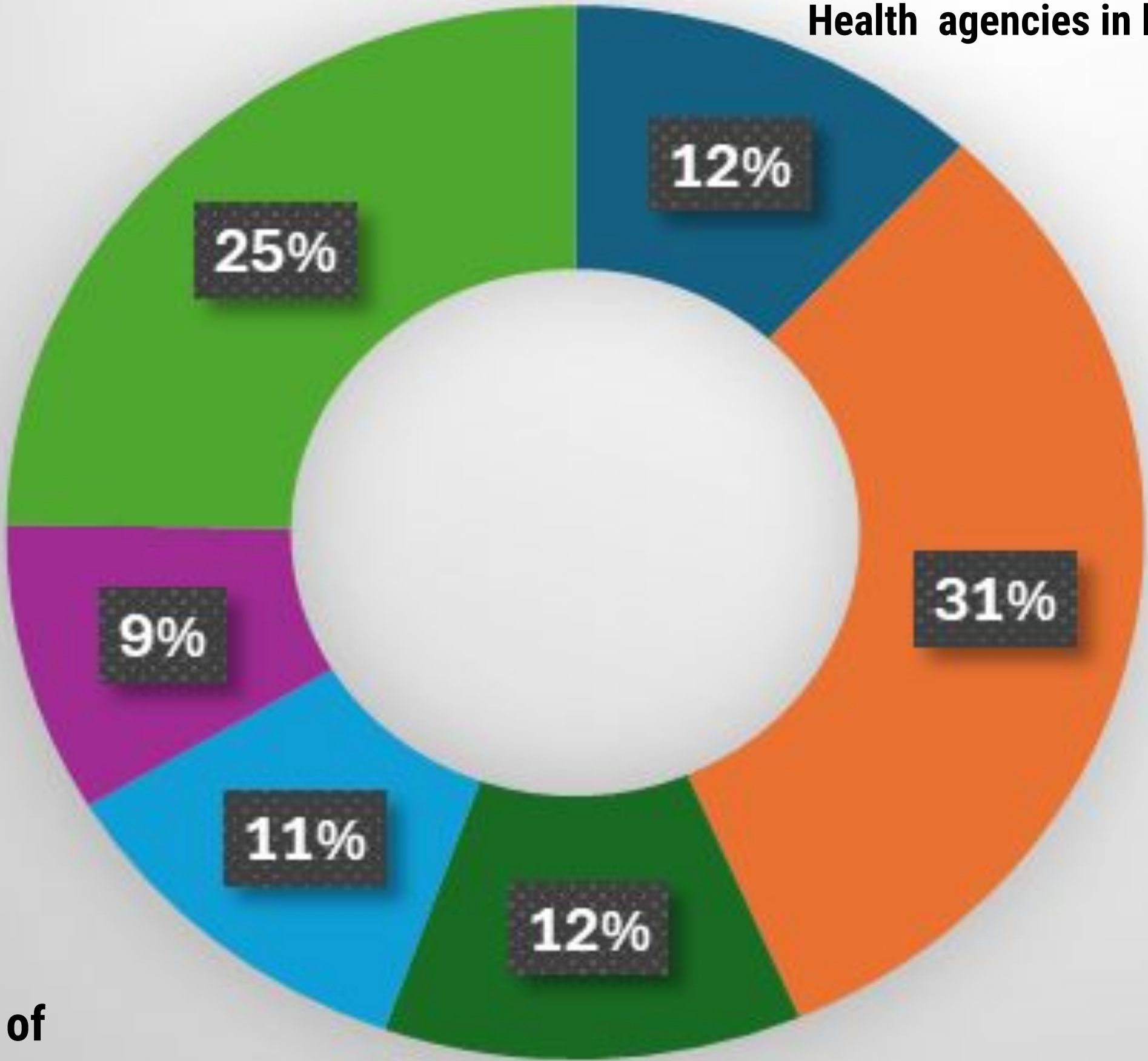
healthcare professionals were the primary point of disclosure for female victims

Figure 7 Agencies or people in lessons to be learned from familial abuse DHRs



**National
Analysis of
DHRs 21-22**

Health agencies in lessons to be learned from familial abuse DHRs

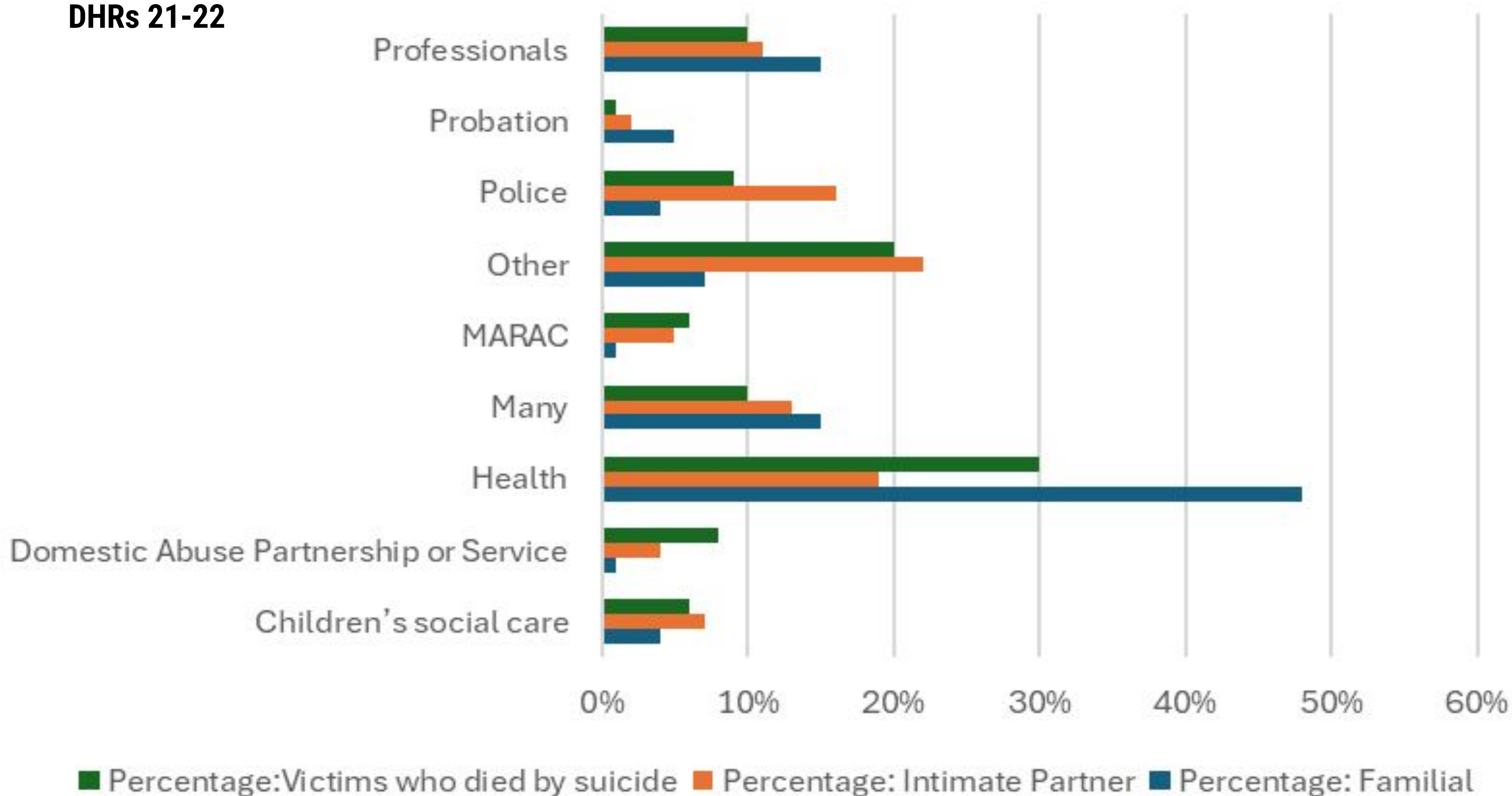


- NHS Trusts
- Mental Health services
- Other
- Commissioning
- Hospital
- GP

National
Analysis of
DHRs 21-22

**National
Analysis of
DHRs 21-22**

DHR Recommendations by sector



Domestic Abuse Commissioner's Office

Health services in particular can play a critical role; while 44% of victims and survivors told a health professional about their abuse first, just 19% heard about domestic abuse support in their area from health.

DAC - Health in DHRs

The DHRs show that routine inquiry in a range of health settings is absent, with lost opportunities for intervention.

Recommendations for improvement were targeted most often at Health Trusts, CCGs (now ICBs) and GPs.

Improving DVA risk assessments in health settings is crucial to ensuring safety for DVA victims.

NICE - QS116

- **Statement 1** People presenting indicators of DVA are asked about their experiences in a private discussion.
- **Statement 2** receive a response from level 1 or 2 trained staff.
- **Statement 3** are offered referral to specialist support services.
- **Statement 4** People who disclose that they are perpetrating domestic violence or abuse are offered referral to specialist services.

PH50 - environment

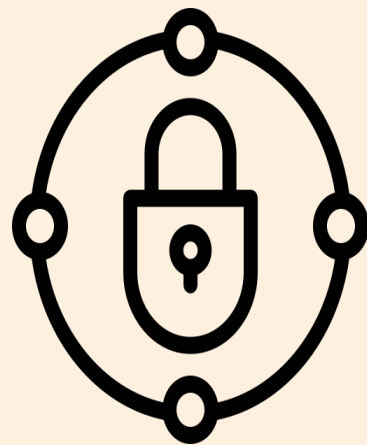


*Clearly display information
in waiting areas, and other
suitable areas*



**Do not use family or
friends if interpretation is
required**

***Privacy for
disclosures***



Safety



***informed Consent
when to share without consent***

Asking

Normalise the question

'we ask everybody'

Open ended questions

"I notice [injuries, behaviour, anxiety]. Is there anything going on at home or in your relationship that you'd like to share?"

Ensure confidentiality -

we won't break your confidence unless we are really worried about you or a child.

listen and validate

"Thank you for telling me; I know that must have been difficult."

Practical help

**'There are people who can support you, and I can help connect you with them.
Safety Plan'**

Be culturally competent and aware

Document !

Risk Assessment

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DASH



**DASH RIC
SPECCS**



Safety planning



Know how worried to be



**Connect with
services**

Impact on health

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of Domestic Abuse



There is an increased risk of subsequent cardiovascular disease, type 2 diabetes mellitus, and all-cause mortality in female survivors of DA.

Considering the high prevalence of DA, clinicians should be made aware of the disproportionately increased risk and thus are encouraged to manage modifiable risk factors actively in this group.

Chandan, J. S., et al (2020). Risk of Cardiometabolic Disease and All-Cause Mortality in Female Survivors of Domestic Abuse. *Journal of the American Heart Association*,

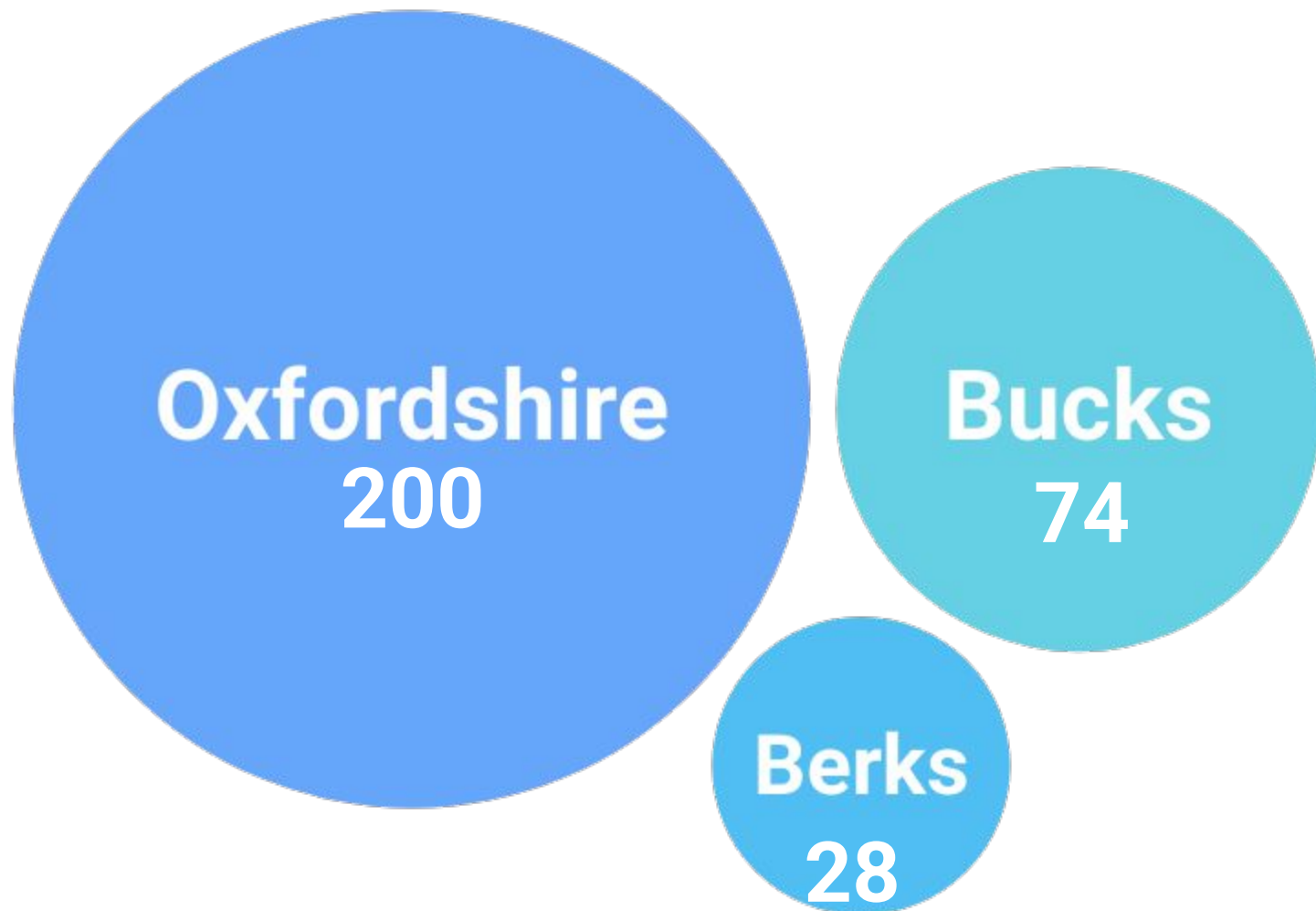


BALANCING PERSONAL CHOICE AND RISK

- **Children are now seen as victims** -follow statutory & local guidance
- **Always try to understand patients wishes and gain consent for onward referral**
- **Adult victims** -*Capacity should be considered - Confidentiality can be breached if there is a serious risk of harm to the individual or others.*
- **Adult victims** - DASH RIC / SPECES will help with clarifying risk level and use clinical judgement, safeguarding guidance to aid decision making

Build a relationship with local DA providers they will be able to help

RtR Primary Care Champions



This includes those trained in 2023/4

- **302 RtR Primary Care DA Champions registered on the RtR Hub.**
- **We surveyed all of the BOB Primary Care Champions in Dec 2023 and from their responses we found that respondents were very positive about the network and how it had increased skills, confidence and knowledge.**
- **The Primary Care Champions wanted more resources, training and opportunities to meet up.**



64% had supported a victim in the previous year



On average, each had supported 4.4 individuals



22% had supported a colleague who was supporting a victim

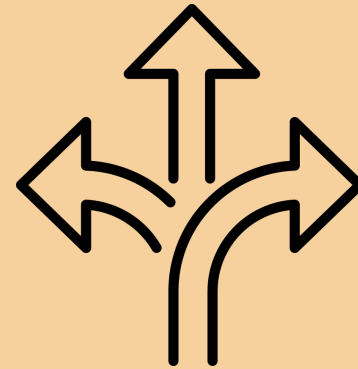
Primary Care Champions

THE KEY BENEFITS TO A CHAMPIONS NETWORK



AWARENESS

improvements in **noticing** and **understanding** victims and survivors of domestic abuse



WHAT TO DO

improvements in **confidence** and **skills** and **avoiding further harm**



WHERE TO GO

greater awareness of **'where to go'** or **'who to go to'** for support or services.

100% agreed they felt supported as an RtR Champion



100% knew where to signpost if they didn't know how to support a victim



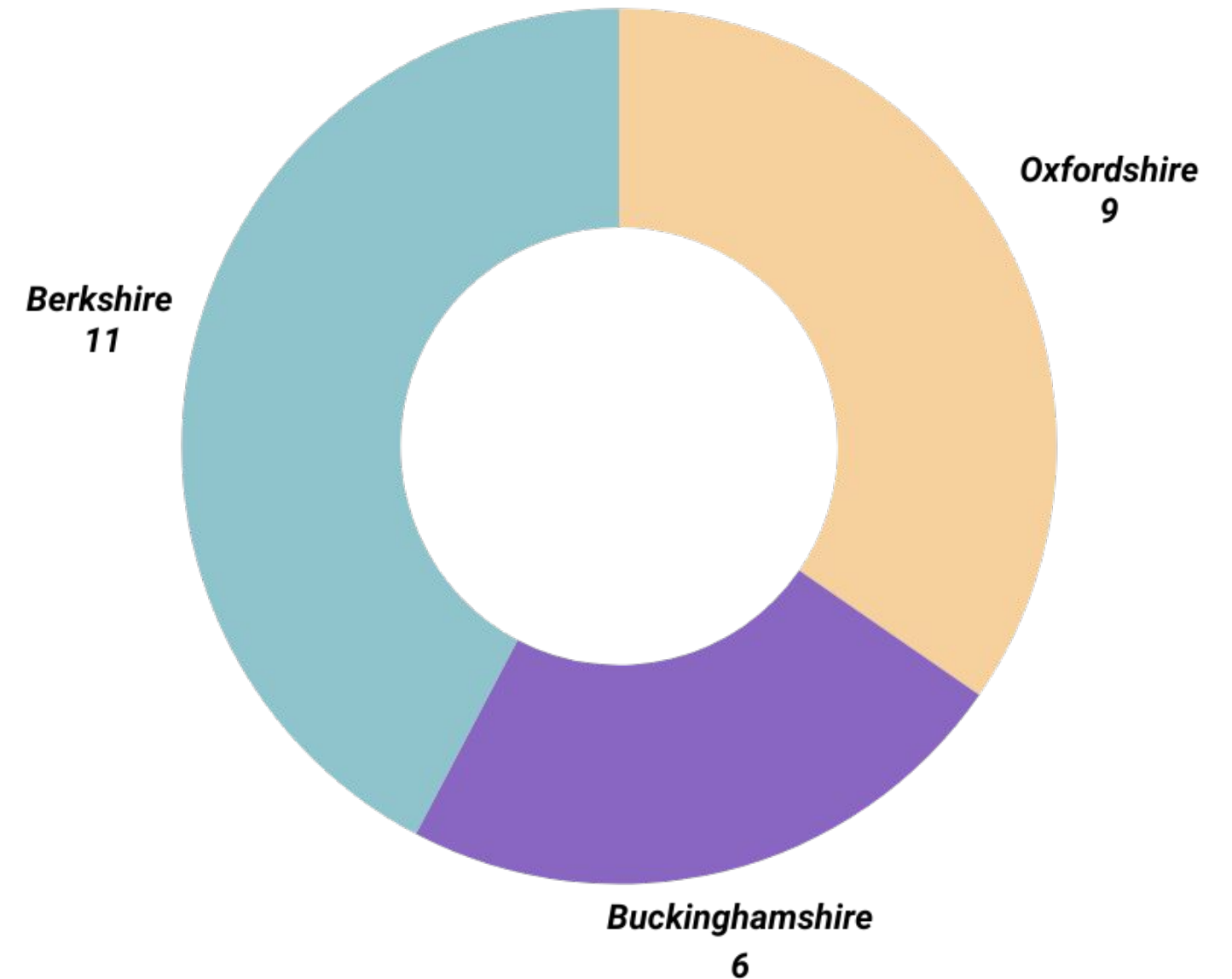
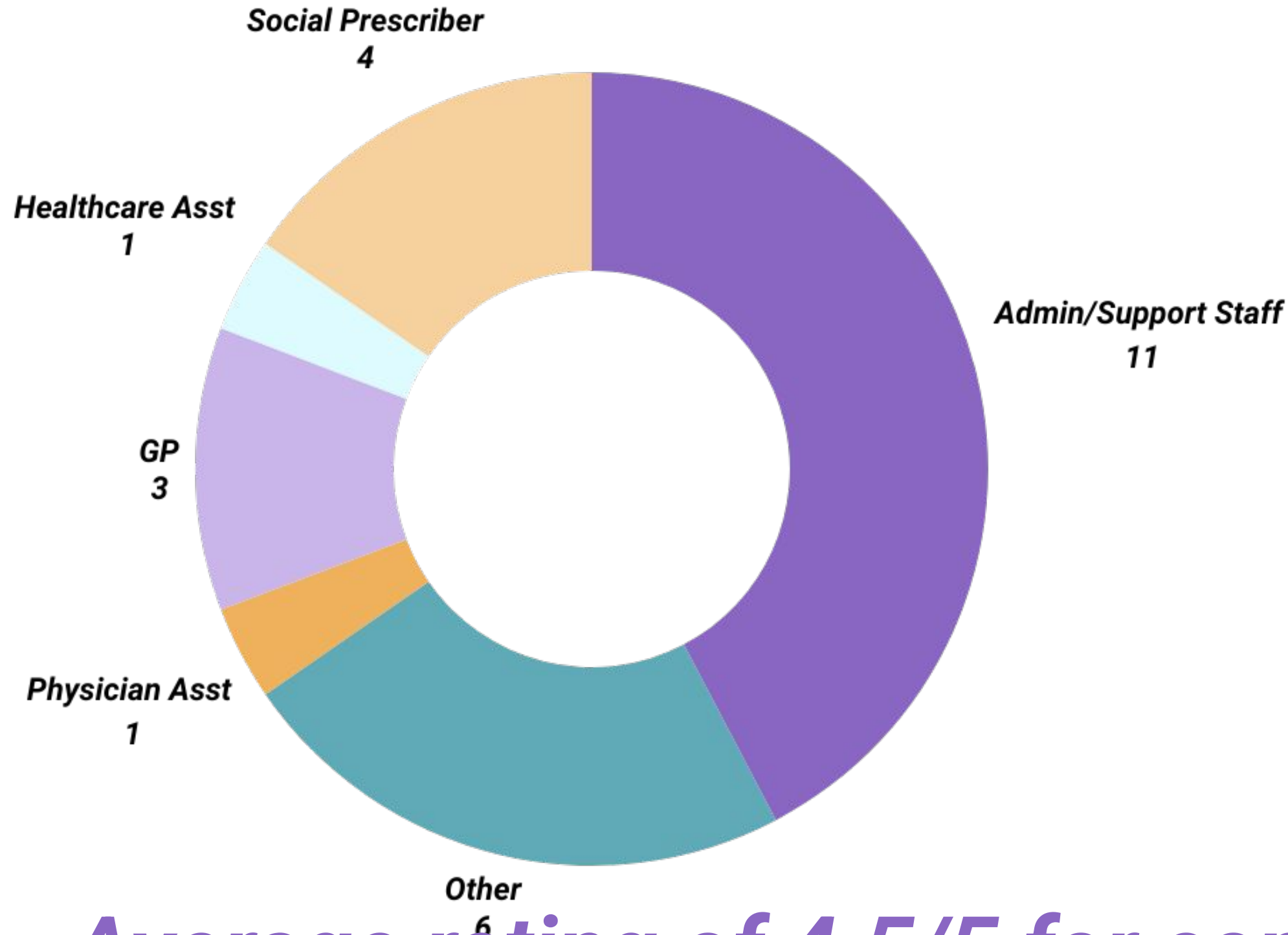
100% agreed that it made a difference to their confidence in responding to victims



92% of Primary Care Champions felt they had made a difference to victims of domestic abuse

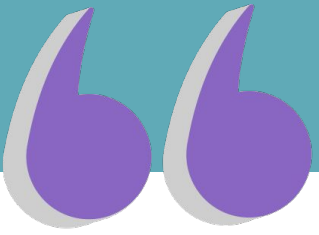


Training 23/24



Average rating of 4.5/5 for confidence in identifying and approaching cases safely

Experiences & Impact



Since the training I have delivered staff teaching on domestic abuse and created a new domestic abuse policy for the practice

We have put posters up in the toilets and love the little cards we've put on our table. Keep up the good work.

I completed a DASH form and safety planning with a client, she felt supported to contact the police to disclose the harassment she had been experiencing

Since the Training

73%

have used some element of the training in their surgery

67%

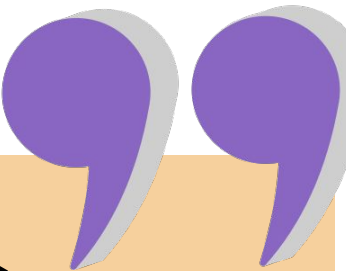
have spoken with a victim and signposted to a helpline

43%

advised a colleague or put up posters in the surgery

11%

have trained or spoken to doctors and other colleagues



FINDING HELP IN EALING - Adults

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Making a referral

referrals_edva@h4w.co.uk

ealingdva.org

020 4513 9678

Daily MARACs

Practical advice

<https://saferealing.co.uk/staying-safe-practical-advice/>

National /regional

ealing.gov.uk

DHRs

available on Ealing.gov
community safety pages

Children -

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- **How babies, children and young people may be impacted by experiencing DA**
- **Prevalence**
- **National learning**
- **Local Guidance**

Chandan, J. S., et al (2020). Risk of Cardiometabolic Disease and All-Cause Mortality in Female Survivors of Domestic Abuse. *Journal of the American Heart Association*,

Children - how are they affected

- As well as **directly harming** the child and **their development**, domestic abuse can **undermine or foster inappropriate relationships** between parents & children, **children may behave as the adult**, and **safe parents can't or aren't available to parent.**

The Child Safeguarding Practice Review Panel Annual Report 2020

482 serious incidents notified to the Panel, relating to 514 children.
35% children under 1
30% 15-17 year-olds

A higher proportion of ethnic minority children in incidents reported to the Panel compared with 2011 census

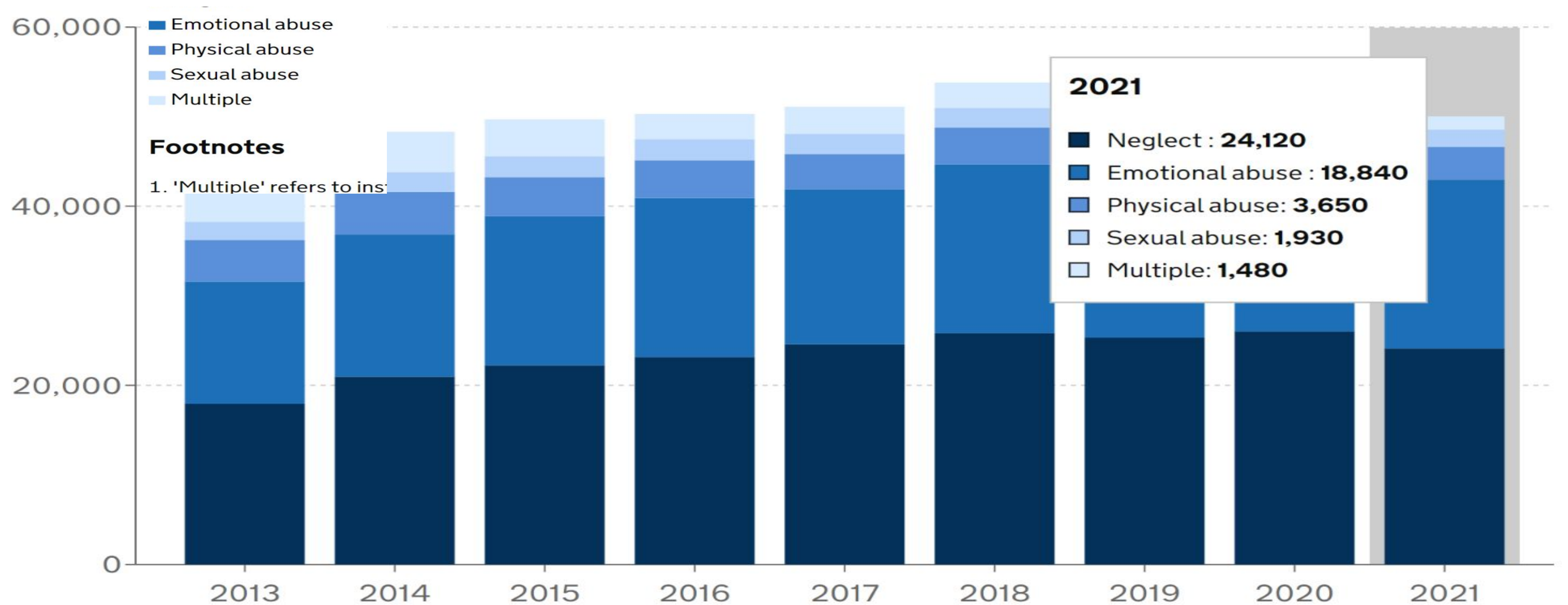
206 fatal incidents
30% SUDI
20% Suicide

267 serious harm incidents
38% NAI

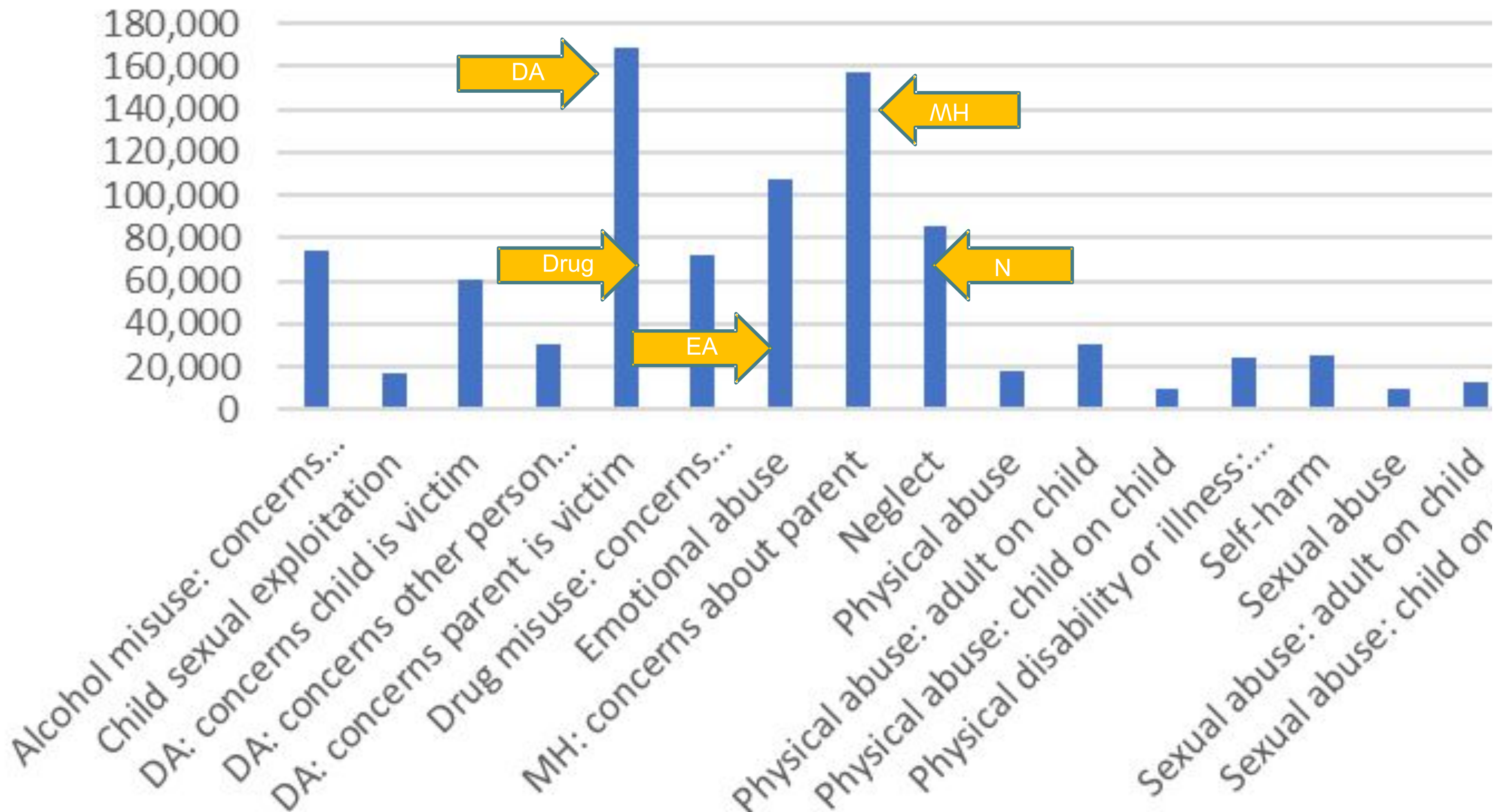
Neglect featured in 35% of all incidents
Domestic abuse was a background factor in 40% of incidents.

Parental mental ill-health featured in 146 incidents, 78% relating to mothers.

Number of children with protection plans by initial category of abuse as at 31 March, 2013 to 2021, England



Factors identified end of assessment 2021



**130,000 children live with domestic
abuse**

or

1

IN

5

Worst case scenario



The impact of domestic abuse on Arthur and Star was not explored in depth; concerns about domestic abuse towards Star's mother were considered episodically and not investigated sufficiently; information about Emma Tustin's history of domestic abuse was not triangulated between agencies.



Start with the 'Why?'

The Panel found that **most practitioners use the term 'domestic abuse' without full exploration, assessment or understanding of the nature of the abuse and its impact on the child and family.**

There appeared to be an assumption that simply naming 'domestic abuse' as a concern for a child is enough for all practitioners to understand the situation and respond appropriately. This is an overly simplistic, optimistic and, at times, dangerous assumption that leads to potentially avoidable harm to children and non-abusing parents.

Babies, Children and Young People

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- DA impacts on the fetus, baby, infant, child or young person
- The earlier it starts, the severity, type of tactics and , protective factors in place influence the impact
- It doesn't stop for the child when the perp has left
- Its difficult to define and articulate - direct harm, neglect, emotional abuse, harmful sexual behaviour,
- Tools can help to describe the impact - ie Ages & Stages. SDQ



Thresholds of Need and Assessment Protocol

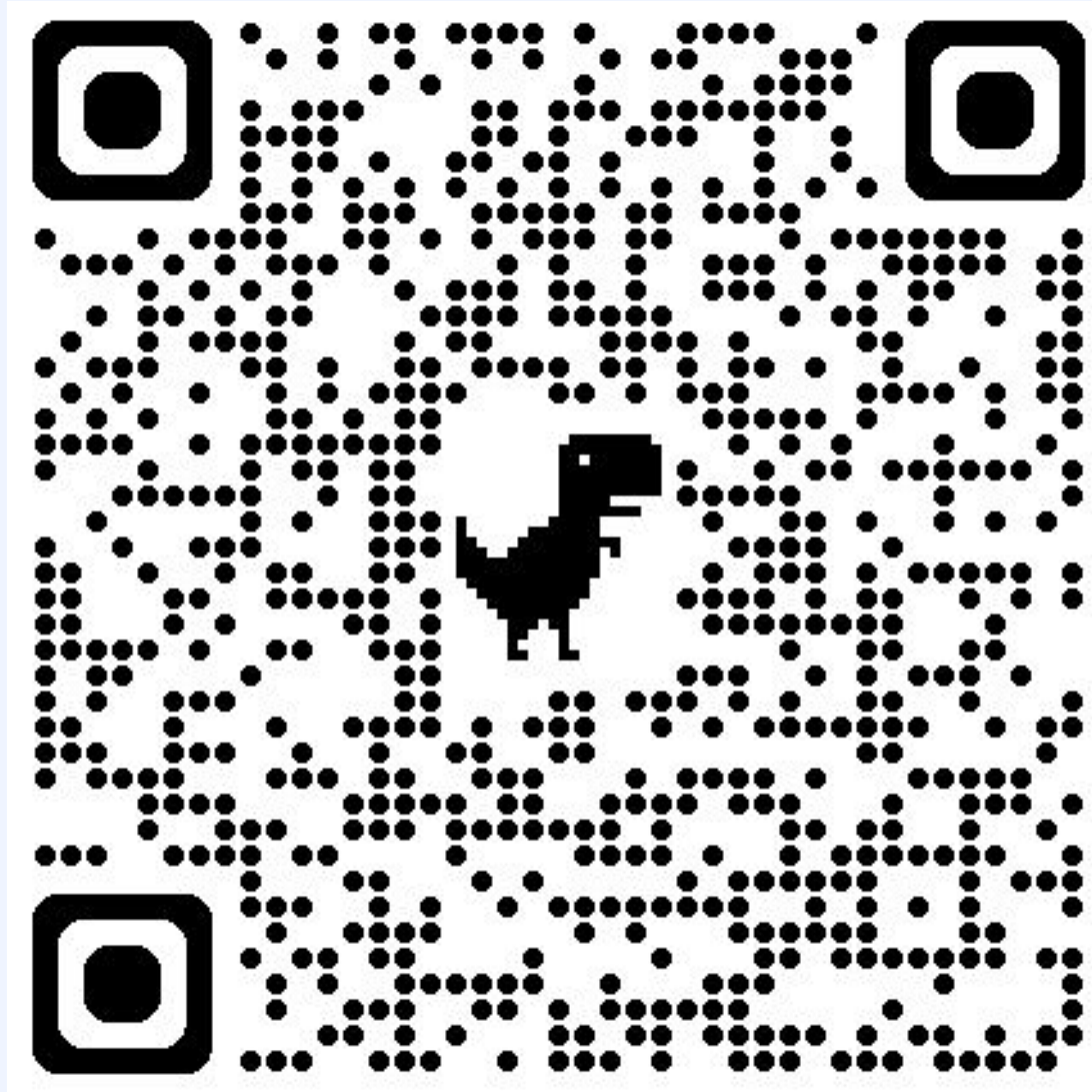
Making decisions that promote good outcomes
for children in Ealing

2019/20

**Guidance on recording of domestic violence and
abuse information in general practice medical
records**

Feedback

DA - Primary Care (Ealing)



References

- <https://domesticabusecommissioner.uk/wp-content/uploads/2023/12/Briefing-Paper-Health-Services-Domestic-Homicide-Oversight-Mechanism-2023.pdf>
- <https://domesticabusecommissioner.uk/reports/>
 - <https://www.gov.uk/government/publications/key-findings-from-analysis-of-domestic-homicide-reviews>
 - <https://www.nice.org.uk/guidance/ph50/resources/domestic-violence-and-abuse-multiagency-working-pdf-1996411687621>
Richardson J, Coid J, Petruckevitch A, Chung WS, Moorey S, Feder G: Identifying domestic violence: cross sectional study in primary care. *BMJ*. 2002, 324: 274-278. 10.1136/bmj.324.7332.274.

Ramsey.J etal Bristol University *Domestic violence: knowledge, attitudes, and clinical practice of selected UK primary healthcare clinicians*

Chandan, J. S., Thomas, T., Bradbury-Jones, C., Taylor, J., Bandyopadhyay, S., & Nirantharakumar, K. (2020). Risk of Cardiometabolic Disease and All-Cause Mortality in Female Survivors of Domestic Abuse. *Journal of the American Heart Association*, 9(4), e014580.
<https://doi.org/10.1161/JAHA.119.014580>