



Bournemouth

Borough Council



Dorset Police



NHS

Bournemouth and Poole
Community Health Services

Bournemouth & Poole Domestic Abuse Strategy

2010-2013

“We intend to work together to reduce the incidence of domestic abuse in Bournemouth and Poole and increase the safety of those experiencing domestic abuse”



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Introduction

Domestic abuse is recognised as a widespread problem in Bournemouth and Poole and causes huge amounts of suffering. At present, services for victim support are still patchy, but a structured and co-ordinated approach could prove the best way to help support victims. There are many overlapping issues to domestic abuse, including links to mental health, physical and learning disabilities, anti-social behaviour, homelessness, drug and alcohol misuse and safeguarding. With this in mind, our aim is to achieve zero tolerance of domestic abuse, increase reporting and reduce the impact of these issues.

A recent domestic abuse audit revealed that although Bournemouth and Poole has made good progress in recent years there is still much work to be done to ensure the safety of those experiencing domestic abuse and reduce the impact upon children and young people. Further work is also needed to hold perpetrators accountable for their actions.

Executive Summary

This strategy sets out our priorities and action plan for the next three years. Our Priorities include: **Victims** - ensure appropriate accommodation and access to quality support services are provided in order to improve their safety, reduce risk and reduce repeat victimisation; **Children & Young People** - ensure that safeguarding is a priority for all agencies and that they have the skills necessary to

respond to children & young people living with domestic abuse; **Vulnerable Adults** - ensure that anyone defined as a vulnerable adult is referred to the relevant agencies using Safeguarding Adults procedures to ensure their safety and reduce repeat victimisation; **Prevention, Protection & Criminal Justice** - provide suitable education through PSHE education in schools and publicity campaigns to raise awareness of domestic abuse, to encourage victims to report it and seek support, to increase early identification and intervention, and provide support to victims throughout the Criminal Justice process; **Perpetrators** - make perpetrators of domestic abuse accountable for their actions and brought to justice.



This strategy will be delivered in partnership between the statutory and voluntary sector agencies in Bournemouth and Poole to address the issue and to provide accessible and appropriate responses for all women, men and children experiencing domestic abuse.

We aim for a future working collectively to ensure that domestic abuse is challenged and not tolerated. This is Bournemouth & Poole's first Domestic Abuse Strategy and has been produced through extensive consultation between statutory and voluntary partners.



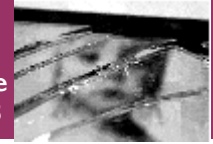
Section 1 Vision and Purpose

The Domestic Abuse Strategic Group has developed this strategy to create an environment where domestic abuse is not accepted or tolerated and is challenged and prevented within Bournemouth and Poole.

The overall vision of this strategy is to ensure that women, men and children whose lives are affected by domestic abuse will receive a high level of support and protection and that perpetrators are held accountable for their actions and behaviour.

Our vision over the next three years is to:

- Provide a co-ordinated response to domestic abuse
 - Promote partnership working
 - Ensure service delivery is accessible for all and recognises diversity
 - Commission effective and efficient services
 - Respond appropriately to the needs of children and young people who have experienced and witnessed domestic abuse
- Reduce homelessness that occurs as a result of domestic abuse where possible
 - Develop training for professionals and practitioners to raise awareness, and reduce the impact and detrimental effects of domestic abuse on women, men and children
 - Appropriately deal with perpetrators through the Criminal Justice System to ensure perpetrators are held accountable for their actions and behaviour
 - Identify and provide high quality interventions designed to challenge abusive behaviour and reduce the likelihood and severity of further domestic incidents



Key Improvements in multi agency approaches to Domestic Abuse between 2007-2010

- The development of the Multi Agency Risk Assessment Conference (MARAC) has been a huge success in Bournemouth and Poole. There is strong evidence of multi-agency working and a high level of participation of agencies from the statutory and voluntary sector that work directly with victims of domestic abuse
- The development of the IDVA service has enabled those that are at high risk of harm to be better supported and reduce the risk to both victims and children
- The development of the Domestic Abuse Strategic Group has ensured there is a strong multi-agency approach to tackling the issues of domestic abuse. It also enables improved commissioning of domestic abuse services to ensure there is no duplication and that finances are spent effectively. There is also evidence to show this enables strong partnership working
- There is a strong involvement from the voluntary sector with the willingness and dedication to addressing the impact of domestic abuse on individual lives
- There has been an increase in reporting of domestic abuse and offenders brought to justice in Bournemouth and Poole
- The implementation of the positive arrest policy within the police has resulted in more perpetrators being brought to justice
- The implementation of the Specialist Domestic Violence Courts in Bournemouth and Poole
- Supporting People sustaining funding for refuge provision within Bournemouth and Poole
- Developments of Sanctuary Schemes so victims have a choice to remain in their homes
- Development of the multi-agency Domestic Abuse and MARAC training, which is available to all staff and agencies that work with victims of domestic abuse. Partnership working with Health Services, Police and Bournemouth and Poole Council's enables them to have an increased awareness of domestic abuse, an understanding of the MARAC process and to complete risk assessments
- The development and provision of the Integrated Domestic Abuse Programme provided by Dorset Probation Trust ensures that offenders are challenged to take responsibility for their own offending behavior and make positive changes to avoid future abuse, thereby reducing repeat offending and protecting women and children



Identified Gaps

The following information summarises key gaps identified in service provision and multi agency working, which underpin the objectives within the strategy:

- Introduction of the CAADA risk assessment, MARAC and an increase in the numbers of people self-referring has increased the demand for the outreach and IDVA services.
- There is no tailored specialised support available for victims/survivors who have mental health, drug or alcohol issues
- There is a need to understand the current pattern of refuge use and housing options
- The Refuges may often be unable to accommodate victims/survivors with alcohol or mental health issues for a variety reasons. For example they may be unable to offer specialised support needed.
- There has been very little research carried out which involves victims/survivors of domestic abuse. There are currently no forums for victims.
- There is a lack of sustainable funding for services that provide support for victims/survivors of domestic abuse, with some services operating on short term funding streams.
- There is a lack of tailored specialised domestic abuse support services to young adults under the age of 18 who may be experiencing domestic abuse.
- There is a need to understand what support is offered for children living in households where there is domestic abuse
- There is a lack of tailored domestic abuse awareness programmes in schools
- There are no locally tailored multi agency communication strategies to increase awareness of domestic abuse and encourage victims to report and seek support
- There is no dedicated support attached to the specialist domestic violence court to support victims who are going through the criminal justice process
- There is a need to develop a multi agency training strategy



Priorities and Key Objectives

Outlined below are the key priorities identified in service provision and multi agency working. The three main priorities are as follows:

- **Priority One:** Accommodation and Support Services for Adult Victims/Survivors
- **Priority Two:** Safeguarding Children, Young People & Vulnerable Adults
- **Priority Three:** Prevention, Protection and Criminal Justice

ALL PRORITIES ARE OF EQUAL IMPORTANCE. However, it is acknowledged that this is a development programme and prioritisation for delivery will be required. There will be some priorities that will need to be implemented throughout the duration of the strategy.



Section 2 Understanding the Issue

The Government has agreed a 'core' definition of domestic abuse:

“any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults, aged 18 or over, who are or have been intimate partners or family members, regardless of gender and sexuality” (family members are defined as mother, father, son, daughter, brother, sister and grandparents, whether directly related, in-laws or step-family)
ACPO/Home Office 2008

Domestic abuse occurs across society, regardless of age, race, sexuality, wealth and geography. It is associated with animal abuse, anti social behaviour, bullying, child abuse, fear of crime, low public confidence in the Criminal Justice System, mental health problems, poverty, self harm, social exclusion, substance misuse, suicide, teenage pregnancy, truancy and women's offending.

Domestic abuse is best understood as a pattern of behaviour designed to achieve power and control rather than a single incident or even a series of incidents. Perpetrator behaviour escalates over time, both in the level of control exerted and in the severity of incidents.

Key National Statistics

- Domestic abuse accounts for 15% of all violent incidents
- 1 in 4 women and 1 in 6 men will be victims of domestic abuse in their lifetime, with women at greater risk of repeat victimisation and serious injury
- One woman dies every three days as a result of domestic abuse (1)
- On average a women is assaulted 35 times before reporting it to the police (2)
- 1 in 9 women using health services have been hurt by someone they know or live with (3)
- 22-35% of women who attend accident and emergency departments do so as a result of domestic abuse (4)
- 56% of all rapes disclosed by women were by partners or ex partners and such rapes were more likely to result in injury and be repeated than rapes of non-intimate partners (5)



- One incident of domestic abuse is reported to the police every minute (6)
- A study of 336 offenders convicted of domestic abuse found that alcohol was a feature in 62% of offences and 48% of offenders were alcohol dependent (7)
- Amongst a group of pregnant women attending primary care in East London, 15% experienced violence during their pregnancy, 40% reported that violence started whilst they were pregnant, and 30% also reported they had suffered a miscarriage as a result of domestic abuse (8)
- Research has found that domestic abuse is “the single most quoted reason for being homeless” (9)

Legislation and National Priorities

- Home Office updated National Delivery Plan for Domestic Violence (published 2008)
- All parts of the Domestic Violence, Crime and Victims Act 2004 are now in place
- Forced Marriages Act and the Forced Marriage Unit 2007
- Honour Based Violence Strategy 2008
- Violence Against Women and Girls Strategy November 2009



(6) Walker et al (2006) Crime in England & Wales

(7) Stanko, The Day Count: Snapshot of the Impact of Domestic Violence, UK (2000)

(8) Gilchrist et al (2003). Findings 217, Home Office: London

(9) Coid, J (2000). Conference Report: Working in a Wider Partnership, p4. Dept. of Health: London



Section 3 Underlying Principles of the Strategy

Bournemouth and Poole's aim is to reduce the impact of domestic abuse on the whole community in Bournemouth and Poole.

Underlying principles of this strategy

- Domestic abuse cannot be addressed in isolation. In order to tackle the issues, a co-ordinated partnership approach is essential. It is important that the Local Strategic Partnerships and local agencies recognise that tackling domestic abuse is a strategic priority and is funded appropriately
- Children that are living in homes where there is domestic abuse are supported to maximise their potential to achieve the Every Child Matters outcomes
- Those experiencing domestic abuse receive adequate support to reduce its impact
- Perpetrators are held accountable for their behaviour through the criminal justice system
- Perpetrators should be, wherever appropriate, able to access high quality interventions which challenge them to take personal responsibility for their behaviour and make positive changes to avoid future abuse

Prevalence of Domestic Abuse in Bournemouth and Poole

- Domestic Abuse is a significant local issue with up to 20,900 women and 13,270 men in Bournemouth and 17,850 women and 10,950 men in Poole experiencing domestic abuse in their lifetime (based on national statistics that one in four women and one in six men will be victims in their lifetime and the female and male population in Bournemouth and Poole).
- There were 2713 domestic abuse incidents reported to the police in Bournemouth and 1487 in Poole in 2008/09.

Cost of Domestic Abuse in Bournemouth and Poole

Professor Sarah Walby, University of Leeds, produced a publication "The Cost of Domestic Violence" in March 2004.

Applying Sarah Walby's formula to incidents of domestic abuse reported to the police in 2008/09, the cost of domestic abuse is around £18m in Bournemouth and £15m in Poole. In 2008/09 the cost to Bournemouth Children's Social Care was £652,800 and for Poole it was £552,400. The cost to health services was £8,235,100. The cost to Bournemouth Housing was £489,600 and £414,300 in Poole. The cost to the Criminal Justice System was £6,026,000, whilst Civil and Legal costs were a further £1,807,800. The estimated economic output (loss of working days) was £15,366,300.



Co-ordinated Action Against Domestic Abuse (CAADA) estimates the costs of an average MARAC case (which includes police time, GP visits, prescriptions, A&E attendances, two nights in a refuge and the criminal justice costs of a prosecution) at about £10,000.

Equality & Diversity

Bournemouth and Poole is committed to building a safe community in which diversity is valued and all those who live, work and visit Bournemouth and Poole are treated with respect. We recognise that domestic abuse cuts across all walks of life and our services will be available to meet those diverse needs.





Section 4 Overlapping Issues

This strategy also highlights key areas of overlap, such as links to alcohol and substance misuse, forced marriage, sexual health and mental health issues. Some victims/survivors may not be able to access services because of their additional needs.

Key groups include people using substances, people with mental health issues, people with physical or learning disabilities, those who are older and frail, people with insecure immigration status and black and minority ethnic people.

Substance misuse

Alcohol and drug misuse can feature in an abusive relationship and at times can be used as an excuse for abusive behaviour. However, alcohol or drug use does not cause abusive or violent behaviour and the majority of problem drinkers do not behave in an abusive manner.

There are few statistics which highlight the prevalence of alcohol or drug related domestic abuse in Bournemouth and Poole. In Bournemouth in 2008/09 there were 1607 domestic abuse crimes, of which 660 were alcohol

related (41%). In Poole there were 857 domestic abuse crimes, of which 255 were alcohol related (30%)

Substance misuse can form an integral part of the complex dynamics of violent relationships and can manifest in a number of ways. The perpetrator may:

- Act as a supplier and use access to substances as a form of control
- Force the partner to use substances
- Threaten to disclose their partner's substance misuse to authorities, particularly when the mother fears her children will be taken away
- Limit access to information or treatment
- Use their partners' earnings to buy substances, forcing her to earn money, often illegally
- Take out their aggression during detox phase

People experiencing domestic abuse can turn to alcohol or drugs as an escape from the pain they are experiencing. Before long, the user can become dependant, needing help with this alongside the domestic abuse. Substance misuse will also increase a victim's vulnerability.



Mental Health

Women, men and children who have experienced domestic abuse may often present with mental health issues. They may self-harm, self-medicate as a means to deal with the trauma of abuse and violence, and can often suffer longer term mental health issues such as clinical depression, anxiety, eating disorders, suicidal thoughts and Post Traumatic Stress Disorder.

Between 35% and 73% of abused women experience depression or anxiety disorders; this is at least three times greater than the general population. (10)

Domestic abuse commonly results in self-harm and attempted suicide: one-third of women attending emergency departments for self-harm were domestic violence survivors; abused women are five times more likely to attempt suicide; and one third of all female suicide attempts can be attributed to current or past experience of domestic violence. (11)

The figures for black and ethnic minority women are even higher: for example 50% of women of Asian origin who have attempted suicide or self-harm are domestic violence survivors. (12)

Children who live with domestic abuse are at increased risk of behavioural problems and emotional trauma, and mental health difficulties in adult life.

(13)

Women experiencing domestic abuse already suffer from stigmatisation and social isolation, and are particularly vulnerable to the additional negative effects of being labelled as "mentally ill". They may find it even harder than other women to report or even to name their experience as domestic abuse. When they do seek help, their credibility may be questioned and they may be unable to access suitable sources of support. For instance, a woman's mental health diagnosis may be used against her in civil or criminal proceedings, if, for example, she tries to obtain legal protection from her abuser, gain residence of her children, or give evidence if her partner is prosecuted.

Disability

Women with disabilities are twice as likely to experience domestic abuse as non-disabled women (1995 British Crime Survey, also confirmed by data from other countries). They are also likely to experience abuse over a longer period of time and to suffer more severe injuries as a result of the violence.

(10) Golding, J.M. (1999); Fikree, F.F. & Bhatti, L.I. (1999); cited in Charles, N., Griffiths, L. & Morgan, J. (2003);

(12) Chantler, K., et al (2001); Newham Asian Women's Project (1998);

(11) Stark & Flitcraft (1996); Mullender, Audrey (1996);

(13) Kolbo, J.R., Blakeley, E.H. & Engelman, D. (1996)



There are also additional barriers that a disabled woman must overcome when she seeks help. Getting away from abuse is often harder for disabled women because access to help and support is often controlled by the abuser.

Forced Marriage

Some individuals in the UK may find themselves facing a forced marriage.

Forced marriage is conducted without the valid consent of both parties, and where an element of duress such as blackmail, physical violence and/or emotional abuse is a factor.

Forced marriage is primarily, but not exclusively, an issue of violence against women. Most cases involve young women and girls aged between 13 and 30 years, although there is evidence to suggest that as many as 15 per cent of victims are male.

The majority of cases of forced marriage encountered in the UK involve South Asian families. This is partly a reflection of the fact that there is a large, established South Asian population in the UK. However, it is clear that forced marriage is not solely a South Asian problem and there have been cases involving families from East Asia, the Middle East, Europe and

Africa. Some forced marriages take place in the UK with no overseas element, while others involve a partner coming from overseas or a British citizen being sent abroad.

Honour Based Violence

Honour based violence (HBV) is a crime or incident which has, or may have been, committed to protect or defend the so-called 'honour' of a family and community.

HBV is a fundamental abuse of human rights. It is a collection of practices used to control behaviour within families protecting perceived cultural or religious beliefs and so-called 'honour'.

HBV happens when perpetrators feel someone has dishonoured the family and community by stepping outside behavioural boundaries accepted by that community.

HBV can be distinguished from other forms of violence as it is often committed with some degree of approval and collusion from family and community members.

HBV can also be the term specifically used to describe murders in the name of so-called honour, sometimes called 'honour killings'. These are murders in



which predominantly women are killed for perceived immoral behaviour, which is deemed to have breached the honour code of a family or community, causing shame.

This perceived dishonour is normally the result of utilizing dress codes unacceptable to the family, wanting to leave an arranged marriage, choosing to marry by own choice, or engaging in certain sexual acts.

We must be mindful of other forms of abuse and violence against women and girls:

Sexual Violence

Sexual violence has a profound impact on physical and mental health. As well as causing physical injury, it is associated with an increased risk of a range of sexual and reproductive health problems, with both immediate and long-term consequences. (14) Its impact on mental health can be as serious as its physical impact, and may be equally long lasting. (15)

Sexual Violence includes the following:

- Rape by strangers;
- Rape within marriage or dating relationships;
- unwanted sexual advances or sexual harassment, including

- demanding sex in return for favours
- sexual abuse of mentally or physically disabled people
- sexual abuse of children
- denial of the right to use contraception or to adopt other measures to protect against sexually transmitted diseases;
- forced abortion
- violent acts against sexual integrity, including genital mutilation and obligatory inspections for virginity

Stalking and Harassment

Stalking can be defined as the willful and repeated following, watching, and/or harassing of another person. Most of the time, the purpose of stalking is to attempt to force a relationship with someone who is unwilling or otherwise unavailable. Unlike other crimes, which usually involve one act, stalking is a series of actions that occur over a period of time. Although stalking is illegal, the actions that contribute to stalking are usually legal, such as gathering information, calling someone on the phone, sending gifts, emailing or instant messaging. Such actions by themselves are not usually abusive, but can become abusive when frequently repeated over time. (16) Stalking can be a terrifying experience for victims, placing them at risk of psychological trauma and physical harm. Common emotional consequences include depression, anxiety, loss of self-esteem, shame, hopelessness and a

(14) Holmes, M.M. et al, American Journal of Obstetrics and Gynecology, 1996, 175:320–324

(15) Briggs L, & Joyce, P.R., Child Abuse & Neglect, 1997, 21:575–582

(16) Sheridan, L.P & Blaauw, E.(2004): “Characteristics of False Stalking Reports”, Criminal Justice & Behaviour, Vol.31, No.1, 55-72



sense of vulnerability that can persist long after the stalking ends. It is common for victims to blame themselves (self-blame), especially if the stalking results from an established relationship with the stalker.

Female Genital Mutilation

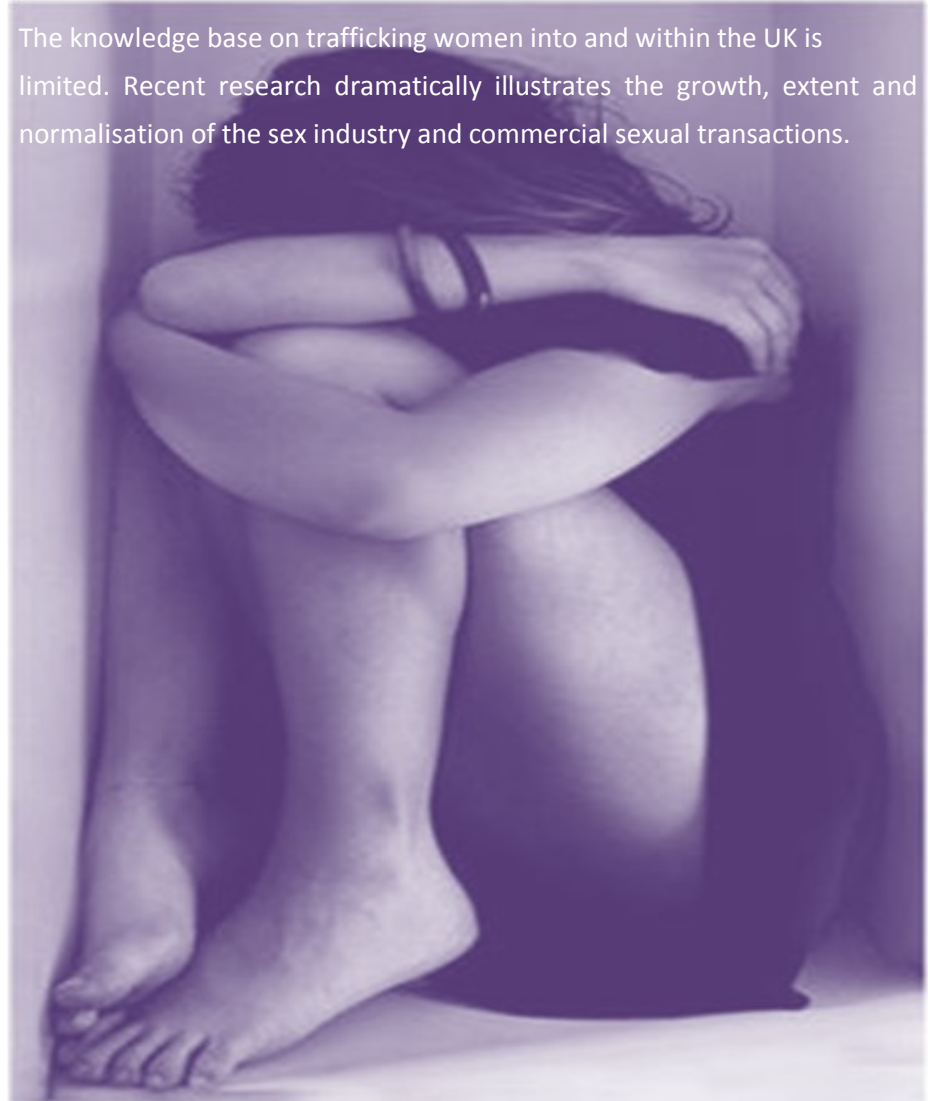
Female genital mutilation (FGM), also known as female circumcision or female genital cutting, is defined by the World Health Organisation (WHO) as "all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons".

As a result of immigration and refugee movements, FGM is now being practiced by ethnic minority populations in the United Kingdom. It is estimated that as many as 6,500 girls are at risk of FGM within the UK every year.

Trafficking and Prostitution

Trafficking into the UK supplies people to the sex industry and other cheap, exploitative labour markets. It occurs within, as well as across, national borders. Trafficking and the sex industry are fundamentally linked; women are trafficked for sexual exploitation into existing sex industries.

The knowledge base on trafficking women into and within the UK is limited. Recent research dramatically illustrates the growth, extent and normalisation of the sex industry and commercial sexual transactions.





Section 5 Priority Areas and Objectives

Priority 1: Accommodation and Support Services for Adult Victims/ Survivors

Objectives

- 1.1** Ensure that people experiencing domestic abuse can access services as early as possible. Prevent and reduce waiting lists for services.
- 1.2** Reduce the length of time that people are abused before they access support from specialised services.
- 1.3** Ensure victims/survivors can have a say in service delivery and what services are required to meet their needs.
- 1.4** Provide co-ordinated service provision for women with additional needs that include mental health and/or substance misuse.
- 1.5** Ensure those that are deemed to be vulnerable adults are protected through safeguarding adult procedures. Vulnerable adults are defined within the 'No Secrets' (2000) guidance as being:
 - Older people
 - People with mental health needs
 - People with learning disabilities
 - People with physical disabilities
 - People with sensory impairment
- 1.6** Prevent and reduce homelessness to enable those experiencing domestic abuse to remain safely in their homes where appropriate. This can be achieved by providing support services, sanctuary schemes, target hardening, emergency protection through civil injunctions and support to evict the perpetrator from the property.
- 1.7** Where homelessness is unavoidable ensure that there is emergency accommodation available through the provision of refuge or accommodation provided by the local authority.
- 1.8** Ensure people that are homeless due to domestic abuse are rehoused in appropriate permanent accommodation as quickly as possible.
- 1.9** Develop an understanding of the needs of people from minority and vulnerable groups, to ensure that specialist services provide appropriate support which reflects diversity.

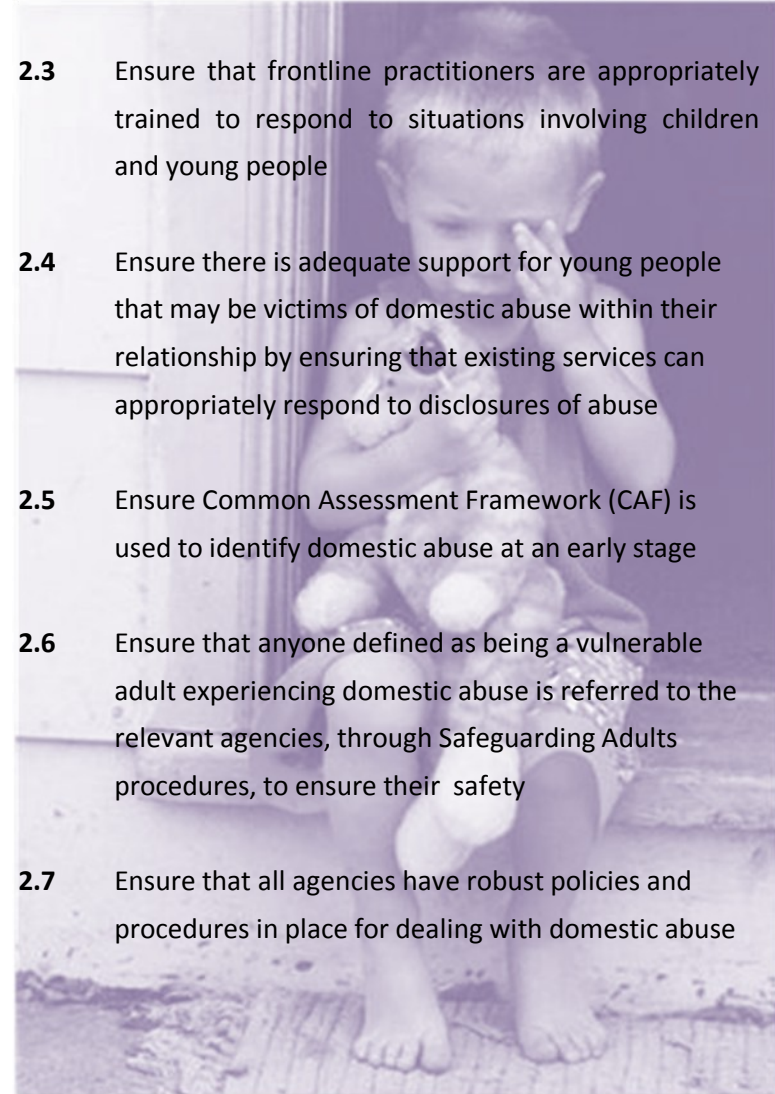


- 1.10** Develop formal commissioning arrangements to ensure that services reflect local need, and are effective and efficient in delivery.
- 1.11** Ensure effective dissemination of learning and recommendations from relevant multi-agency serious case reviews

Priority 2: Safeguarding Children, Young People & Vulnerable Adults

Objectives:

- 2.1** Ensure that safeguarding children from the impact of domestic abuse is a priority for all agencies. Ensure that all services which may come into contact with an adult experiencing domestic abuse are able to identify the involvement of children and young people and respond appropriately to safeguard them
- 2.2** Ensure existing services for children and young people are equipped with the skills to appropriately respond to children and young people living in a home with domestic abuse. Ensure support for children is provided through children's centres and schools
- 2.3** Ensure that frontline practitioners are appropriately trained to respond to situations involving children and young people
- 2.4** Ensure there is adequate support for young people that may be victims of domestic abuse within their relationship by ensuring that existing services can appropriately respond to disclosures of abuse
- 2.5** Ensure Common Assessment Framework (CAF) is used to identify domestic abuse at an early stage
- 2.6** Ensure that anyone defined as being a vulnerable adult experiencing domestic abuse is referred to the relevant agencies, through Safeguarding Adults procedures, to ensure their safety
- 2.7** Ensure that all agencies have robust policies and procedures in place for dealing with domestic abuse





Priority 3: Prevention, Protection and Criminal Justice

- 3.1 Provide education through PSHE curriculum within schools to reduce the numbers of children and young people becoming victims and perpetrators in adult life and reduce the cycle of abuse
- 3.2 Ensure there are media and publicity campaigns about domestic abuse to increase the awareness and encourage victims/survivors to come forward to seek support
- 3.3 Information and leaflets to be available to raise awareness of domestic abuse and which support services are available to increase early intervention
- 3.4 Ensure safe enquiry is in place in maternity services. Investigate whether this can be implemented within mental health services and by health visitors. This will ensure the early identification of domestic abuse
- 3.5 Identify and manage the risk of prolific offenders to reduce re-offending and repeat victimisation
- 3.6 Investigate the feasibility of increasing victimless prosecutions
- 3.7 Provide support to victims/survivors going through the criminal justice system from when an incident is reported through to the conclusion of a court case
- 3.8 Increase the proportion of offenders arrested and prosecuted for domestic abuse
- 3.9 Increase the amount of perpetrators that access structured interventions designed to challenge their use of violence in a domestic setting and reduce the frequency and severity of future incidents of abuse



Section 6 Actions

Priority 1:

Accommodation and Support Services for Adult Victims/Survivors to meet objectives 1.1 to 1.11

Action	Lead Agency	Timescales
Identify external funding sources to assist the voluntary and community sector in sustaining local services/projects.	Domestic Abuse and Sexual Violence Co-ordinator and the voluntary and community sector	On going
Review the effectiveness of the Independent Domestic Violence Advisor and Outreach service contracts in order to consider future funding arrangements	Domestic Abuse Strategic Group	June 2010
Qualitative research to gain a meaningful insight into victim's needs and experiences of local services.	Principle Analyst, Safer Poole Partnership.	March 2011
Mainstreamed domestic abuse training for frontline practitioners in adult services	Principle Analyst, Safer Poole Partnership Housing and Community Services Supporting People	ongoing
Develop and implement an adult referral pathway	Adult Social Care, Borough of Poole and Bournemouth Borough Council	December 2010
Maintain funding for the Sanctuary Room and Target Hardening Scheme*	Borough of Poole and Bournemouth Borough Council	Ongoing



**Accommodation and Support Services for Adult Victims/Survivors
to meet objectives 1.1 to 1.11**

Action	Lead Agency	Timescales
Review the demand for refuge placements and temporary accommodation with Supporting People and Bournemouth and Poole Housing	Domestic Abuse and Sexual Violence Co-ordinator, and Supporting People	March 2011
Incorporate the needs of minority communities, including those experiencing Honour Based Violence into the development of a training package	Borough of Poole and Bournemouth Borough Council	July 2010
Develop a training strategy, which incorporates competencies required across agencies and training to meet identified need	Borough of Poole and Bournemouth Borough Council	March 2012
Understand the current demand for local services by those unable to access public funds	Principle Analyst, Safer Poole Partnership	March 2011
Review Local Strategic Partnership commitment to review current domestic abuse resource allocations and long-term funding in order to develop long-term financial plans and plans for tackling abuse from April 2011	Bournemouth 2026 and Poole Partnership	September 2010
Conduct homicide reviews when there is a murder as a result of domestic abuse	Borough of Poole, Bournemouth Borough Council, Police and Health	Ongoing



**Priority 2: Safeguarding Children, Young People & Vulnerable Adults
to meet objectives 2.1 to 2.4**

Action	Lead Agency	Timescales
Ensure all relevant agencies receive appropriate training to understand the impact of domestic abuse on children, young people and vulnerable adults and the safeguarding issues related to domestic abuse	Borough of Poole and Bournemouth Borough Council	March 2012
Strengthen links between adult and children services by using the Think Family approach	Borough of Poole and Bournemouth Borough Council	Ongoing
Strengthen links between MARAC and child protection plans	Police	Ongoing
Ensure domestic abuse is considered in the planning and commissioning of children's services	Borough of Poole and Bournemouth Borough Council	Ongoing
Ensure Bournemouth & Poole Strategic Domestic Abuse Group maintains strong links with the Local Safeguarding Children's Board and the Bournemouth & Poole Safeguarding Adults Board	Chair of Group	Ongoing
Ensure services for young people can effectively respond to young people who are victims of domestic abuse	Borough of Poole, Bournemouth Borough Council and services for Young People	Ongoing



**Priority 3: Prevention, Protection and Criminal Justice
to meet objectives 3.1 to 3.10**

Actions	Lead Agency	Timescales
Work with Children's Trusts to develop tailored educational domestic abuse awareness programme	Children's Trusts, LSCBs and Education Departments	June 2011
Develop a directory of services for practitioners	Borough of Poole and Bournemouth Borough Council Domestic Abuse & Sexual Violence Co-ordinator	March 2011
Produce a leaflet for victims of domestic abuse	Borough of Poole and Bournemouth Borough Council Domestic Abuse & Sexual Violence Co-ordinator	March 2011
Ensure safe enquiry is implemented in maternity services, mental health services and by health visitors	NHS Bournemouth & Poole	September 2011
Actions	Lead Agency	Timescales
Increase the proportion of offenders brought to justice	Police	Ongoing
Identify and prosecute prolific offenders	Police	Ongoing
Increase the number of victims supported through the criminal justice system	Third Sector	Ongoing
Carry out an independent evaluation of MARAC including victim satisfaction	Principle Analyst, Safer Poole Partnership	December 2011
Review the MARAC referral thresholds in line with best practice	Police	March 2011
Actions	Lead Agency	Timescales
Conduct audit of current data collection	Principal Analyst, Safer Poole Partnership	August 2010
Ensure data sharing protocols are in place	Borough of Poole, Bournemouth Borough Council, Police, Health and Criminal Justice Board	September 2011



Measuring Success



The following indicators will be considered successful:

Increase in:

- The reporting of incidents of domestic abuse and honour based violence
- The reporting of vulnerable adults through safeguarding adults procedures
- The number of offenders brought to justice

Reduction in:

- Homelessness
- Repeat victimisation
- The number of children made subject to Child Protection plans

Other factors that will help measure success include:

- Case file audits
- Longitudinal studies with victims of domestic abuse





Useful Contacts

Local Contacts:

Bournemouth Women's Refuge 01202 547755

Poole Women's Refuge 01202 748488

Bournemouth Domestic Violence Outreach Project 01202 581750

Poole Domestic Violence Outreach Project 01202 710777

Butterfly Foundation 01202 463016

Citizen Advice Bureau 01202 290967

Rape Crisis 01202 547755

Relate (Bournemouth & Poole) 01202 311231

Victim Support 01202 606200

Police Domestic Abuse Officers

Bournemouth & Poole 01202 220502

National Contacts:

Forced Marriages Unit 0207 008151

Women's Aid/Refuge 24hr Helpline 0808 2000247

Support for Lesbian, Gay, Bisexual & Transgender (LGBT) Victims

Broken Rainbow 0300 999 5428 or 08452 60 44 60

Mon 14.00-20.00; Wed 10.00-13.00; Thurs 14.00-20.00

Support for Male Victims

Respect 0808 801 0327

Help for the Perpetrator

Respect 0845 1228609



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Glossary of terms

ACPO: Association of Chief Police Officers

CAADA: Co-ordinate Action Against Domestic Abuse

CAF: Common Assessment Framework

CYPSC: Children & Young People's Social Care

FGM: Female Genital Mutilation

HBV: Honour Based Violence

IDVA: Independent Domestic Violence Advisor

LGBT: Lesbian, Gay, Bisexual, Transgender

LSCB: Local Safeguarding Children Board

MARAC: Multi-Agency Risk Assessment Conference

PSHE: Personal, Social & Health Education

WHO: World Health Organisation



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