

East Sussex Safer Communities
Partnership

Domestic Abuse Strategy

2014-2019



east sussex
safer
communities
partnership

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What is domestic abuse?

From March 2013 we (the East Sussex Safer Communities Partnership) have adopted the new cross-government definition of domestic abuse. This is defined as:

“Any incident or pattern of incidents of controlling, coercive or 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. This can encompass, but is not limited to, the following types of abuse:

- psychological
- physical
- sexual
- financial
- emotional

“Controlling behaviour is: 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 is ‘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.”

In this strategy we use the terms ‘abuse’ and ‘violence’, but there’s no difference in meaning between them. Where we use the term ‘adult’ this includes people who are 16 and 17 years old, as well as people aged 18 and over, in line with the above definition.

Foreword

Nationally:

- One in four women and one in six men will experience domestic abuse during their adult lives in the United Kingdom.
- One in five violent crimes reported are committed by people against the person they are, or have been, in an intimate relationship with.
- On average, these acts of violence result in the deaths of seven women and two men every month.

This is unacceptable and has to stop.

Less than a quarter of people who experience abuse from their partner or a family member report it. Broken bones and bruises are the outward signs of domestic abuse, but hidden psychological and emotional injuries can also have a significant and often long lasting impact on victims.

It's also a great concern that children who are exposed to domestic abuse in families can have their safety and wellbeing affected, both long and short term.

Many victims find that removing themselves from domestic abuse isn't straightforward. There are a number of emotional reasons, ranging from love to terror. There are also practical reasons such as fear of losing access to their children, homes or their possessions.

Recognition of domestic abuse within intimate relationships and where an intimate relationship has ended is improving. Less well understood is the domestic abuse that occurs between family members, often between

generations and of most concern where an illness or disability impacts on someone's ability to get help or protection.

Providing support and reassurance to people faced with these difficult decisions is a key part of breaking the cycle of abuse. Domestic abuse is so often hidden behind closed doors, and the biggest challenge will always be bringing the issue into the open so that it can be overcome. By raising awareness about domestic abuse in all its forms, we can start to shed some light on this hidden crime and give people the confidence to speak out.

This is our second domestic abuse strategy, which aims to build on our previous work and reflects the level of commitment by East Sussex agencies and organisations to work together to effectively combat domestic abuse.

The strategy sets out a co-ordinated approach, and provides effective leadership for dealing with the impact of domestic abuse in the future. We've shared it with key stakeholders in the statutory and voluntary sector and with people who have experienced abuse, and this version is a product of that consultation.

This strategy is designed to ensure that there is a co-ordinated and joint response from agencies and organisations, who have all committed to reduce the prevalence of domestic abuse and its impact on communities and people in East Sussex.

The East Sussex Safer Communities Partnership is made up of the following organisations:

East Sussex Clinical Commissioning Groups

East Sussex County Council

East Sussex Fire and Rescue Service

Eastbourne Borough Council

Eastbourne Crime Reduction Partnership

Hastings Borough Council

Kent, Surrey and Sussex Community Rehabilitation Company

Lewes Community Safety Partnership

Lewes District Council

National Probation Service

Office of the Sussex Police and Crime Commissioner

Rother District Council

Safer Hastings Partnership

Safer Rother Partnership

Safer Wealden Partnership

Speak Up

Sussex Criminal Justice Board

Sussex Police

Victim Support

Wealden District Council

Also key to this strategy are the contributions of **NHS England**, **East Sussex Healthcare NHS Trust** and **Sussex Partnership Foundation NHS Trust**.

We're grateful to these organisations and to third sector organisations such as **CRI**, **Refuge** and **Southdown Housing Association** for their help in developing this strategy.

Why domestic abuse is a priority

Domestic abuse in East Sussex can happen in all communities, regardless of deprivation, education, age, sexuality, ethnicity or ability.

The majority of domestic abuse is experienced by women, and perpetrated by men; however there are a significant number of men who also experience domestic abuse.

Domestic abuse is experienced by transgender people, and it happens in heterosexual, lesbian, gay and bisexual relationships.

If it's not stopped, domestic abuse often escalates, becoming more intense and severe. It can lead to serious physical and psychological injury and, in some cases, death. Nationally, two women a week on average are killed by a current or former male partner.

The gender of both victim and perpetrator are a key influence on how someone is abused (the methods), the risks associated with that, and how severe the harm could be. There are other factors that can increase the risk of homicide (murder), which include:

- if the victim has been raped
- The extent of controlling behaviour
- if the abuse includes strangulation
- stalking
- if child abuse is also happening
- isolation and barriers to accessing services
- separation
- child contact disputes.

In the financial year 2011/12 in East Sussex, 398 victims were assessed as being at high risk of serious harm or homicide, and this rose to 477 victims in the financial year 2012/13. People we assessed as being at high risk of serious harm were referred to one of the county's Multi-Agency Risk Assessment Conferences (MARAC).

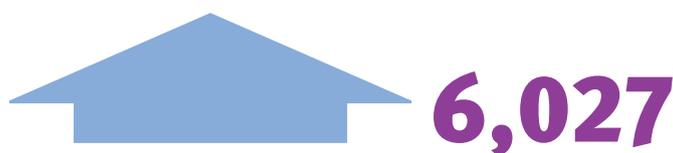
The British Crime Survey 2010/11 found that 7.4% of women and 4.8% of men aged 16-59 reported being a victim of domestic abuse¹ in the last year. If you applied these percentages to the East Sussex population, it would mean at least 10,000 women and 5,000 men within this age group had been a victim of domestic abuse in the last year.

However, that doesn't take into account the pattern of ongoing and repeat abuse that forms part of a pattern of controlling and coercive behaviours. Research shows that women are much more likely to experience repeat domestic

abuse than men (Walby and Allen 2004). Based on this, we estimate that over 40,000 women and nearly 1,250 men living in East Sussex could, at some point in their lives, experience four or more repeat incidents of domestic abuse as adults.

Limited national research estimates that lesbians, gay men, bisexual and transgender people will experience roughly the same amount of repeat domestic abuse incidents as heterosexual people.

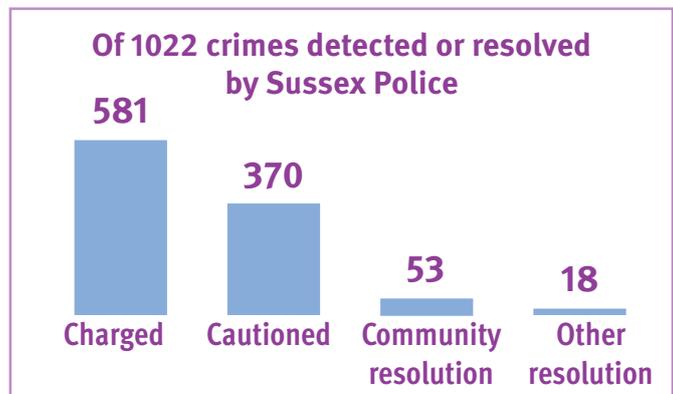
In East Sussex in 2012/13:



Domestic abuse crimes and incidents were reported to the police and were risk-assessed. That's an increase of 523 on 2011/12.

Of those:

A significant number of the incidents reported to the police are verbal altercations, where there are no indications of a risk of significant harm and no crime has been committed.



¹ includes partner or family non-physical abuse, threats, force, sexual assault or stalking

In the same period (2012/13), there were 437 finalised domestic abuse prosecutions, of which 344 were successful.

Domestic abuse can be a contributing factor to serious health problems, including

- physical injury
- self-harm and eating disorders
- homelessness and unemployment
- sexually transmitted infections
- attempted suicide
- depression and anxiety
- a significantly higher risk of developing alcohol or drug problems

Children Affected by Domestic Abuse

Being exposed to domestic abuse is the most frequently reported form of trauma for children. Nationally around a quarter of people aged 18-24 reported that they had been exposed to domestic abuse during their childhood.² Three quarters of children living with domestic abuse are directly exposed to the abuse and, of these, half are directly abused.

Based on these national figures, and on the assumption that children's exposure to domestic abuse in East Sussex is in proportion to the national picture, we estimate that 6,500 children are exposed to domestic abuse each year in East Sussex. Studies suggest that the consequences of exposure to domestic abuse will be persistent and serious for a fifth of those children.

In 2012/13, of the 477 people experiencing domestic abuse (where there was an assessed high risk of serious harm referred to MARAC), 306 (68%) had children. In the previous year, there were 398 people referred to the MARAC, of whom 279 (70%) had children.

To understand the age profile of children discussed at the MARAC, a snapshot analysis was undertaken for a three month period of MARAC referrals between June and August 2013. During this period there were a total of 125 cases discussed, of which 61% (76 cases) involved victims with children.

There were 30 individual children identified who were not living with the victim or perpetrator at the time of the MARAC discussion. However, 106 individual children and young people were recorded as living with identified victims at the time of the MARAC discussion. 44% (47) of these children were aged 0-4, 36% (38) aged 5-10, and 20% (21) aged 11-17.

Children's Social Care representatives attend MARAC meetings in order to ensure that appropriate action is included in the MARAC action plan to ensure the safety of children and young people.

Domestic abuse is a particularly significant factor in referrals to Children's Social Care services in East Sussex, particularly referrals triggered by the attendance at domestic incidents from Sussex Police.

In 2012, there were 2,766 contacts made with Children's Social Care services in East Sussex where the immediate issue was recorded as either 'Domestic Abuse' or 'Alleged Domestic Abuse'. Domestic abuse was more likely to be identified as a referral issue for children aged 0-4. Some of the contacts were repeat contacts (about the same children), including those already receiving Children's Social Care services. As a result of these contacts,

- 806 social care Family Assessments were undertaken, and
- 246 formal investigations completed.

² (NSPCC; "Cruelty to Children Must Stop", 2013).

Although in many cases the primary reason for referral to Children's Social Care is not domestic abuse, 19% of all Family Assessments initiated in 2012 had an initial referral reason of 'Domestic Abuse' or 'Alleged Domestic Abuse'.

Domestic abuse was also seen as the primary risk factor for 27% of children who had Children in Need or Child Protection Plans in 2012-13 – a proportion that is consistent with the previous three years. Again, this is likely to be an under-representation, as risk from domestic abuse may be one of several risk-factors for children, but not necessarily identified as the primary one.

Teenagers also experience domestic abuse in their own relationships. The change in the cross-government definition of domestic abuse is relatively recent, which means that we have limited information to tell us the extent of domestic abuse in teenage relationships is in East Sussex.

Between January and December 2013 there were 194 non-crime occurrences (incidents where the police were called but there is no evidence that a crime had occurred) (4.7% of the total) recorded by Sussex Police involving people aged 16 or 17. In the same period, there were 59 victims of a domestic abuse crime recorded as aged 16 or 17 (3.1% of the total), and there were 34 offenders recorded in this age group (1.8% of the total). Since this change in definition was introduced however, East Sussex County Council has introduced a development role within the Targeted Youth Support to improve the identification and response for teenagers experiencing abuse. We hope to gain an improved understanding of the extent of teenage relationship abuse as these practices are embedded.

There are also links between domestic abuse, child sexual exploitation, youth offending and teenage pregnancy.

Specific forms of abuse, like so-called 'honour' based violence and forced marriage, are more likely to affect younger adults and have a significant impact, but are likely to be less well reported than other forms of domestic abuse.

Current context

What's happening nationally

Reducing and preventing domestic abuse is a central government priority with cross-party support. Preventing domestic abuse is central to public health, reducing crime and the harm caused by serious violent crime, safeguarding children and adults with support needs, promoting education, learning and skills development, and promoting equality.

The government's 2012/13 action plan, 'Call to End Violence against Women and Girls: Taking Action – the next chapter' sets out the following outcomes:

- Society believes violence against women and girls is unacceptable and is empowered to challenge violent behaviour
- Fewer victims of sexual and domestic violence
- Frontline professionals (like teachers, doctors, police and prosecutors) are able to identify and deal with violence against women and girls
- Employers recognise and support victims of domestic and sexual violence
- Women and Girls who are victims of violence receive good and consistent levels of service
- Statutory agencies and non-government organisations get the response right the first time
- High quality commissioning and service provision at a local level
- Better support for victims and their families in statutory and voluntary sectors
- Working together to share information and agree practical action
- Improved life chances of victims overseas

- Violence against women and girls is an international priority
- Increase confidence of women and girls to access the criminal justice system
- Improve criminal justice outcomes for women and girls who are victims of abuse, including conviction rates
- Rehabilitate more offenders
- Reduce multiple incidents of violence by using appropriate risk management tools

The National Institute for Health and Care Excellence (NICE) published public health guidance, "Domestic violence and abuse: how social care, health services and those they work with can respond effectively" in February 2014. The guidance sets out seventeen recommendations for:

- Effective commissioning through planning services, developing care pathways and promoting recovery from historic abuse
- Developing partnership working and promoting effective information sharing
- Ensuring that support is tailored to the needs of those who need it and that barriers to accessing services are removed
- Promoting disclosure of abuse within all services, including adoption of routine and targeted enquiry
- Maintaining a focus on services for children and young people who experience abuse, or who are exposed to abuse
- Facilitating behaviour change for perpetrators of abuse
- Ensuring staff receive training and continuous professional development appropriate to their role

What’s happening locally

In East Sussex, we’ve been developing our response to domestic abuse, building on local experience and drawing from national policy and from examples of good practice.

We commission specialist domestic abuse services in East Sussex including refuge provision, the Independent Domestic Violence Adviser Service and the Children’s Therapeutic Service. Alongside these, we also run specialist interventions, such as perpetrator programmes and sanctuary schemes. The MARAC model has been adopted in East Sussex since 2008 and we’ve been making improvements to how they work from their start.

We’ve developed effective working practices around domestic abuse, and examples of these (by agency) are included in Annex 3.

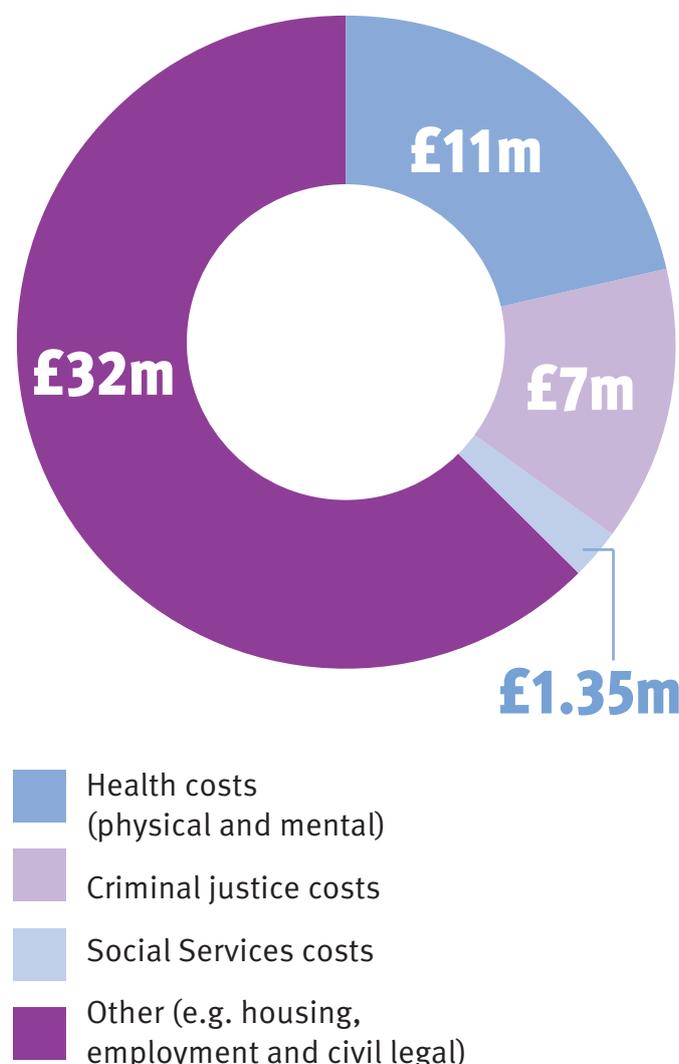
In 2010, we carried out a domestic abuse and sexual violence needs assessment. It outlined the prevalence of domestic abuse in East Sussex, and the degree to which people reported domestic abuse to the police. Related to that, it also highlighted the un-met needs of victims of domestic abuse and children exposed to domestic abuse. The assessment showed that sexual assault (in the context of domestic abuse) was a particularly under-reported crime. Overall, findings were that East Sussex:

- had the foundation for delivering a co-ordinated community response to domestic abuse locally,
- had independent domestic abuse advocacy and support services for survivors and programmes for perpetrators, as well as
- a Multi-Agency Risk Assessment Conference (MARAC) system to safeguard those most at risk of significant harm or injury.

The needs assessment made some specific recommendations about streamlining the support pathway for victims of domestic abuse, which were adopted when we re-commissioned the East Sussex Independent Domestic Violence

Adviser Service. We consulted domestic abuse survivors locally, and found that they welcomed and highly valued the support offered by specialist domestic abuse services in East Sussex. However, we could improve the way that some public services identified and responded to their needs, and ways needed to be found to increase the confidence that survivors had in these services.

Drawing on the research conducted by Professor Sylvia Walby, the 2010 needs assessment outlined the estimated human and emotional annual costs of domestic abuse to individuals and families in East Sussex as £165 million. The annual costs to public services in responding to domestic abuse were estimated as:



The Offices of the Police and Crime Commissioners for Surrey and Sussex

carried out a joint assessment of needs of victims of crime in 2013 to inform their future commissioning plans. Work is underway to ensure that support to victims of particular crime types (such as domestic abuse) is linked to commissioning plans for specialist services such as Independent Domestic Violence Adviser and floating support services.

In 2013, Sussex Police conducted a review of domestic abuse victim experiences in a facilitated workshop. Police, local authorities, specialist service providers and members of the public with direct experience of domestic abuse explored the particular circumstances and issues affecting male victims, women who are victims of abuse whilst pregnant, young people as victims and the issues affecting women who experience escalating abuse over time and who have children. The group developed detailed maps of the barriers to reporting abuse and seeking help during the workshop, and agreed a set of recommendations. These included streamlining the multi-agency response to improve the co-ordination of agency responses, improvements to training, better information sharing and better support within the criminal justice system.

Sussex Police were given an award by the White Ribbon Campaign in the summer of 2013, in recognition of their work in preventing and tackling violence against women and girls, including domestic abuse. Raising awareness, together with a commitment to responding effectively were aspects particularly commended by the campaign.

In June 2013, we began a review of the Multi Agency Management of Domestic Abuse across East Sussex. The review focussed on two key things: the processes that organisations involved use, and what the people who use the services value or get benefit from. We wanted to be able to use the results to identify and then remove or reduce activities that weren't valued or gave no benefit. The review highlighted some key ways to improve the effectiveness

and efficiency of our approach to managing domestic abuse, drawing on learning from other areas who had updated their systems.

As a result of this review, we're devising a new process for managing cases of domestic abuse in East Sussex. Key changes include:

- introducing a new MARAC system using technology to share information in a more timely way (compared to the previous monthly system),
- a reduced core membership, with opportunities for other agencies to participate on a case-by-case basis, which will reduce the amount of time spent in physical meetings, and
- introducing a 'quality and audit' group to ensure that the outcomes of the MARAC are being met, and that learning from cases that have been referred to the MARAC is used to continuously improve practice.

We'll test out these methods during 2014 and they will be evaluated by asking for all the participants' views.

In response to worsening attrition rates in criminal courts, Sussex Criminal Justice Board launched a review of Domestic Violence Courts across Sussex in September 2013. The recommendations arising from this review included:

- simplifying the way victims of domestic abuse can get support
- better co-ordinating risk assessment and risk management between agencies
- reducing the time between a perpetrator being charged and the case progressing through the Court

Views of victims of domestic abuse

We interviewed victims of domestic abuse who had had access to specialist domestic abuse services or interventions within the last year to get their views and perspective.

We asked them to identify when they had first become aware that they were being abused, in order to guide the development of early interventions.

Most had recognised abusive behaviour early on (some with the help of friends or services), but many had not known what to do, or had been fearful about what action to take to make the situation better.

People agreed that being asked by services about abuse was much easier than volunteering this information themselves, which is a perspective that is consistent with several other studies. Fear of how services, or friends, might respond to finding out about abuse was a significant factor in why people didn't say anything; similarly many people could clearly remember the relief they felt when the person they had told about the abuse responded well.

After they'd told the service about their abuse, many of the victims interviewed were supported by several agencies. Many thought these agencies worked well together; however some felt that there was at times too narrow a focus within some agencies.

A more detailed summary of the views of victims of domestic abuse is contained within Annex 2 of this strategy document.

Views of perpetrators of domestic abuse

We interviewed people with criminal convictions for domestic abuse crimes to get their views and perspective.

Most people we interviewed first realised that their behaviour was abusive following an incident of violence, or when the police became involved, but some had been advised by family or friends or by a health professional. Many spoke about their behaviour with a friend, while smaller numbers spoke to a professional or no-one at all.

There was a mixture of experience of services the first time contact was made in relation to domestic abuse; for some, there was fear about what would happen to them. Similarly, there were mixed responses to the effect on children: some did not think children had been affected, and others were aware of an impact; a third group realised the likely impact on children with hindsight.

People's experience of services varied. The majority found the Probation Service intervention helpful, although two found the intervention either unhelpful or found the sanctions imposed difficult. Some cited a lack of response from social services or from health services, and that this (or the way services intervened) could be distressing. There was a notably positive experience of the effectiveness of the 'Building Better Relationships' programme.

No one could agree on what could be done to prevent abusive behaviour from starting; many thought that change could only happen in response to experience.

A more detailed summary of the views of perpetrators of domestic abuse is contained within Annex 2 of this strategy document.

Improving Equality

Domestic abuse plays a significant part in the health inequalities that exist across East Sussex. It's also both a cause and consequence of gender inequality; women and girls are more likely to be victims than men and boys, and young women in particular suffer higher levels of victimisation. Delivering this action plan to address domestic abuse effectively is central to improve this, as well as other equality duties.

The Equality Impact Assessment which accompanies this strategy examined the extent to which people with protected characteristics are affected by domestic abuse, and the barriers they might face in getting help from services.

Research nationally (for example the Home Office Statistical Bulletin 2011) tells us that people with the following characteristics are thought more likely to be victims of domestic abuse than the general population:

- Women, and in particular those who are pregnant and who have given birth in the last 12 months
- People who use drugs or alcohol
- People with a long term health condition or disability
- People who are not married
- People in households with low incomes

As well as this, findings from various national studies suggest that people who identify as transgender, are lesbian or gay or live in rural areas are less likely to report domestic abuse, and might face additional barriers to seeking help or leaving an abusive relationship safely. Sussex Police data indicates that people from Chinese and Asian communities report domestic abuse to the police less than those from other ethnic groups (rates of reporting are one fifth and one half respectively, compared to the average for other ethnic groups), so may also be more likely to stay in abusive relationships for longer.

Dealing with domestic abuse, and reducing its prevalence and impact in East Sussex will directly address many of the inequalities we've set out. It will also reduce some of the immediate and long term consequences, including:

- mental health problems such as post-traumatic stress disorders, anxiety and depression,
- substance misuse and dependency, and
- capacity to sustain employment and economic activity.

Where next?

The 2010 East Sussex Domestic Abuse and Sexual Violence Needs Assessment concluded that preventing and responding to domestic abuse must be seen as ‘core business’ for East Sussex services and partnerships. It can’t be left to a single, statutory body or local partnership alone.

Domestic abuse has been highlighted as a key priority for action by the Sussex Police and Crime Commissioner, as it has for many of the District and Borough Community Safety Partnerships.

Although organisations have individual processes to identify and respond to domestic abuse, we need to build upon multi-agency arrangements such as the MARACs and the Integrated Screening Hubs so that organisations can effectively identify, record, share information and respond jointly to domestic abuse, particularly if survivors have complex needs, or if the abuse involves forced marriage, so called ‘honour’ based violence, female genital mutilation, or if the abuse does not involve physical violence.

Because of the way they work, some services know if they are successfully increasing survivor and child safety, or holding abusers to account when they work with individuals and families affected by domestic abuse. However, there is no agreed common system for monitoring the outcomes of interventions across the partnership.

The 2010 needs assessment found that victims of domestic abuse valued the support of specialist services such as Independent Domestic Violence Advisers (IDVA) and refuges, and believed the support to be effective at improving their safety. However, it was identified that longer-term support after the abuse has stopped was a gap in service provision.

The IDVA service is targeted towards supporting victims of domestic abuse where there is significant risk of serious harm. Refuge provision is targeted towards women and children who are fleeing domestic abuse to protect themselves from risk of harm. We also need a more focused approach to tackling domestic abuse earlier within universal and mainstream services.

As a partnership, we want to ensure that residents and communities are free from domestic abuse in future. We’ll do this by prioritising:

- activity that focuses on increasing the safety and wellbeing of adults and children who experience domestic abuse;
- reducing the risk posed by perpetrators, holding them to account and engaging them in programmes to change their behaviour;
- increasing social intolerance and disapproval of domestic abuse, and
- increasing people’s abilities to form and sustain healthy, equal and abuse-free relationships.

We need to focus on reinvestment and resource pooling, so that we can prioritise prevention and early intervention alongside crisis and high-risk responses.

We need to promote a culture of professional curiosity within all our services. Professional curiosity is the capacity and skill to keep asking those difficult questions of other people and of yourself, rather than close your mind and just continue with a fixed view. It is much more likely to happen if workers are given good quality training to help them develop. Workers also need good management and support so that they can reconsider challenging and potentially upsetting work with families. They have to have time to hold in mind what it is like for a child and to keep working away to sort out what might have happened. We also have to accept that professionals, however curious they are, can't and won't protect children on their own and that families and communities also have a vital role to play in protecting children.

When we respond to people in crisis or at risk of harm, we should also carry out further reviews to make sure that there is an appropriate range and balance of services available to those who need them. We'll develop a commissioning plan to provide a framework for specialist domestic abuse services, and this will focus on delivering the outcomes which people who experience domestic abuse need, as well as creating positive change for local people.

All services need to be proactive in asking about abuse safely, responding appropriately to reduce the risk of harm and work to end the abuse. To do this, we need to improve the awareness and the skills of the workforce across and beyond the partnership. A particular area of focus for this development is in health settings such as GP surgeries, hospitals, dentists and mental health treatment services.

The Equality Impact Assessment identified several groups who are more likely to experience domestic abuse, as well as those who may face additional barriers in seeking help or protecting themselves from abuse. It's essential that there is a specific focus on the needs of these groups. It is also important that work takes account of abuse such as forced marriage and so-called 'honour' based violence, within particular cultures or communities.

Future work to address domestic abuse in East Sussex should be integrated with strategic and operational responses to sexual violence and other forms of violence against women and girls, in accordance with national priorities.

Links to other priority areas

Responding more effectively to domestic abuse links to several other key areas of work:

- The Thrive programme in Children's Services
- The work of the East Sussex Safeguarding Adults at Risk Board
- The priorities of the East Sussex Safeguarding Children Board
- The priorities of the Sussex Police and Crime Commissioner
- The work of District and Borough Community Safety Partnerships in reducing crime and anti-social behaviour
- The East Sussex Strategic Forum Supporting People Partnership
- The strategies for tackling alcohol misuse and drug misuse
- The work of the three Clinical Commissioning Groups in East Sussex

Outcomes

We ran a consultation to ask what the outcomes of this strategy should be. People who participated included staff in a number of organisations and members of the public. As a result, the following are the outcomes that we're working to:

'The overarching aim for the domestic abuse strategy is that residents and communities are free from domestic abuse and are less socially tolerant of it. Within that, the strategy also aims to increase people's ability to have healthy relationships, increase safety for people at risk of abuse and hold perpetrators to account, requiring them to change their behaviour.'

Increased social intolerance and reduced acceptance

- Adults, children and young people feel safe to disclose, are listened to, believed and not judged
- Increased awareness of options and accessibility to services by individuals and communities
- Increased awareness and knowledge of violence against women and girls and its impact with increased social intolerance and reduced acceptance.
- Improved understanding by parents of the impact of child exposure to domestic abuse
- Improved identification of domestic abuse, and risk management by staff across agencies, with serious harm and homicide prevented.

People have safe, equal and abuse free relationships

- Increased knowledge and skills of the population of East Sussex about safe, equal and abuse free relationships
- Increased awareness of the early signs of a relationship becoming abusive
- All services in East Sussex identify domestic abuse and respond effectively through a knowledgeable and well trained workforce
- Improved intervention to prevent abusive behaviours from becoming normalised, including children and young people
- People who have previously experienced domestic abuse are supported so that they are not targeted by prospective abusers
- Older people are free from abuse by their intimate partner or their family

Increased survivor safety and wellbeing

- Improved physical/ emotional safety, resilience, and freedom from harm for survivors
- Increased awareness of stalking and its risks
- Increased access to effective interventions for both adult and child survivors
- Improved professional curiosity across agencies, so that domestic abuse is identified and agency responses are safe and appropriate
- Support pathways for those people who are no longer being abused but need help to recover from the long term effects of being in an abusive relationship, including post-traumatic stress disorder (PTSD)
- A reduction in the impact of domestic abuse on children

Perpetrators are held to account and are required to change their behaviour

- Perpetrators take responsibility for their behaviour through timely safeguarding and justice system interventions
- Increased access to effective interventions for perpetrators of domestic abuse to prevent further abuse from occurring
- The development of a range of disposals within and alongside the criminal justice system
- Criminal and civil justice options are used fully, to protect people from abuse and hold perpetrators of abuse to account for their actions

Parallel plans

- The East Sussex Early Help Strategy (Thrive) 2012-15
- The East Sussex Reducing Harm from Alcohol Strategy 2014-2019
- Pathways to Support and Independence – a Strategy for Supported Housing and Housing Support in East Sussex 2013-2018
- Public Health Guidance for Domestic Violence: How social care, health services and those they work with can identify, prevent and reduce domestic violence.
- HM Government (2012) Call to End Violence Against Women and Girls: Taking Action- the next chapter

Governance and Delivery

We will achieve the outcomes of this strategy through the delivery of annual action plans, which will be reviewed and refreshed each year and published on our partnership website: www.safeineastsussex.org.uk

The East Sussex Domestic Abuse Steering Group will oversee the delivery of this strategy and the annual action plans, and this group will report to the East Sussex Safer Communities Board.

Annex 1:

Domestic Abuse Action Plan

2014-19

Communications

Link to outcomes	Actions
<p>Increased social intolerance and reduced acceptance People have safe, equal and abuse free relationships</p>	<p>Develop awareness raising campaign targeted at groups most likely to be affected by domestic abuse, facilitating the use of social marketing and behaviour change techniques.</p> <ul style="list-style-type: none"> • Women who are pregnant or recently given birth (via midwives and in General Practice) • People with young children (via health visitors, children’s centres and nurseries) • Disabled people (via services who work with disabled people) • People who misuse substances (via primary care and substance misuse treatment services) • People with lower household incomes (via CAB and benefit teams) • Young women (via colleges and university) <p>Ensure information on where to get support is available in a range of formats and locally used languages and includes formats appropriate to health care settings such as GP surgeries and dentists.</p>
<p>Increased social intolerance and reduced acceptance People have safe, equal and abuse free relationships</p>	<p>Support partner organisations to raise awareness of:</p> <ul style="list-style-type: none"> • National Stalking Awareness day • White Ribbon Campaign <p>Include local support service details and where to get information on how to separate safely.</p>
<p>People have safe, equal and abuse free relationships</p>	<p>All services to make sure there is information on domestic abuse in public areas and links on relevant internet pages.</p>
<p>Increased social intolerance and reduced acceptance People have safe, equal and abuse free relationships</p>	<p>Engage with communities within the following groups who are known to be less likely to report or disclose domestic abuse:</p> <ul style="list-style-type: none"> • People from Chinese and Asian communities • Lesbian, gay or bisexual people • Men • Transgendered people • Disabled people • Older people • People in rural communities • Communities where there is increased likelihood of practices such as female genital mutilation • People from Gypsy and Traveller communities <ol style="list-style-type: none"> a) develop communications and media which will encourage people to report domestic abuse b) encourage people to look out for one another and make third party reports c) Identify non-traditional routes where members of certain groups can feel comfortable disclosing domestic abuse

Training

Link to outcomes	Actions
<p>Increased social intolerance and reduced acceptance People have safe, equal and abuse free relationships Increased survivor safety and wellbeing</p>	<p>Develop, commission and deliver a revised programme of domestic abuse training to provide different levels of training and facilitate within all public facing agencies including primary and secondary health care settings:</p> <ul style="list-style-type: none"> • safe disclosure of domestic abuse • routine enquiry for those likely to be at risk of abuse • targeted enquiry for people where there are indicators that abuse may be happening • good assessments of risk of harm • effective signposting of people to specialist services • effective responses to disclosure and development of safety plans and other safeguarding actions • raising awareness of particular forms of abuse: <ul style="list-style-type: none"> ○ sexual abuse ○ stalking (promote prosecution of the new offences of stalking) ○ forced marriage ○ so called ‘honour’ based violence and understanding the relationship between cultural norms and the likelihood of abuse if individuals do not comply with cultural expectations • Develop further the links with training programmes already in place for safeguarding adults at risk and children. • Ensure that the development of training facilitates delivery in a range of formats (such as e-learning, web based seminars as well as classroom type settings)
<p>Increased social intolerance and reduced acceptance People have safe, equal and abuse free relationships Increased survivor safety and wellbeing</p>	<p>Ensure training programmes highlight the additional barriers faced by people who are less likely to report or disclose domestic abuse:</p> <ul style="list-style-type: none"> • People from Chinese and Asian communities • People who are lesbian, gay or bisexual by including specific cases of domestic abuse involving lesbian, gay or bisexual people within multi-agency training) • men • People who are transgender • Disabled people • Older people • People in rural communities • People from gypsy and traveller communities
<p>Increased social intolerance and reduced acceptance People have safe, equal and abuse free relationships Increased survivor safety and wellbeing</p>	<p>Ensure that front line staff are equipped with up to date knowledge about the range of criminal and civil justice remedies available to manage the behaviour of perpetrators, including domestic violence protection orders (introduced in June 2014) and the domestic violence disclosure scheme (introduced in March 2014).</p>

Training continued

<p>Increased social intolerance and reduced acceptance</p> <p>People have safe, equal and abuse free relationships</p> <p>Increased survivor safety and wellbeing</p>	<p>Promote awareness of domestic abuse amongst those staff groups and organisations who work with older people and disabled people including GP surgeries.</p> <p>Incorporate the 2013 Local Government Association/ Assistant Directors Adult Social Services Practice Guidance.</p>
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Children and young people

Link to outcomes	Actions
<p>Increased social intolerance and reduced acceptance</p> <p>People have safe, equal and abuse free relationships</p> <p>Increased survivor safety and wellbeing</p>	<p>Explore options for promotion of safe and healthy relationships amongst children and young people to prevent abusive behaviour becoming normalised</p>
<p>People have safe, equal and abuse free relationships</p> <p>Increased survivor safety and wellbeing</p>	<p>Develop and deliver effective interventions within early help services for children, young people and parents and carers.</p> <p>Develop care pathways for children whose exposure to domestic abuse may leave a risk of lasting emotional or psychological harm.</p>
<p>Increased social intolerance and reduced acceptance</p> <p>Increased survivor safety and wellbeing</p>	<p>Raise the awareness of perpetrators of domestic abuse about the impact that their abusive behaviour can have on children.</p> <p>Review children's social care assessment and intervention responses to domestic abuse in line with the CAADA 'Insights' recommendations for safeguarding children and parents living with domestic abuse.</p>
<p>People have safe, equal and abuse free relationships</p>	<p>Identify how agencies who work in education settings are involved in the multi-agency sharing of information on domestic abuse and its impact on family members.</p>
<p>Increased survivor safety and wellbeing</p> <p>People have safe, equal and abuse free relationships</p>	<p>Further develop the role of the Young People's Violence Advocacy Worker role, currently within ESCC Children's Services department.</p>

Employer

Link to outcomes	Actions
<p>Increased social intolerance and reduced acceptance</p> <p>People have safe, equal and abuse free relationships</p>	<p>Promote a culture of professional curiosity within all partnership agencies to improve identification of domestic abuse in all its forms.</p> <p>Facilitate a review of organisational staff policies across the partnership and within health care settings to ensure that the identification and response to domestic abuse are considered and are appropriate.</p> <p>Policies to include:</p> <ul style="list-style-type: none"> • Disciplinary • Grievance • Absence Management • Capability • Specific domestic abuse policies

Perpetrators

Link to outcomes	Actions
<p>People have safe, equal and abuse free relationships</p> <p>Perpetrators are held to account and are required to change their behaviour</p>	<p>Consolidate, and develop further, behaviour change programmes for perpetrators of domestic abuse. Ensure these programmes are linked to appropriate safety and support for current or historic victims who may be at risk</p>
<p>People have safe, equal and abuse free relationships</p> <p>Perpetrators are held to account and are required to change their behaviour</p>	<p>Develop a partnership approach for the management of high risk serial perpetrators. Ensure that services that may be in contact with serial perpetrators, such as health providers and that rehabilitation providers are involved in these arrangements</p>

Strengthen Partnership Approaches

Link to outcomes	Actions
<p>Increased social intolerance and reduced acceptance</p> <p>People have safe, equal and abuse free relationships</p> <p>Increased survivor safety and wellbeing</p>	<p>Develop a partnership programme for the delivery of the domestic violence disclosure scheme and ensure that local delivery of the scheme is accessible and takes account of safety.</p> <p>Promote the use of Domestic Violence Protection Orders and Notices when they are introduced and ensure that all interventions are aligned and focused during the period such measures are in place.</p>
<p>Increased survivor safety and wellbeing</p>	<p>Develop models for ongoing support, including peer support, and care pathways for people who have experienced domestic abuse and are recovering from the effects of this experience including access to psychological therapies in primary care settings and sexual health services. Ensure that support systems and care pathways are implemented in line with the needs of individuals who have experienced abuse and promote safety and resilience.</p>

Strengthen Partnership Approaches continued

<p>Increased social intolerance and reduced acceptance People have safe, equal and abuse free relationships</p>	<p>Improve understanding within the workforce of the links between mental health problems and domestic abuse. Improve the skills of the workforce that come into contact with people who misuse alcohol and drugs to recognise the links between risk of harm from domestic abuse (including sexual violence and abuse) dependency and intoxication.</p>
<p>Increased survivor safety and wellbeing</p>	<p>Map existing service provision for victims/survivors of domestic abuse and develop a joint commissioning plan derived from this mapping exercise. Services within scope are:</p> <ul style="list-style-type: none"> • an Independent Domestic Violence Adviser service for those at high risk of serious harm • outreach and ‘victim’ support services for those not currently at high risk of serious harm • recovery services for adults and children harmed through exposure to domestic abuse • improved pathways for women suffering from postnatal depression and domestic abuse • advice and advocacy services for people who are experiencing domestic abuse and present in primary and secondary health care settings
<p>Increased survivor safety and wellbeing</p>	<p>Regularly review multi-agency arrangements for safeguarding those most at risk of harm from domestic abuse and introduce an audit process.</p>
<p>Increased survivor safety and wellbeing</p>	<p>All partnership agencies and primary and secondary care health providers working with adults and children to appoint a lead professional to hold expertise on domestic abuse to:</p> <ul style="list-style-type: none"> • advise upon and champion identification of domestic abuse within their organisation • advise on risk assessment, risk management and identification of safe interventions and referral routes • establish a consistent understanding of risk across all agencies • promote within their organisation that domestic abuse is not just physical abuse and typically involves patterns of controlling or coercive behaviour • advising staff about the arrangements for information sharing for those at risk of harm
<p>Increased survivor safety and wellbeing</p>	<p>Derive learning from the domestic violence homicide review process and ensure learning is incorporated into local practice.</p>
<p>Increased survivor safety and wellbeing</p>	<p>Further improve the Multi-Agency Risk Assessment Conference (MARAC) system to reduce harm to survivors of domestic abuse by more timely and frequent action planning via the MARAC Hub pilot.</p>
<p>Increased survivor safety and wellbeing Perpetrators are held to account and are required to change their behaviour</p>	<p>Develop further systems for efficient and timely sharing of information about individual victims and perpetrators of domestic abuse and their children involving education establishments and General Practice where appropriate to do so</p>

Annex 2: Detailed Summary of Views of Victims and Perpetrators of Domestic Abuse

2.1 Views of Victims

We asked a number of organisations to provide details of any survivors or victims of domestic abuse who would be willing to share their experience of domestic abuse and the services they had accessed. Interviews were conducted with 22 women who had volunteered through CRI domestic abuse service, Refuge and Home Works.

The ages of participants ranged from 20-50 years old.

What was the thing you found most helpful?

Over half the women interviewed spoke about a particular service being the most helpful thing for them. These services included Refuge, CRI, Home Works, Police and Children's Services. Other women spoke more generally about the help they had received:

'I found it helpful that you could talk and know that you are not on your own and don't need to be ashamed.'

This illustrates how important the response to disclosure is, something which is highlighted within the Domestic Abuse Recognition and Response training which is delivered across the county to groups of multi agency practitioners.

Around a third of women spoke about how helpful it was to have key work support; this support was again accessed through a range of services and helped with a sense of consistency for some women:

'Because I have worked with my Family Outreach Service worker for so long and I was able to still work with her while I was in a refuge, it was one familiar thing in my life when everything was changing.'

Two women spoke about the practical support they had received as being the most helpful e.g. history markers, non-molestation order, mobile alarm.

What was the thing that you found least helpful?

In terms of the things that women found the least helpful, some cited responses from some statutory agencies. However, for one individual their referral to Children's Services which had initially been viewed as negative had a positive outcome:

'I was really nervous when my worker at the IDVA (Independent Domestic Violence Adviser) service told me that she was going to have to contact Children's Services. I felt very negative about it but now I feel very positive and that it has spurred me on in making the changes that I have.'

Far fewer women cited voluntary agencies as being the least helpful option. Some women talked about more abstract reasons including not having the right service available, misinformation and not being aware of the help available. One woman spoke about how difficult it was to leave her pet and lack of understanding around this:

'I was so worried about how my dog would be taken care of as he wasn't allowed in the Refuge; no one seemed to care about how upset I was about this.'

This is useful for practitioners to be aware of when thinking about the barriers stopping someone from leaving an abusive relationship. Three women commented that there was nothing that they found helpful.

How did you first become aware that you were experiencing domestic abuse?

Women became aware of experiencing domestic abuse in a number of ways, including an act of physical violence, personal reflection over time resulting in a realisation that the behaviour of their partner had become abusive, the input of staff from services or family and friends

Thinking back, was there anything that services/ professionals could have done earlier to help stop the abuse from continuing or getting worse?

Eleven women felt that there was nothing that services or professionals could have done earlier to stop the abuse from continuing or getting worse. For some women this was because they had not recognised what was happening or because they were too frightened to tell someone what was happening.

Some women did feel that there were services or professionals that could have acted sooner. One example of this was being asked directly about the abuse:

'Being asked directly about it, and offered help – I was too scared to ask for help for a long time.'

Within East Sussex all agencies are encouraged through training and practice guidance to ask a routine question concerning domestic abuse to enable disclosures.

Other examples of services acting sooner included the police, housing, health and social services. In terms of social services, three women qualified this further: one would have liked help sooner in finding refuge space and was not spoken to alone about the situation, one woman felt that she could have been offered more support rather than her case being closed and one woman commented that:

'Social services made it hard for me to feel I could call the police. I was scared of losing my child.'

Who did you initially speak to about the abuse and how did you feel after you had spoken to them? How did they respond?

Women had first disclosed to a wide range of people including friends, family and professionals. Overwhelmingly there were mixed feelings about disclosing abuse which often included relief and fear. The importance of being listened to and understood was clear.

In terms of disclosing to agencies, disclosure to the police generally resulted in the majority of women who had disclosed to them feeling very well supported:

'The police spoke to me after the initial physical assault and the police had a good understanding of domestic abuse and were sympathetic.'

The other agency highlighted as providing an excellent response to an initial disclosure was CRI (Domestic Abuse Service):

'I spoke to my CRI worker who treated me with understanding and compassion.'

If you have children, were there any specific services offered to help protect and support them with what was happening?

Four women did not have children. Of the remaining 18, 17 women mentioned services for children. One woman disclosed that no services for children had been discussed. However, her experience of domestic abuse was very historic and therefore would not be representative of the current service response. Two women had their children removed from their care; one of whom felt that this was in the best interest of the child. Six women mentioned their children being referred to CRI Children's Therapeutic Service.

How many services have you worked with in relation to domestic abuse? How did these services work together to support/ protect you?

The majority of women had worked with between 3-4 agencies. The most common of these were CRI, refuge, the police and social services. A number of women felt that services had worked well together to support them:

'I felt understood, all services were great and my worker made all referrals at my first appointment and all services responded very quickly with support. All services have been very helpful and I'm in a much better place now.'

Some women had a number of services involved who did not work together either because they were working at different times or because the agencies were focused on their own area of service delivery.

2.2 Views of Perpetrators

Ten people known to Surrey and Sussex Probation Trust as perpetrators of domestic abuse were asked to give their views in response to the following questions:

1. How did you first become aware that some of the behaviours you were using were abusive?
2. Did you talk to anyone about your behaviour (prompt for friends, family, professionals)? If so, who? How did they respond?
3. Tell us about your experience from the time when you first came into contact with services regarding your abusive behaviour?
4. How were children affected?
5. How many services were involved in relation to domestic abuse or violence? How did these services work together? Could this be improved? If so, how?
6. What did services do that was least effective?
7. What did services do that was most effective?
8. Are there things which could be done to reduce the chance of people becoming abusive or violent in the first place?

Each of the ten participants were male, aged from 19 to 44.

The majority of participants first realised that their behaviours were abusive following an incident of violence or when the police became involved, but some had been advised by family or friends or by a health professional. Many spoke about their behaviour with a friend while smaller numbers spoke to a professional or no-one at all.

There was a mixture of experience of services the first time contact was made in relation to domestic abuse; for some there was fear about what would happen to them. Similarly there was a mixture of responses in relation to the affect on children; some did not think children had been affected, others were aware of an impact and a third group realised the likely impact with hindsight.

Participants' experiences of services varied. The majority found Probation Service intervention helpful, although two found the intervention either unhelpful or found the sanctions imposed difficult. Some cited a lack of response from social services or from health services and that this or the way services intervened could be distressing. There was a notably positive experience of the effectiveness of the "Building Better Relationships" programme.

There was no consensus on what could be done to prevent abusive behaviours from starting; many thought that change could only happen in response to experience, consequences and feedback

Annex 3: Individual Agency Approaches to Domestic Abuse in East Sussex

<p>Sussex Police</p>	<p>Domestic abuse is a key priority for Sussex Police and is part of the Chief Constable’s operational delivery plan. It’s also a key priority for the Sussex Police and Crime Commissioner. Sussex Police receives and responds to about 60 reports [of domestic abuse] each day, but we know that the true level is much higher.</p> <p>Neighbourhood Response teams are supported by Sussex Police’s domestic abuse policy to take positive action in domestic abuse cases, including arrest. The Response teams are sent out with body-worn video cameras to capture evidence in domestic abuse cases, and they’re trained to use the ‘DASH’ (Domestic Abuse, Stalking and ‘Honour’-based violence) risk assessment tools to protect victims and their families.</p> <p>Response Investigation teams investigate all incidents of ‘standard’ and ‘medium’ risk domestic abuse cases, making sure that the victim’s safety and support is paramount. This gives them a chance to really understand people’s behaviour, and take the right action. The aim is to find the best way to successfully resolve the situation for the victim and family. Often this is through the Criminal Justice process, but it’s not always the most suitable course of action to take.</p> <p>Adult Protection teams work with high risk cases, as well as repeated victimisation. Made up of Specialist Detective Officers, the team work with Independent Domestic Violence Advisers (IDVA) and the Multi Agency Risk Assessment Conference (MARAC) process to support victims and provide safety planning. They also develop management plans to target serial abusers, reducing the risk they present in the community.</p> <p>Protecting Vulnerable People (PVP) works to protect the most vulnerable people across Sussex. PVP works closely with partners and Sussex Police teams to protect adults and children who are vulnerable because of domestic abuse, sexual abuse, their mental health or other circumstances. They make sure there’s consistency and accountability across all local authorities and each Police Division in Sussex. They also provide strategic leadership and scrutiny using the Sussex Domestic Abuse Performance Management Framework.</p> <p>Sussex Police became the first police force in England to be awarded White Ribbon status in July 2013 building on the work of Lewes District.³</p>
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³ White Ribbon UK is a national organisation founded in 2004 working to involve men in opposing violence and abuse against women with particular focus on 25th November. This is recognised by the UN as International Day for the Elimination of Violence Against Women. The White Ribbon is a symbol of hope for a world where women and girls can live free from the fear of violence and abuse. Wearing the ribbon is about challenging the acceptability of violence by getting men involved in challenging attitudes and behaviour, and helping women to break the silence.

East Sussex County Council

Adult Social Care commissions the Independent Domestic Violence Adviser Service. Under the Supporting People programme, Adult Social Services also commission the five refuges and the floating housing support services; Home Works and STEPS. Providers of these services are required to ensure that staff undertake domestic abuse training.

The Safer East Sussex Team co-ordinate and administer the Multi Agency Risk Assessment Conferences (MARAC) which operate across the county.

- All Senior Practitioners in Adult Social Care’s operational teams have had specific training to advise front line staff about risk assessment using the ‘DASH’ (Domestic Abuse, Stalking and ‘Honour’ based violence) risk indicator checklist.
- There are lots of overlaps between Adult Social Care’s work to safeguard ‘adults at risk’ and responses to domestic abuse. Research indicates that disabled people are twice as likely to be victims of domestic abuse compared to the overall population (Women’s Aid 2007).
- Adult Social Care has a pool of trainers, and there are ‘leads’ on domestic abuse who deliver training to help staff to identify and respond effectively to domestic abuse and to assess and manage risk.

Children’s Services has a crucial role to make sure that children and young people are safe from the harm that domestic abuse can cause, and to prevent cycles of abuse from repeating, by intervening to tackle abusive behaviour by young people. Children’s Social Care services have a responsibility to intervene when domestic abuse poses a risk for children, which may involve removing children and young people from potentially dangerous situations, but also working with parents to stop the abuse and protect the children.

- The Duty and Assessment Teams receive many referrals where domestic abuse may be a factor, and work with Sussex Police and others to assess the level of risk and the necessary action. Family Support Teams and Youth Support Teams have legal powers to work with families to ensure children’s long term safety. Alongside this, there’s a specific team within the SWIFT (Safeguarding With Intensive Family Treatment) service that makes assessments and works with perpetrators of abuse and other involved adults to protect individual children.
- The Youth Offending Team work with young people who may have been abusive in an intimate relationship or within their own family. They work to change abusive behaviour and to deal with the young person’s own experiences of abuse.
- Preventative ‘early help’ services such as Family Keywork services, the Targeted Youth Support service, and Children’s Centres work with young people and families experiencing domestic abuse or recovering from abusive relationships. They have a key role to play in
 - a) preventing children, young people and parents from being in abusive relationships, by helping them understand the signs of abusive relationships and how to protect themselves
 - b) early identification through routine questioning and encouraging safe disclosure, and working to ensure appropriate referral in relation to risk
 - c) ensuring children’s safety and risk reduction within the whole family through safety planning, developing protective behaviours, and motivating and supporting change

	<p>d) supporting recovery for families, children and young people to break the cycle of abuse and reduce the long-term impacts of abuse through group work for people who have experienced abuse, and therapeutic interventions for children and young people</p> <ul style="list-style-type: none"> • Children’s Services also train their staff to understand the impact of domestic abuse on children, and on how to manage risk where children live in households where abuse is present.
<p>East Sussex Healthcare NHS Trust</p>	<p>Health Visiting, School Nursing, Accident and Emergency department and Minor Injury Units</p> <p>Practitioners receive mandatory training in identifying and handling domestic abuse as well as the Trust mandatory child protection training.</p> <p>Staff can also get access to multi-agency training, delivered via the Local Safeguarding Children Board.</p> <p>Frontline staff are required to ask routinely about domestic abuse when they have contact with clients and when it is safe to do so. This may be during ante-natal and post-natal contacts.</p> <p>The Domestic Abuse, Stalking and ‘Honour’ based violence (DASH) risk assessment is the tool used for assessing the risk of harm.</p> <p>The Integrated Screening Hub is a mechanism for alerting the Health Visitor or School Nurse of cases involving domestic abuse. An Early Help Plan is initiated for cases where there is a significant, but not high level of risk; high risk cases are referred directly to MARAC by the practitioner.</p> <p>There is a Specialist Practitioner working jointly with social care to coordinate the actions from MARAC to the frontline staff. The Accident and Emergency department has a link nurse for Domestic Abuse to ensure that staff are kept up to date with policies and procedures. A named nurse in Acute Services now attends MARAC meetings across East Sussex</p> <p>Local guidance for frontline staff is also contained within the pan Sussex Safeguarding procedures.</p>
<p>Sussex Partnership Foundation NHS Trust</p>	<p>Managers from local services attend both Multi Agency Risk Assessment Conferences in East Sussex and participate in the development of plans to safeguard victims of domestic abuse, particularly where there is a need for mental health or substance misuse service involvement for either the victim or the perpetrator.</p> <p>In 2013 Sussex Partnership Foundation NHS Trust bid successfully for a grant to further develop identification and responses to domestic abuse and sexual abuse. A significant focus of this initiative will be staff training and partnership working.</p>

<p>National Probation Service and Kent, Surrey and Sussex Community Rehabilitation Company</p>	<p>Perpetrators of domestic abuse are supported by the BBR (Building Better Relationships) programme. Each offender attends 30 sessions (up to 3 times a week) with programme facilitators. The aims of the programme are to</p> <ul style="list-style-type: none"> • Learn about how your emotions, thinking, communication and some of your behaviours have damaged ‘romantic’ relationships • See how different influences in your life can play a part in the violence you show and stresses you have experienced in relationships • Discover and build on your strengths and use these to shape and influence your responses in current and future relationships and • Practice being a thoughtful and content partner in your family relationships <p>For victims, the service offers support from their Partner Link Worker. They make contact with the victims of abuse and support them whilst the Probation Officer works with the perpetrator to address their offending.</p>
<p>East Sussex Safeguarding Children Board</p>	<p>A programme of multi-agency domestic abuse training courses are run each year by the East Sussex LSCB, including a basic awareness course, the assessment and management of risk, the impact of domestic abuse upon children, working with young people experiencing domestic abuse and working with perpetrators.</p> <p>The LSCB also manages the process for conducting serious case reviews for children and this can include cases where domestic abuse is a factor and where learning about the response to domestic abuse can be derived and shared with partner organisations.</p>

<p>Eastbourne Community Safety Partnership and Eastbourne Borough Council</p>	<p>Eastbourne Borough Council Housing Needs staff undertake training around domestic abuse enabling officers to:</p> <ul style="list-style-type: none"> ○ Readily identify cases where domestic violence/abuse may be taking place. ○ Interview and deal with applicants in a sensitive manner. ○ Maintain security and promote the safety of applicants. <p>In cases where applicants are fleeing domestic violence and need immediate accommodation, staff work closely with the East Sussex refuges and where appropriate the national network of refuges. Staff refer other domestic abuse cases to the IDVA service. Where the applicant considers it appropriate, staff will assist by carrying out works under our Sanctuary Scheme where working with the landlord and fire service and contractors we will adapt the home to incorporate additional security features making the resident’s home less accessible to perpetrators and affording a safe space within the home. The scheme provides professionally installed security measures; a secure room within the property has equipment installed which links to the police and provides security in the event of a threat of violence until support arrives. Typically, a safe room in the home will feature a solid core door reversed to open outwards with mortice bolts, strengthened hinges and fitted fire retardant strips. In nearly all cases additional security such as new door and window locks and door viewers, external mail boxes and fire safety equipment will be fitted either as well as or instead of a ‘sanctuary’ room to lessen the likelihood of someone gaining entry to or damaging the property by fire. Each Sanctuary Scheme is tailored to meet the needs of the individual. The Scheme has been developed to prevent homelessness in domestic violence cases and prevent repeat cases of homelessness wherever possible and is free of charge to victims of domestic violence who live in Eastbourne Borough Council area with the funding provided by the Council.</p> <p>On White Ribbon Day, Police in Eastbourne were joined by partners from East Sussex Fire and Rescue Service, the Borough Council, the street pastors and door supervisors to pledge their support to the campaign. The Eastbourne White Ribbon Group also held a fund-raising quiz on White Ribbon Day to raise awareness and funds for specific support activities in the year ahead.</p>
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<p>The Safer Hastings Partnership and Hastings Borough Council</p>	<p>Domestic Abuse is the highest priority of the Safer Hastings Partnerships and key partners like Hastings Borough Council play an important role in encouraging victims to report domestic violence and in supporting victims. Despite the authority being amongst those hardest hit by reductions in central government funding the council continues to provide over £30,000 matched funding to the East Sussex Independent Domestic Violence Adviser Service to provide additional domestic violence casework in Hastings and St Leonards.</p> <p>The housing team also run a Sanctuary Scheme; coordinating referrals from partners and allocating funding for things like changing locks and other security improvements to help victims of domestic violence to stay in their homes and feel safe.</p> <p>Hastings Council provides resources to support and administer the Hastings & Rother Domestic Violence Forum which provides a platform for statutory and community organisations to meet to discuss priorities and share information.</p> <p>The Council led Hastings White Ribbon Day event has been growing in stature in recent years. Matched funding is provided with that from the Safer Hastings Partnership to purchase Domestic Violence and Abuse awareness raising and advice material to ensure that the aims of the event are met.</p> <p>For the future, consideration is being given to Hastings Borough Council seeking to become an accredited ‘White Ribbon’ organisation.</p>
<p>Lewes Community Safety Partnership and Lewes District Council</p>	<p>Lewes District Community Safety Partnership successfully applied for White Ribbon status during 2012, the first District in the United Kingdom to be given such status. In delivering the associated three year action plan the partnership has achieved the following outcomes:</p> <ul style="list-style-type: none"> • Enhanced training for officers and partners. • Raised awareness of domestic abuse and sexual violence against women. • Increased confidence in Sussex Police and frontline service delivery. • Increase in reported incidents during 2012 and 2013. • Stronger community partnerships across the District. <p>During November 2013, the District have run set piece events as part of the White Ribbon campaign which have included sponsorship of football & rugby matches in Lewes, Seaford, Peacehaven & Newhaven. The objective of this has been to target men taking part in and spectating sporting events in order to influence attitudes and behaviour towards women. The District have also delivered training for frontline service providers which has included presentations from a leading psychotherapist on ‘Understanding how people become ensnared in abusive environments’</p>

<p>The Safer Rother Partnership</p>	<p>The Safer Rother Partnership established a Violent Crime Action Group in 2013 to assist with the delivery of its domestic abuse priority. The aim of the partnership is to establish the true level of domestic abuse in rural communities and to identify interventions across Rother, with a focus on victims, young people and rural domestic abuse.</p> <p>The Rother VCAG key stakeholders met on a monthly basis to progress the group’s objectives. It was agreed by the Safer Rother Partnership that the Rother VCAG will report directly to the Safer Rother Partnership and provide an update for the strategic board meeting on a quarterly basis.</p> <p>The following objectives were agreed for the group:</p> <ul style="list-style-type: none"> • Review and analyse available data from partner agencies to understand violent crime, including domestic violence in Rother. • Identify education and support interventions to meet the needs of Rother residents. • Identify changes in violent crime and partnership responses. • Support both local and national initiatives in relation to violence in domestic settings, such as the White Ribbon campaign. • Identify any gaps in current services and put forward proposals to address these areas.
<p>The Safer Wealden Partnership</p>	<p>The Council, through its Housing Service, offer support, advice and assistance to victims of domestic abuse. The support can range from placement in a refuge, other temporary accommodation, permanent re-housing or provision of a sanctuary scheme (where additional security is provided in the victim’s home).</p> <p>In addition the Safer Wealden Partnership has, as one of its priorities, to raise awareness and promote the help and support services available for victims of domestic abuse.</p>
<p>East Sussex Independent Domestic Violence Adviser Service</p>	<p>The East Sussex Independent Domestic Violence Adviser Service is run by CRI and commissioned by East Sussex County Council on behalf of the East Sussex Safer Communities Partnership.</p> <p>Independent Domestic Violence Advisers (IDVAs) are professional caseworkers who provide practical and emotional support from the point of crisis to longer term solutions and improved safety for the individual and any children. The service is offered to male and female victims and can be accessed by anyone aged over 16. The IDVA will also be the named caseworker (the victim’s primary point of contact) for any individual whose case is heard at the Multi Agency Risk Assessment Conference. IDVAs work with their clients to assess the level of risk, discuss the range of suitable options and develop safety plans.</p> <p>In 2013, the service was awarded “Leading Lights” accreditation by CAADA (Co-ordinated Action Against Domestic Abuse) in recognition of the quality of service provision.</p>

<p>Refuge</p>	<p>Refuge is a national domestic abuse charity committed to a world where domestic violence is not tolerated and where women and children can live in safety. Refuge staff aim to empower women and children to rebuild their lives, free from violence and fear. We provide a range of life-saving and life-changing services, and a voice for the voiceless.</p> <p>There are five refuge services commissioned by East Sussex County Council Supporting People and provided by Refuge, located in the districts and boroughs of Eastbourne, Hastings, Lewes, Rother, and Wealden. Priority for the service is afforded to women living in the geographical area of East Sussex. The service is able to support women with teenage dependents and women with complex needs including drug and alcohol misuse</p> <p>The East Sussex refuges are specialist services, commissioned to provide an intensive, personalised, on site housing support service specifically designed to protect women and their children from harm, increase their ability to live independently, and increase social inclusion.</p> <p>Refuge works in partnership with a range of different agencies, including local housing authorities, Health visitors, Police, Children’s services and the IDVA team. Refuge also supports the delivery of the Local Safeguarding Children Board domestic abuse recognition and response training course.</p>
<p>Home Works</p>	<p>Home Works is a county wide floating housing support service commissioned by East Sussex County Council as part of the Supporting People Programme and is provided by Southdown. Home Works helps vulnerable people aged 16-64 to avoid loss of accommodation, access appropriate accommodation, and develop the skills and support networks to live independently. Home Works is a preventative and outcome focused service; clients are allocated a named Floating Support Worker, who supports the client to resolve their immediate housing problem, helps them build confidence and control over their life, and coaches them to towards achieving wider goals such as finding work.</p> <p>Home Works supports clients experiencing or fleeing domestic abuse, in any form and at any level of risk. Many clients disclose domestic abuse at a later stage of support or abuse is identified by the Floating Support Worker. All Home Works staff are trained to be aware of domestic abuse, how to assess risk using the DASH (Domestic Abuse, Stalking, and ‘honour’ based violence) risk indicator checklist, and how to raise concerns with statutory services about adults and children at risk. Lead domestic abuse practitioners within the teams refer appropriate cases to, and participate in, the MARACs.</p> <p>Working in partnership with housing needs teams, Home Works helps clients to explore their housing options and work through the practical steps to achieve these. This can range from staying in the home with safety and security measures, finding new accommodation, or being referred to a refuge. In partnership with the IDVAs, adult safeguarding and child protection teams, Home Works supports clients to address risk and develop safety plans. Clients leaving the refuges are regularly referred to Home Works to continue developing their confidence and skills to live independently in the community again.</p> <p>Home Works is a key partner in the Hastings Sanctuary Scheme and contributes to the success of the White Ribbon campaign.</p>

<p>STEPS</p>	<p>STEPS to stay independent provides a free, housing floating support service for people aged 65 or over across East Sussex.</p> <p>STEPS floating support workers provide a personalized and practical service where individuals housing needs and safety are addressed through joint working with:</p> <ul style="list-style-type: none">• Local housing providers• Police• Adult Social care• Health and care providers <p>STEPS staff have received specialist training in issues relating to domestic abuse, safeguarding and reporting to the police to ensure that clients who report domestic abuse are supported in the most knowledgeable, empathic and understanding way possible.</p> <p>STEPS is represented on the White Ribbon Domestic Abuse Action Group in Lewes and participates in raising awareness of domestic abuse and older people across the service area.</p>
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