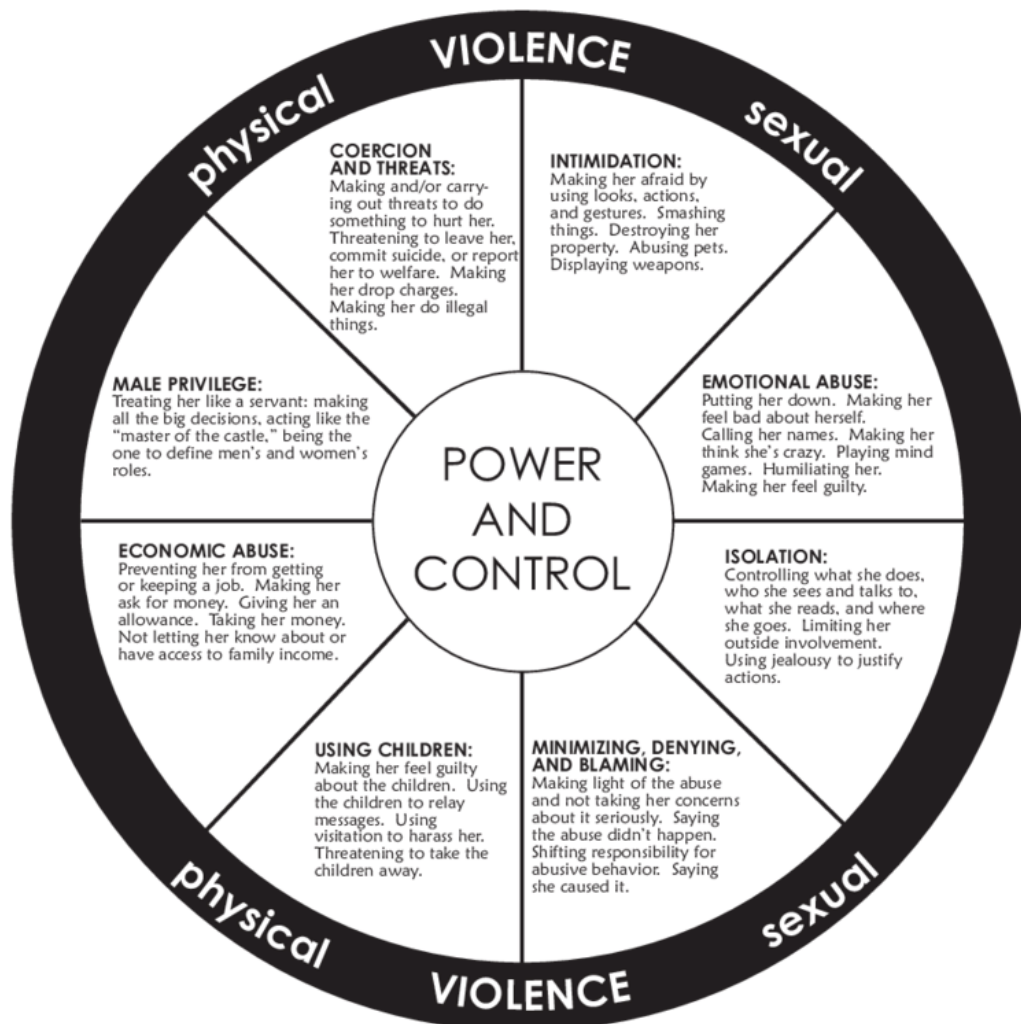


Reducing and Preventing Domestic Abuse in Southampton



Power & Control Wheel, Duluth Model (Ellen Pence et al, 1981; 2006)

PANEL MEMBERSHIP

- Councillor McEwing (Chair)
- Councillor Harwood (Vice-Chair)
- Councillor Coombs
- Councillor Mitchell
- Councillor Payne
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Glossary

ACE	Adverse Childhood Experiences - Stressful or traumatic events, including abuse and neglect, which are experienced during childhood and can have negative, lasting effects on health and well-being across a person's lifespan.
BBR	Building Better Relationships - An accredited group work programme, delivered by the HIOW CRC, aimed to reduce re-offending and promote the safety of current and future partners and children whilst working collaboratively with other agencies.
CAFCASS	Children And Family Court Advisory And Support Service - A non-departmental public body in England set up to promote the welfare of children and families involved in family court.
CSR	Creating Safer Relationships - A 1:1 healthy relationship intervention for male Service Users with identified relationship difficulties, delivered by the HIOW CRC.
DAPP	Domestic Abuse Prevention Partnership - A multi-agency complex intervention based in Hampshire, coordinated by Hampton Trust, Aurora New Dawn, and BaseLine Consultancy.
DVPP	Domestic Violence Perpetrator Programme – Behaviour change programmes that aims to help people who have been abusive towards their partners or ex-partners to change their behaviour and develop respectful, non-abusive relationships.
HRDA	High Risk Domestic Abuse – Daily meeting of professionals from a variety of agencies to evaluate the safety and risk of those identified in High Risk Domestic Abuse cases within the MASH/SCC setting.
HIOW CRC	Hampshire & Isle of Wight Community Rehabilitation Company manages all offenders given Community Orders, Suspended Sentence Orders or who are subject to prison sentences or licenses to ensure they complete them successfully and stop committing crime.
IDVA	Independent Domestic Violence Advocate – They are the primary point of contact for victims and survivors and address and secure the safety of victims at high risk of harm from intimate partners, ex-partners or family members.
MARAC	Multi-Agency Risk Assessment Conferences - Meetings where agencies talk about the risk of future harm to people experiencing domestic abuse, and if necessary their children, and draw up an action plan to help manage that risk.
MASH	The Multi-Agency Safeguarding Hub - The Single Point Of Contact for all safeguarding concerns regarding children and young people in Southampton.
MATAC	The Multi-Agency Tasking & Coordination - A strategic and Integrated partnership approach that identifies and responds to high-risk and serial perpetrators of domestic abuse.
ONS	Office for National Statistics
Operation Encompass	Police & education early information sharing partnership enabling schools to offer immediate support for children experiencing domestic abuse.
PIPPA	Prevention, Intervention & Public Protection Alliance - An alliance group of specialist sexual and domestic abuse services in Southampton, working to end domestic abuse and sexual violence. Pippa Helpline: 02380 917 917
Project CARA	Cautioning and Relationship Abuse - A DVPP for first-time offenders of domestic abuse who have received conditional cautioning by Hampshire Constabulary to reduce re-offending rates.
RSE	Relationship & Sexual Education
STAR	Yellow Door's preventative and educational outreach programme for young people
SCC	Southampton City Council
VAWG	Violence Against Women & Girls
YPVA	Young Person's Domestic Violence Advocate

Chair's Introduction



Councillor McEwing - Chair of the Southampton Inquiry Panel (2018/19)

Domestic abuse has a destructive impact on individuals, families, and communities. Southampton has a high recorded domestic abuse rate that continues to rise. In 2017/18 3,000 domestic violence crimes were recorded by Hampshire Constabulary for Southampton.

Whilst, as a Panel, we are keen to applaud the good practice of our victim and survivor services, more must be done to tackle the root causes of domestic abuse in the city and stimulate long-term solutions.

Findings from the inquiry have shown that there are a number of underlying risk factors for perpetrating domestic abuse. These include gender inequality and adverse childhood experiences, which the report recognises needs a co-ordinated, city wide approach to tackle reflecting the detrimental impact this has on numerous outcomes across the city.

Domestic abuse is both a cause and consequence of gender inequality, henceforth, the biggest factor which increases propensity to use abusive behaviour or continue to use abusive behaviour is the social acceptance of 'low level' abusive or oppressive behaviour.

It is not possible to reduce domestic abuse without reducing the number of people who are abusive. Key to reducing incidence of domestic abuse is to work at a whole population level to change the culture in society away from unhealthy and abusive values, attitudes and behaviours; addressing adverse childhood experiences; and, to directly engage with perpetrators.

Reflecting this the Panel have developed a number of recommendations that will, if implemented, help to address these risk factors and reduce incidence of domestic abuse, thereby resulting in fewer victims and children living in families affected by domestic abuse in Southampton.

In recognition of the benefits that reducing levels of domestic abuse would have on the city and our partners, the Panel encourages our partners, including the Office of the Police and Crime Commissioner, to identify additional resources to support perpetrator services in the city and ensure their sustainability moving forward.

I would like to thank all those who provided evidence to the inquiry and ensured that the Panel were well informed. I would also like to thank members of the Panel for their contribution and their willingness to discuss difficult and emotive issues with an open mind.

The Aim of the Inquiry

1. On 15 November 2018 the Overview and Scrutiny Management Committee (OSMC) were informed that Southampton has a high reporting rate of domestic abuse that continues to rise.
2. Over 3,000 domestic violence crimes were recorded by Hampshire Constabulary for Southampton in 2017/18. Figures rose 7% from 2016/17 levels, the fourth consecutive year it has increased in Southampton.
3. Reflecting the information above, and the Committee's awareness, through scrutiny of Council strategies, of the destructive impact of domestic abuse on individuals, families, communities and key outcomes across the City, the OSMC recommended that a scrutiny inquiry is undertaken on the issue of domestic abuse in 2018/19.
4. The Committee agreed that the focus of the inquiry should be to consider what more may be done in Southampton to reduce domestic abuse with a focus on preventing people from abusing their intimate partner.
5. The set objectives for the inquiry were:
 - a) To develop understanding from a national and local level of domestic abuse, patterns of offending, and risk factors associated with perpetrators of domestic abuse.
 - b) To consider the prevalence of perpetrating domestic abuse in Southampton; the services that are currently available across the life course in Southampton to reduce the likelihood of people becoming perpetrators of domestic abuse; the effectiveness of the services and gaps in provision.
 - c) To identify what is being done elsewhere in preventing people from being perpetrators of domestic abuse and identify if these principals or initiatives could be introduced in Southampton.
6. The full terms of reference for the inquiry, agreed by the Overview and Scrutiny Management Committee, are shown in Appendix 1.

How the inquiry was conducted

7. The Scrutiny Inquiry Panel undertook the inquiry over 3 evidence gathering meetings between January 2019 and April 2019 and received information from a wide variety of organisations. This included Respect - the leading UK membership organisation that works with domestic abuse perpetrators and young and male victims, domestic abuse service providers, charitable and voluntary organisations including Hampton Trust and Yellow Door, Hampshire Constabulary, Hampshire & IOW Community Rehabilitation Company, commissioners, and Council Officers. A list of witnesses that provided evidence to the inquiry is detailed in Appendix 2.
8. The key findings, conclusions and recommendations from the inquiry are detailed succinctly later in this report.

9. Members of the Panel would like to thank all those who have assisted with the development of this review, in particular the following who have provided the Panel with invaluable advice throughout the inquiry:

- Sandra Jerrim, Senior Commissioner from the Integrated Commissioning Unit (ICU)
- Charlotte Matthews, Public Health Consultant
- Grace Grove, Public Health Registrar
- Karen Marsh, IDVA Service Manager

Introduction and background

What is Domestic Abuse?

10. In the draft Domestic Abuse Bill, domestic abuse is defined as:

‘Any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexual orientation. The abuse can encompass, but is not limited to: psychological, physical, sexual, economic and emotional forms of abuse.

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 a person.’¹

Domestic Abuse: National Context

11. In March 2018, the Crime Survey for England and Wales (CSEW) identified that an estimated 2 million adults aged 16 to 59 years experienced domestic abuse in the last year and 599,549 domestic-abuse related crimes were reported to the police². The CSEW estimates that less than 1 in 5 (17%) victims of partner abuse report it to the Police.
12. Whilst there has been very little change in CSEW estimated incidence, the number of recorded crimes has been increasing; 23% in the last year. This in part reflects police forces improving their identification and recording of domestic abuse and an increased willingness by victims to come forward.
13. Nationally, women were approximately twice as likely to have experienced domestic abuse compared to men (7.9% compared with 4.2%)³. This equates to an estimated 1.3 million female victims and 695,000 male victims.

Domestic Abuse: Southampton

14. In Southampton, over 3,000 domestic violence cases were recorded by Hampshire Constabulary in 2017/18 and, overall, domestic violence accounted for 30% of all recorded violent crime in the city. The levels of reported domestic violence have risen for four consecutive years, with a 7% rise recorded in 2017/18.⁴

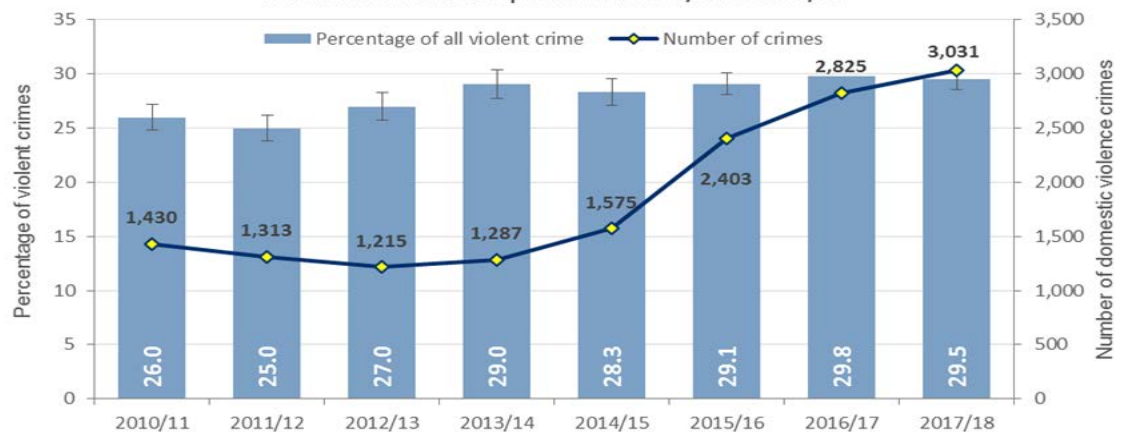
¹ HM Government (2019). Transforming the Response to Domestic Abuse. London: Home Office, p.5.

² Office for National Statistics (2018). Domestic abuse in England and Wales: year ending March 2018. Domestic Abuse in England and Wales. Office for National Statistics, pg. 2.

³ Office for National Statistics (2018). Domestic abuse in England and Wales: year ending March 2018. Domestic Abuse in England and Wales. Office for National Statistics, pg. 8.

⁴ King, D. and Marsh, K. (2019). Domestic Abuse in Southampton & IDVA, pg. 6. Available at: <https://www.southampton.gov.uk/modernGov/documents/s39388/Domestic%20Violence%20-%20Southampton.pdf>

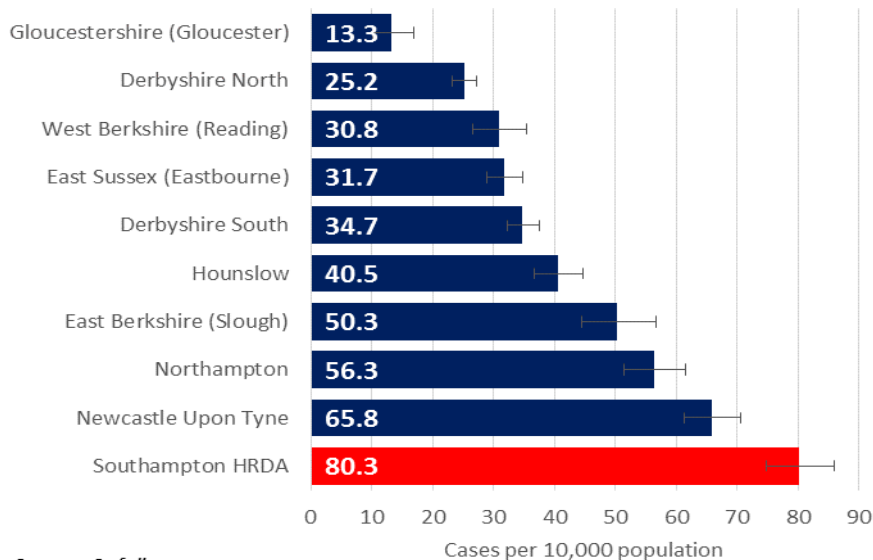
Figure 1 Number of domestic violence crimes, with and without injury, as a percentage of all violent crime: Southampton trend: 2010/11 to 2017/18



Source: Hampshire Constabulary

15. Furthermore, the number of high risk cases continues to increase in the city. Southampton has a rate of 80.3 High Risk Domestic Abuse (HRDA) cases per 10,000 population. This is the highest rate for areas that we have data for, as shown in Figure 2.

Figure 2 High Risk Domestic Abuse cases per 10,000 population: Southampton HRDA and comparator MARACs: October 2017 to September 2018

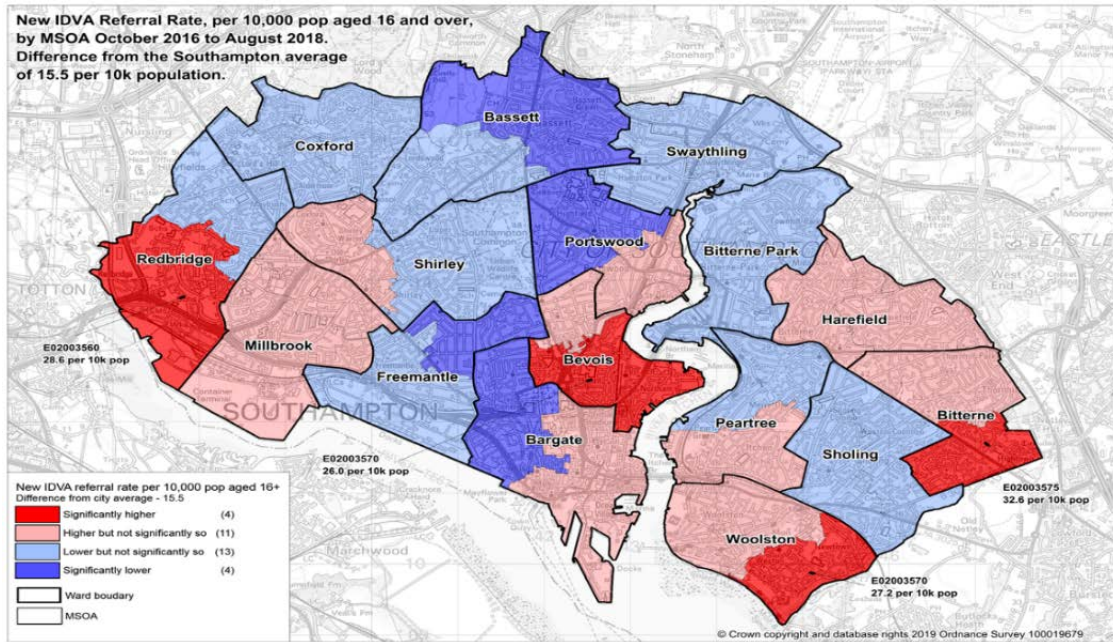


Source: Safelives

16. Domestic abuse rates are almost eight times higher in the most deprived neighbourhoods of Southampton compared to the least deprived neighbourhoods, with Bevois, Bitterne, and Millbrook wards having the highest HRDA case rates. According to recent Independent Domestic Violence Advisor (IDVA) data, 44% of new IDVA referrals come from the 20% most deprived neighbourhoods in the city⁵.

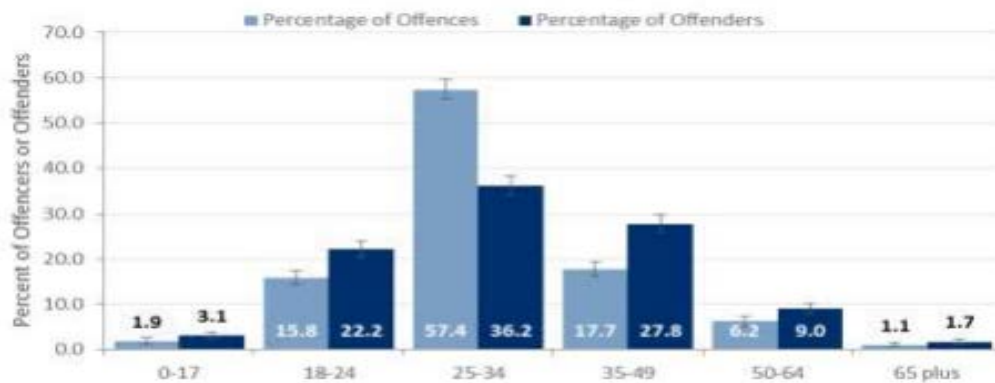
⁵ King, D. and Marsh, K. (2019). Domestic Abuse in Southampton & IDVA, pg. 10, 11. Available at: <https://www.southampton.gov.uk/modernGov/documents/s39388/Domestic%20Violence%20-%20Southampton.pdf>

Figure 3



17. 2016/17 Hampshire Constabulary data shows that offenders in Southampton are typically male (74.6%), perpetrate within intimate partner relationships (87%) and over a third are aged 25-34 years old in Southampton⁶. This age cohort were also responsible for 57% of offences in 2016/17 as shown in Figure 4.

Figure 4 Age profile of domestic violence and abuse offenders and the offences they commit in Southampton: 2016/17



Source: Hampshire Constabulary Central Referrals Unit.
Please note: only offences with an identified offender with a valid age recorded are included in this analysis

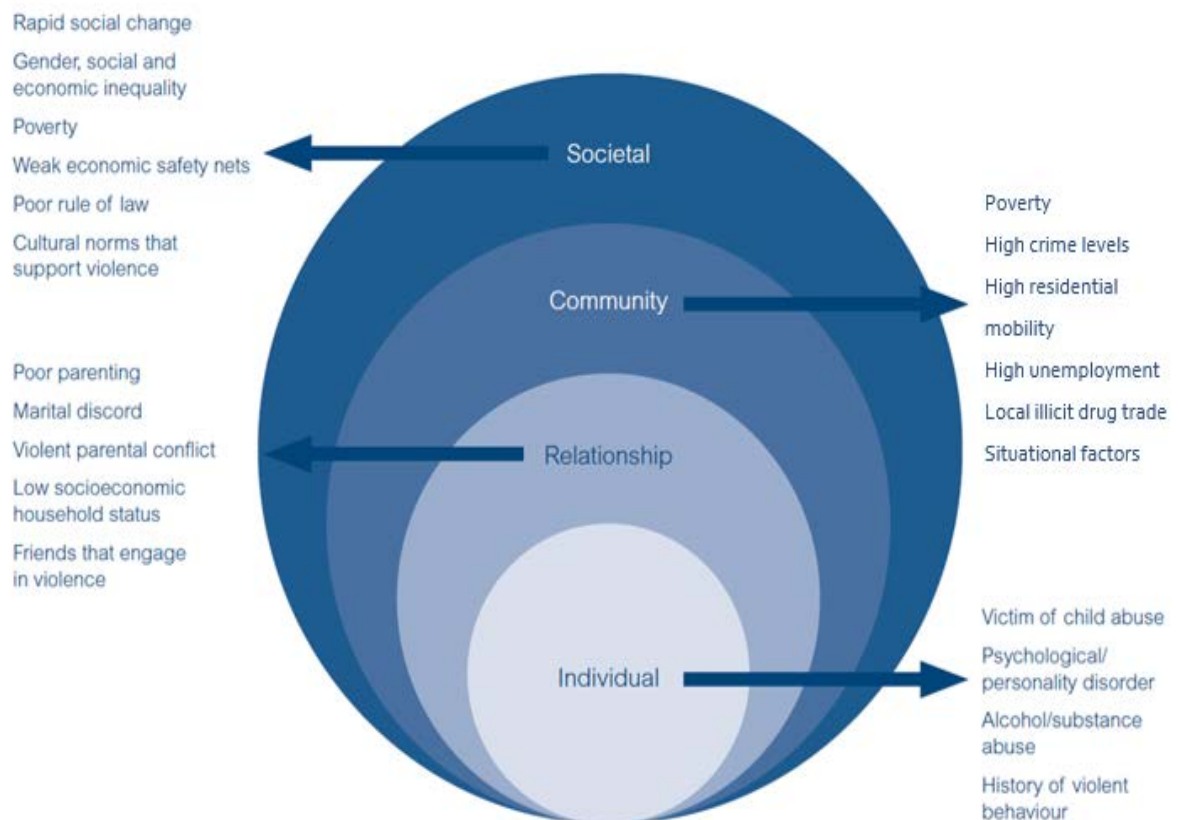
18. To inform the next iteration of the Southampton Domestic and Sexual Abuse Multi-Agency Strategy a detailed Domestic Abuse Needs Assessment is being undertaken by the Intelligence and Strategic Analysis Team and Public Health. This assessment should be available in autumn 2019.

⁶ King, D. and Marsh, K. (2019). Domestic Abuse in Southampton & IDVA, pg. 13. Available at: <https://www.southampton.gov.uk/modernGov/documents/s39388/Domestic%20Violence%20-%20Southampton.pdf>

What are the risk factors for perpetrating domestic abuse?

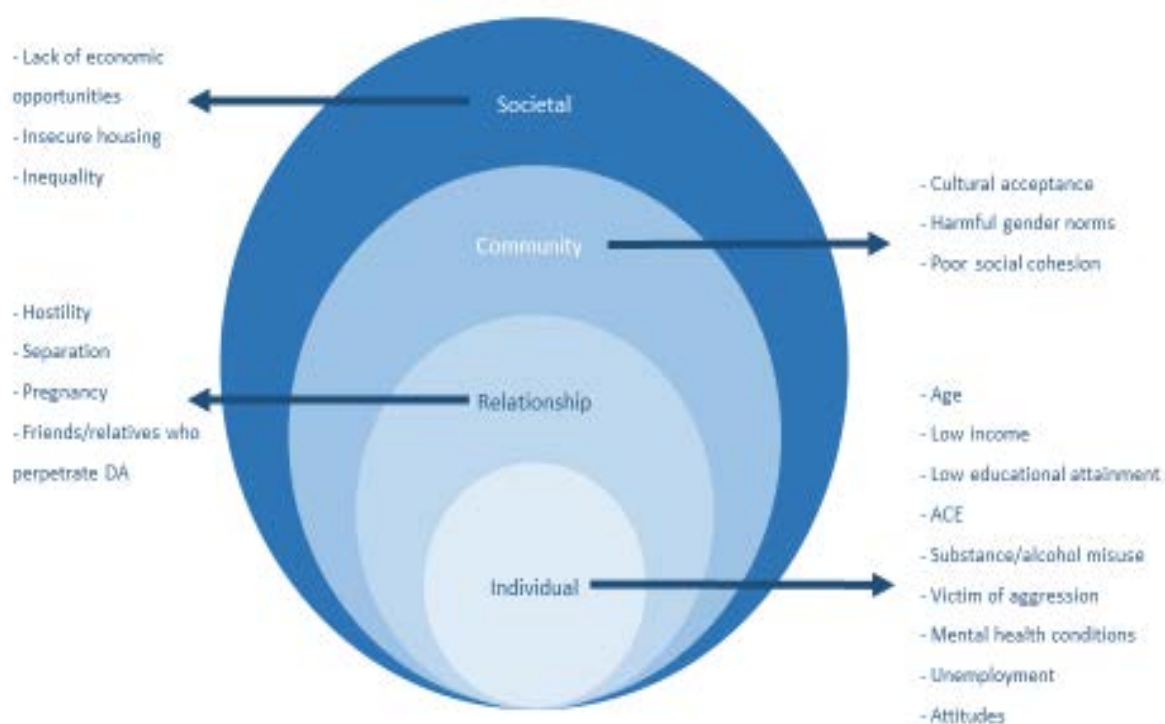
19. As the figures in the previous section illustrate, Southampton has significantly higher levels of reported domestic violence compared to similar areas we have data for, and the number of reported cases continues to rise.
20. Reflecting the focus of the inquiry, to help identify what additional action can be taken to reduce and prevent domestic abuse in Southampton, the Panel were provided with an overview of the risk factors for perpetrating domestic abuse.
21. Figure 5 below identifies risk factors for violence. Figure 6 is an adaptation of this model to reflect the specific risk factors of the perpetrators of intimate partner violence.

Figure 5 - Risk factors for violence



Source: The Local Government Association (2018), Public health approaches to reducing violence. Available from <https://www.local.gov.uk/public-health-approaches-reducing-violence>

Figure 6 – Risk factors for perpetrating intimate partner violence (IPV) ⁷



Source: Public Health, presentation to Inquiry Panel, 7 March 2019 – Available at <https://www.southampton.gov.uk/modernGov/documents/s39782/DA%20Literature%20Review.pdf>

22. In addition Sara Kirkpatrick, Services & Development Manager at Respect – the leading UK membership organisation for work with domestic abuse perpetrators, in her presentation at the inaugural meeting of the Inquiry Panel identified the following additional risk factors for perpetrating domestic abuse⁸:

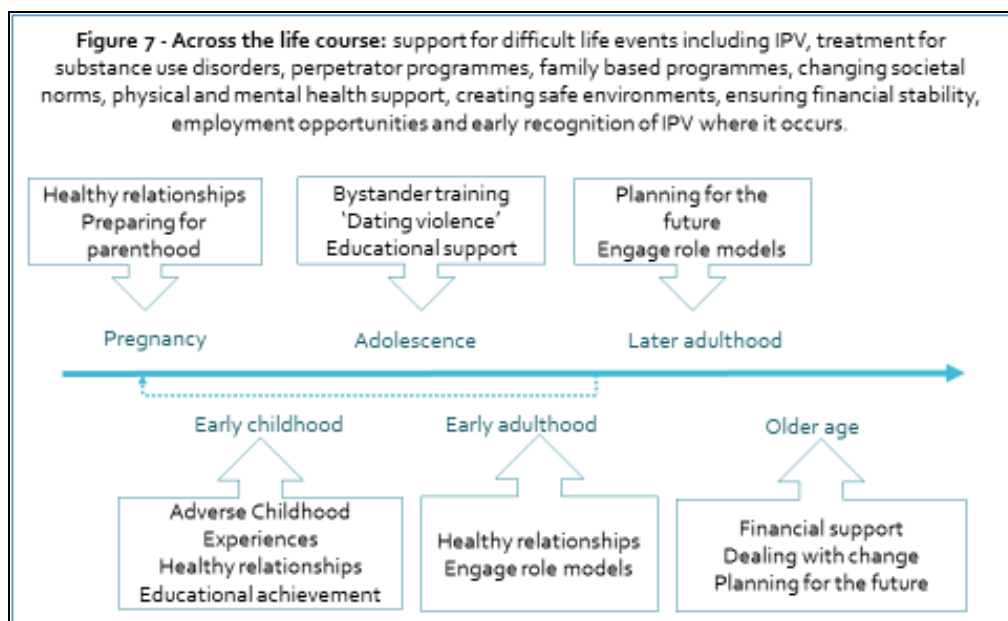
- Young people exposed to domestic abuse, as a form of adverse childhood experience (ACE), have higher prevalence of both perpetration and victimisation of domestic abuse.
- Domestic abuse is both a cause and consequence of gender inequality, henceforth, the biggest factor which increases propensity to use abusive behaviour or continue to use abusive behaviour is the social acceptance of 'low level' abusive or oppressive behaviour.

⁷ Further information on Figure 5 & 6 and the presentation from Public Health Southampton is referenced here: Grove, G. (2019). Literature Review of Domestic Abuse in Southampton, pg. 5, 6. Available at: <https://www.southampton.gov.uk/modernGov/documents/s39782/DA%20Literature%20Review.pdf>

⁸ Kirkpatrick, S. (2019). Respect - Domestic Abuse Prevention Inquiry, pg. 9. Available at: <https://www.southampton.gov.uk/modernGov/documents/s39388/Domestic%20Violence%20-%20Southampton.pdf>

What helps to prevent / reduce incidence of domestic abuse?

23. Having been informed about the risk factors for perpetrating domestic abuse the Panel sought to understand what initiatives and actions were effective at preventing abuse from occurring or reducing incidents of domestic abuse.
24. At the 7 March 2019 meeting of the Inquiry a presentation from Public Health outlined the findings from a literature review of effective practice in preventing people from becoming future perpetrators of domestic abuse⁹. The presentation, whilst recognising that there was emerging research about what works, identified three areas for prevention activity:
- 1) **Primary prevention** - Preventing someone from ever perpetrating.
 - 2) **Secondary prevention** - Intervening after the first occurrence to stop it happening again and minimising the harm to others.
 - 3) **Tertiary prevention** – Stopping serial perpetrators from continuing to perpetrate and minimising the harm to others.
25. The analysis of the various prevention activity identified three key elements that were associated with effectively preventing or reducing incidence of domestic abuse. The key approaches can be summarised as follows:
- **Whole system approach** – A multi-agency response to domestic abuse
 - **Life course approach** – Support for addressing the risk factors for domestic abuse across the life time of an individual (see Figure 7)
 - **Universal primary prevention** - Approaches designed for an entire population without regard to individual risk factors. These include awareness campaigns and relationship education for young people.



Source: Public Health, presentation to Inquiry Panel, 7 March 2019

⁹ Grove, G. (2019). Literature Review of Domestic Abuse in Southampton, pg. 7, 10-15. Available at: <https://www.southampton.gov.uk/modernGov/documents/s39782/DA%20Literature%20Review.pdf>

Work directly with perpetrators

26. Specific reference was made by Sarah Fitzpatrick, Services & Development Manager at Respect, when considering approaches to reduce and prevent domestic abuse, to the importance of working with perpetrators. The logic behind this approach is:

*'Support services for victims and children are vital. Refuges, Independent Domestic Violence Advisors (IDVAs) and outreach services save and improve lives every day. And a robust criminal justice system has a crucial role to play in administering justice and protecting current and future victims. But unless communities engage directly with perpetrators, domestic violence will not stop.'*¹⁰

27. The Panel were informed about the growing evidence base demonstrating the positive impact that programmes which engage with perpetrators are having on outcomes. These include community behavioural change programmes and early intervention programmes for those ready, willing and able to change, and intensive case management models for perpetrators causing high levels of harm or have individualistic needs.

What every good local authority area should have in place to reduce incidents of domestic abuse?

28. Reflecting the importance of working with perpetrators Sara Kirkpatrick identified a number of elements that every local authority should have in place to reduce incidents of domestic abuse. This is summarised below, a more detailed version is attached as Appendix 4:

- Coordinated multi-agency approach which includes statutory and specialist services
- Early intervention
- Assessment of harm, capacity to change and need
- A range of responses including:
 - Intensive case management
 - Robust civil and criminal justice responses
 - Behaviour change programmes
- Principles and standards accreditation / external quality assurance of services
- Needs led Trauma informed approach for victims and survivors.

29. The criteria above, including whole system approach, life course approach and universal primary prevention, formed the structure for meetings two and three of the inquiry enabling comparisons with services in Southampton.

¹⁰ Respectphoneline.org.uk. (2010). Domestic Violence Perpetrators - Working with the cause of the problem. [online] Available at: <http://respectphoneline.org.uk/wp-content/uploads/2018/01/Working-with-the-cause-of-the-problem.pdf>

Conclusions and Recommendations

30. A summary of the key evidence presented at each of the inquiry meetings is attached as Appendix 3. In addition an overview of domestic abuse services and programmes in Southampton is attached as Appendix 5, and a summary of findings for Southampton against the criteria that good local authority areas should have in place to reduce incidents of domestic abuse is attached as Appendix 6. Conclusions were drawn from each meeting and disseminated to the Panel.

All of the reports, presentations and minutes from the inquiry meetings can be found here:

<https://www.southampton.gov.uk/modernGov/ieListMeetings.aspx?CIId=709&Year=0>

Conclusions

- Southampton has high levels of reported domestic abuse and this figure continues to rise.
- Southampton has a strong and well developed suite of victim and survivor domestic abuse services.
- The range of accredited perpetrator services in Southampton is comparable to any city in the UK. This is primarily due to the innovative services developed by the voluntary and community sector in the city.
- It is not possible to reduce domestic abuse without reducing the number of people who are abusive. Key to reducing incidence of domestic abuse is to work at a whole population level to change the culture in society away from unhealthy and abusive values, attitudes and behaviours; addressing adverse childhood experiences; and, to directly engage with perpetrators.
- The draft Domestic Abuse Bill includes positive developments with regards to making appropriate relationship and sexual education in secondary and primary schools compulsory. More needs to be done across wider society to stigmatise abusive behaviours.
- There is a need to increase referrals to perpetrator services, and at an earlier stage, from agencies dealing with abuse. Improving awareness of perpetrator services and the service pathways will help to achieve this objective. As demand for commissioned perpetrator services increases there will be a need to increase resources to ensure that a backlog does not form.
- Opportunities exist to embed good practice and further improve partnership working by rolling out the Multi-Agency Tasking and Co-ordination Group (MATAC) and co-locating Hampton Trust staff within key service areas.
- There is a need to consider our relationship with risk factors (including alcohol, substance misuse and mental health). The draft Domestic Abuse Bill provides an opportunity for Southampton to work with Government and to develop the evidence base to help inform commissioning decisions.

Recommendations

Universal primary prevention

- 1. Communications Campaign** – There is still a social acceptance of ‘low level’ abusive or oppressive behaviour in society which, therefore, needs a change in culture and community response to perpetrator behaviour. Learning from the findings of the developing Domestic Abuse Needs Assessment, it is recommended that, in line with the commitment in the draft Domestic Abuse Bill to promote public awareness of domestic abuse, the Council undertakes a communication campaign that, alongside the messages promoted through White Ribbon Day challenging attitudes to gender inequality, seeks to stigmatise abusive behaviours and to signpost members of the public to the Hampton Trust and Respect Phone Line.
- 2. Reporting Domestic Abuse** – Engage with local media outlets and encourage them to follow the new reporting guidelines developed by Level Up, and adopted by press regulators, on the way that domestic abuse is reported.
- 3. Relationship Education** - Support schools, as required, to deliver the requirements on relationship education, relationships and sex education, and health education in primary and secondary skills outlined within the draft Domestic Abuse Bill.
- 4. Adverse Childhood Experiences** - This is recognised as a city and nationwide issue and this view is further supported through the findings of the inquiry. It is recommended that the impact of adverse childhood experiences on domestic abuse is considered in the work the Council, as a whole, takes forward to address adverse childhood experiences.

Perpetrator Services / Whole system approach - We cannot reduce domestic abuse without reducing the number of people who are abusive. People who are abusive often need support to recognise their abuse and to change. Perpetrator services help to reduce the risk to partners, current and future, and mean fewer children live in families affected by domestic abuse. It also sends a clear social message that victims or survivors do not cause domestic abuse.

- 5. Raise awareness of, and increase referrals to, perpetrator services** - There is a need to increase the identification of, and from this the number of referrals to perpetrator services, and at an earlier stage, from agencies dealing with abuse. It is recommended that a perpetrator services awareness raising campaign is undertaken targeted at potential referral partners, and that specific training is provided to agencies that deal with abuse, including substance misuse services, mental health services and relevant NHS services to ensure that they know the referral pathways. The draft Domestic Abuse Bill identifies specific funding for training to promote greater joining-up between substance misuse and domestic abuse services.

- 6. Introduce routine enquiry for perpetrators** – Routine enquiry currently involves asking all women at assessments about abuse regardless of whether there are any indications or suspicions of abuse. No equivalent approach exists to ask if individuals are perpetrating abuse at assessments in key services. This should be introduced across an appropriate range of services, including primary care, mental health, substance misuse and other services, to improve identification and provide opportunities for early intervention.
- 7. Seek additional resources to support perpetrator services in Southampton** – An estimated 11% of local domestic abuse funding is targeted at supporting perpetrators to recognise their behaviour and change. Additional resources are needed to enable services to meet need and the expected rise in demand to ensure that a backlog does not form. The work may include education, identification and a range of interventions, for example the LINX service.
- 8. MATAC (Multi-Agency Tasking and Co-ordination)** – This is a strategic and integrated partnership approach that identifies and intervenes with high-risk and serial perpetrators of domestic abuse. MATAC has been piloted in Southampton by Hampton Trust and Hampshire Constabulary. The current evaluation is expected to show positive results. If this transpires it is recommended that the approach is rolled out in Southampton to improve the tracking and disruption of high risk and serial perpetrators in Southampton.
- 9. Co-location of Hampton Trust staff within the key service areas** - To support long term institutional change in engaging perpetrators and to promote identification for early intervention it is recommended that Hampton Trust staff are co-located within key service areas for specified periods of time (e.g. 6 months at each location). This would include the High Risk Domestic Abuse Service, Substance Misuse and Mental health services, among others. Outcomes of this initiative should be evaluated.

Evidence Based Decision Making

- 10. Update the Domestic and Sexual Abuse Strategy (DSA)** – The existing Southampton DSA Strategy runs from 2017-2020. The strategy needs to be updated to reflect the Domestic Abuse Strategic Needs Assessment and the findings from this inquiry.
- 11. Evaluation of perpetrator services** – Evidence that supports the effectiveness of perpetrator services is limited but growing. To develop the evidence base it is recommended that the DSA strategic group receives and considers appropriate research and evaluations from across the UK and combines this with regular analysis of perpetrator services in Southampton to develop understanding about what services and initiatives are most effective and to inform future commissioning intentions.
- 12. Return on Investment for Perpetrator Services** – Public Health to work with others to develop a return on investment for perpetrator services to help support future funding decisions made by the Council and partners.

- 13. Alcohol and Substance Misuse** – The Draft Domestic Abuse Bill commits the Government to consider the impact of alcohol on domestic abuse and to identify gaps in the evidence base on the relationship between substance misuse and domestic abuse. It is recommended that the Integrated Commissioning Unit and Public Health keep abreast of the developments in this area and reflect on the outcomes when considering future decisions and strategies relating to domestic abuse and substance and alcohol misuse.
- 14. The role of Public Health** – The Director of Public Health considers domestic abuse when the new funding arrangement and mandate for Public Health is announced nationally, timescale unknown.
- 15. Consideration of the impact on victims and perpetrators of domestic abuse when making Council decisions** – To ensure that consideration is given to the impact of Council proposals on the victims and perpetrators of domestic abuse it is recommended that they are included within Equality and Safety Impact Assessments as if they were a protected characteristic.
- 16. Working with Government** – Southampton has good survivor services and is recognised as a vanguard area for perpetrator services. However, the number of reported incidents of domestic abuse continues to rise. The draft Domestic Abuse Bill provides an opportunity for Southampton to, through the development of the next iteration of the DSA Strategy and improved resourcing towards perpetrators, develop a narrative on domestic abuse in Southampton and engage with the Government with the ambition of using the city as model for investing in innovative, citywide practice to reduce levels of domestic abuse. It should also form early and positive links with the proposed Domestic Abuse Commissioner if and when they are appointed.

Appendices

Appendix 1 – Terms of References

Appendix 2 – Inquiry Plan

Appendix 3 – Summary of Key Evidence

Appendix 4 - What should every good local authority area have in place to reduce incidents of domestic abuse?

Appendix 5 – Summary of Southampton Domestic Abuse Services & Programmes

Appendix 6 – Summary of Findings

Appendix 1 – Terms of Reference

Reducing and Preventing People from Becoming Perpetrators of Domestic Abuse in Southampton

Terms of Reference and Draft Inquiry Plan

1. Scrutiny Panel Membership:

- a) Councillor McEwing (Chair)
- b) Councillor Coombs
- c) Councillor Mitchell
- d) Councillor Payne
- e) Councillor Harwood (Vice-Chair)
- f) Councillor Galton
- g) Councillor Laurent

2. Purpose:

To consider what more may be done in Southampton to reduce domestic abuse with a focus on preventing people from abusing their intimate partner.

3. Background:

- Southampton has high levels of reported domestic abuse.
- Domestic related violence accounted for 29.1% of total crime in Southampton in 2015/16.
- 1,065 children and young people are identified as living in violent homes in the city where a parent is a victim of high risk Domestic and Sexual Abuse (DSA)
- A 2015 focus group with frontline workers and survivors of DSA in Southampton showed that inter-generational DSA is high.

4. Objectives:

- a) To develop understanding from a national and local level of domestic abuse, patterns of offending, and risk factors associated with perpetrators of domestic abuse.
- b) To consider the prevalence of perpetrating domestic abuse in Southampton; the services that are currently available across the life course in Southampton to reduce the likelihood of people becoming perpetrators of domestic abuse; the effectiveness of the services and gaps in provision.
- c) To identify what is being done elsewhere in preventing people from being perpetrators of domestic abuse and identify if these principals or initiatives could be introduced in Southampton.

5. Methodology:

- a) Undertake desktop research.
- b) Seek stakeholder views.
- c) Identify best practice.
- d) Seek views of experts.

6. Proposed Timetable:

Four meetings between January 2019 and April 2019.

7. Draft Inquiry Plan (Subject to the availability of speakers)

Meeting 1: 31 January 2019

- Introduce, Context, Background
 - Definition of domestic abuse, including the scope of this scrutiny inquiry as focussing on abuse between intimate partners;
 - Description of perpetrators of domestic abuse nationally and in Southampton;
 - What we already know about risk factors and patterns of domestic abuse between intimate partners.

To be invited:

- Sara Kirkpatrick, Respect UK
- Dan King, Service Lead for Intelligence & Strategic Analysis
- Karen Marsh, IDVA

Meeting 2: 21 February 2019

- The local Southampton Policy framework and services designed to reduce the likelihood of people becoming perpetrators of domestic abuse.
 - What are the local intervention services – What works, what does not, where are the gaps?

To be invited:

- Hampton Trust – Perpetrator services
- Yellow Door – Star Project
- Hampshire & IOW Community Rehabilitation Company

Meeting 3: 7 March 2019

- Innovation and best practice – What can Southampton learn from other cities and programmes? Can we replicate or adopt these practises in Southampton? What else do we need to find out?
 - Literature Review – Good practice
 - Primary and Secondary causes of domestic abuse
 - Domestic Abuse Bill
 - Pathways / Substance misuse / Mental Health / Alcohol

To be invited:

- Phil Bullingham, Service Lead for Safeguarding, Improvements, Governance & Quality Assurance – Children's Services
- Grace Grove, Public Health Registrar
- Mark Pirnie, Scrutiny Manager
- Sandra Jerrim, Senior Commissioning Officer

Meeting 4: 18 April 2019

- Panel to agree a final report

Appendix 2 – Inquiry Plan

DATE	MEETING THEME	TOPIC DETAIL	EVIDENCE PROVIDED BY
31 January 2019	Agree Terms of Reference and introduction to the inquiry	Introduction, context and background to the issues.	<ul style="list-style-type: none"> • Sara Kirkpatrick, Service and Development Manager of Respect • Dan King, Service Lead for Intelligence & Strategic Analysis, SCC • Karen Marsh, Service Manager for IDVA, SCC
21 February 2019	The Local Southampton services for Domestic Abuse	The local Southampton Policy framework and services designed to reduce the likelihood of people becoming perpetrators of domestic abuse.	<ul style="list-style-type: none"> • Sandra Jerrim, Senior Commissioning Officer, Integrated Commissioning Unit • Chantal Hughes & Tracy Rutherford, CEO & Deputy CEO of Hampton Trust • Tara Doel, Nicci King and Frankie Snow – Yellow Door • Lauren Viney – Hampshire & IOW Community Rehabilitation Company
7 March 2019	Innovation & Best Practice	What can Southampton learn from other cities and programmes? Can we replicate or adopt these practises in Southampton? What else do we need to find out?	<ul style="list-style-type: none"> • Phil Bullingham, Service Lead for Safeguarding, Improvements, Governance & Quality Assurance – Children’s Services, SCC • Grace Grove, Public Health Registrar, SCC • Sandra Jerrim, Senior Commissioning Officer, Integrated Commissioning Unit • Mark Pirnie, Scrutiny Manager, SCC

Appendix 3 – Summary of Key Evidence

Scrutiny Inquiry Panel – Reducing and Preventing Domestic Abuse in Southampton

Inquiry Meeting – 31 January 2019

Introduction to the inquiry, context and background

Presentations referenced below can be found here:

<https://www.southampton.gov.uk/modernGov/ieListDocuments.aspx?CId=709&MId=4159&Ver=4>

Summary of information provided:

Sara Kirkpatrick - Research and Services Development Manager, Respect

- A presentation introducing the issue of domestic abuse, risk factors, and the importance of prevention work with perpetrators was delivered by Sara Kirkpatrick.
- In addition to the points raised in the presentation, Sara made the following key points:
 - The biggest factor which increases propensity to use abusive behaviour or continue to use abusive behaviour is social acceptance of ‘low level’ abusive or oppressive behaviour.
 - A number of initiatives have been shown to decrease incidents of intimate partner abuse. These include awareness raising campaigns and leadership.
 - Working directly with perpetrators has delivered promising results. Project CARA, an early intervention model based on conditional cautioning, delivered by Hampton Trust was referenced as an example of good practice.
 - As the appetite for innovation and a broader range of solutions to challenge or disrupt abusive behaviour increases these innovations should be developed in consultation and cooperation with survivor services.
 - The recently published Transforming the Response to Domestic Abuse Consultation Response and Draft Bill contains some elements that may help to reduce levels of domestic abuse. This includes introducing regulations and statutory guidance for schools on Relationships and Sex Education, and Health Education.
 - Support services for victims and children are vital. Refuges, Independent Domestic Violence Advisors (IDVAs) and outreach services save and improve lives every day, and a robust criminal justice system has a crucial role to play in administering justice and protecting current and future victims. But unless communities engage directly with perpetrators, domestic violence will not stop.

Dan King - Service Lead, Intelligence and Strategic Analysis, SCC
Karen Marsh – IDVA Service Manager, SCC

- A Presentation (item 8 – Additional Documents) providing the Panel with an overview of domestic abuse in Southampton was delivered by Dan King and Karen Marsh.
- In addition to the points raised in the presentation, the following key points were made:
 - A detailed Domestic Abuse Needs Assessment is being undertaken by the Intelligence and Strategic Analysis Team and Public Health to inform the next iteration of the Southampton Domestic and Sexual Abuse Multi-Agency Strategy.
 - Southampton has a very high domestic abuse reporting rate.
 - Over 3,000 domestic violence crimes were recorded by Hampshire Constabulary for Southampton in 2017/18. Figures rose 7% last year, the 4th consecutive year it has increased in Southampton.
 - The highest recorded rates of domestic violence and abuse are in the most deprived communities in Southampton.
 - Southampton has a strong multi-agency response that is victim focused.
 - Volume of high risk referrals continues to rise.

Conclusions from meeting:

- Southampton has a very high number of reported cases of domestic abuse and this figure continues to rise.
- Support services for victims and children are vital. Refuges, Independent Domestic Violence Advisors (IDVAs) and outreach services save and improve lives every day, and a robust criminal justice system has a crucial role to play in administering justice and protecting current and future victims. But unless communities engage directly with perpetrators, domestic violence will not stop.
- A number of initiatives have been shown to decrease incidents of intimate partner abuse. These include Domestic Violence Perpetrator Programmes working in partnership with support services and prevention work, such as awareness raising campaigns.

Scrutiny Inquiry Panel – Reducing and Preventing Domestic Abuse in Southampton

Inquiry Meeting – 21 February 2019

The local Southampton Policy framework and services designed to reduce the likelihood of people becoming perpetrators of domestic abuse.

Presentations referenced below can be found here:

<https://www.southampton.gov.uk/modernGov/ieListDocuments.aspx?CId=709&MId=4160&Ver=4>

Summary of information provided:

Sandra Jerrim - Senior Commissioner from the Integrated Commissioning Unit (ICU).

- A presentation introducing how resources are apportioned across different service areas and feedback from providers on their role in identifying and signposting perpetrators was delivered by Sandra Jerrim.
- In addition to the points raised in the presentation, Sandra made the following key points:
 - Currently, Southampton works mainly with victims and children but lacks the same level of commitment to working and intervening with perpetrators.
 - As well as services provided through the OPCC and probation, there are other service providers outside of social care that will have some involvement with perpetrators, such as drug and alcohol misuse services, Child & Adolescent Mental Health Services (CAMHS).
 - There is no focus within areas on deprivation to identify or respond to domestic abuse and few services targeting adverse childhood experiences (ACEs).
 - Children and Families Services has become the prominent referral route to the Domestic Abuse Perpetrator Partnership (DAPP) and other services.
 - Funding towards domestic abuse perpetrators come from a variety of sources, typically The Ministry of Justice, OPCC, Southampton City Council, Big Lottery, and general fundraising, etc.
 - This results in the funding for a number of perpetrator and programmes being inconsistent and often short term.
 - Overall in Southampton, and based on information available, it has been found that approximately £800,000 is spent on domestic abuse services annually: 89% of expenditure is on victim/survivor services and 11% perpetrator services (DAPP 6%, LINX 1%, and Building Better Relationships 2%).
 - From a survey questionnaire in regards to referrals to perpetrator services it has found that:
 - All settings recognised and identified perpetrators.
 - Survivor services focus on developing protective factors around the survivor.

- Responses show that survivor services are increasingly accepting their role in sharing intelligence about perpetrators and the benefits of this.

Tara Doel, Nicci King and Frankie Snow – Yellow Door

- Yellow Door is a registered charity working to support individuals and communities across Southampton and western Hampshire. They offer a range of free services dedicated to supporting those who have experienced - or are at risk of - abuse, as well as delivering preventative workshops and outreach across the region.
- A presentation introducing the Panel to Yellow Door's STAR Project, Bright Stars, and Diversity & Inclusion Advocacy programme to prevent and tackle domestic and sexual abuse was delivered by Tara Doel, Nicci King, and Frankie Snow.
- In addition to the points raised in the presentation, the Yellow Door representatives made the following key points:
 - The STAR Project delivers Relationship and Sexual Education, through interactive workshops, in Southampton and surrounding areas of Hampshire to children aged from 11+ to college and university level.
 - This is currently delivered to all secondary schools, majority of Primary schools and youth settings in Southampton. In 2017/18 The STAR Project has delivered to 11,985 young people in 2017/18.
 - The STAR Project has been awarded as one of the top 10 examples of international best practise in a European Parliament report "*Overview of Worldwide Best Practise for Rape Prevention & Assisting Victims*" (2014).
 - One of the aims of this service is to prevent abuse by teaching future potential perpetrators and victims of domestic abuse about healthy relationships, self-esteem, and making informed decisions surrounding sex and relationships. They also provide advocacy support for children.
 - The STAR Project has a very high positive feedback with 98% of children surveyed saying they understood more about what makes a healthy relationship. The majority of children attending participate in the survey.
 - Funding sources of the STAR Project include: Southampton DSA Prevention and Early Intervention Contract, OPCC, universities, and general fundraising.
 - Bright Stars is another, therapeutic, programme also delivered by Yellow Door to support children who have witnessed adverse childhood experiences (ACE) from domestic abuse.
 - Yellow Door also has a three year running Diversity and Inclusions Advocacy group that helps engage with marginalised and minority groups on domestic and sexual abuse, supported by Hampshire Constabulary.

Chantal Hughes & Tracy Rutherford – CEO & Deputy CEO, Hampton Trust

- Hampton Trust is a charity based in Hampshire working to break the cycle of abuse, conflict and exploitation. They provide a variety of programmes and services to engage and strengthen individuals, families, organisations and communities.
- A presentation introducing the Panel to the Domestic Abuse Perpetrator Partnership (DAPP), and Hampton Trust's programmes such as Project CARA and LINX was delivered by Tracy Rutherford and Chantal Hughes.
- In addition to the points raised in the presentation, the Hampton Trust representatives made the following key points:
 - The Domestic Abuse Perpetrator Partnership (DAPP) was established in 2016 as a developmental service partnered by Hampton Trust, Aurora New Dawn, and BaseLine Consultancy.
 - The DAPP has been evaluated by Southampton University in 2018. The Priority Perpetrator Identification Tool used within the DAPP, to assess the type of perpetrator by offences committed to trigger intervention, has been evaluated by Cardiff University.
 - Hampshire Constabulary became the first police force in the UK to use conditional cautioning to intervene with perpetrators through the OPCC's commissioning of Project CARA.
 - Hampton Trust provides various programmes for early intervention with young people and perpetrators such as DARE, Turnaround, and LINX. The LINX provides 12 week intervention with young people associated with a backdrop of domestic abuse and/or exhibiting violent behaviour or aggression related to it.
 - The Hampton Trust has worked in partnership with Hampshire Constabulary to pilot Multi Agency Tasking & Co-ordination (MATAC) in Southampton. MATAC's have been recognised by Respect as good practice that local authorities should have as a part of their local multiagency arrangements.
 - The Hampton Trust have also worked in co-location with other front line workers in domestic abuse to train and support them for their intervention and interactions with perpetrators. Hampton Trust hopes to expand this to ensure that other frontline practitioners can work with perpetrators and refer them to Hampton Trust in confidence.

Lauren Viney – Hampshire & IOW Community Rehabilitation Company

- The Hampshire & IOW Community Rehabilitation Company is a private-sector supplier of Probation and Prison-based rehabilitative services for offenders based in Hampshire and the Isle of Wight.
- A presentation introducing the Panel to their domestic abuse perpetrators programmes Building Better Relationships (BBR), Help, and Creating Safer Relationships (CSR) for perpetrators within the criminal justice system was available to the panel and shown to the panel by Sandra Jerrim. Key points from the information are:
 - Interventions made via the CRC are mostly court ordered, with exception to certain contract agreements that are in place for BBR delivery (such as CAF/CASS).

- Building Better Relationships is an accredited group work programme aimed to reduce re-offending and promote the safety of current and future partners and children whilst working collaboratively with other agencies.
 - The BBR has shown an 82% of completion by perpetrators in 2017.
- Help is a new healthy relationship intervention for male Service Users with identified relationship difficulties. The programme is an early intervention and can be delivered to Service Users who have DA convictions or with those who have identified relationship problems which are a factor in their general offending behaviour.
 - Help will replace all existing local Domestic Abuse non accredited activities within the CRCs.
- Creating Safer Relationships is a 1:1 healthy relationship intervention for male Service Users with identified relationship difficulties. The CSR aims to help men make sense of their own world and find ways to develop and maintain positive and functional relationships.

Conclusions from meeting:

- There is a disparity in funding toward victims and perpetrator services in domestic abuse by 89% and 11%.
- A survey showed agencies recognise the importance of identifying perpetrators but more work is needed to establish good sharing of information across and between services.
- There are gaps in interventions towards adverse childhood experiences and inconsistency in funding and resources towards perpetrator services.
- The STAR Project is internationally accredited as good, has positive feedback from participants and delivers the opportunity to young people to increase their understanding of healthy relationships through their Relationship & Sexual Education programme and in doing so, go some way towards preventing future perpetrators and victims of domestic and sexual abuse.
- The Hampton Trust run various perpetrator programmes via the DAPP or alongside Hampshire Constabulary. It recognises that to move forward it should expand its training of front-line workers and co-location, establish the MATAC to full-scale if the final report concludes the pilot as effective, and change the language around domestic abuse to engage young people who do not identify with these labels (e.g. Young Fathers Intervention).

Scrutiny Inquiry Panel – Reducing and Preventing Domestic Abuse in Southampton

Inquiry Meeting – 7 March 2019

Innovation and best practice

Presentations referenced below can be found here:

<https://www.southampton.gov.uk/modernGov/ieListDocuments.aspx?CId=709&MId=4161&Ver=4>

Summary of information provided:

Phil Bullingham – Service Lead for Safeguarding, Improvement, Governance & Compliance, Children and families, SCC

- A presentation outlining the range of support services provided by the Children and Families Service to reduce domestic abuse in Southampton was delivered by Phil Bullingham.
- In addition to the points raised in the presentation, Phil made the following key points:
 - The High Risk Domestic Abuse (HRDA) response was embedded in the Multi-Agency Children’s Safeguarding Hub (MASH).
 - A number of programmes work with children to help them to recover from the adverse effects of being exposed to parental domestic abuse – DART (7-14 year olds) & Surestart Special (Under 5’s).
 - DART, led & coordinated by IDVA, together with Women’s Aid & SCC family support workers, is designed to build positive mother and child relationships – thus helping to stop inter-generational abuse, promote positive family relationships and to prevent escalation in safeguarding.
 - Surestart Special is a unique joint project with Southampton’s Women’s Aid and Southampton Sure Start Children’s Centres funded by Children in Need. It is a new project for children who have been exposed to parental domestic violence and abuse. It is an early intervention programme for both children aged 3 or 4 years and their mother/carer.
 - Young perpetrators – The Youth Offending Service use Asset Plus assessment tool which includes consideration of domestic abuse in families.
 - Training is being delivered to staff, working cross sector, inclusive of voluntary and community sector agencies, working in Children’s, Health, Housing, Community Safety or Adult Services on restorative practices, Adverse Childhood Experiences (ACE’s) and trauma.
 - This suite of training supports a Pan Hampshire ambition to create a ‘whole system approach’ that supports our workforce to work restoratively with children, families and vulnerable adults; at the same time as having a greater awareness and understanding of the impact of Adverse Childhood Experience, trauma and the effects of parental conflict.
 - Investment is being put into the extended locality model. Upskilling staff that work in the community delivering early intervention / early

help services to capture and engage at an early stage on issues such as domestic abuse, mental health and substance abuse.

- Engagement by perpetrators is hit and miss. Engaging with them early is challenging. It often requires the intervention of the Police or courts before perpetrators engage.
- There is a need for additional resources in perpetrator services. The provision is good but minimal at present.
- Would welcome Hampton Trust being embedded within the HRDA to help improve engagement with perpetrators.

Grace Grove – Public Health Registrar, SCC

- A presentation outlining the findings from a literature review of effective practice in preventing people from becoming future perpetrators of domestic abuse was delivered by Grace Grove.
- In addition to the points raised in the presentation, Grace made the following key points:
 - A full needs assessment for domestic abuse is being undertaken. A draft will be ready for September 2019.
 - Evidence is limited but developing with regards to the effectiveness of perpetrator services and actions that reduce domestic abuse. No Public Health return on investment statistics exist in this area.
 - Risk factors for intimate partner violence were identified.
 - Prevention activity was classified into three areas: Primary- preventing someone from ever perpetrating; Secondary- intervening after first occurrence to stop it happening again and minimising the harm to others; Tertiary – stopping serial perpetrators from continuing to perpetrate and minimising the harm to others.
 - A summary of effective practice, given the limited evidence base, against each of the three stages was provided. Agreement on key approaches, these include approaches that consider:
 - Whole system (risk factors)
 - Life course (opportunities to intervene at key stages)
 - Universal primary prevention
 - Targeting the risk factors can help to prevent people from becoming perpetrators. Recognition that improving work with perpetrators will help to reduce domestic abuse, but to significantly decrease risk there is a need to work at a whole population level.
 - There is a need to consider our relationship with risk factors (including alcohol and mental health) and to change culture in society away from unhealthy and abusive values, attitudes and behaviours and to encourage increased stigma against those associated with perpetrator behaviours. Key role for Public Health.

Mark Pirnie – Scrutiny Manager, SCC

- A presentation summarising the key elements of the draft Domestic Abuse Bill was presented to the Panel.

- It was recognised that, whilst the draft Bill is predominantly victim focussed, each section of the draft Bill provides opportunities to reduce domestic abuse in Southampton.
- The draft Bill includes a commitment to introduce regulations and statutory guidance for schools to educate young people on relationships. In primary schools the Government wants to equip children with the foundations for healthy respectful relationships and in secondary schools the Government proposes the teaching of young people about healthy intimate relationships, sexual exploitation, consent and domestic abuse.
- The draft Bill includes ambitions to raise public awareness of abuse; to challenge the social attitudes that allow domestic abuse to occur; to work with partners to review, evaluate and understand current communication activities, which will help inform future communications; and to work to tackle harmful gender norms.
- The draft Bill includes reference to a number of reviews to be conducted, including research into the links between domestic abuse and substance misuse, alcohol and mental health.
- Additional resources have been identified to deliver specific initiatives. The Bill presents an opportunity for Southampton to work with Government.

Sandra Jerrim – Senior Commissioner, Integrated Commissioning Unit

- A presentation was delivered on substance misuse and mental health pathways in Southampton.
- Both Substance Misuse and Mental Health Services have strong awareness of the issue of domestic and sexual abuse and the referral routes for survivor services supporting victims of domestic abuse. Limited awareness exists of perpetrator services and pathways.
- There is a need to raise awareness and knowledge about perpetrator services and the referral routes from these service providers.
- The presentation also included an evaluation against Respect’s good practice criteria. There is a recognition that Southampton has a strong suite of survivor services and that perpetrator services compare favourably against any other city in the UK. However, there is a need to get perpetrators engaged with behaviour change services as early as possible and to drive up demand for these services.

Conclusions from meeting:

- Investment is being put into the extended locality model within Children and Families Services. Upskilling staff that work in the community delivering early intervention / early help services to capture and engage at an early stage.
- Need to raise awareness of perpetrator services and referral pathways by substance misuse services and mental health services.
- There is awareness of the risk factors for domestic abuse. Targeting the risk factors can help to prevent people from becoming perpetrators.
- There is a need to consider our relationship with risk factors, to change culture in society away from unhealthy and abusive values, attitudes and

behaviours and to encourage increased stigma against those associated with perpetrator behaviours.

- Recognition that Southampton has a strong suite of survivor services and that perpetrator services compare favourably against any other city in the UK. There is a need to increase awareness and referrals to the behaviour change perpetrator programmes.
- The draft Domestic Abuse Bill presents an opportunity for Southampton to work with Government and to develop the evidence base to help inform decisions.

Appendix 4 – What should every good local authority area have in place to reduce incidents of domestic abuse?

Extract from the presentation to the Inquiry Panel from Sara Kirkpatrick, Respect's Research & Services Development Manager, supported by inserts from the Respect response to the Transforming the Response to Domestic Abuse Bill consultation.¹¹

To reduce incidents of domestic abuse every local authority should have in place:

- **Coordinated multi-agency approach which includes statutory and specialist services**

One of the key Respect principles for any response to perpetrators is 'the system counts - domestic violence and abuse cannot be addressed by one agency alone and work with perpetrators should never take place in isolation.' Every area should have local multiagency arrangements such as the MATAC approach currently being trialled in Northumbria, bringing together all agencies – public sector, voluntary sector and private sector – who have contact with perpetrators to agree an action plan to address their behaviour and its impacts, and to reduce future harm.

- **Early intervention**

Every community should aim to address domestic abuse at the earliest possible opportunity when there is most chance of preventing abuse from escalating. This involves all agencies having processes for the identification of perpetrators, such as a 'recognise, respond, refer' model, and referral routes to a specialist organisation which can provide assessment and intervention. Change That Lasts is developing an innovative early intervention perpetrator response for pilot in Lincolnshire and Sussex.

- **Assessment of harm, capacity to change and need**

The diverse cohort of perpetrators described above don't all require the same response. Communities, commissioners and services will want to target the right intervention to the right individual, to ensure the most successful outcome in each case and guarantee that public money is spent wisely. An intervention for someone who is just beginning to be abusive, who recognises they have crossed a line and wants to stop before it gets worse, is very different to an intervention for a perpetrator who has been abusive for decades, is in denial about their behaviour and has no motivation to change. Assessment and triage processes are needed to ensure that each perpetrator gets the right response based on these 3 key factors:

1. Harm

2. Capacity to change

To what degree is the perpetrator ready, willing and able to change versus being entrenched in their behaviour, in denial and resistant to change?

The capacity to change is made up of a combination of factors, including:

¹¹ Respect. (2018). Respect Response to Domestic Abuse Bill 2018. Available at: <http://respect.uk.net/wp-content/uploads/2018/06/DA-bill-2018-Respect-response-final.pdf>

- motivation or willingness to change
- ability to learn and try new ways of relating to others
- resilience
- stake in conformity
- the social supports they have for change

Behaviour change programmes will need to be responsive to these factors and tailor both the intervention and its delivery to address them.

3. Need

Do the perpetrators have additional / complex need(s) which act as barriers to engagement with behaviour change programmes and contribute to the likelihood of a continuation of abusive behaviour? Perpetrators with poor mental health, drug and alcohol abuse, Post-Traumatic Stress Disorder (PTSD), homelessness and/or unemployment, debt may require additional support to stabilise their lives.

A range of assessment tools exist mainly covering risk and harm, including:

- 'Domestic Assault Stalking and Honour Based Violence' (DASH) Risk Indicator Checklist (RIC), developed by SafeLives to identify the risks victims face, used across England and Wales
- 'Domestic Violence Risk Identification Matrix' developed by Barnardos to identify the risk to children of male to female domestic violence, used in the UK within Barnardos settings

Respect is developing a comprehensive tool encompassing the 3 criteria of harm, capacity to change and need, to aid both specialist and frontline services.

- **A range of responses (Sustainable interventions based on evaluated models)**

Following assessment of harm, capacity to change and need, each local area needs a triage system to decide which response(s) are appropriate for each individual with access to a range of options including **intensive case management**, the **criminal justice system**, disruption activities, support for additional needs and **behaviour change programmes**.

- **Intensive case management**

Perpetrators causing high levels of harm, particularly those with additional or complex needs and/or those who are resistant to change require intensive case management, such as that provided by the Drive project currently being piloted in Sussex, Essex and South Wales.

- **Robust civil and criminal justice responses**

Key to the management of perpetrators and protection of survivors is an effective criminal justice system. High quality evidence gathering to ensure a successful prosecution where crimes have been committed is essential, as is appropriate sentencing and robust management of offenders.

- **Behaviour change programmes**

Perpetrator behaviour change is the best long-term solution to domestic abuse. For those ready, willing and able to change there is clear evidence from [Project] Mirabal research findings that Respect accredited programmes have a positive effect, particularly in reducing physical and sexual violence.

These programmes, sometimes called Domestic Violence Perpetrator Programmes (DVPPs), are delivered in a group work setting or on a one-to-one basis, according to need.

Every local community should have such a programme as a resource for agencies to refer to and for perpetrators themselves to get help directly.

- **Principles and standards accreditation / external quality assurance of services**

A community's approach to domestic abuse perpetrators should be underpinned by the principles set out in the Respect Standard.

- **Needs led Trauma informed approach for victims and survivors**

Sara Kirkpatrick's response has a focus on perpetrators. The presentation delivered at the 31 January 2019 meeting also referenced a number of initiatives that help to decrease incidents of intimate partner abuse.

- Culture / system challenging the conducive context
- Talk about equality- i.e. it's a long standing problem because Domestic Abuse is a symptom of Violence Against Women and Girls (VAWG)
- Swift consistent justice response
- Whole community response
- Routine enquiry - This involves asking all women at assessment about abuse regardless of whether there are any indicators or suspicions of abuse. It was established in maternity, sexual health, health visiting, substance misuse and mental health settings.
- Awareness raising campaigns
- Leadership

These in part reflect the key approaches that were associated with effectively preventing or reducing incidence of domestic abuse summarised by Public Health analysis:

- **Whole system approach** – A multi-agency response to domestic abuse
- **Life course approach** – Support for addressing the risk factors for domestic abuse across the life time of an individual
- **Universal primary prevention** - Approaches designed for an entire population without regard to individual risk factors. These include awareness campaigns and relationship education for young people.

Appendix 5 – Summary of Southampton Domestic Abuse Services & Programmes

Please reference the glossary for acronyms mentioned

Children & Youth Offender Services Referral	Perpetrator or Self Referral	Police & Court Probation Referral	Victim/Survivor Services Referral
<p>Youth Offender Service - Intervention with young perpetrators (10-18 years) subject to criminal orders or out of court disposals.</p> <p>DART – Intervention designed to build positive mother & child relationships.</p> <p>STAR Project - RSE, through interactive workshops to children aged from 11+</p> <p>LINX - Group work programme for children with a back drop of domestic abuse, exhibiting problematic behaviour. Only available at Regents Park College.</p> <p>Sure Start Special - Early intervention programme for children aged 3/4 years & their mother/carer to address the potentially lasting impact of parental domestic abuse.</p> <p>MASH – The point of contact for safeguarding concerns regarding children.</p>	<p>DVPP – Domestic Violence Perpetrator Programmes are either delivered by HIOW CRC, Hampshire Constabulary or Hampton Trust.</p> <p>DAPP - Provides a Hampshire wide approach to better identify, assess and provide interventions for perpetrators.</p> <p>MATAC (pilot) - A strategic and integrated partnership approach that tracks & disrupts high-risk and serial perpetrators of domestic abuse.</p>	<p>Project CARA - A DVPP for first-time offenders of domestic abuse who have received conditional cautioning by Hampshire Constabulary.</p> <p>BBR - A group work programme BY HIOW CRC aimed to reduce re-offending of medium-high risk offenders</p> <p>CSR - the sole 1:1 healthy relationship intervention for male Service Users with identified relationship difficulties by HIOW CRC.</p> <p>HELP – Early Intervention on healthy relationship for low-medium risk male service users with identified relationship difficulties by HIOW CRC.</p> <p>Operation Encompass - Police & education early information sharing partnership enabling schools to offer immediate support for children experiencing domestic abuse.</p>	<p>IDVA - the primary point of contact for victims and survivors and address and secure the safety of victims at high risk of harm.</p> <p>PIPPA Helpline</p> <p>Refuges – Provides a place of safety for women and children.</p> <p>MARAC - Meetings where agencies talk about the risk of future harm to people experiencing domestic abuse, and if necessary their children, and draw up an action plan to help manage that risk.</p> <p>Adult Therapeutic Services – Provides therapeutic support to survivors.</p> <p>IRIS - GP-based domestic violence and abuse (DVA) training support & referral programme.</p> <p>Family Therapy</p> <p>HRDA – Daily meeting of professionals from a variety of agencies to evaluate the safety and risk of those identified in High Risk cases.</p>

Appendix 6 – Summary of Findings

Good Practice Guidelines	What is happening in Southampton? (For project details refer to Appendix 5)	Weaknesses/Opportunities for Southampton	Recommendations
Co-ordinated Multi-Agency Approach, which includes statutory & specialist services	<ul style="list-style-type: none"> • DSA Strategy Group • DSA Operational Group • MATAC Pilot • Local Funding Group • PIPPA Alliance 	<ul style="list-style-type: none"> • Opportunity to improve esteem of perpetrator services and increase collaboration and co-location between services • Needs to have an increase in support and attendance from partners 	<ul style="list-style-type: none"> • It is recommended that Hampton Trust staff are collocated within key service areas for specified periods of time • It is recommended that if there is a positive evaluation of the MATAC pilot it is rolled out in Southampton to track and disrupt high risk and serial perpetrators in Southampton • It is recommended that the upcoming DSA Strategy is updated to reflect the Domestic Abuse Strategic Needs Assessment and the findings from this inquiry • It is recommended the Director of Public Health considers the role that Public Health can play in tackling domestic abuse when the new funding mandate for Public Health is agreed
Early Intervention	<ul style="list-style-type: none"> • STAR Project • Sure Start Special • DART • LINX • Youth Offending Services 	<ul style="list-style-type: none"> • Provision of primary prevention of domestic abuse needs to be expanded and widely implemented in the City 	<ul style="list-style-type: none"> • Raise awareness of, and increase referrals to perpetrator services
Assessment of harm, capacity to change & need of perpetrators	<ul style="list-style-type: none"> • DAPP does an assessment & triage process on perpetrators • DAPP recognised risk assessment tool • Range of DVPPs for perpetrators to act on capacity to change • Pathways between substance misuse & mental health services with perpetrator services - There are some good practice from substance misuse & mental health practitioners but this is very limited 	<ul style="list-style-type: none"> • Referrals to assessment process is low between victim to perpetrator services • In place but low levels of resources to adequately meet the demands for assessments • Greater awareness of perpetrator services and their effectiveness is needed to stimulate more assessments of perpetrators • There is no co-ordinated response between substance misuse and mental health services with perpetrator services 	<ul style="list-style-type: none"> • Raise awareness of, and increase referrals to perpetrator services • To ensure that consideration is given to the impact of Council proposals on the victims and perpetrators of domestic abuse it is recommended that they are included in the protected characteristics within Equality and Safety Impact Assessments

A Range of Responses - intensive case management	<ul style="list-style-type: none"> • Hampton Trust • HIOW CRC • Hampshire Constabulary • Children's Services • Victims Services • Voluntary Services 	<ul style="list-style-type: none"> • Lack of referrals to Perpetrator Services • Lack of engagement with non-engaging high-risk perpetrators 	<ul style="list-style-type: none"> • Raise awareness of, and increase referrals to, perpetrator services • To encourage the engagement of non-engaging high-risk perpetrators, it is recommended that Hampton Trust staff are collocated within key service areas for specified periods of time
A Range of Responses - Behaviour Change Programmes (DVPPs)	<ul style="list-style-type: none"> • 11% out of approximate £800,000 resources for domestic abuse goes towards perpetrator services (89% victim services) • DVPPs delivered by single point of contact & referral Hampton Trust, including the DAPP • Project CARA delivered by Hampshire Constabulary & Hampton Trust • HOW CRC delivers DVPPs for those in probation 	<ul style="list-style-type: none"> • Lack of referrals • Further resources needed to adequately meet the demand of DVPPs in the City • More external accreditation and further evaluations still needed • Disproportionate resources towards victim/survivor services compared to perpetrator services • Significant shortfall of resources to adequately address perpetrators as the cause of domestic abuse crimes & are a barrier to increased provision of perpetrator services 	<ul style="list-style-type: none"> • Raise awareness of, and increase referrals to, perpetrator services • It is recommended that additional resources are identified for commissioning perpetrator services
A Range of Responses – Robust civil & criminal justice response	<ul style="list-style-type: none"> • Southampton follows the national domestic abuse criminal justice response and procedures • Hampshire Constabulary, with Hampton Trust, delivers Project CARA • HIOW CRC provides various DVPPs as a form of criminal justice response for perpetrators on probation 	<ul style="list-style-type: none"> • BBR is under-utilised by the criminal justice process 	

<p>Principles & Standards Accreditation / External Quality Assurance Of Services</p>	<ul style="list-style-type: none"> • A number of perpetrator services are accredited, such as BBR, LINX (evaluated by Head Start), STAR Project (accredited & award winning by the EU), DAPP (evaluated by University of Southampton), Project CARA (nationally award winning by Howard League) • Hampton Trust is an accredited member of Respect • MATAAC is currently being evaluated 	<ul style="list-style-type: none"> • To establish accreditation and evaluation for all other services 	<ul style="list-style-type: none"> • MATAAC has been piloted in Southampton by Hampton Trust and Hampshire Constabulary. The current evaluation is expected to show positive results. If this transpires it is recommended the approach is rolled out in Southampton to improve the tracking and disruption of high risk and serial perpetrators in Southampton
<p>Needs led trauma informed approach for victims & survivors</p>	<ul style="list-style-type: none"> • Good ranges of services for victims and survivors, including PIPPA, IDVA/ISVA & Refuges 	<ul style="list-style-type: none"> • Shift the focus to ceasing the causes of crime – ‘Turning the tap off’. 	<ul style="list-style-type: none"> • It is recommendation that additional resources are identified for commissioning perpetrator services.
<p>* Some recommendations are repeated across sections</p>			

Good Practice Guidelines	What is happening in Southampton?	Weaknesses/Opportunities for Southampton	Recommendations
Universal Primary Prevention: Culture Change	<ul style="list-style-type: none"> White Ribbon Day stigmatising VAWG is already implemented Good awareness campaigns around DA Survivors but there is a lack of focus on perpetrators Domestic Abuse Scrutiny Inquiry Panel has brought profile on addressing perpetrators of domestic abuse RSE is currently taught in schools, e.g. via the STAR Project by Yellow Door 	<ul style="list-style-type: none"> Lack of public awareness raising (and therefore action) on identification, referral and intervention of perpetrators. Proposals from DV Bill for compulsory RSE in primary and secondary schools in the UK 	<ul style="list-style-type: none"> It is recommended that the Council undertakes a communication campaign that seeks to stigmatise abusive behaviours Support schools, as required, to deliver the requirements on relationship education, sexual education, and health education in primary and secondary skills
Whole System Approach: Addressing Adverse Childhood Experiences	<ul style="list-style-type: none"> DART, Sure Start Special, Family Therapy, LINX etc. is available in Southampton Services in Southampton are increasingly getting trained in developing trauma-informed approaches 	<ul style="list-style-type: none"> There is a recognised need to address ACE but requires large scoping, resourcing & implementation 	<ul style="list-style-type: none"> To establish a Council-wide approach towards adverse childhood experience beyond the scope of this inquiry
Whole System & Life Course Approach: Routine Enquiry	<ul style="list-style-type: none"> In place for victims/survivors via GPs, midwives, health visitors and new pathfinders in mental health across their life course 	<ul style="list-style-type: none"> There is no routine practice or enquiry for practitioners to detect perpetrators and refer them to perpetrator services 	<ul style="list-style-type: none"> Introduce routine enquiries for perpetrators, during their life course, to improve identification and provides opportunities for early intervention
Evidence Based Decision Making	<ul style="list-style-type: none"> Emerging, but limited, evidence base on the effectiveness of interventions and initiatives, including perpetrator services 	<ul style="list-style-type: none"> The Government DV Bill references to a number of reviews to be conducted nationally as a part of the evidence-based decision making process 	<ul style="list-style-type: none"> For Public Health to work with others to develop a return on investment for perpetrator services to help support future funding decisions made by the Council and partners To develop the evidence base it is recommended that the DSA strategic group receives and considers appropriate research and evaluations from across the UK and combines this with regular analysis of perpetrator services in Southampton to develop understanding about what services and initiatives are most effective and to inform future commissioning intentions.