

**Children affected by Domestic Abuse
(Supplement to Domestic Abuse Needs
Assessment)**

Public Health

www.hants.gov.uk

Version Control

Version	Edited by:	Changes	Date
Draft Version No			
Final Version	J Bowers		18 th September 18
Draft Version			
Draft Version			
Draft version			

Table of Contents

Who are the population of children in Hampshire affected/impacted by Domestic Abuse?	4
Introduction	4
Background	4
Impact on Children	6
Who are the population of children affected by domestic abuse?	6
Scope of the problem	7
Figure 1: Children known to Hampshire Children’s Services who are affected by Domestic Abuse?	9
Data from Children in Need (Children’s Services data Nov 2016)	9
Figure 2: Children known to Hampshire Children’s Services who are affected by Domestic Abuse?	10
Data from Children in Need – those on a Child Protection Plan (Children’s Services data Nov ‘16)	10
Figure 3: Who are the known population of children affected/impacted by domestic abuse (2015/16)?	11
Summary	12
Issues for consideration	12
Next steps	12
References	13

Who are the population of children in Hampshire affected/impacted by Domestic Abuse?

Introduction

Domestic violence and abuse is a significant public health problem which can affect people from any background, at any age. Its' effects are serious and can be long-lasting, impacting the physical and mental health of victims and, very commonly, their children. Exposure to domestic violence and abuse is the most frequently reported form of trauma for children¹ and is recognised as a matter for concern in its own right by both government and key children's services agencies.

It has been estimated that 62% of children in households where domestic abuse is happening are also directly harmed². It is often experienced alongside other forms of maltreatment, such as child abuse and neglect³, further contributing to the risk of the children developing emotional and behavioural difficulties. Importantly, there is also considerable evidence to suggest that adverse childhood experiences, including being exposed to domestic violence and abuse, lead not only to higher rates of 'health harming behaviour' as adults such as drug and alcohol misuse, smoking and poor diet⁴; but also to a higher risk of being an adolescent⁵ and/or adult perpetrator or victim of violence, including intimate partner violence⁶. Childhood exposure to inter-parental violence specifically, has been linked to increased risk of adult depression, alcohol dependence, intimate partner violence and child maltreatment⁷. Thus, domestic abuse does not stop with the primary victim – its effects on children contribute to an inter-generational perpetuation of violence, abuse, and poor health.

Background

In 2013 the Government introduced a new definition of domestic violence and abuse.

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 sexuality.

This definition was renamed to reflect the broader behaviours of control and coercion. It was extended at the same time to include teenagers aged 16-17. The definition also covers so-called 'honour' based violence (HBV) such as female genital mutilation (FGM) and forced marriage, and some forms of elder abuse. Hampshire uses the term domestic abuse as this more accurately reflects our multi-agency understanding of the number and extent of abusive behaviours beyond violence.

The abuse can encompass, but is not limited to:

- 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. It also covers issues such as forced marriage, female genital mutilation and so-called 'honour violence'⁸.

With the advent of social networking and smartphones, abuse and control may also occur through social media. It is likely that a victim experiences a combination of several types of abuse as a repetitive and escalating cycle. Domestic abuse is a dominant factor in many families facing complex problems and can be a trigger for or a result of co-existing substance misuse and mental ill-health.

Domestic abuse is not an act of anger. It is always a deliberate, manipulative and controlled act, about domination, power and control. Because it encompasses a number of different behaviours and consequences, there is no single criminal offence of domestic abuse, and not all acts of domestic abuse are criminal. However, where abuse is a crime, such as harassment, stalking, rape, assault, criminal damage, attempted murder and false imprisonment, there is a criminal justice framework surrounding it; there are also civil laws, preventative and early intervention programmes to tackle domestic abuse. Being subjected to sexual abuse, assault, threats and harassment by a partner or family member is as much a crime as violence from a stranger and is frequently more dangerous.

Domestic abuse can affect people of any age, race, religion, gender, sexual orientation and income bracket, as survivors, victims or perpetrators. However, domestic abuse is commonly a gendered issue with women most likely to be affected as victims and survivors of male perpetrators. Because domestic abuse crosses many social barriers, there will be individuals who are survivors, victims and perpetrators who are not necessarily known to local statutory services and are therefore difficult to reach. National estimates from Crime survey reports suggest that 7.7% of women and 4.4% of men have experienced domestic abuse in the year to March 2016⁹; the majority of victims of domestic abuse, as measured by the Crime Survey, will not report their experiences to the police and therefore understanding the true extent of Domestic Abuse is complex and involves estimates from a number of data sets.

National research has found that 12% of under 11s, 18% of 11-17s and 24% of 18-24s had been exposed to domestic abuse between adults in their homes during childhood¹⁰; given Hampshire's population size applying the national research proportions would suggest that the number of young people exposed to domestic abused locally may be large.

In 2014 the Chief Medical Officer (CMO) identified that *"Domestic violence is a major public health issue worldwide, and may account for up to 7% of the overall burden of disease in women, largely as a result of its impact on mental illness"*.

"Six percent of participants in the Crime Survey for England and Wales report past year domestic violence (where most victims, particularly of repeated or severe domestic violence are women). Therefore, by extrapolation, in 2012 around 1.2 million women suffered

domestic abuse, over 400,000 women were sexually assaulted, 70,000 women were raped and thousands more were stalked.”

In addition, the CMO identified that being a victim of sexual or domestic violence in adulthood is associated with the onset and persistence of depression, anxiety, eating disorders, substance misuse disorders, psychotic disorders and suicide attempts¹¹.

Impact on Children

The impact of all domestic abuse is harmful to children; this is the start of a piece of work to understand the population of children affected by domestic abuse.

According to a NSPCC study, nationally 12% of under 11s, 18% of 11-17s and 24% of 18-24s had been exposed to domestic abuse between adults in their homes during childhood¹⁰. Adult males were the perpetrators in 94% of cases where one parent had physically abused another¹⁰. National evidence suggests that domestic abuse affects young carers, as 31% of families supported by the Young Carer Pathfinders identified an issue of domestic abuse¹².

Needs of children and young people are often due to witnessing abuse, and these needs can last into adulthood. Children’s experiences of domestic abuse are more than a child protection issue, with research indicating there are implications for education, health, welfare, civil and criminal justice. Witnessing domestic abuse as a child is associated with adulthood reports of depression and low self-esteem, and becoming either a victim or a perpetrator of domestic abuse as an adult¹³.

Statistics also indicate that domestic abuse between parents and carers in the home is something that girls are more likely to have noticed than boys¹⁴. This could indicate a need for targeted domestic abuse education for boys so that they are better equipped to identify and name what is happening at home.

The mental health of a mother suffering domestic abuse is the most significant determinant of her child’s resilience¹³. At a young age children may experience sleep disturbance, temper tantrums and delayed development as a result of abuse suffered or witnessed. Older children may develop behavioural disorders, suffer poor concentration or find it difficult to socialise with peers. Adolescents may suffer from delinquency, aggressive behaviour, depression and other mental health disorders. Parental substance misuse and mental ill health can have a significant impact upon the health and well-being of children and young people and where one or both of these co-exist alongside domestic abuse the short and long term risks to the child increases¹³. There is also a significant risk of children who are victims of domestic abuse or affected by domestic abuse becoming perpetrators.

Who are the population of children affected by domestic abuse?

There is no definitive data set that identifies all of our resident children who have been affected by domestic abuse. However there are a number of data sets available that can be used to estimate the prevalence (or scope) of children affected by domestic abuse. These include; Children Services, crime figures, Multi-Agency Risk Assessment Conferences

(MARAC¹), Service level data (for Domestic Abuse and Substance Misuse Data), Troubled Families and Family Intervention Team, Health Services, and Probation

In Hampshire, up to 18th November 2016, a total of 1,146 children were reported as either living with or have lived with Domestic Abuse. To make a meaningful comparison between different data sources, using 2015/16 as the comparator year; up to the end of March 2016, there were 511 children under 19 years reported as either living with or have lived with domestic abuse.

From crime data for domestic incidents, in 2015/16, there were a total of 450 victims aged 16-18 years. However, this doesn't include the number of children less than 16 who may be witness to or affected by domestic abuse. Crime data also only reflects about 50% of the number of cases that the Police are called out to or informed of. This means that domestic abuse is under-reported, and therefore we would anticipate a larger need within the child population than these figures suggest. In addition there is growing evidence¹⁵ that children who are victims of domestic abuse are at risk of becoming perpetrators. From crime data for domestic incidents, in 2015/16, there were a total of 130 offenders aged 16-18 years.

Another source of data on the impact of domestic abuse is the Serious Case Reviews (SCR) undertaken by the Local Childrens Safeguarding Board. SCR's are convened when a child dies (including death by suicide) or suffer significant harm, and abuse or neglect is known or suspected to be a factor. In Hampshire, domestic abuse has been a factor (direct or indirect) in 7 out of 9 SCRs since 2012. The national Triennial review of Serious Case Reviews¹⁶ found that domestic abuse was a feature in nearly all the cases of overt filicide. In some cases this was overt violence, with multiple, often severe episodes of physical violence recorded. However, this was not always present, nor always of a degree sufficient to raise the level of concern attributed by professionals, so that the true impact of domestic abuse in SCRs is sometimes difficult to ascertain.

Scope of the problem

The following figures (1-3) visually present the data we currently have as a starting point in attempting to pull all of the data sources together to identify the population of children who are affected by domestic abuse.

Figures one and two demonstrate the level of known domestic abuse for children who are defined as Children in Need (up to 18th November 2016) Figure one shows within the population of Children in Need (9,680) 1,146 have lived with or are living with domestic abuse (although domestic abuse may not be recorded as the primary need. The pie chart shows the breakdown of primary need for this cohort of children. The discrepancy between the number of Children recorded with a primary need of domestic abuse and those living with or lived with domestic abuse is related to the recording of older active cases. These older cases, have been excluded from the dataset of children who have lived with or are

¹ In a single meeting, a domestic abuse Multi Agency Risk Assessment Conference (MARAC) combines up-to-date risk information, provided by a wide range of attending agencies, with a comprehensive assessment of a victim's needs and links those directly to the provision of appropriate services for all those involved in a domestic abuse case: victim, children and perpetrator.

living with domestic abuse, because there has been significant time elapsed from the original assessment and assessment.

Figure two is a subset of the Children in Need data, focusing on Children with a Child Protection plan with regard to domestic abuse

Figures 3a and 3b explore the correlation between children who have lived with or are living with domestic abuse and area deprivation. While there is clearly a link between domestic abuse and income deprivation (Figure 3a) as there are higher rates in deprived areas, income deprivation only accounts for about 10% of the variation in rates by LSOA seen in this group of children (Figure 3b).

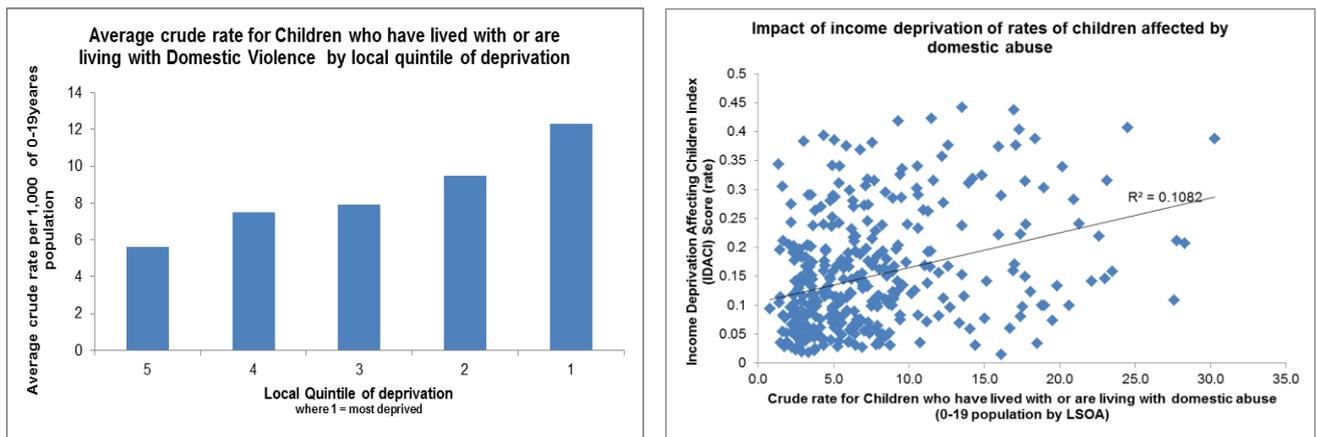


Figure four pulls together the Children's Services data and data sets from other sources including crime data, MARAC data, and service level data (where we have figures) and highlights other potential data sources where we have gaps. In order to do a meaningful comparison this data covers 2015/16 and focuses on children under 19 years. However although Figure 3 shows potential sources of data that would help to understand the scope (and also highlights some of the gaps), it is not clear how many children known to Hampshire's Children Services are also shown within the crime or the services data sources.

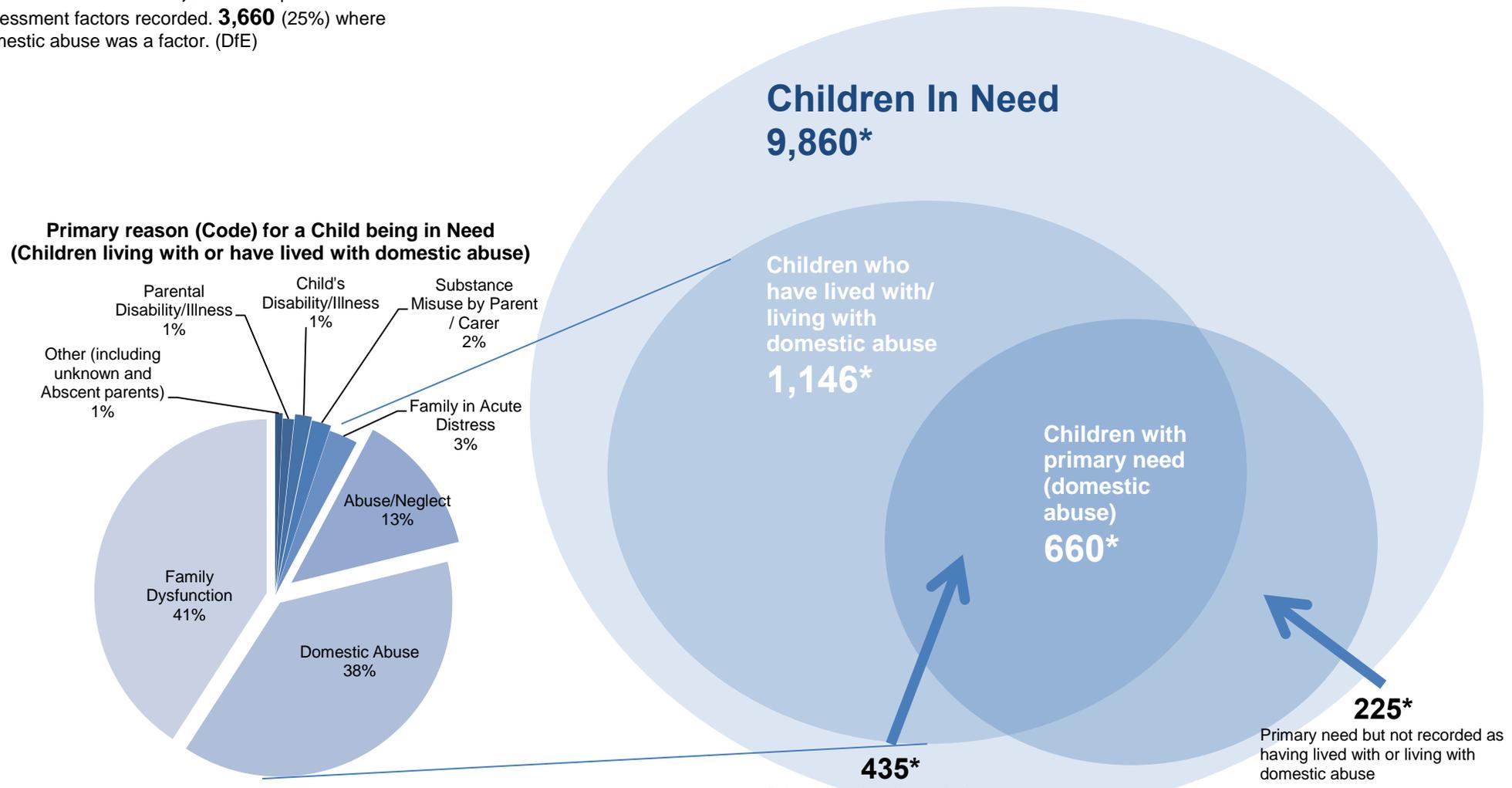
Figure 1

Figure 1: Children known to Hampshire Children’s Services who are affected by Domestic Abuse?

Data from Children in Need (Children’s Services data Nov 2016)

For Children in Need

In 2015/16 there were **14,589** new episodes with assessment factors recorded. **3,660** (25%) where domestic abuse was a factor. (DfE)



* Active cases 18/11/2016

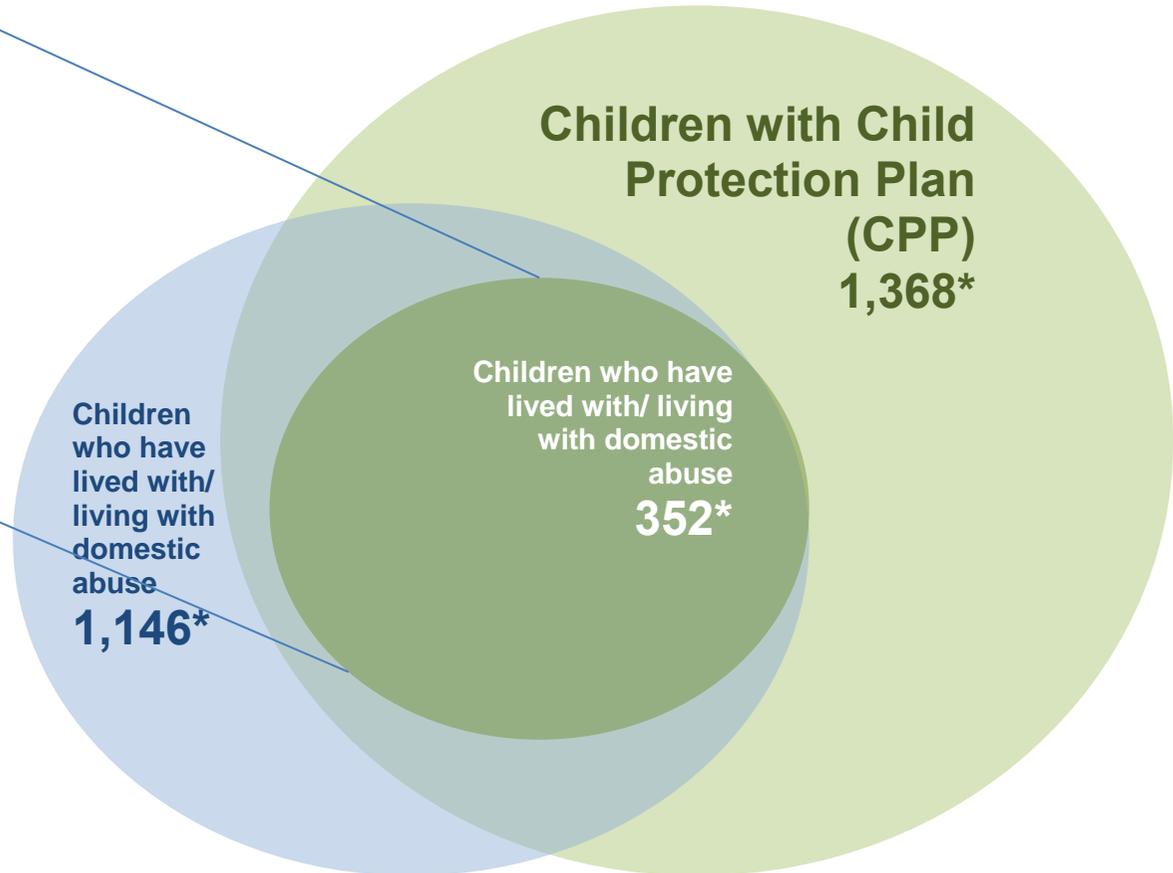
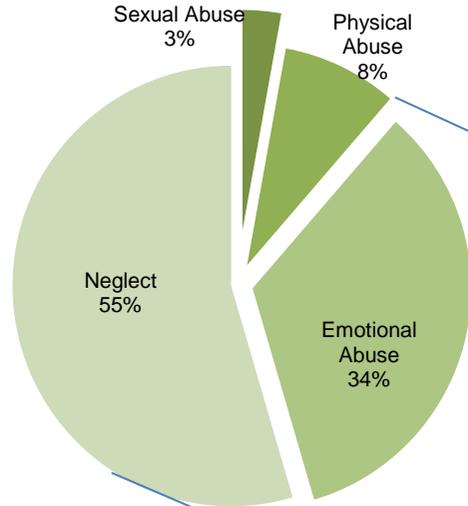
This difference is related to the recording of older active cases – older cases that are still active have been excluded from the dataset of children who have lived with or are living with domestic abuse, where there has been significant time elapsed from the original assessment and that domestic abuse is unlikely to be a factor now

Figure 2

Figure 2: Children known to Hampshire Children's Services who are affected by Domestic Abuse?

Data from Children in Need – those on a Child Protection Plan (Children's Services data Nov '16)

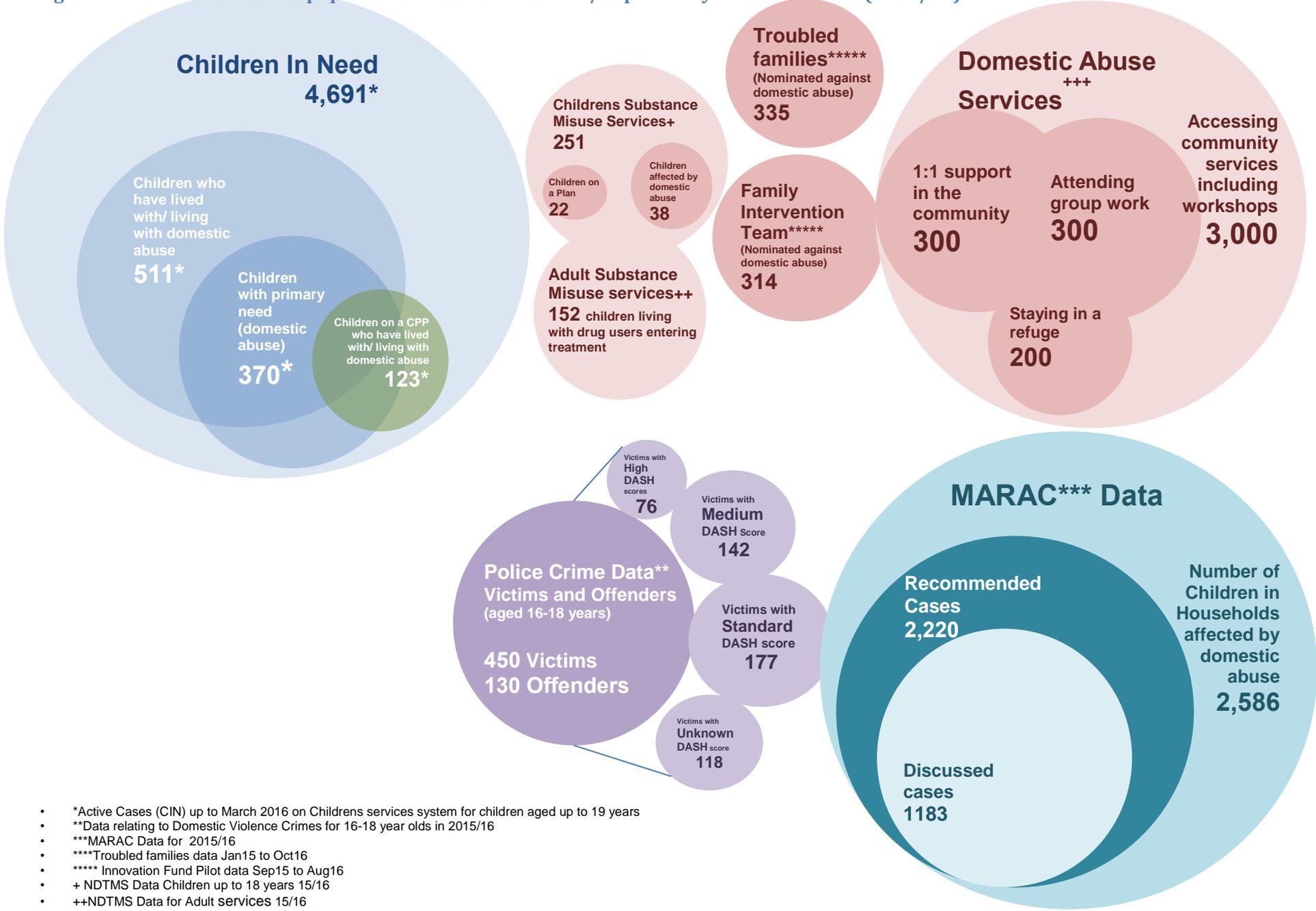
Primary reason for a CPP
(children living with or lived with domestic abuse)



* Active cases 18/11/2016

Figure 3

Figure 3: Who are the known population of children affected/impacted by domestic abuse (2015/16)?



- *Active Cases (CIN) up to March 2016 on Childrens services system for children aged up to 19 years
- **Data relating to Domestic Violence Crimes for 16-18 year olds in 2015/16
- ***MARAC Data for 2015/16
- ****Troubled families data Jan15 to Oct16
- ***** Innovation Fund Pilot data Sep15 to Aug16
- + NDTMS Data Children up to 18 years 15/16
- ++NDTMS Data for Adult services 15/16
- +++ Domestic Abuse Services data 2015/16 – estimated figures

Summary

Children and young people of any age are affected by domestic violence and abuse. It can have a devastating impact affecting their health, well being and development including educational attainment.

The key messages and implications identified within this JSNA summary document should be used to inform local strategy and corresponding action plan for commissioners and providers to deliver.

Multi-agency partnership working at both an operational and strategic level is the most effective approach for addressing domestic violence and abuse¹⁷. This approach is evident in Hampshire however there are challenges with sharing data and collation across the system, causing gaps in our knowledge.

Issues for consideration

There are significant gaps in our knowledge, particularly from Health Services, and the quality of data maybe variable depending on the source. However, the key problem is that the datasets from different partners aren't linked and therefore there is no way of knowing what the overlap is or isn't between different datasets (i.e. the absolute number of children impacted by domestic abuse). Exploring the possibility of sharing data sources using a unique identifier has started with Health and Childrens services using the NHS number. Being able to link some data sets (with the right safeguards) would give a greater clarity in understanding the scope of the problem in Hampshire.

The Joint Targeted Area Inspection of the multi-agency response to abuse and neglect highlighted some areas of strength but also for improvement. One of the key suggestions was how quality of data collected from a number of services particularly health could be improved and how the partnership might use this data to understand the far reaching affects domestic abuse in Hampshire.

Next steps

As part of the service commissioning process, Hampshire County Council has conducted a needs assessment on domestic violence and abuse and this should also be read in conjunction with this report¹⁸. This aims to describe the current levels and patterns of need among those affected by domestic violence, including children, and to map our current service provision. This will help in understanding the reach of current services for children, and to estimate the extent of any unmet need.

References

- ¹ Meltzer H, Doos L, Vostanis P et al. (2009) The mental health of children who witness domestic violence. *Child and Family Social Work* 14: 491–501
- ² Caada (2014), *In Plain Sight: Effective help for children exposed to domestic abuse*. Bristol: Caada
- ³ Lamers-Winkelmann F, Willemen A, Visser M 'Adverse Childhood Experiences of referred children exposed to Intimate Partner Violence: Consequences for their Wellbeing' *Child Abuse & neglect* 36 (2012) 166-179
- ⁴ Bellis, MA, Hughes, K, Leckenby, N et al 'National household survey of adverse childhood experiences and their relationship with resilience to health-harming behaviours in England' *BMC Medicine* 2014, 12:72
- ⁵ Miller E, Breslau J, Chung W-J G et al 'Adverse childhood experiences and risk of physical violence in adult dating relationships' *J Epidemiology & Community Health* 2011; 65: 1006-1013
- ⁶ <https://www.gov.uk/domestic-violence-and-abuse>
- ⁷ Roustit C, Renahy E, Guernec G et al 'Exposure to inter-parental violence and psychosocial maladjustment in the adult life-course: advocacy for early prevention' *Journal of Epidemiology and Community Health*, v 63 n 7 pp563-568
- ⁸ <https://www.gov.uk/domestic-violence-and-abuse>
- ⁹ Office for National Statistics (ONS)
<https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/bulletins/domesticabuseinenglandandwales/yearendingmarch2016#prevalence-of-domestic-abuse-from-the-crime-survey-for-england-and-wales>
- ¹⁰ Radford, L., Corral, S., Bradley, C., Fisher, H., Bassett, C., Howat, N., and Collishaw, S. (2011) *Child Abuse and Neglect in the UK Today*. London: NSPCC. Available at:
http://www.nspcc.org.uk/Inform/research/findings/child_abuse_neglect_research_PDF_wdf84181.pdf
- ¹¹ CMO Report. Available at
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/413196/CMO_web_doc.pdf
- ¹² Department for Education (2011) *Turning Around the Lives of Families with Multiple Problems - An Evaluation of the Family and Young Carer Pathfinders Programme*. London: University of London. Available at:
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/182428/DFE-RR154.pdf.
- ¹³ Stanley, N., (2011) *Children Experiencing Domestic Violence: A Research Review*. Totnes: Research in Practice
- ¹⁴ Fox, C. L., Corr, M-L., Gadd, D., and Butler, I. (2013) *From Boys to Men: Phase One Findings*. Manchester: University of Manchester, Economic and Social Research Council, Keele University and the University of Bath. Available at: <http://www.boystomenproject.com/wp-content/uploads/2012/12/Phase-1-Key-Findings.pdf> .
- ¹⁵ http://www.euro.who.int/_data/assets/pdf_file/0008/98783/E90619.pdf
- ¹⁶
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/533826/Triennial_Analysis_of_SC_Rs_2011-2014_-_Pathways_to_harm_and_protection.pdf
- ¹⁷ NICE Domestic violence and abuse. QS116
- ¹⁸ <https://www.hants.gov.uk/socialcareandhealth/publichealth/jsna/livingwellsummary#step-5>