

**MANCHESTER CITY COUNCIL
REPORT FOR INFORMATION**

COMMITTEE: SOCIAL STRATEGY OVERVIEW & SCRUTINY COMMITTEE

DATE: 6 September 2006

SUBJECT: Manchester Domestic Abuse Strategy 2006-07

REPORT OF: Caroline Marsh – Director of Adult Social Care
Neighborhood Services

PURPOSE OF REPORT

The purpose of this report is:

- To ask elected members to comment on the Manchester Domestic Abuse Strategy 2006-07
- To provide an update on progress of the Domestic Abuse Strategy, and key deliverables in the rest of the year

Background

1. Domestic abuse leads to extremely poor outcomes for victims across a whole range of outcomes, including health, mental health, alcohol use, homelessness and in extreme cases, murder. Children who witness domestic abuse are also badly affected by that experience. Research has identified several critical risk factors, and identified weaknesses in the way that public agencies deal with domestic abuse. The factors which indicate an increased risk are: being a woman; previous domestic abuse; separation from a partner; substance misuse; and pregnancy.
2. In response to the significant level of domestic abuse in the city, the Manchester Domestic Abuse Strategy 2006-07 has been developed by the Domestic Abuse Management Group, a multi-agency group chaired by the Director of Adult Social Care, with representation from Greater Manchester Police, Health, the voluntary sector, and the Crime and Disorder, Housing, Social Care, and Children's departments in the City Council. The strategy is based on the Government's overall framework for addressing domestic abuse¹.
3. The strategy is deliberately aspirational and couched in terms of objectives and goals. The objectives we want to achieve and the priority actions for 2006-07 are set out in three main sections:
 - Accommodation and Support Services for Adult Survivors of Domestic Abuse
 - Services for Children and Young People Affected by Domestic Abuse
 - Civil and Criminal Justice Issues
4. There are also detailed action plans for each of these sections which set out how public agencies will seek to prevent and identify domestic abuse on the basis of known risk factors; and to improve the way that domestic abuse is currently dealt with, both in

¹ as described in Safety and Justice 2003

terms of supporting victims and dealing with perpetrators. The action plans (attached as annexes) have SMART objectives, and are project managed.

Priorities for action and progress to date

5. There has been significant progress this year (since the last report to Social Strategy Committee). A key achievement has been the completion of the Strategy Document, after intensive consultation with stakeholders, practitioners and service users.
6. In parallel, Manchester has implemented a range of services to help and support those at risk from domestic violence. Of particular note:
 - Multi Agency Risk Assessment Conferences (MARACs), which consider serious cases, were established in January this year. These now deal with 15-20 new cases a month, and are chaired by the police, with key agencies present;
 - Convictions for domestic abuse offences are up over last 12 months: from 173 in May 05 to 248 in May 06;
 - A Sanctuary Scheme was established by the Housing Dept, which enables victims to stay in their own home once adapted with extra security measures;
 - Health staff have been trained to conduct routine DV enquiries, for example during midwife visits (30% of domestic abuse begins during pregnancy);
 - The courts have agreed to the establishment of a Domestic Violence magistrates' court, from January 2007.
7. The Home Office's taskforce on Tackling Violent Crime Programme visited Manchester on 3 August to check our progress on the domestic abuse strategy. They were very favourably impressed by our success to date and by our demonstration of partnership – and thanks are due to all those who contributed to and attended the visit. They commented: *The taskforce were unanimous in their view that the developments within Manchester in relation to their structured approach to domestic violence were impressive. From a context of enormous scale and confused service provision and a lack of coherent strategic partnership working, has come a truly unified approach.*
8. Further details of progress on Manchester's 2006-07 priorities for domestic abuse are set out in annex A. This progress is evidenced by our progress against the Home Office performance indicator (BVPI 225) – see annex B.

Governance and funding

9. The Manchester Domestic Abuse Management Group² is responsible for strategically leading the domestic abuse prevention agenda in Manchester, reporting to the Crime and Disorder Reduction Partnership. The Management Group co-ordinates delivery through sub-groups, each responsible for delivering part of the strategy.
10. Services for those suffering domestic abuse are funded out of a mixture of mainstream services and a number of pots of short term (often less than one year) funding, including the Neighbourhood Renewal Fund and the Home Office's Tackling Violent Crime Programme.

² The DAMG is a multi-agency group chaired by the Director of Adult Social Care, with representation from Greater Manchester Police, Health, the voluntary sector (Women's Aid and the Community Safety Network), and the Crime and Disorder, Housing, Social Care, Children's departments in the City Council.

Issues and challenges ahead

11. The biggest challenge is the move from strategic design to implementation. This is a big agenda, requiring serious partnership working from multiple agencies, in order to deliver significant services (such as a system of Independent Domestic Violence Advocates, and the new Domestic Violence Courts) to ambitious deadlines. This will require the senior leadership group (the Domestic Abuse Management Group) to commit resources from their services, manage performance carefully, and provide support to those making it happen on the ground. We are seeking to recruit a DV coordinator as soon as possible to drive this forward.
12. Short term funding – aggravated by allocation of funding mid-way through the financial year - is a particular problem as we move into the implementation phase. While we have been able to use such windfalls to fund research exercises or training in the past, it presents a problem when it comes to service delivery.

Attachments

The Manchester Domestic Abuse Strategy 2006-07.

Annex A: details of progress on Manchester's 2006-07 priorities for domestic abuse

Annex B: progress against the Home Office performance indicator (BVPI 225)

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This draft 15 August 2006

MANCHESTER DOMESTIC ABUSE STRATEGY: PRIORITY ACTIONS 2006-07

	Priority Actions	Progress to date	Rest of 06-07
1	Introduce routine enquiry for domestic abuse into all NHS services and learn lessons about how this can be applied in other services	<ul style="list-style-type: none"> NHS policies in place Training for health staff to conduct routine DV enquiries Training started Midwifery highest priority 	<ul style="list-style-type: none"> Continued rollout
2	Put in place referral pathways for adult and child victims of domestic abuse to services that will provide them with support and protection	<ul style="list-style-type: none"> Child Safeguarding Board joined up with MARAC Directory of DA support services in place New procedures at Manchester Advice Forced Marriage guidelines and training for Health Workers 	<ul style="list-style-type: none"> Work with other agencies to identify cases Develop referral pathways both for adults and children Training Develop Safeguarding multi-agency protocol
3	Put in place more co-ordinated, consistent services for supporting and protecting adult and child victims of domestic abuse that better meet their needs	<ul style="list-style-type: none"> Sanctuary schemes in place since Jan Emergency accommodation places available Support from housing, social care and health workers Health established Vulnerable Baby project 	<ul style="list-style-type: none"> Develop Independent DV Advocacy model based on needs analysis, service mapping and best practice Training Future funding Education pack
4	Put in place a system to manage and carry out Multi Agency Risk Assessment Conferences for high risk domestic abuse cases	<ul style="list-style-type: none"> MARAC in place January 2006 Multi agency participation 15-20 new cases/month Common referral form across agencies 	<ul style="list-style-type: none"> Review to take place August 2006
5	Increase the arrest rate for domestic abuse cases	<ul style="list-style-type: none"> Introduction of DV champions on response teams. Enhanced DV training on support available to reluctant witnesses Incidents falling: 1448 in May 05 to 1166 in May 06 	<ul style="list-style-type: none"> 2nd phase of training planned Improve system for obtaining medical evidence
6	Increase the conviction rate for domestic abuse cases	<ul style="list-style-type: none"> Increased quality of evidence by introducing digital cameras to photograph injuries and damage Convictions up over last 12 months: 173 in May 05 to 248 in May 06 	
7	Put in place Specialist Domestic Violence Courts	<ul style="list-style-type: none"> Just agreed in principle 	<ul style="list-style-type: none"> Envisaged to begin January 07 Need Independent DV Advocates in place for courts
8	Identify repeat domestic abuse incidents that are reported to GMP and ensure that they are targeted	<ul style="list-style-type: none"> System in place for identifying repeat DV abuse incidents. Repeat incidents referred to MARAC 	<ul style="list-style-type: none"> Continue to progress via MARAC
9	Increase the Police use of support services for victims	<ul style="list-style-type: none"> Awareness day held March 2006 BME awareness day held May 2006. 	<ul style="list-style-type: none"> Support agencies to hold further awareness sessions for police about referral pathways and expertise on offer.

	Priority Actions	Progress to date	Rest of 06-07
10	Develop the Training, Communication and Awareness Raising section of the Domestic Abuse Strategy	<ul style="list-style-type: none"> • Leaflet on DV services produced • Website www.endthefear.co.uk 	<ul style="list-style-type: none"> • Raising public awareness
11	BME sub-group to ensure that the BME equality objectives outlined in this strategy are achieved and that actions are continuously informed by BME issues		<ul style="list-style-type: none"> • To coordinate with other groups • Conduct impact assessment

MANCHESTER CRIME AND DISORDER REDUCTION PARTNERSHIP

DOMESTIC VIOLENCE THEME GROUP

BEST VALUE PERFORMANCE INDICATOR 225 (2005-06)

The purpose of BVPI 225 is to assess the overall provision and effectiveness of local authority services designed to help victims of domestic violence and prevent further domestic violence.

<p align="center">Description</p> <p>The percentage of the following questions to which a local authority can answer 'yes' (To answer 'yes' the local authority must have fully achieved the goal described; it is not enough that the authority is working towards the goal)</p>	<p align="center">Progress – July 2006</p>	<p align="center">Actions to be taken</p>
<p>1. Has the local authority produced a directory of local services that can help victims of domestic violence?</p>	<p>Yes – available on the end the fear website. www.endthefear.co.uk</p>	
<p>2. Is there within the local authority area a minimum of one refuge place per ten thousand population?</p>	<p>Yes. We need 43.7 places to meet this indicator. We have 41 refuge places (provided by Women's Aid) and 475 temporary accommodation units (provided by MCC Housing Services.) This makes a total of 516 places..</p>	
<p>3. Does the local authority employ directly or fund a voluntary sector based domestic violence co-ordinator?</p>	<p>No.</p>	<p>Interviews took place on the 12th July. Did not appoint any of the candidates.</p>
<p>4. Has the local authority produced and adopted a multi-agency strategy to tackle domestic violence developed in partnership with other agencies?</p>	<p>Yes.</p>	<p>This is waiting to go through scrutiny process for approval</p>

5. Does the local authority support and facilitate a local multi-agency domestic violence forum that meets at least four times a year?	Yes. The Domestic Violence Management Group is part of the Crime and Disorder Partnership and is chaired by the director of adult services from Manchester City Council. It meets every month.	
6. Has the local authority developed an information sharing protocol and had it agreed between key statutory partners?	Yes. Overarching one that has been in existence since the foundation of the C&D partnership.	A domestic abuse strategy for Greater Manchester has been developed by our GMP force lead and is out in draft.
7. Has the local authority developed, launched and promoted a sanctuary type scheme to enable victims and their children to remain in their own home, where they choose to do so and where safety can be guaranteed?	Yes.	This project started in January 2006
8. Has there been a reduction in the percentage of cases accepted as homeless due to domestic violence that had previously been re-housed in the last two years by that local authority as a result of domestic violence?	Yes. Yes, there was been a reduction in the number of households overall (families and singles.) In 2003/04, the baseline was 9. In 2004/05, the baseline was 7. In 2005/06, the baseline was 6.	
9. Does the council's tenancy agreement have a specific clause stating that perpetration of domestic violence by a tenant can be considered grounds for eviction? (For local authorities that have transferred their housing stock, the clause should be contained in the LSVT organisations' tenancy agreement.)	Yes.	
10. Has the local authority funded and developed a domestic violence education pack in consultation with the wider domestic violence forum?	Education pack has been developed and will be launched in the near future (NO)	Achieve this in 06/07
11. Has the local authority carried out a programme of multi-agency training in the last twelve months covering front line and managerial staff in at least two of the following groups: housing staff, social services staff providing services in the local authority area, education staff, health staff, and front line police officers?	Yes	Multi agency training has taken place amongst Housing, Social services, Crime & Disorder partnership and GMP

Definitions

1. The directory must list both statutory and voluntary agencies that can provide emergency housing, advice (welfare, housing and legal), counselling and support and include any local women 's ' aid contact details and the National Domestic Violence Helpline. It must be widely distributed and updated at least every 2 years. A directory should be available for each district and not just at a county level. As a minimum it should be available on the local authority 's website. A directory for services that work with victims of domestic violence can be provided separately from the Directory for Victims of Domestic Violence.
2. 'Places ' means the number of rooms providing bed spaces for a woman and her children. Rooms not normally designated as bedrooms should not be counted towards the total. 'Refuge ' means emergency accommodation for women and children who have been referred for help having experienced threats to their physical safety. It must provide help, advice and advocacy support as well as being part of an integrated local approach involving partnership with other local and statutory bodies. Calculate 'Local Authority population ' using the latest ONS mid-year estimates.
3. The co-ordinator should be employed at a local authority level (see exemption below) and have responsibility for strategically co-ordinating domestic violence issues throughout the local authority area. Where funding has been provided to the voluntary sector or local partnership to employ a co-ordinator this will meet the definition as long as their role remains to co-ordinate work in both the statutory and voluntary sectors across the area covered by the local authority. *Exemption – In cases where District Councils fund a county-wide co-ordinator the District Council will meet the requirements of this BVPI if the responsibility for ensuring that any county-wide work is implemented at a district level is included in the job description of an existing senior officer for that district.*
4. The strategy should have been developed in partnership with all relevant statutory and voluntary partners. It should be supportive of and aligned with the authority 's Crime and Disorder Reduction Strategy (CDRP). The strategy should cover a 3-year period with an action plan reviewed annually. The action plan should contain at least 50% outcomes that are SMART and include a section on how the needs of BME communities will be addressed. A Chief Officer and an Executive Member in the authority should have been allocated responsibility for its implementation.
5. The forum should have a mix of statutory and voluntary sector representatives at a senior enough level to aid the implementation of decisions and the strategy action plan. The forum should be formalised as part of the Crime and Disorder Partnership.
6. The information-sharing protocol must facilitate the exchange of information to enable domestic violence to be effectively tackled across all statutory agencies. Key statutory agencies are defined as the Police, Health, Housing, Social Services and Education. The protocol will also provide an opportunity to implement Homicide Reviews where appropriate. It must ensure that confidentiality and victims safety is protected.
7. A sanctuary type scheme must provide security measures to allow the woman to remain in her home where she chooses to do so, where safety can be guaranteed and the violent partner no longer lives within the home. It must be available across tenures where the

landlord of a property has given permission for the work to be carried out. It must consist of additional security to any main entrance doors to the accommodation and locks to any vulnerable windows. Wherever possible it must provide a safe room in the home secured with a solid core door and additional locks. It is essential that this service is only provided where it is the clear choice of the victim. The scheme should be implemented through partnership with the police and/or the voluntary sector that could provide supplementary support. It may be provided directly by the local authority or through a third party funded as part of the local authority's homelessness prevention work through grants that may be available for crime reduction initiatives.

8. The indicator is met if there is a percentage reduction in homelessness acceptances due to domestic violence. Acceptances who were previously homeless in another local authority area should not be included. Reductions achieved in preventing repeat homelessness should be clearly linked to positive measures adopted to provide genuine alternatives for women to either remain in their own home or be placed in alternative accommodation, removing the need to become homeless. Alternative accommodation may be secured by arranging a reciprocal property with another social landlord or a safe management transfer. Any options or measures to prevent repeat homelessness must only be taken with the full consent of the victim of domestic violence.
9. Any clause should make clear that evidence of domestic violence for eviction purposes does not need to rely on a criminal charge. Evidence may be based on a possession action using civil evidence.
10. The domestic violence education pack must have been specifically designed for use in schools and with youth groups. It must aim to challenge attitudes of tolerance to violence and help young people to achieve positive relationships based on mutuality and respect. Schools and youth groups cannot be forced to run a programme on domestic violence but the pack must be easily available and actively promoted. Schools should be encouraged to use the material as part of their PSHE or Citizenship curriculum.
11. The training programme must cover domestic violence awareness training, the legal framework, information sharing and who provides what services to victims of domestic violence with referral and contact points. The programme should be developed in consultation with the Domestic Violence Forum and reviewed by the forum annually.



MAKING MANCHESTER SAFER



MANCHESTER CRIME AND DISORDER REDUCTION PARTNERSHIP

DOMESTIC ABUSE STRATEGY 2006-07

FOREWORD FROM CLLR SUE MURPHY

It gives me great pleasure to welcome Manchester's strategy for tackling domestic abuse. For too long, this issue – a blight on many people's lives – went unaddressed and unchallenged. Thankfully, times and attitudes have changed, and the public service response has too; we have built on the pioneering work of the women's movement and on pockets of best practice in public services. Central government, in recognition of the damage that domestic abuse can do individual victims, children and communities, has committed to structural change and to making domestic abuse a top priority. Here in Manchester, we have the energy and commitment to make our vision a reality. Our vision, set out in this strategy, is of a city where incidence of domestic abuse is falling; where abuse is not tolerated in the community or by the criminal justice system; where services support victims, whether individuals or families, towards long-term goals, not sticking plaster fixes; and ultimately, where prevention is better than cure. Working in partnership is the only way to make this happen. We have a committed partnership – of Council, police, health service, probation, courts and voluntary sector. It needs everyone's help, but I know we can achieve it.

MANCHESTER CRIME AND DISORDER REDUCTION PARTNERSHIP

DOMESTIC ABUSE STRATEGY 2006-07

INTRODUCTION

Domestic abuse leads to extremely poor outcomes for victims across a whole range of outcomes, including health, mental health, alcohol use, homelessness and in extreme cases, murder. Research has identified several critical risk factors for domestic abuse, and identified weaknesses in the way that public agencies deal with such abuse.

In response to the significant level of domestic abuse in the city¹, the Manchester Domestic Abuse Strategy 2006-07 has been developed by the Domestic Abuse Management Group. This is a multi-agency group chaired by the Director of Adult Social Care, as the city lead for Domestic Violence with representation from Manchester Women's Aid, Manchester Community Safety Network, Greater Manchester Police, Health, and the Crime and Disorder, Housing, Social Care, and Children's departments in the City Council. The strategy is based on the Government's overall framework for addressing domestic abuse, organised to address Manchester's priorities. The challenge in Manchester is tough because of the prevalence of domestic abuse, including higher than average levels of repeat offending (at 40% - check), the range (and occasional duplication) of services, and the complexity of coordinating services and people in a city this size.

The strategy is deliberately aspirational and couched in terms of objectives and goals. The objectives we want to achieve and the priority actions for 2006-07 are set out in three main sections:

- Accommodation and Support Services for Adult Survivors of Domestic Abuse
- Services for Children and Young People Affected by Domestic Abuse
- Civil and Criminal Justice Issues

Success to date

We can be proud of our achievements to date. A major milestone has been the completion of the Strategy Document, after intensive consultation with stakeholders, practitioners and service users, culminating in a workshop in June 2006.

The June workshop was attended by a wide range of stakeholders from Manchester City Council, Greater Manchester Police, the Voluntary Sector and NHS Services. The aim of the event was to communicate the Domestic Abuse Strategy and to gather views on what we need to do to deliver the strategy. Some useful suggestions were made about how Multi Agency Risk Assessment Conferences (MARACs) for high risk domestic abuse cases can be improved. Participants also had some very constructive ideas about how we might achieve

¹ According to Greater Manchester Police figures for 2006, there are approximately 1,100 domestic violence incidents in Manchester a month, which gives an annual figure of 13,500. Of these, around 95% of victims are women. These figures cannot be comprehensive, in that they do not record those who do not make reports to the police.

more co-ordinated, joined up services for victims of domestic abuse and suggested some innovative ways to ensure that we reach all sections of the community. In addition, participants gave some useful practical examples of involving children and young people in the shaping of future services.

Most importantly, the Manchester Partnership has implemented a range of services to help and support those at risk from domestic violence. Of particular note are:

- Convictions for domestic abuse offences are up over last 12 months: from 173 in May 05 to 248 in May 06;
- Multi Agency Risk Assessment Conferences were established in January this year. These bring key agencies (such as police, probation, council services, health, and others) together to consider serious cases, and now deal with 15-20 new cases a month;
- A Sanctuary Scheme was established by the City Council's Housing Department, which enables victims to stay in their own home once adapted with extra security measures, and so avoid rehousing with all the associated disruption and difficulty. So far this year, ten sanctuaries have been installed;
- Health staff have been trained to conduct routine domestic violence enquiries, for example during midwife visits (30% of domestic abuse begins during pregnancy);
- The new website www.endthefear.co.uk, which provides information and advice for Mancunians. Launched a year ago, it is now receiving 1500 visits a month.

Looking ahead

Our success to date has been recognised – the Home Office's Tackling Violent Crime Programme recently commented *The taskforce were unanimous in their view that the developments within Manchester in relation to their structured approach to domestic violence were impressive. From a context of enormous scale and confused service provision and a lack of coherent strategic partnership working, has come a truly unified approach.*

However, we know that ensuring an effective response to domestic abuse in a city the size of Manchester is no mean challenge. There is still much to do. As we look forward, the greatest test is the move from strategic design to implementation. We will need to deliver significant changes to ambitious deadlines, such as a system of Independent Domestic Violence Advocates by the end of this year, and support for the new Domestic Violence Courts (to start in early 2007). This is a big agenda, requiring continuing partnership working from a wide range of agencies. We will continue to look to our colleagues across Manchester both for inspiration in finding solutions, and for delivery of our strategy.

Caroline Marsh
Director - Adult Services
Chair Domestic Abuse Management Group

MANCHESTER CRIME AND DISORDER REDUCTION PARTNERSHIP

DOMESTIC ABUSE STRATEGY 2006-07

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MANCHESTER CRIME AND DISORDER REDUCTION PARTNERSHIP

DOMESTIC ABUSE STRATEGY 2006-07

SECTION ONE - OVERVIEW

The Manchester Crime and Disorder Reduction Partnership define domestic abuse as any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between people who are or have been intimate partners or family members, regardless of gender. This definition goes beyond abuse that occurs between intimate partners, thus allowing a wider range of issues, such as forced marriages, to be addressed within this context.

The Manchester Domestic Abuse Strategy 2006-07 is based on the Government's strategy for domestic abuse as described in Safety and Justice 2003.

It outlines what we want to achieve and what we are going to do over the next year to achieve these objectives, in three main areas:

- Accommodation and Support Services for Adult Survivors of Domestic Abuse
- Services for Children and Young People Affected by Domestic Abuse
- Civil and Criminal Justice Issues

The Manchester domestic abuse objectives are shown on the next page.

The outcome measures that we will use to assess if we are meeting our objectives are shown in each chapter of the strategy.

The priority actions that we will take in 2006-07 in order to start to achieve our objectives are shown on page 5.

There is a detailed action plan for each section of the strategy – these can be obtained from the lead of each sub-group.

Equality and diversity issues have been incorporated into the objectives and action plans.

MANCHESTER DOMESTIC ABUSE OBJECTIVES

WE WILL SUPPORT AND PROTECT ADULT SURVIVORS OF DOMESTIC ABUSE BY:

- Ensuring that people experiencing domestic abuse access core domestic violence services as early as possible
- Preventing homelessness due to domestic abuse
- Where homelessness is unavoidable, ensuring that there is sufficient appropriate temporary accommodation
- Ensuring that people who are homeless due to domestic abuse are re-housed in appropriate, permanent accommodation as quickly as possible
- Supporting service users to re-build their lives

WE WILL SUPPORT AND PROTECT CHILDREN AND YOUNG PEOPLE AFFECTED BY DOMESTIC ABUSE BY:

- Ensuring that children and young people affected by domestic abuse access services as early as possible
- Ensuring that services adequately protect and support children and young people affected by domestic abuse

WE WILL DEAL WITH PERPETRATORS OF DOMESTIC ABUSE BY:

- Preventing offenders re-offending
- Ensuring an effective Police response when victims report domestic abuse
- Improving the prosecution of domestic abuse cases and making sure that the sentences reflect the crime
- Ensuring that victims are not deterred by the way they will be treated at any stage of the justice process.
- Making sure the civil and criminal law offer the maximum protection to all victims to stop the abuse recurring.

WE WILL PREVENT DOMESTIC ABUSE IN THE FUTURE BY:

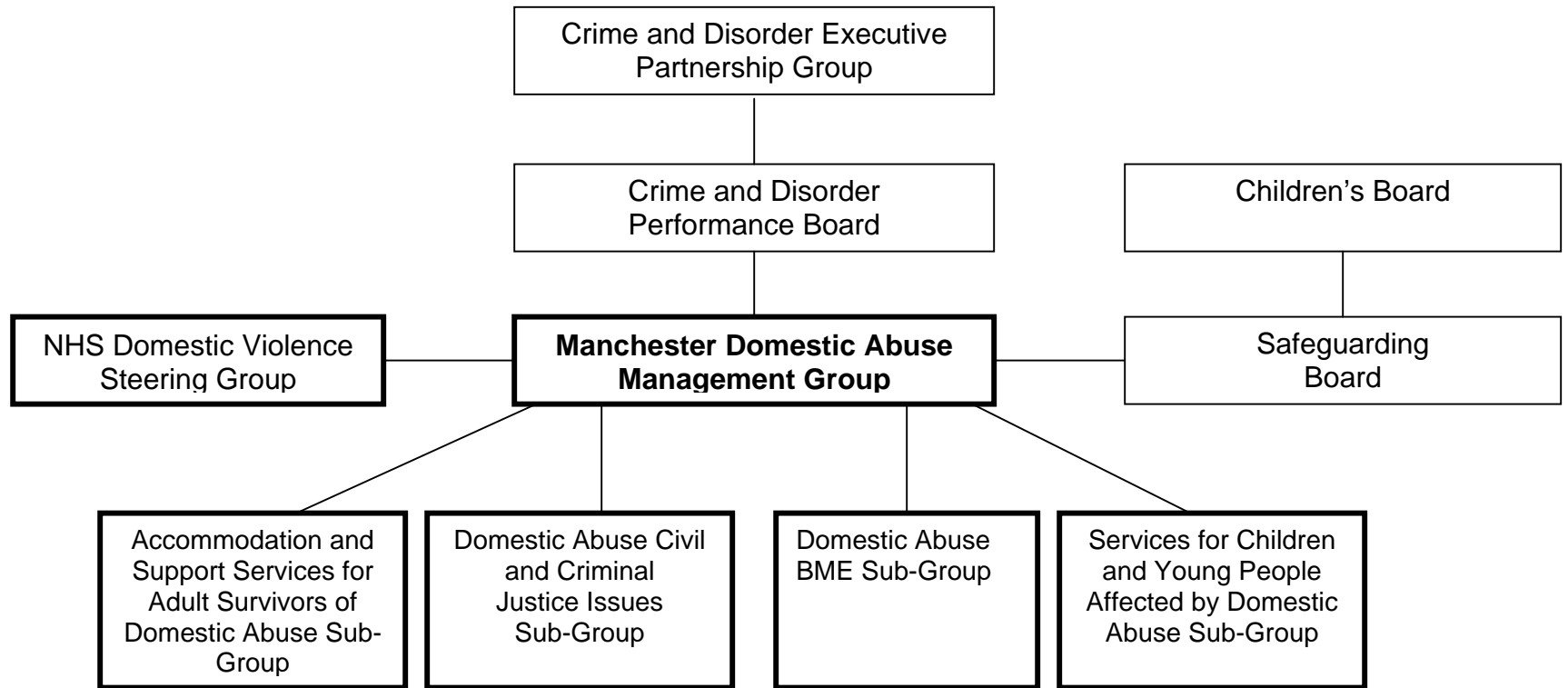
- Changing people's attitudes towards violence

In order to start to achieve our objectives, the following priority actions for domestic abuse prevention in Manchester for 2006-07 have been identified:

1. Introduce routine enquiry for domestic abuse into all NHS services and learn lessons about how this can be applied in other services
2. Put in place referral pathways for adult and child victims of domestic abuse to services that will provide them with support and protection
3. Put in place more co-ordinated, consistent services for supporting and protecting adult and child victims of domestic abuse that better meet their needs
4. Put in place a system to manage and carry out Multi Agency Risk Assessment Conferences for high risk domestic abuse cases
5. Increase the arrest rate for domestic abuse cases
6. Increase the conviction rate for domestic abuse cases
7. Put in place Specialist Domestic Violence Courts
8. Identify repeat domestic abuse incidents that are reported to GMP and ensure that they are targeted
9. Increase the Police use of support services for victims
10. Develop the Training, Communication and Awareness Raising section of the Domestic Abuse Strategy
11. BME sub-group to work with the other sub-groups to ensure that the BME equality objectives outlined in this strategy are achieved and that actions are continuously informed by BME issues

The sub-groups of the Domestic Abuse Management Group are responsible for implementing these actions. The sub-group leading on each action is shown in chapters 3-5. More detailed action plans are available from the lead of each sub-group.

MANCHESTER DOMESTIC ABUSE MANAGEMENT STRUCTURE



The Manchester Domestic Abuse Management Group co-ordinate domestic abuse prevention activity in the city through the work of a number of sub-groups.

The following agencies are represented on the Manchester Domestic Abuse Management Group:

- Manchester City Council - Adult Social Care Department
- Manchester City Council - Children's Services
- Manchester City Council - Crime and Disorder Team
- Manchester City Council - Housing Department
- Greater Manchester Police
- Manchester NHS Services
- Community Safety Network
- Manchester Women's Aid
- Elected Members

The remit of the sub-groups is to develop, deliver and continuously review sections of the strategy. An active NHS Domestic Violence Steering Group has been in place in Manchester for some time and the work of this group has been incorporated into relevant sections of the strategy.

MANCHESTER CRIME AND DISORDER REDUCTION PARTNERSHIP

DOMESTIC ABUSE STRATEGY 2006-07

SECTION TWO – BACKGROUND INFORMATION

The incidence of domestic abuse

One in four violent crimes involve people in domestic relationships.

More than half of all victims of domestic abuse are involved in more than one incident. No other type of crime has a rate of repeat victimisation as high.

It is estimated that one in four women and one in six men will experience domestic abuse at some time in their lives.

One in four lesbians, gay men, bisexual and transgender people will experience domestic abuse at some point in their lives.

It is estimated that of the 160,019 women (over the age of 19) living in Manchester, 40,005 will experience domestic abuse at some time in their life. Based on this estimate, **every year 17,780 women living in Manchester will experience domestic abuse.**

The financial cost of domestic abuse

The total cost of domestic abuse nationally to services (criminal justice system, health, social services, housing and civil legal), the loss to the economy and the cost in terms of human and emotional suffering is £23 billion a year.

Based on the national formula, **the total cost of domestic abuse in Manchester is £117,129,760 a year.** This is equal to £440 for every adult between the ages of 16-59.

The risk factors for domestic abuse

The factors that indicate an increased risk of domestic abuse are:

- Being a woman – Women are more likely than men to experience domestic abuse and women are considerably more likely to experience repeated and severe forms of abuse, including sexual abuse.
- Previous domestic abuse – 35% of cases have a second incident within five weeks of the first.
- Minor abuse is a predictor of escalation to major abuse.

- Separation –The British Crime Survey found that 22% of women were assaulted after separation by their partners or ex-partners and women are at the greatest risk of homicide at or after separation.
- Substance misuse - In 32% of domestic abuse cases the perpetrator has been drinking and the rates of alcohol abuse and dependency amongst perpetrators is estimated to be 2-7 times higher than the general population.
- Pregnancy - 30% of domestic abuse starts during pregnancy and existing abuse often escalates during pregnancy.

The impact of domestic abuse on victims

Domestic abuse is rarely a one-off incident – it tends to be a systematic pattern of violence and abuse that escalates over time.

People experiencing domestic abuse present very frequently to health services and require wide-ranging health interventions. It is estimated that an abused woman will cost health services 2.5 times more in her lifetime than a non-abused woman.

On average, a woman experiencing physical abuse will sustain 4 physical injuries a year and 30% of women who sustain trauma injuries have been injured as a result of domestic abuse. People experiencing domestic abuse present to health services not just with physical injuries but with a wide range of other illnesses such as chest pain and irritable bowel syndrome. One research study indicated that 45% of women with sexual problems and 47% of women with other gynaecological complaints were abused women.

The impact of domestic abuse has been found to have psychological parallels with the impact of torture and imprisonment on hostages. Domestic abuse is a factor of at least one in four suicide attempts by women. In addition, one study found that one in seven women experiencing domestic abuse was in a psychiatric hospital or was referred to psychiatric services.

Domestic abuse often starts or intensifies during pregnancy. It is associated with increases in rates of miscarriage, low birth weight, premature birth, foetal injury and foetal death. In addition, the Government's Maternal Death Findings inquiry identified the link between maternal deaths and domestic abuse.

There is a strong link between domestic abuse and sexual assault. The Domestic Abuse, Sexual Assault and Stalking Home Office Research report found that for 54% of women who are raped, the perpetrator is a current or former partner.

Some victims of domestic abuse may use alcohol, prescribed and non-prescribed drugs to block out or cope with the abuse that they are experiencing. One study found that women who were abused were 15 times more likely to misuse alcohol and 9 times more likely to abuse drugs.

Domestic abuse is the reason for 16% of homelessness acceptances nationally every year. In Manchester, the percentage of homelessness acceptances due to domestic abuse in 2005-06 was 29%.

On average, every week two women are killed by their present or former partner. Domestic abuse is the largest cause of death in women aged 19-44.

The impact of domestic abuse on children

It is estimated that in 90% of all domestic abuse incidents, a child is in the same or next room.

The legal definition of harm to children now includes the impairment suffered from seeing or hearing the ill treatment of another – particularly in the home -even though the children themselves may not have been directly assaulted or abused. There is evidence that children can suffer serious long-term damage by living in a household where domestic abuse is taking place.

There is a correlation between domestic abuse and direct child abuse. The presence of domestic abuse is an indicator that there might also be child abuse in the home - it is estimated that between 30% to 60% of children living in a home where domestic abuse is taking place will also be abused. Of the 90 or so children who are murdered each year in Britain, around 80 are killed by a relative. In addition, one research study found that 40% of children living with an abused mother had been sexually abused by her male partner.

Abuse in the home can cause children to suffer emotional and psychological damage. It is linked with alcohol and drug misuse, violent and anti-social behaviour, running away from home and truancy. Witnessing domestic abuse can also affect children's educational development and achievement.

Intervention by agencies

On average, a woman will be assaulted by her partner or ex-partner 35 times before reporting it to the police.

68% of women experiencing domestic abuse do not seek medical help at the time of their injuries and only 25% of women seeking medical help for domestic abuse injuries actually reveal that they have been assaulted.

On average, victims contact between 7 and 12 agencies before receiving an appropriate service – this increases to 12 to 15 agencies for victims from a BME background.

MANCHESTER CRIME AND DISORDER REDUCTION PARTNERSHIP

DOMESTIC ABUSE STRATEGY 2006-07

SECTION THREE - ACCOMMODATION AND SUPPORT SERVICES FOR ADULT SURVIVORS OF DOMESTIC ABUSE

This area of work is co-ordinated by the Accommodation and Support sub-group.

The following agencies that provide services to adult survivors of domestic abuse are represented on the sub-group:

- Manchester City Council Housing department
- Manchester City Council Adult Social Care department
- Manchester City Council Supporting People team
- Manchester City Council Drug and Alcohol team
- Women's Aid refuges and outreach
- Victim Support
- Manchester Domestic Violence Helpline
- Manchester Advice
- Manchester NHS services

The sub-group is working to achieve the objectives outlined below. A number of outcome measures have been identified for each objective – these will be used to assess if the objectives are being met.

In order to start to achieve the objectives outlined below, the following priority actions have been identified for 2006-07.

- 1 Put in place referral pathways for adult victims of domestic abuse to services that will provide them with support and protection
2. Put in place more co-ordinated, consistent services for supporting and protecting adult victims of domestic abuse that better meet their needs

A detailed action plan showing how these priority actions will be implemented is available.

Objective 1

Ensure that people experiencing domestic abuse access core domestic abuse services as early as possible

- Increase the number of people that access core domestic abuse services
- Increase the number of people from the following groups that access core domestic abuse services
 - People who are facing or have experienced a forced marriage
 - People who misuse drugs and alcohol
 - People with mental health problems
 - Pregnant or post natal women
 - Service users with no recourse to public funds
 - Women
 - Men
 - People in same sex relationships
 - Young people
 - Older people
 - BME people
 - Sex workers
- Increase the number of notified adult abuse cases
- Reduce the length of time that people are abused before they access core domestic abuse services
- Reduce the number of times that a person seeks help before they access core domestic abuse services
- Increase the number of people that access core domestic abuse services before the situation becomes a crisis*
- Increase service user and referral agency satisfaction with access to core domestic abuse services

* A crisis is defined as presenting as homeless

Objective 2

Prevent homelessness due to domestic abuse

- Reduce homelessness due to domestic abuse
- Increase the number of people who are experiencing domestic abuse that are supported* to remain in their own homes
- Increase the number of service users that are satisfied with services that are put in place to help them to remain in their own homes

* Support is defined as any of the following – outreach support, sanctuary schemes, target hardening, the use of emergency protection, support to evict the perpetrator from the property

Objective 3

Where homelessness is unavoidable, ensure that there is sufficient appropriate temporary accommodation

- Ensure that there are enough temporary accommodation beds for people experiencing domestic abuse
- Ensure that there is enough accommodation support for service users with additional or special needs,
 - Service users with no recourse to public funds
 - Service users who have mental health and drug and alcohol problems
 - Men
 - People in same sex relationships
 - Young people
 - Older people
 - Vulnerable adults
 - BME people
 - Sex workers
 - Families with boys over the age of 14 years
 - Large families
- Reduce the number of people who are experiencing domestic abuse staying in B&B accommodation
- Reduce the number evictions and exclusions from temporary accommodation
- Increase the number of service users that are satisfied with temporary accommodation

Objective 4

Ensure that people who are homeless due to domestic abuse are re-housed in appropriate, permanent accommodation as quickly as possible

- Reduce the length of time that people stay in temporary accommodation due to domestic abuse
- Increase the number of people who move on to more-permanent, more-independent accommodation
- Reduce repeat homelessness due to domestic abuse
- Increase the number of service users who are satisfied with the re-housing process

Objective 5

Support service users to re-build their lives

- Ensure the following support needs are met:
 - Financial
 - Educational
 - Gaining employment
 - Interpretation
 - Safety
 - Legal advocacy and advice
 - Therapeutic and counselling
 - Empowerment
 - Social
 - Childcare
 - Screening and referral for drug and alcohol problems
 - Screening and referral for general and mental health problems

- Ensure that support services meet the needs of all groups of service users:
 - Women
 - Men
 - People in same sex relationships
 - Young people
 - Older people
 - Vulnerable adults
 - BME people
 - Service users with no recourse to public funds
 - People who are facing or have experienced a forced marriage
 - People who misuse drugs and alcohol
 - People with mental health problems
 - Pregnant or post natal women
 - Sex workers

- Increase the number of service users that are satisfied with support services

- Increase the number of service users who have not experienced any further abuse at 6 months and 12 months after intervention by support agencies has finished.

MANCHESTER CRIME AND DISORDER REDUCTION PARTNERSHIP

DOMESTIC ABUSE STRATEGY 2006-07

SECTION FOUR – SERVICES FOR CHILDREN AND YOUNG PEOPLE AFFECTED BY DOMESTIC ABUSE

This area of work is co-ordinated by the Children and Young People sub-group.

The following agencies that provide services to children and young people affected by domestic abuse are represented on the sub-group:

- Manchester City Council Housing department
- Manchester City Council Children's Services
- Women's Aid Refuges and Outreach
- Manchester Discus Project
- Manchester NHS Services

The sub-group is working to achieve the objectives outlined below. A number of outcome measures have been identified for each objective – these will be used to assess if the objectives are being met.

In order to start to achieve the objectives outlined below, the following priority actions have been identified for 2006-07.

- 1 Put in place referral pathways for child victims of domestic abuse to services that will provide them with support and protection
2. Put in place more co-ordinated, consistent services for supporting and protecting child victims of domestic abuse that better meet their needs

A detailed action plan showing how these priority actions will be implemented is available.

Objective 1

Ensure that children and young people affected by domestic abuse access services as early as possible

- Increase the number of children and young people that access services
- Increase the number of children and young people from the following groups that access services
 - Children and young people who are facing or have experienced a forced marriage
 - Children and young people who are affected by misuse of drugs and alcohol
 - Children and young people who are affected by mental health problems
 - Children and young people who are affected by having no recourse to public funds
 - Children and young people who are LGBT or whose parents are LGBT
 - BME children and young people
 - Children and young people who are sex workers or whose parents are sex workers
 - Children and young people who are affected by disability issues
- Reduce the length of time that children and young people are affected by domestic abuse before they access services
- Reduce the number of times that agencies are aware that a child is affected by domestic abuse before they access services
- Increase service user and referral agency satisfaction with access to services

Objective 2

Protect and support children and young people affected by domestic abuse

- Ensure the following needs are met:
 - Financial
 - Educational
 - Interpretation
 - Safety
 - Legal advocacy and advice
 - Therapeutic and counselling
 - Empowerment
 - Social
 - Screening and referral for drug and alcohol problems
 - Screening and referral for general and mental health problems
 - Safe child contact arrangements
 - Access to good parenting
 - Sexual health
 - Healthy relationships

- Ensure that the needs of all groups of children and young people are met:
 - Girls
 - Boys
 - Children and young people who are LGBT or whose parents are LGBT
 - BME children and young people
 - Children and young people who are affected by having no recourse to public funds
 - Children and young people who are facing or have experienced a forced marriage
 - Children and young people who are affected by misuse of drugs and alcohol
 - Children and young people who are affected by mental health problems
 - Children and young people who are sex workers or whose parents are sex workers
 - Children and young people who are affected by disability issues

- Increase the number of children and young people that are satisfied with services to protect and support them

- Reduce the number of children and young people coming into the looked after system as a consequence of domestic abuse

- Reduce the number of children and young people on the child protection register as a consequence of domestic abuse

Objective 3

Change young people's attitudes towards abuse

- Reduce the acceptability of abuse amongst young people in Manchester
- Reduce violent behaviour amongst young people in Manchester

MANCHESTER CRIME AND DISORDER REDUCTION PARTNERSHIP

DOMESTIC ABUSE STRATEGY 2006-07

SECTION FIVE – CIVIL AND CRIMINAL JUSTICE ISSUES

This area of work is co-ordinated by the Civil and Criminal Justice sub-group.

The following agencies are represented on the sub-group:

- Greater Manchester Police
- Manchester Probation Service
- The Crown Prosecution Service
- Manchester Magistrates' Court
- Victim Support
- Manchester City Council Housing Department – Legal Advocacy Worker
- Manchester City Council – Crime and Disorder Team
- Civil Solicitor

The sub-group is working to achieve the objectives outlined below. A number of outcome measures have been identified for each objective – these will be used to assess if the objectives are being met.

In order to start to achieve the objectives outlined below, the following priority actions have been identified for 2006-07.

1. Put in place a system to manage and carry out Multi Agency Risk Assessment Conferences for high risk domestic abuse cases
2. Identify repeat domestic abuse incidents that are reported to GMP and ensure that they are targeted
3. Increase arrests
4. Increase convictions
5. Put in place Specialist Domestic Violence Courts
6. Increase the Police use of support services for victims

A detailed action plan showing how these priority actions will be implemented is available.

Objective 1

Prevent Offenders Re-offending

- Increase the number of cases discussed at Manchester MARAC (Multi Agency Risk Assessment Conference)
- Through the MARAC process identify and track repeat domestic abuse offenders.
- Decrease the number of repeat incidents of domestic abuse.
- Increase the number of offenders on compulsory offender programmes and reduce the re-offending rate of perpetrators completing the programme.
- Increase the number of voluntary offender programmes
- Increase the number of referrals to support services within Manchester by the Police.

Objective 2

Ensuring an effective Police response when victims report domestic abuse

- Increase the number of arrests for domestic abuse related crime.
- Increase the number of victims who report domestic abuse incidents.
- Increase victim satisfaction with Police response to reported domestic abuse incidents.
- Increase the awareness of all Police officers in relation to the domestic abuse policies.
- Increase the number of trained officers on how to implement policies and action required at domestic abuse incidents.

Objective 3

Improving the prosecution of domestic abuse cases and making sure that the sentences reflect the crime

- Introduction of a Specialist Domestic Violence Court within Manchester.
- Reduce the attrition rate of domestic abuse cases.
- Reduce the number of victims that retract their statements.
- Put systems in place to measure the effectiveness of Domestic Abuse Investigators.
- Increase the number of prosecutions by CPS where the victim is a reluctant party, explore independent evidence to support the case.
- Ensure that all domestic abuse incidents have are risk assessed at time of Police call out.
- Increase the number of trained judiciary members in domestic abuse.
- Increase the number of offenders that are prosecuted.

Objective 4

Ensuring that victims are not deterred by the way they will be treated at any stage of the justice process

- Increase the multi agency workings between the Police and support agencies within Manchester by monitoring joint training days and joint visits to victims.
- Ensure that all agencies involved in domestic abuse treat these cases as seriously as other cases of violent crime by raising awareness within agencies.
- Encourage and support victims through the court process by use of the Witness Care Unit, Victim Support and the legal advocacy services.

Objective 5

Making sure the civil and criminal law offer the maximum protection to all victims to stop the abuse recurring

- CPS to ensure that the same lawyer is used for repeat victim cases ensuring consistency and knowledge of previous history.
- Ensure that civil injunctions that contain a power of arrest are fast tracked to Police to ensure maximum protection of victim and to ensure any breaches are expedited.
- Through the MARAC process cross reference and make links between civil and criminal law within the same family unit.
- More usage of the Harassment legislation with restraining orders attached.
- Increase the number of civil remedies used within domestic abuse cases.