



# 4LSAB Multi-Agency Domestic Abuse Guidance

January 2025



<b>Contents</b>	<b>Page</b>
<a href="#">1. Introduction</a>	3
<a href="#">2. Definition of domestic abuse</a>	4
<a href="#">3. Prevalence of domestic abuse</a>	7
<a href="#">4. Why should we take domestic abuse seriously?</a>	7
<a href="#">5. Signs and Indicators</a>	9
<a href="#">6. Responding to domestic abuse</a>	11
<a href="#">7. Pathways and Referrals</a>	12
<a href="#">8. Adults who use abusive behaviours</a>	17
<a href="#">9. Additional considerations</a>	19



## **1. Introduction**

Anyone can be affected by domestic abuse – regardless of age, disability, sex, sexual orientation, gender identity, gender reassignment, race, religion or belief. In addition, domestic abuse can manifest itself in different ways within different communities. It is a pattern of behaviour designed to establish and maintain power and control over another person. Its impact can be severe, leading to a wide array of negative outcomes such as physical and mental health issues, substance use, homelessness, and, in the most tragic cases, homicide and/ or someone taking their own life.

This guidance has been developed to support all staff and managers working across agencies across the four Local Safeguarding Adult Board areas (4LSAB), Hampshire, IOW, Portsmouth and Southampton, who assist adults at risk of or experiencing domestic abuse. It provides guidance for a consistent and effective response to this complex area of safeguarding practice.

Addressing the needs of individuals affected by or those who use harmful behaviours requires a collaborative effort. No single agency can meet all these needs alone and there may be several processes working in conjunction with each other or in parallel. Effective intervention necessitates that agencies work together in partnership, taking timely action and adopting a shared responsibility for assessing and managing risk. This guidance aims to:

**Raise Awareness:** Provide information on what domestic abuse is, as well as the types and indicators of domestic abuse and identify who is vulnerable to harm.

**Support Practitioners:** Equip practitioners to recognise and respond effectively to concerns about domestic abuse and work collaboratively to assess and manage risks.

**Promote Responsibility:** Highlight the duty of all practitioners to take appropriate action to raise safeguarding concerns related to domestic abuse and ensure the involvement of the right agencies.

**Signpost Resources:** Direct practitioners to additional resources for further support. This guidance should be read in conjunction with the [4LSAB Multi-Agency Safeguarding Adults Policy and Guidance](#) as well as each agency's own safeguarding policy and procedures.



## **2. Definition of domestic abuse**

Sections 1 to 3 of the Domestic Abuse (DA) Act 2021 create a statutory definition of domestic abuse.

In the definition person “A” refers to the person using abusive behaviours, and person “B” refers to the victim of the abuse. The term ‘victim’ is used in the DA Act 2021 to denote someone who has experienced domestic abuse. This includes children who have seen, heard, or experienced the effects of domestic abuse, and are related to either the victim of the abusive behaviour, or the person who is abusive (section 3 of the 2021 Act). There has been [statutory guidance](#) issued under section 84 of the DA Act 2021 which should be read to support the understanding of the definition.

The [statutory guidance](#) also provides further details on the different types of abuse and the forms they can take. This includes focusing on the gendered nature of domestic abuse and the devastating impact it can have on children who experience it. It also explains the different types of abuse which are experienced by specific communities or groups, such as migrant women or ethnic minorities. The Statutory definition of domestic abuse is also supported by a [factsheet](#).

This definition is set out in the box below.

### **Section 1: Definition of “domestic abuse”**

- (1) This section defines “domestic abuse” for the purposes of this Act.
- (2) Behaviour of a person (“A”) towards another person (“B”) is “domestic abuse” if—
- (a) A and B are each aged 16 or over and are “personally connected” to each other, and
  - (b) the behaviour is abusive.
- (3) Behaviour is “abusive” if it consists of any of the following—
- (a) physical or sexual abuse;
  - (b) violent or threatening behaviour;
  - (c) controlling or coercive behaviour;
  - (d) economic abuse (see subsection (4));
  - (e) psychological, emotional or other abuse;

and it does not matter whether the behaviour consists of a single incident or a course of conduct.



(4) “Economic abuse” means any behaviour that has a substantial adverse effect on B’s ability to —

- (a) acquire, use or maintain money or other property, or
- (b) obtain goods or services.

(5) For the purposes of this Act, A’s behaviour may be behaviour “towards” B despite the fact that it consists of conduct directed at another person (for example, B’s child).

(6) References in this Act to being abusive towards another person are to be read in accordance with this section.

(7) For the meaning of “personally connected”, see section 2.

## **Section 2: Definition of “personally connected”**

(1) Two people are “personally connected” to each other if any of the following applies —

- (a) they are, or have been, married to each other;
- (b) they are, or have been, civil partners of each other;
- (c) they have agreed to marry one another (whether or not the agreement has been terminated);
- (d) they have entered into a civil partnership agreement (whether or not the agreement has been terminated);
- (e) they are, or have been, in an intimate personal relationship with each other;
- (f) they each have, or there has been a time when they each have had, a parental relationship in relation to the same child (see subsection (2));
- (g) they are relatives.

(2) For the purposes of subsection (1)(f) a person has a parental relationship in relation to a child if —

- (a) the person is a parent of the child, or;
- (b) the person has parental responsibility for the child.

(3) In this section —

- “child” means a person under the age of 18 years;
- “civil partnership agreement” has the meaning given by section 73 of the Civil Partnership Act 2004;
- “parental responsibility” has the same meaning as in the Children Act 1989;
- “relative” has the meaning given by section 63(1) of the Family Law Act 1996.



### Section 3: Children as victims of domestic abuse

(1) This section applies where behaviour of a person (“A”) towards another person (“B”) is domestic abuse.

(2) Any reference in this Act to a victim of domestic abuse includes a reference to a child who –

- (a) sees or hears, or experiences the effect of, the abuse, and
- (b) is related to A or B.

(3) A child is related to a person for the purposes of subsection (2) if –

- (a) the person is a parent of, or has parental responsibility for, the child, or
- (b) the child and the person are relatives.

(4) In this section –

“child” means person under the age of 18 years;

“parental responsibility” has the same meaning as in the Children Act 1989 (see section 3 of that Act);

“relative” has the meaning given by section 63(1) of the Family Law Act 1996.

Being personally connected is key to the definition of domestic abuse. Section 2 of the DA Act 2021 provides the definition of “personally connected” and this includes those who would constitute as a “relative” of the victim.

The definition of “relative” has the meaning given under section 63(1) of the [Family Law Act 1996](#) which includes immediate biological family, stepfamily and extended family of an individual including such family members of their present or former spouse, civil partner or cohabiting partner. There is no requirement for “A” and “B” to be living together, or co-habiting, to be “personally connected”.

In the case of adolescent to parent violence, domestic abuse occurs when both parties are over the age of 16. While it is recognised that adolescent to parent violence can equally involve children under 16, responses to this group may be different.

The Care Act also includes Honour based violence, female genital mutilation and forced marriage under this category of domestic abuse, these are also referred to as harmful cultural practises. As such these are inexorably linked with domestic abuse and is part of the wider Government strategy to reduce violence against Women and Girls.

The [4LSAB and 4LSCP Multi-Agency Guidance on ‘Honour’ Based Abuse, Forced Marriage and Female Genital Mutilation](#) explains how pan Hampshire agencies



respond to incidents (crime and non-crime) where 'Harmful Practices' - Honour Based Abuse, Forced Marriage and Female Genital Mutilation or Breast Flattening - may be a consideration.

### **3. Prevalence of domestic abuse**

Domestic abuse is widespread and can affect anyone across all walks of life in many ways. It is not easy to get an accurate picture of the prevalence of domestic abuse and, while women and men can both be victims, women are more likely to be victims and those who are abusive are more likely to be men.

It is known that it is an under reported crime often because victims are scared to report or are prevented from making disclosures and/or accessing support by their abusers. Some victims do not realise that they are being subjected to domestic abuse and may need help from family members, friends or professionals to identify this. Some victims can face barriers to reporting or accessing support and may be unwilling to seek help from statutory services because of fears of racism, homophobia and other forms of discrimination, or because of fears of victim-blaming attitudes by services.

The Crime Survey for England and Wales (CSEW) for the year ending March 2023 estimated that 4.4% of people aged 16 years and over (2.1 million) experienced domestic abuse in the previous year. In the year up to March 2024 there were 65,523 incidents and crimes of Domestic Abuse reported to Hampshire and Isle of Wight Constabulary, of which, 25,756 were repeat cases, and since April 2011 there have been 38 domestic homicide reviews commissioned across Hampshire county ([Force Performance Profile, quarter 3 and 4, 2024](#)). An estimated 21% of individuals subjected to domestic abuse in Hampshire are aged above 65. [Age UK](#) reports that one in five victims of recorded domestic homicide are over the age of 60.

Reducing the prevalence of domestic abuse is a priority for all local authorities and in August 2020 Olivia Pinkney, Chief Constable of the Hampshire Constabulary, stated "To give you a sense of scale in the Hampshire Constabulary, 1 in 6 of the calls we get every day is about domestic abuse, that's the extent of it, it is across all society and all social economic groups, it is a real cancer. All too often we see people being perpetrators in one domestic relationship, then another one, so we have to stop that cycle of offending as well".

### **4. Why should we take domestic abuse seriously?**

The devastating consequences of domestic abuse can cross generations and last a lifetime. The silent suffering of many is heartbreaking and we only begin to understand when we hear their experience once someone feels comfortable to start having open conversations. We need to ensure that we create windows of opportunity for people to feel able to disclose their abuse and seek the help they so desperately need.



Every case of domestic abuse needs to be taken seriously, and each person should be able to access the appropriate support they need.

## Impact of Domestic Abuse

Domestic abuse can cause serious and devastating long and short-term physical, mental, emotional and psychological health impacts on adults and children:

- victims can suffer serious physical injuries and potentially even death
- short-term impacts on health include bruises, burns, cuts and abrasions, fractures and broken bones, head injuries, sexually transmitted diseases, and lost teeth and hair; also possible are miscarriage, stillbirth and other complications of pregnancy
- long-term and chronic health problems can include asthma, epilepsy, digestive problems, chronic pain, migraine, hypertension, skin disorders and psychosomatic symptoms such as numbness, twitching and cramps
- emotional effects include loss of confidence and low self-esteem
- poor mental health such as anxiety, depression and post-traumatic stress disorder, feelings of isolation, worthlessness and dependency on the person using abusive behaviours - it can also include sleeping and eating disorders
- the psychological impact of domestic abuse can be so severe that it leads to suicidal ideation and attempts to end their life through suicide
- substance use, often as an attempt to cope with circumstances

Wider impacts can include:

- preventing an adult from being able to care for others and themselves
- preventing children and dependent adults from achieving their full potential
- isolation from family, friends and community
- negative effect on work, diminished employment prospects, possible loss of independent income, debt and poverty
- many victims may face becoming homeless. That risk of homelessness for themselves and their children can prevent a victim from leaving
- physical and/or emotional harm to a child or dependent adult in the household
- children can develop increased risk of behavioural problems and emotional trauma, and mental health difficulties in adult life
- living in a physically abusive home impacts on children and the experience of coercive and controlling behaviour can also impact on their psychological and emotional development
- experience of domestic abuse is identified as an Adverse Childhood Experience leading to maladaptive coping mechanisms
- when looking at all children who were exposed to domestic abuse, over half had behavioural problems, or felt responsible or to blame for negative events
- Long-term trauma may not always be recognised in victims who may be facing multiple disadvantages, such as, but not limited to, disabled victims.





Adopting a trauma informed approach to responding to domestic abuse is therefore essential, recognising the signs and symptoms of trauma and, in acknowledging this, providing appropriate support seeking not to re-traumatise.

In their [2020 annual report](#), the Child Safeguarding Practice Review Panel found that domestic abuse was featured in 43% of incidents involving serious harm and 41% of fatal incidents.

Research published by the Home Office estimated [the social and economic costs of domestic abuse](#) to be in the region of £66 billion for victims identified in England and Wales within the year 2016 to 2017. Physical and emotional harms (the fear, anxiety and depression experienced by victims as a result of domestic abuse) were estimated to account for the overwhelming majority of the overall costs. The impact on the individual victims is severe and can be wide-ranging and long-lasting.

## **5. Signs and Indicators**

Domestic abuse can encompass a wide range of behaviours, and it can be difficult to know if it is happening. It can, but does not have to, involve physical acts of violence and can include threatening behaviour, controlling or coercive behaviour, emotional, psychological, sexual and/or economic abuse. Domestic abuse can involve abuse facilitated and perpetrated online or offline. It is widely recognised that many perpetrators of domestic violence do so stemming from a desire to gain and maintain power and control over their victim. This is often because they believe their own feelings and needs should be prioritised or because they enjoy exerting the power that such abuse gives them. Others may be abusive for a variety of reasons, they may have witnessed it in their own families growing up or have learnt it from friends, popular culture or from structural inequalities throughout our society.

Signs that someone is experiencing domestic abuse might include:

- Physical injuries such as bruises and welts, lacerations, abrasions, abdominal or thoracic injuries; fractures and broken bones or teeth; sight and hearing damage and head injuries. Victims may also suffer from functional disorders or stress-related conditions such as irritable bowel syndrome, gastrointestinal symptoms, fibromyalgia, chronic pain syndromes and exacerbation of asthma;
- Making excuses for frequent injuries;
- Exhibiting or expressing feelings of stress, anxiety, depression, PTSD, and eating and sleeping disorders;
- Low self-esteem and/or self-worth and feelings of worthlessness and dependency on the perpetrator;
- Self-blame and self-doubt;
- Suicidal ideation and attempt;
- Personality/behaviour changes such as becoming jumpy or nervous



- Lack of independent communication;
- Use of/increased use of drugs or alcohol. Some victims develop addictions, for example, they may begin smoking or using drugs or alcohol to help cope with abuse and this dependency may progress. It is important to note that perpetrators can try to exploit a victim's addictions. With drugs or alcohol, a perpetrator may try to sustain a victim's dependency or threaten to expose this to professionals. This can be particularly threatening to victims with children, or those from cultural backgrounds where drinking alcohol or misusing substances may be particularly condemned;
- Lack of money and other signs of economic abuse such as debt or coerced debt, unemployment / diminished employment prospects

Victims can be coerced or pressured into criminal activity by those being abusive, increasing their vulnerability and the risk of further abuse. This situation is often worsened by poverty, substance dependency or poor mental health.

It is not uncommon for victims to use violence themselves in self-defence. Research from [The Centre for Women's Justice](#) highlights that many women who kill their partners were themselves victims of, often sustained and violent, domestic abuse by those partners.

Professionals also need to recognise the barriers that may exist for victims to disclose information or seek support, for example:

- fear of the person who is abusive;
- fear that they may not be believed;
- pressures from family or the community – in particular for those victims in rural or closed communities;
- negative past experiences with the police or services;
- a desire to make the relationship work;
- economic barriers;
- communication difficulties;
- not wanting to uproot the children or fear that the children will be taken into care;
- fear of repercussions related to insecure immigration status

More detailed information is available within the Domestic Abuse [statutory guidance](#). Domestic abuse can present differently in every situation and victims may not recognise the abuse they face as domestic abuse or underrate their experience or the experience of forms of abuse that are not physical. They may be unclear on how to seek help, therefore continued efforts, professional curiosity and a trauma-informed approach are essential.

Professional curiosity means looking, listening, asking direct questions and checking out and reflecting on information received. It also means not taking a single source of



information and accepting it at face value, but rather testing your assumptions and triangulating different pieces of information/observations.

## **6. Responding to domestic abuse**

Professionals working with individuals who may be experiencing domestic abuse have a critical role in recognising the signs and responding appropriately. It is essential to approach the situation with care, ensuring the victim feels supported and empowered to seek help.

**Recognise the Signs:** Domestic abuse can take many forms, including physical, emotional, psychological, sexual, or financial abuse. Pay attention to indicators such as unexplained injuries, frequent absences, anxiety, depression, controlling behaviours by a partner or family member, or changes in the person's demeanour. Victims may not disclose abuse directly, so it's important to be alert to subtle signs.

**Create a Safe Environment:** If you suspect domestic abuse, create a safe and confidential space where the individual feels comfortable to speak. Be non-judgmental and listen actively, allowing them to share at their own pace. Avoid pressing for details, as this can overwhelm the victim. Your role is to provide a safe space, not to interrogate or solve the situation immediately.

**Respect the Victim's Autonomy:** While it's natural to want to help, it's crucial to respect the individual's choices. They may not be ready or wanting to leave the situation or take immediate action. Offer options and resources without pressuring them to act in any particular way.

**Immediate Safety Planning:** speak to the victim about how they keep themselves safe and what further support they would like from yourself. Professionals can identify and assess risks by completing a [Domestic Abuse, Stalking, Harassment, and Honour Base Violence \(DASH\) assessment](#) to help work out the risk level being experienced. This checklist acts as an active record that can be referred to in future case management and helps professionals to identify which cases require referral to a Multi-Agency Risk Assessment Conference (MARAC).

**Signpost to Support Services:** Provide information on local domestic abuse services. Ensure the victim knows they are not alone, and help is available, even if they are not ready to engage immediately. It may be useful to offer resources discreetly, ensuring the abuser doesn't discover them.

**Follow Safeguarding Procedures:** If there are immediate risks to the victim's safety, or if children or vulnerable adults are involved, follow your organisation's safeguarding procedures. This may include notifying authorities or other agencies, while keeping the victim informed about the steps being taken if safe to do so (see [Pathways and Referrals section](#) for further information).



By remaining empathetic, supportive, and informed, professionals can offer crucial assistance to victims of domestic abuse.

## **7. Pathways and Referrals**

### **Identification of Domestic Abuse**

Domestic abuse is one of the types of abuse listed within the [Care Act statutory guidance](#). Domestic abuse also encompasses other categories of abuse within the Care Act, including physical abuse, sexual abuse, psychological abuse, financial abuse and neglect. Please ensure you recognise and record the type of abuse correctly. Remember to be professionally curious and explore and understand what is happening within a family or individuals' life rather than making assumptions or accepting things at face value. [4LSAB 7min Guide to Professional Curiosity](#).

### **Care Act (2014) Safeguarding Criteria**

The [4LSAB Safeguarding Concerns Guidance](#) gives detailed information on when to make a safeguarding referral to the local authority, including a flowchart and guidance on what care and support needs are.

You should consider making a safeguarding referral to the local authority if you have reasonable cause to suspect that an adult (under section 42 (1) of the Care Act):

- a) has needs for care and support (whether or not the local authority is meeting any of those needs); and
- b) is experiencing, or at risk of, abuse or neglect

The local authority will consider the referral to see if it meets the above criteria, as well as whether:

- c) as a result of those care and support needs the individual is unable to protect themselves from either the risk of, or the experience of abuse or neglect

If the criteria are met, the local authority has a duty to initiate a section 42 safeguarding enquiry to decide what (if any) action is needed to help and protect the adult. Local authorities also have the discretion to open a section 42 enquiry if the criteria are not met.

Provided it is safe to do so, you should always talk to the adult about your concerns before making a safeguarding referral. Involving the adult in decisions about them, and taking their views and wishes into account, are a key part of 'making safeguarding personal' (see the One Minute guide to [Making Safeguarding Personal](#)).



However, there are some situations where you should make a referral even if you are unable to get the adult's consent. For example:

- If there is a risk to other people (including children or other adults at risk). Note that if children are living in a household with domestic abuse, a referral should always be made to Children's Social Care (see below);
- If a crime has been committed, or action is needed to prevent a crime being committed;
- If seeking their consent would put them at further risk;
- The adult lacks mental capacity to understand the risks to them, and it is in their best interests to take action;
- If you believe the person is refusing support because they are being influenced or coerced by someone else
- If the victim is assessed as being at high risk of domestic abuse then you should refer them to your local MARAC. Their consent is not needed for this

If the person does not give consent to make a referral to the local authority, it does not mean you should 'walk away'. You should still consider what other actions can be taken to reduce the risk that you have identified, who else is, or could be, involved in supporting the adult, and whether you can continue to build trust and rapport with them which may lead to consent in the future.

As a professional, your responsibility does not end when a safeguarding referral is made. Depending on the person's needs and the level of risk, you may still need to make other appropriate referrals, for example, to a Multi-Agency Risk Assessment Conference (MARAC), specialist domestic abuse services, and/or signpost the person to other services. You may need to continue to work with the person on safety planning or addressing other needs they may have.

## **Carers**

An adult who is an unpaid carer may also experience domestic abuse - intentional or unintentional - from the adult they are trying to support. It may be that the carer has their own care and support needs but even if they don't, it may be appropriate to make a safeguarding referral to the local authority who may wish to consider a section 42 enquiry, discretionary enquiry, or use of the MARM framework.

If an unpaid carer is the person using abusive behaviours this may be a result of carer stress or inappropriate expectations of the carer. The Care Act statutory guidance states that assessment of both the carer and the adult they care for must include consideration of the wellbeing of both people to look at appropriate responses for the adult's individual circumstances.



## Multi-Agency Risk Management (MARM) Framework

The [4LSAB MARM framework](#) and [toolkit](#) is designed to provide guidance on managing cases relating to adults where there is a high level of risk and where a multi-agency approach would be beneficial, but where the circumstances sit outside the statutory adult safeguarding framework. This may include risks arising from domestic abuse. Professionals should consider whether the MARM framework is appropriate if the Care Act safeguarding criteria are not met.

## Specialist Domestic Abuse Services

Each local area has specialist commissioned services to support adults experiencing domestic abuse. These may include advocacy, one-to-one or group support, support with stalking, and safe accommodation. Referrals to local specialist domestic abuse services should be considered for adults who do not meet the criteria for safeguarding under the Care Act (for example, adults who do not have any care or support needs). If the risk is high, it may be appropriate to make a referral without consent.

## Mental Capacity

The principles of the Mental Capacity Act (2005) should be applied where the person's behaviour or circumstances cause doubt as to whether they have the capacity to make a specific decision at the time it needs to be made - for example, whether to remain in a relationship, or whether to consent to a safeguarding referral. Further information is available in the [One Minute Guide to the Mental Capacity Act](#).

Professionals should consider how mental health, addiction, physical health conditions, brain injury<sup>1</sup> or perhaps shame about their circumstances may influence what may otherwise be assumed to be 'lifestyle choices'.

In relation to domestic abuse, it is possible that the adult may be experiencing coercive control, which can affect their capacity to make a decision. In these circumstances professionals should consider how they can use the law as a basis for effective intervention. Examples are:

- S42 Family Law Act (1996) - Non Molestation Orders
- S76 Serious Crimes Act (2015) - criminal offence of coercive or controlling behaviour
- Protection from Harassment Act (1997)
- Crime and Security Act (2010) - Domestic Violence Prevention Orders (DVPOs) and Domestic Violence Prevention Notices (DVPNs) - see the additional considerations section below.

---

<sup>1</sup> Recent evidence from Brainkind suggests that half of all survivors of domestic abuse could be living with a brain injury: [Brain injury and domestic abuse - Too many to count report \(brainkind.org\)](#)



As a last resort, an application to the High Court under the inherent jurisdiction may be made. Inherent jurisdiction can be exercised in relation to a vulnerable adult who, even if not incapacitated by mental disorder or mental illness, is, or is reasonably believed to be, either (i) under constraint or (ii) subject to coercion or undue influence.

If, following a formal assessment of an individual's mental capacity which is decision and time specific, it is decided that the person lacks mental capacity, the best-interests decision making process should be followed.

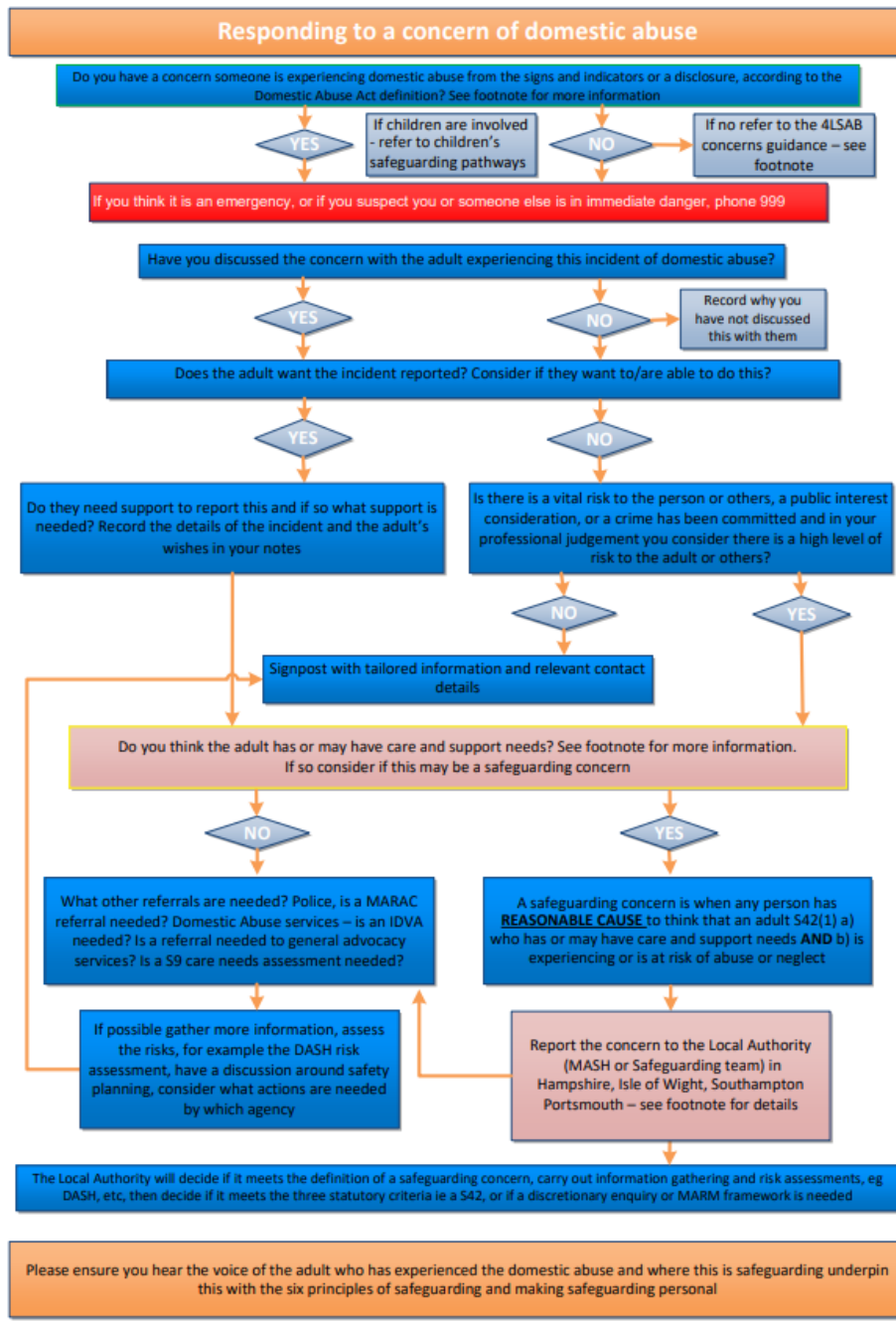
### **Families with children**

The definition of domestic abuse in the [Domestic Abuse Act 2021](#), makes it clear that children are victims of domestic abuse in their own right if they have seen, heard or experienced the effect of the abuse (see definition in section 2 above). If there are children involved, HIPS Guidance on [Safeguarding Children as Victims of Domestic Abuse](#) must be followed. A whole family approach should be taken.



Local pathways

Flowchart - Responding to a concern of domestic abuse<sup>2</sup>



<sup>2</sup> [Domestic Abuse Act definition](#)  
[4LSAB Concerns Guidance](#)

Report the concern to the Local Authority – [Hampshire](#), [Isle of Wight](#), [Southampton](#), [Portsmouth](#)





The referral pathways for each local area are linked below:

- [Portsmouth](#)
- [Southampton](#)
- [Isle of Wight](#)
- [Hampshire](#)

## **8. Adults who use abusive behaviours**

The safety and wellbeing of any adult or child victims should be actively considered at all times when responding to perpetrators.

[Summary of the Child Safeguarding Practice Review Panel annual report 2022 to 23: CASPAR briefing | NSPCC Learning](#) recommends practitioners should be able to identify and respond to domestic abuse, particularly where this is either denied or minimised. Professionals should also be able to recognise how domestic abuse differs from conflict, and how it can manifest in a range of behaviours, including control and coercion and other non-physical violent behaviours.

Key points to consider when engaging adults who use abusive behaviours:

### **Recognition of Domestic Abuse:**

- Differentiating domestic abuse from conflict;
- Identifying various forms of abuse, including control, coercion, and non-physical violence

### **Understanding Risks and Impacts:**

- Assessing short- and medium-term risks;
- Considering long-term impacts on children and the non-abusing parent

### **Multi-Agency Response:**

- The necessity of a coordinated response involving specialist domestic abuse services

### **Challenges for Practitioners:**

- Lack of confidence and skills in engaging with individuals causing harm and holding them accountable;
- Limited understanding of domestic abuse affecting timely and appropriate responses;
- Lack of understanding for how adults who are abusive can use systems to manipulate professionals, influence preferred outcomes, cause further harm, or to maintain or exert control over victims



### **Complexity of Relationships:**

- The need for nuanced understanding and assessment of complex relationship dynamics and victimisation

### **If someone discloses to you that they are using abusive behaviours towards their partner:**

Listen, be non-judgemental, gather as much information relating to their behaviour, circumstances and wellbeing. Should they be open to a referral to a specialist service, assist with this process in a timely manner whilst they are motivated to receive support. Be aware of how perpetrators may not use language that relates to domestic abuse, may refer to issues with anger, or focus on the victims' behaviour and use victim blaming statements. Seek the assistance of the localised commissioned service who supports adults who are abusive to ensure a seamless handover.

### **Should you suspect someone is using abusive behaviour in their relationship, but are not ready to disclose:**

Build rapport, use motivational interviewing techniques to encourage disclosures relating to current stressors, wellbeing, parenting challenges, or relevant pressures relating to the service they are engaged with e.g., substance use, housing, finance etc., with an aim of finding out how these issues impact on their relationships.

### **If you do not have direct contact with the person causing harm:**

Listen to the victim/survivor to understand their fears and what they need to help them feel safe. Should you be concerned the risk is increasing, use professional judgement alongside a Domestic Abuse, Stalking, Harassment and Honour Based Violence (DASH) Assessment to share information with appropriate services.

**Engage** provides a roadmap for frontline professionals interacting with male only perpetrators of domestic abuse. Professionals should seek out learning and training to enhance their confidence and skills to respond appropriately to adults who use abusive behaviours.

Local safeguarding partners are responsible for child protection policy, procedure and guidance at a local level. Working together with other relevant agencies, they must co-ordinate and ensure the effectiveness of work to protect and promote the welfare of children, including making arrangements to identify and support children at risk of harm.



## **9. Additional considerations**

### **Domestic Abuse Disclosure Scheme (DVDS) - Clare's Law**

The Domestic Violence Disclosure Scheme (DVDS) gives members of the public a formal mechanism to make enquiries about an individual who they are in a relationship with, or who is in a relationship with someone they know, where there is a concern that the individual may be violent towards their partner. This scheme adds a further dimension to the information sharing about children where there are concerns that [domestic abuse](#) is impacting on the care and welfare of the children in the family.

Members of the public can make an application for a disclosure, known as the '**Right to Ask**'. Anybody can make an enquiry, but information will only be given to someone at risk or a person in a position to safeguard the victim. The scheme is for anyone in an intimate relationship regardless of gender. Partner agencies can also request disclosure is made of an offender's past history where it is believed someone is at risk of harm. This is known as '**Right to Know**'. If a potentially violent individual is identified as having convictions for violent offences, or information is held about their behaviour which reasonably leads the police and other agencies to believe they pose a risk of harm to their partner, a disclosure will be made.

For further information see [Request information under Clare's Law: Make a Domestic Violence Disclosure Scheme \(DVDS\) application | Hampshire Constabulary](#)

### **Domestic Violence Protection Orders**

Domestic Violence Protection Orders (DVPOs) were implemented across England and Wales from 8 March 2014<sup>3</sup>. They provide protection to victims by enabling the police and magistrates to put in place protection in the immediate aftermath of a domestic abuse or violence incident.

With DVPOs, a perpetrator can be banned with immediate effect from returning to a residence and from having contact with the victim for up to 28 days, allowing the victim time to consider their options and get the support they need.

Before the scheme, there was a gap in protection, because the police could not charge the perpetrator if there was a lack of evidence and so provide protection to a victim through bail conditions, and because the process of granting injunctions took time.

---

<sup>3</sup> The Domestic Abuse Act introduced a new civil Domestic Abuse Protection Notice (DAPN) to provide immediate protection following a domestic abuse incident, and a new civil Domestic Abuse Protection Order (DAPO) to provide flexible, longer-term protection for victims. These are being trialled in other police areas before national roll out.



Domestic Abuse Protection Notices (DAPNs) which provide immediate protection following a domestic abuse incident, and Domestic Abuse Protection Orders (DAPOs) which provide flexible, longer-term protection for victims, have been introduced and are in a pilot phase in a small number of areas across the UK. For further information see [Domestic Abuse Protection Notices \(DAPNs\) and Domestic Abuse Protection Orders \(DAPOs\) guidance - GOV.UK \(www.gov.uk\)](http://www.gov.uk).

### **Domestic Abuse Related Death Reviews (DARDR)**

Domestic Abuse-Related Death Reviews (DARDR), previously named Domestic Homicide Review, under section 9(1) of the Domestic Violence, Crime and Victims Act 2004, is a review of the circumstances in which the death of a person aged 16 or over has, or appears to have, resulted from violence, abuse, or neglect by a person to whom they were related, with whom they were in an intimate relationship, or by a member of the same household. Where a victim died by suicide and there is concern that factors like coercive control or abuse were present in the relationship, a DARDR should also be conducted. These reviews are carried out locally by Community Safety Partnerships (CSPs), which are comprised of agencies and individuals listed under section 9(4) of the 2004 Act. The purpose of these reviews is to identify lessons that can be learned, particularly regarding how professionals and organisations work together to protect and safeguard victims.

### **Domestic abuse in non-intimate relationships**

Non-intimate partner domestic abuse presents unique complexities that can make it harder to recognise, address, and resolve. Unlike abuse in intimate relationships, non-intimate partner abuse may occur between family members, carers, or people in shared living environments, making the dynamics more intricate due to the varied roles and relationships involved.

One major complexity is the emotional or cultural ties within family relationships. Victims may feel obligated to maintain contact with abusive family members out of loyalty, tradition, or a sense of duty, making it difficult for them to break free or seek help. In many cases, cultural norms or expectations surrounding family loyalty and privacy can also discourage victims from reporting abuse, further trapping them in harmful situations.

Another layer of complexity is the dependence dynamic. In cases where the abuse occurs in a caregiving relationship, such as between an elderly person and their carer or a parent and child, victims may rely on the perpetrator for physical support, financial resources, or emotional care. This reliance can create barriers to leaving or reporting the abuse, as victims may fear losing the support they need.

Moreover, abuse in these relationships is often minimised or dismissed by society, as it doesn't fit the stereotypical image of domestic abuse, leading to underreporting



and fewer tailored services. Recognising the full range of non-intimate domestic abuse is critical to providing appropriate support and intervention.

## Protected Characteristics

Protected characteristics, as defined by the Equality Act 2010, include age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation. These characteristics play a significant role in domestic abuse cases, as they can shape a victim's experience of abuse and their access to support.

Domestic abuse can be compounded by discrimination, making some individuals more vulnerable to harm. For example, women, particularly those from minority ethnic groups, LGBTQ+ individuals, or those with disabilities, may face additional barriers in seeking help. Cultural stigmas, language barriers, or fear of discrimination from services can discourage victims from reporting abuse or accessing support. In cases involving protected characteristics, abuse can take specific forms. For example, a person with a disability may experience abuse through the withholding of care or mobility aids. LGBTQ+ individuals may face "outing" as a form of control. Victims from certain racial or religious communities may be subjected to abuse that exploits their cultural or religious beliefs.

Professionals must be aware of these dynamics and ensure that support is accessible, inclusive, and sensitive to the needs of individuals with protected characteristics. Tailored, culturally competent services can help overcome these barriers and ensure that all victims of domestic abuse receive appropriate support.

## Harmful Practices

Harmful practices in domestic abuse cases refer to specific forms of abuse rooted in cultural, societal, or familial norms that cause physical, emotional, or psychological harm. These practices often disproportionately affect women and girls but can impact individuals of any gender. Common harmful practices include forced marriage, female genital mutilation (FGM), so-called "honour-based" violence, and dowry-related abuse. [For more information see the 4LSAB and 4LSCP Multi-Agency Guidance on 'Honour' Based Abuse, Forced Marriage and Female Genital Mutilation.](#) These practices are often justified by tradition or cultural beliefs but are forms of violence and abuse that violate the rights and autonomy of victims. Harmful practices can involve coercion, control, and manipulation, often enforced by family members or community pressure. Victims of such abuse may face severe isolation, fear of rejection from their community, and barriers to seeking help due to cultural or familial loyalty.

Professionals must recognise the signs of harmful practices, as victims may not disclose them directly due to fear or shame. Ensuring culturally sensitive, non-judgmental responses is critical. Victims may require specialised support from



services experienced in addressing these practices, including legal protection, safeguarding measures, and access to safe housing.

Tackling harmful practices requires a multi-agency approach, working with community organisations, legal services, and health professionals to offer holistic support and prevent further harm.