

Home Office Research Study 290

Tackling Domestic Violence: effective interventions and approaches

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Foreword

In 1998 the Home Office announced the Crime Reduction Programme (CRP), which aimed to develop and implement an integrated approach to reducing crime and making communities safer. As part of this programme the Violence Against Women Initiative (VAWI) was launched in July 2000, and specifically aimed to find out which approaches and practices were effective in supporting victims and tackling domestic violence, rape and sexual assault. Thirty-four multi-agency victim focused pilot projects were funded and aimed to develop and implement a range of interventions for various population groups in a number of different settings and contexts. The projects were originally funded until the end of March 2002; however, 24 of these projects had their funding, and in some cases their evaluations extended until the end of March 2003. A further 24 'Round 2' projects were funded in March 2001; however these were provided with money purely for services and were not evaluated by the Home Office.

For evaluation purposes the projects were divided into nine packages, and projects with similar solutions or tactics, or those which were operating in the same contexts, were grouped together. Seven different independent evaluation teams were commissioned to assess the projects in terms of their development, impact and cost. The findings from all of the evaluations have been collated and a series of research reports and concise practitioner guides have been published or are planned.

This report pulls together the findings from the evaluation of the 27 domestic violence projects. The report presents findings and recommendations on which interventions and approaches work to support victims and tackle domestic violence.

Previously published Crime Reduction Programme: Violence Against Women Initiative reports

Domestic violence

Douglas, N., Lilley, S.J., Kooper, L. and Diamond, A. (2004) Safety and Justice: sharing personal information in the context of domestic violence - an overview. Home Office Development and Practice Report No. 30. London: Home Office.

Mullender, A. (2004) Tackling Domestic Violence: providing support for children who have witnessed domestic violence. Home Office Development and Practice Report No 33. London: Home Office.

Parmar, A., Sampson, A. and Diamond, A. (2005) Tackling Domestic Violence: providing advocacy and support to survivors of domestic violence. Home Office Development and Practice Report No. 34. London: Home Office.

Parmar, A., Sampson, A. and Diamond, A. (2005) Tackling Domestic Violence: providing advocacy and support to survivors of domestic violence from Black and other minority ethnic communities. Home Office Development and Practice Report No. 35. London: Home Office.

Taket, A., Beringer, A., Irvine, A. and Garfield, S. (2004) Tackling Domestic Violence: exploring the health service contribution. Home Office Online Report No. 52/04. London: Home Office.

Taket, A. (2004) Tackling Domestic Violence: the role of health professionals. Home Office Development and Practice Report No. 32. London: Home Office.

Rape and sexual assault

Kelly, L., Lovett, J. and Regan, L. (2005) A gap or chasm? Attrition in reported rape cases. Home Office Research Study No. 293. London: Home Office.

Lovett, J., Regan, L., Kelly, L. (2004) Sexual Assault Referral Centres: developing good practice and maximising potentials. Home Office Research Study No. 285. London: Home Office.

Regan, L., Lovett, J., Kelly, L. (2004) Forensic nursing: an option for improving responses to reported rape and sexual assault. Home Office Online Report No. 28/04. London: Home Office.

Regan, L., Lovett, J., Kelly, L. (2004) Forensic nursing: an option for improving responses to reported rape and sexual assault. Home Office Development and Practice Report No. 31. London: Home Office.

Skinner, T. and Taylor, H. (2005) Providing counselling, support and information to survivors of rape: an evaluation of the Surviving Rape and Trauma After Rape (STAR) young persons' project. Home Office Online Report 51/04. London: Home Office.

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Executive summary

Background

In July 2000 the Home Office awarded £6.3 million as part of the £250 million Crime Reduction Programme (CRP) to fund 34 pilot projects that aimed to develop and implement local strategies to reduce domestic violence, rape and sexual assault. Of these 34 projects, 27 focused on domestic violence and seven on rape and sexual assault. The 27 domestic violence projects were split into seven packages according to their main interventions (criminal and civil justice; protection and prevention; Black and other ethnic minorities; health; multi-service; education; and rural work) and were evaluated by teams based at the University of Bristol (with Nottingham, Sunderland and Warwick), University of East London and London South Bank University (both the Criminal Policy Research Unit and the Faculty of Health and Social Care). In this overview material from all the evaluations is used to present the main findings from the 27 CRP domestic violence projects.

Methodology

The key aim of the evaluations of the CRP domestic violence projects was to identify 'what worked' to support victims and tackle domestic violence via an assessment of project design, implementation, delivery, outputs, impact and cost. The evaluation teams used a mixture of quantitative and qualitative methods, which included: 518 interviews with project staff and partner agencies; 174 interviews with domestic violence victims/survivors; 22 focus groups; and 2,935 questionnaires. Quantitative data (gathered mostly through the police) were collected on 80,350 domestic violence victims/survivors, 35,349 domestic violence perpetrators, and 5,687 children living in domestic violence situations.

The collection of comparable data across the project packages was problematic for a number of reasons; however, the ability of projects to evidence 'what works' through evaluation is vital in the development of effective service provision. Lessons learned were: data collection should be negotiated between funders and projects leading to a realistic and 'doable' data collection system (electronic if possible); where possible, a dedicated data monitoring post should be costed on top of service provision costs; more guidance should be made available on the collection of data, with an emphasis on the ability to provide 'trackable' data; and projects should collect as much cost data as possible, record which

interventions the costs relate to and be clear about what the data does and does not include.

Primary prevention: raising awareness and challenging attitudes among young people

Primary prevention for children and young people was conducted within the CRP projects across a range of age groups. It was found that this work was particularly valued when it was student-centred, interactive, with visual input such as drama. There were indications that pupils had increased their awareness of factual information regarding domestic violence; however, some teachers were concerned that such one-off interventions led to short-term impacts. Training for teachers and multi-agency support was important, and cross-curricular approaches reinforced the positive programme impacts.

Recommendations – primary prevention

- Primary prevention programmes should be implemented in both primary and secondary schools.
- Primary prevention should at least be included in the Personal, Social Health and Citizenship Education (PSHCE) curriculum.
- Programmes should ideally be approached from a school-wide perspective with a cross-curricular approach.
- All teachers providing primary prevention programmes should be trained and be confident in using the project materials, including how to handle disclosures.
- For effective implementation, teachers should feel supported to deal with any issues raised through primary prevention via local education authority and multi-agency links.

Supporting women: enabling disclosure

A small number of the CRP projects had interventions aimed at enabling disclosure of domestic violence. Routine enquiry was particularly effective in health care settings, implemented by health visitors and practice nurses. It was also useful in social care services, and may be applied by a wider range of practitioners. Training was important (and should last more than one day), as were good multi-agency relationships and referral systems. Close working relationships with specialist domestic violence agencies such as Women's

Aid are necessary for routine enquiry to enable safe disclosure and provide further support for the women concerned. Routine enquiry was most effectively implemented where practitioners could find ways to incorporate it into their existing patterns of work.

Recommendations – disclosing domestic violence

- Appropriate training should increase awareness about domestic violence, as well as how to ask about it. It should last more than one day, enable exploration of fears and concerns, and provide knowledge and resources including use of safety planning and referral to local advocacy and support services.
- Good multi-agency relationships and referral systems are necessary for routine enquiry to enable safe disclosure and provide further support for the women concerned. Close working relationships with specialised domestic abuse agencies such as Women's Aid, and the police should be established prior to the introduction of routine enquiry.
- Mechanisms need to be in place for all staff to receive information, advice and support via various methods, such as supervision, ongoing reviews and specialist advice/support posts. This might include establishment of a named specialist for domestic violence.

Supporting women to report to the police

Increased numbers of women reported domestic violence to the police when they were supported to engage with the criminal justice system, for example through legal advocacy. This worked well when project workers were based within the police community safety unit or where the police were based within the project (one-stop-shop). Close links between projects and the police also led to an increase in arrest rates and project referrals. Legal support focusing specifically on Black and other minority ethnic women, including workers with minority language skills, increased their engagement with the criminal justice system. Women described a variety of positive police responses, although the 'patchiness' of appropriate police responses to domestic violence still needs to be addressed. The use of photographic evidence appeared to improve arrest rates, increase the number of witness statements and reduce the number of victims withdrawing their statements. However, more research is needed as the findings related to photographic evidence are based on small numbers and did not use a 'matched cases' design.

Recommendations – supporting women to report to the police

- While domestic violence remains an underreported crime, an increase in police recorded domestic violence incidents is a more appropriate performance indicator than a decrease. Projects should therefore aim to increase reported (recorded) incidents in the first instance as an intermediate aim and decrease reported (recorded) incidents as a longer-term aim.
- Projects should work closely with the police and provide specific interventions that support engagement with the criminal justice system in order to increase rates of reporting and arrests.
- More research is needed on the use of photographic evidence and its impact, particularly at the police interview and plea entering stages.
- The ‘patchiness’ of appropriate police responses to domestic violence still needs to be addressed.

Supporting women through the courts

Having close links with good family law solicitors, a legal worker attached to the project and police officers located within the project all enhanced the use of civil remedies. Most projects reduced attrition in the criminal justice system to some extent. Advocacy involving intensive legal and other support enabled women to support the prosecution. Women found it particularly useful when they were accompanied at court and when services were built around a ‘one-stop-shop’ model. Women felt let down where sentences appeared overly lenient, particularly where fines were the only sentence imposed. The provision of training for magistrates led to a higher proportion of custodial sentences. Projects had difficulties finding out the final court outcomes of women they had supported. Projects need to work very closely with the police and Crown Prosecution Service (CPS) and ensure that systems for monitoring cases through the criminal and civil justice systems are priorities at the project development stage.

Recommendations – reducing attrition through the courts

- Systems for monitoring of cases through the criminal and civil justice processes should be one of the first priorities at the project development stage.
- The projects need to work closely with the CPS as well as the police.
- Research into the use of evidence is needed to ensure that witnesses and projects

are recording, and police are collecting and passing on, evidence that will be useful to the CPS.

- Use of advocacy that involves legal, other support and accompanying women to court should form a key element in projects aimed at reducing domestic violence.
- The development of 'one-stop-shops' should be encouraged.

Reducing repeat victimisation

Target hardening and a range of advocacy approaches were applied by the CRP projects in an attempt to reduce repeat victimisation. The women using the projects had histories of higher levels of repeat victimisation than those in comparison groups, but this repeat victimisation generally reduced following project intervention. The approach most effective was the tailoring of advocacy and support to the specific needs of the victim. In a minority of cases project intervention did not reduce repeat victimisation. This occurred where women described feeling more empowered to report to the police, identify what was happening as criminal and/or where the offending was particularly chronic. Overall, target-hardening measures reduced repeat victimisation and also increased women's confidence and sense of safety. Having both a panic alarm and home security had the most impact, but it is important that target-hardening measures are offered within a wider framework of support and alongside regular risk assessments.

Recommendations – reducing repeat victimisation

- Advocacy, support and target hardening should be individually tailored to the needs of the woman and her children's safety.
- Intensive advocacy and support, involving on-going contact with the same worker, should be encouraged for those most at risk.
- Risk assessments should be carried out for all women and children and such assessments should be clear, consistent and regularly reviewed (and changes made to the interventions offered if necessary).
- Attention should be given to perpetrators 'tactic changes' that may occur when target hardening or other safety measures are used.
- Further research on repeat victimisation should use self-report diaries as well as police recorded incidents in order to measure 'true' repeat victimisation.

Supporting women through individual work and groupwork

Individual work, which incorporated 'emotional' and 'general' support, was difficult to conceptualise and evaluate, but played a large role in the work of advocates and outreach workers. Outreach was particularly effective when it was structured, had an agreed plan of action and incorporated support to children. Individual work and groupwork both helped women become more self-aware, recognise their experiences as abuse; and groupwork was useful to help women 'move on' with their lives.

Recommendations – supporting women through one-to-one work and groupwork

- Projects and evaluators should be clear about the intended outcomes of providing 'emotional' and 'general' individual work and develop means of measurement.
- Outreach support should be structured, tailored to the needs of the individual and incorporate support for children.

Conclusions: effective interventions and approaches

An effective approach to children and young people in schools who may or may not be living with domestic violence involves primary prevention in schools, one-to-one work and groupwork. For women who are experiencing domestic violence but not actively seeking help publicity campaigns, routine enquiry, outreach and support to help them report to the police are needed. The interventions forming an effective approach for women who are actively seeking help and who have been subject to repeat victimisation are publicity campaigns, outreach, advocacy, support to engage with the criminal and civil justice systems, help to stay safe and individual and groupwork to help them 'move on.'

Recommendations

Children and young people in schools who may or may not be living with domestic violence

- Primary prevention in schools: this should involve a cross-curricular approach and include student-centred interactive lessons on relationships and abuse, visual input such as drama, plus training for teachers and multi-agency support.
- Individual and group work: specific support for children and young people should include work on being safe, self-esteem, feelings and past experiences, school and family, as well as use of video input and discussion. Group work may be

preceded by one-to one work and be more appropriate for those already in a safe environment.

Women who are experiencing domestic violence but not actively seeking help

- Publicity campaigns: These should use a wide range of media such as radio, television, posters and stickers. They should aim to educate local residents and staff across agencies that domestic violence is a public crime, and indicate local sources of support. Targeted publicity for Black and other minority ethnic women should be included.
- Routine enquiry: this may effectively be carried out by health and other practitioners regularly seeing women on their own. It requires at least one day of training for practitioners in awareness of domestic violence and how to ask about it as well as good multi-agency relationships and referral systems. The Duluth 'power and control' and 'equality' wheels can be useful tools to enable women to recognise they are in an abusive relationship.
- Outreach: this should involve advocates or outreach workers regularly visiting community groups and agencies to discuss domestic violence and publicise local projects/support, as well as aiding development of close multi-agency referral systems. Outreach should also be targeted at Black and other minority ethnic women where appropriate.
- Supporting women to report to the police: this requires advocacy that includes legal support and close links with the police. Police should collect a wide range of evidence including photographic evidence.

Women who have been subject to repeat victimisation, and who are actively seeking help

- Publicity campaigns: these should use a wide range of medium such as radio, television, posters and stickers to publicise local sources of support, and should include targeted publicity for Black and other minority ethnic women.
- Outreach: this should include advocates or outreach workers regularly visiting community groups and agencies to provide a link to local projects/support for women in rural areas and other isolated communities, and with targeted outreach for Black and other minority ethnic women where appropriate.
- Advocacy and support: together advocacy and support should be wide ranging, pro-active, holistic and comprehensive, and preferably based in a one-stop-shop. Advocates should help women navigate the criminal and civil justice systems and others agencies as they attempt to access needed resources. Women should have the same advocate or support worker available over time, who may focus on their specific needs and enable them to deal with fear and safety issues. Workers may assist women end their emotional attachments to the violent partner by

encouraging them to invest emotionally in learning new life skills and skills which assist them in finding paid employment.

- Supporting women to engage with the criminal and civil justice systems: advocacy should include legal and emotional support, and close links with the police, CPS, and with family law solicitors should be established. Women should be accompanied by an advocate to court. Police should collect a wide range of evidence including photographic evidence. There should be training on domestic violence and multi-agency links for magistrates and judges.
- Staying safe: advocates, support and outreach workers should carry out regular risk assessment with women and their children, including assessing potentially changing tactics by perpetrators. Safety planning should be carried out. Target hardening measures should include panic alarms and home security.
- Moving on: once women have been able to deal with immediate issues and are ready to 'move on' they should be offered group work to enable them to deal with emotional issues arising from the domestic abuse and to meet other women with similar experiences. Groupwork should take a structured approach and preferably be at least ten weeks in length.

Conclusions: research and evaluation

Recommendations: evaluation measures and approaches

- While domestic violence remains an underreported crime, an increase in police recorded domestic violence incidents is a more appropriate performance indicator than a decrease. Projects should therefore aim to increase reported (recorded) incidents in the first instance as an intermediate aim and decrease reported (recorded) incidents as a longer-term aim.
- Data gathering and analysis in order to assess attrition is key to the evaluation of projects involving legal advocacy. Being able to track cases from police report to final outcome is a crucial aspects of this. Setting up systems to allow attrition to be easily reviewed on a regular basis should be one of the first priorities at the project development stage. It may be difficult to sustain reductions in attrition in the longer term and regular reviews of the various stages and, crucially, acting on the results are important in this respect.
- Evaluation approaches to assess attrition should also use and record the impact of evidence on pleas entered and court outcome. This would address the question raised in this overview of how much/what evidence is needed to 'prove' domestic violence in court and might help prevent evidence being used by the defence specifically with the aim of discrediting witnesses.

- Further research on repeat victimisation should use self-report diaries as well as police recorded incidents in order to measure 'true' repeat victimisation.

Future areas for evaluation and research

- More research is needed on the use of photographic evidence and its impact, particularly at the police interview and plea entering stages. This should use a 'matched cases' design.
- Research into the use of evidence is needed to ensure that witnesses and projects are recording the required data and the police are collecting and passing on evidence that will be useful to the CPS.
- Further evaluation of groupwork is needed, particularly in relation to the use of group work for children.

1.

Background and methodology

The Crime Reduction Programme: Violence Against Women Initiative

In 1999 the Home Office and the Women's Unit of the Cabinet Office published *Living Without Fear – an Integrated Approach to Tackling Violence against Women* in which they set out the Government's agenda on violence against women. This was followed by the *Domestic Violence: Break the Chain* leaflet, poster and multi-agency guidance. More recently, in June 2003, *Safety and Justice: The Government's Proposals on Domestic Violence* was published, followed at the end of the year by the *Domestic Violence, Crime and Victims Bill*; the funding of a new 24-hour national help line for victims and survivors¹ of domestic violence² and a help line for domestic violence perpetrators.³ Alongside these publications and interventions, the Violence Against Women Initiative has constituted a major development in the attempt to reduce domestic violence and rape, placing them firmly on the public and social policy agenda.

The Violence Against Women Initiative (VAWI) was part of the £250 million Home Office Crime Reduction Programme (CRP); it was an evidence-based programme that aimed to develop an integrated approach to reducing crime and increasing community safety. As part of this programme, the VAWI specifically aimed to find out which approaches and practices were effective in supporting victims⁴ and tackling violence against women.

In February 2000 the Home Office issued the VAWI prospectus and invitation to tender along with guidance on data collection requirements.⁵ In April, 215 bids were received from a range of partnerships, from which 42 projects were short-listed.⁶ In July 2000 the 34 successful multi-agency victim-focused pilot projects were announced with £6.3 million funding attached (27 relating primarily to domestic violence and seven to rape and sexual assault).⁷

-
1. In this report the terms victim and survivor are used interchangeably. This is generally reflective of the terminology used by the project or agency being discussed, for example the term victim is generally used in terms of police data, and survivor for an agency supporting women who have left a domestic violence perpetrator. The terms woman/women are used throughout the report because few projects provided services to and/or had referrals from male victims of domestic violence.
 2. Free phone 0808 2000 247 (run by Women's Aid and Refuge).
 3. Limited hours, telephone 0845 1228609 (run by Respect).
 4. The CRP VAWI did not fund projects directed at perpetrators.
 5. See www.homeoffice.gov.uk/rds/violencewomen.html
 6. Each of the short-listed projects were visited and assessed by a representative from the Home Office and many projects were asked to submit a revised bid.
 7. Two of the rape and sexual assault projects concerned with young people were included in the 'education package' evaluated by Canterbury Christ Church University College as they had comparable interventions to the domestic violence projects.

The Regional Government Offices had responsibility for managing the projects at a local level and for administering the grants. In addition, the Home Office recruited a number of professionals to act as 'project developers'. The job of the developers was to ensure the projects were successfully implemented and were able to supply evaluation teams with the required data.⁸ A good practice discussion website was established to provide a virtual forum for the projects to raise issues and discuss problems and possible solutions⁹ and a conference was held in November 2001 to bring the projects together to enable networking and the sharing of good practice.

This overview focuses specifically on the 27 CRP VAWI projects concerned with tackling domestic violence¹⁰, drawing on material from the evaluations¹¹, with an emphasis on the eight projects evaluated over two years. It presents key findings as well as the approaches and practices found to be most promising in reducing domestic violence.

Literature

Prior to the establishment of the CRP projects, reviews of the literature and reports of individual studies were commissioned by the Home Office in spring 1999 to investigate what was already known to be effective in reducing domestic violence.¹² The reviews and reports covered those involved with and affected by domestic violence (in particular women, children and male perpetrators); responses by a wide range of criminal justice and other agencies; and the monitoring of cost. The reviews identified a wide range of existing good practice (although much of it not evaluated), measurements for evaluation and key areas for further development. These were used to underpin the development of the CRP projects and to help agencies and multi-agency partnerships wanting to apply for project funding. In Appendix 1 some of the main findings from these reviews and reports are outlined.

8. From around September 2000 to March 2001 a developer (some developers worked in pairs) was assigned to each project. They provided professional support and advice and generally acted as a 'sounding board' for both the project and the Home Office in the early stages of the projects' development. Initially the developers held a workshop with all the projects in a package to encourage the projects to network and disseminate existing good practice. After this initial workshop the developers worked with individual projects as and when required.

9. Unfortunately not many projects used the website. This was partly due to projects not being familiar with websites, not having the time or not being able to access the site.

10. The findings from rape and sexual assault projects are reported elsewhere (Lovett, Regan and Kelly, 2004; Regan, Lovett, and Kelly, 2004a; Regan, Lovett, and Kelly, 2004b; Skinner and Taylor, 2005; Kelly, Lovett, and Regan, 2005).

11. In order to credit the individual evaluation teams and the projects themselves with work carried out, wherever possible sources are made obvious by reference to the project sites or specific evaluations.

12. The reviews were summarised into a set of briefing notes, Reducing Domestic Violence ... What works? (available at www.homeoffice.gov.uk/rds/violencewomen.html). These were later written up and extended (Taylor-Brown, 2001).

In this overview, given the extensive literature reviews that already exist with regard to domestic violence, literature relevant to the content of the individual chapters is discussed, but a comprehensive or detailed review of the literature is not provided.

The project packages

For the purposes of evaluation the 27 CRP domestic violence projects were divided into seven separate 'packages' covering:

- criminal and civil justice;
- protection and prevention;
- Black and other minority ethnic communities;
- health;
- multi-service;
- education; and
- rural.

These 'packages' were based on the main interventions being implemented, although were by no means discrete, with many areas of overlap. The seven 'packages' were independently evaluated by teams of researchers appointed by the Home Office from the Universities of Bristol (with Universities of Nottingham, Sunderland and Warwick), University of East London and London South Bank University (both the Criminal Policy Research Unit and the Faculty of Health and Social Care). The eight projects in the multi-service and Black and other minority ethnic communities (BME) packages were evaluated for two years. The remaining projects were only evaluated for one year, as they were unable to provide the level of data required for ongoing evaluation.

Table 1.1 below gives a very brief description of the 27 projects from the seven packages.¹³

13. A more in-depth description is available at www.homeoffice.gov.uk/rds/violencewomen.html

Table 1.1 Overview of CRP domestic violence projects

Package	Project names & locations	Evaluation team	Key aims and interventions
Criminal and civil justice	<ul style="list-style-type: none"> ❑ Intimidated Witness Support Service (Brighton) ❑ West Somerset Cameras (Taunton) ❑ Standing Together Making the Law Work for Women and Standing Together Health project (Hammersmith & Fulham) ❑ Co-ordinated Community Response (Gloucestershire) 	<p>Criminal Policy Research Unit, South Bank University, London¹⁴</p>	<p>To decrease police and Crown Prosecution Service (CPS) discontinuance levels and increase the number of individuals prosecuted and convicted, improve safety, increase the number of appropriate arrests, increase the number of initial reports and decrease repeat victimisation reports by a mix of interventions including using cameras to collect evidence, awareness raising, training of police and magistrates, court advocacy, telephone helplines, drop-in services and the provision of mobile phones and alarms.</p>
Protection and prevention	<ul style="list-style-type: none"> ❑ Use of Cameras and Development of a Multi-agency Database (Thurrock) ❑ South Wales Alarms (Rhondda Cynon Taff) 	<p>Criminal Policy Research Unit, South Bank University, London¹⁵</p>	<p>To reduce repeat victimisation and the fear of repeat victimisation, enable women to stay in their own homes and provide an improved and more integrated service to those experiencing violence through the use of alarms, cameras to collect evidence and 999-linked phones.</p>
BME	<ul style="list-style-type: none"> ❑ Reducing Domestic Violence Project (Birmingham) ❑ Victim Advocacy and Safety Counselling (Lower Hamlets) ❑ Domestic Violence Advocacy Service (Croydon) 	<p>University of East London¹⁶</p>	<p>To raise awareness in Asian and other BME communities, reduce the incidence of violence and repeat victimisation, empower women to use criminal and/or civil measures and prioritise safety by providing culturally and linguistically sensitive services including advocacy, safety planning, publicity, risk assessment and support.</p>

Health	<ul style="list-style-type: none"> <input type="checkbox"/> Early Intervention Project (North Devon and Torridge) <input type="checkbox"/> Enhanced Evidence Gathering Scheme (Salford) <input type="checkbox"/> Domestic Violence Programme (south west Birmingham) <input type="checkbox"/> Primary Care project (Wakefield) 	Faculty of Health and Social Care, South Bank University, London ¹⁷	To reduce repeat victimisation, improve partnership working, raise awareness amongst health professionals, encourage safe disclosures in health settings, improve access to support, improve recording with a view to encourage the use of criminal and civil law by screening, training and awareness raising, recording and monitoring, developing protocols, referring women to appropriate services, survivor resource pack and cameras to record injuries.
Multi-service	<ul style="list-style-type: none"> <input type="checkbox"/> Staying Put (Bradford) <input type="checkbox"/> Safety Net (Camden) <input type="checkbox"/> Multi-agency domestic violence project (Cheshire) <input type="checkbox"/> Sunflower Centre (Northampton) <input type="checkbox"/> Tools for Practitioners (Suffolk) 	School for Policy Studies, University of Bristol ¹⁸	To increase initial reporting, reduce repeat victimisation, encourage use of criminal and civil law and increase prosecutions, increase women's self-esteem, collect comprehensive data, develop multi-agency working and increase women's safety through the development of screening tools, outreach, crisis intervention, alarms, locks, 999 linked phones, cameras to collect evidence, helpline, legal and court support and awareness raising.
Education and awareness	<ul style="list-style-type: none"> <input type="checkbox"/> Violence Against Women project (Bridgend) <input type="checkbox"/> NSPCC Patchwork Initiative (North Yorkshire) <input type="checkbox"/> STAR project (Southampton) <input type="checkbox"/> Respect Initiative (Thurrock) 	Canterbury Christ Church University College ¹⁹	To raise awareness, change complacent attitudes and decrease tolerance towards physical and sexual violence by schoolchildren and professionals and challenge sexist attitudes, behaviour and language through curriculum delivery, media campaigns, drama and websites.

Rural	<ul style="list-style-type: none"> <input type="checkbox"/> DARP (Buxton) <input type="checkbox"/> Domestic Abuse Project (Hastings & Rother) <input type="checkbox"/> StOP (Stratford) <input type="checkbox"/> Support Workers Project (St. Austell) 	<p>Criminal Policy Research Unit, South Bank University, London²⁰</p>	<p>To develop a more effective multi-agency approach, more accessible information and tailored advice and assistance through a rapid response crisis intervention team, support service, outreach, training and awareness raising.</p>
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14. Todd, Sharma, Jordan (PIA), Hedderman and Magill.
 15. Todd, Hedderman, Sharma, Jordan (PIA) and Williams (University of Bristol at time of evaluation).
 16. Ahmed, Parmar, Sampson, A., Sampson, T. and Jordan (PIA).
 17. Taket, Beringer, Irvine, Garfield.
 18. Malos, Hague and Hester (University of Sunderland at time of evaluation), Mullender (University of Warwick at time of evaluation), Thiera (University of Warwick), Morley (University of Nottingham), Crisp (consultant) and Westmarland (consultant).
 19. Parsons, Foster, Hout, Papatheodorou, West, plus Matrix Consultancy: Goswami, Talow, Cooper and Burrowes.
 20. Thompson, Sharma, Hedderman, Magill, Jordan (PIA), and Williams (University of Bristol at time of evaluation).

Evaluation approaches

All evaluation is based on comparison and seeks to find out the extent to which any improvements noted might be attributable to interventions used. The purest form of evaluation, the experimental approach involving random controlled trials (RCT), was deemed neither ethical nor possible in relation to the CRP domestic violence projects since it was not appropriate to withhold from half the women in contact with projects interventions that had been put in place to maximise safety.

Instead, other forms of comparison were used where available, involving baselines to measure change over time from before the start to the end of the evaluation period and/or by comparing one intervention or one context with another. Some of the evaluation teams, for example the University of South Bank 'health' team and University of Bristol 'multi-service' team, also included an action research approach (Winter and Munn-Giddings, 2001), with facilitative co-operation between the projects and evaluators and feedback to project management teams.

The key aim of the evaluations of the CRP domestic violence projects was to identify 'what worked' to support victims and tackle domestic violence via an assessment of project design, implementation, delivery, outputs, impact and cost. To this effect the evaluations took into account wherever possible the inputs, outputs, outcomes and processes involved. This involved the gathering of both quantitative and qualitative data to increase the validity and reliability of the findings. For all of the projects this included collection and analysis of at least some of the following data:

- surveys and/or interviews with service users;
- interviews with project staff, volunteers and professionals from partner agencies;
- project case files;
- project databases and monitoring sheets;
- project visits and observations;
- observation at training days and meetings;
- police records;
- Crown Prosecution Service (CPS) files or other data relating to prosecution and court outcomes; and
- documentation and policy directives relating to the local contexts, such as demographics and community safety strategies.

Altogether, the amount of data collected included: 518 interviews with project staff and partner agencies; 174 interviews with domestic violence victims/survivors; 22 focus groups; and 2,935 questionnaires. Victim data were collected in relation to 80,350 incidents (gathered mostly through the police); perpetrator data in relation to 35,349 incidents; and information on children in relation to 5,687 incidents. The data are detailed by project package in Appendix 2.

Comparisons of interventions across the CRP projects and within packages tended to be carried out where possible based on the specified aims of each project and measurement of whether and to what extent they had achieved these aims. In this overview this has been extended by more generally examining and comparing projects with similar interventions.

Definitions and data

The definitions of domestic violence that were used by the projects varied.²¹ Most adopted definitions that included violence from ex/partners but not violence from other family members, in line with the way the Home Office defined domestic violence when the projects started.²² However, the Home Office and projects used a different definition of domestic violence to the police²³ and the CPS²⁴, who both include violence from other family members within their definition. This caused problems in the evaluations, as it was not always clear what definition had been used in the collection and collation of project and other data. Some projects had separated out these different aspects of the data, but others had not done so. It was not always clear to which definition the data related (this was particularly the case for aggregate police data). For example, the proportion of 'other family members' included in the multi-service package data varied from 0-7 per cent in project data (the variation being due to the definition of domestic violence adopted by the projects) compared to 0-26 per cent for police data (the variation being due to whether it was possible to separate incidents involving ex/partners from other family members).

21. Defining domestic violence was not simply a paper exercise for most of the projects because the definitions set the boundaries for who the projects did and did not provide services for.

22. The 2000 Home Office definition was: 'Any violence between current and former partners in an intimate relationship, wherever and whenever the violence occurs. The violence may include physical, sexual, emotional and financial abuse.'

23. Association of Chief Police Officers (ACPO) define domestic violence as: 'Any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are or who have been intimate partners or family members, regardless of gender.'

24. The CPS define domestic violence as: 'Any criminal offence arising out of physical, sexual, psychological, emotional or financial abuse by one person against a current or former partner in a close relationship, or against a current or former family member.'

A report from Her Majesty's Inspectorate of Constabulary (HMIC) and Her Majesty's Crown Prosecution Service Inspectorate (HMCPSI), on domestic violence, recommended that a common definition should be adopted across the Association of Chief Police Officers (ACPO), the CPS and the Home Office (HMIC and HMCPSI, 2004). In 2004 the Home Office adopted a new definition of domestic violence that includes family members.²⁵ This will help with consistency in future research and evaluations, although it will remain important to be able to disaggregate incidents into ex/partners and other family members for analytical purposes.

Access to data

'Core' and 'trackable' data

Having comparable data across projects and packages was central to understanding 'what works' across the VAWI and the whole of the CRP. Although the evaluation teams were responsible for assessing the impact of the individual projects, the Home Office facilitated the collection of multi-agency 'core' data. These 'core' data represented the minimum level of data required, and these data were to be supplemented by project specific data collected by the evaluation teams. The aim was for each project to collect the same 'core' data to enable package and overall comparisons to be made. The collection of this data was a condition of project funding and the projects were given guidance on data collection in *Guidance for agencies: collecting and managing data* (Home Office, 2000). The establishment of baseline data is important to monitor progress (The Audit Commission, 1999), however few projects had such data. Some projects had not existed prior to the CRP funding, while others had never routinely collected data. One of the main roles of the project developers was to assist projects in creating the projects' data collection systems and to work towards establishing baselines.

Despite attempts by the Home Office to facilitate the collection of 'core' data, few projects managed to meet these data requirements. For some projects this was because they found it too time consuming to collect the large amount of data required. The evaluators found that they often had to act as mediators between projects who viewed the data collection as burdensome and the Home Office who wanted to ensure that the evaluations were able to provide lessons on 'what works'. Only a few projects appeared to fully understand the benefits of collecting data for the evaluations. At the same time, some of the projects' work was primarily 'crisis driven' and workers often had to balance the collection of data with

25. The 2004 Home Office definition is: 'Any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are or have been intimate partners or family members, regardless of gender or sexuality.'

supporting women who may be in very dangerous situations. While some of the projects were willing to collect data, many found they did not actually have the capacity to do so. Projects that received funding from sources other than the CRP sometimes had additional data commitments placed upon them. Some projects found data collection easier than others. This was the case for projects that built upon already established projects, particularly where multi-agency data sharing protocols were in place prior to the CRP funding. This worked especially well where projects included data monitoring as a specific intervention with a dedicated post.

All of the projects had problems providing 'trackable' multi-agency data: that is the ability to 'track' women to match them to other agencies' databases using anonymised identifiers. Few projects, for instance, were able to 'track' which of the police, CPS or court outcomes related to women who were using the CRP projects. Many of the projects related their lack of 'trackable' data to concerns around the Data Protection Act 2000. In 2004 the Home Office responded to these concerns by publishing guidance on the sharing of data in relation to domestic violence (Douglas et al., 2004).

Cost data

The projects were also required to collect 'input' cost data to allow the evaluators to conduct a cost-effectiveness analysis and the Home Office to calculate the cost/benefit ratio.²⁶ The input costs to be collected were:

- personnel related costs: type and number of staff involved in the project, staff hours (standard, overtime and voluntary), details on the facilities and equipment that staff used (e.g. office space, IT equipment);
- training costs: for staff involved in the project;
- equipment: purchased or appropriated for project;
- premises: office and other space used for the project (excluding space used by staff included within the personnel related costs section);
- transport: vehicles and public transport used for the project;
- advertising and publicity: type and cost of any advertising associated with the project; and
- other overheads: other resources not covered within the previous sections.

26. As outlined in Home Office guidance documents (Dhiri and Brand, 1999; Legg and Powell, 2000; Brand and Price, 2000).

The intention was to record all costs and whether they were: CRP funded or non-CRP funded; purchased or donated; paid or voluntary; ongoing or one-off relating to the setting up of the project. These costs should then have been attributed percentage-wise to the projects' interventions in order to produce an estimate of how much it would cost to replicate the project or any individual intervention elsewhere.

None of the projects were able to collect the cost related input data in the detail required. This was because the projects did not fully understand what was required and/or felt that it was too much of a burden to collect such a large quantity of data. This was also found by the CRP rape and sexual assault projects and prostitution evaluations (Lovett, Regan and Kelly, 2004; Hester and Westmarland, 2004) and was echoed to different degrees across the whole of the CRP (Stockdale and Whitehead, 2003).

Although all of the evaluations teams produced some level of cost-effectiveness analysis, it is not included in this report. When it became clear that the projects were not able to collect all the cost data required evaluators negotiated with the projects as to what they could and could not provide. Most projects were able to provide some information on how the CRP funding had been spent, however few knew the amount of non-CRP project funding or the cost of the time that partner agencies spent working on the project. Costing the amount of time that volunteers worked on the projects also proved difficult. These costs are necessary to conduct a reliable cost-effectiveness analysis and/or cost-benefit analysis and it was felt that to include costs in this report would have been misleading. To give a simplistic example, the outputs and outcomes of a project with two members of CRP funded staff are likely to be very different when compared to a project with two members of CRP funded staff, a dedicated, non-CRP funded police officer and 15 volunteers. However, the recorded CRP costs would be the same. Some evaluation teams did include non-CRP costs, however it was not clear where the boundaries had been drawn (e.g. were all non-CRP funded costs included or just non-CRP project funding?).

Walby (2004) has produced the most up-to-date and wide-ranging analysis of the current cost of domestic violence in Britain. Centred on the year 2001, she estimates the cost of domestic violence for one year in England and Wales to total £23 billion. Broken down, this amounts to £3.1 billion in costs to the state, £1.3 billion to employers and £17 billion in the cost of human and emotional suffering. Collecting data on project costs can be a valuable exercise for projects to show how their work may reduce these costs of domestic violence. The collection of such data should be informed by useful guides that have been produced and which are specific to domestic violence projects (Crisp and Stanko, 2000).

Lessons learned

The lessons learned through the VAWI in terms of data collection are important. The ability of projects to evidence 'what works' through evaluation is vital in the development of effective service provision. The problems encountered indicate that the following changes should be carried out.

- Data collection should be negotiated between funders and projects. These negotiations should lead to a realistic and 'doable' data collection system (electronic if possible).
- Where possible, a dedicated data monitoring post should be costed on top of service provision costs.
- More guidance should be made available on the collection of data, with an emphasis on the ability to provide 'trackable' data.²⁷
- Projects should collect as much cost data as possible, record which interventions the costs relate to and be clear about what the data does and does not include.

Measuring 'change'

Where possible and appropriate, in this overview the following measures of change were used. These drew mainly on quantitative data:

- changes in the volume of police recorded incidents;
- changes in the level of repeat victimisation;
- changes in criminal and civil justice outcomes; and
- changes in attitude.

These measures were supplemented and triangulated by qualitative data from interviews with project users, with project staff and other professionals, and in some instances by data from case files.

The extent to which comparison groups were used in order to measure change varied across the CRP project packages, with different evaluators using different approaches. The South Bank University team evaluating the 'health' package felt that it was not appropriate to use comparison groups. Their decision was based on a lack of available baseline and other existing data, the short implementation time available (the evaluation period was only one year) and

27. A practical guide to collecting domestic violence data is available from NACRO (Hall and Wright, 2003). The Home Office plan to publish a good practice guide on data monitoring and data capture systems that draws upon the findings from the CRP VAWI.

ethical issues arising from the involvement of women who had used the project services. They did, however, attempt a more limited internal comparison between those service users who obtained help from the projects, and those who did not receive support. Other teams managed to include comparison groups by using both police and project data to compare the outcomes for women who had used the projects. For instance, the University of Bristol 'multi-service' evaluation team construed as a comparison group those who had experienced domestic violence but had not used the project. Other evaluation teams, such as the University of East London 'BME' team, created 'before' and 'after' samples to assess the impact of the projects. The South Bank University 'criminal and civil' evaluation team established comparative data on uptake of legal provisions amongst victims by examining incidents known to advocates but which had not been reported to the police, and the cases referred by the police subsequent to such a report. Interviews with service users were an important part of all these approaches.

Assessing process

Examining the processes involved in the implementation of the projects and their interventions was also important. This included an examination of: the development of the projects; where accountability rested; whether or not agencies were co-operating effectively; and the balance of statutory and voluntary sector participation. Domestic violence is a complex issue requiring complex responses, and multi-agency working has been found to be a key aspect of effective work: as also recognised in policy (Hague, 2001; Hague et al., 1996; Home Office, 2003). Multi-agency working was a feature in all of the CRP domestic violence projects, and assessment of levels and forms of involvement formed part of the process evaluation.

In this overview it is not possible to discuss process issues in any depth due to lack of space. It was clear, however, that involvement of senior staff and effective multi-agency links were key to successful implementation.

Who were using the CRP projects?

Appendix 2 provides a detailed picture of who was using the CRP domestic violence projects, including comparison with British Crime Survey (BCS) (Mirrlees-Black, 1999; Walby and Allen, 2004), and other national data. In summary the picture was as follows:

- the majority of project users were women (96%);

- the majority of project users were experiencing domestic violence from a partner or ex-partner (94%);
- the population of women using the projects were older than would be expected based on BCS findings;
- the majority of project users were White, however the projects that employed Asian workers and/or targeted project information towards Asian women all had higher proportions of Asian project users than those that did not;
- over six in ten (63%) of the project users were known to have children living with them; and
- project users were over-represented in relation to Local Authority/Housing Association/refuge accommodation.

About this overview

Prior to the CRP VAWI, criminalisation of domestic violence perpetrators and the provision of support to women experiencing domestic violence, within a context of multi-agency working, was identified as likely to be the most effective approach. Moreover, the work should be woman-centred (or victim-centred), and with the recognition that women do not always or necessarily want to pursue criminal justice remedies themselves. From the evaluations of the CRP projects it was possible to examine some aspects related to these issues. It was possible to examine whether particular strategies aimed at supporting women might increase use of criminal or civil remedies, and whether repeat victimisation might be reduced (Chapters 4, 5 and 6). It was also possible to examine whether attrition through the criminal justice system might be reduced via interventions involving training and/or links between agencies (Chapters 4 and 5).

The evaluations of the CRP VAWI domestic violence projects have allowed evaluators to look at primary prevention and support in relation to children and young people (Chapter 2), use of routine enquiry by health and other professionals (Chapter 3), and a range of advocacy approaches, including outreach, support for women actively seeking help, and follow-on support (Chapters 4 to 7). The overview concludes in Chapter 8 by discussing key findings and recommendations for the effective tackling of domestic violence.

2. Primary prevention: raising awareness and challenging attitudes among young people

Introduction

The discussion of the findings from the CRP domestic violence projects begins with a look at the use of primary prevention. Primary prevention is a long-term strategy aimed at preventing violence from ever happening by changing the attitudes, values and structures that sustain inequality and violence. Investing in primary prevention demonstrates a commitment to combating gender discrimination and creating safer environments for children and adults to speak about their experiences.²⁸ In the CRP projects two aspects were related to primary prevention: general raising of awareness of domestic violence through publicity campaigns aimed at both prevention and disclosure; and work in schools to build awareness and change attitudes. This chapter focuses primarily on the second of these – the primary prevention activities directed at schools.

Awareness Campaigns

Although a number of projects included general awareness raising campaigns among their interventions, there was not much data available regarding the impact of these. Publicity campaigns in some of the project areas appear to have impacted on reporting of incidents to (or recording by) the police (see Chapter 4). This appeared to be the case in both the Rhondda Cynon Taff and Stratford project areas. Also, in Stratford more individuals were entered onto the project database during the quarter that the awareness campaign was running than at any other time. In Thurrock a mass media campaign on buses and on adshels was followed up by a public awareness survey. Seventy people were approached with 49 replies, and it was found that the vast majority (30/49, 61%) thought that the campaign had 'probably' had an influence or that they 'agreed' that it had.²⁹

28. What might also be termed 'secondary' and 'tertiary' prevention (Mullender, 2001).

29. In Suffolk a Countywide awareness campaign was undertaken in the final year of the CRP project. The project intended to carry out a community impact survey, but this did not happen and it was not possible to evaluate this work.

Primary prevention in schools

With regard to primary prevention in education settings, previous research indicates that violence prevention programmes may change attitudes (Hague et al., 2001).³⁰ What is less well known is whether there is a link between raised awareness and any long-term impact on violence reduction. The growing evidence on child witnesses and resilience suggests, however, that supportive anti-violence work in schools may play a role in setting out guidelines for healthy relationships (Mullender, 1994, 2001). Research in relation to children has not only found that children may be affected (in the long or short term) by living in circumstances of domestic violence, but that children may also be resilient in ways that enable them to survive and overcome (at least some of) these negative impacts (Garbarino, 1992; Edleson and Tolman, 1992; Hester et al., 2000). Garbarino, for instance, notes that 'we have the fact that children survive such danger and may even overcome its challenges in ways that enhance development' (Garbarino, 1992: 35). The idea of primary prevention in schools builds on this knowledge.

Violence in relationships tends to be directed by men against women, and previous research also indicates the importance of addressing especially boys' but also girls' attitudes and understanding of violence in relationships. Research in Scotland by Burton et al. (1998) for the Edinburgh Zero Tolerance Trust found that in relation to adolescents, boys were much more likely to condone the use of violence against women in relationships. These findings were echoed in a more recent national study with a younger age group, that involved a survey of 1,395 children aged 8-16 and follow-up interviews (Mullender et al., 2002).³¹ Moreover, boys are more likely to engage in physical harassment and violence than girls and are required to maintain a code of silence about misdemeanours of their fellows (McCarry, 2004). However, tackling this gendered aspect of domestic violence with young people can be difficult, and Suderman et al. (1995) caution that students may perceive violence prevention programmes as 'male bashing'.

To date there has been little, if increasing, reflection of these issues in relation to policy in the UK. The Department for Education and Science (2000) Sex and Relationships Guidance suggests that Sex Related Education (SRE) be dealt with in the PSHCE (Personal, Social, Health and Citizenship Education) curriculum where related topics arise. However, while bullying and self-esteem figure in the themes, there is nothing specifically about violence against women. Recent Government information and consultation documents regarding

30. For instance in Ontario, Canada, violence prevention has been mainstreamed in schools with policies on staff behaviour, the curriculum as well as community involvement. Research with the young people involved indicates a positive change with regard to respect in relationships (Hague, Kelly and Mullender, 2002).

31. Interviews with 54 children who had lived with domestic violence, with 24 mothers and with 14 practitioners.

domestic violence have none-the-less begun to recognise these issues. For instance, both *Living Without Fear* (Cabinet Office and Home Office, 1999) and *Safety and Justice* (Home Office, 2003) recognise the role of education and consciousness-raising both amongst the statutory services and the public in general in tackling violence against women.

The CRP projects

Providing children and young people with awareness of domestic violence and the necessary skills required to build relationships based on the mutual respect and understanding was a core or partial aim of three of the CRP 'education' projects in Thurrock, Southampton and Bridgend (evaluated by the Canterbury Christ Church University team). Two of the 'multi-service' projects, in Cheshire and Camden (evaluated by the University of Bristol team), had similar aims. Research indicates that a multi-goal curriculum is perhaps the best strategy to reduce violence since a change in attitudes does not necessarily affect behaviour (Suderman et al., 1995). In addition, perhaps the most effective strategy for violence prevention is a school-wide effort, rather than a stand-alone class-based curriculum programme. School-wide activities were used in three of the CRP projects including drama interventions and a mass media programme. The Thurrock project used the Zero Tolerance Respect pack whilst the Southampton project devised their own curriculum materials so that they fitted PSHCE guidelines.³² The Bridgend, Cheshire and Thurrock projects all made use of drama, with Cheshire being particularly ambitious in its coverage. The Camden project carried out more limited community awareness work on domestic violence for children and young people. Comparison across the projects indicates that pupils enjoy these types of activities and welcome the opportunity to discuss relationship issues, that these activities appear to have some impact on knowledge about violence against women and possibly with regard to attitudes. However, the impact may be only short term, and is likely to depend on the extent to which the issues are embedded within the curriculum and wider school activities in the longer term.

Below more detail is provided regarding Bridgend, Cheshire and Thurrock, where more detailed impact data were available. The Cheshire project was evaluated over a period of two years, and the others for one year.

32. Both Southampton and Thurrock included challenging sexual violence as part of their remit.

Bridgend³³

The Bridgend Violence Against Women project aimed to raise awareness of domestic violence issues amongst both boys and girls; provide pupils with the skills of non-violent conflict resolution; challenge sexist attitudes, behaviour and language throughout the school; and help develop strategies to support pupils known to experience or witness domestic abuse at home. The Bridgend project was run by the Bridgend Domestic Abuse Forum (BDAF), an affiliation of managers and practitioners representing a cross section of the statutory and voluntary agencies. Its interventions included a drama production and workshops for secondary school students.

The drama production, entitled *Breaking the Silence, Breaking the Chain*, was performed to a group of professionals and to all Year 11 students in five secondary schools. Students from a local Further Education College performed the play and led the workshops that followed. A play and video were also used in training with staff, but this is not discussed here.

The impact of the drama production was evaluated using a questionnaire to measure student attitudes before (n=653) and after seeing the play (n=422) (devised by the Bridgend Domestic Violence Forum, and informed by the Zero Tolerance evaluation),³⁴ focus groups (n=2) held with Year 11 pupils to evaluate the impact of the drama production, and student narratives (seven from one school).³⁵ In addition, interviews were held with the head teachers and the PSHCE co-ordinators in the schools where the drama was performed (n=5) and a discussion took place with the Education Welfare and Child Protection Officer.

The pre and post-intervention applications of the questionnaire showed positive, although small, changes in pupils' awareness about issues surrounding domestic violence. Overall, the findings indicated that pupils had increased their awareness of factual information regarding domestic violence (Appendix 3, Table A1.1.1, question 14). However, there was also much inconsistency among pupils as to what was considered domestic violence (see Appendix 3).

Two small groups of pupils (9 pupils: 3 boys, 6 girls) participated in a focus group in May 2002 to assess legacies of the project. Pupils noted that: "we shouldn't tolerate violence. You don't have to put up with it,"; "you shouldn't treat women like that,"; "when you're in that sort

33. This section draws on the evaluation by the Canterbury Christ Church team.

34. It did not ask for information on gender in the first administration though this was included for the second administration a few months after the performances and workshops. Also, as the numbers of respondents were much fewer on the second administration there may be problems regarding both validity and reliability.

35. Ten narratives were originally sought from each school.

of situation you have a number and can ask for help.” The perceptions of boys appeared to be affected: “a lot of the boys, they were first of all, like oh yeah...then you’d see them really talking about it...that it was wrong,”; “they didn’t want to show it but they were really hit by it.” The groups also indicated the need for more educational work on relationships.

The students also provided short accounts on the issue of domestic violence and their views about it after the performance, and indicated that the play made students think and revisit their own experiences, feelings and views about domestic violence.

My views on violence against women weren't very strong as I have never experienced or really thought about it. When I have thought about it, it wasn't too serious ... I now understand more about violence. The play was very realistic and informative. (Student narrative)

Interviews with the head teachers and PSHCE co-ordinators confirmed that, in general, the drama received good feedback from all schools, even though it was seen and experienced as a one-off initiative. It was noted that staff seemed to lack confidence and skills, and that schools need continued support from outside agencies to address these issues. It was also felt that a more substantive educational package that tackles the underlying theme of relationships might have been useful.³⁶

Thurrock Respect project³⁷

Thurrock Respect project had as one of its aims to challenge and decrease the culture of tolerance of sexual violence against women in schools; raise awareness about the criminality of rape and sexual assault; encourage young men and young women to develop healthy relationships based on respect and equality; and encourage young people to be active citizens in creating safe communities that do not tolerate violence against women. The project was a collaboration between the Zero Tolerance Trust in Edinburgh and South Essex Rape and Incest Crisis Centre (SERICC). The interventions consisted of a curriculum package to be taught in two primary and two secondary schools, a short interactive drama to draw out the myths about sexual violence and domestic violence; undertaking a mass media and public awareness campaign; training teachers to deliver the curriculum; and supporting a young people’s counselling service to cater for possible increased demand.

36. In Southampton such an education package was created to fit with the local curriculum and appeared to be effective.

37. This section draws on the evaluation by the Canterbury Christ Church team.

The Edinburgh Zero Tolerance Trust devised, piloted and refined the interventions for use in primary and secondary schools and informal youth work settings, to run over eight sessions. SERICC, with the Shout Theatre Company, wrote and developed the interactive theatre performance.

Primary school intervention

The primary school material was delivered through Circle Time, with children working together in a circle. The first session focused on communication, the right to be heard and the responsibility to listen, including a brain storming session on respect. Session two focused on the need for support and co-operation. The third session was concerned with encouraging children to recognise and challenge discrimination. Session four considered name-calling whilst Sessions five and six considered power. Teachers were able to adapt the material so that bullying was explored. Session seven involved challenging stereotypes with a discussion of 'Being a Boy, Being a Girl'.

A questionnaire to measure student impact, and informed by the Zero Tolerance Respect evaluation, was undertaken after completion of the curriculum by one primary school (n=68). Much of it was concerned with behaviour of children towards each other and gender roles, and indicated apparent change in attitude over time:

- about 75 per cent agreed with statements that "after the project they know more about respect and how to treat each other, about how people talk to each other, how people use power etc.";
- overall 60 per cent of boys and 40 per cent of girls thought their views or behaviour had changed because of the project; and
- ninety-three per cent felt that this work should continue with young people in schools.

Secondary school intervention

The curriculum programme was implemented more fully in one of the two secondary schools. Virtually all (95%, 209/220) of the pupils responding to the questionnaire in School 1 had been present at six, seven or eight of the classroom sessions. This was the case for only one-quarter (25%, 45/178) in School 2.

The questionnaire used with primary school children was also administered in the two secondary schools.³⁸ This time it was administered both pre (n=400) and post intervention

38. As was the case in Bridgend, focus groups and student narratives were also used. The findings were similar to the questionnaire and are not discussed here.

(n=320), and again nine months after the programme with one of the schools (n=250). Two areas stood out regarding the responses.

- Positive impacts were more evident for girls. For example, girls were more supportive than boys about statements such as “everyone has the right to be treated with respect.”; and
- responses by pupils in School 2 (with fewer sessions) were less positive.

In the follow-up questionnaire girls continued to be more positive than boys on most items and the more favourable attitudes indicated by the post-questionnaire were largely retained or even improved.

The vast majority of students in both schools agreed that young people should have the chance to talk about a whole range of issues concerned with violence, and were overwhelmingly in favour of the work continuing with other young people in schools.

Interviews with teachers (n=6) indicated, however, that they thought the Respect project had only limited impact.³⁹ Both the short duration and the children’s context of whole lives and socialisation processes, including peer group pressures, made impact limited. Teachers talked about subcultures among the children, where ‘disrespectful’ behaviour towards certain girls by certain boys was socially sanctioned, and intense conformity among many boys towards traditional masculine stereotypes. At the same time teachers did feel the project enabled a number of issues about gender relations to be explored, which had been largely neglected in the curriculum. A cross-curricular approach where the Respect materials and issues were explored in lessons other than PSHCE, such as English, reinforced the positive impact of the programme. Overall, teachers argued that attitudes are more likely influenced by wider cultural forces and how gender and relationships are represented in the media than a relatively short-term intervention such as this.

A small percentage of teachers were uncomfortable with the focus on gender. Some subverted the content and instead approached the topic in ways they considered more sensitive and less confrontational (see also Suderman et al., 1995). A number of teachers indicated that the materials, indeed the whole topic, raised difficult issues for them, personally as well as professionally, including their capacity to cope with the material and the responses of children. Particular teachers felt torn between being proactive in dealing, for instance, with disclosures while, at the same time, feeling ill-equipped to cope with what

39. Interviews with teachers focused on the preparation for Respect, teachers’ feedback on the curriculum material in addition to their experience of delivery.

could emerge. Referral networks within the schools were formally in place, but, it was pointed out, children tend to talk to those they trust rather than those who might be formally responsible.

Cheshire schools project⁴⁰

The Cheshire schools project aimed to enable children and young people to challenge attitudes around intimate violence and to promote violence-free relationships. It formed part of the wider Cheshire Domestic Violence Initiative. The project involved multi-agency training with staff from both primary and secondary schools and two Social Services departments on 'violence-free relationships'; four standard lessons with lesson plans and guidance as part of the PSHCE curriculum; and individually targeted training in one particular school. The primary school project developed a story-telling performance. The secondary school project had various elements, including a drama production and a dance performance.

The primary school project

The project developed a drama piece named *Can You Keep a Secret* based on story telling, about a violent relationship within a family, and to illustrate points about secret-keeping. The production made links between bullying at school and domestic bullying and was accompanied by workshops, teacher packs, guidance for schools, lesson plans, support around child protection issues, guidance on handling disclosure and teacher training, teacher support and evaluation materials. Support for the productions was provided by a range of local services.⁴¹ They were followed up with children's workshops, class by class, in which the pupils discussed the issues raised in practical ways, alongside special activities and lesson plans.

The implementation of the primary school project was extensive, with the production being shown to 7,500 children in 80 schools with more than 115 performances. The production was seen and discussed by more than 400 teachers and many classroom assistants.

Evaluation was carried out by the project.⁴² The performances were accompanied by the distribution of evaluation packs with before and after questionnaires for both teachers (across 80 schools) and parents, and questionnaires to assess pupils' views. The majority of

40. This section draws on the evaluation by the University of Bristol team.

41. Including Social Services, Women's Aid, outreach services, school nurses, Education and Welfare Officers and the National Society for the Protection of Cruelty to Children (NSPCC).

42. The evaluation team did not carry out further independent evaluation as they did not want to overburden the schools.

teachers evaluated the project as excellent (93/95, 98%) and believed that the pupils had understood the message and the issues (see Table 2.1).

Table 2.1 Teacher evaluation of pupil outcomes from primary school work in Cheshire – project data

Outcome	Teachers evaluating outcome as positive (n=95)	
	Number	Percentage
Pupils had understood the message	92	97%
Pupils gained in knowledge	77	81%
Pupils gained in empathy and understanding responsibilities of relationships	82	86%
Production was used to develop more curriculum content	83	87%
The attention of pupils was held	92	97%
Immediate discussion initiated	90	95%

The children’s questionnaires (n=950) administered by teachers in 38 separate classes assessed children’s knowledge and attitudes about domestic violence and bullying, and also indicated positive outcomes in the form of changes in attitudes and increased knowledge about violence in intimate relationships. The questionnaires and the evaluation interviews indicated that the programme had been effective in raising the issue of bullying within families and allowed children to begin to explore the issue of disclosing difficult and personal secrets.

Overall the primary school work appeared to offer exciting scope for influencing young people’s attitudes. Teachers (n=8) interviewed, and children and young people, were reported to have said they wanted and valued lessons on relationships and on abuse, provided these were undertaken in student-centred, interactive ways.⁴³

Further positive feedback was reported to have come from mothers, a few of whom disclosed domestic violence issues – an unintended but very welcome outcome. Staff interviewed complimented the “clever construction of play (which involves a brother not a parent)” (interviewee); the large amounts of discussion with the children; and the thorough training support offered including the use of packs and specially designed activities.

43. This echoes findings from other studies (e.g. Mullender et al., 2002).

The secondary schools project

Initially, seven secondary schools and 608 students participated in projects to ensure domestic violence was addressed through the PSHCE programme. This initial stage included presentations by young people, groupwork with young fathers, and links with the Outreach project and other local agencies. The development of the secondary school programme was accompanied by multi-agency training courses and trials and assessments of all materials, productions and lesson programmes.⁴⁴

These programmes were evaluated by the project with pre and post-attitude questionnaires, developed largely by the project with input from the evaluators and administered in schools.⁴⁵ There was an initial analysis conducted by the project. The results were reanalysed by the evaluators to assess the effect of the programme on pupil attitudes and in raising awareness. This was positive in both cases. For example, young people indicated that they had increased their understandings of domestic violence: a) as a gender issue; b) as a form of abuse that extends beyond physical violence; and c) as an issue connected with power and control in relationships.

The measures showed that both the attitudes and knowledge of the students about the dynamics of domestic violence had changed in a positive direction between the administration of the two questionnaires (see Table 2, Appendix 3). After the programme, for example, more students than before were aware of the prevalence of domestic abuse and recognised that emotional abuse could be domestic violence. Pupils in a school in an area of high social stress were more aware of these difficulties than those in other schools.

In comparison with the changes achieved in the Bridgend project, the Cheshire project appeared to achieve a much greater change in pupils' attitudes overall (see Appendix 3). This would suggest that the more wide ranging approach adopted in Cheshire was more successful.

In Cheshire, gender differences with regard to changes in attitudes were also analysed.⁴⁶ This again indicated that positive change had occurred. For instance, in one sixth-form the number of girls who were unclear about the prevalence of violent relationships reduced from 60 per cent before the programme to 18 per cent after. In another school, the percentage of

44. As a result, the schools introduced work on domestic abuse into their PSHCE curricula and one school developed a dance piece in Year Seven. In another school, older year groups designed and performed a performance for 200 students in younger year groups. Subsequently, 21 per cent of secondary schools in Cheshire participated.

45. The evaluation team did not carry out further independent evaluation as they did not want to overburden the schools.

46. Initial analysis was conducted by the project, and this was subsequently reanalysed by the evaluators.

girls agreeing that abuse of a woman by a man is a controlling action, increased from 17 per cent prior to 73 per cent post-programme. Encouragingly, boys appeared to be almost as aware as girls that domestic violence was not acceptable, with only one boy claiming that it occurred because 'women asked for it'.

Interviews with teachers and managers confirmed the results of the questionnaire evaluations that, in general, the various dramas, workshops, prepared lessons and videos used in the different projects received very good feedback from all schools and were much welcomed. Schools were prepared to engage with the programme due to the direct support provided through the project and the associated multi-agency context, as well as the supportive materials provided by the project. Both Women's Aid and the Cheshire Outreach project provided support, including helping teachers to anticipate children's disclosure of domestic violence. The importance of training for teachers also highlighted the possibility of ongoing staff consultancy and support provided by inter-agency links.

Summary – primary prevention

- Children and young people across the projects indicated they wanted and valued lessons on relationships and on abuse, provided that these were undertaken in student-centred, interactive ways. (See also Mullender et al., 2002).
- Pupils valued visual input such as drama.
- There were indications that pupils had increased their awareness of factual information regarding domestic violence, especially in Cheshire.
- The project impacts were considered short-term by teachers, especially where interventions were experienced as one-offs. While enabling teachers to address gender and violence, the interventions needed to be sustained if they were to counteract ingrained cultures and stereotypes.
- Training for teachers was important, as was multi-agency support. Teachers who did not feel supported were likely to feel under-confident in using the materials and dealing with the issues.
- Cross-curricular approaches, where project materials were explored in lessons other than PSHCE, such as English, reinforced the positive impact of the programme.
- Work in schools can make both primary and secondary schools pupils think more deeply about domestic violence.

Recommendations – primary prevention

- Primary prevention programmes should be implemented in both primary and secondary schools.
- Primary prevention should at least be included in the PSHCE curriculum.
- Programmes should ideally be approached from a school-wide perspective with a cross-curricular approach.
- All teachers providing primary prevention programmes should be trained and be confident in using the project materials, including how to handle disclosures.
- For effective implementation, teachers should feel supported to deal with any issues raised through primary prevention via local education authority and multi-agency links.

3. Supporting women: enabling disclosure

In this chapter we examine the approaches used by the CRP projects to provide opportunities for disclosure of domestic violence, and for contacting projects and other agencies for the first time are examined.⁴⁷ In particular the focus is on the use of routine enquiry by health and social services. In the following chapter the advocacy approaches that the projects adopted with regard to more sustained support for women and children, including outreach, emotional support and group work are examined.

Routine Enquiry

Routine enquiry⁴⁸ allows women to disclose their experiences of domestic violence so that they may be given the appropriate health care or be referred to other agencies. It is an approach that flows from the recognition that women are more likely to disclose domestic violence if they are specifically asked. They may prefer disclosing to a health care professional than to other agencies (Davidson et al., 2000, 2001 – see Appendix 1). They are also likely to be in contact with health care professionals as a general part of their lives; due to specific injuries sustained as a result of the violence; or perhaps because they are pregnant.⁴⁹ The Department of Health have indicated that intervention by health care professionals may help stop further abuse and that routine enquiry regarding domestic violence is recommended as part of this. Routine enquiry is defined as involving ‘asking about the experience of domestic violence of all people within certain parameters’ regardless of visible signs of abuse (Department of Health, 2000, para 3.11).

While previous studies show fairly widespread support among service users for routine enquiry policies, health care professionals perceive it as more problematic. Between 45 and 90 per cent of service users agree that they should be routinely asked about domestic violence: Gielen et al. (2000) found that 48 per cent of women agreed that health providers should routinely enquire for domestic violence, with those abused being 1.5 times as likely to support the policy than non-abused women. Higher support was found by Westmarland et al.’s (2004) study in the north of England where three-quarters of patients in GP surgeries

47. This chapter draws on the University of Bristol and South Bank University Faculty of Health and Social Care evaluations.

48. Also referred to in some studies as ‘asking about domestic violence’, or ‘screening’.

49. Women who are pregnant or have small children are at increased risk of domestic violence (Mezey, 1997; Hester et al., 2000; Mezey et al., 2002).

(447/604, 74%) thought it would be helpful if GPs routinely asked about domestic violence. Caralis and Musialowski (1997) reported 85 per cent of the women in their sample supporting routine enquiry policies, and Ferris (1994) found that 90 per cent of women supported such a policy. By contrast, Friedman et al. (1992) found that while the majority of female patients they surveyed were in support of routine enquiry; the majority of doctors were not. Similarly, Westmarland et al. (2004) found that GPs expressed more concerns about asking about domestic violence than their patients. The primary concerns raised by GPs were related to available support following disclosure, time restraints, and asking 'intrusive' questions about a 'private' problem (ibid.: 16).

Waaalen et al. (2000) in a meta-analysis of 12 studies looked at some of the main reasons for professional resistance, and found the main barriers to routine enquiry to be a lack of training, lack of time, and a lack of knowledge about appropriate interventions if domestic violence was revealed. Other issues frequently mentioned were patient-related factors, such as fear of offending the patient (see also Mezey et al., 2002; Westmarland et al., 2004). Educational interventions alone did not improve the enquiry rate. However, when education was combined with other features (e.g. providing information on how to ask questions) most studies showed a statistically significant increase in the number of patients asked or the number of patients disclosing violence. A recently completed evaluation of routine enquiry by midwives (n=79) taking part in the Bristol Pregnancy and Domestic Violence Programme also found that training increased the ability of midwives to elicit disclosure through routine enquiry (Salmon et al., 2004).

Ramsay et al. (2002) in a systematic review conducted for the UK National Screening Committee⁵⁰ found that although routine enquiry would be likely to increase the number of women identified as experiencing domestic violence, there was no evidence of the effectiveness or safety of subsequent interventions. This led them to conclude that it would be premature to introduce screening programmes for domestic violence in health care settings. Taket et al. (2003, 2004) disagree, noting there is a substantial amount of qualitative evidence pointing to the benefits of routine enquiry for women, and that it is one way of ensuring that women can get information about and access to specialised support services. Although they agree with Ramsay et al. that women's safety should be a priority, their conclusion echoes Mezey et al. (2002) who found that both midwives and female patients found routine enquiries acceptable but only when it was conducted in a safe environment with support systems in place (see also Taket, 2004; Taket et al., 2004; Salmon et al., 2004).

50. Twenty papers based on 17 studies were reviewed. However, inclusion criteria were narrowly defined and primarily based on quantitative measures. As a consequence a small number of studies from North America, Australia and New Zealand were included – but no UK studies met their criteria.

One previous study in the UK has evaluated the introduction of routine enquiry with child care and child protection staff (within the NSPCC) as part of establishing a monitoring system for domestic violence (Hester and Pearson, 1998; Hester et al., 2000). The study found that routine enquiry about domestic violence was an effective approach for staff working on child protection issues, and that the level of disclosure of domestic violence increased from one-third to nearly two-thirds. Routinely asking women about domestic violence is more appropriate, and safer, than 'ad hoc' enquiry that may rely on stereotypical views about which groups of women are likely to experience domestic violence. Routinely asking gives the message that it is acceptable to disclose domestic violence and that no-one is being specifically targeted for enquiry, which could have safety implications (Hester and Pearson, 1998).

The CRP projects

A small number of the CRP projects set out with the intention of enabling disclosure of domestic violence. Projects in Birmingham, North Devon, Wakefield, Hammersmith and Fulham (Standing Together health project) and Suffolk included mechanisms for enabling disclosure of domestic violence as part of their aims, with Wakefield, Suffolk and Standing Together specifically aiming to implement routine enquiry. The Birmingham, North Devon and Wakefield projects were part of the 'health' package evaluated by one of the South Bank University teams; the Standing Together Health project was evaluated by South Bank University as part of the 'criminal' package; and the Suffolk project was part of the 'multi-service' package evaluated by the University of Bristol team. Only the evaluations of the projects in Wakefield and Suffolk were able to provide data detailed enough for comparison, and these projects are discussed further below. In Wakefield, routine enquiry was used by health care professionals, while in Suffolk a wider range of practitioners were involved, with emphasis on health and social care staff. The Wakefield project was evaluated for one year and the Suffolk project over two years.

The projects faced similar problems in implementing routine enquiry. The restructuring of health authorities that were taking place during the period of implementation created uncertainties. Social care services were also facing changes as well as high turn over in staff. It should be noted that the projects in both Suffolk and Wakefield were able to implement routine enquiry despite these problems because they had the involvement and support of senior staff across the agencies involved.

Suffolk Tools for Practitioners

Suffolk Tools for Practitioners (Suffolk TfP) project set out to develop a range of ‘tools’ or interventions combined with training, so that practitioners might respond to survivors of domestic violence in a manner that keeps safety at the centre: they used routine enquiry for service users so that they might disclose domestic violence, followed by crisis or safety planning with those found to be experiencing domestic violence. The project was developed with the support of agencies and organisations across Suffolk under the auspices of the County Domestic Violence Forum.

The project set up an initial pilot in the district of Waveney, a semi-rural location with Lowestoft as the largest town. The discussion below is based on data from the pilot area over a two-year period.⁵¹

The ideas underpinning the initial development of the tools were drawn from the Duluth, Minnesota, approach, which has at its centre the safety and empowerment of victims as well as accountability of perpetrators (Pence, 1999). The materials used included the Duluth Power and Control and Equality Wheels. An extensive Guidance Manual was produced explaining how professionals should use the tools, examples of usage, safety implications and confidentiality. In addition separate safety planning and crisis planning booklets and a Directory of Suffolk Agencies were produced. The tools were implemented by health visitors, social care staff, Women’s Aid outreach, and probation. Probation only applied the tools during year one of the evaluation and others during years one and two. In what follows the focus is on use of the tools by health and social care practitioners.

Prior to development of the ‘tools’, consultations about services were carried out with 28 women who had experienced and/or were currently experiencing domestic violence, and information gathered on current practice with 40 local agencies. A detailed Safety and Accountability Audit of police practice with regard to domestic violence was carried out by a nine-person multi-agency team, based on the Duluth domestic violence auditing approach (Pence, 1999).⁵² Interviews with the audit team (n=9) indicated that it had enabled practitioners from a range of agencies to better understand the work of the police, and had also strengthened multi-agency work locally. The consultations, agency information and audit all fed into the development of the tools and related training.

51. During year two of the evaluation the project began to mainstream its activities, in particular training a wide range of practitioners in the use of the ‘tools’ across the whole of Suffolk. This aspect of the project began too late for valid and reliable data to be available and it is therefore not discussed.

52. Thirty-one police, as well as processes and procedures were audited, resulting in nine recommendations for changes in the practice of the Suffolk Police (all but three were carried out).

Prior to implementation of the tools, practitioners attended training on both domestic violence Awareness and Good Practice (one day) and Use of Tools (one to two days).⁵³ Use of Tools training included how to ask about domestic violence, and develop safety and crisis plans with service users. Altogether 69 individuals from 22 agencies were trained.⁵⁴ Review sessions with the practitioners and the project staff using the tools took place within two months of implementation for reflection on practice and to revisit issues from the training sessions.

In interviews (n=30) carried out during year one and at the end of the evaluation, practitioners talked about the important grounding they had obtained from the training. It had given them an insight into the control aspects of domestic violence, a greater understanding of its impacts and implications, and contributed to the greater confidence they now felt in asking about and dealing with situations of domestic violence. The health visitors in particular (n=17) stressed that the length, depth and intensity of the training had been necessary to equip them to use the tools with confidence. The review sessions were seen as a crucial part of this.

If I hadn't had as much [training], I don't think I would have had the confidence to tackle the issues. (Health visitor, Suffolk)

Health visitors

Health visitors applied the tools, and especially routine enquiry,⁵⁵ to a greater extent than social care practitioners because they found it easier to incorporate into their routine work (Table 3.1). The interviews and reviews with the health visitors indicated that with their focus on mothers, use of systematic inventories and questions such as the Edinburgh Post-Natal Depression inventory lent themselves well to the introduction of routine enquiry questions. Routine enquiry also fitted with the early intervention strategy they were expected to adopt. Nonetheless they sometimes forgot to enquire, were unable to ask due to lack of time or presence of the male partner or other individual, or might use the tools reactively rather than routinely.

53. It was often difficult for practitioners to attend as they worked in under-resourced and highly pressured areas of work. The overall training was as a result reduced to two days for some groups.

54. In addition, due to turnover of staff in the social care team, staff who had more recently joined the team received training from the training officer. A further 885 individuals were trained as part of the mainstreaming process. This involved 43 training sessions: 14 multi-agency and 29 single agency by the end of the evaluation period.

55. Routine enquiry was termed 'screening' by the project.

Table 3.1 Suffolk - tools use

Agency	No. of individuals with whom tools were used ⁵⁶ (weighted to give 6 months of data in each year) ⁵⁷		Routine enquiry		Safety planning		Crisis planning		Risk assessment	
			Yr 1	Yr 2	Yr 1	Yr 2	Yr 1	Yr 2	Yr 1	Yr 2
Health visitors	136	74	112 (82%)	64 (86%)	11 (8%)	14 (19%)	5 (4%)	2 (3%)	1 (0.7%)	0
Social care services	23	36	6 (26%)	10 (28%)	6 (26%)	1 (3%)	1 (4%)	1 (3%)	0	1 (3%)

Interviews towards the end of the evaluation period (n=20) indicated that the health visitors had developed their own ways of asking about domestic violence, usually at the antenatal visit and at the post-natal six week visit (see Table 3.2).⁵⁸

Table 3.2 When health visitors routinely enquire (figures weighted to give 6 months data)

Ante-natally	Transfer in	Post-natally
34 (46%)	14 (19%)	18 (16%) of which 12 (16%) were at 6-week visit

The health visitors interviewed in year one found that the safety planning tool and booklet provided them with something concrete to give women and made them feel better prepared.⁵⁹ Although actual numbers were small, by the end of year two they had

56. Information about the total number of individuals seen by health visitors and social care services was not provided, and it is therefore not known what proportion of all service users seen are represented by the figures provided.

57. Data were provided by the staff from health and social care services using the tools, during the period December 2001 to May 2002 when the piloting of the tools took place. A data form was used for this, based on the Home Office minimum data criteria and applied following extensive discussion with the agencies involved. During year one the data were collected by health visitors from two separate areas within Waveney, and from social workers from the immediate needs team. In year two the collection of data was not continuous, and the table is based on data made available for three months from the health visitors, and for six months from the immediate needs team.

58. This more focused approach also explains why the number of women being asked had gone down across the evaluation period (see Table 3.1).

59. One service user interviewed commented that the safety booklet was very useful and straightforward and that 'she liked the wheel' and the 'good stuff about keeping me and the kids safe without going over the top'

doubled the proportion of service users with whom safety planning was used (from 8%, 11/136, in year one to 19%, 14/74 in year two. See Table 3.1).

As the health visitors became more proficient and confident in the use of the tools, the number of domestic violence incidents identified also increased (Table 3.3), doubling from 12 to 24, despite fewer women being routinely asked. While the actual numbers were small, the proportion of domestic violence identified was more than three times greater in year two (with 11%, 12/112, of women screened in year one disclosing domestic violence, and 38%, 24/64, of those screened in year two).

Table 3.3 Domestic violence incidents identified

Agency	Domestic violence identified (weighted to give six months of data in each phase)		Totals across years 1 & 2
	Year 1	Year 2	
Health visitors	12 (11% of those screened) ⁶⁰	24 (38% of those screened)	36 (20% of those screened)
Social care services: immediate needs team	11	34	45

By the end of the evaluation period, interviews with the health visitors indicated they had shifted their practice from woman blaming to empowering women, by understanding the dynamics of domestic violence and in particular why women 'do not just leave'. They (and social care staff, see below) found the Duluth Wheels, both the Power and Control and the Equality Wheels particularly useful. The wheels were important in showing the nature and dynamics of domestic violence, and could be used directly with women to help them identify that they were in abusive relationships, as well as enabling early intervention and prevention.

You know there's one case I had recently.... a case conference was called because there's an injured child. And we believe it was a violent stepfather. And she denied everything. And it was very good when we went to Case Conference and in two weeks she actually got rid of him and she said there was a couple of things that made her realise. One was the equality [wheel]. I had asked her "you look at this.

60. Note that domestic violence identified as a percentage of those screened is only a valid calculation in relation to health visitors. Social care services were screening in fewer instances than where domestic violence was disclosed, as some referrals were already identified as domestic violence cases.

Where do you fit in?" And she said, "it suddenly became clear to me". And that was very positive. She was able to identify herself in that relationship. I mean she's taken the wheel and said, "I'm going to use that for future partners". (Health visitor, Suffolk)

Other practitioners in the locality who were interviewed during year one and again at the end of the evaluation period, confirmed the positive change in health visitors' practice that had resulted from their involvement in the project.

The health visitors in my experience are very, very aware of domestic violence and they are carrying out the tools as instructed. (Women's Aid, Suffolk)

This included the ability of health visitors to enable disclosure where other agencies were unable to do so, to empower mothers, and better practice multi-agency working. The head of child protection, for instance, outlined a situation where domestic violence was suspected: the child was found to be sitting in a pile of glass and social care services became involved. The mother did not trust social care services but allowed the health visitor to use the tools with her (specifically the routine enquiry questions and Duluth Wheels). Following this intervention there were (according to the head of child protection) no repeat incidents of domestic violence and the mother had also understood the dangers to the child.

Social care services

Generally, the social workers and family support staff interviewed at the end of the evaluation period (n=13) reported feeling more confident in dealing with instances involving domestic violence. The child protection links, especially between the police, health visitors and social care, were also seen to have developed and made more consistent and systematic as a result of the project, thus leading to a more effective response:

... we've tightened the circle when we get the Police enquiries that come through from the Child Protection Team...Where the uniform responding officer's been there, and there's a child that's been in the house, then we discuss straight away, have a strategy meeting. If the family aren't known to us then we'll make contact with them or write out to them. And also if there's a health visitor, arrange for a letter to the health visitor so you've got the information exchanged and the loops all closed up. ...it's really positive because we're all sending a consistent message out. ...And it just sends out a very clear message to families and agencies alike... and perpetrators. (Senior social worker, Suffolk)

Social care staff interviewed provided numerous examples of how their practice and approach to cases involving domestic violence had changed. They had systematised the use of routine enquiry by incorporating this into the initial assessment. The number of individuals with whom the tools were used had consequently increased to one-third (from 23 to 36 – see Table 3.1), and the number of disclosures had more than trebled (from 11 in year one to 34 in year two – see Tables 3.1 and 3.3).

And I actually think that people are more, are more open to discussing it than I initially thought they would. I think because you raise it, they are actually more open to talk about it than I thought they perhaps would be...There's a lot more domestic violence than I was aware of. It's one of the things that struck me.

(Social worker, Suffolk)

The social workers interviewed towards the end of the evaluation outlined a shift in their practice towards empowering women experiencing domestic violence. They found empowerment came about, for instance, through naming the violence and identifying how it worked by reference to the Duluth Power and Control Wheel, and that this gave back some control to the woman who had been abused.

...because you're bringing it all out in the open, it almost seems to give them back a little bit of what they've lost... I suppose it is control of their lives. I suppose it is the power that their partner had over them. Because they are able to identify with what it is that's been going on, and also because they've got a name for it as well.

(Social worker, Suffolk)

In some instances the tools had helped in what otherwise appeared to be intractable situations.

We complete an initial assessment and we manage to get the victims being empowered to actually make self-referrals to the Police Domestic Violence unit, which a month or two before they were not going to be able to do it because they lacked the confidence. And that has happened a lot.

(Senior social worker, Suffolk)

Wakefield Support and Survival Health Initiative⁶¹

Wakefield Support and Survival Health Initiative had among its aims to increase recognition of domestic violence by health care professionals; improve evidence gathering; and improve the health of domestic violence survivors. The Support and Survival Health Initiative originated in 1995, when the Director of Public Health for Wakefield recognised the need for action from health services to address the issue of domestic violence. In 1998, Support and Survival conducted a pilot project at the Tieve Tara Surgery in Airedale, Castleford. All women over the age of 16 attending one of the local surgeries were asked if they had experienced domestic violence. One woman in three indicated they had experienced domestic violence at some point in their life. These findings provided the basis for the CRP project.

The project had a multi-agency steering group that brought together agencies with a considerable history of partnership working in the area. This group was important in helping the project surmount the barriers it encountered, particularly in the early stages.

The initial intervention was a specially mounted prevalence survey⁶² using a letter to ask all women attending 11 GP surgeries about their experience of domestic violence carried out over the period of a week in each participating practice. Any woman who disclosed domestic abuse, either current or past, was offered information about specialised services available locally and was also asked to fill in a more detailed questionnaire. Altogether 1,207 women completed letters and 70 women completed longer questionnaires.⁶³ Prior to the survey, brief training (1-2 hours) was provided to staff in the 11 GP practices on facts about domestic abuse and survey protocol.⁶⁴

The next stage involved development of routine enquiry in three GP surgeries. It was originally intended to involve all GPs at two practices but this did not prove possible (see also Westmarland et al., 2004). Instead the emphasis shifted to working mainly with other health professionals such as health visitors and midwives. The routine enquiry was run for only two months.⁶⁵ Training workshops were provided on domestic violence awareness (one

61. This section draws on the evaluation by South Bank University Faculty of Health and Social Care team. More details regarding this project can be found in Taket et al. (2004); also see Taket (2004).

62. The project termed the survey an 'audit'.

63. It is not known how many women were invited to take part in the survey nor how many were issued with questionnaires. However, the maximum number of letters that could have been handed out in the period was 3000, giving an approximate response rate of at least 40 per cent.

64. The survey response rates differed between the GP practices in the survey and appeared to be related to whether or not the GP had attended the training.

65. The short implementation period was because the CRP project was scheduled to finish in March 2002. A further year's funding was obtained from the Home Office, but the routine enquiry pilot did not continue and nor did the evaluation.

day) and use of routine enquiry (one day).⁶⁶ The training was attended by a much wider group of practice staff than those in the three practices who participated in the project. As in Suffolk, the use of routine enquiry and the related training was supported by specially produced packs – in this instance the production of one on ‘Domestic Abuse: Effective Identification and Intervention’ and one on ‘Domestic Abuse Screening Pack for Health Professionals’.

Echoing the Suffolk experience (above) and other UK research (Bacchus et al., 2002; Westmarland et al., 2004) interviews with Wakefield health professionals (n=23)⁶⁷ indicated that prior to training most either resisted the adoption of routine enquiry for domestic violence or had grave reservations. Four reasons emerged:

- the view that domestic violence is a 'social' issue;
- lack of confidence;
- misinformation about whether women want to be directly asked; and
- problems related to time, conflict in priorities, and competing resources.

Data regarding the impact of the training appeared to suggest that the first three of these ‘resistances’ had been (or could be) dealt with through training. The effectiveness of the training was examined using questionnaires when training was completed later and again one month later. One hundred and seventy participants of the one-day training programme completed training evaluation questionnaires administered immediately following training.⁶⁸ Of these, 40 per cent (68/170) said they learned more about the local specialised support agency, 58 per cent (99/170) said they learned more about domestic violence, and 67 per cent (114/170) learned specific domestic violence identification and referral skills.

Another questionnaire was distributed one month post-training to 103 of the health professionals. Nearly half were returned (49/103, 48% – see Table 3.4). Nearly half of respondents said that the training had had a great deal of impact on their current practice, and more than one-half (59%) had started to ask women about their experiences of abuse. All (100%) felt more confident in dealing with issues of domestic abuse.⁶⁹ However, only one in five had made a referral to another agency.

66. In one of the practices that participated in routine enquiry, project staff provided training on practice premises in a number of shorter sessions, rather than full day workshops.

67. Interviews were carried out in nine different practices. This included all three practices that participated in the routine enquiry. The six other practices were selected randomly from the practices surveyed, but they did not participate in the routine enquiry.

68. This represents 90 per cent of the staff to whom questionnaires were distributed.

69. A further question asked whether they had been unable to put any of their ideas into practice, and 45 per cent said they had not. This question is omitted from the table as it was not clear what was meant by ‘their own ideas’.

Table 3.4 Responses to follow-up training evaluation questionnaire, Wakefield N=49

	Number	%
What impact has the training had on your current practice?		
A great deal	24	49
Some	24	49
Very little	1	2
Have you discussed issues raised during the training with colleagues?		
Yes	45	92
No	4	8
Have you started to ask women about their experiences of abuse?		
Yes	29	59
No	19	39
Do you feel more confident in dealing with issues of domestic abuse?		
Yes	49	100
No	0	0
Have you made any referrals as a result of asking about domestic abuse?		
Yes	10	20
No	38	76
Leaflets given where no referral accepted	4	8
Have you been able to access support for yourself when dealing with issues of domestic abuse?		
Yes	27	55
No	10	20

Source: Wakefield project data (see Taket et al., 2004)

The impact of training was also apparent from a comparison of practitioners who had and those who had not been trained. Twenty-three health professionals were interviewed across eight practices that had taken part in the project. Twelve had attended at least the first full-day training workshop, they all practised some form of routine enquiry and had started this after attending the training. The remaining 11 health professionals had not attended a full day of training and did not practise any form of routine enquiry.⁷⁰

I started asking early last year, after the first study day, but I probably do it more now, after the second study day. It was more practical; we covered the aspects of asking and what to do after you've asked and how to handle different responses. Now we know what to do, we are much more equipped to deal with anything that comes up, all the practical things, like wearing two sets of clothes to go out and leaving one with a friend, not to tell the children, things like that. (Health visitor, Wakefield)

70. Most (7/11) had attended the initial two-hour awareness training.

Interviews with health professionals in Wakefield emphasised that the training had enabled them to understand that survivors will usually not leave their partner immediately, and this was important in how they dealt with disclosure.

I probably wasn't aware of how much it went on, or that you can't force someone to get help or to leave the relationship, you can only give support and make sure they know where to go when they do get to the point of leaving. In that sense, the training was really good. (Community nurse, Wakefield)

As in Suffolk, findings from the three GP practices carrying out routine enquiry indicated the need to fit this into their existing structures and approaches. For instance, one practice decided to situate routine enquiry in their Well Woman clinic.

We found the well woman clinic was best... I think because our nurses did it as a tag end to the well women questionnaire where you ask about smoking and drinking and health questions anyway. It wasn't listed as an obvious question. We coded it on the form 'Practice name yes/no.' The evaluation showed that 99 per cent of the women thought it was no problem at all to be asked. (GP, Wakefield)

The Well Woman clinic ensured that there were always two nurses present so that if a woman disclosed domestic violence another nurse would be available to step in.

Prior to their participation in the project, practitioners had identified time as a 'fourth' problem area. However, the length of time generally taken to carry out the routine enquiry was actually very low, approximately four minutes per woman (Table 3.5).⁷¹

Table 3.5 Time required for routine enquiry, estimates by staff

% of total with time in range shown, estimated by health staff (n=42)	
Time taken	
1-5 minutes	83
6-10 minutes	15
11-15 minutes	0
16 minutes and over	3
Number where time not specified	7
Average length of time (minutes)	4

Source: Wakefield project data (see Taket et al., 2004)

71. This represents the time required for the routine enquiry part of the consultation, not for any other matters dealt with in the consultation; it is also the average per woman, including both those who have and have not disclosed abuse.

Summary – disclosing domestic violence

- Routine enquiry enabled disclosure of domestic violence. It appeared to empower both practitioners themselves and service users. It enabled some women to tell someone for the first time about their experiences of domestic violence.
- Training was a crucial prerequisite to implementation of routine enquiry. Training of health professionals is important in alleviating their concerns about 'opening a can of worms', the fear of which can stop them asking about domestic abuse (Cant and Irvine, 2001; Bacchus et al., 2002; Westmarland et al., 2004).
- The Duluth Power and Control and Equality Wheels were particularly effective in enabling women to recognise that they were in an abusive relationship. This allowed for early intervention in some instances, and resolution in some cases where violence was very entrenched (Suffolk).
- Local surveys on prevalence and attitudes to screening can highlight to practitioners the reality and extent of the problem of domestic violence amongst their client groups.
- Routine enquiry was particularly effective in health care settings, implemented by health visitors and practice nurses. It was also useful in social care services, and may be applied by a wider range of practitioners.
- Routine enquiry was most effectively implemented where practitioners could find ways to incorporate it into their existing patterns of work.

Recommendations – disclosing domestic violence

- Appropriate training should increase awareness about domestic violence, as well as how to ask about it. It should last more than one day, enable exploration of fears and concerns, and provide knowledge and resources including use of safety planning and referral to local advocacy and support services.
- Good multi-agency relationships and referral systems are necessary for routine enquiry to enable safe disclosure and provide further support for the women concerned. Close working relationships with specialised domestic abuse agencies such as Women's Aid, and with the police should be established prior to the introduction of routine enquiry.
- Mechanisms need to be in place for all staff to receive information, advice and support via various methods, such as supervision, ongoing reviews and specialist advice/support posts. This might include establishment of a named specialist for domestic violence.

4. Supporting women to report to the police

In this and the following two chapters we examine some of the key interventions concerned with supporting women's engagement with the criminal justice system. In this chapter the focus is on policing, including the reporting of incidents and arrest of perpetrators. Chapter 5 focuses on the impact of advocacy on prosecution and the courts. Chapter 6 examines the impact of advocacy and target hardening on recorded repeat victimisation. Photographic evidence is also considered in this chapter and in Chapter 5.

Advocacy and support

Advocacy will be referred to extensively as it was the main intervention used by the CRP projects to enable women to engage with the criminal justice system, and to enhance safety. But what exactly is advocacy? Kelly and Humphreys (2001) point out that that the term advocacy is relatively new and 'neither widely understood nor universally accepted' (p 242). Moreover, the remit of advocacy is wide-ranging because it draws on both the legal context and the rights literature. The legal context provides the idea of the advocate acting on behalf of someone else. However, in the rights literature (specifically that regarding disability and age) there is not a presumption of acting on behalf of someone else, but of supporting and empowering them to secure rights. Advocacy used in relation to domestic violence encompasses both of these (potentially conflicting) approaches, and therefore includes both help with accessing agencies and the criminal system and a wider range of support.⁷² The use of the term advocacy by the CRP projects reflect this potential confusion. Advocacy was used to encompass anything from supporting women within the legal process to a much wider umbrella of support. It included helping women to access criminal justice agencies, housing and benefits, information and advice. Some projects also used the term to include the provision of emotional or other support. In the discussions that follow, the term advocacy is used to cover interventions that:

...help survivors of domestic violence navigate the systems involved in the community response as they attempt to acquire needed resources. (Allen et al., 2004: 1017)

72. Kelly and Humphreys (2001) argue that there is also policy or system advocacy, involving taking issues forward to create legislative and policy change.

At the same time the nature of the advocacy and/or support provided by individual projects will be highlighted, so that the different mix of interventions used and their differential impacts may be ascertained.⁷³

Attrition in the Criminal Justice System

Although there is currently no specific offence of 'domestic violence' it is covered under a number of pieces of legislation⁷⁴ and perpetrators of domestic violence may be proceeded against for a range of offences. Where cases fail to make it through the criminal justice system, and do not result in a criminal conviction, this is referred to as attrition. Recently the Home Office introduced the term 'justice gap' to describe the difference between the number of offences reported to the police and the number of offenders who are sentenced for these offences, and *Narrowing the Justice Gap* (Justice Gap Taskforce, 2002) provided a framework for action. It has been known for some time that the level of attrition for sexual offences is extremely high. For example, just over one in twenty rape cases recorded by the police result in a criminal conviction for rape (Harris and Grace, 1999). Recent research has shown a similar level of attrition in relation to domestic violence (Hester et al., 2003). In recognition of this problem, the Women's Unit of the Cabinet Office set '...reducing attrition in the prosecution process' (Cabinet Office and Home Office, 1999:11) as a key goal, and a recent thematic review by the police and CPS Inspectorates had addressing attrition in domestic violence cases as a main focus (HMIC and HMCPSI, 2004).

Many incidents of domestic violence may never be reported to the police. Also, attrition may occur at different points as a result of decisions made by the police, decisions by the CPS and the courts, and those taken by victims themselves (Edwards, 1998, 2001a; Hanmer et al., 1999; Hoyle, 2000; Hester et al., 2003).

A number of studies have highlighted the under-recording of domestic violence incidents reported to the police (Hanmer et al., 1999; Edwards, 2000). Hanmer et al. (1999) suggest that up to 50 per cent of incidents reported to the police may remain un-recorded, and that this is a major point of attrition.⁷⁵

73. It should be noted that outreach was also used by some of the projects. 'Outreach' tends to be seen as comprising: "... responses that support domestic violence survivors in their homes and communities providing accessible and flexible points where information about service provision, and follow up contact are available." (Kelly and Humphreys, 2001: 239). See also Chapter 7.

74. Including: The Police and Criminal Evidence Act 1984 (PACE); The Criminal Justice Act 1988; The Offences Against the Person Act 1861; The Sexual Offences Act 2003; The Public Order Act 1986; The Criminal Damage Act 1971; The Criminal Justice and Public Order Act 1994; The Youth Justice and Criminal Evidence Act; and The Protection from Harassment Act 1997 (PHA).

75. Police data should thus more accurately be seen as data which has been reported and recorded by the police.

The police and prosecutors often perceive decisions made by victims as the main point of attrition. However, the willingness and thoroughness with which the police are prepared to pursue a case, including the level of evidence collected, may also be crucial, as may the basis of decisions by prosecutors and the approach of particular courts (Hester et al., 2003). A lack of consistency in criminal justice practice has been found both in relation to individual professionals and in relation to geographical areas (Hanmer et al., 1999; Hester et al., 2003; HMIC and HMCPSI, 2004). There are indications that withdrawal may be lower where victims are supported in their engagement with the criminal justice system (Robinson, 2003; Hester et al., 2003; HALT, 2004). Attrition may also be lower where specialist domestic violence courts are in operation, and where prosecutors and judges or magistrates have domestic violence training (Ursel, 2002; Cook et al., 2004).

The CRP projects

The general findings from the CRP projects regarding levels of reporting⁷⁶ to the police and arrest rates are discussed first. The evaluators then go on to examine in more detail one of the projects, Camden⁷⁷, which had very close links with the police and with some of the project's support workers based in the local police community safety unit. Like a number of other projects, Camden emphasised legal advocacy and support to engage with the criminal justice system as well as focusing on Black and other minority ethnic women.

Reporting violence to (recording by) the police

Although not strictly a stage of attrition, whether or not a victim reports a domestic violence incident to the police is a crucial indicator of engagement with the criminal justice system. Many of the CRP projects had as one of their aims either to increase or to decrease the number of victims reporting domestic violence to the police. These seemingly contradictory aims may be explained as follows. A decrease in the number of reported and recorded incidents has been used as a general crime reduction performance indicator by the police,

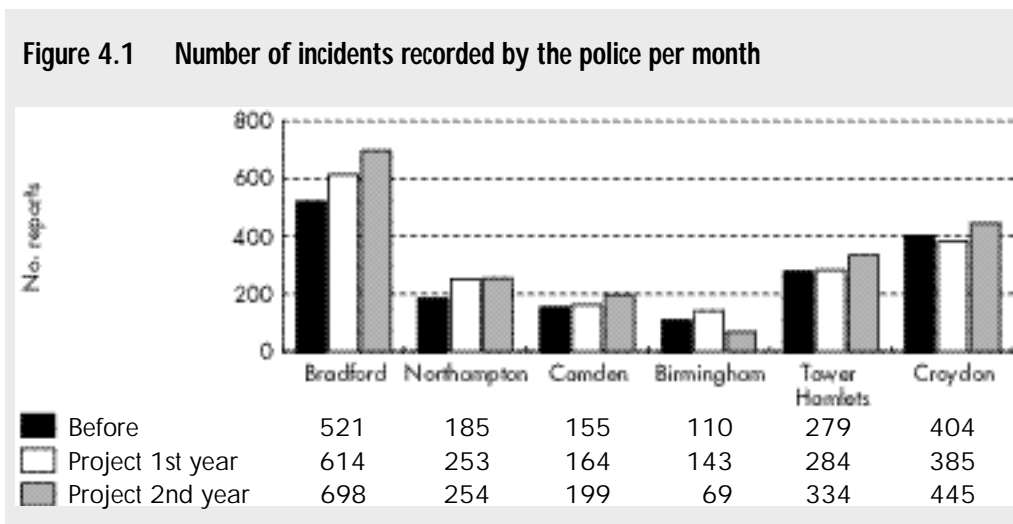
76. It should be noted that reported incidents usually refer to police recorded incidents.

77. As indicated in Chapter 1, it was only possible in a small number of the CRP evaluations to track the victims and offenders throughout the criminal justice system, from recorded incident through to the court outcome. It proved particularly difficult to track cases between the offender being charged by the police and the court outcome. Due to these problems and differences in data availability the focus is on those evaluations where data were available both before the evaluation period (to provide a baseline) and in the following two years, and/or where they were able to track cases from initial reporting to court outcome – i.e. the 'multi-service' and 'Black and other ethnic minority' packages of projects, evaluated by the Universities of Bristol and East London. Unfortunately the 'criminal and civil justice' package of projects evaluated by the Criminal Policy and Research Unit at South Bank University did not provide data detailed enough to provide for comparison with these projects.

and hence was the measure generally given in the aims of some of the CRP projects. However, some projects recognised that as domestic violence is largely under-reported, successful interventions were more likely to result in an increase in reported and recorded incidents.

Police performance should also be measured by an increase in the number of: arrests; charges; guilty pleas; prosecutions; and a decrease in homicide of female intimates (Edwards, 2000a – see Appendix 1).

Figure 4.1 shows that for those projects where data were available, most saw some increase in the average number of incidents per month recorded by the police across the evaluation period.

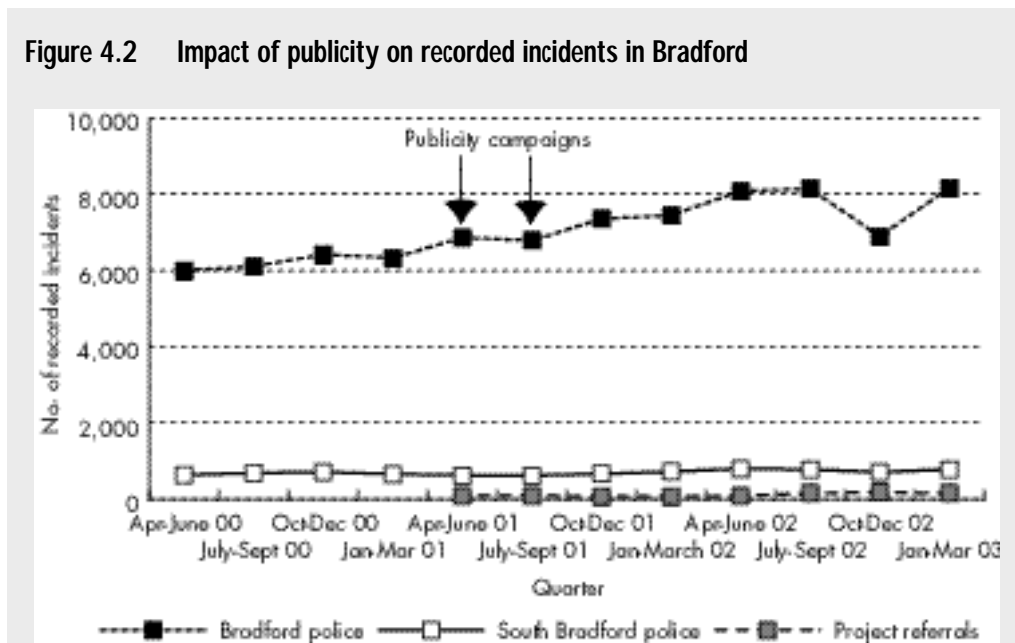


This increase in incidents recorded by the police may be due to a number of different and possibly interrelated factors. Firstly, the increases may simply follow national changes in willingness to report domestic violence to the police. Alternatively, it may be because of something specific that the project has done. For example, there may have been additional publicity about domestic violence being a criminal offence or project workers may have suggested to women who were referred to them from other agencies that they should make reports to the police.

In the Rhondda Cynon Taff (RCT) area, reports to the police of domestic violence incidents rose by 27 per cent in the year following implementation of the project. As indicated in Chapter 2, publicity campaigns linked to the project and a wider campaign across the

South Wales police force area are likely to have impacted on this. In Stratford a local awareness campaign also appeared to have increased reporting.⁷⁸ In Bradford the project conducted an extensive advertising campaign which also appears to have had an impact on reporting of incidents. This included large billboards and travelling A-boards which had the Bradford Staying Put logo 'Leave the abuse behind, not your home' and the helpline telephone number. As Figure 4.2 below indicates, there were discernible increases in reporting of incidents around the time of the publicity campaigns.

Figure 4.2 Impact of publicity on recorded incidents in Bradford



One thing that may have influenced reporting around December 2001 in year one across all of the projects was what may be called the 'EastEnders effect' where the story of one of the television characters experiencing domestic violence may have influenced some women to seeking help. Towards the end of the second year, the BBC also ran a domestic violence week (Hitting Home, February 2003) that may also have raised awareness and related reporting. It has not been possible, however, to assess actual impacts of these programmes on the CRP projects.

78. Reports in Stratford rose by 23 per cent, a larger increase than in neighbouring areas.

Increase in reporting (recording) – legal advocacy

The CRP projects showing the greatest increase in reporting to the police across the longest evaluation period were Bradford, Camden, Tower Hamlets and Croydon. Birmingham showed a marked decrease in reporting during the same period, but this appeared to have no connection with to the work of the project and resulted from changes in police recording practices. It was noticeable that the projects that had seen a sustained increase in reporting also had specific advocacy interventions geared to supporting women in relation to the criminal justice system, such as legal and court support (Bradford, Tower Hamlets); support workers based in a police community safety unit (Camden); or police based in a one-stop-shop and all new police recruits being shown round the project (Northampton).

Increase in reporting (recording) – links with police

Reporting to the police and referrals from the police to projects indicated that close links with the police were especially important in ensuring higher levels of reporting by project users.

Rather than the projects having a one-way impact on increasing reporting to the police, the police also appeared to have an impact on the number of women accessing the projects. The data for those project users who did report violence to the police shows this dual impact: the proportion of project users reporting to the police echoes the proportion of project referrals that were made by the police.

Also, those projects with a close link to the police had a higher level of both reporting and referrals (see Table 4.1). For example, Camden and Northampton had such close links because in Camden project workers were based in the police station and in Northampton police officers were based within the project. Both showed high levels of reporting to the police and high levels of police referrals to the project. Tower Hamlets also showed similarly high levels and had close links with the police (the independent advocates were based within Victim Support, working closely with the police).

In Croydon, although there was an overall increase in incidents recorded by the police, the proportion of project users reporting to the police was smaller as was the number of referrals to the project from the police (Table 4.1). Croydon, although providing advocacy and support, did not have the close links with the police exhibited by those projects with high reporting and high police referrals. Moreover, as we discuss further in Chapter 6, in Croydon the overall increase in reports of domestic violence incidents to the police resulted partly from an increase in repeat reporting.

Table 4.1 Reports to police and referrals from police

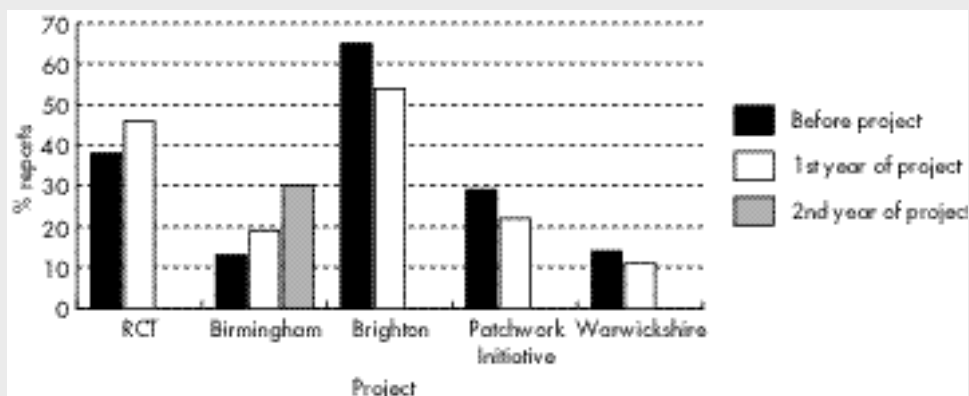
	Croydon	Tower Hamlets	Birmingham	Bradford	Northampton	Camden
Project users reporting at least one incident to the police ⁷⁹	43% (89/207)	70% (130/185)	37% (75/239)	41% (432/1064)	74% (817/1,097)	Not available ⁸⁰
Police referrals to project out of all referrals ⁸¹	47% (357/753)	82% (623/762)	36% (158/444)	37% (339/905)	84% (897/1,063)	76% (370/488)

Arrest

It is Home Office policy that where an arrest is possible in a domestic violence incident this should usually be pursued. The revised Home Office Circular 19/2000, emphasises this approach, with focus on positive policing and 'enhanced' evidence gathering.

Where a power of arrest exists, the alleged offender should normally be arrested. ...
The reasons for the action must, in all cases, be fully documented.

(Home Office, 2000)

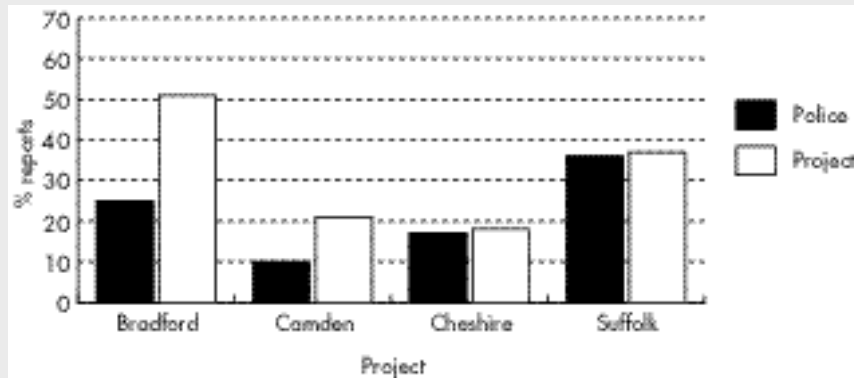
Figure 4.3 Method 1. Percentages of incidents resulting in arrest (over time)

79. Six months either side of project referral date.

80. The project data for Camden regarding project users reporting to the police were not available.

81. Where referral source known, i.e. missing data excluded.

Figure 4.4 Method 2. Percentage of incidents resulting in arrest (non-project comparison)



Previous research has shown that the proportion of recorded incidents to arrests varies substantially from area to area (Hester et al., 2003; Cook et al., 2004). For example, in their study of domestic violence courts and fast track systems in five areas of England and Wales, Cook et al. (2004) found one-third of all cases resulting in arrest in Leeds compared to one tenth in Derby. In Hester et al.'s (2003) study in the north-east of England only one-quarter of recorded incidents resulted in arrest (222/869, 25.5%). Similarly, the CRP project areas showed varying arrest rates.⁸²

Figure 4.3 provides comparison of projects where changes were assessed over time. As can be seen from Figure 4.3, across time there was an increase in the proportion of incidents resulting in arrests in Rhondda Cynon Taff (RCT) and Birmingham, but an apparent decrease in the proportion of arrests in Brighton, North Yorkshire (Patchwork Initiative) and Warwickshire. Data across all three periods (before implementation and two years during implementation) were only available for Birmingham, and indicated that the increases resulted from the introduction by the police of policies and procedures to increase arrests with the aim of increasing prosecutions. In RCT the rise in arrest rate may have resulted from the police reorganisation in relation to domestic violence that took place in April 2001.

82. It should be noted, however, that the data were not collected in the same manner across all the areas (see also Chapter 1) Two main approaches were used to evaluate the data on arrests.

1. Method 1: assessing change over time by using police data to compare the number of arrests before the start and during the projects. This approach was used by most of the evaluation teams, including the University of East London, University of South Bank Criminal Policy and Research Unit, and Canterbury Christ Church University College.
2. Method 2: assessing impact of projects by comparing the arrest rates from all incidents reported to (recorded by) the police with arrest rates from those who used the projects. This approach was used by the University of Bristol evaluation team.

Figure 4.4 shows the outcomes where arrest rates from all incidents reported to the police were compared with arrest rates from those who used the project. As can be seen, the project areas that showed a noticeable increase in incidents reported to the police (Bradford and Camden) also showed an increase in the proportion of incidents resulting in arrest. These were the projects with an emphasis on and specific interventions to provide women with legal support in order for them to engage with the criminal justice system. By contrast, the project areas showing only slight increases in arrests (Cheshire and Suffolk) did not prioritise legal support.

Arrest and photographic evidence

Cheshire had legal support as part of outreach but did not prioritise this area. Cheshire also had interventions related to policing involving the gathering of photographic evidence. This particular aspect indicated a more positive link to arrest, but not on levels of arrest.

Where photographic evidence was taken at the crime scene the Cheshire police were more likely to make an arrest. Incidents where photographic evidence was taken were around five times more likely to result in an arrest being made. This did not necessarily mean, however, that it was the use of photographic evidence that increased the likelihood of arrest. For example, of the 235 incidents in Cheshire where photographic evidence was recorded as being taken in 2001-02, 88 per cent (206/235) resulted in arrest, compared to only 17 per cent (2214/13,217) of all incidents recorded by the police. However, photographic evidence tends only to be collected where there are visible signs of violence, for example physical injuries or criminal damage, and these are also instances more likely to be considered as crimes. Some of these incidents would have resulted in an arrest regardless of whether photographic evidence was collected. Nonetheless, there may also have been an indirect impact on the arrest rate. Cheshire police officers who were interviewed (n=15)⁸³ reported that while the cameras were used to record evidence for any possible prosecution and did not lead directly to the arrest as such, the fact that this evidence could be gathered sometimes assisted the officers involved to feel able to make such arrests, confident in the knowledge that evidence could be provided.

In Cheshire there was some evidence suggesting that where photographic evidence was collected victims were more likely to give witness statements and less likely to retract their statements at a later stage (Table 4.2).

83. Individually or in a focus group.

Table 4.2 Witness statements where perpetrator arrested (N=461)

	Photographic evidence (n=59)	No photographic evidence (n=402)
Incidents where statement given	68% (40/59)	43% (172/402)
Incidents where statement given then retracted	8% (3/40)	19% (33/172)

Where perpetrators were arrested, victims were more likely to give statements for incidents when photographic evidence had been collected than when it had not (68% compared with 43%). More importantly, witnesses who had given statements were less likely to retract their statements where photographic evidence had been taken (8% compared with 19%). Thus, there appears to be a positive effect of photographic evidence in terms of encouraging victims not to withdraw in the initial stages of pursuing criminal justice remedies. However, the numbers are small, a matched sample design was not used and more research is needed to examine this effect further.⁸⁴

Lack of legal advocacy

The interventions in Suffolk were aimed at enabling practitioners to support disclosure of domestic violence and early intervention, rather than increasing engagement with the criminal justice system. Thus none of the interventions in the Suffolk package would have been expected to lead to any significant difference in reporting or arrest rates, and indeed no significant difference was found.⁸⁵

In the following section the Camden project is used as an example to provide more detail about the impact on reporting to and arrest by the police.

Camden Safety Net⁸⁶

Camden Safety Net aimed to increase reporting of initial incidents and increase arrests through advocacy involving project workers based in the Police Community Safety Unit. The purpose was to support women using the legal system and to provide a referral link between existing services, as well as developing new support systems. There was specialised advice and support for women from Black and other minority ethnic communities. The model was similar to that of the Islington project previously evaluated by Kelly et al. (1999).

84. Research from Australia does suggest, however, that photographic evidence can increase the number of successful domestic violence prosecutions (for an overview see Humphreys and Holder, 2004).

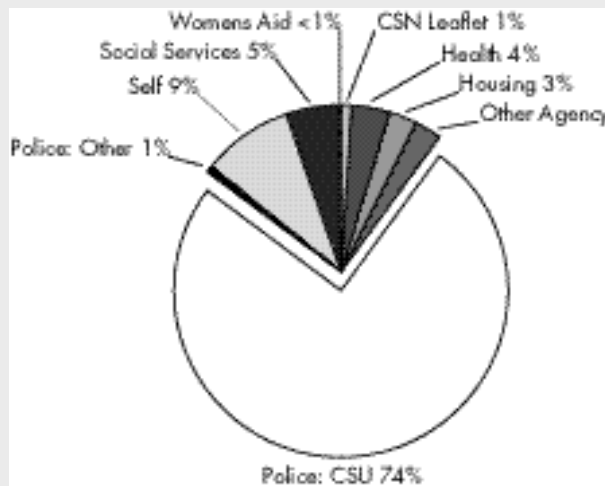
85. Tracking of cases across the project and police data for the Suffolk project area showed a slight increase in the numbers of cases recorded by the police across the two years of the evaluation where women were also in contact with the project. However, the numbers were tiny, with four in year one, rising to eight in year two.

86. This section draws on the University of Bristol evaluation.

In the first year of the project, work with women was carried out by two domestic violence incident workers, based in the police Community Safety Unit (CSU). The incident team had been set up following earlier concerns regarding the time that elapsed between women reporting domestic violence and being seen by officers from the police CSU. The aim was to use a crisis intervention response to every reported incident in the project areas, and to provide time-limited advocacy and support for women, both to take action through the criminal and civil law and referral on to other services. However, as the project developed it became apparent that women needed to have longer-term contact with the workers. To meet the extra pressure of work (which also involved mainstreaming across the whole borough), one full-time and one part time worker were funded by the Borough of Camden after the first year.

The location of the team meant that most of the project's referrals were from the police (74%) (see Figure 4.5; see also Table 2.1). With regard to referrals from the police the Camden project appeared more successful than the previous initiative in Islington (Kelly et al., 1999), although data were not available for a third year, which was the period during which Islington saw a large decline in referrals.

Figure 4.5 Referrals to Camden project



Previous research suggests that there are significant barriers regarding service take-up by Black and other minority ethnic women (see Rai and Thiara, 1997). As a result it was decided to concentrate on the specific needs of Black and other ethnic minority women in Camden where eight per cent of the population were Black and ten per cent were Asian

(ONS: Census 2001). One of the incident workers was appointed especially with this remit. As a Sylheti speaker she could work particularly closely with the large Bangladeshi community (and with deaf women through her knowledge of British Sign Language). The proportion of individuals from minority ethnic groups using the project was higher than might have been predicted from the population. Twenty per cent were Black and 14 per cent were Asian. Service users also indicated that having a Black and other minority ethnic worker was important to them.

They can understand the situation we are coming from...she understands my background so she didn't look at me negatively, she didn't look at me, judging me...because when you're coming from my background people can look at you and they give you horrible looks and I didn't get that. (Project user, Camden)

One of the activities organised was an Asian women's awareness day held in conjunction with a local project, and attended by 22 women, where Personal Safety Plans in Bengali were produced. The incident worker indicated (in an interview) that following the awareness day more Bangladeshi women were reporting to the police. This was also borne out by interviews with Asian women using the project.

There was also other evidence indicating that women were generally more likely to report incidents to the police as a result of the project. For instance, one of the women interviewed for the case studies (n=4) explained that since she had been in touch with the project she had called the police every time her husband was violent. She had also kept notes and found that this resulted in the police taking the situation more seriously. This also highlights that the increase in incidents recorded by the police may be at least partially explained by increased reporting of repeat incidents. (As data regarding repeat victimisation were not available for Camden, it was not possible to verify this). Overall, the Camden project appeared, as was the case in Islington (Kelly et al., 1999), to increase women's confidence in the police.

The willingness to report to the police was, however, not universal. Some Asian women were reluctant about calling the police because of the shame and possibly further abuse this would bring on them.

I was too scared to go to the police to be quite honest. (Project user, Camden)

Others had had very negative experiences with the police, which affected their willingness to report further incidents to the police.

When the police came I had to climb out the window to explain the situation to them. And they said to me that they had to go, that they didn't have no officers basically to be there. And I said...he's outside my house calling me a whore and things like that so obviously I was really scared...they said to me unfortunately they couldn't really hang about...so I mean that night to be honest was like one of the worst nights I spent because I was terrified. (Project user, Camden)

Unfortunately lack of contact with the police worked against some women when they turned to other agencies where a police case file was seen as 'evidence' that they were experiencing domestic violence.

... the housing officer didn't want to know at all, she just closed the door and shut me out totally. (Project user, Camden, who had not reported to the police)

Summary – supporting women to report to the police

- Projects showing the greatest increase in reporting to the police were those with specific interventions providing women with advocacy and support to engage with the criminal justice system, such as legal and court advocacy (Bradford, Tower Hamlets, Croydon); workers based in a police community safety unit (Camden); or police based in a one-stop-shop (Northampton).
- Projects with close links with the police and where reporting increased saw the greatest increase in rates of arrest.
- Projects that showed a noticeable increase in incidents reported to the police (e.g. Bradford and Camden) also showed an increase in incidents resulting in arrest.
- Close links with the police and criminal justice support interventions increased police referrals to projects.
- Women generally echoed the findings from other studies that police practices, if still patchy, are nonetheless perceived as increasingly positive.
- Legal support focusing specifically on Black and other minority ethnic women, including workers with minority language skills, increased their engagement with the criminal justice system.
- Incidents where photographic evidence was taken were around five times more likely to result in an arrest being made, however it is likely that these incidents would have resulted in an arrest regardless of whether photographic evidence was collected.
- Use of photographic evidence appeared to encourage victims not to withdraw in the initial stages of pursuing criminal justice remedies.

Recommendations – supporting women to report to the police

- While domestic violence remains an underreported crime, an increase in police recorded domestic violence incidents is a more appropriate performance indicator than a decrease. Projects should therefore aim to increase reported (recorded) incidents in the first instance as an intermediate aim and decrease reported (recorded) incidents as a longer-term aim.
- Projects should work closely with the police and provide specific interventions that support engagement with the criminal justice system in order to increase rates of reporting and arrests.
- More research is needed on the use of photographic evidence and its impact, particularly at the police interview and plea entering stages.
- The ‘patchiness’ of appropriate police responses to domestic violence still needs to be addressed.

5. Supporting women through the courts

This chapter focuses on the advocacy, support and other approaches used by the CRP projects to enhance the rates of prosecution and conviction, and thus reduce attrition through the criminal justice system. The chapter also includes, to a more limited extent, discussion of the use of civil law remedies.

It should be noted that both the CRP projects and the evaluators had difficulties obtaining the data required to examine prosecution of cases and court outcomes. While data on the number of police incidents were readily available, not all police databases logged how many of the incidents were crimed and how many of the crimed cases resulted in someone being charged. Court outcomes were also difficult to obtain for many of the projects.

Prosecution and the courts

While police practices have increasingly been perceived as positive and supportive by women experiencing domestic violence (Edwards, 2001a; Barron, 2002; Malos, 2003; Hester et al., 2003; and see Chapter 4), attrition has continued to be particularly marked in relation to criminal justice proceedings and outcomes (Edwards, 2001a; Hester et al., 2003). For instance, in the HMIC and HMCPSI review (2004) it was found that of 118 incidents recorded as crimes, only one in five resulted in charges (25/118, 21%), with convictions resulting in half of these (13/25, 50%) (see Table 5.1).

Table 5.1 HMIC and HMCPSI data

Incidents recorded	463
Crimes recorded	118 (25% of incidents)
Charges	25 (21% of crimes; 5% of incidents recorded)
Convictions	13 (50% of those charged; 3% of incidents recorded)

The general picture from both UK and international research is that the criminal justice system often demonstrates little real understanding of domestic violence and struggles to make appropriate responses to it (Valiente, 1996; Mullender and Burton, 2001; Barron, 2002).⁸⁷ It has, nonetheless been seen as a progressive development to channel domestic violence into the courts as a criminal behaviour, in particular in combination with advocacy and support (Taylor-Browne, 2001; and see Chapter 1). With regard to civil justice, previous studies have indicated that there appears to have been a general improvement in protection of women and children since the 1996 Family Law Act enhanced the remedies available within the civil justice system (Lord Chancellors Department, 2003). However, continued concern has also been expressed about the lack of enforcement of civil orders; and only the number of occupation, rather than non-molestation, orders appear to have increased (Edwards, 2001b; Barron, 2002 – and see Appendix 1). The data available from the CRP projects did not allow for a detailed analysis of these issues, although more limited data were available for some of the projects.

The CRP projects

Many of the CRP projects had reducing attrition at various stages of the criminal justice system as one of their aims. Some of the projects sought specifically to narrow the ‘justice gap’ by increasing the number of cases proceeding to court and the rates of sentencing resulting. As indicated in Chapter 4, the basis of decisions by prosecutors and the approach of particular courts may be important aspects in reducing attrition through the courts (Hester et al., 2003; Paradine and Wilkinson, 2004). Other studies have also indicated that withdrawal may be lower where victims are supported in their engagement with the criminal justice system (Robinson, 2003; Hester et al., 2003; HALT, 2004); that attrition may be lower where specialist domestic violence courts are in operation; and where prosecutors and judges or magistrates have domestic violence training (Holder, 2001; Cook et al., 2004). These aspects were incorporated to varying extents by the CRP projects that aimed to reduce attrition of domestic violence cases through the courts. Some of the projects were also encouraging project users to pursue civil remedies alongside, and to enable them to engage with the criminal justice system

The projects referred to in this chapter are primarily those evaluated over a two-year period and/or able to provide reliable data; in particular projects in Bradford, Croydon, Northampton, and Hammersmith and Fulham, where various advocacy and support

87. For instance, in a survey aimed at assessing the impact of recent legislative, policy and practice changes, Barron (2002) found that staff in refuge organisations, outreach projects and advice centres across the UK were somewhat guarded about the deterrent effect of prosecution. While 62 per cent of respondents said it ‘sometimes’ deterred only 4 per cent said it ‘always’ acted as a deterrent.

approaches were used.⁸⁸ Discussion of the Cheshire and Taunton projects, where photographic evidence was used, is also included. However, no court outcome data were available in relation to these cases.⁸⁹

Attrition and the CRP projects

Prosecution and conviction rates varied considerably across the project areas, with conviction rates of between 39 per cent (in Hammersmith and Fulham) and 67 per cent (in Cheshire) for prosecuted cases where the outcome was known (see Table 5.2). In the instances where the perpetrator was convicted the use of custodial sentences also varied considerably (11% to 50%).

Table 5.2 Outcomes across project areas

		Camden	Bradford	Cheshire	North hampton	H'smith and Fulham
No. cases where outcome known		19	72	229	61	51
Outcome	Discontinued/ No evidence offered/ Withdrawn/ Unsubstantiated	47%	29%	16%	28%	57%
	Bound over	0%	19%	12%	11%	4%
	Other ⁹⁰	11%	3%	0%	0%	-
	Found not guilty/ Absolute discharge	0%	1%	5%	0%	-
	Convicted	42%	47%	67%	61%	39%
Conviction ⁹¹	Custodial sentence	50%	15%	13%	11%	40%
	Non custodial sentence ⁹²	13%	68%	50%	49%	35%
	Conditional discharge	38%	15%	37%	41%	25%
	Sentence quashed on appeal	0%	1%	0%	0%	-

88. The projects in Bradford and Northampton were evaluated by the University of Bristol 'multi-service' team; Croydon by the University of East London 'Black and other ethnic minority' team; and Hammersmith and Fulham by the South Bank University 'criminal and civil justice' team.

89. The project in Cheshire was evaluated by the University of Bristol 'multi-service' team, and Taunton by the South Bank University 'criminal and civil justice' team.

90. Including released to immigration, suspect committed suicide while on remand, perpetrator could not be found,

91. Percentages calculated from base number of those sentenced.

92. Other than conditional discharge which is listed separately.

The reason for the lower conviction rate for Bradford is unclear.⁹³ Project users in Bradford were accompanied to court by advocates, and it appears there would have been an even lower conviction rate without this intervention. In Northampton the high conviction rate appeared at least partly due to intensive advocacy and support provided to project users and the reduction in withdrawals that resulted. In Hammersmith and Fulham training of police and magistrates appeared to be successful in raising conviction and custodial rates.

Use of civil law

Out of 136 women using the Bradford project who applied for civil protection orders, 81 (60%) were known to have been granted an order, most frequently a non-molestation order under the Family Law Act (49%, 47/97 applications) or a non-molestation order with an occupation order (38%, 37/97 applications).⁹⁴ Six of the 81 orders granted (7%) were known to have been breached.⁹⁵ The project indicated the importance of close links with good family law solicitors in the area who were willing to work rapidly in cases referred to them by the project. Having a legal worker based in the project also speeded up the solicitors' process because much of the 'groundwork' had already been done.

...they know we've assessed ...gone through all the criteria of whether she falls into the categories to be able to apply for one of these orders...And they also know that she'll be briefed around what's going to happen, how long its going to take, what each sort of step will be. So that it saves time for them.

(Project co-ordinator, Bradford)⁹⁶

In Northampton, interviews with project users suggested that the location of police officers within the project made action against breach of civil injunctions more likely, or at least they were dealt with more quickly than if they had been reported to other police officers.

93. While data on court outcomes were available for project users, no police or CPS data were available to provide comparison.

94. With regard to civil law, sections of the following Acts apply to domestic violence cases: 1996 Family Law Act (Part IV); 1997 Protection from Harassment Act; and 1996 Housing Act. In addition women experiencing domestic violence may also have children subject to civil orders in relation to the 1989 Children Act and the 2002 Adoption and Children Act.

95. These figures underrepresent the number of women granted civil orders and the number of breaches due to missing data. A further seven orders were known to have been breached but in cases where details were not available on the civil order granted. In the Hammersmith and Fulham project five out of 12 (42%) civil injunctions were breached, suggesting under-recording of breaches on the Bradford database.

96. Very little data were available, however, from the women's perspective on how effective civil protections orders had been.

In relation to breaches of non-molestation orders, things that would have just been left has been put before the Civil Court in two or three weeks time. Having police officers here means that people are arrested as soon as possible.

(Project manager, Northampton)

In Hammersmith and Fulham 15 injunctions were applied for with the support of the advocacy project where workers had been especially trained in relation to civil remedies. Twelve of these were granted, all with powers of arrest attached. Five were recorded as having been breached and in each case, the police were recorded as having arrested the perpetrators as a result. In all three of the cases in which injunctions were not granted, the database recorded that the victim failed to turn up to court.

Bradford Staying Put⁹⁷ – accompanying women to court

Bradford aimed to decrease the number of women withdrawing their statements, increase convictions and enable women to stay in their own home by supporting women in the use of criminal and civil law using a dedicated legal support/advocacy worker. The project had a specific emphasis on supporting South Asian women.

The legal support and advocacy worker based in the project offered initial legal advice about options available, accompanied women to a solicitor, and supported them throughout civil and criminal court proceedings including accompanying them to court.

Data were available that indicated the importance of accompanying women experiencing domestic violence to court as witnesses. As shown in Table 5.3, a guilty plea was entered in half of the cases where the victim was accompanied (8/16, 50%) compared with only one-fifth in the cases where the victim was not accompanied (23/108, 21%). Thus, although the numbers are very small, this indicates that a guilty plea was more likely to result when the victim was accompanied. This echoes the findings by HALT in Leeds (HALT, 2004; Cook et al., 2004).

97. This section draws on the University of Bristol evaluation.

Table 5.3 Bradford – impact on plea of accompanying victim to court (N=124)

	Guilty	Not guilty	Total
Accompanied	8 (50%)	8 (50%)	16 (100%)
Not accompanied	23 (21%)	85 (79%)	108 (100%)

Interviews with project staff also indicated that the women were more likely to turn up to give evidence if supported by the project and that the perpetrator often changed his plea to guilty when he saw that she had turned up.

...the CPS have said to us that it's the fact that she's there has made a huge difference...because a lot of them [perpetrators] don't expect you to turn up.

(Project staff, Bradford)

The women appreciated the legal advocacy they were given through the project, and indicated the importance of this intervention.

Well I took my ex-partner to Court and basically they treated me with a kid glove and looked after me, did everything for me, organised things...if I had to go and see anybody they came with me. And you know when you speak to solicitors and stuff they don't always speak in jargon...they explained everything in English to me...so I fully understood what was happening. And they gave me several ways of advice, different paths I could go on. And I made my own decisions then of what to do.

(Project user, Bradford)

They said it's not going to happen overnight. It is a long procedure that you're going to go through, but we're here with you all the way. And that's what I liked.

(Project user, Bradford)

... we met in a café and she explained everything that was going to happen...so I was fully aware of everything.

(Project user, Bradford)

Hammersmith and Fulham Standing Together⁹⁸ – training of police and magistrates

Hammersmith and Fulham aimed to improve the response of the criminal and civil justice systems, and 'make the law work for women' by systematising police procedures from call out to conviction and all intermediate stages, and improving prosecutors' understanding of domestic violence. The project also aimed to increase women's uptake of civil remedies. The project included advocates to provide legal advice and support women through the justice processes. The setting up of a designated domestic violence list at West London Magistrates' Court was also an aim but was not carried out during the CRP evaluation period. The project was funded and evaluated for one year but built on previous work by the Standing Together Project (originally established in 1998) based on the 'Duluth' approach (see Pence, 1999).

Hammersmith and Fulham Standing Together set out to raise local sentencers' awareness and understanding of domestic violence.⁹⁹ In particular, they wanted to ensure that magistrates did not assume that 'anger management' programmes were an appropriate response and that they made referrals to the local probation-run specialist programme for perpetrators.

Prior to the CRP funding Standing Together had already been able to decrease attrition in the criminal justice system. In 1996 (before Standing Together was set up) only 10 per cent of charges in Fulham resulted in conviction, and this rose to 15 per cent in 1999 and to 27 per cent in 2000 (the first two years of Standing Together). The increase in conviction rates was accompanied by a rise in incidents reported to the police, in the proportion of incidents recorded as crimes and in the proportion of crimes which were charged (see also Chapter 4).

The improvement in attrition documented before the start of the CRP project was not, however, maintained when the project went borough-wide from October 2000. While conviction rates as a proportion of reported incidents increased throughout the work of the project they remained low (1% of incidents resulted in a conviction immediately prior to the CRP project and 2% resulted in a conviction in the second year of the CRP project).

Out of the 1,927 recorded incidents 126 (7% of incidents, 9% of crimed cases) were known to have reached the prosecution or court stage during the CRP funded period. Data on the final court outcomes were available in 51 of these 126 cases (see Table 5.2). These

98. This section draws on the South Bank University Criminal Policy Research Unit evaluation.

99. A Specialist Domestic Violence Court was established after the evaluation ended (in October 2002) and also included advocacy and support at court and ongoing training for court personnel. A subsequent evaluation found this approach to have a positive impact on attrition (Cook et al., 2004).

data show that although a lower proportion were convicted than in the other CRP project areas, the proportion of custodial sentences was higher (with the exception of Northampton County Court where only those cases likely to result in higher tariff sentences were heard). This suggests that the training for 'sentencers' in the Magistrates Courts may have had some impact in stressing the seriousness of domestic violence. In addition, only one in ten of those convicted in Hammersmith and Fulham were given a fine (10%, n=2).¹⁰⁰

Twenty-six magistrates attended a training session together with staff from the court and the Probation Service. Seven magistrates expressed a willingness to be further involved. The training included the dynamics of domestic violence (for example, the reasons why women do not 'just leave'), and the importance of sentencing perpetrators to attendance at perpetrators' re-education programmes (rather than just 'anger management'). The 11 magistrates who provided feedback were all positive about the training. A further session presented by a representative from the Duluth project was attended by seven magistrates and one district judge as well as a range of representatives from other agencies. A domestic violence workshop for magistrates took place in September 2001 at West London Magistrates' Court for magistrates across London. Sixty people attended, including 38 magistrates. A court representative interviewed by the evaluation team noted that he had seen a difference in the attitudes and behaviour of magistrates when dealing with domestic violence cases in court in the few weeks after the training took place. He felt that they were asking more questions to understand the case better.

Northampton Sunflower Centre¹⁰¹ – intensive advocacy and support

Northampton aimed to increase the detection, conviction and sentencing related to domestic violence and increase the rate of survivors' applications to the courts for civil remedies. This was to be achieved by supporting women to use criminal and civil law through proactive incident investigation carried out by police officers seconded to the project; close working between the project police officers and the CPS; police training and awareness; and the work of the victim support officers with project users. The project was based in a one-stop-shop and provided a holistic 'spiralling cocoon of care' approach to advocacy and support.

100. It should be noted that the fines issued varied across the projects areas. For instance in Cheshire, in 30 cases where a fine was recorded this ranged between £20 and £300, with a mean fine of £103. By contrast, the fines in Northampton were much higher and ranged between £50 and £500, with a mean fine of £243. This suggests that sentencers in different areas may have different conceptions of how much money is likely to act as a deterrent. However, the victims talked of being let down by the criminal justice system and told of fines having no deterrent effect.

101. This section draws on the University of Bristol evaluation.

The Northampton project's targets included increasing the rate of conviction for domestic violence offenders from 25 per cent to 35 per cent.¹⁰²

Table 5.4 below shows the court outcomes (where known) for the Northampton project users compared with comparison groups of all domestic violence cases heard at Northampton Magistrates' Court and Northampton County Court over the same period of time.

		Northampton project	Northampton Magistrates' Court	Northampton County Court
Number of cases where outcome known		61	216	9
Outcome	Discontinued/ Dismissed/ No evidence offered/ Withdrawn/ Unsubstantiated	28%	55%	44%
	Bound over	11%	12%	0%
	Other ¹⁰³	0%	1%	0%
	Found not guilty/ Absolute discharge	0%	2%	11%
	Convicted	61%	31%	44%
Conviction ¹⁰⁴	Custodial sentence	11%	14%	100%
	Non custodial sentence ¹⁰⁵	49%	45%	0%
	Conditional discharge	41%	41%	0%

Overall, it appeared that the project had an impact on increasing conviction rates and thus in reducing attrition through the courts, with a conviction rate nearly twice that of a comparison group of all cases heard at the Magistrates' Court. As indicated earlier, the Northampton project had one of the highest conviction rates of the CRP projects for which data were available (see Table 5.2), and compared with recent studies (Hester et al., 2003;

102. It is unclear whether they meant 35 per cent of incidents, crimed cases or charged cases.

103. Including formal cautions.

104. Percentages calculated from base number of those sentenced.

105. Other than conditional discharge which is listed separately.

HMIC and HMCPSI, 2004).¹⁰⁶ Moreover, the conviction rates in the Northampton comparison groups were both lower than elsewhere (Hester et al., 2003; HMIC and HMCPSI, 2004).

One element that appeared important was in relation to a victim's withdrawal from the criminal justice process. Of the sample where data were available¹⁰⁷ project users withdrew their statement in just over one in ten cases (22/200, 11%).¹⁰⁸ While no comparable figures were available from before the project, by comparison to other areas this represents a low rate of withdrawal. It is similar to the figures achieved by the Leeds HALT project¹⁰⁹ where just under ten per cent of women withdrew their statements following advocacy and support (HALT, 2004). HALT argue that their finding is not only extremely significant, but also turns much current thinking on attrition on its head in suggesting that when provided with appropriate advice, support and liaison with criminal justice agencies, women are prepared to support a prosecution. By contrast, there was a 50 per cent withdrawal rate in the cases across areas reviewed in the recent evaluation of domestic violence courts and fast track systems (Cook et al. 2004), and 44 per cent in the cases reviewed by the CPS (HMIC and HMCPSI, 2004).

The importance of intensive advocacy and support, and having services under one roof, was also evident from the interviews with project users (n=12).

I've been in the same situation before and I've always just backed down and weakened but the Sunflower Centre gave me that boost and helped me because I knew that there was always somebody there for me...whereas, before I knew about the Centre, I just thought I was on my own. (Project user, Northampton)

I've been in this relationship for four years and things have happened over and over and the police have been involved and I have dropped charges and I have never had the guts to through with it. And I've never had somebody to support me and say: "Look, you have to go through with it. Don't drop the charges." And things were just different this time. (Project user, Northampton)

Although some of the agencies interviewed in Northampton saw the project as being overly dominated by the police, particularly within the later stages, this was more related to the project's

106. The Northampton rate was 61 per cent compared to 52 per cent of those charged being convicted in Northumbria (Hester et al., 2003) and 50% of those charged being convicted across the HMIC and HMCPSI review areas (HMIC and HMCPSI, 2004).

107. In 200 of the crimed cases (n=763).

108. No comparative police data were available.

109. Leeds HALT is a non-CRP funded project providing advocacy and support for women going through the court process.

management structure than the presence of the police within the project. Having the police based within the project was seen as fundamental to its work and something that gave it 'clout'.

I know we've got convictions where there normally wouldn't have been convictions.
(Member of project staff, Northampton)

However, while the project was successful in reducing attrition in the criminal justice system, where the perpetrator was not convicted or the sentence appeared lenient those supported by the project still felt let down by the system – as also echoed in other research (Kelly et al., 1999; Barron, 2002; Hester et al., 2003).

I felt totally let down by the system...I felt just shocked, just devastated. I felt, like, well, how serious does something have to be, because I feared that he would come and get me and I still fear that.
(Project user, Northampton)

He got two years suspended sentence...I don't think it was serious enough ... He's walking around, he thinks it's a joke.
(Project user, Northampton)

With regard to tariffs following conviction, the project also appeared to have had some impact. This is indicated by Table 5.5, which compares the court outcomes where monetary penalties were given. Although the numbers are small, the table shows that the fines were lower for project users but that the amount of compensation was higher.

Table 5.5 Monetary penalties (rounded to nearest £)

		Min	Max	Mean
Fine	Northampton all cases (n=7)	£50	£500	£243
	Northampton project cases (n=2)	£100	£200	£150
Compensation	Northampton all cases (n=21)	£8	£300	£92
	Northampton project cases (n=8)	£50	£900	£225

Cheshire and Taunton¹¹⁰ – use of photographic evidence

Cheshire and Taunton both aimed to reduce attrition in the criminal justice system by using photographs taken at the crime scene to 'enhance' evidence.

110. This section draws on the University of Bristol and South Bank University Criminal Policy and Research Unit evaluations.

Photographic evidence in relation to police practice has already been mentioned (Chapter 4). Here the focus is on its impact in relation to prosecution.

The Cheshire project (Cheshire Data Monitoring and Outreach Project) purchased 40 Polaroid cameras plus films for police use in domestic violence cases as part of a wider project. The Taunton project (West Somerset Polaroid Cameras Project) purchased ten Polaroid cameras and sufficient film for an eighteen-month period so that officers working in the area responding to reports of domestic violence could photograph injuries to victims and damage to property.¹¹¹

Generally, monitoring of the use and impact of photographic evidence proved difficult and it was not possible to provide any firm conclusions about the impact of photographic evidence. What follows should be considered tentative and is based on small sample sizes.

As indicated in Chapter 4, victims appeared more likely to give a statement when the alleged perpetrator was arrested and less likely to withdraw this statement. The photographic evidence may also have led to an increase in charge rate. This appeared to be the case in both Cheshire and Taunton (Table 5.6).

Table 5.6 Percentage of crimes where perpetrator charged/summonsed

	Photographic evidence	No photographic evidence
Cheshire	42% (25/59)	36% (146/402)
Taunton	60% (70/116)	24% (158/663)

However, it is possible that photographs were taken in cases that were classed as being 'more serious' and hence more likely to result in a criminal charge. CPS prosecutors in Cheshire reported that photographic evidence was particularly useful in getting the level of the charge right.

In Taunton, at the police interview stage, 31 per cent of suspects who were arrested admitted they were guilty in instances where photographic evidence was used. However, it was not possible to compare this with a sample of cases where no photographic evidence was shown and this information was not available from the Cheshire project.¹¹²

111. A further three projects purchased cameras to collect photographic evidence (Gloucestershire, Restormel and North Cornwall and Thurrock). However, only Cheshire and Taunton collected enough data to begin to evaluate their impact.

112. In Australia, digital cameras were used, and this was found to increase successful domestic violence prosecutions (Humphreys and Holder, 2004).

The use of photographic evidence in court may have led to higher tariff sentencing.¹¹³ For instance in Cheshire in 30 per cent of cases (9/30) where there was photographic evidence there was a higher tariff sentence compared with 24 per cent of cases (13/54) where there was no photographic evidence.

Summary – reducing attrition through the courts

- Having close links with good family law solicitors, a legal worker attached to the project and police officers located within the project all enhanced the use of civil remedies. In particular it allowed injunctions to be put in place without delay and breaches to be dealt with.
- Attrition within the criminal justice system varied considerably across the project areas, with conviction rates of between 39 per cent (in Hammersmith and Fulham) and 67 per cent (in Cheshire) for prosecuted cases where the final court outcome was known.
- For most projects there was a reduced level of attrition, with one project having a conviction rate that was nearly twice as high as cases not supported by the project (Northampton).
- Women were more likely to appear in court to give evidence when accompanied, which in turn increased guilty pleas. While these findings are based on small sample sizes, they are in line with previous research (Holder, 2001; HALT, 2004; Cook et al., 2004).
- Advocacy involving intensive legal and other support enabled women to support the prosecution, and a 'one-stop-shop' model was especially useful (e.g. Northampton).
- The highest proportion of custodial sentences was achieved where magistrates attended domestic violence training (Hammersmith and Fulham).
- In cases where women had been supported but where the perpetrator was not convicted or the sentence appeared lenient (especially in the case of fines), a strong sense of being let down was evident.
- Where photographic evidence was collected more suspects appeared to be summonsed and guilty pleas entered. Photographic evidence may also have led to an improvement in appropriate charging and higher tariff sentences in court. These findings are based on small numbers, and further research is needed in the UK on photographic evidence.

113. Defined here as a custodial or community sentence as opposed to bindover, caution, conduit discharge or fine.

Recommendations – reducing attrition through the courts

- Systems for monitoring of cases through the criminal and civil justice processes should be one of the first priorities at the project development stage.
- The projects need to work closely with the CPS as well as the police.
- Research into the use of evidence is needed to ensure that witnesses and projects are recording, and police are collecting and passing on, evidence that will be useful to the CPS.
- Use of advocacy that involves legal and other support and accompanying women to court should form a key element in projects aimed at reducing domestic violence.
- The development of one-stop-shops should be encouraged.

6.

Reducing repeat victimisation

As discussed in the previous chapters, responses to domestic violence have included positive policing in terms of pro-arrest and pro-prosecution policies; an emphasis on evidence gathering (for example through the use of cameras as discussed earlier); and the provision of advocacy and support to women experiencing violence and their children; (see also Home Office, 1990, 2000; CPS, 2001). 'Target hardening' (as widely used throughout crime prevention) has been a further response. In domestic violence cases, the latter includes such measures as improving and increasing the security of accommodation used by women with violent partners or ex-partners, and the use of personal alarms and mobile telephones by women who have experienced violence, provided usually by the police, with the aim of decreasing repeat incidents and increasing women's safety.¹¹⁴ In this chapter the impact on recorded repeat victimisation of interventions involving advocacy and other support, and interventions involving target hardening are examined. Civil law remedies are also discussed where they formed a part of protection from repeat victimisation.

Repeat victimisation

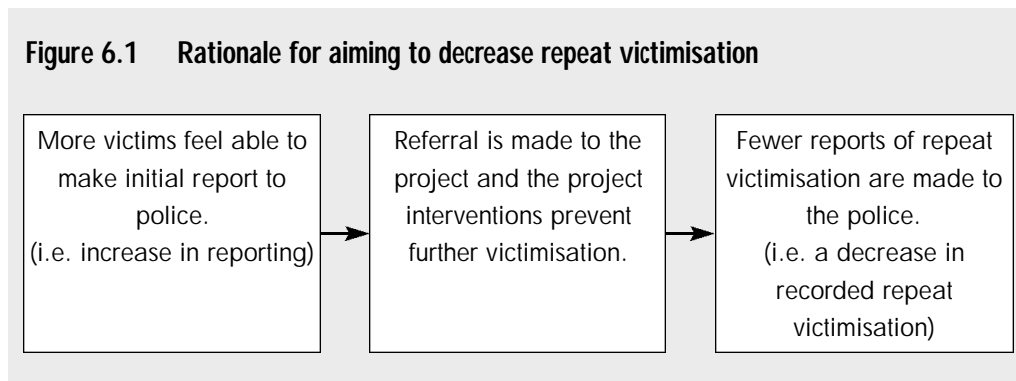
Repeat victimisation was designated a general performance indicator for the police in England and Wales in 1996 in recognition that a few people are exposed to an inordinate amount of crime (Hanmer and Griffiths, 2001). The Home Office definition is that repeat victimisation occurs '... when the same person or place suffers from more than one incident over a specified period of time' (Bridgeman and Hobbs, 1997). Patterns of repeat victimisation have been found for a number of crimes, including burglary (Tseloni and Pease 1998), car crime (Mayhew et al., 1993) and racial violence (Sampson and Phillips, 1992). Domestic violence is a crime where repeat victimisation is also an important feature, and this was highlighted in an earlier project evaluation in Merseyside (Lloyd et al., 1994) and by Hanmer et al. (1999) in their evaluation of West Yorkshire police practice. However, dealing with domestic violence is not like dealing with burglary or theft. With regard to the latter, although the offence may be repeated, it is much less likely that the same victim will be selected as repeatedly; or that the victim may live or have lived with the perpetrator; or that the very fact that she has reported an incident or taken action may be the trigger for repeated escalating incidents.

114. The term 'target hardening' is not the most appropriate terminology to describe these forms of interventions with 'security measures' or 'safety measures' probably more useful terms. However in this overview we use the term 'target hardening' to aid clarity.

Research shows that where the police have been contacted, second and subsequent domestic violence incidents are often reported fairly soon after the initial incident (Lloyd et al., 1994). However, only those incidents that are both reported to and recorded by the police are included in the repeat victimisation data. Analysis of repeat victimisation in this overview was therefore based on recorded repeat victimisation. Nonetheless, recorded repeat victimisation is generally acknowledged as being the best proxy measure of victimisation (Farrell and Buckley, 1999). A more robust approach used by some of the evaluators in the CRP domestic violence evaluation, such as the East London team, involved collation of information about individual women from a number of different sources including interviews and case files in addition to incidents recorded by the police. Keeping these aspects in mind, in this chapter when we use the term 'repeat victimisation' we are referring to 'recorded repeat victimisation'.

The CRP projects

While many of the projects aimed to increase initial reporting to the police some of the projects hoped to decrease the rate of repeat reporting. The rationale for this is as presented in Figure 6.1.



In practice things were not quite as simple as the rationale for the aims suggested: some interventions did reduce repeat victimisation as planned, while others increased repeat victimisation, yet could still be considered as being successful interventions despite this increase.

Data regarding repeat victimisation were available for projects in Croydon, Tower Hamlets, Birmingham (from the 'Black and other minority ethnic group' package evaluated by the

University of East London team), and from Northampton and Bradford (part of the 'multi-service' package evaluated by the University of Bristol team). The interventions aimed at reducing repeat victimisation varied across these projects, with Croydon, Tower Hamlets and Birmingham using general advocacy and support; Northampton providing advocacy and support via a one-stop-shop; and Bradford using target hardening and support. In what follows, the impact on repeat victimisation of using these different approaches is looked at in more detail.¹¹⁵

Croydon Domestic Violence Advocate Service (CDVAS)¹¹⁶

CDVAS aimed to reduce repeat victimisation by providing an advocacy service to women experiencing domestic violence, rape and other sexual abuse within a domestic violence context, and in particular women from Black and other minority ethnic communities. This included support with accessing the legal process through practical assistance, safety advice, an out of hours phone line and support during child contact proceedings. Support was provided up to six weeks after any legal action had been obtained. Emotional support was also provided to women to empower them not to return to a violent partner. CDVAS was said to be based on the 'Duluth Domestic Abuse Intervention project Power and Control Wheel' (Pence and McDonnell, 2000). The model focused on ensuring that practitioners respond to domestic violence cases in a consistent manner and that their response centralises victim safety.

In Croydon, recorded repeat victimisation increased generally (all police incidents, project users and non-project users) by 46 per cent over the project's lifespan (from 394 repeat incidents in 2001/2002 to 576 in 2002/2003). As Table 6.1 indicates, this increase was particularly marked for those from Black and other minority ethnic groups.

115. It should be noted that the evaluation teams used different methodologies for analysing recorded repeat victimisation. The University of East London team examined recorded police incidents within six months either side of project referral. While the University of Bristol team also examined repeat reports as six months either side of referral to project, they discounted any reports that were made within 14 days either side of referral.

116. This section draws on the University of East London evaluation.

Table 6.1 Recorded repeat victimisation in Croydon

Ethnic appearance	2001/2002	2002/2003	% increase/decrease
White European	254	353	+39%
Dark European	11	22	+100%
African/Caribbean	108	146	+35%
Indian/Pakistani	17	41	+141%
Chinese/Japanese	3	5	+39%
Arabic/Egyptian	0	4	+300%
Unknown	1	5	+400%
Total	394	576	+46%

Source: Police Information Bureau 2003. The ethnic appearance categories are those used by the police

When the repeat victimisation patterns of a sample of project users (n=207, 89 of whom had reported at least one incident to the police) were compared with a comparison group of non-project users (n=49)¹¹⁷ it appeared that project users were more likely to have some level of repeat victimisation than those in the comparison group¹¹⁸ (see Table 6.2).

Table 6.2 Recorded repeat victimisation after referral in Croydon

	Project users (n=89)	Comparison (n=49)
One or more incidents recorded after referral to project (project users) or incident (comparison group).	30%	6%

When the frequency of incidents was compared (see Table 6.3), recorded repeat incidents decreased for project users (with fewer recorded incidents after referral to the project: 43%, 38/89 as compared with 39%, 35/89). Project users were likely to have both more incidents recorded after referral to the project than the comparison group (39% compared with 10%), and also fewer incidents recorded after referral to the project than the comparison group (43% compared with 14%). In the comparison group, most had the same number of incidents recorded in the after period as the before period (76%, 37/49).

117. The comparison group consisted of 49 women who were not referred to the project during the period when the project was running, and matched with the tracked group according to ethnicity. The comparison group allowed a comparison of the level of reports made by women who had or had not accessed the project. Tracking period 1 March 2001 – 31 March 2002.

118. As indicated earlier, the definition of victimisation used by the evaluation team was a recorded police incident within six months either side of project referral. Only those project users who had reported at least one incident to the police (n=89) were compared with the comparison group.

Table 6.3 Frequency of recorded incidents before and after referral in Croydon

	Project users (n=89)	Comparison (n=49)
More incidents recorded after referral to project	39%	10%
Fewer incidents recorded after referral to project	43%	14%
Same number of incidents recorded after referral to project	18%	76%

In other words, the project did have an impact on repeat victimisation but this impact varied. For some project users referral to the project increased repeat victimisation but for a similar number of project users referral to the project decreased repeat victimisation.

So what is the explanation? All of the project users had received broadly the same intervention (that is wide-ranging advocacy including legal and emotional support). What differed, however, was the intensity with which the intervention was applied to different project users. Some project users received more advocacy and support than others. Thirty-five of the 68 case files examined included recorded repeat victimisation data, and these were analysed according to the amount of support the women received (see Table 6.4).

Table 6.4 Classification scheme for assessing level of engagement with project

Level	Description of support
0	Not met client, at most spoken on telephone and offered some advice.
1	Single meeting with client, advice and assistance offered, little or no follow-up work completed.
2	Several meetings with client, helped client liaise with other agencies.
3	Engaged intensively with client over a prolonged period of time, empowered client to take actions to overcome her problems.

It was found that those women who were worked with at level three (the highest intensity of support) also had higher levels of recorded repeat victimisation than those who were worked with at level two or below (lower intensity of support). Albeit small numbers, women worked with at level three were more likely to have recorded repeat victimisation after referral to the project (62% compared with 41%) (see Table 6.5). Also, these same women were likely to have more incidents recorded after referral to the project (46% compared with 27%). In other words, the data suggests that this group of women were being victimised the most severely.

Table 6.5 Level of engagement and frequency of recorded repeat victimisation after referral in Croydon

	Women worked with at level 3 (n=13)	Women worked with at level 2 or below (n=22)
One or more incidents recorded after referral to project	62%	41%
More incidents recorded after referral to project	46%	27%
Less incidents recorded after referral to project	0%	5%
Same number of incidents recorded after referral to project	54%	68%

Interviews with the advocates suggested that as part of their working style they would encourage women to always make reports of incidents to the police, not least because if the case went to court, the number of reported incidents would add strength to the case. When advocates worked intensively with women they were more likely to report to the police, and to report more than once.

Interview data suggested that the project's approach, which combined both advocacy and support also increased the likelihood of project users pursuing legal remedies, especially civil protection orders. Only five of the 25 women interviewed suggested that they would have pursued legal action without having support from the project.

I would not have been able to proceed with the legal process if it hadn't have been for my advocate. Just knowing she was there, beside me through the process was the best kind of help I could have hoped for. (Project user, Croydon)

Overall, the Croydon project's approach enabled reduction of repeat victimisation for some women and more active engagement with the criminal justice system. However, it also revealed that some women, especially those who were suffering from severe victimisation, needed more support and, when encouraged to so, were more likely to report incidents to the police.

Northampton Sunflower Centre (SFC)¹¹⁹

Northampton SFC: aimed to reduce repeat victimisation through the establishment of a domestic violence action centre linked to the police (in the form of a one-stop-shop). Decreasing the repeat victimisation of women from BME communities was a specific aim, and a part-time dedicated worker was employed to offer specialist services. The intervention model was based on a holistic 'spiralling cocoon of care' principle.

Initially, the Northampton project was aimed solely at women who had experienced repeat victimisation. The project was changed in September 2002 to include women reporting for the first time as well as those with repeat reports. This was in recognition that women reporting to the police for the first time are likely to be repeat victims. Also, many of the repeat victimisation cases they were working with were very complex, and it was thought that earlier intervention would be a better approach.

... by the time they've got to repeat we know that it's much more likely that they're going to go on to be serial repeats rather than a one-off...The golden opportunity time that you've got is at first reporting of the incident.

(Project manager, Northampton)

Women tend not to report initial domestic violence incidents to the police. Moreover, just because a woman has reported once to the police does not necessarily mean she will report further incidents. The interviews with women (n=12) suggested that they reported only those incidents that they perceived as being major, in particular failing to report harassment that consisted of a high number of seemingly minor incidents.

I felt like I should be able to deal with that stuff myself. (Project user, Northampton)

In some cases it was only the contact with the project that had enabled women to identify and name continued harassment.

I've had my car tyres let down eight times, constant phone calls, constant you know sort of walking past, driving past, jumping out at me, sort of hiding in the shadows...I wasn't logging any of it...because I didn't see it as harassment.

(Project user, Northampton)

119. This section draws on the University of Bristol evaluation.

Comparing incident data from the police with data regarding project users suggests that individuals in contact with the SFC had a longer history of recorded repeat victimisation and also appeared to have experienced more incidents than those generally reporting incidents to the police (see Table 6.6).

Table 6.6 Victims with five or more incidents recorded by the police in Northampton

Police	Project
13% (n=185/1,423)	21% (n=128/610)

Project users appeared to experience a reduction in recorded repeat victimisation following intervention by the project, with data on referrals to the project showing a reduction in project users reporting one or more incidents to the police after referral to the project (with 34%, 236/697, having reported one or more incidents before referral compared with 23%, 161/697, after referral. See Table 6.7).

Table 6.7 Recorded repeat victimisation in Northampton¹²⁰

	Northampton (n=697)
No reports before referral	66%
One or more reports before referral	34%
No reports after referral	77%
One or more reports after referral	23%

The advocacy and support work with victims of domestic abuse, with focus on individual needs, was fundamental to the work of the SFC. The close partnership with the police, who made most of the referrals (82%) was another important feature.

A police officer was seconded to the SFC, who would pick up all police files on domestic violence incidents each morning and pass them on to the project. The officer would also take part in evidence gathering. Attempts were made to contact each victim – by letter and/or via health visitors or schools.

120. The period used in which to count repeat reports was six months either side of referral to project. In addition, any reports that were made within 14 days either side of the referral were also discounted. This is because it is preferable to refer to 'episodes' of violence which may be made up of many incidents over a period of time. In addition, women may not engage with the project workers immediately after referral or there may be a time gap between an incident and referral.

Our policy is that we make every effort even if that involves a joint home visit between police and support worker. (Project staff, Northampton).

Individual packages of support would be tailored to fit each of the female (or male)¹²¹ victims concerned. This would involve intense individual practical and emotional support (including support to pursue civil and criminal justice routes); telephone advice and support, support to children (individual and groupwork); advocacy with other agencies; and ensuring the safety of each victim (this may require moving to a refuge or getting a panic alarm from the police). This pro-active stance combined with the wide-ranging and intensive advocacy and support clearly made a positive difference to many of the women concerned. This was especially evident from interviews with project users.

I actually felt very insecure...it sort of had an effect psychologically on me this time and she turned me around...even a year down the line I'd be quite happy to ring her up if I felt the need. (Project User, Northampton).

And I have come in, made myself come in, not knowing how I've got here, and I've gone down those steps feeling a lot better. And knowing that I've only got to get home and there's somebody on the end of the phone. (Project user, Northampton)

Particularly for women with complex cases, for whom repeat victimisation was continuous, knowing that the SFC was there to help them gave them a feeling that 'I'm not battling alone'. Users liked continuity and valued being able to see the same support worker or someone who knew about their case, rather than repeating their situation over and over to different people. Women also spoke very positively about being able to come to one place to access services.

I didn't have to run around and ask "Can you help me with this"...it's made it a lot easier and it's just a lot less to worry about...at times when your head's just full of stuff and I know everything can be done through here so I don't need to run my feet off and I know it's all being dealt with, one person is dealing with it, so I don't have to keep explaining, maybe to people who don't actually know, really, what I'm talking about anyway. (Project user, Northampton)

121. Male victims constituted 8 per cent of those in contact with the project. The project responded to this by developing a tool that enabled them to make an assessment of the issues of power and control within the relationship to ensure they were working with the right person – of particular importance where both partners presented to the SFC as victims.

While seeking help did put an end to the abuse for some women, for others it also led to a change in the tactics being used by the perpetrator. Post-separation violence, including being followed and verbal abuse were the most common form of continuing harassment reported by women in interviews.

Bradford Staying Put¹²²

Bradford Staying Put aimed to enable women to stay in their own homes by increasing the number of reports to the police and arrests by providing legal and court advocacy and support to women, a 24-hour helpline, enhanced security (phones, alarms and locks) and specialised support for Asian women. The project was located in the voluntary sector, and built on strong statutory and voluntary sector multi-agency links.

Target hardening was a key intervention, and was used in combination with other advocacy and support. Three forms of target hardening were available: mobile phones, monitored alarms and home security (mainly door locks, window locks and security lighting). The mobile phones were pre-programmed to dial 999 only, the alarms were monitored by Careline and the police, and the home security was implemented through an external agency.

In Bradford, regardless of the project interventions being accessed, project users had a longer history of recorded repeat victimisation and also appeared to have experienced more incidents than individuals generally reporting incidents to the police (see Tables 6.8 and 6.9).¹²³

Table 6.8 Victims with five or more incidents recorded by the police in Bradford

Police	Project
16% (n=502/3,138)	33% (n=121/367)

Table 6.9 Victims with incidents recorded over a period longer than 12 months in Bradford

Police	Project
34% (n=1,088/3,200)	45% (n=166/369)

122. This section draws on the University of Bristol evaluation.

123. Base numbers = total number of repeat victims.

From the referral data it is apparent that in Bradford (as in Croydon and Northampton), there was an overall reduction in project users reporting one or more incidents to the police, with 48 per cent (211/436) having reported one or more incidents before referral compared with 34 per cent (149/436) after referral (see Table 6.10). This indicates that project users experienced a reduction in repeat victimisation.

Table 6.10 Recorded repeat victimisation in Bradford

	Bradford (n=436)
No reports before referral	52% (n=225)
One or more reports before referral	48% (n=211)
No reports after referral	66% (n=287)
One or more reports after referral	34% (n=149)

Target hardening was a key intervention in enabling women to stay in their homes. From the police and project user data it was possible to track the women who received the target hardening intervention (see Table 6.11).

All bar one of the target hardening interventions and combinations of such interventions showed a decrease in the total number of recorded incidents post intervention compared with the pre intervention period.¹²⁴ While this is based on very small numbers, it is likely that the 16 women who received all three interventions were a particularly high-risk group, evidenced by higher rates of recorded incidents (see Table 6.11).¹²⁵

The combination of home security/panic alarm appeared to have had the greatest effect in reducing repeat incidents. Seventy-eight per cent (n=31) of the women who received this combination had a reduction in repeats. The ratio of the total number of recorded incidents for the women who received this combination was 70:22¹²⁶, meaning there was a 69 per cent decrease in the post intervention period.¹²⁷

124. At first sight this appears to be an unusual finding – where women received all three interventions, repeat recording increased by five per cent but where women received one intervention or a combination of two interventions there was a decrease (of varying degrees). Where women received all three interventions there was more likely to be an increase in repeat recording (n= 5, 50% of women) than a decrease in recording (n=4, 40% of women).

125. The average number of recorded incidents for the 16 women who received all three interventions (6.2 incidents on 3-year database) is higher than for the women who received only the other interventions or combinations (average of 4.6 incidents or less).

126. Where the women had 70 recorded incidents between them in the six months before they received the intervention compared with 22 in the six months after they received the intervention.

127. Although the number of repeat incidents reduced, it was not possible to assess the seriousness of incidents.

Table 6.11 Recorded repeat victimisation post target hardening intervention¹²⁸

Type of target hardening intervention	No. (%) victims receiving intervention (N=351)	No. (%) with at least one incident recorded by the police ¹	No. recorded incidents for victims with at least one incident recorded by the police	Average number of recorded incidents per victim	No. victims with +/- 6 months police data available ²	No. (%) victims with decrease in the no. recorded incidents post-intervention	No. (%) with no change in the no. recorded incidents post-intervention	Ratio (no. recorded offences pre intervention: no. recorded incidents post-intervention)	% increase or decrease in total no. recorded incidents post-intervention
Mobile phone only	35 (10%)	26 (74%)	115	4.4	19	7 (37%)	8 (42%)	29:22	-24%
Home security only	89 (25%)	70 (79%)	244	3.5	40	24 (60%)	9 (23%)	64:30	-53%
Panic alarm only	97 (28%)	73 (75%)	235	3.2	37	28 (76%)	4 (11%)	63:21	-67%
Mobile phone and home security	23 (7%)	16 (70%)	73	4.6	10	7 (70%)	1 (10%)	16:9	-44%
Mobile phone and panic alarm	23 (7%)	17 (74%)	59	3.5	16	9 (56%)	4 (25%)	25:17	-32%
Home security and panic alarm	68 (19%)	57 (84%)	191	3.4	40	31 (78%)	5 (13%)	70:22	-69%
Mobile phone and home security and panic alarm	16 (5%)	12 (75%)	74	6.2	10	4 (40%)	1 (10%)	19:20	+ 5%

1. During the three-year database time period of 1 April 2000 until 31 March 2003.

2. If women received a target hardening intervention after 30 September 2002 they were taken out of the analysis because a full six months post-intervention data were not available. In a few cases the women were taken out of the analysis because the police incident date was incomplete.

128. Reports in six-month period before target hardening intervention was implemented compared with reports in six-month period after the intervention.

The data on project users receiving only the intervention panic alarm also showed a marked reduction in recorded repeat reporting. Over three-quarters (76%, n=28) of the women receiving this intervention showed such a reduction, with a 67 per cent decrease in the number of recorded incidents in the post intervention period compared with the pre intervention period. Mobile phones alone had the least impact, with 37 per cent (n=7) of the women receiving this intervention having a reduction in repeats.

The differential impact of valuable target hardening strategies indicates the need for full risk assessments. The evaluation data revealed that women who received only a mobile phone had an average of 4.4 recorded incidents within the three year database period¹²⁹, while the women who received the mobile phone and panic alarm combination had fewer: an average of 3.5 recorded incidents (see Table 6.11).

The project was also aware that target hardening does not necessarily make it safe for a woman to stay in her own home, and the crucial importance of providing other support alongside.

We have to be careful about assessments for target hardening that we're not – if it's not safe for a woman to remain in her own home we have to be careful about putting in a load of services to keep her in her own home, when actually we don't feel that it's safe and the risk is too great. And there are cases where women are wanting repairs or target hardening done and that we don't actually feel that they're that safe. So we advise them that actually we think that they should move. So we give them the information. But we also don't like to leave them unprotected.

(Project co-ordinator, Bradford)

In interviews with women in Bradford (n=15) who had been given target hardening interventions many mentioned the importance of the various target hardening interventions 'just being there' even if they were not used.¹³⁰ Additionally, many of the women reported that their confidence and sense of safety had been improved as a result, and that this had in some instances undermined the abuser's ability to harass.

... although I've not as yet had cause to use the panic alarm, the fact that it was there made me feel safe psychologically.¹³¹

(Comment by project user, Bradford in questionnaire)

129. Hence not discriminating between pre-and post-intervention periods.

130. This was also found in the Cheshire project.

131. Nineteen women project users responded to a questionnaire survey. It is not known how many questionnaires were distributed.

Before I was very scared...like I work and I get up at five o'clock in the morning and start work at six...so I used to be scared of coming out of the house to me car. I was petrified, I thought he could be anywhere.... but like with this panic alarm I've got this other button that I can carry on me...it's made me feel very safe.

(Project user, Bradford)

He was outside. And he kicked the door. Well he was mouthing off for a while and then kicked the door. But I'm not one of these that goes straight to the police or anything like that. I just thought I'll leave him and if he gets out of order I will press the [alarm] button... He ... blew up a little bit and then just went, when he realised it wasn't scaring me. Which is what I wanted him to see. Because part of it I think is with these guys is they want to see you scared and they think right it's working. They just want her to be scared to keep her in line. But I wasn't scared that day because I knew I had the alarm in my hand.

(Project user, Bradford)

In the main target hardening interventions and combinations recorded repeat victimisation reduced for project users, apart from the group experiencing the highest levels of repeats. It is necessary to highlight that in most cases target-hardening interventions were combined with other forms of advocacy and support from the project. Target hardening was most effective when embedded in policing, legal measures and other advocacy and support.

Summary – reducing repeat victimisation

- Project users had higher levels of repeat recorded victimisation than comparison groups, suggesting that the projects were contacted by those most in need.
- Repeat victimisation reduced for most of the project users following intervention by the projects.
- No impact on repeat victimisation was most common for those women who were worked with most intensively and who were also likely to be those at greatest risk (Croydon).
- Some women described feeling more empowered to report incidents to the police with support from the project. In particular, they were more able to identify and name continued abuse as harassment rather than simply a number of minor incidents that did not merit a police report.
- Pro-active advocacy and support specifically tailored to the needs of each person was key. This was especially apparent in Northampton where individual packages of support were put in place.

- While seeking help did put an end to abuse for some women, for many others it led to a change in the tactics being used by the perpetrator. Post-separation violence, involving being followed and verbal abuse, was the most common form of continuing harassment reported by women.
- Target hardening reduced the number of repeat recorded incidents post-intervention combined with other support. Having both a panic alarm and home security had the most impact.
- 'Feeler safer' was an important resource for women.

Recommendations – reducing repeat victimisation

- Advocacy, support and target hardening should be individually tailored to the needs of the woman and her children's safety.
- Intensive and pro-active advocacy and support, involving ongoing contact with the same worker, should be encouraged for those most at risk.
- Risk assessments should be carried out for all women and children and such assessments should be clear, consistent and regularly reviewed (and changes made to the interventions offered if necessary).
- Attention should be given to perpetrators 'tactic changes' that may occur when target hardening or other safety measures are used.
- Further research on repeat victimisation should use self-report diaries as well as police recorded incidents in order to measure 'true' repeat victimisation.

7. Supporting women through outreach and groupwork

What is meant by 'support'?

As the previous chapters have shown, many forms of support for women can fall under the umbrella of advocacy.¹³² While the main role of an advocate is to offer support to victims to help them 'navigate' the criminal justice system and access support from a range of agencies, the need to also include some level of emotional support is clear and may be key to empowering victims to make the choices advocacy offers. 'Supporting' women and children, however, entails more than advocacy, which has traditionally had an emphasis on rights and entitlements (Kelly and Humphreys, 2000). This is not to deny the important role that 'support' plays in advocacy, for example building up a trusting relationship between the woman and the advocate is a key component (Parmar et al., 2005; Parmer et al., 2005a).

There are different forms of support, which may or may not overlap, with the work of an advocate. The forms of support offered within the CRP projects were broad. They included short-term work, which was often provided in response to a crisis or a specific incident. This typically included providing information and advice and can be described as 'general support'. Another form of support, which was provided on a longer-term basis, was tailored to the needs of the individual and was often provided on an intensive and pro-active basis. This support was very much about building a relationship with the individual and included the provision of emotional support. This type of support is described here as 'emotional support'. In reality the two forms of support usually overlapped.

The focus of this chapter is on support for women and children not previously discussed elsewhere in this overview. That is, outreach support (which can be a way of providing advocacy as well as general and emotional support), individual work with women (which includes emotional support, and may also include counselling) and groupwork for women and children (in addition to advocacy this can also include emotional support and counselling). Although an advocate may play a role in informing women and children about support such as counselling and groupwork, these will rarely be provided by an advocate or general support worker.

132. This chapter draws on the University of Bristol evaluation.

This chapter is short in comparison to those that precede it. However, the value of providing a more in-depth form of support to women, that is emotional support, should not be underemphasised. Being supported 'emotionally' by project workers may underpin women's engagement with the interventions discussed in previous chapters, and the description that follows shows that 'emotional' support from project workers and through groupwork can also play an important role in enabling women to 'move on'.

The reason why more emphasis is not placed on 'emotional' and other forms of support in the preceding chapters is due to the ways in which the VAWI evaluations were set up. The CRP had an emphasis on the measurement of outputs and outcomes in order to build an evidence-base with which to develop an integrated approach to reducing crime and increasing community safety. This was one reason why the relatively vague concepts of 'general' and 'emotional' support tended to fall lower down on the evaluation agenda. A further problem with evaluating these forms of support is the lack of conceptualisation. What exactly is meant by 'general' and 'emotional' support, how these may be measured and what their intended outcomes are unfortunately remain ambiguous at the end of the VAWI. As project funding is increasingly linked to evaluations showing successful outcomes (Sullivan, 2001), this constitutes a practical concern that needs further research. The evaluations were, however, able to show how many women and children had received support, on how many occasions, and how useful the women found the support they received. The CRP findings that relate to supporting children through individual work and groupwork are discussed elsewhere (Mullender, 2004) and are not repeated in this overview.

The CRP projects: outreach and groupwork

One form of individual support that has not yet been discussed is outreach. Many of the CRP projects entailed some element of outreach, and some projects had dedicated outreach or resettlement staff. Many outreach approaches build upon the long-standing work of Women's Aid, where outreach provides an important means of supporting women who do not want to leave their home for a refuge and as a way of supporting women who have left refuge accommodation to re-settle in what may be a new community.

Outreach formed an important part of projects based in rural locations. This included the projects in Buxton, Hastings and Stratford from the 'rural' package (evaluated by a South Bank University Criminal Policy Research Unit team) and Cheshire from the 'multi-service' package (evaluated by the University of Bristol team). Women in rural areas face additional obstacles compared to those living in a town or a city when trying to access help (Mackay,

2000). For instance, the rural context can intensify the isolation experienced by many women who are in an abusive relationship. Living in an isolated area with few external influences can make it easier for the perpetrator to exert control over his partner, and over time, make her more receptive to his definition of reality (Mackay, 2000). The CRP projects sought to overcome these obstacles by having dedicated outreach staff that could make contact with women in hard-to-reach locations. Below the focus is on one of these projects – Cheshire Domestic Violence Outreach Service – where the data available were of sufficient depth to enable meaningful analysis.

Groupwork is part of what has been termed 'tertiary prevention', that is, reducing harm by helping those who have lived with domestic violence to overcome and make sense of their experiences (Humphreys, 2000; Mullender, 2001). Groups and workshops may offer the benefits both of skilled facilitation and of the sharing and mutual learning gained through being with other women in similar circumstances (Mullender and Ward, 1991; Abrahams, 2004). In this chapter the groupwork offered by Camden Safety Net is also discussed.

Supporting women through outreach – Cheshire Domestic Violence Outreach Service

Cheshire Domestic Violence Outreach Service (CDVOS) aimed to provide a proactive, early response via structured one-to-one outreach support to women experiencing domestic violence across Cheshire. The outreach co-ordinator managed six outreach workers (one per borough). Volunteers, working alongside the project's paid staff, were an important part of CDVOS (22 were trained in the project's first year). CDVOS worked with 1,041 women (22 from BME communities and 45 from rural communities) who had 1,629 children.

For each woman supported by the CDVOS, the project allocated a key outreach worker who developed a detailed, tailored support and safety plan with the woman, which was formally agreed between them to govern the work done. The project found that this structured (individual or one-to-one) approach was the most successful way of offering outreach, compared with unstructured methods. An agreed plan meant that there was a 'contract' and plan to work to, and specific outcomes to aim towards. Support and help were also offered to children, and a relationship of trust often developed between the worker and the woman. Outreach workers also acted as advocates for women to represent their needs to other agencies and to assist them to move towards self-advocacy and independence (so that the effect of the project's empowering work could become long-term). The majority of women engaged with the project for three to six months or longer.

The project conducted three project user satisfaction surveys (n=76) which generally showed high levels of satisfaction. Interviews with projects users (n=22) echoed this indicating strong support for the project. Most interviewees, both users and service providers, drew attention to the transforming effect of the project and the way in which other agencies, as well as victims, now felt that they 'could not do without it' (interview with agency).

The mental scars will always be there but I feel more positive. The service has been my lifeline. (Project user, Cheshire)

You're going through all this domestic violence and you don't have any support. You need someone to talk to and say you're not going mad as well as a lawyer and practical help and that's what they give you. (Project user, Cheshire)

You realise there's other women going through it ... it gives you that normality back in your life. (Project user, Cheshire)

Four detailed case studies were also conducted in Cheshire. These again indicated the importance of the intensive individual support provided by the outreach workers. For instance, one woman talked of how the Outreach Service and the associated support group she attended had helped her recognise the abuse she was experiencing.

It's actually been the single thing in the whole of the last two and a half years that has made me acknowledge and accept that it was domestic violence. Having the help from the Outreach Service has helped me to put it in a category, put it in a place in my life that doesn't make it my whole life...and to see it for what it is you know, it's not my fault.... (Project user, Cheshire)

Interviews with local agencies (n=30) indicated the usefulness to other agencies of having outreach provision and the effectiveness of the interventions made.

The outreach service is the centrepiece of the initiative, it makes it all hang together. And the support offered to the women is invaluable. They really know what they are doing. (Agency representative, Cheshire)

Overall, liaison with other agencies increased throughout the evaluation and reflected a wide range of referral agencies and joint work feeding, for example, into three local Sure Start programmes and into the Children's Services plan. The domestic violence liaison

officers stated in interviews that they found the work of the outreach project invaluable and could not manage their workload without outreach liaison.

The Outreach Service also worked closely with other agencies across Cheshire to provide specific services to the women with whom they worked. Female Outreach Service users made an average of 4.2 contacts with helping agencies in general although some women reported contacting a much higher number. Most frequently contacted agencies were Women's Aid, followed by health, police, housing, social services and courts. All reported in interviews that these contacts were easier with support from the outreach workers.

Supporting women through counselling and groupwork – Camden Safety Net

Camden Safety Net aimed as part of its work to establish individual counselling and groups for women to develop intermediate and long-term prevention through increased confidence and knowledge of options.

Seventeen women attended a women survivors' groupwork programme in the first year. In a group interview, women talked about: being able to share ideas with other women who had similar problems and could understand far more than friends (however well-meaning); regaining some self-esteem; knowing they were not the only one and not going crazy; being listened to; learning to communicate again and voice what had been happening; gaining hope for the future and for being able to cope without a man; and recognising that both they and their children were better off without the abusive partner. One woman said:

This group has made me face reality. (Project user, Camden).

From having felt almost suicidal, one woman had moved to a position of saying:

I'm able to face tomorrow with a lot of eagerness. (Project user, Camden).

Other, locally available opportunities for women to develop their self-confidence and life skills included a job awareness day, two-day confidence-building workshops (run four times), and a three-day 'Surviving Changes' groupwork programme. The in-house evaluation from one of the confidence-building workshops showed that women wanted more of these sessions, not least because they knew their lives might be too chaotic to guarantee attendance and it was important to have more than one chance to take part. The workshop facilitator who was interviewed, noted that women were more able to benefit from the

workshop because of the earlier work undertaken by the project through its individual interventions. Women were more self-aware, more ready to move on and take control of their lives than had been the case before the project existed. This indicates, once again, that follow-on work is at its most useful when women feel ready for it. Earlier individual or one-to-one support can help some to reach this point sooner than might otherwise be the case. Recommendations for further work were for a rolling programme of weekly support groups and skills-based workshops on designated issues, plus opportunities to share activities with other boroughs.

Summary – supporting women through individual work and groupwork

- ‘Emotional’ and ‘general’ individual support plays a large and important role in the work of advocates, support workers and outreach workers, but is difficult to conceptualise and evaluate in terms of outcomes.
- A structured and tailored outreach approach with an agreed plan of action that incorporated support to children was particularly effective (Cheshire).
- Women found it easier to make contact with other agencies when supported by outreach workers (Cheshire).
- Individual work and groupwork helped women become more self-aware and recognise their experiences as abuse (Cheshire and Camden).
- Groupwork was useful in helping women ‘move on’ with their lives. The women valued being able to share experiences and ideas with other women who had had similar experiences (Camden).

Recommendations – supporting women through one-to-one work and groupwork

- Projects and evaluators should be clear about the intended outcomes of providing ‘emotional’ and ‘general’ individual work and develop means of measurement.
- Outreach support should be structured, tailored to the needs of the individual, and incorporate support for children.

8. Effective interventions and approaches

Introduction

As outlined in Chapter 1, it has been increasingly recognised in both policy and practice that domestic violence is a complex phenomenon requiring a multi-agency response. This response includes a range of advocacy, support, engagement with the criminal and civil justice systems and with other voluntary and statutory sector agencies. The approaches of the CRP projects discussed in this overview (Chapters 2 to 7) reflect this trend and indicate that a narrowly focused, single intervention approach is unlikely to work in tackling domestic violence. The projects that were most successful in reducing repeat victimisation (that is, in stopping the ongoing violence from abusive male partners) combined intensive, pro-active, tailored and holistic advocacy and support with engagement with the criminal and civil justice processes. In addition, routine enquiry and primary prevention are also necessary for a comprehensive approach to tackling domestic violence.

Women need access to a range of advocacy, support and other interventions that relate to their specific and current situation. Routine enquiry may enable women who have not already recognised that they are experiencing domestic violence to see that this is the case and thus to access support; outreach may enable women in rural or other isolated communities to access help; women actively seeking help need support in accessing criminal and civil justice responses, housing and benefits; and groupwork may be useful in helping women 'move on' after they have left violent partners. Where children and young people are concerned, use of awareness raising that is sustained and forms part of the school curriculum may have a positive impact on attitudes regarding domestic violence.

However, the findings from the CRP projects also made it apparent that women's access to and use of support services were by no means straightforward. A first step for all women in accepting help of any kind was to acknowledge and name what they were experiencing as domestic abuse. Women talked in interviews about how important the CRP project workers and other women survivors had been to them in this continuing process of achieving recognition. They said it was hard, for example, to find the space to think things through; to realise that emotional abuse, intimidation and harassment are as much a part of abuse as violence; to stop blaming themselves; and to admit to friends and family what had been happening. This whole process sometimes took many months. Prior to that, they were more focused on getting immediate help and the emotional support they needed was used to

back up the help-seeking process in respect of practical and legal issues. The key foundations for effective work would thus appear to be involving women fully in decisions; building trust and mutual respect; offering choice; and being flexible as to the pace and direction of intervention.

The findings from the CRP projects also indicate that, where civil and criminal justice processes are slow-moving or ineffective in helping women and children to be safe, they can become barriers to women's ability to get their lives back on an even keel and to recover emotionally. This can basically mean that the advocacy and follow-on work projects undertaken with women and children in the aftermath of domestic violence is frustrated by shortcomings in other services, notably the civil and criminal justice systems. Problems in taking action against perpetrators and in resolving child contact issues were found to create real barriers for women and children in being able to 'move on' in their lives. Setbacks frequently occurred, both for women and for children, when there were repeat incidents of abuse or threats from the perpetrator (e.g. where the police had not acted; a case had been dropped by the CPS; sentencing had been ineffectual); or when the perpetrator retained unsafe access to the family through the channel of child contact.¹³³

Those in contact with the projects

Three main groups of individuals were identified as being in contact with the projects, with differing awareness of domestic violence and differing needs regarding interventions and support.

- Children and young people in schools who may or may not have been living with domestic violence. Primary prevention as well as individual and group support work were relevant for this group.
- Younger women with children who did not appear to be actively seeking help, and appeared to be in contact with the projects mainly because their health visitors or other health and social care staff were taking part in the CRP initiative and were applying routine enquiry. It is not known to what extent these women were subject to repeat victimisation, although for some it was possible for the projects to use early intervention where they appeared to have been subject to a

133. Projects providing advocacy and support often had child contact as one of the areas where support was provided with regard to legal processes. In addition, examples from case studies (n=12) compiled by the University of Bristol evaluation team, included a range of nightmarish child contact problems such as situations where the Children and Family Court Advisory and Support Service (CAFCASS) or the courts had failed to listen to children or to take the danger associated with domestic violence sufficiently seriously; or where contact arrangements were unsafe (e.g. in an unsupervised or inadequately supervised contact centre).

'short history of violence' (Piispa, 2002).¹³⁴ Routine enquiry, publicity campaigns and outreach were important with regard to this group to raise awareness and enable disclosure of domestic violence. Advocacy was important where women disclosed domestic violence and needed further help and support.

- Women from an older age group who had been subject to repeat victimisation, and who were likely to have experienced severe and systematic domestic abuse.¹³⁵ Women from this group were actively seeking help from the CRP projects and related agencies. This group appeared generally subject to what has been termed 'patriarchal terrorism' (Johnson, 1995) or 'partnership terrorism' (Piispa, 2002).¹³⁶ Effective interventions included outreach, a wide range of support and advocacy including legal support, use of civil remedies, engagement with the criminal justice system, and individual and groupwork to 'move on'.

Conclusions – effective interventions and approaches

From the CRP project evaluations discussed in this overview, the following interventions and approaches were found to be effective in developing prevention, reducing domestic violence and dealing with the impacts.

Primary prevention: raising awareness and challenging attitudes among young people

Primary prevention for children and young people in schools was conducted within the CRP projects across a range of age groups. It was found that this work was particularly valued when it was student-centred, interactive with visual input such as drama. There were indications that pupils had increased their awareness of factual information regarding domestic violence, but some teachers were concerned that such one-off interventions led to short-term impacts. Training for teachers and multi-agency support were important, and cross-curricular approaches reinforced the positive programme impacts.

134. Piispa (2002), from research in Sweden including 723 women who were currently or had previously experienced domestic violence, describes the various patterns of violence found in relation to the sample. Having a 'short history of violence' was a pattern typical among women younger than 30 years who were in their first partnership and where this had lasted on average four years. Violence had started mostly three to four years ago, involved both sexual and physical violence but tended not to result in injuries. It was common among students and mothers staying at home to look after small children (ibid.: 879).

135. Women accessing the Croydon project, a large proportion of whom were from Black and other minority ethnic communities, were even more likely to be from the older age groups (23% were 46 or over. See Appendix 1).

136. Piispa (2002 – see footnote 134) describes partnership terrorism as 'violence that is closest to the typical images we have of partnership violence and of the characteristics of victims and perpetrators' (p 880). She found it started five to ten years previously, included both sexual and physical violence and was likely to result in (at times serious) injuries. The women concerned were often underemployed, had low pay, and were economically dependent on male partners or state benefits. Their lack of economic independence and fear of homelessness made it difficult to leave the violent relationship.

Supporting women: enabling disclosure

A small number of the CRP projects had interventions aimed at enabling disclosure of domestic violence. Routine enquiry was particularly effective in health care settings implemented by health visitors and practice nurses. It was also useful in social care services and may be applied by a wider range of practitioners. Training was important (and should last more than one day), as were good multi-agency relationships and referral systems. Close working relationships with specialist domestic violence agencies such as Women's Aid are necessary for routine enquiry to enable safe disclosure and provide further support for the women concerned. Routine enquiry was most effectively implemented where practitioners could find ways to incorporate it into their existing patterns of work.

Supporting women to report to the police

Increased numbers of women reported domestic violence to the police when they were supported to engage with the criminal justice system, for example through legal advocacy. This worked well when project workers were based within the police community safety unit or where the police were based within the project (one-stop-shop). Close links between projects and the police also led to an increase in arrest rates and project referrals. Legal support, including workers with minority language skills, focusing specifically on Black and other minority ethnic women, increased their engagement with the criminal justice system. Women described a variety of positive police responses, although the 'patchiness' of appropriate police responses to domestic violence still needs to be addressed. The use of photographic evidence appeared to improve arrest rates, increase the number of witness statements and reduce the number of victims withdrawing their statements. However, more research is needed as the findings related to photographic evidence are based on small numbers and did not use a 'matched cases' design.

Supporting women through the courts

Having close links with good family law solicitors, a legal worker attached to the project and police officers located within the project all enhanced the use of civil remedies. Most projects reduced attrition in the criminal justice system to some extent. Advocacy involving intensive legal and other support enabled women to support the prosecution. Women found it particularly useful when they were accompanied to court and when services were built around a 'one-stop-shop' model. Women felt let down where sentences appeared overly lenient, particularly where fines were the only sentence imposed. The provision of training for magistrates led to a higher proportion of custodial sentences. Projects had difficulties finding out the final court outcomes of women they had supported. Projects need to work

very closely with the police and CPS and ensure that systems for monitoring cases through the criminal and civil justice systems are priorities at the project development stage.

Reducing repeat victimisation

Target hardening and a range of advocacy and support approaches were applied by the CRP projects in an attempt to reduce repeat victimisation. The women using the projects had histories of higher levels of repeat victimisation than those in comparison groups, but this repeat victimisation generally reduced following project intervention. The approach most effective was the tailoring of advocacy and support to the specific needs of the victim. In a minority of cases project intervention did not reduce repeat victimisation. This occurred where women described feeling more empowered to report to the police; identified what was happening as criminal; and/or where the abuse was particularly chronic. Overall, target hardening measures reduced repeat victimisation and also increased women's confidence and sense of safety. Having both a panic alarm and home security had the most impact, but it is important that target hardening measures are offered within a wider framework of support and alongside regular risk assessments.

Supporting women through individual work and groupwork

Individual work which incorporated 'emotional' and 'general' support was difficult to conceptualise and evaluate; however, it played a large role in the work of advocates and outreach workers. Outreach was particularly effective when it was structured; tailored to the needs of the individual; had an agreed plan of action; and incorporated support to children. Individual work and groupwork both helped women become more self-aware and recognise their experiences as abuse; and groupwork was also useful to help women 'move on' with their lives.

Conclusion – applying effective interventions and approaches to different groups

As outlined above, three main groups were in contact with the CRP projects: young people, women not actively seeking help, and women actively seeking help. From the findings of the evaluations presented in this overview indications of effective interventions and approaches in relation to the above groups may be deemed to be as follows.

Children and young people in schools who may or may not be living with domestic violence

- ❑ **Primary prevention in schools:** this should involve a cross-curricular approach and include student-centred interactive lessons on relationships and abuse, visual input such as drama, plus training for teachers and multi-agency support.

- ❑ **Individual and group work:** specific support for children and young people should include work on being safe, self-esteem, feelings and past experiences, school and family, as well as use of video input and discussion. Group work may be preceded by one-to-one (or individual work) work and be more appropriate for those already in a safe environment.

Women who are experiencing domestic violence but not actively seeking help

- ❑ **Publicity campaigns:** These should use a wide range of media such as radio, television, posters and stickers. They should aim to educate local residents and staff across agencies that domestic violence is a public crime and indicate local sources of support. Targeted publicity for Black and other minority ethnic women should be included.

- ❑ **Routine enquiry:** this may effectively be carried out by health and other practitioners regularly seeing women on their own. It requires at least one day of training for practitioners in awareness of domestic violence and how to ask about it, as well as good multi-agency relationships and referral systems. The Duluth 'power and control' and 'equality' wheels can be useful tools to enable women to recognise they are in an abusive relationship.

- ❑ **Outreach:** this should involve advocates or outreach workers regularly visiting community groups and agencies to discuss domestic violence and publicise local projects/support, as well as aiding development of close multi-agency referral systems. Outreach should also be targeted at Black and other minority ethnic women where appropriate.

- ❑ **Supporting women to report to the police:** this requires advocacy and support that includes legal support and close links with the police. Police should collect a wide range of evidence including photographic evidence.

Women who have been subject to repeat victimisation, and who are actively seeking help

- ❑ **Publicity campaigns:** these should use a wide range of media such as radio, television, posters and stickers to publicise local sources of support; and should include targeted publicity for Black and other minority ethnic women.

- ❑ **Outreach:** this should include advocates or outreach workers regularly visiting community groups and agencies to provide a link to local projects/support for women in rural areas and other isolated communities. There should also be targeted outreach for Black and other minority ethnic women where appropriate.

- ❑ **Advocacy and support:** together advocacy and support should be wide ranging, pro-active, holistic and comprehensive, and preferably based in a one-stop-shop. Advocates should help women navigate the criminal and civil justice systems and others agencies as they attempt to access needed resources. Women should have the same advocate or support worker available over time, who may focus on their specific needs and enable them to deal with fear and safety issues. Workers may assist women end their emotional attachments to the violent partner by encouraging them to invest emotionally in learning new life skills and skills which assist them in finding paid employment.

- ❑ **Supporting women to engage with the criminal and civil justice systems:** advocacy should include legal and emotional support. Close links with the police, CPS, and with family law solicitors should be established. Women should be accompanied by an advocate to court. Police should collect a wide range of evidence including photographic evidence. There should be training on domestic violence and multi-agency links for magistrates and judges.

- ❑ **Staying safe:** advocates, support and outreach workers should carry out regular risk assessments with women and their children, including assessing potentially changing tactics by perpetrators. Safety planning should be carried out. Target hardening measures should include panic alarms and home security.

- ❑ **Moving on:** once women have been able to deal with immediate issues and are ready to 'move on' they should be offered groupwork to enable them to deal with emotional issues arising from the domestic abuse and to meet other women with similar experiences. Groupwork should take a structured approach and preferably be at least ten weeks in length.

Conclusions – research and evaluation

Finally, throughout this overview the evaluators identified areas that require further evaluation and research and development of some of the measures and approaches used. These are shown below.

Evaluation measures and approaches

- While domestic violence remains an under-reported crime, an increase in police recorded domestic violence incidents is a more appropriate performance indicator than a decrease. Projects should therefore aim to increase reported (recorded) incidents as an intermediate aim and decrease reported (recorded) incidents as a longer-term aim.
- Data gathering and analysis in order to assess attrition is key to the evaluation of projects involving legal advocacy. Being able to track cases from police report to final outcome is a crucial aspect of this. Setting up systems to allow attrition to be easily reviewed on a regular basis should be one of the first priorities at the project development stage. It may be difficult to sustain reductions in attrition in the longer term and regular reviews of the various stages and, crucially, acting on the results are important in this respect.
- Evaluation approaches to assess attrition should also use and record the impact of evidence on pleas entered and court outcome. This would address the question raised in this overview of how much/what evidence is needed to ‘prove’ domestic violence in court and might help prevent evidence being used by the defence specifically with the aim of discrediting witnesses.
- Further research on repeat victimisation should use self-report diaries as well as police recorded incidents in order to measure ‘true’ repeat victimisation.
- If possible research evaluating the impact of domestic violence interventions should use a ‘matched cases’ experimental design with adequate sample sizes where comparison can be made between those who do and those who do not have access to the interventions. However, this design should not be used if it raises ethical issues.¹³⁷

Future areas for evaluation and research

- More research is needed on the use of photographic evidence and its impact, particularly at the police interview and plea entering stages. This should use a ‘matched cases’ design.

137. See Laing (2003) for a discussion on ethics and research/evaluation design in relation to domestic violence.

- Research into the use of evidence is needed to ensure that: witnesses and projects are recording the appropriate information; and police are collecting and passing on evidence that will be useful to the CPS.
- Further evaluation of groupwork is needed, particularly in relation to the use of groupwork for children.

Appendix 1

Summary of Home Office Briefing Notes

Reducing domestic violence: what works?

Assessing and managing the risk of domestic violence (Walby and Myhill, 2000)

A literature review showed the following facts:

- the simplest and most robust risk marker for domestic violence is that of previous assault, or repeat victimisation. The greater the frequency of previous assaults, the more likely it is that further assaults will occur; and
- a secondary risk marker is that of separation. Indeed it is at the point of separation that many women who have been subject to domestic violence make contact with agencies.

Use of the criminal law (Edwards, 2000a)

Research found attrition in a high number of cases going through the criminal justice system and concluded that:

- the police need to improve recording practice;
- use of photographic evidence leads to positive outcomes; and
- police performance should be measured by an increase in the number of prosecutions, an increase in arrests, an increase in guilty pleas, and the decrease in homicide of female intimates.

Civil law remedies (Edwards, 2000b)

Research found that:

- the police and courts are making good use of the Family Law Act; and
- the civil law could be used more widely to provide injunctive protection and exclusion order protection for both women and children, providing early intervention in domestic violence and reinforcing the message that domestic violence will not be tolerated.

Policing domestic violence (Hanmer and Griffiths, 2000)

Evaluations of two projects found that:

- a three-tiered approach to repeat victimisation was shown to increase effectiveness in policing domestic violence; and
- women victims/survivors valued a quick response from the police coupled with support.

Accommodation provision (Levison and Harwin, 2000)

Research found that:

- leaving the family home is usually a last resort for people experiencing domestic violence. It is possible that some who do leave would have stayed if improvements to the security of their current home had been made, and measures had been available to improve their personal safety.

Health services (Davidson, King, Garcia and Marchant, 2000)

Findings from a systematic review showed:

- most women do not mind being asked about domestic violence;
- health care professionals recognise the role they can play in identifying domestic violence but need more training; and
- knowledge gaps still exist and it is critical that programmes are evaluated before being more widely adopted.

Multi-agency fora (Hague, 2000)

A review of the literature showed:

- at least 200 multi-agency fora exist but it is important that such initiatives are more than just 'talking shops'. If no positive concrete change occurs then an alternative course of action should be taken;
- evaluation criteria should include safety improvements, policy and practice changes and service user satisfaction;
- more research is needed on whether multi-agency initiatives are cost-effective; and
- it is important that power differences between agencies are addressed and that the police are careful not to dominate fora.

Outreach and advocacy approaches (Kelly and Humphreys, 2000)

Evaluation of three projects found:

- support is most often needed outside of standard office hours;
- immediate support (usually within 24 hours) was cited by service users as important in increasing safety and accelerating change;
- outreach and advocacy combined with proactive responses can reduce repeat victimisation through more effective use of the legal system; and
- all outreach and advocacy interventions should be accompanied with safety planning.

Women survivors' views (Mullender and Hague, 2000)

A literature review showed the following:

- domestic violence survivors are often more knowledgeable than professionals in terms of safety judgements and can raise pertinent questions about service delivery and/or system failures. However, only 40 per cent of multi-agency fora consult survivors compared with 90 per cent of refuges; and
- uneven service responses and delays compromised the women's feelings of safety.

Perpetrator programmes (Mullender and Burton, 2000)

Survey findings and a literature review showed the following information:

- there are around 30 perpetrator programmes in the UK;
- the most frequently accepted model is cognitive behavioural with gender analysis;
- completion rates are notoriously low but can be increased if used alongside criminal justice interventions; and
- perpetrator programmes remain controversial because of: the lack of conclusive evidence regarding their effectiveness; the fear that they will put victims in greater danger if the intervention fails; that the programmes dilute the effect of criminal justice interventions; and that perpetrator programmes may be funded at the expense of survivor projects.

Monitoring costs and evaluating needs (Crisp and Stanko, 2000)

A literature review showed the following facts:

- there is little research on the cost effectiveness of domestic violence interventions. The limited literature available shows substantial financial implications, particularly to the public sector;

- in order to measure the cost effectiveness of interventions in the future it is necessary for projects to keep detailed monitoring information, including how they are spending resources; and
- there is an urgent need to create monitoring systems that can provide baselines to measure the impact and cost effectiveness of new interventions against.

Meeting the needs of children (Mullender, 2000)

A literature review provided the following information.

- Too much focus has been placed on child protection investigations, which offer no protection to women, may put children at additional risk and drains resources from direct work with children and families.
- The only comprehensive direct work with child survivors of domestic violence takes place in refuges, however this work is chronically under-resourced.
- Meeting the needs of children means working at three levels: primary prevention (to prevent it happening at all); secondary prevention (stopping it once it has started); and tertiary prevention (reducing harm after it has occurred).

Appendix 2

Data collected by evaluation teams

See Table A2.1 page 107.

Who were in contact with the CRP projects?

The information presented below refers only to those who were in contact with the CRP projects in contrast to those who were in contact with the police in the same area. The information is also skewed towards those using the 'multi-service' projects because the evaluation of this package had the largest amount of comparable data. The aim of this section is to show that different groups of women experiencing domestic violence sought support through the projects compared with those who reported to the police and that different groups of women sought support through different types of projects. The figures therefore are not representative of all women who experience domestic violence. For more general figures see Walby and Allen (2004).

Gender

Virtually all of those in contact with the CRP project were women, with an average of 96 per cent. This is not surprising given the focus on women in the VAWI (see Chapter 1). Some projects worked exclusively with women (Cheshire outreach, Croydon, Birmingham and Tower Hamlets) and are not shown in the table below. The project in Northampton worked with the highest proportion of men (8% of project users were male).

Table A.2.2 Percentage of victims who were female (project users)

Bradford (n=1,431)	Camden (n=671)	N'hampton (n=1,097)	Suffolk (n=126)	Hammersmith & Fulham (n=632)	Total (N=3,957)
99%	97%	92%	97%	97%	96%

Table A2.1 Data collected by evaluation teams

Package Type of data	Health	Multi-service	Criminal and civil law	Rural	Prevention and protection	BME	Education and awareness	Totals
Interviews with project staff and partner agencies	124	251	140	168	77	80 ¹³⁸	63 ¹³⁹	518
Interviews with domestic violence survivors	33 ¹⁴⁰	75 ¹⁴¹	9	16	0	62	-	174
Quantitative data ¹⁴² – survivors	1,470	70,981	4,084	958	1,968	889	-	80,350
Quantitative data – perpetrators	-	30,939	2,578	427	1,405	-	-	35,349
Quantitative data – children	-	5,687	-	-	-	-	-	5,687
Questionnaires	20 from women survivors; 374 from health staff ¹⁴³	-	20 from police officers; 53 from survivors	-	41 with service users ¹⁴⁴	-	2,210 with children ¹⁴⁵ ; 118 from professionals trained; 99 from attendees of drama performance	2,935

Focus groups	-	5 with project staff	-	-	10 with professionals	2 with professionals; 5 with children	22
Other package specific data	-	-	807 incidents where photograph taken.	-	15 CPS case files; 220 project case files; Telephone monitoring	Telephone monitoring forms; 32 student narratives.	-

138. Including volunteers and advocates.

139. Including teachers.

140. Only three of whom had used a CRP project.

141. Plus 12 in-depth case studies.

142. These data and the quantitative data on perpetrators and children are mostly from the police and are incident based.

143. Ninety-nine of which were follow-up questionnaires.

144. Including 15 'after' questionnaires.

145. Including 1,157 'after' questionnaires.

By contrast, three-quarters of the police recorded incidents in the same areas involved a female victim (75%). This varied across areas from 57 per cent involving female victims in Northampton to 88 per cent in Hammersmith and Fulham.

Table A.2.3 Percentage of victims who were female (police recorded incidents)

Bradford (n=12,865)	Camden (n=3,885)	N'hampton (n=6,044)	Suffolk (n=700)	Hammersmith & Fulham (n=1,242)	Total (N=24,736)
82%	72%	57%	84%	88%	75%

These variations are due to police recording practices in the different areas. When the police are called to incidents that are not crimed (for example arguments) they often enter both parties as victims, particularly but not always, when counter allegations are made. This recording practice seemed to be used as standard recording procedure in Northampton (the area with the lowest proportion of female victims). It was used least often in Hammersmith and Fulham (the area with the highest proportion of female victims) where the project had previously addressed this recording practice in training sessions with the police. The Hammersmith and Fulham evaluation showed that some police officers still entered both parties as victims when they felt it was impossible to distinguish the victim from the perpetrator, however this was not a standard recording procedure as it seemed to be in Northampton.

The generally high proportion of women in contact with both projects and the police is to be expected. The 2001 BCS found that women are not only subject to more incidents of domestic violence but are also more likely to experience more 'extreme levels of violence, consistent with exceptional levels of coercive control' (Walby and Allen, 2004: 9).

Relationship of victim to perpetrator

The majority of project users were experiencing domestic violence from a partner or ex-partner (94%). The remaining six per cent were experiencing violence from another family member. The proportions remained similar across the project areas where this information was available. Table A.2.4 does not show projects whose remits were to work exclusively with interpersonal violence as these all showed 100 per cent (for example Suffolk). Some projects explicitly included violence perpetrated by extended family members in their definition (particularly where targeted support was directed at BME communities, e.g. Birmingham), but no data were available from these projects.

Table A.2.4. Relationship of victim and perpetrator (project users)

	Bradford (n=967)	Camden (n=671)	Cheshire (n=529)	N'hampton (n=997)	Total (N=3,164)
Ex/partner	93%	96%	92%	94%	94%

Not surprisingly, the police recorded more cases of other family violence than the projects (see Table A.2.5). This is due to the wider definition of domestic violence used by the police when coding incidents (see Chapter 1).

Table A.2.5 Relationship of victim and perpetrator (police recorded incidents)

	Bradford (n=4,580)	Camden (n=3,065)	Cheshire (n=8,316)	N'hampton (n=2,869)	Total (N=18,830)
Ex/partner	74%	87%	84%	93%	83%

Age

Table A.2.6 (below) shows the age of women accessing the projects. The largest proportion fell within the 25 to 34 and 35 to 44 age ranges (or 26 to 35 and 36 to 45 for Croydon where data were collected using slightly different age ranges), with 64 per cent falling within these two ranges.

The 2001 British Crime Survey found that the younger people are more likely to experience some form of inter-personal violence (Walby and Allen, 2004). The 16 to 19 and 20 to 24 age groups all had the highest prevalence of domestic violence (this was also the case for stalking and sexual assault).

This suggests that the population of women using the CRP projects were older than the total population who experience domestic violence. Moreover, the women accessing the Croydon project were even more likely to be from the older age groups, with 23 per cent of the women being 46 or over. That is almost double the proportion compared to most of the other projects listed, and more than double the proportion of 45 year olds and over in the BCS.¹⁴⁶

146. The Croydon figures match the Census data very closely, with similar age groups of women experiencing domestic violence and in contact with the project as the number of women in the general population. It is unclear why this the case.

It should be noted that in Suffolk the figures relate to women in contact with health visitors and social services, and thus the age range tended to reflect primarily those of childbearing age or who had young children. This can also be seen when comparing the project data with that from the police (Table A.2.7, below) where victims in Suffolk who had reported domestic violence to the police tended to be older than those in contact with professionals who were part of the CRP project.

Table A.2.6 Age range (projects)

Age range (years)					
Project	16-24	25-34	35-44	45-54	55 plus
Bradford (n=1,286)	21%	43%	26%	7%	3%
Camden (n=669)	19%	41%	28%	9%	2%
Cheshire (n=433)	43%	18%	23%	9%	6%
Croydon (n=947)	16% ¹⁴⁷	29% ¹⁴⁸	24% ¹⁴⁹	20% ¹⁵⁰	3% ¹⁵¹
Northampton (n=955)	21%	32%	31%	12%	4%
Suffolk (n=112)	26%	46%	22%	4%	2%
Total (N=4,402)	22%	35%	27%	11%	3%
Age range of women in general population ¹⁵²	18%	24%	25%	22%	10%

Table A.2.7 shows the proportion of those falling into the age ranges in the cases recorded by the police is similar to those discussed above from the projects. Again, most fall within the 25 to 34 and 35 to 44 age ranges.

147. Age 16 to 25.

148. Age 26 to 35.

149. Age 36 to 45.

150. Age 46 to 55.

151. Aged 56 and over.

152. <http://www.statistics.gov.uk/census2001>.

Table A.2.7 Age range (Police)

Age range (years)	16-24	25-34	35-44	45-54	55 plus
Project					
Bradford (n=12,069)	26%	33%	25%	10%	6%
Camden (n=3,726)	22%	34%	27%	12%	5%
Cheshire (n=7,890)	19%	32%	30%	13%	6%
Northampton (n=5,203)	24%	35%	28%	9%	4%
Suffolk (n=682)	25%	32%	28%	11%	5%
Total (N=29,570)	23%	33%	27%	11%	5%
Age range of women in general population ¹⁵³	18%	24%	25%	22%	10%

Ethnicity

Both the 1996 and 2001 British Crime Surveys included a module on Inter Personal Violence. Findings showed that around four per cent of all ethnic groups had been a victim of domestic violence within the previous 12 months, showing no significant difference between ethnic groups in terms of victimisation (Mirrlees-Black, 1999; Walby and Allen, 2004). This is not reflected in relation to users across the CRP projects for which data were available, where the largest group, nearly two-thirds, were White (65%, see Table A.2.8). It should be highlighted that the tables below do not attempt to describe the incidence of domestic violence in terms of ethnic appearance¹⁵⁴, but rather look at ethnicity in terms of help seeking (project users) and willingness to use the police (police recorded incidents).

While the majority of project users were White for all of the individual projects, Birmingham was a project specifically aimed at Asian women and based within an Asian housing project, and had an almost exclusively Asian user group (98%).

Table A.2.8 Ethnic appearance of victim (project users)

	Bradford (n=1,350)	Camden (n=671)	Cheshire (n=459)	N'hampton (n=1,085)	Suffolk (n=136)	Croydon (n=763)	B'ham (n=214)	Total (N=5,344)
White	67%	55%	96%	90%	96%	48%	>1%	65%
Black	1%	20%	2%	5%	1%	32%	1%	10%
Asian	30%	15%	2%	4%	0%	16%	98%	23%
Other	2%	10%	1%	1%	3%	4%	>1%	2%

153. Ibid.

154. Although 'ethnic appearance' is not an appropriate measure for evaluations and research purposes, this is the measure used by the police and to allow comparison this measure has been used here.

The projects that employed Asian workers and/or targeted project information towards Asian women (Bradford, Camden, Northampton, Croydon and Birmingham) all had higher proportions of Asian project users than those that did not (Cheshire and Suffolk). The pattern was less pronounced in Northampton where a BME worker was employed only for the second year of the project. Moreover, the projects were generally accessed by a much larger proportion of Asian women (23%) than contacted the police (12% see Table A.2.9)

Table A.2.9. Ethnic appearance of victim (police recorded incidents)¹⁵⁵

	Bradford (n=8,887)	Camden (n=3,845)	Cheshire (n=6,801)	N'hampton (n=2,788)	Suffolk (n=697)	Croydon (n=8,013)	B'ham (n=3,866)	Total (N=34,897)
White	76%	57%	99%	92%	97%	60%	43%	73%
Black	1%	20%	<1%	3%	<1%	29%	5%	10%
Asian	22%	11%	<1%	4%	<1%	7%	32%	12%
Other	1%	12%	<1%	1%	1%	3%	20%	5%

Children

The 1996 BCS found that roughly half of domestic violence victims had children aged under 16 years living with them and that the levels of victimisation were higher in these households (Mirrlees-Black, 1999). The 2001 BCS found similarly that where women had children living with them their risk of domestic violence was nearly doubled (Walby and Allen, 2004: 96). Table A.2.10 shows that on average 63 per cent of the CRP project users were known to have children living with them (in reality this may be slightly higher because children were not always entered onto the project databases). Suffolk had the highest recorded proportion of women known to have children. This was to be expected as the Suffolk project primarily involved contact with health visitors and social services.

Previous research has shown that children are an important factor in the decisions women make with regard to staying in or leaving a violent relationship (Hester and Radford, 1996; Hester et al., 2000). This was also a feature in the CRP projects. For instance interviews with project users in Croydon suggested that possibly bettering the lives of their children was the turning point for them in terms of seeking legal assistance.

¹⁵⁵ Birmingham 'other' includes not known (missing data); Suffolk 'White' includes 'dark European' (IC2).

Table A.2.10 Parents and children (project users)

	Bradford (n=1474)	Camden (n=671)	Cheshire (n=566)	N'hampton (n=1097)	Suffolk (n=140)	RCT (n=1345)	Buxton (n=82)	Totals
Parents	70%	67%	73%	57%	81%	53%	74%	63%
Total no. children	2,125	918	918	1,190	231	n/k	n/k	5,382
Average no. children	2	2	2	2	2	2	n/k	2
Pregnant	3%	6%	11%	n/k	11%	n/k	5%	5%

Housing and Living Arrangements

Table A.2.11 shows the accommodation type for CRP project users. When compared with the Department for Transport, Local Government, and the Regions (DTLR) national breakdown it shows that project users are overrepresented in Local Authority/Housing Association/refuge/other housing. Six in ten project users were living in this category of housing compared with two in ten of the general national population. The 2001 BCS also found that the highest risk of domestic violence is found among those living in the social rented sector and least among owners or (or co-owners) of their own homes (Walby and Allen, 2004: 88). In some areas the CRP project users appeared more likely to have access to their own homes than were living in privately rented accommodation. These variations, however, would result from the differential housing markets operating in different locations. Walby and Allen (2004) suggest that the emphasis on social housing for women experiencing domestic violence is likely to be a consequence of domestic violence, rather than pre-existing poverty:

... women who seek help with re-housing in order to flee domestic violence may be provided with social housing, because many women do not earn enough to support a mortgage on their income alone. (Walby and Allen, 2004: 88)

This also appears to be supported by the data from the CRP projects where many had as an aim to help women leave violent relationships by moving to refuges, or to other housing within the social renting sector. At the same time, target hardening measures in Bradford and Cheshire also meant that women in those areas were more likely to remain in their own (possibly owner occupied) homes, as also indicated by the figures below.

Table A.2.11 Accommodation (project users)

	Bradford (n=620)	Camden (n=671)	Cheshire (n=362)	Suffolk (n=96)	Buxton (n=67)	Restormel (n=335)	Total (N=2,151)	General popul- ation ¹⁵⁶
Owner- occupier	34%	7%	39%	18%	24%	27%	24%	70%
Private rented	18%	6%	14%	38%	15%	27%	16%	10%
LA/HA/ refuge/ other	48%	88%	46%	45%	61%	46%	60%	20%

156. DTLR survey of English Housing, April 2002 to September 2002.

Appendix 3

Table A.3.1 Results showing the extent of increase in Bridgend pupils' awareness and attitude change

Statement	All pupil sample of the study Extent of change	Increased awareness
1. Domestic violence takes place		
Only inside people's home	1.30+	No
Only between people who are married	1.26+	No
Only in deprived areas	0.27-	
Only in inner cities	2.29-	Yes
2. Domestic violence is carried out		
Mostly by men	20.30+	Yes
Mostly by women	0.11+	
By men and women equally	20.35-	Yes
3. Do you think is OK for anyone to	Never	Attitude change
Hit their partner	.36-	
Hit their partner if s/he is nagging etc	.19-	
Hit their partner if s/he is not treating him/her with respect	2.16+	Positive
Hit their partner if s/he has slept with someone else	12.08+	Positive
4. Do you think is OK for a man to		
Hit a woman if she is his wife	2.56-	
Hit a woman if she is nagging/not stopping	0.85+	Positive
Hit a woman if she is not treating him with respect	0.60+	Positive
Hit their partner if s/he has slept with someone else	5.82+	Positive
5. Is it ever OK for a man to force a woman to have sex if		
He has spent a lot of money on her	0.98+	Positive
She has slept with loads of men	0.19+	Positive
They have been going out a long time	2.82+	Positive
She is his wife	6.99+	Positive
He is so turned on he can't stop	4.29+	Positive
6. Do women or girls ever provoke violence and abuse by		
The way they dress	0.73+	Positive
Flirting	2.36-	
Nagging/not stopping arguing	4.31-	
Not treating men/boys with respect	1.31-	
Two-timing their partners	3.27-	

7. How true do you think these statements are?		Increased awareness
Women cry rape the next day when really have just had second thoughts	1.48-	No
Women call things sexual harassment which are only a bit of fun	4.60+	Yes
Just slapping and pushing your wife should not be called domestic violence	0.50+	Yes
Women are more likely to experience violence from a stranger than someone they know	9.99+	Yes
Men only hit women because they love them	7.29-	
8. Which of the following do you think is domestic violence?		
Partner calls woman insulting names and says she is "ugly", "stupid" and "fat"	8.01+	Yes
Partner expects woman to ask his permission before arranging to go out socially without him	.22+	Yes
Partner threatens to harm the children if woman does not do as she is told	5.89-	
Partner locks woman in a room for periods of time	2.37-	
Partner insists on seeing receipts for all household purchases made by woman from housekeeping money	2.10+	Yes
Partner puts woman down in front of friends and family	5.01+	Yes
Partner insists that woman has sex with him regardless of her feelings about it	1.75-	
9. How do you think witnessing domestic violence affects children?		
Makes them aggressive	5.59+	Yes
Makes them shy and withdrawn at school	4.18+	Yes
Affects their school work	3.18-	
Makes it difficult for them to trust adults	4.78-	
10. Why do women stay in violent relationships?		
They think that he may change	0.94+	Yes
Nowhere else to go	3.22+	Yes
They love him	2.16-	Yes
They don't want to upset the children	5.30-	
They are afraid of what he might do	8.94-	
11. Survivors of abuse say the worst think about domestic violence is		Increased awareness
Physical injuries and pain	0.33+	Yes
Embarrassment in front of friends	2.62+	Yes
Worry about what he is doing to the children	0.92+	Yes
Long lasting emotional damage	3.87-	

12. Does it make any difference what country a family is from?			
Yes	2.79+		
13. Does it make any difference what religion the family follow?			
Yes	0.59+		
14a. What percentage of all violent crime in the UK is domestic violence?			
10%	1.71-		
15%	3.24+		
25% (correct figure)	2.03+	Yes	
30%	3.55-		
14b. How many women are murdered in a week in the UK as a result of domestic violence?			
1	3.25-		
2 (correct figure)	4.78+	Yes	
3	3.74-		
4	2.21+		
14c. What is the average number of women in British society today that have experienced domestic violence?			
1 in 3	.05-		
1 in 4 (correct figure)	6.32+	Yes	
1 in 5	5.79-		
1 in 6	0.48-		
14d. What percentage of all injuries seen in casualty departments are the result of domestic violence?			
5%	6.55-		
10%	7.08-		
18% (correct figure)	6.70+	Yes	
25%	7.96+		
14e. What is the most common cause of homelessness among women caring for school age children?			
Pupils used the term "domestic violence"	15.51+	Yes	
Pupils used the term "domestic abuse"	5.33+	Yes	
Statement indicating violence or abuse	11.13-		
No money	1.13-		
Eviction	4.86-		
Drug abuse	1.09-		
Divorce/relationship ending	0.60+		
Adultery	0.59-		
Men don't want children	0.38-		
No support	1.84-		
Teenage pregnancy	0.25+		
Effects of childhood	1.31-		
Rejection	0.79+		

14.f. Number of agencies to which women who experience domestic violence go

1	.27+	
4 (correct figure)	4.49-	No
6	1.66+	
8	2.56-	

Bridgend findings

Specific findings.

- An increase in pupils' awareness with regard to the main perpetrators in domestic violence (Table A.3.1, question 2), and what domestic violence involves (Table A.3.1, questions 7 & 8).
- After the intervention, more pupils said it was never OK for someone to "hit their partner" if "s/he is not treating him/her with respect" or "s/he has slept with someone else" (Table A.3.1, question 3 & 4).
- After the intervention, more pupils said that it is never OK for a man to force a woman to have sex regardless of the circumstances (Table A.3.1, question 5).
- After the intervention (in three out of the five schools) more pupils said women and girls never provoke violence or abuse by the way they are dressed; by flirting; nagging/not stopping arguing; not treating boys/men with respect; and two-timing their partners (e.g. Table A.3.1, question 6).
- Findings regarding the reasons why women stay in violent relationships showed little change over the period (Table A.3.1, question 10).
- There was limited awareness of the emotional aspects of domestic violence and its long lasting effect (Table A.3.1, questions 9 & 11).
- There was an increase in the percentage of pupils who said that they would have asked for help if they were affected by domestic violence.

Cheshire

Table A.3.2 Responses of Cheshire secondary school pupils to questions on domestic violence

Questions to students	Pre-questionnaires	Post-questionnaires	Extent of change
Few relationships are violent	True 44%	True 19%	Positive 25-
	False 34%	False 57%	Positive 23+
Domestic abuse only happens to women	True 3%	True 100%	Negative 93+
	False 91%	False 0%	Negative 91-
Domestic violence is only physical	True 11%	True 0%	Positive 11-
	False 66%	False 95%	Positive 29+
Woman must have asked for it	True 1%	True 0%	Positive 1-
	False 96%	False 95%	Negative 1-
Being told useless and worthless is abusive	True 52%	True 95%	Positive 43+
	False 15%	False 0%	Positive 15-
Man trying to control the woman	True 53%	True 66%	Positive 13+
	False 28%	False 14%	Positive 14-
DV result of drink and drugs	True 37%	True 33%	Positive 4-
	False 38%	False 53%	Positive 15+
If beaten up, would leave	True 26%	True 9.5%	Positive 15.5-
	False 53%	False 81%	Positive 28+

Comparing Cheshire and Bridgend project impacts

By comparison with the changes achieved in the Bridgend project, the Cheshire project appeared to achieve a much greater change in pupils' attitudes overall. This can be seen by comparing the data in Tables A.3.1 and A.3.2. The questions asked in the respective questionnaires differed. None-the-less, if the greatest percentage positive change within any question is compiled for the two projects, then the average for Cheshire is 33 and for Bridgend it is only seven. This would suggest that the more wide-ranging approach adopted in Cheshire was more successful. It should also be noted, however, that the questions asked of pupils may also have had some bearing on the outcomes recorded in the questionnaires. For instance, both Bridgend and Cheshire asked pupils about the gendered nature of domestic violence. However, the Bridgend questionnaire asked whether domestic violence is carried out mostly by men, by women or by both; while the Cheshire questionnaire asked whether domestic abuse only happens to women (Table A.3.3). The more open questioning in the Bridgend questionnaire elicited very positive replies. By contrast the more closed question in the Cheshire questionnaire appears to have directed pupils to focus (erroneously) on women as the exclusive recipients of domestic violence and thus ending up with an apparently large and negative change in attitude.

Table A.3.3 Comparing Bridgend and Cheshire

	Change
Bridgend –Domestic violence is carried out Mostly by men	Positive 20.30+
By men and women equally	Positive 20.35-
Cheshire –Domestic abuse only happens to women	Negative 93+

Appendix 4

Table A.4.1 Impact of the use of photographic evidence in Cheshire

CJS stage	Qualitative evidence	Quantitative evidence
Arrest	Increase in police confidence to arrest: police officers reported that while the cameras were used to record evidence for any possible prosecution and did not lead directly to the arrest itself, the fact that this evidence could be gathered sometimes assisted the officers involved to feel able to make such arrests, confident in the knowledge that evidence could be provided.	None available (no change expected)
Charge	Possible improvement in appropriate charging: CPS officers suggested that photographic evidence was particularly useful in getting the level of the charge right.	Possible increase in charge rate: charges were made in 42% of cases (25/59) where photographic evidence was available compared with 36 per cent of cases (146/402) where photographic evidence was not available (an increase of 17%). However, it is possible that photographs were taken in cases that were classed as being 'more serious' and hence more likely to result in a criminal charge.
Victim statements	None available	Possible increase in victims willing to give statements: in cases where the perpetrators were arrested victims gave statements in 68 per cent of cases (21/26) where photographic evidence had been taken compared with 43 per cent of cases (81/146) where photographic evidence was not taken (an increase of 58%). However, it is possible that officers were more likely to collect photographic evidence in cases where victims were willing to give statements.

Bail	Possible increase in safety for the victim and protection after the incident: police officers interviewed reported that photographic evidence provided immediate and concrete information and provided a clearer picture of the incident, of any injuries and of the possible dangers if bail was granted.	None available
Retracted statements	Decrease in retracted statements and possible increase in women's safety: interviews with the CPS and police officers suggested that victims were less likely to retract where camera evidence was available, particularly when they were supported in the prosecution process by the Outreach Service. Interviews with the victims indicated that they often felt that the presence of camera evidence meant that they knew the case would go ahead so that retracting would be unlikely to have the effect of bringing the case to an end due to lack of evidence. Some victims suggested that perpetrators would be less likely to blame them and hold them responsible which may increase women's safety.	Decrease in retracted statements: in cases where victims had given a statement witnesses retracted them in 7.5 per cent of cases (3/40) where photographic evidence was taken compared with 19 per cent of cases (33/172) where photographic evidence was not taken (a reduction of 153%).
Pleas	None available	None available
Discontinuation rates ¹	None available	Decrease in discontinuation rates: 21 per cent of cases (8/38 with missing data excluded) were discontinued where photographic evidence was available compared with 30 per cent of cases (25/84 with missing data excluded) where photographic evidence was not available (a reduction of 43%).
Sentencing	None available	Slight increase in higher tariff sentencing ² : in 30 per cent of cases (9/30) where there was photographic evidence there was a higher tariff sentence compared with 24 per cent of cases (13/54) where there was no photographic evidence (an increase of 25%).

¹ Includes cases which were discontinued, withdrawn, dropped, NFA or dismissed.

² Defined here as being a custodial or community sentence as opposed to bindover, caution, conduit discharge or fine.

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