

Patchy, piecemeal and precarious:
support for children
affected by domestic abuse



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Definitions

Domestic abuse

Domestic abuse consists of abusive behaviour perpetrated by one person aged 16 and over against another person aged 16 and over with whom they are personally connected, for example, a partner, ex-partner, or family member.

Abusive behaviour can include:

- physical or sexual abuse
- violent or threatening behaviour
- controlling or coercive behaviour
- economic abuse
- psychological, emotional or other abuse.

This reflects the recently proposed government definition of domestic abuse. The impact on children who see, hear or are otherwise exposed to domestic abuse perpetrated by one adult against another is such that they should also be seen to have experienced the abuse.

Specialist support services for children

In this report we use the term 'specialist domestic abuse services for children' to refer to services that specifically support children affected by domestic abuse.

We have aimed to differentiate between specialist services offered within the Violence Against Women and Girls (VAWG) sector; specialist services offered by other organisations in the third sector, for example, children's charities; and those provided through local authority children's social care.

We expect that other third sector organisations offering specialist support to children affected by domestic abuse would have close links to the VAWG sector and take part in multi-agency safeguarding, protection and support work.

We also note that children and families affected by domestic abuse will get help through more general family support services.

Executive summary

For hundreds of thousands of children, childhood hurts. This new report shines a light on children's experiences of domestic abuse.

Scale

Domestic abuse can have a devastating impact on children and young people. We see this for ourselves in the services we deliver to children and families every day. We wanted to look in more depth at how children are affected by domestic abuse, and establish the scale of the issue. Crucially, we also wanted to gain a better understanding of exactly what support is available to the children who have been through these experiences and whether more needs to be done. Our new analysis of government data shows up to 692 children a day are assessed as being at risk of domestic violence in England.^a And it is important to note that this is an underestimate of the total number of children and young people affected, as many children live with abuse without it ever coming to the attention of

children's social services. More widely, it has been shown that 831,000 children in England live in households that report domestic abuse.¹

Impact

Action for Children commissioned University College London (UCL) to complete new analysis of the Millennium Cohort Study (MCS) to better understand the relationship between early childhood experiences of domestic violence and outcomes in adolescence. We found that young people who lived through domestic violence between their parents at age three were more likely to report higher than average antisocial behaviours at age 14. These behaviours included physically assaulting others and shoplifting. This gives some



^a We use the term 'domestic violence' when discussing our analysis of data from the Department for Education and the Millennium Cohort Study because this is the term used by the Department and within the Study. Generally, we use the term 'domestic abuse' in the report as it covers a wider spectrum of abusive behaviours.

insight into the trauma suffered by children who have struggled with abuse and violence between their parents at home. Children can develop post-traumatic stress disorder, have nightmares, flashbacks and physical pains, and they can also become depressed and battle suicidal tendencies.²

These children have no choice over their circumstances. But we can choose to help them.

Support

Evidence suggests that the right support has a positive effect on children's outcomes.³ In one study of domestic abuse services, children themselves spoke about how important it was to get support so they could move on, make new friends, settle in at school and enjoy a childhood free from fear.⁴

Domestic abuse affects children in several ways. This means a range of interventions are needed across local areas to make sure that every child gets the specialist help they need. For example, some children may require therapeutic support, provided by a trained professional, and delivered through talking or play, depending on each individual child.⁵ Our own service, Breaking the Cycle, offers therapeutic one-to-one counselling to improve children's emotional wellbeing. Psychoeducational programmes can also be invaluable, helping each child to learn about domestic abuse and develop coping skills.⁶

But not all children impacted by domestic abuse can access this support.

That's why we commissioned the University of Stirling to undertake research looking at the services available to children and young people across England and Wales. The team at Stirling held in-depth interviews with representatives from 30 local authorities, and completed a desk-based analysis of 50 websites of local authorities

(separate to those interviewed). The aim was to better understand the support adult and child survivors would be able to access if they were looking for help. This is the first such deep dive into the level of support on offer specifically for children who have experienced domestic abuse.

The research found big differences in the level of provision for children and young people both between and within local authorities across England and Wales. Shockingly, many children and young people live in local authorities where there is no dedicated domestic abuse service available to meet their needs.

Key findings include:

- Overall, children faced barriers to accessing support in at least two-thirds of the local authorities that took part in the in-depth interviews.
- In four of the 30 local authorities, there were no support services available at all for children affected by domestic abuse.
- Only two local authorities reported specific provision for children in the early years, including play therapy for under-fives. These authorities only provided targeted support in specific areas of deprivation. This is the case despite the recognition of the impact of early childhood experiences of domestic abuse.
- In 19 of the 30 local authority areas, services for children were dependent on time-limited funding. This means the long-term future of the support is extremely uncertain.
- In 11 of the 30 local areas, children's access to services was restricted by their postcode.
- In 20 of the 30 local areas, children's access to services was dependent on a parent's engagement with the service.

- 58 per cent of the 50 local authority websites surveyed (separate to the local authorities interviewed) either contained no information on services for children and young people at all, or simply signposted to national helplines and websites. 56 per cent did not even link to external pages. Families looking for support locally would be unable to find anything to help them on their own councils' websites. This also raises questions as to whether any support is even available in these areas.

A number of the research participants, reflecting on the current state of service provision, saw it as resulting from significant recent reductions in funding and a striking lack of specific legal requirements and guidance on the provision of support services specifically for children. In fact, most participants were not clear on the legal and policy frameworks that guided their work, and several referred to other documents that were more supportive in identifying good practice.

This a real gap, exacerbated by the pressing issues with funding. We know that local authority funding for the sexual and domestic violence sector was reduced by 31 per cent between 2010/11 and 2011/12, decreasing from £7.8m to £5.4m.⁷ Local services for children and young people have also faced overwhelming cuts.⁸ Participants in our study suggested that underfunding and short-term funding in particular had produced a patchy service response. The domestic abuse sector, and particularly the children's element of it, is highly reliant on short-term commissioning and grant funding, and this has produced a variable and highly volatile services landscape.

Most of the research participants felt that a statutory duty to provide services for children and young people affected, backed by adequate and sustainable funding, would help them to plan, deliver and commission vital services.

And we are at a critical point. With the announcement of the December 2019 election, the Domestic Abuse Bill was lost. The Bill offered a crucial opportunity to introduce a statutory duty on local authorities and their partners to provide support for children and young people impacted by domestic abuse. This report demonstrates why the new government has to introduce similar, strengthened legislation without delay. It must prioritise ending the current postcode lottery, and properly fund specialist services for child survivors of domestic abuse.

The new government must also face up to our wider crisis in modern childhood and put children first. The work that needs to be done to tackle domestic abuse is part of a much wider mission to put an end to the issues preventing children from leading safe and happy lives and growing up with the foundations they need to thrive. A cross-government National Childhood Strategy for the UK, led by the Prime Minister, must be developed.

Our new government must Choose Childhood.

Recommendations

- 1. The new government must introduce legislation to combat domestic abuse, specifically recognising the impact on children and their needs, without delay.**
- 2. The new government must recognise and address the current pattern of patchy, piecemeal and precarious provision of services for children and young people impacted by domestic abuse in England, including those who experience abuse in their own romantic relationships.**
- 3. Legislation to combat domestic abuse must include a statutory duty on local authorities and their partners in England to provide support for children and young people impacted by domestic abuse.** We note the recent work undertaken by the Ministry of Housing, Communities and Local Government. The new government must build on these proposals and ensure that any duty covers the planning, commissioning and delivery of both accommodation-based and community-based services for adult and child victims and survivors.
- 4. The current funding framework does not provide sufficient support for a robust response to children and young people’s experiences of domestic abuse. More sustained funding is needed to ensure that services can build capacity and develop the skills to respond to the complex needs of this vulnerable group of children and young people.**
- 5. The Welsh Government must also introduce measures to ensure local support services for survivors of domestic abuse and their children are properly funded and provided.**
- 6. We urge the next UK government to undertake a review on how to address abuse in romantic relationships between under-16s, as called for by the Joint Committee on the Draft Domestic Abuse Bill.**
- 7. The new government must ensure that frontline practitioners and public authorities recognise children as victims of the domestic abuse that occurs in their household. This should be done through new legislation that makes clear that children are also victims of domestic abuse.**
- 8. The new government must strengthen the relevant definition of harm in the Children Act (1989) by explicitly taking account of the impact of the coercive and controlling aspects of domestic abuse.**
- 9. Policy frameworks protecting and supporting children impacted by domestic abuse should not be limited to a focus on physical risk only; they should also emphasise the impact of coercion and control on children. Statutory guidance like Working Together to Safeguard Children should place a stronger emphasis on domestic abuse as a whole, including children’s experiences of coercion and control.**
- 10. The next UK government must put children first and develop a cross-government National Childhood Strategy for the UK.**

Introduction

Every child deserves a safe and happy childhood. Yet the painful reality is, a lot of children are growing up feeling unsafe and unhappy.

This report seeks to shine new light on children's experiences of domestic abuse.^b We look at the scale of the problem through **new analysis of the government's children in need census data**, and, to gain a more in-depth understanding of the impact of early childhood experiences of domestic abuse, **we commissioned University College London (UCL) to undertake vital new analysis of the Millennium Cohort Study**.^c

We know the difference the right support at the right time can make to children recovering from experiences of domestic abuse. As a result, we were also highly aware of the need to get a better picture of the current state of service provision, and find out what steps could be taken in order to ensure support is provided more consistently across the country. In this report we explore the

findings from **new research we commissioned from the University of Stirling which carried out an in-depth examination of the level of support on offer to children who are affected by domestic abuse** across England and Wales, and the barriers to access. Researchers undertook an audit of 50 local authority websites and 32 interviews with 34 representatives from 30 different local authorities.

The need for this research is urgent. Domestic abuse has a huge effect on children's lives. Research shows that perpetrators' coercive and controlling behaviours often prevented children from spending time with their other parent and their grandparents, visiting their friends' houses, and taking part in other activities.⁹ Children affected by domestic abuse can also develop personality and behavioural problems, and struggle with depression and suicidal tendencies.¹⁰ They and their families may have to move around for their own safety, and this can obviously be extremely destabilising.



^bThis report focuses on children who have lived in a home where domestic abuse has been perpetrated by one adult against another, and not young people who may have experienced abuse in their own intimate relationships. However, we recognise that this is also an area of concern, and a small number of our findings do relate to it. We have therefore taken it into account when making recommendations.

^cThe Millennium Cohort Study follows the lives of around 19,000 young people born across the UK in 2000/01.

We know that such traumatic experiences are not limited to a small number of children. Domestic violence is the most common risk factor in situations where there is a danger that children could be seriously harmed (and so need support from children's social care services) in England.¹¹

Encouragingly, research suggests that appropriate, targeted support and interventions have a positive effect on children's outcomes following domestic abuse.¹² We know this from our own services at Action for Children, too. But we also know that the domestic abuse and sexual violence sector, as well as local services for children and young people, have been subject to overwhelming government funding cuts.¹³

This report comes at a significant moment in time. We will have a new government by December

2019, and it is vital that it prioritises introducing legislation to address domestic abuse and support adult and child survivors. With the announcement of the 2019 general election, the Domestic Abuse Bill was lost. The new government must build on the important progress that was made and ensure that it does not miss the opportunity to improve the lives of children for generations to come.

As the findings in our report reveal, the new government cannot afford now to turn its back on the children and young people affected by domestic abuse.



Chapter 1:

The impact of domestic abuse on children and young people

“Although it was one person and one family, each and every one of my children have been affected in completely different ways.”

Parent

Domestic abuse has a devastating impact on children and young people. We see this every day in the dedicated domestic abuse and more general family support services we run. This chapter looks at both existing and new research to set out the scale of the problem that needs to be addressed.

The consequences of childhood experiences of domestic abuse are well known.

Very young children who are exposed to violence at home can experience so much added stress that it can negatively affect brain development and impact on cognitive and sensory growth.¹⁴ This could be the reality for a significant number of children, with data from 2013/14 revealing that a quarter of the estimated 130,000 children living in households across England and Wales with high-risk domestic abuse were under three-years-old.¹⁵

Some of the other long-term impacts include children developing personality and behavioural problems, struggling with bed-wetting, depression and suicidal tendencies.¹⁶ They can also show symptoms of post-traumatic stress disorder, having nightmares, flashbacks, headaches and physical pains, and becoming jumpy.¹⁷ Children’s lives are often destabilised by domestic abuse, too. They and their families may have to move a number of times to stay safe, which can be extremely disruptive, particularly to friendships and schooling.

This illustrates the importance of children and young people being able to access the support they need. Such support can help them to process what has happened in their families. Without it, they may not be able to develop an understanding

of what healthy relationships look and feel like. SafeLives found that a quarter of both boys and girls exposed to domestic abuse exhibit abusive behaviours themselves.¹⁸ Recent analysis of the Crime Survey for England and Wales (year ending March 2016) showed that those who had witnessed domestic abuse as a child under 16 were more likely to experience domestic abuse by a partner as an adult.¹⁹ This does not have to be the case, which is why support for children affected is so crucial.

Case study

Laura* endured 18 years of physical and emotional abuse from her ex-partner before his arrest in 2015. The couple had six children, who were also seriously affected by the abuse their mum experienced.



At the beginning of their relationship, everything felt romantic, but then Laura noticed that her now ex-partner was becoming possessive. He persuaded Laura that it was best she didn't get a job, as he would take care of her.

Laura said that she didn't want to have children, but that one of the ways her partner controlled her was through pregnancy. After the birth of their first child, her partner questioned whether he was the father, and the violence started. He would punch and kick Laura, dragging her from one room to the next. He also isolated her from her family and friends, accompanied her everywhere, and told her what she could and couldn't wear.

Laura's children saw their mother being punched, kicked, bitten on the face, and head-butted so hard that her forehead was fractured. But she wasn't allowed to go to hospital, and they felt there was nothing they could do. They would scream, "Don't hurt Mummy!"

The children began to copy their dad's behaviour, particularly the older ones. They started to throw things, hit out and punch holes in the walls. The boys bullied their sisters. They would also burst out crying unexpectedly and have nightmares. They often missed school. Sometimes, they would shut themselves away and not talk to anyone.

When Laura's ex-partner was first arrested, the family initially experienced problems accessing

support. Now, following the intervention of Action for Children's Family Partners service, which supports children experiencing neglect, they are all doing well at school. Laura is really proud of them. In her own words, the children range from introverted to outgoing, very clever to cheeky, and sports-mad to mischievous.

"The children are happy and confident now instead of walking on eggshells and living in fear. I want them to believe in themselves and achieve whatever they want to achieve."

* Name changed to protect identity

1. New findings from the Millennium Cohort Study

We wanted to look in more detail at how living in a household where domestic abuse occurs in early childhood can impact on children and young people’s experiences in later life. To do this, we worked with the Centre for Longitudinal Studies at University College London using data from the Millennium Cohort Study (MCS). The MCS follows the lives of around 19,000 young people born across the UK between 2000 and 2001.

The study explored the relationship between the children’s home environment, covering domestic violence, and the quality of parent-child relationships at age three, and young people’s mental health and wellbeing more than 10 years later, at age 14.²⁰

The research found that children whose parents reported experiencing domestic violence (defined as whether any of the parents have used force in

the relationship) when the children were aged three reported 30 per cent higher than average antisocial behaviours at age 14. Their parents reported 13 per cent higher than average conduct problems for their children at the same age.

These are serious issues. Within MCS, the definition of conduct problems in adolescents^e includes fighting with or bullying other children and regularly losing their tempers.

Antisocial behaviours include committing physical assault,^f shoplifting, and being noisy or rude in a public place.

However, these findings should be seen in the context of the trauma suffered by children affected by domestic abuse.

Children who experience domestic violence between parents in early childhood

At age 14 parents report:

 **13%**
higher than average
conduct problems

At age 14 children report:

 **30%**
higher than average
antisocial behaviours

^eThe definition is based on the areas covered in the Strengths and Difficulties Questionnaire (SDQ). The SDQ is an emotional and behavioural screening questionnaire for three to 16-year-olds.

^fPhysical assault is measured as having shoved, hit, slapped or punched.

It is worth noting that difficult behaviours can be normal responses to trauma, and there is a risk that manifestations of trauma can be misdiagnosed as Attention Deficit Hyperactivity Disorder (ADHD).²¹

Children and young people in this situation need the right support, at the right time, to help them rebuild their lives and go on to thrive.

2. The number of children affected by domestic abuse

We have explored the evidence on the impact of domestic abuse on children and young people. But assessing the scale of the problem is more difficult. It is clear, though, that large numbers of children are affected. Analysis by the Children's Commissioner shows that 831,000 children in England are living in households that report domestic abuse.²² Research dating back to 2011 suggests that as many as one in five children and young people under the age of 18 have been exposed to domestic abuse.²³

More recently, as part of its Annual Audit, Women's Aid used On Track⁹ data to select a sample of 18,895 female survivors from both community-based and refuge services.²⁴ Almost 60 per cent of these women had children, and almost seven per cent were pregnant. In total, service users had 22,479 children, averaging 1.2 children per individual.

This means there were more child survivors involved with specialist domestic abuse services than adults.

Another source of data is the Children in Need Census from the Department for Education (DfE). When a child is referred to children's social care, an assessment is carried out to find out whether the child needs the support of services^h, which local authorities have an obligation to provide under the Children Act (1989). The most recent data shows that there are nearly 400,000 children in need in England.²⁵

Local authorities carried out more than 644,000 assessments in the last year.²⁶ The assessments identify a child's primary need. This could be neglect, for example. Assessments can also identify further factors that contribute to a child being found to be in need. Last year, nearly 500,000 assessments, or 77 per cent, found these factors. Domestic violence was the most common factor. Just over half of the assessments (252,580) identified domestic violence as an issue in the child's home.

⁹ On Track is Women's Aid's case management and outcomes monitoring system.

^h A child in need is defined under the Children Act (1989) as a child who is unlikely to achieve or maintain a reasonable level of health and development, or whose health and development is likely to be significantly or further impaired, without the provision of services.

*In 2018/19, there were **644,700** assessments completed by local authority children's services.*



In all these assessments, practitioners identified the children's primary need. This could be abuse and neglect, for example.



***498,870** of these assessments identified further factors that would have contributed to a child being in need. These include mental health, drug misuse and domestic violence, as examples.*



***252,580** or **51%** of these, identified domestic violence as a factor contributing to the child being in need – higher than any other factor.*

This means that, on average in England, there are 692 children's social care assessments carried out every day that highlight domestic violence as a feature of a child or young person's life.¹ It is important to note that this is an underestimate of the total number of children and young people affected, as many live with abuse without it ever coming to the attention of children's social services.

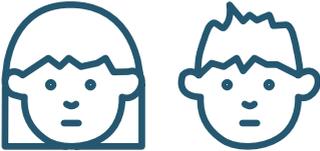
On average

692



social care assessments a day in England feature domestic violence as an issue faced by children

¹This figure was calculated by taking the number of assessments which identified domestic violence as a factor contributing to a child being in need in 2018/19 (252,580 assessments, as detailed in associated data tables) and dividing this by the number of days in a year (365). This gives the figure for the average number of assessments per day where domestic violence was identified as a factor in 2018/19.



In Wales more than a quarter of children receiving care and support have been affected by domestic abuse

In Wales, 26 per cent of the 16,080 children receiving care and supportⁱ on 31st March 2018 were affected by domestic abuse.²⁷ That's more than 4,000 children who have had to cope with violence and abuse in their family homes. Again, it is important to state that this figure will not capture all children affected, only those with a care and support plan for the qualifying period of 1st January 2018 to 31st March 2018.

3. What works for children and young people who have experienced domestic abuse

Domestic abuse has a significant impact on children and young people, and the numbers affected are considerable. Given what we know, it is crucial that we understand the best ways to help children and young people recover from their experiences.

There is evidence that appropriate, targeted support and intervention has a positive effect on children's outcomes.²⁸ Specialist support services for children also reduce the impact of domestic abuse and improve children's safety and health outcomes.²⁹ While not all children and young people who experience domestic abuse need intervention, for those who do, access to meaningful support at a time and in a way that is useful to them is important for their long-term recovery.

Children themselves have emphasised the psychological damage caused by living with domestic abuse, and their need for emotional support as a result of such experiences. Children who took part in a study of domestic abuse services spoke about the importance of receiving support to move on, make new friends, settle in at school and enjoy a childhood free from fear.³⁰

Domestic abuse affects children and young people in different ways, and so each individual must be offered support that meets their needs. A range of interventions should be available across local areas, so that every child can get specialist help.

ⁱ Following the commencement of the Social Services and Wellbeing (Wales) Act in April 2016, the Children in Need Census has been discontinued and replaced by the children receiving care and support census.

For example, some children might benefit from psychoeducational support, which provides a safe setting for children to learn about domestic abuse, explore their understanding of violence, and develop coping skills.³¹ Psychoeducational programmes for children affected by domestic abuse include Domestic Abuse Recovering Together (DART) and LINX group for adolescents.³²

Service Examples

<p>Domestic Abuse Recovering Together (DART)</p>	<p>DART is based on research from the University of Warwick and work undertaken by the Community Group Treatment Programme in Sutton. It has been developed further by the NSPCC.³³</p> <p>The programme focuses on improving the mother-child relationship. It is a group work programme for children aged seven to 11, and runs for 10 weeks. Half of each session involves both the mum and her child, with both taking part in a range of activities. These aim to strengthen the relationship between them, encourage them to talk about the abuse, and help them to support one another through their recovery.³⁴</p> <p>The programme also gives mums and their children the opportunity to meet others who have gone through similar experiences.³⁵</p>
<p>LINX group³⁶</p>	<p>The Hampton Trust developed LINX as a result of research that showed a gap in provision for young people who had experienced domestic abuse and were now showing signs of escalating violence. The programme was named LINX to recognise the connections between experiences, feelings and behaviour.</p> <p>LINX aims to help young people develop empathy and so prevent antisocial or violent behaviour from happening again.</p> <p>An Empathy Wall is used to illustrate the idea. This lets the young people explore links between what they've experienced and how they feel and behave. They are given the chance to develop skills to manage risk, and learn how to communicate safely and constructively.</p>

Case study



Action for Children service: Breaking the Cycle

Breaking the Cycle offers therapeutic, one-to-one counselling sessions to children and young people aged four to 16 who have experienced domestic abuse.

Our counsellors run the sessions in spaces where the young people feel comfortable and safe, like school. It's vital the children and young people feel safe before starting on the recovery programme. Non-abusive parents are involved throughout, and some sessions are held with both the parent and child.

The service is based in an area with a limited number of group-based recovery programmes, and very little funding for one-to-one support. Our counsellors are the only specialist one-to-one support for children and young people in the local area.

It's important that children are offered this type of specialist counselling. Our counsellors undertake their work through the lens of domestic abuse. They help to rebuild relationships, for example, between the young person and their non-abusive parent. The young person often won't describe

their experiences as 'domestic abuse'. They won't always be able to recognise why they were sad or angry and link it to what they have experienced. A counsellor's response to them depends on their understanding of domestic abuse and ability to enable them to explore emotions safely.

Breaking the Cycle makes a big difference to the children we support. Children say their emotional wellbeing has improved following counselling, and children, parents and carers have reported that their relationships have got better.

"We are all getting on better now at home ... our house is not as shouty ... I don't get as cross now."

Young person

"In the sessions, I have learned to forget the bad things and concentrate on the good things in my life."

Young person

Some children may need therapeutic support. This can be structured as a treatment to meet the particular needs of an individual, and be delivered by a trained professional.³⁷ Therapeutic support takes place in either a one-to-one or group setting, and can be delivered through talking or play, depending on the age and needs of the child.³⁸ We know that therapeutic one-to-one counselling can help children to develop their coping skills so that they can better understand and manage their feelings. Counselling can also boost confidence and encourage them to talk about how they're feeling. Children tell us that their emotional wellbeing is improved following counselling sessions.

Support for children needs to be trauma-informed and strengths-based.³⁹ This means building resilience, for example by developing a sense of belonging, high self-worth, and feeling in control.⁴⁰ It's also important that any support acknowledges the relationship between the child and their non-abusive parent.⁴¹

Collaborative working at a regional and service level is the key to providing varied support services for children. This will be explored in more depth in Chapter 4.

Despite its effectiveness, there is a concern that, currently, domestic abuse support for children is inconsistent across the country. Where services are available, they are often focused on protecting children, which is crucial, but there is insufficient preventative and recovery support.⁴² Research suggests a gap in the 'middle range level' of support for children, between universal services and CAMHS.⁴³ More widely, Women's Aid found that in 2010, 62 per cent of domestic abuse services in England listed on Routes to Support offered dedicated support to children and young people affected; by 2017, this had fallen to 52 per cent.⁴⁴

We wanted to get a better picture of what's happening on the ground, so we commissioned new research from the University of Stirling to get an overview of the current state of service provision for children affected by domestic abuse. This is explored in the next chapter.

³⁷The UK violence against women and girls service directory, supported by the Ministry of Housing, Communities and Local Government and managed by Women's Aid.

Chapter 2:

The current state of service provision for children affected by domestic abuse

“Children get different services depending on what areas they live. It is ad hoc and by chance what you get and what you don’t get.”

It’s clear that domestic abuse has a long-term impact on children and young people. What is less clear, however, is the support available to children across England and Wales. We commissioned the University of Stirling find out. They carried out research looking at how services for children affected by domestic abuse are provided in local authority areas. We wanted to gain a greater understanding of the variation in provision, and establish whether there is a postcode lottery of services.

This research is the first such deep dive into the level of support on offer specifically for children who have experienced domestic abuse. It consisted of two parts:

Audit of local authority websites

- A desk-based study of 50 local authority websites in England and Wales. Alongside this, 20 Tier 2 district council websites were also surveyed, due to their responsibility for housing. This part focused on the information local authorities provided about services for children, and the legislation, guidance and policies that might be informing their offer. This was essential to understand the experience of adult and child survivors who are actively looking for help from their local authority.

In-depth interviews with local authority representatives

- A qualitative interview-based study with 34 representatives from 30 local authorities in England and Wales, ranging from children’s services commissioners to domestic abuse

service leads. The interviews explored participants’ perceptions of service provision and the barriers to providing services for this group of children and young people. The aim was to illuminate the issues facing local authorities and families when it comes to providing and accessing the right support.

1. Variability in provision

The research uncovered significant variability in the level of provision for children and young people impacted by domestic abuse both between and within local authorities across England and Wales.

All 30 local authority areas interviewed offered assessment of risk and signposting to services through the Multi-Agency Risk Assessment Conference (MARAC) and Multi-Agency Safety Hub (MASH) or Team (MAST). All 30 also had early help services for families who met the threshold for that type of intervention (see Chapter 3). However, many children and young people live in local authorities that don’t have a dedicated domestic abuse service.

For most of the local authorities where direct care and support for children and young people was available, it was provided either through specialist domestic abuse services hosted by VAWG organisations, or by other organisations in the third sector, such as children’s charities. Very few – only five – of the case study local authorities offered any kind of specialist provision for children, or for parents, commissioned by the local authority and provided through children’s social care services directly.

Key findings from the interview-based study:

- **Overall, children faced barriers to accessing support in at least two-thirds of the local authorities that took part in the study.**

- **In four of the 30 local authorities, over 10 per cent, no support services were available for children affected by domestic abuse.**

This means there was no specialist support available either through the local authority, specialist domestic abuse or VAWG sector, or other voluntary organisations.

- **In one-fifth of the 30 local authority areas (six of those interviewed) no known group or one-to-one provision for children and young people was offered by specialist domestic abuse services in the VAWG sector.** Children’s workers, play workers and other therapeutic child specialists were no longer based in these services either. This is a real cause for concern given that Women’s Aid data shows that more child survivors are involved with specialist domestic abuse services than adults.

- **Only two local authorities reported specific provision for children in the early years,** including play therapy for under-fives.

These authorities only offered targeted provision in specific areas of deprivation. This is despite a recognition of the impact of early childhood experiences of domestic abuse.⁴⁵

- **Just eight of the local authorities provided support to teenagers and young adults over the age of 16 with issues relating to violence and coercive and controlling behaviours in their own intimate relationships.**

- **Where services were available, they were most typically offered through one form of provision.**

This could be, for example, the DART programme, a parent-child intervention focused on restoring the child’s relationship with their non-violent parent. This programme is highly valued, but it is not suitable for every child and young person. It is also important to note that, in many areas, this service has been cut as a result of funding reductions.



Children faced barriers to accessing support in at least two-thirds of the local authorities interviewed.



Only two local authorities reported specific provision for children in the early years.



In nearly two-thirds of the 30 local authority areas, services for children were dependent on time-limited funding.

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In over a third of the 30 local authorities, children's access to services was restricted by their postcode.

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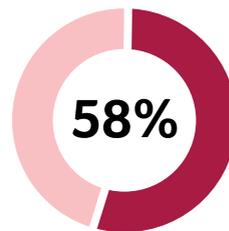
- **In nearly two-thirds, or 19, of the 30 local authority areas, services for children were dependent on time-limited funding.**
As a result, the future of this provision is extremely uncertain. Such short-termism can make good practice extremely difficult to sustain.
- **In over a third of the 30 local areas (11 of those interviewed) children's access to services was restricted by their postcode.**
- **In two-thirds of the 30 local areas (20 of those interviewed) children's access to services was dependent on a parent's engagement with the service.**

We also surveyed a number of local authority websites, separate to the local authorities interviewed. Again, this found a pattern of variable signposting and provision. This means that families looking for support locally will often struggle to find any help on their own councils' websites. It also raises doubts as to whether any support is even available.

Key findings from the website review:

- **58 per cent of the 50 local authority websites surveyed either contained no information about domestic abuse services for children and young people at all, or simply signposted to national helplines and websites.**
56 per cent didn't even link to external pages. Families looking for support locally would be unable to find anything to help them on their own councils' websites.
- **42 per cent of the websites surveyed included clear information and signposting to services for children.**
- **44 per cent of the websites surveyed included signposting to resources for children, young people and families on external websites,** for example, The Hide Out, hosted by Women's Aid.⁴⁶
- **Only seven sites included detailed information on the impact of domestic abuse – or locally available resources – on their public safeguarding pages.**

- **The provision of information on domestic abuse at district level, specifically for children, was extremely limited.** A small number (three out of the 20 district councils surveyed) had very good information for children and young people, or for their families. However, most did not signpost to specialist services for children and young people.



58% of the local authority websites contained no information about domestic abuse services for children, or simply signposted to national helplines and websites.

2. The impact of cuts and short-term funding

It's clear that the level of provision has been affected by reductions in funding. Many participants talked about how previously available services for children and young people had closed due to a lack of funding.

We know that, since 2010, both children's social care and the voluntary sector have been subject to significant cuts. Research shows that local authority funding for the sexual and domestic violence sector was reduced by 31 per cent between 2010/11 and 2011/12, decreasing from £7.8 million to £5.4 million.⁴⁷ Local services for children and young people have also had their funding reduced significantly. Research from Action for Children, Barnardo's, the National Children's Bureau, NSPCC and The Children's Society shows a £3 billion real terms decrease in central government funding for children and young people's services between 2010/11 and 2017/18.⁴⁸

At the same time, the number of children referred to social care increased by 7 per cent between 2010 and 2017, with child protection assessments increasing by 77 per cent, and the number of children placed on a child protection plan rising by 26 per cent.⁴⁹ In 2019, the National Audit Office reported that 91 per cent of local authorities had overspent on children's social care in 2017/18, and that there was considerable variation in average spend and service quality.⁵⁰

Those who took part in our study suggested that underfunding and short-term funding in particular had produced a patchy service response.

The domestic abuse sector, and particularly the children's element of it, is highly dependent on short-term commissioning and grant funding. This produces a variable and highly volatile services landscape. Within this context, good practice can be



Research participants suggested underfunding and short-term funding had resulted in a patchy service response.

difficult to sustain as such short-term funding is often focused on service innovation rather than on embedding successful, tried and tested models of support.

“We had some one-off funding to do family work where the family wants to stay together – a whole family approach. It was really successful, but the money was finite. It was good, but not been re-funded.”

County Council, East of England

Local authorities have come up with new ways of working and done what they could to work efficiently. However, participants felt unable to offer more than a basic service with the resources available to them. From their point of view, sustained cuts to funding had made both innovation and the maintenance of good quality services for children impossible.

“We piloted a short-term intervention for low and medium risk families. We learned a lot. But the funding came through the police innovation fund, so it was time-limited. And our local authority area is huge. We weren’t able to resource it to roll it out across the city, even though the pilot was really successful and there was clear evidence families benefited, risk was reduced and outcomes improved.”

Metropolitan Unitary Authority, North of England

Short-term, temporary funding doesn’t allow for longer-term investment in prevention and recovery-focused support. It also prevents the long-term tracking of such work that would be required to evidence significant change in children and young people’s outcomes over time. Participants felt that both preventative and recovery-focused support needed more sustained and substantive investment.

“My only answer to that would be long-term investment in children’s services. Because it’s all too easy to pilot things and then evaluate them or to see how something goes for three years and the politics of this are that we need a maximum of a five-year turnaround don’t we, where politicians want us to see a difference? And if we’re really serious about helping children then we have to take a leap of faith and say, we can’t always see the

difference we've made in two, three, five or even ten years. We have to make a leap of faith and say, if we offer this it has to make things better for children."

Metropolitan Local Authority, South of England

Short-term funding opportunities also require local authorities to be agile, responsive, and consistently ready to bid. This means that the system rewards stable councils who can boast strong, adequately resourced teams with high capacity, but does little to support those authorities who might be less ready to bid for money at short notice. Participants suggested that providing services was a continual hand-to-mouth effort.

“There was some government funding, but it's bits and pieces, and it's such a short turnaround. We're not aware always of collaboration opportunities. Services are so busy, they are doing what they can and so commissioners have a job to develop a better platform to be able to respond. ”

Unitary Authority, South of England

Information on who was commissioning dedicated domestic abuse services for children and young people was provided by only 15 of the interviewees. Of these, specialist services for children were directly commissioned by the local authority in two cases, and by the Office of the Police and Crime Commissioner in five. In eight areas, services were commissioned through grant funding (the Home Office special funding frameworks, the Big Lottery and other charitable organisations, for example). The reliance on grant funding contributed strongly to the sense of precariousness reported by many participants.

The current funding situation can contribute to a sense of service fragmentation, as services come

and go depending on funding cycles. This can mean that those on the frontline don't always know what's available, particularly in the voluntary sector. The variation of structures, practices and delivery models in use has also increased. The services landscape is effectively an everchanging patchwork. This raises a question as to how the government can ensure local authorities can provide effective services for children in a more consistent way nationally.

Case study

Mum of four Phoebe* decided to move to a different town to start a new life with her family after enduring years of domestic abuse at the hands of her ex-husband.



It was when Phoebe fell pregnant with Henry* that the emotional abuse started. Her husband would constantly criticise and intimidate her and the children. Phoebe’s friends were not allowed to come over to the house, and the children’s friends rarely visited.

One night when the children were in bed, Phoebe’s husband attacked her with a rolling pin, hitting her head and upper body around 30 times. The children woke up when they heard the noise and rushed towards the room. Phoebe believes she would not be alive today if her daughter had not entered the room during the attack. She told the children to barricade themselves in their bedroom until the police arrived.

Life was never the same again for the family and the children were offered no outside support. They only felt safe enough to return home after the police had installed security cameras, and the children insisted on sleeping in their mum’s room.

Five years after the attack, Phoebe and her children moved to a different town with her new partner. She started to bring the baby boy they’d had together to a mother and baby group at an Action for Children children’s centre. Around this time, her ex-husband applied to resume contact with their son Henry. When Henry found out that his father wanted to see him again, he began to have night terrors, soil himself, and display aggressive

behaviour at school.

Action for Children was able to work with Henry for eight weeks using the Helping Hands programme developed by Women’s Aid Federation Northern Ireland. Henry learned to identify safe and unsafe situations, and developed coping strategies for his anxiety and aggressive behaviour, including techniques like equal breathing.

“I didn’t feel safe knowing that he knew where we lived. He even knew our house number and the road we lived on and I just didn’t feel safe. This used to make me angry and I didn’t know any ways to control it. When I feel angry now, I think about ways that I can try and stop myself from reacting in a bad way, like taking some deep breaths. It makes me feel a lot happier and it motivates me.”

Henry

Phoebe and his teachers have all commented on the change in his behaviour, and Phoebe feels much more positive about the future.

‘He’s sort of bloomed, like a little flower. I was in floods of tears when his teacher was saying how much he’d changed.’

Phoebe, Henry’s mum

* Names changed to protect identity

3. Barriers to access

Funding issues are also seen to be a primary reason behind a number of the other barriers children face in terms of accessing services. The barriers include where the child might be living, whether their family is known to children's social care services, the engagement of their non-abusive parent with support services, and if they have any additional support needs.

Children with additional support needs

The research suggested that children and young people with additional support and care needs were rarely accommodated by financially overstretched services.

"Children with additional needs, learning disabilities, physical disabilities. It is much harder – we don't have specialist services for additional needs."

County Council, East of England

"Children with ADHD and ASD ... can be excluded and their support needs overlooked."

London Borough

With many specialist Black, Asian and minority ethnic (BAME) services experiencing substantial cuts in recent years, children, young people and families with English as a second language and specific cultural needs were often not provided with the right support either.

Research has found that BAME children, LGBT+ children, disabled children, and those from migrant families, often have particularly limited access to domestic abuse services.⁵¹

Young people experiencing abuse in their own relationships

The research also showed that just eight of the local authorities provided specialist support to

teenagers and young adults over the age of 16 with issues relating to violence and coercive and controlling behaviours in their own romantic relationships.

Young people aged 16 and over facing intimate partner abuse are entitled to access specialist domestic abuse services. However, their needs can differ from those that adult survivors present with, and so services set up for adults cannot always respond adequately to younger people struggling with these issues.⁵² Although the domestic abuse sector has made efforts to adapt to and meet the needs of younger survivors, there are clearly still gaps in the specialist support available to 16 and 17-year-olds.⁵³

There are also gaps in support for young people aged under 16 experiencing abuse in their own romantic relationships.⁵⁴ This is particularly concerning considering that 25 per cent of girls and 18 per cent of boys aged 13 to 17 in a 2009 study reported having experienced some form of physical violence from an intimate partner.⁵⁵

The parliamentary Joint Committee that scrutinised the draft Domestic Abuse Bill in 2019 recommended that the government undertake a review on how to address abuse in romantic relationships between under-16s. The next UK government must commit to this as a matter of urgency.

Postcode lottery

As we have seen, access to services varies significantly, depending on which local authority you live in. For many children and young people, this extends to the specific area within a local authority you might be from. Even within local authority areas, restrictions on access can limit the availability of provision to children and young people living in particular parts of that local authority. This means that many do not have



In over a third of the 30 local authorities, children’s access to services was restricted by their postcode.

.....

access to services. Participants highlighted this as a significant concern.

The interview-based study found that, in 11 of the 30 local areas, children’s access to services was restricted by their postcode.

Seven local authorities reported that a form of ‘whole family’ provision was available in their area. Such provision was predominantly focused on conflict management and parenting support, and targeted at families who wished to stay together safely. However, these were typically in pilot form with short-term funding attached, and targeted at very specific areas within each local authority.

“Some services are not available across all areas of our local authority. Waiting lists can be long so people ‘give up’ – people can be put on waiting lists and then when they get to see the service the case is closed.”

Unitary Authority, South of England

“Our domestic abuse services are integrated with [neighbouring county] but services for children are only available in that county, which means travel can be a significant barrier.”

Unitary Authority, South of England

“Each district has different level of service provision depending on which charities are there and which have funding.”

Unitary Authority, West of England

The geography of certain local authorities presented an additional barrier. This is particularly the case in rural areas, where children in remote locations appear to have very limited access to support.

“City A and rural area B are very different places. We struggle to engage with BAME people [in the city]. In the rural area, children who don’t have easy access to services. For these children we try to skill up schools to be able to respond. We also need to be developing safe access to services maybe online.”

Unitary Authority, South of England

It’s clear that a child’s place of residence can significantly impact what services they are likely to be offered. The following case study examples further demonstrate the extent of variation that exists between local authorities in their approach to supporting children and young people who have experienced domestic abuse.

Local authority 1

Strong and coherent service provision

Local authority 1 had a strong commissioning structure at the heart of its service provision. This involved joined-up work between the local authority's domestic abuse lead, the children's services commissioner, and the Office of the Police and Crime Commissioner. The high level of collaborative working resulted in a clear domestic abuse strategy that saw domestic abuse as having an impact on the whole family. The coherence of this domestic abuse strategy meant that the local authority was sufficiently prepared to respond to funding opportunities and, although much of its service was still grant-funded and provided in the voluntary sector, there was a reduced sense of precariousness in its offer.

Local authority 1 commissioned and supported a multi-agency hub that also included services offered by both the public and voluntary sectors. The multi-agency hub had self-referral, parent-referral and service-referral pathways, organised around the submission of a single form.

Its website was clear and well-structured, and it was easy to search for the support available for children and young people. Information was provided on each service, who it was designed for, what inclusion and exclusion criteria were used, and what children and young people might expect from the services. This included group-based and

one-to-one support for children and young people who had experienced domestic abuse in the family; groups for young people concerned about their use or experience of violence and coercion in their own dating relationships; and support for children and young people using violence in their relationships with other family members.

Children's experiences of domestic abuse were recognised as direct and significant, and the assessments of children and their needs were not purely confined to risk. The whole set-up of services was support and recovery-focused, with a strong emphasis on 'the right support at the right time'. It was acknowledged that domestic abuse did not 'end' when the non-abusive and abusive adults separated.

There were no risk-based thresholds for – or postcode limitations to – accessing services, and there were some services on offer for children and young people whose parents were not necessarily engaged with either children's social care or specialist domestic abuse services.

Schools were engaged with Operation Encompass¹, and were supported by domestic abuse specialists to enhance the school-based response to children and young people. These specialists were funded through the Office of the Police and Crime Commissioner.

¹Operation Encompass aims to ensure that, whenever police attend a domestic abuse incident and a child is present, the child's school is notified so that they can receive suitable support.

Local authority 2

Moderate levels of service provision

Like local authority 1, local authority 2 was characterised by a strong partnership between children’s social care services and specialist domestic abuse services, and strong leadership from the local authority’s domestic abuse strategy lead and children’s service’s commissioner. They also described their Police and Crime Commissioner as supportive and concerned about domestic abuse.

Domestic abuse services for families were prioritised primarily on risk, but there were also initiatives to engage in early intervention work with children and families. These services were located in early help. Although this meant they were only accessible to families known to children’s social care, the work had a supportive, therapeutic element. Unfortunately, these services were grant-funded and time-limited, and located in just two geographic areas of significant need. Funding had not been secured to extend the service, or to roll out the pilot across the rest of the local authority.

Domestic abuse services in this area did have specialist support for children, funded through grants from the likes of the Big Lottery, and the Police Improvement Fund. Specialist support included group-based provision offering separate but linked group support to mothers and their children, focused on recovery from domestic abuse. One domestic abuse service also had an embedded counselling service that included support for children.

Although this local authority had been successful in securing short-term project funding to sustain these services, there was a clear sense that this was not stable, and some of these services were at risk as follow-on funding had not yet been secured.

The local authority had piloted Operation Encompass, but had halted the pilot to re-evaluate. This was because of a gap between the identification of need through Operation Encompass, and the availability of services to meet that need.

Local authority 3

Low levels of service provision

In local authority 3, it was difficult to find out who was responsible for delivering support to children and young people affected by domestic abuse. There was no provision for children and young people included on the local authority’s domestic abuse website, and the safeguarding pages didn’t refer to domestic abuse as a specific concern for children and young people.

The children’s services commissioner who took part in the interview was not aware of any bespoke services for children and young people impacted by domestic abuse in the area. The commissioner noted that there had been a children’s worker based in the local domestic abuse service, but that their contract had not been renewed on cost grounds. The only provision for children and young people was through child protection. There were no specialist support services specific to domestic abuse.

Interestingly, comments from participants suggest that this variability within and between local authorities is also shaped by local politics and related commissioning practices. This highlights the importance of providing specific commissioning guidance for local authorities when it comes to specialist support services for children.

“There should be more of steer – domestic abuse shouldn’t be an add-on service. There are discrepancies between areas based on the local politics of the area. That isn’t good enough. Children get different services depending on what areas they live. It is ad hoc and by chance, what you get and what you don’t get.”

London Borough

Parental engagement

Children and young people whose families aren’t already engaged with specialist domestic abuse services have extremely limited access to provision. Most services for children and young people actually require a parent to be engaged with the service so that the child or young person can start receiving support. This can make it impossible for children and young people to self-refer, or to access services independently of their parents or carers. Involving parents is generally an appropriate and helpful strategy, supporting the child and non-abusive parent to rebuild their relationship, which can be essential to recovery. However, it can nonetheless be a barrier for children and young people who are ready to work through their experiences, or who simply need support, but whose parents don’t want to engage with services.

The interview-based study found that, in 20 of the 30 local areas, children’s access to services was dependent on parental engagement.

“For children who don’t want to use the group, they can get one-to-one support in the children’s centre. But the system is that the adult victim should also be accessing support to ensure the child or young person is getting the support they need at home.”

Unitary Authority, West of England

“For the group work needs to be undertaken alongside with the victim or perpetrator. This is one of the main criteria – that the victim should be accessing some kind of support. But if perpetrator doesn’t get support or isn’t there, this doesn’t stop the child from getting support from the group.”

County Council, South of England

Good practice example

Self-referral options for children and young people

In local authority A, self-referrals were put in place through a VAWG hub.

This hub was well signposted on the local authority website’s domestic abuse pages, and on its safeguarding hub website. Information was provided on the kind of support the children and young people could access. A single referral form was available, which could be completed by the child or young person, their parent or carer, or by a professional. The website held information on what to expect when going to the support service,

including an example that brought the text to life. Details were also available in print format, including versions translated into other languages.

The local authority representative who took part in the study was clear that the self-referral route was well used by children, young people and parents.

This contrasts with local authorities who indicated that, while they did have options for self-referral, these options weren’t widely advertised, and therefore were rarely used. Concerns about a lack of funding were again raised, as well as the possibility of excessive demand overwhelming services.

4. Support through schools

Participants also spoke about the provision available in schools, recognising that there were two levels of response required to adequately support children affected by domestic abuse: a universal route focused on early intervention and prevention, and a specialist resource with an emphasis on recovery from trauma.

“I think there should be specialist provision ... Why can’t there be specific counselling for children and play therapy rather than it being an ad hoc thing where if a provider is able to get charitable funding then it happens, if they don’t then it doesn’t. Also that all staff, no matter what their service is, are trained and understand domestic violence ... It’s everyone’s business.”

London Borough

Schools were seen as an appropriate site for universal provision. However, it was emphasised that this could only be successful if teachers were given high quality training and supported by specialist domestic abuse services that staff could refer children on to.

Participants noted a significant workforce development need if universal support for domestic

abuse is to be offered in schools. For a number of local authorities, the specialist workforce that might have delivered training and development in schools has been significantly reduced due to funding cuts.

“Recently the threshold has changed for child protection and early help – the threshold for early help now is what was being seen in child protection a few years ago. And we’re expecting anything below early help to be dealt with in primary care settings, in schools and so on. One teacher said to me that her fear was that if she opened up a dialogue about domestic abuse, it could be opening up a can of worms ... there’s nowhere to refer the children or family to. So her worry was are we doing more damage by asking questions and not being able to provide support?”

County Council, the Midlands

Many local authorities reported that interventions, or planned interventions, in schools focused on the provision of ‘healthy relationships’ education. It was also seen as important to equip schools with a trauma-informed approach to help teachers better understand and react to young people’s distressed behaviours.

Domestic abuse can cause trauma. There are a number of common responses to trauma, for example, memory and attention problems and anxiety. It is important to understand these responses so that young people can be better supported. Instead of thinking a young person is behaving disruptively, adults working with them need to understand that something might have brought back their experiences of trauma.⁵⁶

Through a trauma-informed response and ‘healthy relationships’ education, participants hoped that some of the broader issues linked to domestic abuse in childhood might be addressed and the likelihood of future involvement in abusive relationships reduced.

“We need to teach children in schools about healthy relationships – we have started to do some of that now. If children know it’s not normal, they are more likely to strive for something different and have positive futures and be resilient. If they think it’s natural and normal, they are likely to continue cycle of abuse.”

Metropolitan Borough, North of England

“So we’re rolling out trauma-informed training to some of our primary and secondary schools that have a Pupil Referral Unit, so you’re not looking at behaviour, you’re looking at why is that very young child behaving like that and what happened in the home last night ... rather than just excluding. Because we’re seeing more primary school children being excluded across the country, all these sorts of issues, and many of them come back to domestic violence.”

London Borough

Significantly, however, while many local authorities highlighted the need for schools-based and universal provision more widely, **only five reported that they were actually providing such support in schools**, for example in terms of providing help to teachers who had identified that a pupil was affected by domestic abuse. 12 areas did offer preventative work on healthy relationships in their local schools. In four cases, this was commissioned directly by the local authority, but in other areas this work was funded through short-term, grant-based funding, and delivered by third sector organisations. Only two local authorities reported basing services to support children impacted by domestic abuse in schools. In one case, this service was commissioned by the Office of the Police and Crime Commissioner.

Although many participants described schools as a useful location for domestic abuse services, their statements around schools-based provision were aspirational. Plans for such interventions remained at a very general level, and they didn’t seem to have clear strategies in place for rolling these out. Several participants also pointed out that academisation had limited the ability of local authorities to ensure such services were available in schools. It was also noted that some of the children and young people who might have the highest need for support may not be in education or training at all, having been excluded or home schooled.

Operation Encompass

A few local areas had piloted or rolled out Operation Encompass. This is a programme that aims to ensure that, whenever police attend a domestic abuse incident and a child is present, the child’s school is notified so that they can receive suitable support. Increased join-up between police and education was seen as potentially valuable. The police notification might overcome

children's reluctance to talk about things at school, particularly if a child is wary of authority figures, or is worried about the impact of disclosure on the wider family.

"Young people don't like to disclose about problems in their families, or they might think what is happening at home is normal. But the last thing they want is to get their parents in trouble and cause more problems. They find it hard to ask for help. Support in schools is really important, but most referrals come through police because it's got so bad."

County Council, South of England

However, participants reported variable outcomes from the use of the programme, again reflecting teachers' lack of confidence in, and support for, addressing the needs of pupils affected by domestic abuse, and the limited opportunities for referring pupils on to suitable specialist services.

"Teachers find disclosures hard, they don't tell teachers what has happened – it could be low level or high risk and they have no idea, they don't

know what approach to have with the children ... I just worry about how much they have to do. Are they burning themselves out? They are not social workers."

County Council, East of England

It's clear that the services available to children who have experienced domestic abuse across England and Wales vary greatly. Cuts to funding and short-term approaches to service provision have placed several barriers in the way of children and young people who have experienced the trauma of domestic abuse. These barriers are preventing them from accessing the support they need, when they need it.

Having explored the varying levels of support for children affected by domestic abuse, and some of the difficulties schools face, the next chapter looks at the challenges in addressing the needs of children impacted by domestic abuse within child protection.



Chapter 3:

The need for prevention, protection and recovery

“We’re very good at protect and we’re not so good at repair and recovery and that’s been found nationally, I think.”

Our findings make it clear that there is a postcode lottery when it comes to children accessing dedicated domestic abuse services, with some areas not providing any specialist support. One thing that is available in all areas, however, is an assessment of risk and signposting to services through the Multi-Agency Risk Assessment Conference (MARAC) and a Multi-Agency Safeguarding Hub (MASH) or Team (MAST). All also offer generic early help services for families. However, the fact that support can often only be accessed through children’s social care services is a real barrier for some families. The work of these teams is subject to thresholds, and so the focus tends to be on risk management, rather than the perception of need. Individuals at higher risk are therefore prioritised for more intensive support.

1. Routes to support through children’s social care services

Domestic abuse is seen as an issue for children when it poses a child protection risk, and so their needs are recognised under the Children Act (1989). Unless the child is shown to be directly at risk as a result of domestic abuse – for example, levels of neglect at home are severe due to the impact of domestic abuse – our research participants suggested it is unlikely the child will meet the thresholds for support.

The most common referral routes come through a ‘front door’ team or single point of access, for

example, MARAC or MASH. However, these teams most typically use risk thresholds to determine what further support might be needed for each child or young person and their wider family.

Several participants saw navigating thresholds as a difficult issue. They were concerned that families that did not meet the necessary risk threshold were stepped down or referred to other services, but then ‘came back’ with more significant concerns. Opportunities to help can also be missed entirely.

“For domestic homicides here, most weren’t known to any services. We really need to think about that. A big proportion of those cases have children and yet they weren’t regarded as high risk. We don’t know about these children. They are just labelled as troublesome children and excluded.”

County Council, East of England

Recent research addressing children’s involvement in domestic homicides showed that nearly one-third of Domestic Homicide Reviews (DHRs)^m (where there were children under 18) identified that children had been exposed to domestic violence by the victim’s current or ex-partner.⁵⁷ DHRs identified missed opportunities to provide services following identification of need, including failing to refer families to children’s social care.⁵⁸

^mDomestic Homicide Reviews are completed following domestic homicides. They provide multi-agency accounts of families living with domestic violence and abuse and their interactions with services.

Children and Domestic Homicide Reviews

Number of Domestic Homicide Reviews (DHRs) published 2011-2016	Number of DHRs where there were children under 18	Number of children identified in the DHRs	Number of DHRs that identified that children had been exposed to domestic violence by the victim's current or ex-partner	Number of DHRs showing previous involvement with children's social care
142	55	125	16	28

High thresholds can also mean that children and young people with high recovery needs don't get the right support, because this is simply not a focus of the assessment and service prioritisation process.

In two areas involved in the interview-based study, specialist social workers did provide some form of therapeutic engagement with children and young people whose risk was assessed to be very high. Two more areas were developing services informed by the Safe and Together model to enable better partnership working with the non-abusive parent.⁵⁹ While introducing this model could improve the social work response to domestic abuse – and should support collaborative working – it's important to note that the Safe and Together model is not intended as a substitute for supportive services for children and families.

The interview-based study also found that, in four areas, access to specialist provision from the children's sector, or wider third sector, was subject to the family being known to children's social care, or a parent being involved with domestic abuse services.

"A social work referral is required for specialist DV service."

London Borough

While most of the professionals interviewed recognised that understanding and addressing risk is important, many indicated that there is also a need to move beyond this risk paradigm when supporting children affected by domestic abuse.

This focus on risk as a way of managing access to services was understood by participants to be a consequence of funding shortages. Participants suggested that it was a straightforward way of prioritising limited and underfunded services.

"Funding is so tight for all partners, so they tend only to deal with more intense, critical high threshold cases, but it is much better to do early intervention and prevention."

Unitary Authority, East of England

"And that has come through really strongly in the consultation that we've done with local providers but also victims and survivors themselves, you know, this, kind of, feeling that there is enough resource to deal with the direct necessary intervention and support at that acute point of needing help. But the prevention aspect, and ... also the recovery side of things after that initial period of upheaval is where we're significantly lacking resources."

Unitary Authority, South of England

"We're very good at protect and we're not so good at repair and recovery and that's been found nationally, I think. And that whole thing of you work with a family, you reduce the risk and children stay with the mum or in some cases the child's removed and then you walk away and you leave the families, I think that's very much the case. And not for any bad reason, just because of resources."

London Borough

Parents might also be resistant to the involvement of children's social care because of concerns about having their children removed. Participants felt

that children and young people in families that found it difficult to engage with children’s social care services faced greater barriers to access.

“People are scared about what will happen to their kids, they worry their children might be removed. These are big issues. People are scared of social work, especially if they have had bad experiences before.”

Unitary Authority, Wales

“They need to be open to social care to be seen. If they are open to social care, there’s a range of services available.”

Unitary Authority, South of England

2. Child protection and coercive control

Research suggests that children are also harmed by forms of coercive control-based domestic abuse between adults living in the household.⁶⁰ Several participants also suggested that the coercive and controlling dynamics of domestic abuse are not given sufficient weight in work with children and young people. It’s concerning that, in the 111 pages of the statutory guidance *Working Together to Safeguard Children*,⁶¹ domestic abuse is referenced only four times, and the complexity of responding to domestic abuse is not explored.

Participants saw the lack of detailed guidance on coercive control as responsible for the failure to fully understand the impact of the coercive and controlling aspects of domestic abuse on family life. This failure could, paradoxically, increase children and young people’s risk of harm, given that high levels of control can be a significant risk factor for future serious physical assault and domestic homicide.⁶²

Participants were concerned that the emphasis on physical safety obscured coercive and controlling family dynamics, leading to a failure to address the emotional and social impact of domestic abuse on children and young people.

“We need to make coercive control and that side of domestic abuse more visible. Managing risk to safety is important, but coercive control is a big part of that. Policy-wise, more has to be done in terms of making domestic abuse more visible. And we do need to increase spending. It’s difficult with the legislation and policy on coercive control and its impact on children – it shouldn’t be seen as a second priority.”

London Borough

“It’s much more difficult to see somebody as abusive when they’re not physically abusive, and the forms of psychological abuse can be really quite subtle and difficult to even articulate. And we tend to deliver services to children with a good understanding of physical violence and protecting their physical needs but not always I think with an appreciation of the impact that psychological abuse might have had on them, and witnessing their mum responding and trying to manage that as well.”

Unitary Authority, Wales

“The child protection framework doesn’t understand the impact of coercive control and how that causes damage and is traumatic for children. People don’t often understand that coercive control and domestic abuse are part of safeguarding and child protection. It’s just not given the emphasis.”
Unitary Authority, South Wales

Participants highlighted the importance of challenging the idea that domestic abuse is primarily an adult concern, and demonstrating the impact that domestic abuse can have on children. Workforce development was put forward as an important way of achieving this. It was suggested that professionals in children’s social care services needed training around the impact of coercive

and controlling behaviours on children. For practitioners working in specialist domestic abuse services, the need for training around children's needs was highlighted. Domestic abuse training was also emphasised in relation to professionals working with children in a more general capacity, for example in schools.

“So on the one hand we need to really listen to children and sit alongside them and not patronise them, but on the other we need to recognise that what they say and what they think they want might be massively affected by an abuser who’s managed to manipulate them from possibly being very young. So that’s why I suppose you get children often expressing hostility and resentment towards their mothers as well, because they might feel a whole mix of things about both their parents that might not even make any sense to them.”

Unitary Authority, North of England

“We try really hard to integrate children’s needs into any training we do around domestic violence so that staff are not thinking of the children as an add-on and as an additional issue that they need to contend with once they have addressed their mum’s needs.”
Unitary Authority, North of England

“To work well in schools, we need to train teachers, and other generic children’s and family support workers, to work with trauma, where children are affected. They need to be more confident in supporting children with domestic abuse.”

Unitary Authority, South West of England

We’ve seen that a final barrier common to many local authorities is that families need to be known to – and open to engagement with – children’s social care to access specialist support services.

This makes it difficult for families where domestic abuse is an issue but services may not be aware of them. This could either be because they do not meet the required threshold for further support, or have not yet come to the attention of children’s social care. Parents can also be resistant to engagement from children’s social care services.

This underlines the need for easily accessible support and sustained funding to back this offer up. Resources shouldn’t dictate children’s access to the services they need.

There is also a lack of understanding when it comes to the impact of coercive and controlling behaviours on children. The new government and other public authorities, as well as frontline practitioners, need to recognise that children are also victims of domestic abuse – in all its forms – in their own right.

The next chapter explores the steps the new government must take to address the issues raised by our research.

Chapter 4:

Ensuring all children can access the support they need, when they need it

“There should definitely be a statutory requirement to provide specialised domestic abuse support for all children affected by domestic abuse so there are not so many discrepancies across different areas.”

Despite the devastating impact domestic abuse can have on children and young people – and the numbers affected – the support available varies significantly, both between and within local authorities across England and Wales. Children can also face barriers when it comes to accessing this patchy and piecemeal arrangement of specialist support. Participants made it clear that high thresholds can negatively affect the likelihood of children accessing services through children’s social care. They suggested that the emphasis on the management of physical risk obscured the impact of the coercive and controlling aspects of domestic abuse on family life.

This leaves us with the question: what can be done?

1. The need for clearer guidelines

Responsibility for responses to domestic abuse at the local level primarily lies with local authorities and Police and Crime Commissioners. However, at present, there are no clear guidelines, legal requirements or minimum standards for local authorities in relation to services for children and young people affected by domestic abuse. While social services have a statutory duty to safeguard children and vulnerable adults who may be at risk of harm, for example under the Children Act (1989) and the Care Act (2014), many children who do not qualify for this support still require specialist services to recover from what has happened to them.

Participants were asked what legal and policy frameworks they used in the planning, commissioning and delivery of specialist services

for children and young people affected by domestic abuse. The answers they gave varied significantly. Some referred to the Children Act (1989) and the associated statutory guidance, *Working Together to Safeguard Children*, which, as noted previously, contains very little on domestic abuse. Considering domestic violence is the most common factor identified at the end of assessment for children in need – present in more than half of all relevant assessments – this is a serious oversight. As we’ve seen on average, 692 children’s social care assessments are carried out every day with domestic violence identified as a feature of a child or young person’s life. Participants expressed frustration that, although domestic abuse might be mentioned in legal frameworks and policy on child protection, it is given insufficient attention.

“Domestic abuse needs to feature more strongly in *Working Together*.”
Metropolitan Local Authority, North of England

Other participants used the Home Office’s Ending Violence against Women and Girls: Strategy 2016–2020. The National Statement of Expectations that sits under this strategy, which explains the actions local areas should take, has very little to say about specialist services for children and young people specifically. Several participants also noted that the current legal and policy framework around domestic abuse does not have an adequate focus on children, and this can negatively affect the commissioning of relevant services.

“[Policy guidance] is largely focused on providing specialist services for women, not children.”

Unitary Authority, South of England

In fact, most participants weren't clear on the legal and policy frameworks that guided their work, and several referred to other documents that were more supportive in identifying good practice. They felt there was insufficient guidance on what local authorities should provide to this group of children and young people.

This suggests a link between a lack of specific guidelines and legal requirements, and the national variation in support for children affected by domestic abuse. The current situation is both confused and confusing. The new government has to recognise and address the current pattern of variable and patchy service provision in England so that children and young people impacted by domestic abuse get the help they need.

2. Local authority views on a statutory duty to deliver services

Overall, participants reported that policy and best practice guidance on domestic abuse was insufficient, and suggested this was a barrier to the commissioning of consistent and appropriate services for children and young people affected by their experiences of domestic abuse.

“I'm not sure that domestic abuse features strongly enough. It's getting some attention at the minute, but a lot depends on what the local or national political priority is at the time – whether it's CSE, Prevent, or whatever. Domestic abuse is flavour of the month one month, but not the next. So there's no consistent emphasis.”

Unitary Authority, Wales

The children's services commissioners and domestic abuse leads interviewed agreed that current policy frameworks do not give sufficient attention to the impact of domestic abuse on children and young people. They also agreed that

statutory guidance on service provision would be useful. Most actually felt that a statutory duty – adequately funded – to provide services for children and young people affected would support them in the planning, delivery and commissioning of such services. Such a duty or requirement was seen as one way of ensuring that the variability in provision described earlier in this report is addressed, although care needs to be taken in how any requirement or guidance is framed.

Participants also suggested that a statutory duty could ensure better training for professionals who support families impacted by domestic abuse, leading to a more appropriate and sensitive response across different sectors and agencies.

It's important to note here that local authority partners, for example Police and Crime Commissioners and Clinical Commissioning Groups and other health bodies, also play a critical role in tackling domestic abuse, both by funding and commissioning services, and identifying and supporting adult and child victims. A consideration of further statutory requirements and guidance around services for child survivors of domestic abuse must include these key partners.

Study participants suggested that any changes should not only target local authorities but also extend to health.

“We put a lot of emphasis on the LA [local authority] but actually children's recovery from domestic abuse is a health issue. It takes children so long to get into mental health services. Some need a mental health assessment, but some children are referred to the wrong services. There was a CAMHS [Child and Adolescent Mental Health Services] study some years ago that showed that children were referred for ADHD [Attention Deficit Hyperactivity Disorder] and other behavioural problems, but six months into therapy child discloses DA [domestic abuse], and turns out that's what child is suffering from. It isn't ADHD, and they need a decent assessment process, it's that they have experienced violence and abuse.”

Unitary Authority, North of England

Given current funding constraints, participants suggested that, without a statutory requirement to provide services for children and young people affected by domestic abuse, it's likely that such patchy and variable provision will continue.

“The austerity climate means we can only provide basic provision, we are strapped, it is about resources. I like change, change is good, but I am struggling to see how we can make things positive without at least some resources ... MARACs are done by conference calling, we are managing our time better, but if we want to deliver, we need resource.”

Unitary Authority, North of England

“I hate to use the term ‘resources’, but you start firefighting when you start cutting resources. So there are the areas of the work we really need to do and we want to develop. But in a climate where we have no resilience, no capacity, no resource, we end up firefighting, dealing with the here and now.”

Unitary Authority, North of England

Many participants felt that a coherent statutory duty and effective policy guidelines were needed, as well as adequate and sustainable funding to help local authorities to meet their statutory obligations. It was recognised that implementing a statutory requirement without providing the necessary resource to underpin it wouldn't be effective.

“Would a minimum requirement be useful? My gut reaction is yes. Domestic abuse has a significant impact for children, we know that. But even though it would be useful, I’m not sure how it would translate into practice. I mean, people would respond, but where would the funding come from?”
Unitary Authority, South of England



Case study



How Breaking the Cycle helped Carrie

Carrie* was supported by Action for Children’s specialist counselling service after experiencing domestic abuse between her parents, who are now separated. Carrie had been present when her father was abusive towards her mother and had also been directly affected by her father’s coercive and controlling behaviours. Carrie has contact with her father, and wanted this, but she was struggling to make sense of her feelings. Her mum said that Carrie was “crying a lot, both wanting to see Dad and then crying to come home”. It was felt that independent counselling would help her to understand her emotions and manage how she was feeling.

Carrie was offered over ten counselling sessions. These were delivered at her school so that she could explore her emotions in a familiar and trusted environment. Her counsellor, a registered member of the British Association for Counsellors and Psychotherapists, used creative interventions like games, therapeutic play and metaphoric image work (which can help people to step outside of themselves and process feelings at a safe distance). Therapeutic play helps children to express themselves more freely and develop decision-making and problem-solving skills. Mindfulness was also used to help with the reduction of stress.

Through these interventions, Carrie and her counsellor explored her fears and anxieties; her relationships at home and at school; things within

and beyond her sphere of control; and feeling and staying safe.

Gradually, Carrie became more able to work in the here and now, communicating her feelings with greater insight and confidence. By the end of the counselling sessions, Carrie had an improved sense of what is and what is not within her control, and better understood both the characteristics of good and challenging relationships, and the importance of asking for help when needed. She became less anxious and tearful at home, and more able to manage difficult and complicated emotions. She also felt more confident communicating her own wants and needs.

“Carrie’s confidence has improved massively, she talks to me more openly now.”

Carrie’s mum

“The support has had a positive effect upon Carrie’s confidence and self-esteem.”

Carrie’s teacher

* Name changed to protect identity

3. The need for new legislation on domestic abuse

The former government introduced a Domestic Abuse Bill to Parliament in July 2019. However, this opportunity to address the variability in the support offered to children affected by domestic abuse was lost when the 2019 General Election was announced.

When it was published the Bill included provision for:

- The creation of a new statutory definition of domestic abuse, covering coercive and controlling behaviour, and including economic abuse as a distinct type of abuse.
- The establishment of a Domestic Abuse Commissioner, to provide public leadership on domestic abuse issues, and to oversee and monitor the provision of domestic abuse services in England and Wales.
- Prohibiting the cross-examination of victims by their abusers in the family courts.
- Ensuring victims of domestic abuse-related offences are eligible for special measures in criminal proceedings.
- The introduction of new Domestic Abuse Protection Notices (DAPNs) and Domestic Abuse Protection Orders (DAPOs) to further protect victims and place restrictions on the actions of offenders.

There were concerns among our research participants that the draft version of this Bill was not specific enough about the impact on children.

“Children are under-emphasised in the new Domestic Abuse Bill.”
Unitary Authority, South West England

Yet it was positive that the Bill would have expressly required the Domestic Abuse Commissioner to encourage good practice in the identification of children affected by domestic abuse. There was also a commitment to recognise the impact of domestic abuse on children in the accompanying statutory guidance.

It is essential that the next UK government introduces new, strengthened legislation to combat domestic abuse, specifically recognising the impact on children, without delay.

We will now explore how we can improve wider understanding of the impact of coercive control on children, and ensure that children and young people can access the dedicated support services they need. Key to this will be the introduction of new legislation on domestic abuse, and the safeguarding of all the work that has been done so far.

How can we ensure children can access dedicated support services?

It's clear that local authorities would welcome and benefit from clearer guidelines and requirements on the commissioning and delivery of specialist domestic abuse services for children and young people.

The former government was actually thinking along similar lines. The Ministry of Housing, Communities and Local Government (MHCLG) recently put forward a proposal to introduce a

new statutory duty on local authorities to provide support to victims of domestic abuse and their children in accommodation-based services like refuges. The plan was for this proposal to be added as an amendment to the Domestic Abuse Bill.

This duty would require local authorities to convene Local Domestic Abuse Partnership Boards, with relevant partners like Police and Crime Commissioners, Clinical Commissioning Groups, children’s services and specialist domestic abuse services providers. These Boards would then be required to assess local need, develop and publish strategies for the delivery of accommodation-based domestic abuse services, and commission and de-commission such services accordingly.

The local authorities that took part in the study saw collaborative working, both at the regional and service level, as key to the provision of good quality services. This required resource and policy support to work effectively.

Working together – from commissioning through all the layers of assessment, child protection and intervention – was viewed as providing a consistency of response that helped children and young people to feel supported at an individual level. At the same time, it was seen to support coherent planning and development of services at the strategic level.

Our research suggests that areas with better forums to support collaboration – particularly those where children’s commissioners, domestic abuse leads, and the Office of the Police and Crime Commissioner worked closely together to plan and commission services – had better provision for children and families.

“It makes sense to be collaborative, especially around services and commissioning.”
Metropolitan District Local Authority, North of England

“There are small-scale innovative projects. But domestic abuse services need to work together, not separately. We are a bit blind at the moment, in understanding the full response from the voluntary and community sector.”
Unitary Authority, South of England

The proposals were therefore a promising step forward. However, the duty wouldn’t apply to wider domestic abuse services, like community-based counselling support services for children. There are concerns that introducing a duty that covers only one element of domestic abuse provision could have the unintended consequence of removing funding from other crucial services that support adult and child survivors of domestic abuse. It’s important to remember that the majority of victims of domestic abuse will not go into a refuge. Last year, refuges in England supported just over 12,000 victims of domestic abuse, while it is estimated that Independent Domestic Violence Advisors supported approximately 60,000 adult victims and 75,000 children.⁶³

Any duty to provide accommodation-based domestic abuse services can only work effectively as part of a wider statutory duty to deliver specialist domestic abuse support in the community for adults and children affected. This should include support for young people experiencing abuse in their own romantic relationships. The new government must also undertake a review on how best to support young people who are facing intimate partner abuse.

The parliamentary Joint Committee that scrutinised the draft Domestic Abuse Bill also called for clarity on how non-accommodation-based support services will be provided and funded.⁶⁴ The Committee pointed out that these services should be included in future commissioning plans to ensure full compliance with the Istanbul

Convention. The Convention sets out that it is the responsibility of the state to address gender-based violence, and clearly states that nations must provide specialist support services to victims of gender-based violence and their children. The United Kingdom has signed the Convention, and the Domestic Abuse Bill was intended to be the last step before ratification. This underlines even more strongly the need to continue this work, and ensure that the provisions the Domestic Abuse Bill was to have brought forward are not lost.

Taking into account the effects of cuts, and the short-termism in current approaches to the funding of specialist domestic abuse services, it is evident that any duty must be backed by an

adequate and sustainable funding model. This would ensure that local authorities and their partners are ably supported to implement a duty, so that all survivors, both adults and children, receive the support they need, when they need it.

Our research with the University of Stirling covered local authorities in Wales too, and participants working in these areas highlighted similar concerns. We would also call on the Welsh Government to introduce effective measures to ensure local support services for survivors of domestic abuse and their children are properly funded and provided.

Recommendations

- 1. The new government must introduce legislation to combat domestic abuse, specifically recognising the impact on children and their needs, without delay.**
- 2. The new government must recognise and address the current pattern of patchy, piecemeal and precarious provision of services for children and young people impacted by domestic abuse in England including those who experience abuse in their own romantic relationships.**
- 3. Legislation to combat domestic abuse must include a statutory duty on local authorities and their partners in England to provide support for children and young people impacted by domestic abuse.** We note the recent work undertaken by the Ministry of Housing, Communities and Local Government. The new government must build on these proposals and ensure that any duty covers the planning, commissioning and delivery of both accommodation-based and community-based services for adult and child victims and survivors.
- 4. The current funding framework does not provide sufficient support for a robust response to children and young people's experiences of domestic abuse. More sustained funding is needed to ensure that services can build capacity and skills to respond to the complex needs of this vulnerable group of children and young people.**
- 5. The Welsh Government must also introduce measures to ensure local support services for survivors of domestic abuse and their children are properly funded and provided.**
- 6. We urge the next UK government to undertake a review on how to address abuse in romantic relationships between under-16s, as called for by the Joint Committee on the Draft Domestic Abuse Bill.**

How can we improve understanding of the impact of coercive control on children?

It's encouraging that the proposed statutory definition of domestic abuse which was to have been included in the Domestic Abuse Bill covered physical violence, economic abuse, and coercive and controlling behaviour. However, children's experiences were not recognised in this definition. This is despite research suggesting that children are harmed by forms of coercive control-based domestic abuse between adults living in the same household.⁶⁵

In any new legislation that is brought forward, the next UK government must address the way children were missed out before. If children's needs are to be considered by key agencies – like the police, for example – they have to be meaningfully taken into account on the face of legislation.

Research has highlighted that young people often feel that they are not provided with any explanations or information from the police.⁶⁶ They can be excluded from the discussions that take place between officers and adults in the home following a domestic abuse incident, and they can feel their perspective on domestic violence incidents isn't listened to. Cross-national comparative research shows that, in those contexts where children are recognised as direct victims, they are more likely to be spoken to, and their perspective taken into account.⁶⁷

The Joint Committee also highlighted concerns that if children's status as victims of the domestic abuse that occurs in their household wasn't recognised by the Bill, this could have had a negative impact on the level and quality of specialist support available to children.⁶⁸ We know that the support on offer is already variable, and we

must ensure the level of provision becomes more consistent, rather than less so.

As study participants highlighted, existing domestic abuse guidance is largely focused on providing specialist services for women, not children, and support for children is often a 'bolt-on' to existing domestic abuse services.⁶⁹ Many children don't receive any specialist support following their experiences of domestic violence and abuse.⁷⁰

Participants also highlighted concerns about the lack of detailed guidance on coercive control within child protection. They suggested this could be resulting in a failure to fully understand the impact of the coercive and controlling aspects of domestic abuse on family life. The emphasis on physical safety was seen as contributing to an inability to meaningfully address the emotional impact of domestic abuse on children and young people.

The Children Act (1989) was a landmark piece of legislation. It was further enhanced by the Adoption and Children Act (2002), which amended what the definition of 'harm' suffered by a child includes, for example, 'impairment suffered from seeing or hearing the ill-treatment of another'.

Although the definition of 'ill-treatment' in the Children Act does include forms of ill-treatment that are not physical, and so could be interpreted to include coercive control being used by one adult in the household against another, this is not absolutely clear.

This wording also doesn't fully recognise children as survivors of domestic abuse in their own right. Children are not just passive bystanders, merely overhearing or witnessing the ill-treatment of another, often a much loved person. Such wording doesn't do full justice to children's lived experiences. As staff in our services have emphasised, children don't just witness domestic abuse, they experience it directly.

With local authorities stating that: ‘People don’t often understand that coercive control and domestic abuse are part of safeguarding and child protection’, Action for Children would urge the new government to strengthen the relevant definition of harm in the Children Act by explicitly taking account of the impact of the coercive and controlling aspects of domestic abuse.

The steps the new government needs to take to address the impact of domestic abuse on children should form part of a wider cross-government National Childhood Strategy for the UK. Our recent report, *Choose Childhood: building a brighter future for our children*, highlighted the vital need

for investment in support that helps children and young people overcome the difficulties they are experiencing, ranging from poverty to mental health issues. We urgently need cross-government leadership to address the scale of the challenges children face, now more than ever.

Recommendations

- 7. The new government must ensure that frontline practitioners and public authorities recognise children as victims of the domestic abuse that occurs in their household. This should be done through new legislation that makes clear that children are also victims of domestic abuse.**
- 8. The new government must strengthen the relevant definition of harm in the Children Act (1989) by explicitly taking account of the impact of the coercive and controlling aspects of domestic abuse.**
- 9. Policy frameworks protecting and supporting children impacted by domestic abuse should not be limited to focusing on physical risk only; they should also emphasise the impact of coercion and control on children. Statutory guidance like Working Together to Safeguard Children should place a stronger emphasis on domestic abuse as a whole, including children’s experiences of coercion and control.**
- 10. The next UK government must put children first and develop a cross-government National Childhood Strategy for the UK.**

Conclusion

Domestic abuse is devastating for children and young people. Our new analysis of government data and the Millennium Cohort Study starkly illustrates both the ways children can be affected by experiences of domestic abuse in early childhood, and the high numbers of children and young people impacted.

It is unacceptable that up to 692 children a day are assessed as being at risk of domestic violence in England. Data from 2013/14 revealed that a quarter of the estimated 130,000 children living in households with high-risk domestic abuse across England and Wales were under three-years-old.⁷¹ Very young children exposed to violence at home can experience so much added stress that it can negatively affect brain development.⁷² New analysis of the Millennium Cohort Study by UCL, commissioned by Action for Children, showed that young people who lived through domestic violence between their parents at three were 30 per cent more likely to report higher than average antisocial behaviours at 14. These behaviours included physically assaulting others. This gives some insight into the trauma suffered by children who have struggled with abuse and violence between their parents at home.

Every child or young person who has had to deal with these experiences should be able to access meaningful support at a time and in a way that helps them. Yet our research, undertaken by the University of Stirling, shows that this simply isn't happening.

Many children and young people live in local authority areas without a dedicated domestic abuse service. Only two of the local authorities included in the study reported specific provision for children in the early years. And yet the severe impact of early childhood experiences of domestic abuse is clear.

Children also face barriers to accessing the services

that are out there. In 11 of the 30 local authority areas, children's access to services was restricted by their postcode. In two-thirds, children's access to services was dependent on services' engagement with a parent.

Crucially, in 19 of the 30 local authority areas, services for children are dependent on time-limited funding. This suggests the future of existing provision is extremely uncertain. It's clear that provision has been affected by significant cuts to funding since 2010.



Participants indicated that funding constraints had contributed to a focus on risk as a way of managing access to services. Many spoke about families failing to meet necessary risk thresholds and being stepped down, but then returning to the attention of agencies with more significant concerns at a later stage. This focus can also mean that children and young people with high recovery needs are not getting the right support, because this isn't a focus of the assessment and service prioritisation process. Our research identified concerns about the emphasis on physical safety, which obscured coercive and controlling family dynamics. This may lead to a failure to address the emotional and social impact of domestic abuse on children and young people.

The new government will have the chance to do something about this, and remedy the current

patchwork of services for children and young people affected by domestic abuse.

By prioritising legislation to combat domestic abuse, the new government could soon introduce a properly funded statutory duty on local authorities and their partners to provide them with support. It could also ensure that frontline practitioners and public authorities working with families treat children as direct victims of domestic abuse, and so improve responses to their needs. Only then will children's needs – and the importance of addressing those needs – be taken seriously.

Vulnerable children today are being left without support. They have no choice over their circumstances. But we can choose to help them. Taking action now will move us closer to giving children the safe and happy childhood that is their right.



Methodology

Scoping study by the University of Stirling: Service responses to the needs of children who experience domestic abuse in local authorities in England and Wales

Action for Children commissioned the University of Stirling to undertake qualitative research looking at how services for children affected by domestic abuse are provided in local authority areas, and to establish whether there is evidence of variation in service provision.

The research consisted of two components:

- a desk-based study examined local authority websites in England and Wales, focusing on what they stated about the provision of services for children, and the policy frameworks that informed this provision;
- and a qualitative interview-based study was conducted with a range of representatives from local authorities in England and Wales, exploring their perceptions of service provision and the barriers to providing services for this group of children and young people.

Desk-based study

The list of local authorities was drawn from the Local Government Association's (LGA) A-Z listing of councils in England and Wales.⁷³ A sample was drawn from the 36 metropolitan districts, 32 London boroughs, 55 unitary authorities and 26 county councils in England and 22 county and borough councils in Wales. Websites were selected to ensure a good representative of the different types of local authority and the different regions of England and Wales. The websites of those local authorities already included in the interview-based study were excluded. 30 per cent of relevant local authority websites (50) were included in the survey.

As Tier 2 district councils do not have responsibility

for the provision of child protection and domestic abuse services, they were not included. However, as they do have responsibility for housing, a sample of 20 (out of 192) was selected and surveyed separately.

Each website was searched using the search terms 'domestic abuse' (alternatives like 'domestic violence' and 'intimate partner violence' were also checked), 'children', 'young people', and 'families'. In addition, the safeguarding children pages were also searched. Hits were sorted using a matrix analysis, to detail what provision was described on local authority websites, what services were referred to, whether a local policy specific to children and young people could be identified, and what national policy frameworks were referenced in policies and provision statements.

Interview-based study

32 qualitative interviews were conducted over the phone with 34 representatives from 30 local authorities, lasting between 17 and 73 minutes. Local authorities were chosen from the LGA's A-Z listing, ensuring a good representation of councils from the different regions of England, and from Wales, as well as a representation of large urban, rural and coastal local authorities. A sample of 15 per cent of the 149 English and 22 Welsh local authorities was targeted. Professionals with specific responsibility for commissioning or delivering services for families affected by domestic abuse, and for making strategic and large-scale operation decisions about such services, were recruited. 32 interviews were conducted by phone.

Two strategies were used to analyse data from these interviews. A matrix-based analysis was used to summarise the key services offered in each area, and how they were accessed, commissioned and funded. In addition the data was analysed using a thematic analysis⁷⁴ to explore patterns in how

participants made sense of the policy and service landscape, and how they commissioned and provided services in their local area.

Analysis of the Millennium Cohort Study conducted by UCL

The research, conducted by the Centre for Longitudinal Studies at UCL, sought to identify the extent to which the quality and nature of family and social relationships and the home environment at age three predict subjective wellbeing and mental ill-health in young people aged 14. Data was taken from the Millennium Cohort Study, a national birth cohort study of more than 19,000 individuals born at the start of this century.

Factors investigated at age three included:

- **Parent–parent relationships:** assessed using the Glombok-Rust Inventory of Marital State (shortened 5-items version used here), with higher scores capturing better relationship quality.
- **Whether any of the parents have used force in the relationship (domestic violence):** the question put to both the mother and father, or mother’s partner was, ‘People often use force in a relationship – grabbing, pushing, shaking, hitting, kicking, etc. Has your husband/wife/partner ever used force on you for any reason?’
- **Parent–child relationships:** assessed using the Pianta Child–Parent Relationship Scale, a widely used 15-item short form that provides subscale scores corresponding to both parent–child closeness and parent–child conflict (the term ‘conflict’ in this case mainly represents difficulty reported by the parent in relating and managing their child).

Variables controlled for:

- **Child demographic characteristics** (sex, ethnicity).
- **Cognitive ability (at age three):** assessed using the British Ability Scales, Naming Vocabulary, and the Bracken School Readiness Assessment.
- **Parent mental health (at age three):** maternal and paternal psychological distress is measured using the Kessler K6 scale, with higher scores indicative of greater psychological distress.
- **Age of parents at birth of child.**
- **Family socioeconomic status (at age three):** Household income (weekly in pounds); highest educational level (no qualifications, NVQ1–NVQ5); social class (NS–SEC 1–5); rented accommodation (yes/no).
- **Country** (England, Wales, Scotland, Northern Ireland).

Outcomes investigated at 14:

Self-reported

- **Depressive symptoms:** measured by the Short Moods and Feelings Questionnaire (SMFQ), which assesses symptoms of depression. The measure consists of 13 items that assess feelings or behaviours in the previous fortnight (e.g. I felt miserable or unhappy) with responses on a three-point scale: true, sometimes true, not true. The items are aggregated to create a depressive symptoms score, with higher scores indicating greater symptoms.
- **Subjective wellbeing:** assessed using a six-item measure assessing satisfaction with different domains, including school, family,

friends, schoolwork, appearance, and life as a whole. The young person responded by indicating their level of happiness with each aspect of their lives on a seven-point scale ranging from not at all happy to extremely happy. The score is aggregated to represent overall wellbeing, with higher scores indicating greater wellbeing.

- **Antisocial behaviour:** reported by the cohort member using 11 items on frequency and whether they had ever or in the last year participated in these behaviours. Behaviours include committing physical assault – measured as having shoved, hit, slapped or punched – shoplifting, and being noisy or rude in a public place.

Parent reported

- **Emotional and conduct problems:** measured using the Strengths and Difficulties Questionnaire. A parent/carer (~95 percent mothers) responded by indicating how true (not true, somewhat true, certainly true) statements about the child are.

Analysis

Regression-based methods were used to investigate mental health outcomes (mental health difficulties and wellbeing): continuous mental health scores at age 14, and binary scores (identifying those with high or clinical levels of scores on the different measures). Multivariate regression is used to account for the confounding variables and to estimate associations between variables. In addition, we examine whether the associations of interest are significantly different between males and females using interaction terms in analysis. Differences in these associations between single parent and two-parent families

were also explored (with no differences in associations observed). Socioeconomic and demographic factors pertaining to the family environment are also examined in regression models.

Measures (outcomes and predictors) that are continuous and not already on a natural scale are standardised, as per convention, to have a mean of 0 and a standard deviation of 1, which helps the interpretation of results. A positive coefficient for a predictor, signifies that an increase in the predictor, is associated with an increase in the outcome. A negative coefficient means that an increase in the predictor, is associated with a decrease in the outcome. Statistically significant associations are indicated using p-values (* $p < .05$, ** $p < .01$, *** $p < .001$). To aid the interpretation of results for policy relevance and audiences outside academia, regression coefficients are transformed into percentage change from the mean score of the outcome examined. Percentages are used in the reporting of results in this document.

Sample weights and imputation to deal with missing data are used in analysis to restore the national representativeness of findings. Missing data is mainly due to attrition from the survey between ages three and 14; multiple imputation restores the analytical sample to 15,382 families, which is the number that participated at age three. Further use of weighting in regression analyses means that results are nationally representative of adolescents born in the UK around the millennium.

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