



Working with
children affected by
domestic abuse



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Nationally it is estimated that 14% of under 18's will have lived with domestic abuse at some time in their childhood (Women's Aid 2017). Recent figures for Knowsley suggest that more than 1000 children may witness domestic abuse reported to the police every year. Given the under-reporting acknowledged with this issue this is likely to be an under-estimate.

All aspects of a child's life can be adversely affected by exposure to domestic abuse and research shows that, as well as experiencing negative outcomes, children may also experience other forms of abuse (Radford, L. et al. 2011) and be more likely to have behavioural and emotional problems which go on to affect them in adulthood (Humphreys, C. 2006).

Responding to this issue and disclosure of domestic abuse, requires practitioners to be able to act in a timely, safe and supportive way. This practice guidance is intended to support colleagues in keeping children safe from harm while safeguarding their future welfare.

Signs and symptoms

Witnessing domestic abuse and experiencing coercive control can have a lasting effect on many aspects of a child's life. It may be possible to spot the signs that a child is exposed to violence or abuse at home through their behaviours and presentation. Below are some examples of what practitioners might observe:

0 - 5 years

- Violence to the mother during pregnancy may result in neurological and physical damage
- Physical and emotional neglect may result in basic needs for food and warmth not being met
- Presentation at A&E with injuries inconsistent with explanations given
- Under-stimulation and neglect may result in cognitive delay
- Witnessing unpredictable and frightening behaviour may result in symptoms similar to post traumatic stress disorder (eg flinching at sudden movements)
- Parental unhappiness, tension, irritability or lack of commitment may lead to faulty attachments
- Babies and toddlers have difficulty in communicating distress

5 - 9 years

- The risk of physical injury may lead to symptoms of extreme anxiety and fear. The child may be subject to abuse
- School behaviour and academic attainment may be impaired
- Children may blame themselves for parental behaviour. Self-blame may result in low self-esteem
- Unplanned separations may cause distress and disrupt education and friendship patterns
- Embarrassment and fear of unpredictable parental behaviour may result in curtailed friendships
- Children may take on too much responsibility for self, parents and younger children

10 - 14 years and older

- Coping with puberty without support
- Denying own needs and feelings
- An increased risk of psychological problems, behavioural disorders, suicidal behaviours and offending
- Low self-esteem
- Poor school attainment due to difficulties in concentrating
- Poor school attainment due to absence in order to protect parent or younger children
- Unacceptable behaviour resulting in a pattern of school exclusion
- Isolation caused by reluctance to disclose for fear of family disruption

Other related research indicates:

- Stress related illnesses
- Confused and torn loyalties
- Lack of trust
- Unnaturally good behaviour
- Taking on the parenting role
- Acceptance of abuse as normal

Young people often fail to disclose abuse because:

- They are protecting the mother
- They are protecting the abusing parent
- They are fearful of the consequences of disclosure
- They fear they will not be taken seriously

The effects of domestic abuse and coercive control on children

What do children need from practitioners?

The most important factor in how children cope with domestic abuse is the presence of one or more supportive adults in their lives.

A strong emotional attachment with the non-abusing adult (usually their mother) is most important but the support of adults in their wider social networks is also a strongly protective factor and practitioners working with children, in any capacity, should bear in mind that children need the following:

- They need to be reassured they did not cause the abuse and should not feel guilty
- They need to be able to talk to adults who will listen and not become impatient or judgemental
- They need normality in their daily routines (such as the school day)
- They need to be able to feel safe in environments outside the home
- They need to be able to make choices and feel in control of parts of their lives. This will include deciding when it's right for them to talk about how they are affected and what support they want
- They need to know it's not wrong to love and care for both parents

To achieve this practitioners should:

- Consider whether the child's basic needs for food and clothing are met (breakfast clubs are an example of this)
- Be prepared to use tools and approaches such as the Early Help Assessment and Team Around the Family (TAF) process to promote a multi-agency response to meeting the whole family's needs
- Use tools and methods which assess the emotional impact upon the child, indicate risks and what steps might be taken to help
- Reassure the child that their safety and wellbeing is most important
- Use Active Listening techniques to show the child you are genuinely interested in what they are saying
- Offer 1:1 support and work on relationships and emotions using appropriate resources such as the Respect Tool Kit, Hideout website or the Listening Ear - Someone to Talk To workbook

<http://thehideout.org.uk/children/adults-children-and-domestic-abuse/effect-on-children/>

- Promote self-confidence and enjoyment through positive activities with friends, family and other groups and services
- Teach the child (and possibly their family) relaxation methods such as mindfulness or massage
- Be flexible in what you offer and adapt processes and routine to allow children to engage when emotionally and practically right for them
- Be prepared to visit the child in other locations than your own where they can be reached and feel safe
- Consider the needs of the non-abusing parent and what you can do for them. Strengthening and supporting the bond between parent and child can be protective for both
- Be aware of other services available to the family and signpost to these. The Knowsley Family Information Service is a good source of this information

<https://www.knowsleyinfo.co.uk/>

Dealing with disclosure

What to do when a child tells you about Domestic Abuse

- Practitioners may find out about an incident of domestic abuse from sources other than the child including the police and Children's Social Care. Whatever the source, practitioners should refer to the Knowsley Pathway for Children Affected by Domestic Abuse (link below) which has been endorsed by KSCB and illustrates at which point partner agencies should respond to information through intervention, assessment and onward referral to locally available sources as appropriate.
<https://www.knowsleyscb.org.uk/wp-content/uploads/2017/11/Pathway-Children-Affected-by-DV-November-2017.docx>
- Use the child's "words" Can you tell me a little bit more about when daddy hurt mummy last night?
- Ask the child if they have told anybody else about this and if so who and what was their response? Have they summoned help from the police? (this indicates high risk) - if yes record details on a Multi-Agency Referral Form (MARF) and submit to the Multi-Agency Safeguarding Hub (MASH)
- Do not press the child for answers
- Listen and believe what they say
- Explain that you need to make sure they are safe and will tell people that can help them stay safe (limits of confidentiality)
- Reassure children that the abuse is not their fault, and it is not their responsibility to stop it from happening
- Give Childline number 0800 1111
- Assess and attend to immediate safety issues of the child/ren, mother and practitioner. If the child is at immediate risk contact MASH
- What are their immediate fears and your concerns? Where is the abuser? Seek assistance if needed
- Establish if there are other children in the household. How many? Are there children under 7 or who have special needs?

Professionals should not press a child for answers. Instead:

- Listen and believe what the child says
- Reassure the children that the abuse is not their fault, and it is not their responsibility to stop it from happening
- Give several telephone numbers, including Childline, Merseyside Police and local domestic abuse services
- Explain the limits of confidentiality and your safeguarding responsibilities

For young people (16-17 years old):

- Use the adult questioning techniques and refer to domestic abuse specialist services
- Safety plan with young person
- Teenage pregnancy with domestic abuse is high risk. MARAC and Child Protection processes should be initiated
- While being a member of a BME group does not increase the risk of experiencing domestic abuse, practitioners should bear in mind that cultural differences and barriers such as language, faith and gender expectations may mean it is harder for vulnerable individuals to access supportive services when required. Information for practitioners on factors relevant to domestic abuse use within BME communities, provided by Barnardo's, can be found by following this link:

<https://www.knowsleyscb.org.uk/wp-content/uploads/2017/04/DARIM-BME-companion2-2-4.doc>

Domestic abuse framing question for children (under 16):

“We know that in many families, mums and dads have arguments and disagreements, does that ever happen in your family?”

To obtain accurate and reliable information from a child regarding a domestic abuse situation the language and questions must be appropriate for the child's age and developmental stage.

Support and interventions

Domestic Abuse Risk Indicator Matrix (DARIM)

When a disclosure has been made, or the existence of domestic abuse in a family has been uncovered and confirmed by other means, it is important to be able to respond constructively to the child and to signpost them to services or provide support to them directly.

In doing this it is important to bear in mind the impact this has had on the child and the risk domestic abuse might continue to pose. To support practitioners in doing this and to provide guidance on how the child and family's circumstances might be understood within the context of local Continuum of Need (Threshold) document, KSCB has endorsed the Domestic Abuse Risk Indicator Matrix (DARIM).

The DARIM is a nationally recognised tool, developed by Barnardo's, and adopted for use in Knowsley. It considers both the current and historic impact of DA upon a child and supports practitioners to identify the level of need a child's experience of DA may give rise to. It also indicates which services, from universal to specialist, statutory agencies such as Children's Social Care, may be best placed to respond to this need. It is available on the safeguarding board website and the Early Help Team is available to help colleagues familiarise themselves with it.

<https://www.knowsleyscb.org.uk/wp-content/uploads/2017/06/DARIM-2.pdf>

Listening Ear

Listening Ear is a Knowsley based organisation which specialises in group and individual counselling for children affected by issues including bereavement and domestic abuse. The service has been commissioned by KMBC to provide domestic abuse support to children until January 2019 and any service or organisation can refer children (aged 5-17) to benefit from this resource upon submission of a completed DARIM (see above).

<https://www.knowsleyinfo.co.uk/content/listening-ear>

Operation Encompass

Operation Encompass is a national and locally implemented initiative in which schools and health services are notified of children present at DA incidents when the police are called to respond. The information is shared by the next working day and this allows schools in particular to be aware of a child's circumstances and make allowances or provision for them as appropriate. This might involve checking the child and/or parent's welfare and supportive interventions including the use of the Expect Respect resource which provides plans for individual and class work to discuss appropriate relationships.

Schools and health services can also refer to Listening Ear in response to Operation Encompass notifications as described above.

http://knowsleyscb.proceduresonline.com/pdfs/op_encompass.pdf?zoom_highlight=operation+encompass

Safety Planning

Safety planning is a practical process that practitioners can use with anyone affected by domestic violence and abuse. It should be a core element of working in partnership with victims and other agencies, taking into account the outcomes of risk assessment and risk management. Safety planning involves more than assessing potential future risk; it can help create psychological safety, space to recover and freedom from fear. Other members of the household's responses to questions about what they do when there is violence or abuse should be considered in safety planning.

Risk assessments can assist safety planning and should aim to:

- help to understand the parent's fear and experiences as well as the fears of the young person
- use and build on existing positive coping strategies
- provide a safe physical space to recover
- link to the relevant assessment framework being used by the agency and provide a holistic approach to safety and well-being
- be part of a continuous process and ensure that safety planning links into the overall plan for the victim and is not completed as an isolated process
- ensure safety plans are tailored to the individual. A 'one size fits all' approach is ineffective and potentially

The Family First Service has developed some practical guidance and tools for working with children and families to develop safety plans and it is available on the link below:

<https://www.knowsleighb.org.uk/professionals/useful-resources/>

Adolescent to Parent Violence and Abuse (APVA)

Though not necessarily as a result of experiencing domestic abuse themselves some children are violent and abusive toward their parents. With younger children this might be addressed through parenting techniques and other forms of behaviour modification but adolescent to parent abuse is identified as a particular issue by the Home Office and to support agencies in responding to this it published APVA guidance for education, health, housing and other services in 2015/16.

It is recognised that APVA is a complex problem and the boundaries between 'victim' and 'perpetrator' can be unclear. The abuse is often (although not always)

contextualised within existing family problems and many 'perpetrators' of violence towards their parents are, or have been victims or secondary victims of domestic abuse or child abuse. It is often difficult to observe or assign labels of 'perpetrator' and 'victim' and there are numerous concerns about criminalising a young person for their behaviour, and the negative impact that this may have on their future life chances. Professionals working with children and young people and parents should seek to identify risk factors early and work together with the family to provide early support to avoid crisis situations.

Knowsley LSCB provides regular training on domestic abuse and other issues which is available to the range of partner agencies. Information on available training can be found by following the link below:

<https://www.knowsleighb.org.uk/course-calendar/>

If you have concerns that a child or young person may be at risk of significant harm, a MARF should be submitted.



Further information is available by following the link below:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/420963/APVA.pdf

