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What is Domestic Abuse?

Legislation:

Domestic Abuse Act 2021:

“Behaviour of a person towards another person is domestic abuse if... each are 16+ and personally contacted to each other, and the behaviour is abusive...”

Section 70: Non-fatal strangulation with up to 5 years imprisonment and/or a fine

Children are now viewed as victims of domestic abuse in their own right.

Physical Abuse:

Acts of physical violence assault onto another. Anything which causes physical bodily harm.

Including but not limited to:

- Hitting, biting, punching, slapping, stabbing
- Withholding medication or providing unnecessary medications
- Stopping someone gaining entry or exiting a property
- Coercing a partner into substance abuse

Financial Abuse:

The misuse or non-consensual use of someone's funds or possessions

- Total control over finances of the home
- Taking out credit cards or loans in someone else's name
- Intentionally misusing finances
- Controlling all spending
- Making sure all incoming finances goes into their name

Sexual Abuse:

Any type of sexual activity which takes place without a person's full and informed consent.

- Rape
- Forced penetration
- Forces to watch pornography
- Forced prostitution
- Revenge porn
- Filming sexual acts without consent
- Feeling duty to have sex
- Wearing someone down to get their consent

Emotional Abuse:

Non-physical acts meant to control, undermine, scare and implement fear onto a person

- Gaslighting
- Threatening
- Verbal abuse
- Humiliation
- Emotional extortion
- Degrading or demeaning
- Not letting someone express their thoughts and feelings

Coercive Control:

An act of patterns of acts, threats, humiliation and intimidation or other abuse that is used to harm, punish or frighten the victim

- Isolating from friends and family
- Enforcing rules
- Sexual coercion
- Controlling the individual's actions and communications
- Constant monitoring
- Controlling finances
- Depriving privacy

Personally connected' refers to two people who:

- Are or have been married to each other
- Are or have been in a civil partnership with each other
- Have agreed to marry one another
- Have entered a civil partnership agreement
- Are or have been in an intimate personal relationship with each other
- They each have or have had a parental relationship to the same child
- They are relatives

Domestic abuse and pregnancy

Domestic abuse can present in different ways during pregnancy. Some perpetrators will continue their abuse, whilst others escalate, and some change their type of abuse e.g. not using physical abuse as it is more likely to be identified by health professionals.

- 15% of women reported abuse during pregnancy
- 40-60% of women continue to experience abuse during pregnancy
- 14% of maternal deaths occur in women who have told their health professional they are in an abusive relationship
- Pregnancy is a high-risk factor of domestic abuse

Some perpetrators will use pregnancy to control their victim, this has been termed as reproductive control. This control can take many different forms for example; continuously getting their victim pregnant, or getting pregnant themselves, using the children to control their actions. Brining a baby into the relationship increases the dependency and can increase control.

The physical risk to the pregnant person increases when they are experiencing domestic abuse as they are more likely to have anaemia, hypertension and an increased need to be hospitalised.

When someone becomes pregnant a lot more professionals will become involved in the child's care as well as the family unit. Family are also more likely to become involved. The perpetrator will be living in fear that their sense of control will slip away, that they will no longer be able to control their victim.

The possible impact of domestic abuse on the unborn baby include:

- Low birth weight
- Premature birth
- Developmental delays
- Physical harm/injury
- Emotional harm
- Death

The impact of abuse on children

- 1 in 7 children and young people under the age of 18 experience domestic abuse
- Children who experience domestic abuse and violence from a parent do not always become perpetrators when they are older

Children are often the victims of abuse as well; they can be seen as 'collateral damage' during domestic homicides.

Children can be used to control the perpetrator both during the relationship and when the relationship ends. Perpetrators will often use the court systems to continue their abuse.

The possible effects of domestic violence on children are extensive, here are a few examples:

- Mental health issues
- E.g., Anxiety, Depression, PTSD
- Difficulty sleeping
- Nightmares/flashbacks
- Physical symptoms
 - E.g., Bed wetting, stomach pains
- Temper tantrums
- Educational problems
 - E.g., underachievement; concentration difficulties; early dropout
- Behaving much younger or older than they are
- Low self-worth
- Older children may self-harm or have substance mis-use issues
- Trauma responses

When referred to social services, support is offered to the victim and the children. Children are never immediately removed from the home and only will be as a last resort.

Children who experience domestic abuse are able to develop strategies to cope and manage their experience of violence and controlling behaviours. Having a good support system including family, friends and professionals' children are able to build resilience and recover well.

Domestic Abuse through an LGBTQIA+ Lens

Signs of an unhealthy relationship...

- **Manipulation**
 - Are they trying to control aspects of your life?
 - Playing on internalised homophobia
 - Pressuring you to do things you don't want to do
 - E.g., transitioning
 - Unwanted sexual activities
- **Isolation**
 - Are they keeping you away from family and friends?
 - E.g., "Your family won't want anything to do with you once you come out"
 - "They will never accept our relationship – its better if you stopped being involved with them"
- **Sabotage**
 - Purposefully ruining your reputation, achievement, success, happiness
 - Outing you resulting in you being fired, kicked out of your property etc
 - Taking away your hormones, binders, or other gender-affirming items
- **Intensity/ extreme commitment**
 - Have they pushed you into an unwanted commitment or a commitment you were not ready for?
 - Forcing you to be committed due to a lack of LGBTQ+ community
- **Possessiveness**
 - Are they jealous to a point of control?
 - Using your identity against you
 - E.g., "If I let you go out with her you'll end up cheating on me- its because you're into girls.
 - "You can only hang out with straight people"
- **Guilting**
 - Do they make you feel responsible for their actions?
 - Making you feel bad about their uncertainty with their identity, sexual orientation, or their family's reactions
 - E.g., "I'm only tracking your phone because I want to keep you safe"
 - "I only did it because I have been cheated on before by a bisexual partner.
- **Betrayal**
 - Are they acting in a way which is intentionally dishonest?
 - Outing you without your consent
 - Intentionally using incorrect pronouns and/or your dead name
- **Belittling**

Are they making you feel bad about yourself?

- Body shaming
 - E.g., “I preferred you pre-surgery”
- Making you feel bad about being born in the wrong body
- Making you feel bad for being LGBTQ+ and following a certain religion

Spotting signs of Domestic Abuse

Some physical factors will raise concerns as to the possibility of abuse and prompt further enquiry:

- The patient reports chronic pain, often without physical evidence
- Bruising may be present where the explanation does not fit with the description of the injury
- Repeated or serious injuries. Injuries that are left untreated and of several different ages.
- The patient minimises injuries or repeatedly gives the same explanation
- The patient exhibits physical symptoms related to stress, other anxiety disorders or depression, such as panic attacks, feelings of isolation and inability to cope, suicide attempts or self-harm
- There is frequent use of prescribed tranquilisers, anti-depressants or pain medication
- There are gynaecological problems such as infections and pelvic pain
- There is evidence of sexual assault
- Dental emergencies and instances of head injuries
- There is evidence of alcohol problems or substance misuse

Certain behavioural patterns may indicate the presence of abuse:

- Missed appointments or not complying with treatment
- Frequent admissions for relatively minor complaints, such as backache or headache
- The patient appears unable to communicate independently. The perpetrator may always accompany the patient, and insist on staying close and answering all questions directed to the patient
- The perpetrator may undermine, mock or belittle the patient. The patient may appear frightened, ashamed, evasive, embarrassed or be reluctant to speak or disagree in front of the perpetrator
- The patient reports, or the perpetrator expresses, intense irrational jealousy or possessiveness, or they may appear overly concerned.
- The patient or the perpetrator denies or minimises abuse. The patient exhibits an exaggerated sense of personal responsibility for the relationship, including self-blame for the perpetrator's violence.
- The perpetrator requesting to have access to health advice/information/prescriptions on patient's behalf

Non-Fatal Strangulation

Strangulation is *external pressure* to the neck by any means that impedes airflow, blood flow or both. Bruises only occur in strangulation cases approximately 50% of cases, the absence of bruises does not equal an absence of internal injury.

Many perpetrators of domestic violence use strangulation and suffocation to silence their victims, to gain control, torture, and/or to kill them. The risk of death when there has been non-fatal strangulation increases by 7%.

After experiencing non-fatal strangulation, some may say they are alright and look it however there may be internal injury and/or delayed issues. Victims of repeat strangulation reported neck and throat injuries, neurological disorders, and psychological disorders with increased frequency.

If someone has experienced non-fatal strangulation, they need to stay with someone reliable for at least 24 hours after the event.

Long-term effects:

- Physical effects
 - E.g., limb weakness; movement/balance/co-ordination issues; tremors
- Visual disorders
 - E.g., cortical blindness; blind spot
- Memory problems
- Speech and language
 - E.g., articulation of speech; understanding language
- Executive dysfunction
 - E.g., ability to think and reason, to synthesize and integrate complex information and make considered judgements and decisions about what to do in a particular situation
- Emotional and behavioural changes
- Hormonal imbalance

Stalking and Harassment

Harassment includes the repeated acts to impose unwanted communications and contact towards a victim in a manner which can cause distress or fear in any reasonable person. Stalking is the repeated acts of harassment.

Stalking is mainly perpetrated by a person known to the victim and leaves a person feeling fearful and scared all the time, unable to trust other, and worried about going out. Approximately 50% of stalking cases are short term, those that last longer than 2 weeks become ingrained behaviour and harder to stop.

FOUR signs of stalking:

- F** - Fixated
O - Obsessive
U - Unwanted
R - Repeated

Examples of stalking behaviours:

- Sending unwanted gifts, flowers, cards, letters and texts, continuing after being asked to stop.
- Somebody not talking no for an answer
- Befriending friends/family in order to attend social events
- Frequent attendances at your house; work; children's school
- Cyberstalking
 - E.g., Constantly contacting you online sometime with different profiles
 - Using your images and information to make false accounts
 - Hacking your accounts and restricting your access
 - Hacking into your smart devices from third party apps
 - Using location trackers to monitor you
 - Receiving direct threats via social media
- Breaking into your house to steal personal items

Stalking is not always obvious, and it can take 100 instances before someone reports stalking.

Effects of Domestic Abuse

**This is not an exhaustive list and will not be the same for everyone*

Physical:

- Chronic injuries
- Long-term physical disabilities
- Complications during pregnancy
- Internal injuries due to sexual trauma
- Substance misuse
- Difficulties sleeping

Social:

- Isolation/social withdrawal
- Distancing from family (family blaming themselves)
- Ruined friendships
- Difficulties carrying out daily activities
- Potential need to move to a new area
- Homelessness

Economical:

- Profound debts owed
- Lack of access to funds
- Lack of understanding of how to manage own finances
- Difficulty gaining employment
- Loss of job
- Poverty

Mental Health:

- Diagnosis of mental health condition
- Anxiety
- Depression
- Post-traumatic stress
- Self-harm, suicidal thoughts

Trauma

Trauma is a lasting physically and/or emotional response from living through distressing event or events. Trauma is an individual experience and impacts one person differently from another.

Three types of traumas:

- Acute Trauma =
 - A single incident
- Chronic Trauma =
 - Repeated and prolonged experience
 - This also includes historical trauma
- Complex Trauma =
 - Experiences of varied and invasive events

Ways trauma may present (this is not an exhaustive list)

- Extreme bursts of anger
- Alcohol or substance misuse
- Dissociation
- Hallucinations
- Panic Attacks
- Flashbacks
- Self-harm or suicidal thoughts
- Hyperarousal
- Difficulties performing routine activities
- Not trusting professions or people who share characteristics with the perpetrator
- Children acting out event in play

Trauma can also make you more vulnerable to developing physical health problems including long-term or chronic illnesses.

Trauma responses vs coping mechanisms:

Trauma responses and coping mechanisms are important. They mean something different to everyone, not everyone will have one type of trauma response. Coping mechanisms serve a purpose to the individual whether they are healthy or unhealth. Whereas trauma responses are our bodies way of warning us of potential dangers

Remember experiences of trauma do not excuse behaviour. They should however impact the way you respond to people.

How to talk to someone about Domestic Abuse

What not to do:

- Do not apologise for asking the questions, or say “this is a difficult conversation”, it can put blame and feelings of guilt onto the victim
- Do not victim blame
 - E.g., “what did you do to make him mad”
 - “Why don’t you just leave?”
- Don’t not ask because it makes you uncomfortable
- Do not ignore clear signs or what the patient is saying

What to do:

- Believe and listen to them
- Validate their experiences
- Be patient with them
- Understand that they might not be ready to share their experience
- Give them information about specialist services and help them to access the right support

The right questions:

- “Has somebody caused your injuries?”
- “Is your home life suitable for a full recovery?”
- “Is there anyone you are afraid of at home?”
- “Is there something upsetting you that you wish to stop?”
- “What are the consequences of [action]”
- “What is lifelike for you at home?”
- “What does a typical day look like for you?”

How to get support

If you work in UHD hospitals, please contact your Domestic Abuse Health Advocate (DVHA). The DVHA will be able to discuss your experiences either signpost you to recovery agencies, if historical abuse, or provided longer practical and emotional support to support you with your current experience.

If you are referring a patient via UHD, please complete a DASH RIC found in the e-forms portal under “Domestic Abuse tool and referral form”. The DASH is to be completed in a private space with the victim only. If the individual has care and support needs you can also complete a “Cause for Concern”, also found on the e-forms portal.

Alternatively, you can contact your DVHA via email or phone. All relevant details are found on the intranet under safeguarding.

<https://intranet.uhd.nhs.uk/index.php/safeguarding/domestic-abuse>

Signposting

Paragon (Dorset): Outreach; refuge; counselling; support groups (0800 032 5204
ParagonDorset@theyoutrust.org.uk)

BCHA (BCP): Outreach; refuge; and support groups (01202 710 777
abusesupport@BCHA.org.uk)

Karma Nirvana: Supporting victims of honour-based violence and forced marriage (0800 5999 247)

Mankind: Supporting male victim of domestic abuse (01823 334 244)

National Centre of Domestic Violence: Support obtaining civil orders (0800 970 2070)

Vesta: Supporting Polish families nationally (07575075093)

The Shores: Sexual Assault Centre (01202 552 056)

Stars Dorset; Supporting survivor of sexual assault (01202 308 855)

Galop: Supporting LGBTQ+ individuals nationally (0800 999 5428)

The Halo Project: Supporting victims of honour-based violence, forced marriage and female genital mutilation (0808 187 8424)

Hersana: National domestic abuse support for black femmes (0333 016 9610)

Refuge: National domestic abuse helpline (0808 2000 247)

Citizens Advice: (0800 144 8848)

Frequently asked questions

How common is domestic abuse?

According to Refuge.org.uk approximately 1 in 4 women in the UK will experience domestic abuse in her lifetime.

What causes domestic abuse?

Domestic abuse is a power imbalance, caused when one party misuse their power over their partner. Perpetrators of abuse have a choice, they choice to do whatever they can to gain control over their victim

Who does domestic abuse effect?

Anyone can experience domestic abuse, regardless of their age, gender identity, religion, sexual orientation, ethnicity, income or disability.

Why don't they leave?

Leaving an abusive relationship is a long and difficult process which takes a lot of planning to be done safely. People who experience domestic abuse know this and live in fear of the consequences.

Why do they keep picking abusive partners?

Perpetrators of abuse are the ones who choose their victim, from very early on they will be able to identify if they can make someone their victim. Perpetrates of domestic abuse do not show their abusive behaviours early in a relationship, they will test their partner to see how much control they can gain. Slowly over time victims will become acclimatised to the abusive behaviours.

Glossary:

Domestic Abuse: “A patterns of behaviours in any relationship that is used to gain or maintain power and control...”

Gaslighting: A type of psychological abuse in which the abuser denies the victims realist. Enabling the abuse to sow seeds of doubt which make the victim question their own memory, perception and sanity. This is not the same a lying.

Love bombing: An attempt to influence or manipulate a person by showing attention and affection. This has been identified as a tactic used within the cycle of abuse. E.g. buying expensive plan tickets and not allowing the person to deny the trip.

LGBTQIA+: An abbreviation for lesbian, gay, bisexual, transgender, queer or questioning, intersex, asexual and more.

Non-fatal strangulation: The obstruction of compression of blood vessels and/or airways by external pressure to the neck impending normal breathing or circulation of the blood.

Perpetrator: A person who carries out a harmful, illegal or immoral act.

Personally connected: intimate partners, ex-partners, family members or individual who are responsibility for a child

Suffocation: Obstruction of airflow to and from the lungs making it difficult to breathe.

Trauma: The lasting emotional response that often results from living through a distressing event.