

# DOMESTIC ABUSE IN HEREFORDSHIRE 2021

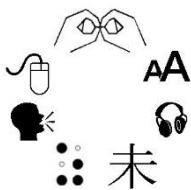
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Herefordshire Council Intelligence Unit

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# Key findings

- Domestic abuse is a hidden crime – most victims are not reporting the abuse and therefore not accessing help or support
- There is sometimes a misconceived view of what a victim of domestic abuse should look like - those who do not fit this stereotype may not be identified as a victim and ultimately denied support
- Support is not being offered to most victims of domestic abuse - only 38% of the victims and survivors in West Mercia surveyed in 2020 were offered any form of support
- Data recording by agencies is often limited or incomplete – there is not a complete picture of the victims they are supporting

# Introduction

This report applies the latest intelligence on domestic abuse (DA) in Herefordshire gathered from the Crime Survey for England and Wales (CSEW), West Mercia Police, West Mercia Women's Aid (WMWA), Multi Agency Risk Assessment Conference (MARAC), independent domestic violence advisors (IDVA), health data, housing data and social care data.

Data from the different sources do not necessarily relate to the same victims, although there will be some overlap.

As per the Domestic Abuse Act 2021, behaviour of a person ("A") towards another person ("B") is "domestic abuse" if—

A and B are each aged 16 or over and are personally connected to each other, and the behaviour is abusive.

'Abusive behaviour' is defined as any of the following:

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

Two people are "personally connected" to each other if any of the following applies:

- a. they are, or have been, married to each other;
- b. they are, or have been, civil partners of each other;
- c. they have agreed to marry one another (whether or not the agreement has been terminated);
- d. they have entered into a civil partnership agreement (whether or not the agreement has been terminated);
- e. they are, or have been, in an intimate personal relationship with each other;

- f. they each have, or there has been a time when they each have had, a parental relationship in relation to the same child
- g. they are relatives.

## CSEW and estimated prevalence

Domestic abuse is often a hidden crime that is not reported to the police and therefore, data held by the police can only provide a partial picture of the actual level of domestic abuse experienced. A recent report by the West Mercia Police and Crime Commissioner (Senker & Scott, 2020) found that only 33% of the victims and survivors interviewed reported DA to the police.

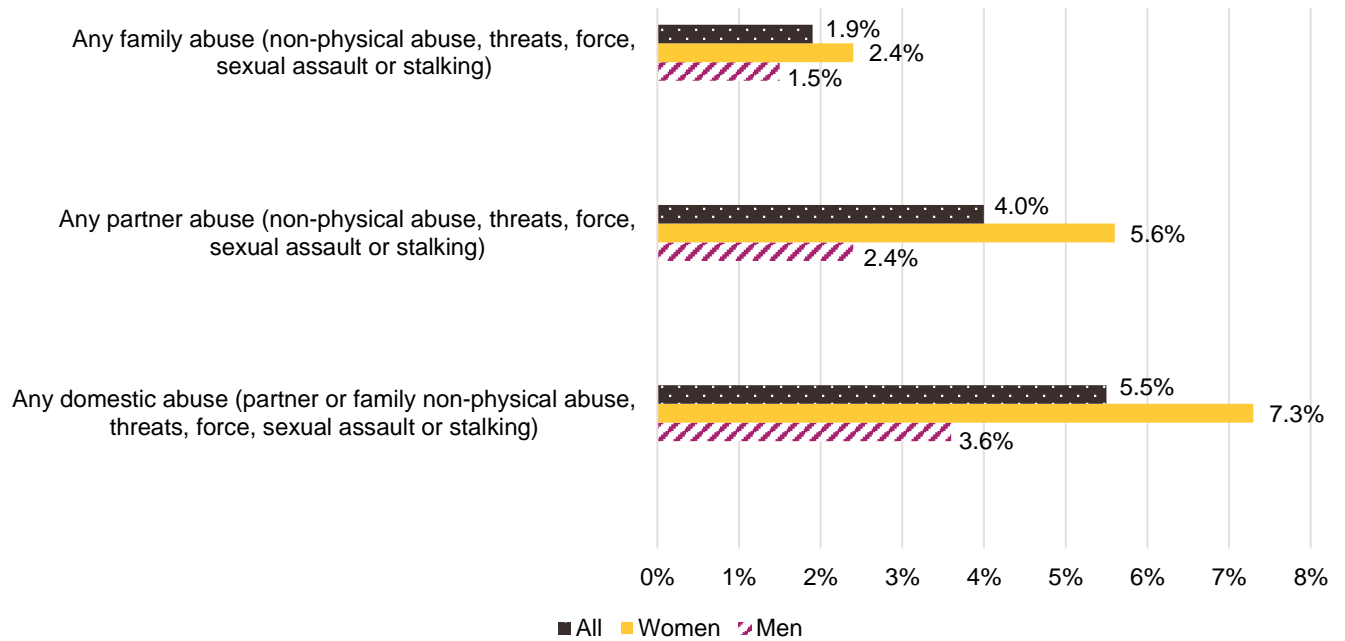
The Crime Survey of England and Wales (CSEW) is the preferred measure to identify trends in the prevalence of domestic abuse as it is unaffected by changes in police activity, recording practice, or inclination of victims to report such crimes. Experiences of DA are sought in a self-completion section on intimate violence which is asked of adults aged 16 to 74 years, covering experience of emotional, financial and physical abuse by partners (including former partners) or family members, as well as sexual assaults and stalking. It is important to note that CSEW does not survey people who live in institutions, including care homes, so it cannot offer insight into people who live in these type of settings.

Due to the Covid-19 pandemic there was a move from face-to-face data collection to interviews over the telephone. Concerns around confidentiality and respondent safeguarding has limited the number of questions relating to DA being routinely asked since this move in March 2020. Subsequently, the latest available data relates to the year ending March 2020. CSEW estimates for the year ending March 2020 are based on face-to-face interviews with 33,735 people aged 16-74. It will be this data that will be used and discussed in this report.

Figures 1-7 show the prevalence of DA by different characteristics.

As can be seen Figure 1, an estimated 7.3% of women and 3.6% of men aged 16-74 were victims of DA in the year ending March 2020, this is equal to 4,900 women and 2,400 men in Herefordshire. The majority of DA is between partners, with 4% of adults having experienced this type of abuse, and 1.9% of adults experiencing abuse from family members. Women are also most likely to be victims of all types of DA, although the difference in prevalence between men and women suffering family abuse is much smaller than the difference in prevalence between men and women suffering partner abuse.

## Women are most likely to be the victims of all types of domestic abuse



*Figure 1 Prevalence of DA by sex and abuse type for year ending March 2020*

Figure 2 shows that the prevalence of DA has remained largely stable since 2009, but there has been a slight fall in the number of female DA victims during this time period.

Prevalence of DA has remained steady but there is a slight downward trend in numbers for men and women

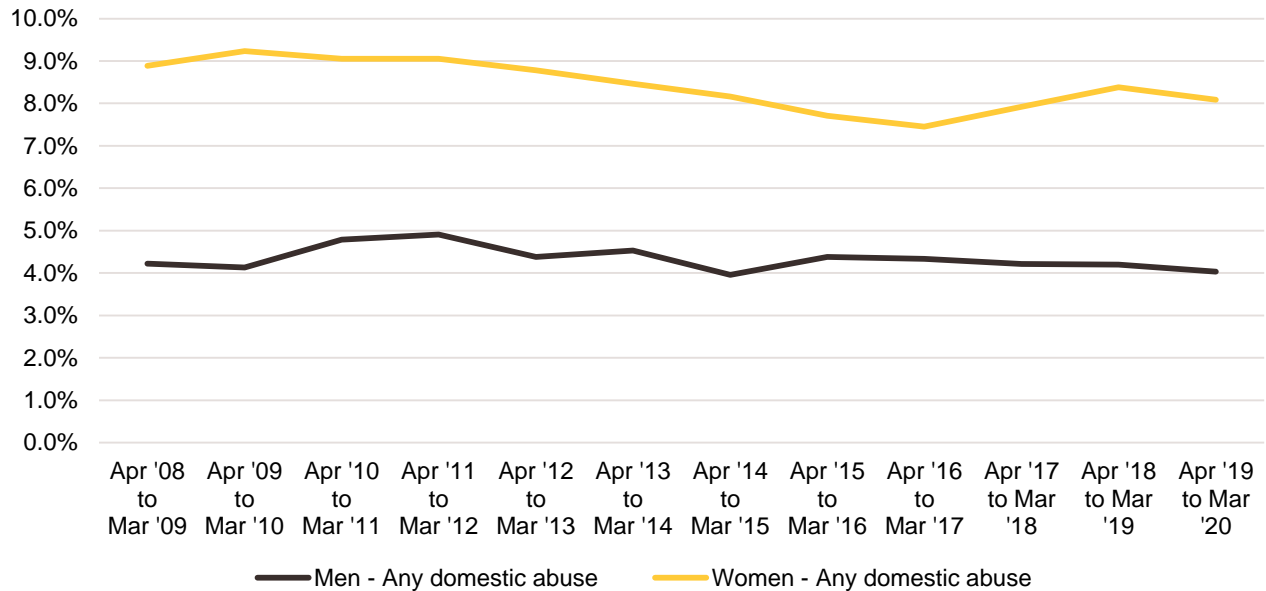


Figure 2 Prevalence of all DA from year ending 2009 to 2020 by sex

Figure 3 shows that victims of DA are more likely to be younger and that prevalence rates largely decreases through the age groups. There is also a larger proportion of women suffering from family abuse in the youngest two age brackets, which may be related to younger people being likely to still be living at the family home. In addition, Figure 4 shows how the prevalence rates changed between March 2019 to March 2020 across the age groups, and suggests that the largest increases in prevalence is amongst the 16-19 and 55+ age groups. Due to the way CSEW recorded DA before 2019, it is not possible to look at any longer term trends.

### DA is most prevalent in 16-19 year olds and prevalence largely decreases through the age groups

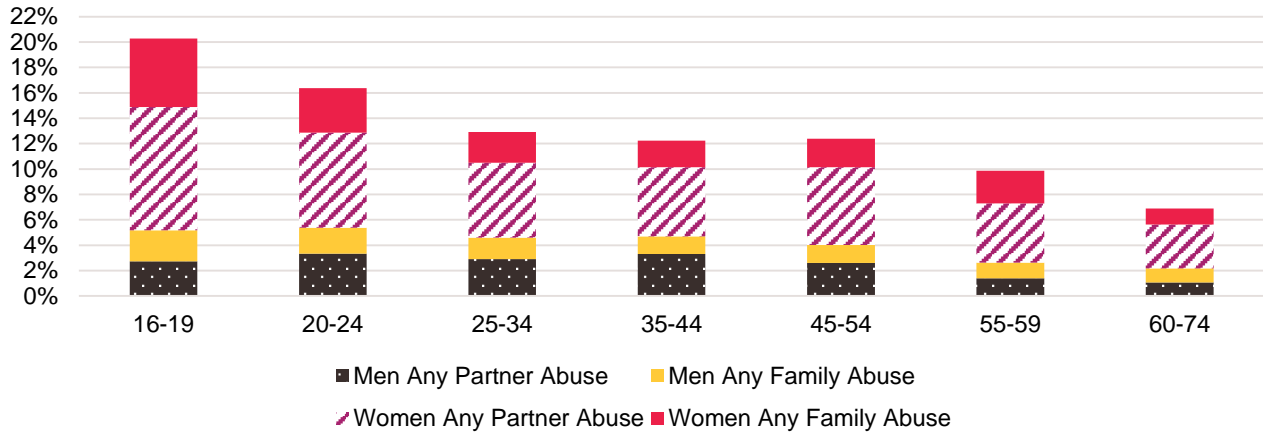


Figure 3 Prevalence of DA across age groups for year ending March 2020

### The largest increase in prevalence has been for women aged 16-19

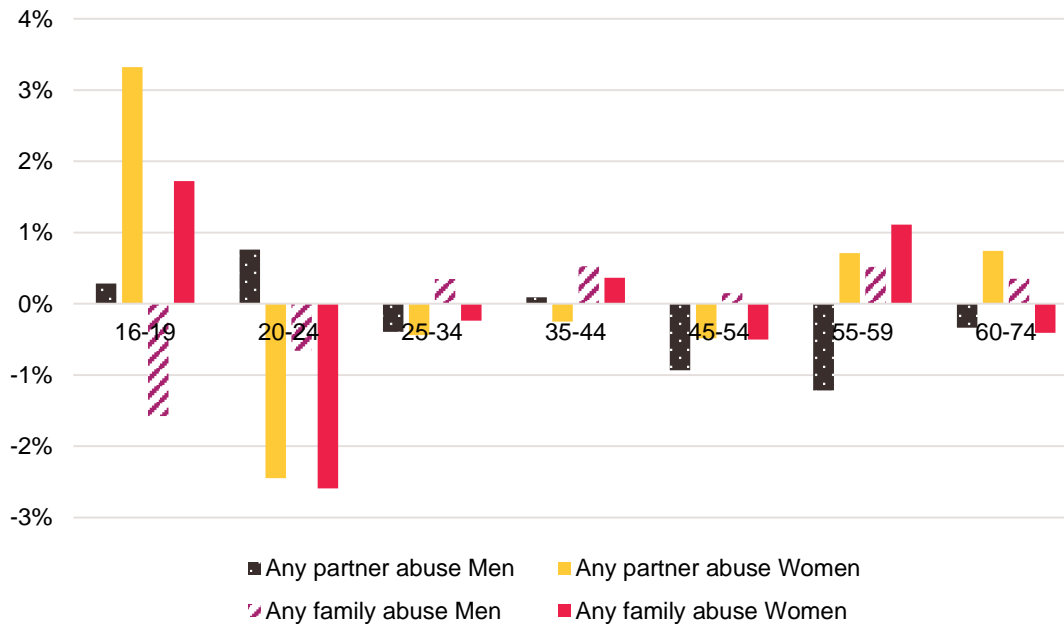


Figure 4 The percentage change in DA prevalence recorded by CSEW from March 2019 to March 2020 by age group

Figure 5 shows that the ethnicity with the highest level of DA prevalence is Mixed-White and Black Caribbean and that it appears to be only women within this ethnicity that are victims of domestic abuse. Also of particular note, is that when looking at the results for Mixed – White and Asian, only men reported being victims of DA, this goes against the general trend of DA prevalence, so more investigation and support may be required to understand why this is the case.

It is important to note that only 6.4% of Herefordshire are BAME, compared to 19.5% for the whole of England, so it is expected that there will be fewer BAME victims in Herefordshire than you might see nationally. Additionally, the largest minority ethnic group in Herefordshire is “White: Other” with only 1.8% of the population recorded as “Not White”.

### DA is most prevalent in Mixed -White and Black Caribbean ethnic groups

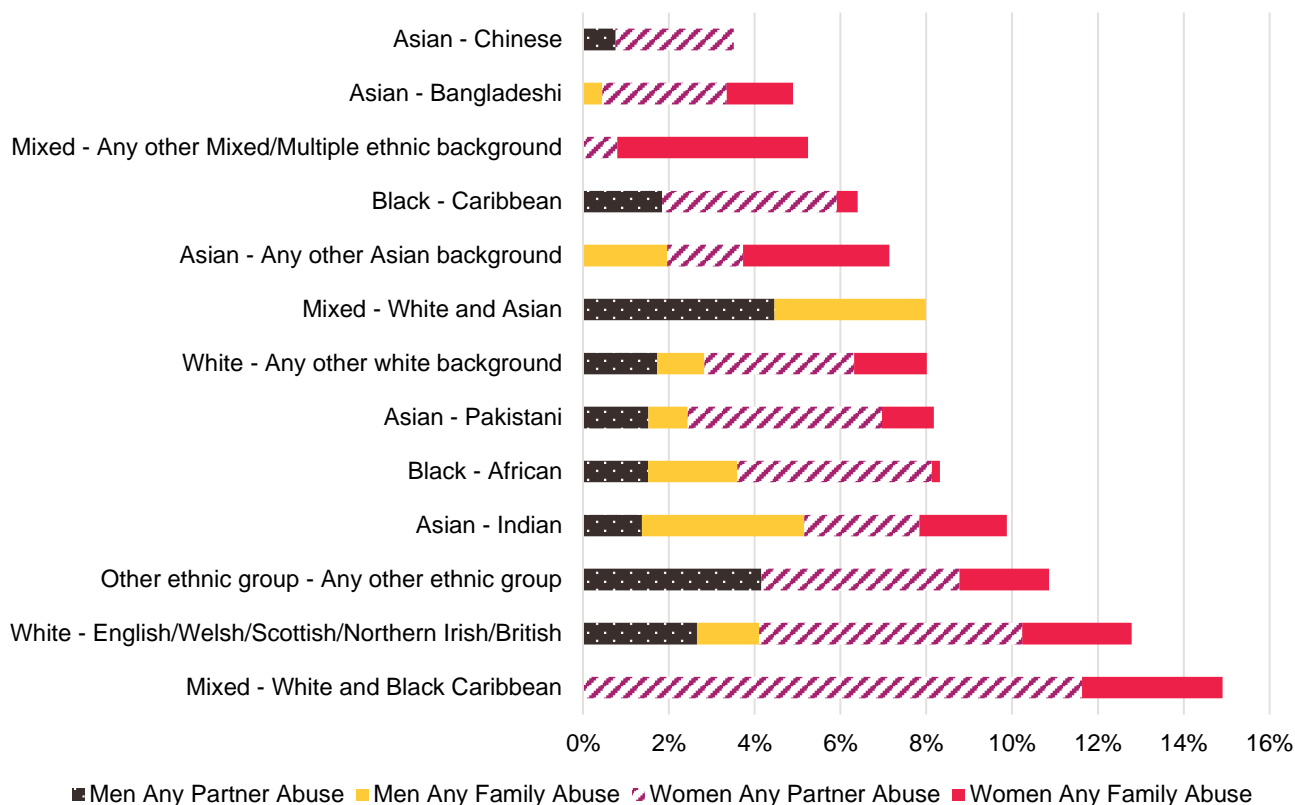


Figure 5 DA prevalence by ethnicity for year ending March 2020

Figure 6 shows that people with a disability are more likely to be victims of DA than those without a disability, and a study by SafeLives (2017) found that DA against disabled people is often more severe and frequent and over longer periods of time than for non-disabled victims. There are numerous factors as to why this is the case, including support being inaccessible, stereotypes of what a victim or perpetrator looks like and that the perpetrator may also be the victim’s carer and hold a position of power over the victim.



## Somebody with a disability is more likely to be a victim of DA than somebody who is not disabled

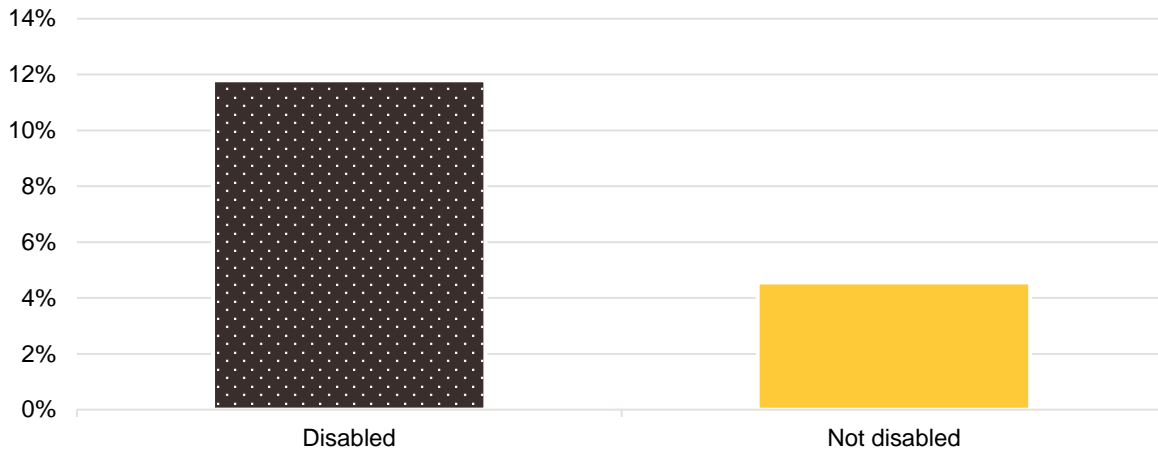


Figure 6 DA prevalence by disability status for year ending March 2020

Figure 7 shows that LGBT people are more likely to be victims of DA than their heterosexual counterparts, with bisexuals reporting the most abuse of all sexual orientations. Galop highlights that there are numerous myths and misconceptions regarding DA and the LGBTQ+ community which can make it more difficult for these individuals to seek help and be recognised as victims, such as thinking that women do not perpetrate abuse or that gay men can more easily protect themselves.

## Bisexuals are most likely to be the victims of DA than any other sexual orientation

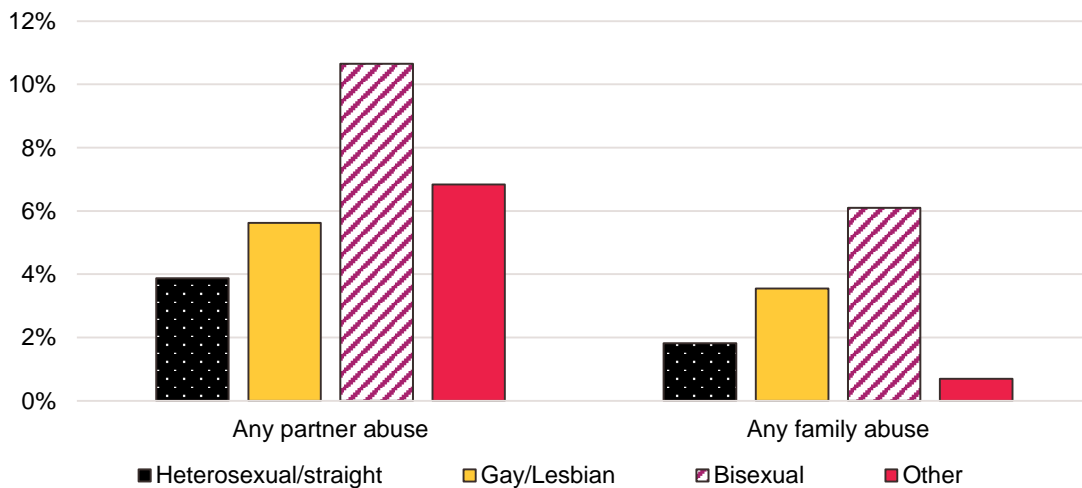


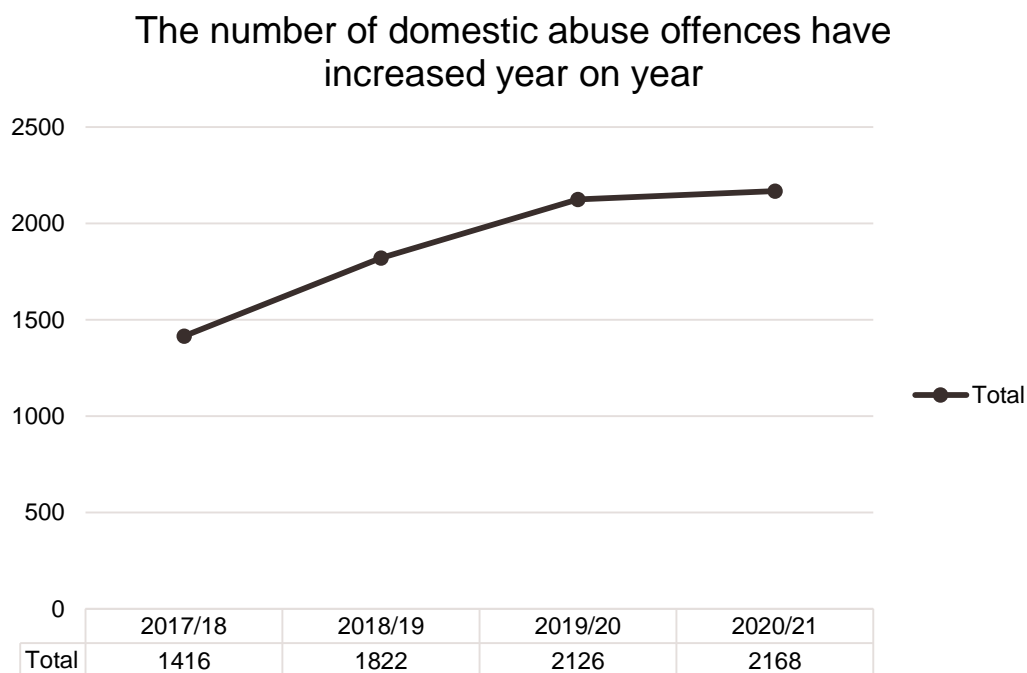
Figure 7 DA Prevalence by sexual orientation for year ending March 2020

# West Mercia Police Data

The following data was provided by West Mercia Police in April 2021 and covers offences recorded in Herefordshire that had a DA “flag”. Since April 2015, crimes should be “flagged” as being domestic abuse-related by the police if the offence meets the government definition of domestic violence and abuse.

Figure 8 shows that there has been a year on year increase in the number of DA offences reported in Herefordshire by West Mercia Police. As prevalence recorded by CSEW does not show the same trend, it suggests that there is not an increase in DA within the county, but that people are increasingly reporting offences to the police or the police have improved their reporting of DA.

However, despite this increase in reporting, there has been a decrease in charges/summons and an increase of victims not supporting police action, as can be seen in Figure 9. A full list of outcomes of DA offences can be found in Table 2. It is not clear from the data why this is the case, and a 2019 report by Her Majesty's Inspectorate of Constabulary and Fire & Rescue Services suggested that police forces need to collect feedback to establish why victims do not support action in order to address potential issues/concerns and better support victims.



*Figure 8 Number of DA offences recorded by West Mercia Police by year in Herefordshire*

## Most offences resulted in the victim not supporting police action

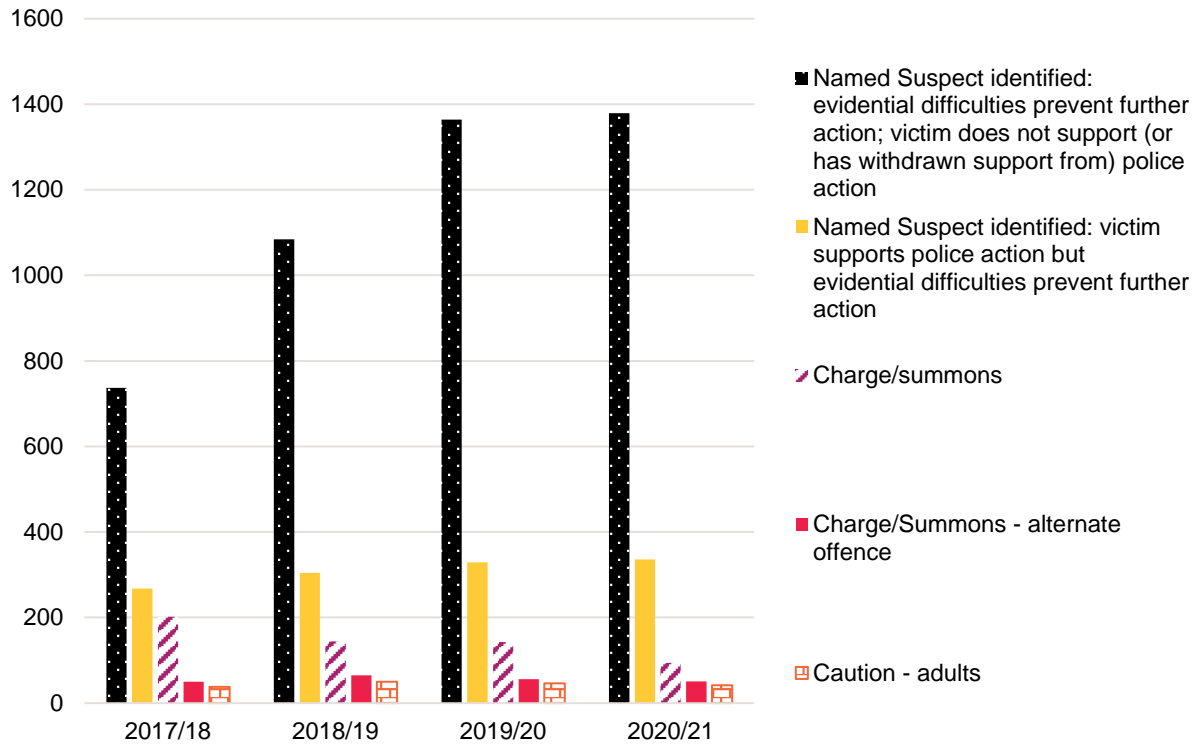


Figure 9 Five most common outcomes of offences recorded by West Mercia Police in Herefordshire

Figure 10 shows the number of DA victims in Herefordshire recorded by West Mercia Police by year and sex. Based on the estimated prevalence in Herefordshire, this only accounts for 20-30% of expected female victims, and 14-25% of expected male victims. This supports what is already known, and that DA is often a hidden crime which is underreported.

~71% of recorded victims were women

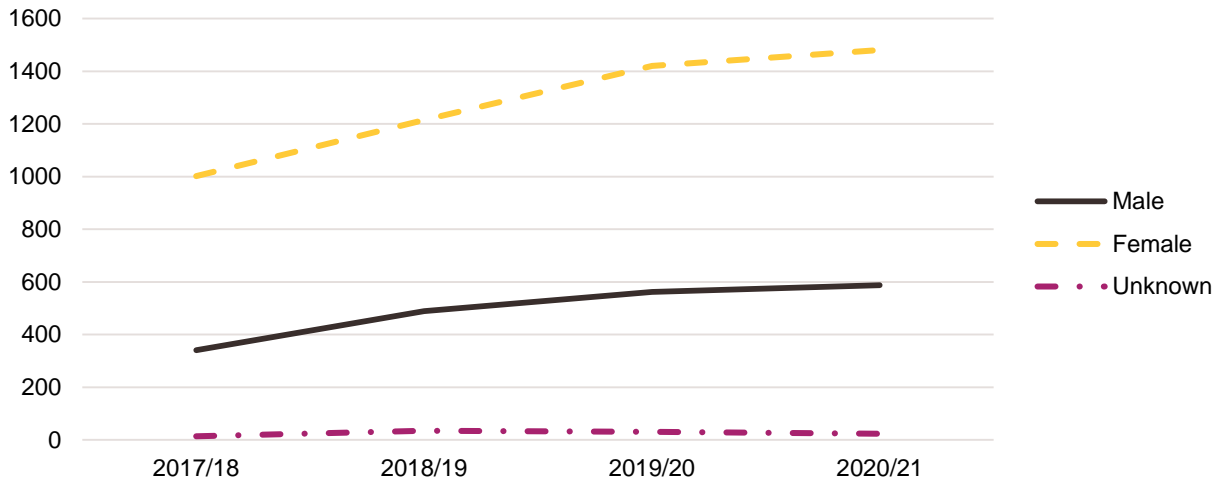


Figure 10 Number of DA offences recorded by West Mercia Police by year and sex in Herefordshire

Most suspects, victims and witnesses were aged 25-34

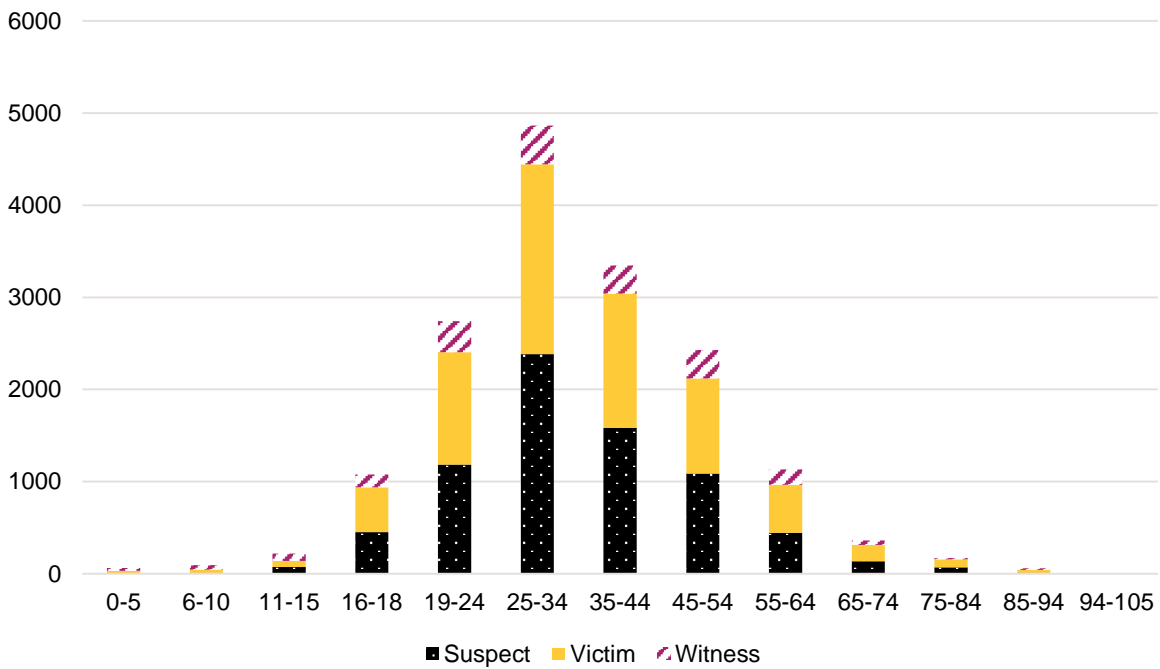


Figure 11 Number of DA suspects, victims and witnesses recorded by West Mercia Police by age group between 2017/18 to 2020/21 in Herefordshire

Figure 11 shows that most suspects, victims and witnesses recorded for DA offences were aged 23-34. The youngest victims recorded where 0 years old, and the eldest victim was aged 96 which shows that people of all ages are at risk of being a victim of DA. The youngest suspect of DA was 6 years old and the oldest suspects were 96 which again shows that DA can be perpetrated across the life course.

Figure 12 shows the ethnic appearance of DA victims recorded by West Mercia Police from March 2017 to March 2021, and shows that most victims were recorded as being White – North European. This is an unusual way of recording ethnicity as it relies on officers determining a victim’s ethnic appearance, and White – North European would encompass those who are White-British, who make up the majority of Herefordshire’s population, but would also include other White minority groups. There is also a large number of victims who have no ethnic appearance recorded, so this data is very limited in what it can tell us about the victims and it is difficult to make any conclusions.

98% of recorded victims were "White North European" or "Unknown"

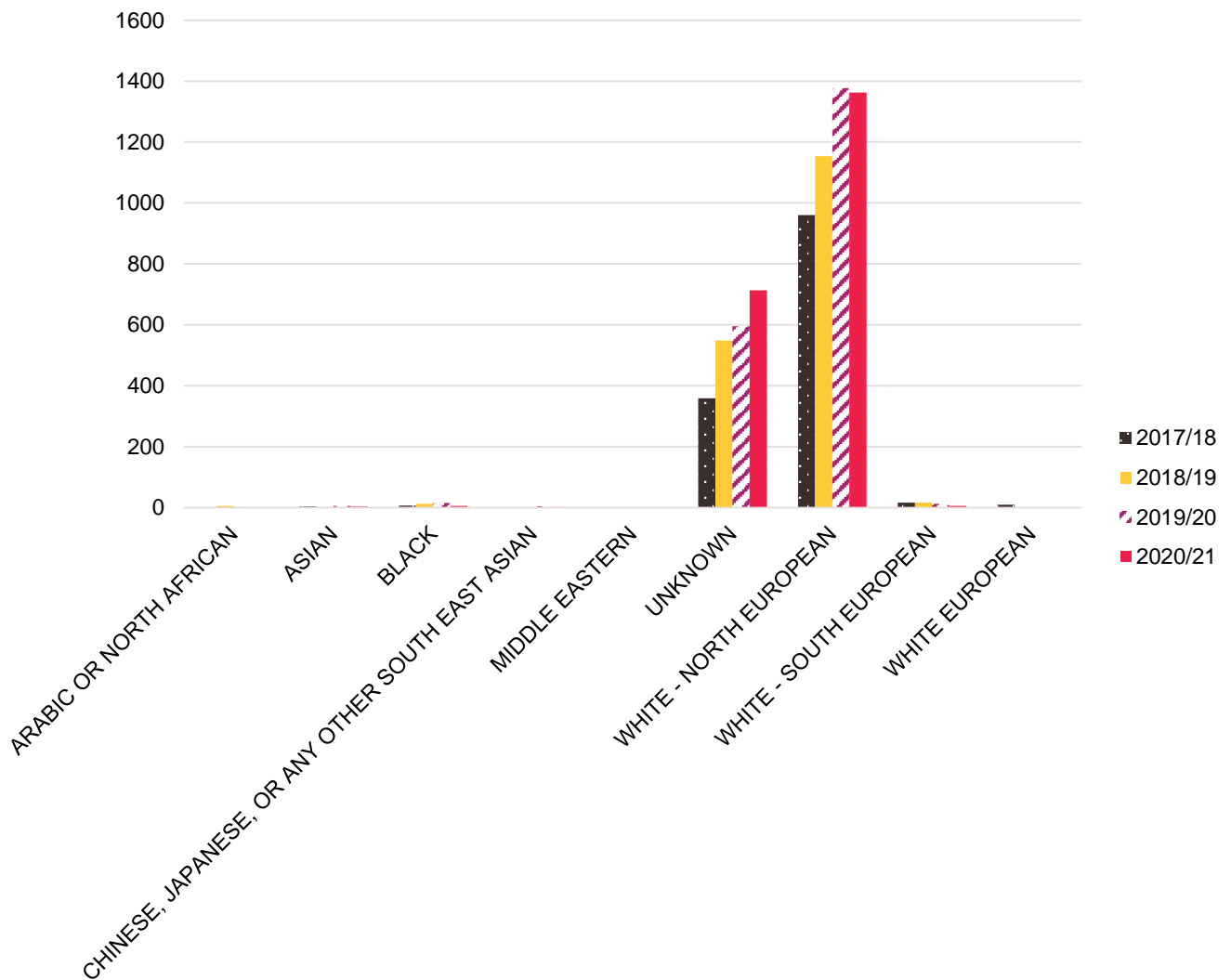


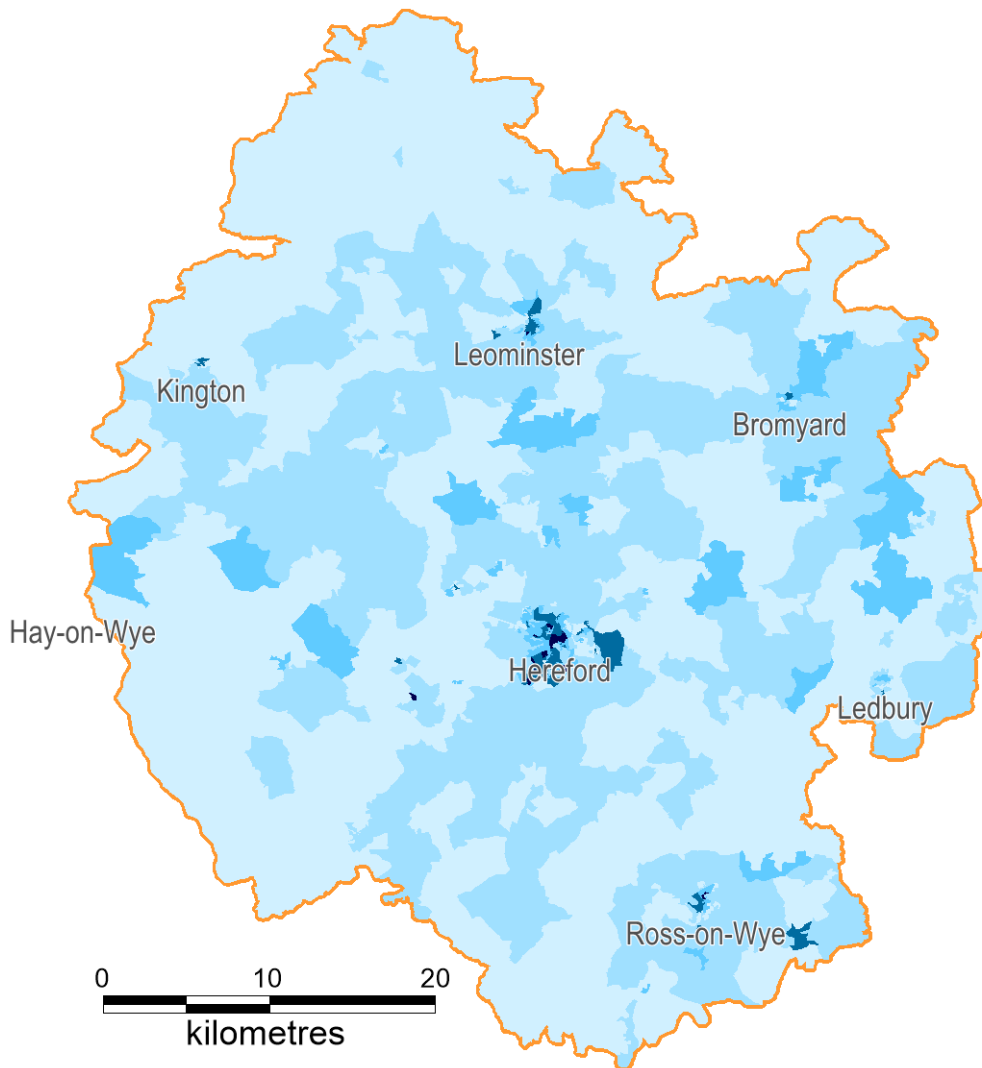
Figure 12 Number of DA offences recorded by West Mercia Police by year and ethnic appearance in Herefordshire

As can be seen in Table 1, almost two-thirds of victims were only seen by the police on one occasion between 2017-2021, but one individual was seen 28 times during the same time period. The data does not tell us whether the people who were only seen on one occasion by the police

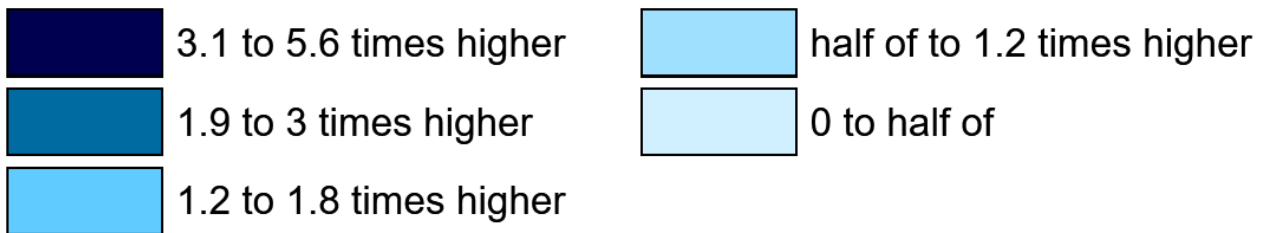
did not experience any further DA or whether they decided not to contact the police in future, and if so, for what reason. A recent report by the West Mercia Police and Crime Commissioner (Senker & Scott, 2020) found that only 39% of people who had reported DA to the police thought the response was good, with 31% thinking it was okay and 30% thinking the response was poor. Furthermore, only 52% of people who had reported DA to the police said they would report any future incident in the future. The variability in responses by the police was also highlighted in this report, which suggests that there is room for improvement for how the police in West Mercia work with DA victims and survivors, particularly in offering a consistently good service to all victims.

*Table 1 Number of incidents West Mercia Police were called to each victim by year*

<b>Number of offences police are called to for same victim</b>	<b>2017/18</b>	<b>2018/19</b>	<b>2019/20</b>	<b>2020/21</b>	<b>Grand Total</b>
1	918	1024	1020	1014	2928
2	133	198	262	261	774
3	30	50	71	77	282
4	9	18	30	34	137
5	4	7	11	14	87
6	2	6	7	7	34
7	1	1	3	5	26
8	1	1	1	2	14
9	0	0	0	0	11
10	0	0	1	1	4
11	0	1	0	0	4
12	0	0	0	0	2
13	0	0	0	0	1
14	0	0	0	0	0
15	0	0	0	0	0
16	0	0	0	0	5
17	0	0	0	1	2
18	0	0	0	0	1
19	0	0	0	0	1
20	0	0	0	0	0
21	0	0	0	0	0
22	0	0	0	0	0
23	0	0	0	0	0
24	0	0	0	0	0
25	0	0	0	0	0
26	0	0	0	0	0
27	0	0	0	0	0
28	0	0	0	0	1
<b>Total</b>	<b>1098</b>	<b>1306</b>	<b>1406</b>	<b>1416</b>	<b>4314</b>



**Amount higher or lower than the average county rate**



*Figure 13 Map of DA incidences and offences in Herefordshire showing prevalence vs county average*

Figure 13 Map of DA incidences and offences in Herefordshire showing prevalence vs county average shows levels of police reported incidents/offences around Herefordshire compared with the county as a whole. Levels are defined by the proportion of addresses within an Output Area (OAs) where a police reported incident or offence has been committed, between April 2017 and March 2021. The majority (70%) of OAs with levels that are twice or more than the average for Herefordshire are located in Hereford city; followed by around 15% in Leominster and 6% in Ross-on-Wye. The remainder are dotted randomly around the county.

The highest levels in the city are located in the centre, Courtyard and areas in South Wye. Other areas notable for having relatively high levels of reported DA incidents/offences include an area within Kingstone village, the John Kyrle area of Ross-on-Wye and the Gateway area in Leominster.

## Homicide

During the period between 2017/18 to 2020/21, there were 4 homicides recorded where DA was a factor in Herefordshire. There was no record of the police visiting the victims or suspects previous to any of the homicides, which may suggest that there wasn't a history of DA between the parties and that the situation escalated very quickly, or that despite a history of DA the police were not contacted in the past.

Table 1 Three of the four homicides were committed by an adult child against their mother. Whilst these numbers are too small to denote anything significant, it does however highlight that despite DA being most prevalent between partners, the danger and importance of abuse amongst family members cannot be overlooked.

Comparative data on domestic homicide is recorded by police force area, so the following data is for the whole West Mercia police force area, which includes Herefordshire and 3 additional local authorities: Worcestershire, Shropshire and Telford and Wrekin.

As can be seen in

### West Mercia had the second highest number of domestic homicides between March 2016 to March 2019 compared to similar Police forces

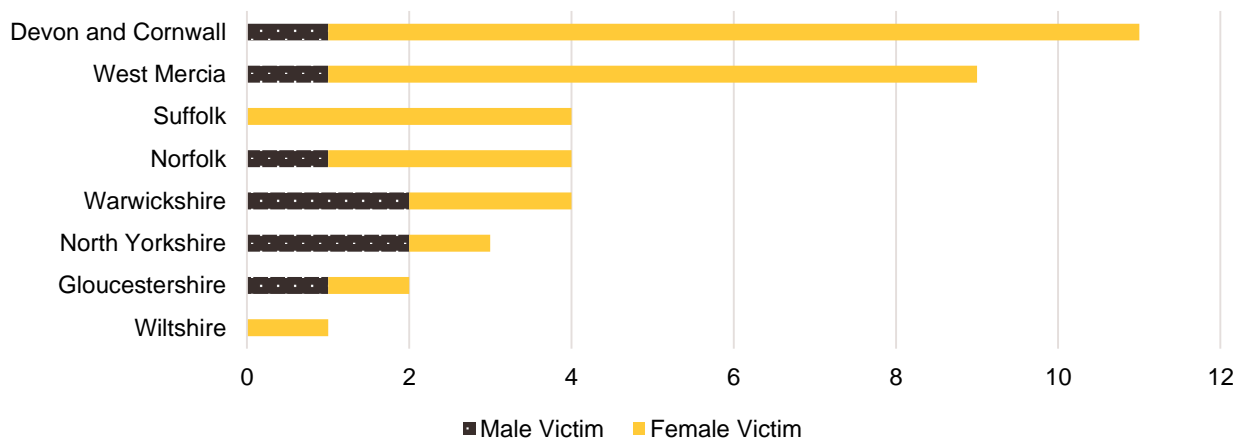


Figure 14, when compared with similar police force areas, West Mercia had the second highest number of domestic homicides reported, with only Devon and Cornwall recording a higher rate.



## West Mercia had the second highest number of domestic homicides between March 2016 to March 2019 compared to similar Police forces

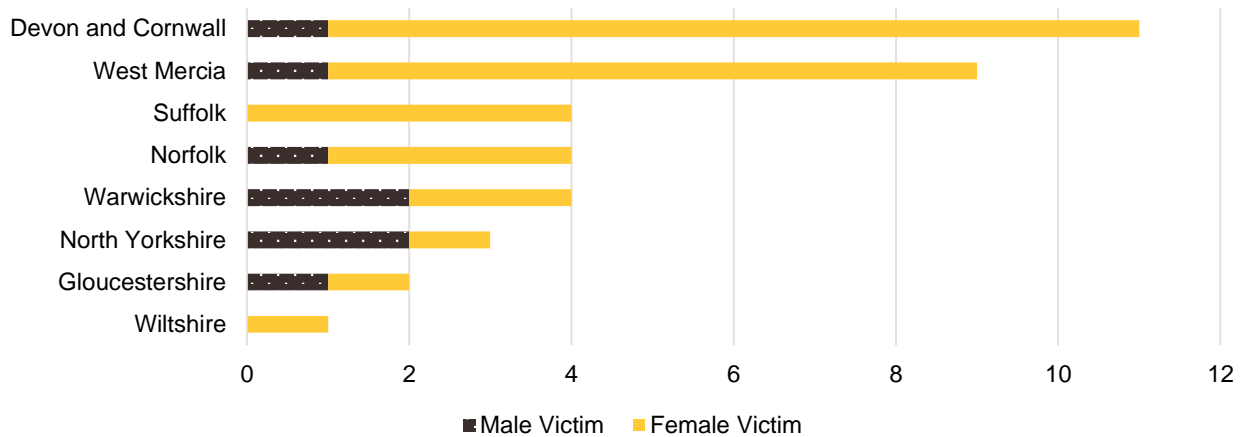


Figure 1 Figure 14 Count of domestic homicide between March 2016 to March 2019 for West Mercia and similar police force areas

## West Mercia Women’s Aid Refuge Data

A survey completed for the West Mercia Crime Commissioner in 2020 (Senker & Scott) found that only 38% of the victims and survivors surveyed were offered any form of support, which shows there is a substantial number of people who are not offered support and more could be done to support all victims and survivors of DA.

The following data was provided by West Mercia Women’s Aid (WMWA) in May and June 2021 and shows the level of referrals they had between April 2018 until the end of March 2021, most of the data relates to referrals to refuge.

Figure 15 shows that between April 2018 to March 2021, Colwall, Cradley and Wellington Heath had the most referrals to WMWA per 1,000 residents at 42 referrals per 1,000 residents, and that Penyard, Goodrich and Llangarron had the fewest referrals to WMWA at just 20 per 1,000 residents. The data shows that the need for support for victims of domestic abuse was apparent all across the county and not concentrated in the city or market towns.

Colwall, Cradley and Wellington Heath had the highest number of referrals per 1,000 residents

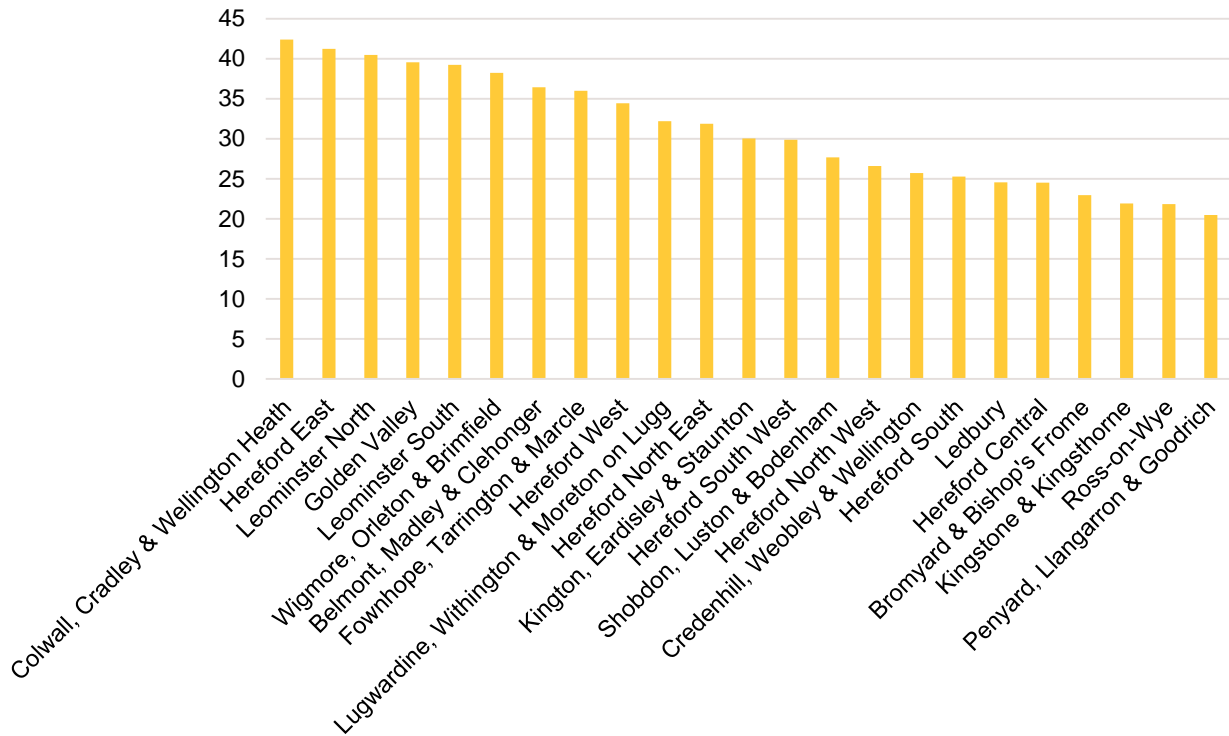


Figure 15 The number of referrals between April 2018 to March 2021 to WMWA per 1,000 residents by MSOA

Figure 16 shows that there have been between 62-73 referrals to refuge per year with most referrals occurring in 2019/20. 2019/20 also saw the longest average stay in refuge of 108 days, compared with 90 and 75 days in 2018/19 and 2020/21 respectively.

As can be seen in Figure 17, over the period 2018/19 to 2020/21 most referrals for refuge came from the local helpline, but in the most recent year of 2020/21, referrals from this source have dropped and more referrals are now coming from other professionals and self-referrals. Referrals from other sources have been consistently low, so it may be beneficial to ensure that these partners are aware that they can refer victims to refuge when needed and they understand the process of how to do this.

There was a higher number of referrals in 2019/20 than the previous and subsequent year

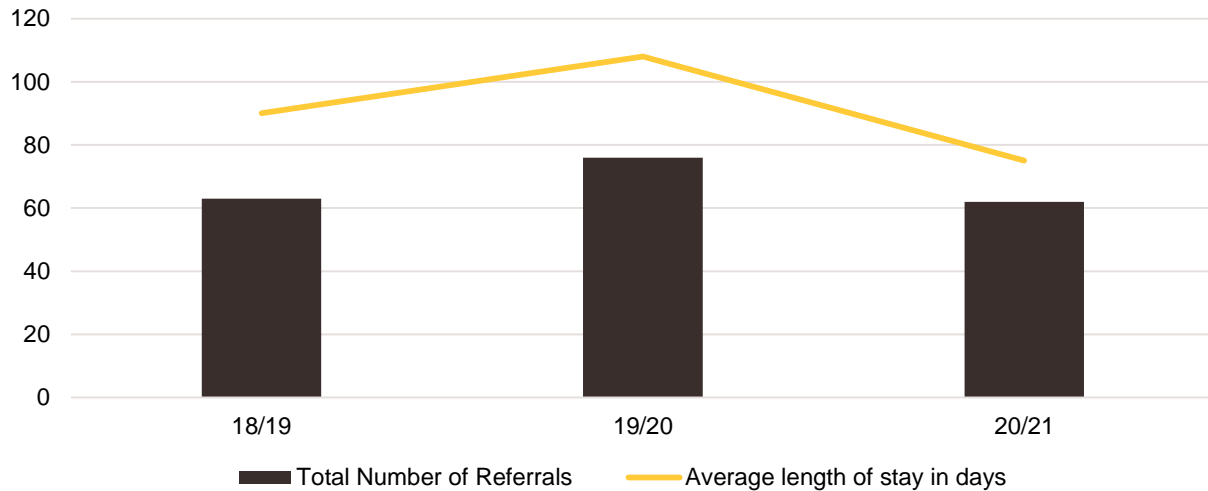


Figure 16 Number of referrals to refuge and average length of stay by year

Most referrals for refuge came from the Local Helpline

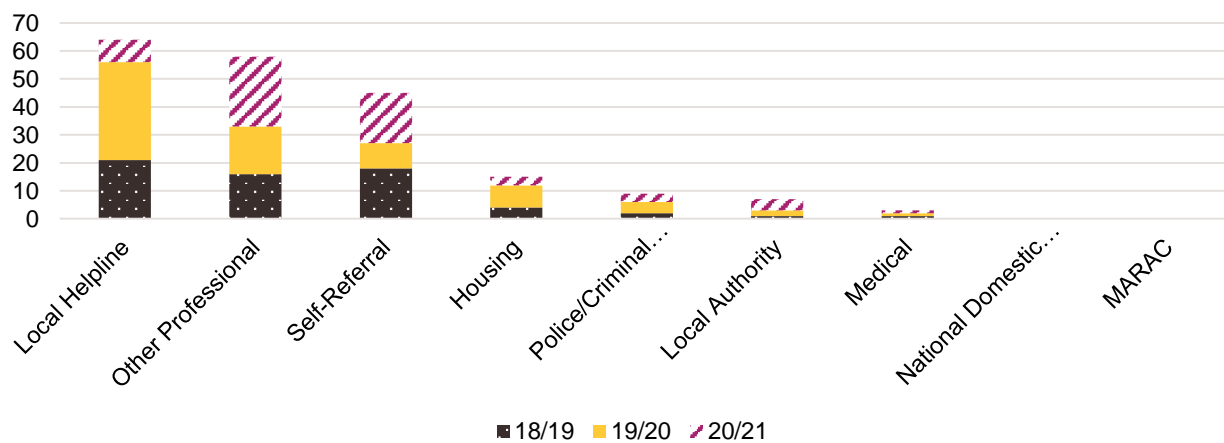


Figure 17 The number of referrals to refuge by source and year

As can be seen in Figure 18, between a quarter to a third of referrals were unsuccessful/denied, over 50% came from out of area and the remaining 17-24% of referrals were for victims inside the area. The reasons for referrals being denied can be seen in Figure 19, which shows that lack of room has been the most common reason for victims to be denied access to refuge year on year, which suggests that supply is not able to meet current demand.

### Most referrals are from outside the area

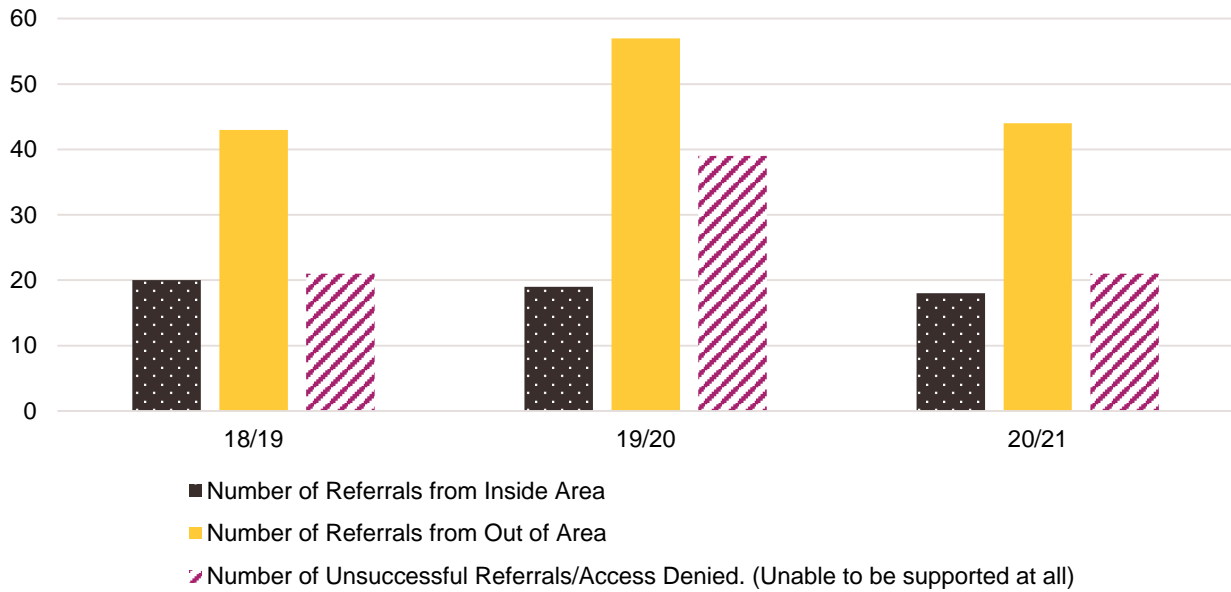


Figure 18 The number of referrals to refuge which were from inside/out of area and unsuccessful referrals by year

### Refuge referrals were most commonly refused due to lack of space

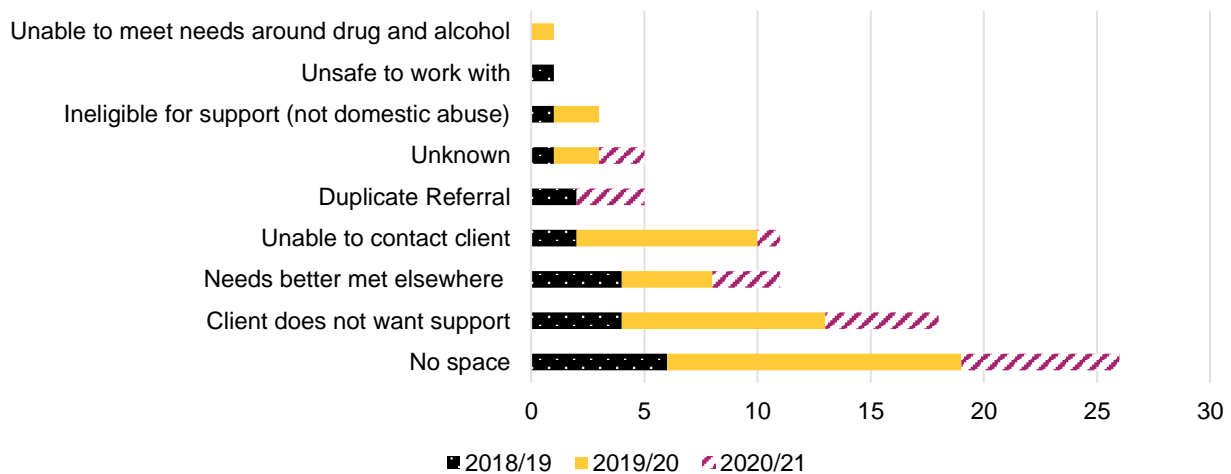


Figure 19 The number of referrals to refuge denied by reason and year

Figure 20 and Figure 21 show the age and ethnicity of victims who have been referred to refuge and the number of referrals which were accepted and refused. Most referrals were for those aged 25-34 with about 71% of referrals being accepted for those within this age range. All referrals for those aged 16-18 were refused access to refuge as it is not suitable for under 18s to be housed in refuge, but it is important to ensure that these people are receiving suitable support and accommodation. The other groups that were refused more than average were 55-64, 65-74 and

“Unknown”, which may suggest that older victims are less likely to be accepted into refuge, however the number of referrals for these groups were very small so it is not possible to infer much from this data.

16% of referrals were for people who are of BAME origins, which is actually much higher than the county average with only 1.8% of the county being recorded as non-white in the 2011 census. The data from WMWA does not break down “White” and as “White: Other white” is the largest minority in Herefordshire at 3.9%, it would be beneficial to break this down in future to further understand the makeup of people accessing refuge. Those of mixed race and recorded as “Other Isolated/ Marginalised community/ Prefer Not to Say” were refused access more than average, however, due to very small numbers of referrals for these groups it is not possible to come to firm conclusions.

### 25-34 were most likely to access refuge accommodation

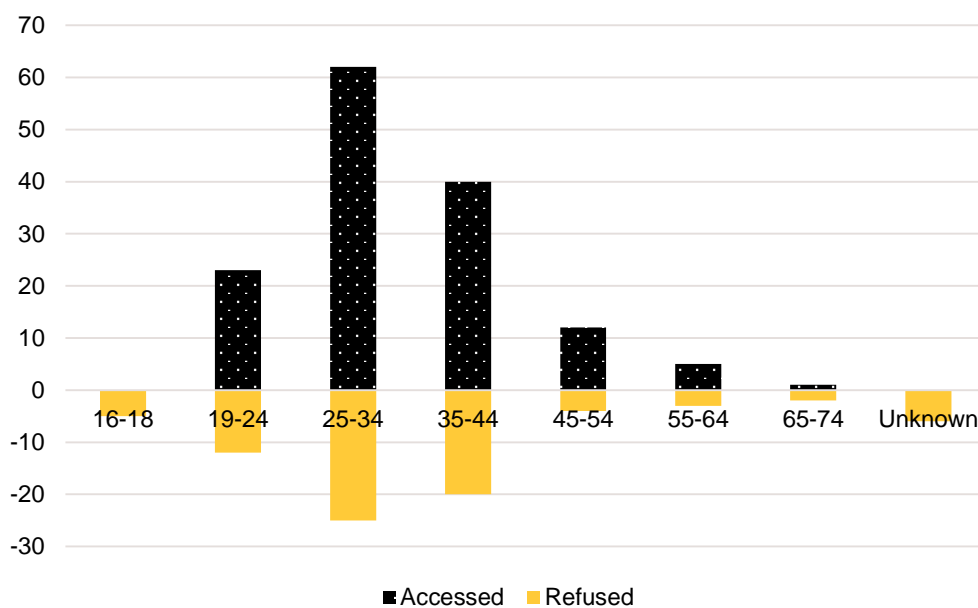


Figure 20 The number of successful and refused referrals to refuge between April 2018 and March 2021 by age

## Most referrals were for victims who are white

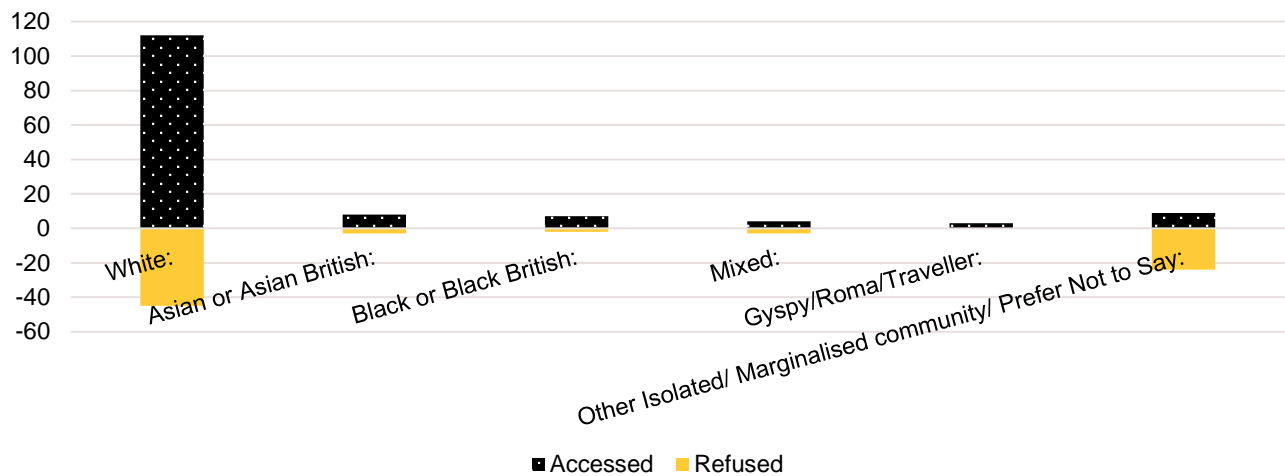


Figure 21 The number of successful and refused referrals to refuge between April 2018 and March 2021 by ethnicity

A report by the West Mercia Police and Crime Commissioner in 2020 (Senker & Scott) found that refuge was being utilised by those who had a history of DA in addition to victims who were currently fleeing DA which was felt to be inappropriate, and that refuge places should only be available for those who were currently fleeing DA. Whilst this report considered refuge across the whole West Mercia police area, the quality of refuge specifically in Herefordshire was highlighted as being good.

## MARAC/IDVA Data

### MARAC

SafeLives describes Multi-Agency Risk Assessment Conference (MARAC) as “a meeting where information is shared on the highest risk domestic abuse cases between representatives of local police, health, child protection, housing practitioners, Independent Domestic Violence Advisors (IDVAs), probation and other specialists from the statutory and voluntary sectors. After sharing all relevant information they have about a victim, the representatives discuss options for increasing the safety of the victim and turn these into a co-ordinated action plan. The primary focus of the MARAC is to safeguard the adult victim. The MARAC will also make links with other fora to safeguard children and manage the behaviour of the perpetrator. At the heart of a MARAC is the working assumption that no single agency or individual can see the complete picture of the life of a victim, but all may have insights that are crucial to their safety. The victim does not attend the meeting but is represented by an IDVA who speaks on their behalf.”

The MARAC data below comes from reports that West Mercia Police send to SafeLives and covers the period May 2009 to January 2021.

As can be seen in Figure 22, there has been an increase in cases heard at MARAC since 2009, with the vast majority of referrals coming from the police. The disparity between referrals between

the police and other sources may be because the police are more likely to be involved in high risk cases of DA, so have cases to refer, or it could be a lack of understanding of other agencies regarding how to refer to MARAC or in identifying cases that should be referred.

### Most MARAC referrals came from the police

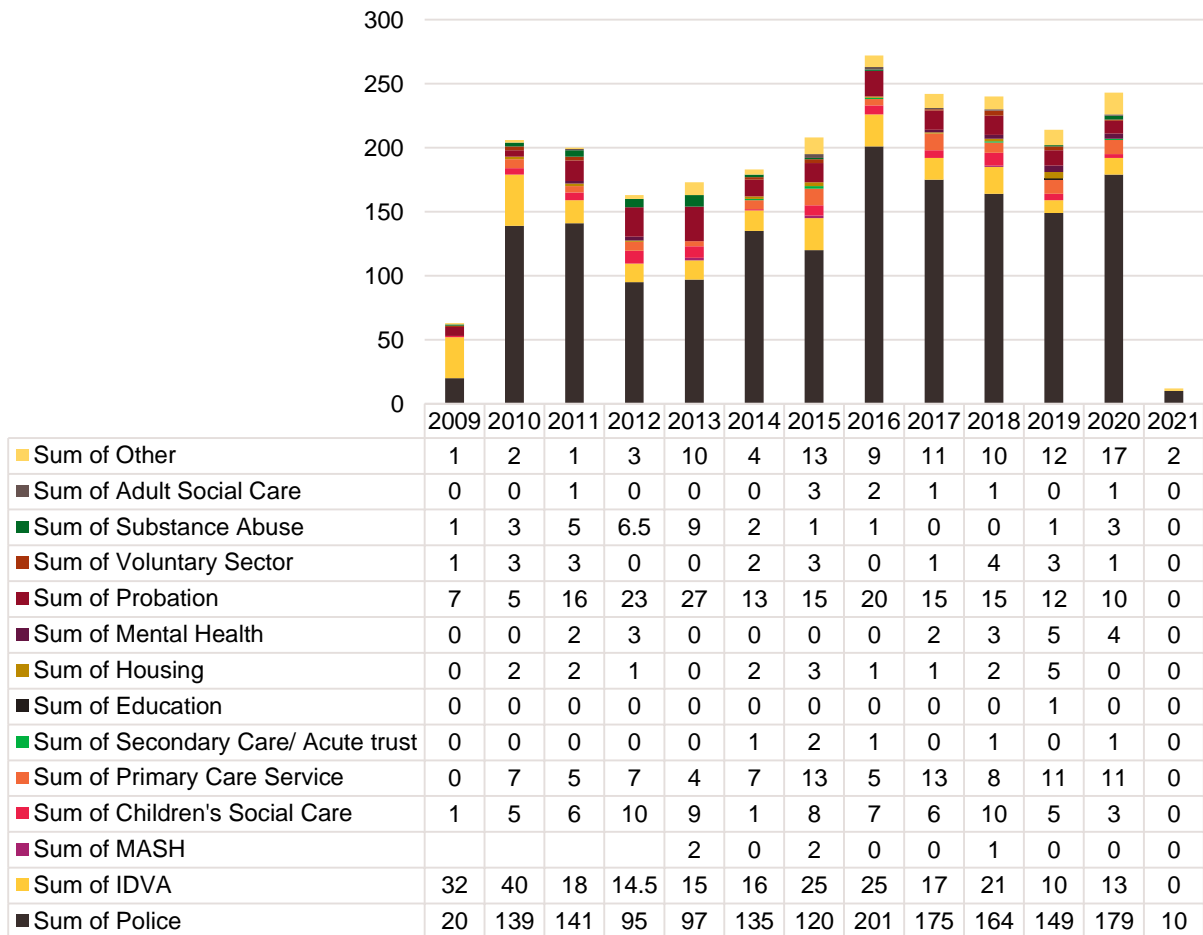


Figure 22 The number of MARAC cases heard in Herefordshire by year and source of referral

As can be seen in Figure 23, the number of cases that are seen each year where victims are BAME, LGBT, disabled or male are very low. CSEW data suggests that DA is actually more prevalent in people with disabilities and who are LGBT, which suggests that there are likely to be many unseen disabled and LGBT victims and it should be considered whether more can be done to support these unseen victims.

CSEW also showed that DA was most prevalent in people of mixed White and black Caribbean ethnicity, however, as the 2011 census estimates that 93.7% of Herefordshire are White British, it is unsurprising that the number of BAME cases are relatively low.

According to CSEW estimates, we would expect that male victims make up about a third of DA cases, however, it appears that cases involving male victims are very infrequently brought to

MARAC. Further investigation is needed to understand why this is the case, as there may be high risk male victims who are not getting their cases heard at MARAC who should be.

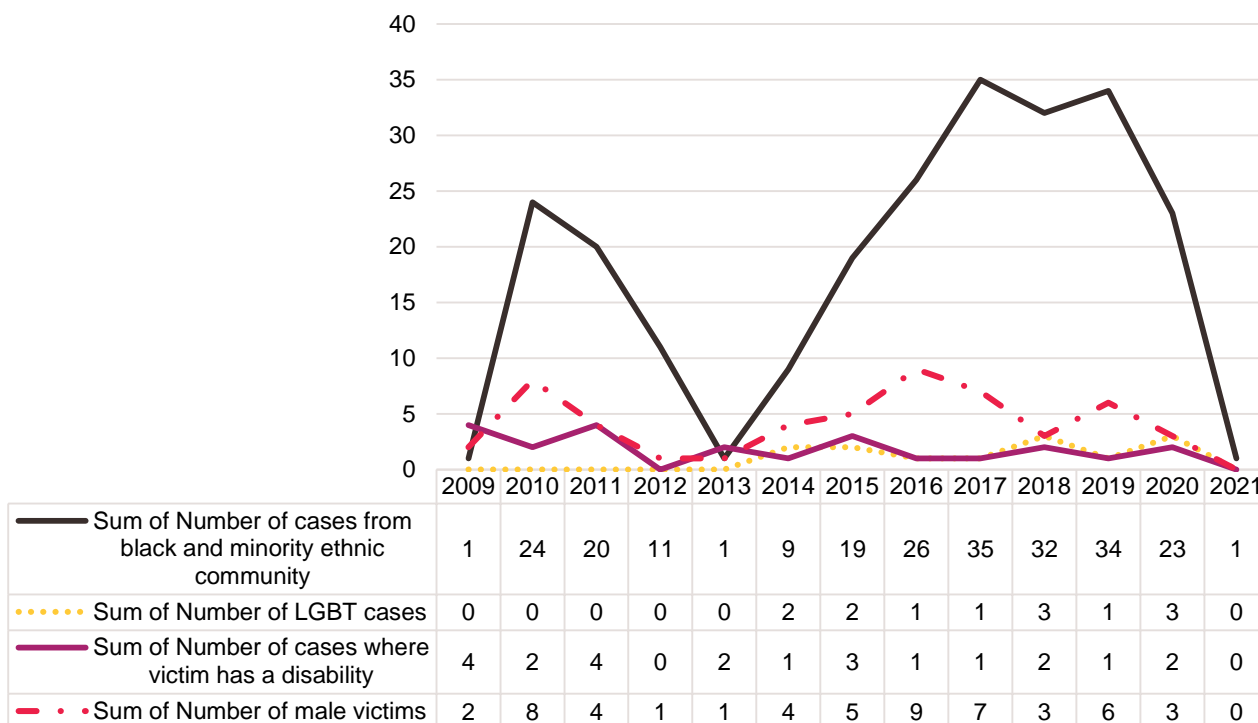


Figure 23 Count of cases where victims were of specified characteristics

## IDVA

Independent Domestic Violence Advocates (IDVAs) are specialists who are SafeLives accredited. They are trained to work with victims of domestic abuse at high-risk of serious harm. IDVAs provide high-risk victims of domestic abuse with a tailored and person-centered safety and support plan so that victims and their families are protected from abusive behaviour (SaferFutures).

The following information was provided by WMWA in May 2021 and shows how many victims they supported with IDVAs between April 2018 and March 2021.

Figure 24 shows that there has been an increase in the number of victims being supported by IDVA in 2020/21 and that 25-34 year olds are most likely to be supported by IDVA across all three years. Looking at other sources, there doesn't appear to have been an increase in demand, referrals or reports around DA in 2020/21, so it is uncertain why there has been this increase in demand for IDVA support. It could be that there were more victims being assessed as high risk than in previous years but it is not possible to come to conclusions from the data. There was also a substantial increase in the number of victims aged 65+ in 2020/21 meaning that more older victims are being supported by IDVAs than before, although numbers for this age group still remains low.



### Those aged between 25-34 are most likely to be supported by IDVA

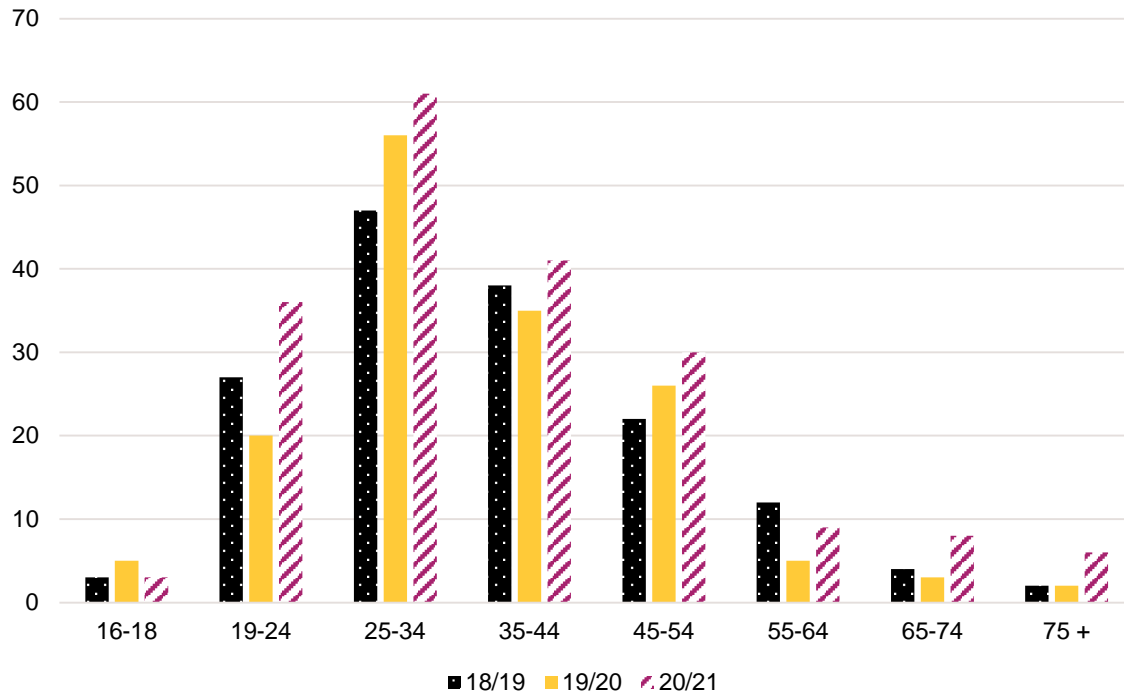


Figure 24 The number of victims supported by IDVA by age group and year

Figure 25 shows that it is almost exclusively women who have been supported by IDVA, with only 15 male and 2 transgender/transsexual victims receiving support in this 3 year period. These figures are starkly different to the prevalence levels reported by CSEW, which suggests there are likely to be a lot of male and transgender victims not receiving IDVA support who need it.

### 97% of victims supported by IDVA were women

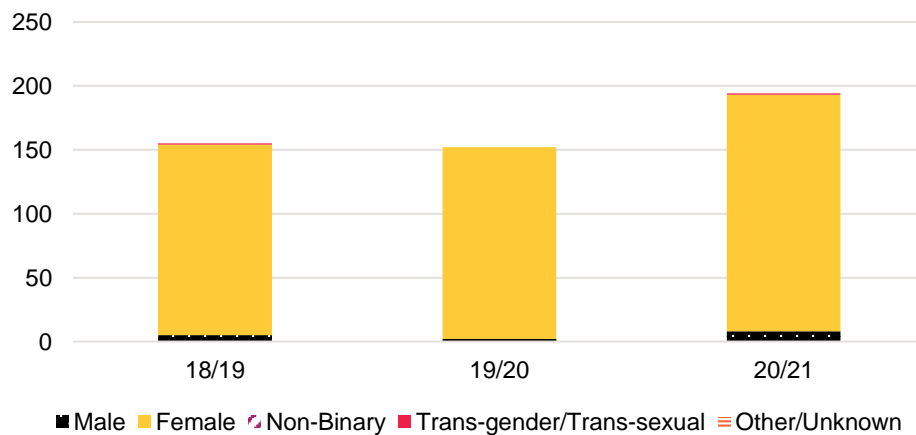
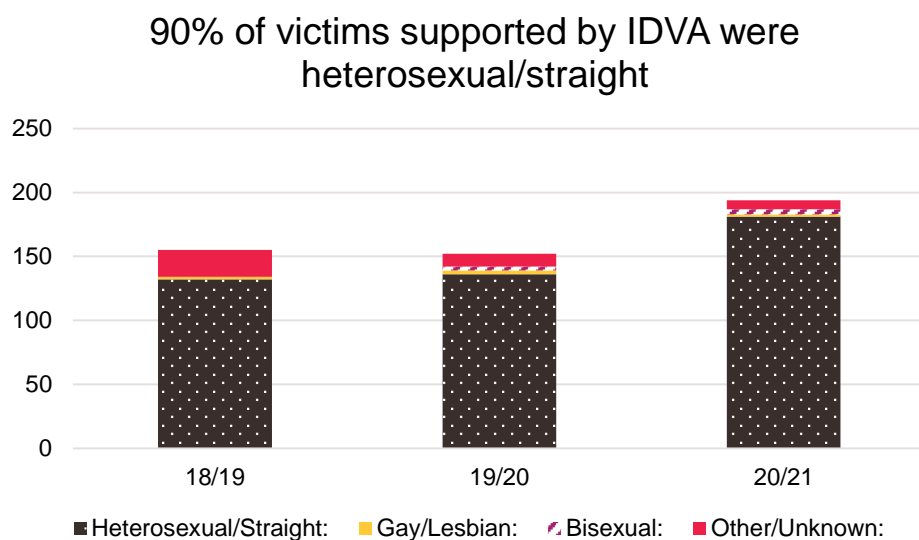


Figure 25 The number of victims supported by IDVA by gender and year

Figure 26 shows that 90% of victims supported by IDVAs were heterosexual/straight, 8% were “other/unknown”, 1% were gay/lesbian and 1% were bisexual. This is also quite different to the prevalence rates reported by CSEW, which suggests there is an underrepresentation of LGBTQ+ survivors being supported by IDVA.



*Figure 26 The number of victims supported by IDVA by sexuality and year*

A 2020 report by the West Mercia Police and Crime Commissioner (Senker & Scott) found that the IDVA programme was highly thought of amongst stakeholders and victims/survivors, especially the work of IDVAs within hospitals. However, it was highlighted that as IDVAs only worked with high risk individuals, many victims were not receiving this type of support, and that high risk did not always mean high need. A recommendation of finding a solution to this gap in support provision was noted.

## Housing and Homelessness Data

The following data was provided by the Housing Solutions team within Herefordshire Council in April 2021. Please note, the data only covers the year 2020 as this is when data was first recorded in this way.

During 2020, the Housing Solutions team recorded 147 instances where they worked with individuals needing housing where DA was reported as an issue. This was made up of 4 individuals requiring assistance twice within the year, and 139 individuals being seen only once in that year. Of these 143 people, only 2 were men; whilst there is clearly a disproportionate lack of men being supported by Housing Solutions, it is not possible to determine why this is the case, and further enquiry would be needed to understand why.

Two thirds of the individuals supported by Housing Solutions are recorded as working with other agencies, which both brings to the fore the importance of good inter-agency working and also

raises the question whether it is necessary or beneficial to refer the remaining third of people on to other agencies for additional support.

As can be seen by Figure 27, over 60% of DA victims supported by Housing Solutions had children or were pregnant, which may suggest that victims who have children are more likely to seek support and that more may need to be done to ensure that those without children are also able to seek support if needed. In addition, this finding also shows that the current demand for housing, needs to be suitable not just for victims, but also for their children.

Most DA victims needing housing had children

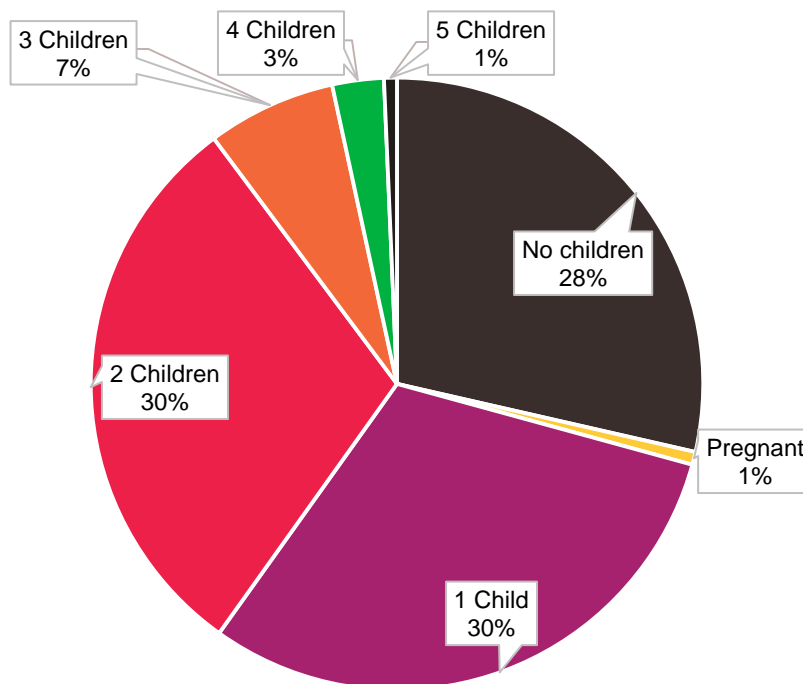


Figure 27 Breakdown of DA victims supported by Housing Solutions by number of children

Whilst Housing Solutions work to rehome victims of DA, a report by West Mercia Police and Crime Commissioner (Senker & Scott, 2020) highlighted that many victims want to remain in their own homes, and feel that being the one that has to leave is an additional “punishment”. Obviously each situation will be unique, but efforts should be made to allow victims to stay in their home if this is their wish and it is safe to do so, for example using the Sanctuary Scheme.

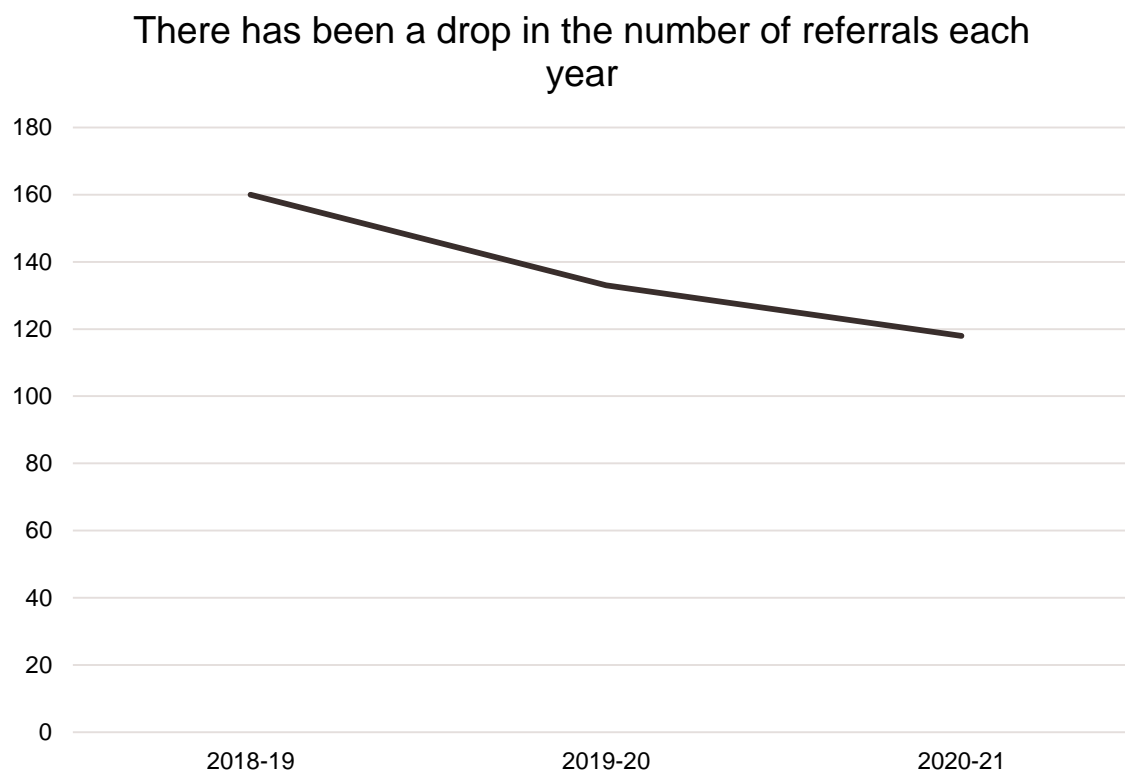
# Social Care Data

## Adult Social Care

This data was provided by the Adult Social Care Performance team in May 2021 and covers the period April 2018 to March 2021. The figures relate to referrals made to Adult Social Care when DA is recorded as a factor and the source of risk is a family member or partner.

As can be seen in Figure 28, there has been a reduction in the number of referrals made to Adult Social Care each year between 2018 and 2021. It is unclear why this would be the case, and further investigation may be required.

Figure 29 shows that referrals where DA is a factor and the source of risk is a family member of partner makes up only about 7% of all referrals received by Adult Social Care.



*Figure 28 The number of referrals per year to Adult Social Care where DA is a recorded factor and the source of risk is a family member or partner*

## Referrals for DA account for about 7% of all referrals to Adult Social Care

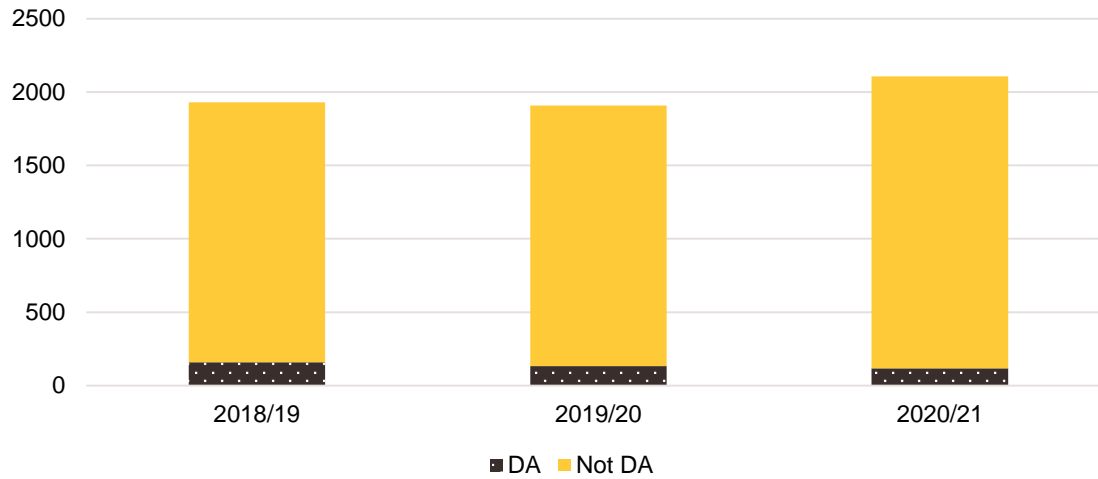


Figure 29 The number of referrals per year to Adult Social Care where DA is a recorded factor and the source of risk is a family member or partner compared to all other referrals to Adult Social Care

## Partners are the source of risk for most age groups, but family members are the source of risk for those aged 80+

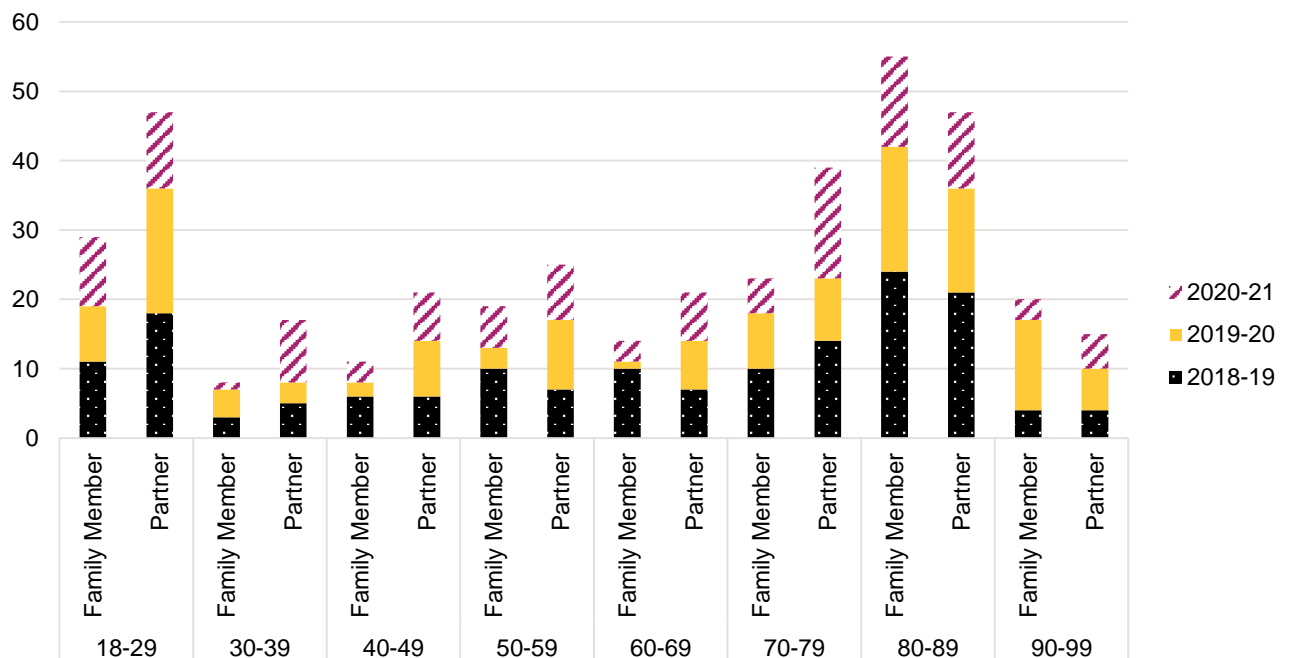


Figure 30 The number of referrals to Adult Social Care, where DA is a factor and the source of risk is a family member or partner, between April 2018 and March 2021 by age group and source of risk

Figure 30 shows that most referrals were for individuals aged 80-89 which is consistent with the frequency that this age group represents when looking at all referrals to Adult Social Care, however, it is a group where DA is rarely recorded by other agencies so support for older victims may be best provided through Adult Social Care. This graph also shows that 18-29 year olds were the second largest age group to be referred for DA, which is disproportionately high compared to the frequency that this age group represents when looking at all referrals to Adult Social Care, which supports the expectation that DA is especially prevalent in this age group.

Figure 30 also shows that most referrals cite the source of risk as a partner, but this is not the case for those aged 80+ where it is family members who are recorded as the source of risk. CSEW only surveys adults aged 79 and under about their experiences of DA, so there is no prevalence data available for this age group which makes this an even more hidden issue for those aged 80+. There are also concerns that DA perpetrated against older victims is not always recognised as DA, but instead classified as Elder Abuse which then means that victims are not receiving specialist DA support.

Figure 31 shows that around 46% of referrals for DA were for people whose primary support reason (PSR) was “physical support” which is proportionately the same as for all referrals, but there is a much higher proportion of people with “no PSR” for DA referrals compared to when looking at all referrals. All people that have been referred will have care and support needs, but not all are receiving services from the Local Authority, and those who are not receiving services won’t have been assessed so are recorded as “no PSR”.

~46% of referrals were for people where physical support is listed as their primary support reason

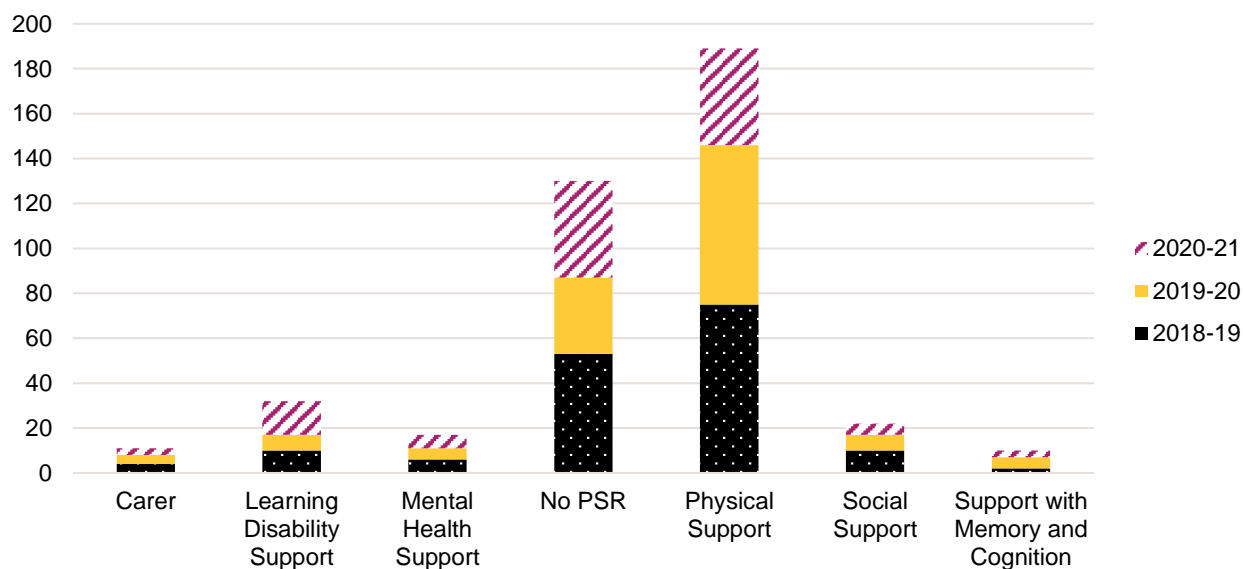


Figure 31 The number of referrals to Adult Social Care, where DA is a factor and the source of risk is a family member or partner, between April 2018 and March 2021 by primary support reason

Figure 32 shows the ethnicity of referrals is overwhelmingly “White”, which correlates with the ethnic makeup of the county. However, the data does not break down “White” into different

subcategories which would be helpful as the largest ethnic minority group in Herefordshire is “White: Other” but we cannot understand the level of referrals for this group of people due to the way the data is recorded.

Figure 33 shows that women make up ~75% of referrals for DA, which is much higher than the ~56% when looking at all referrals. However, the CSEW prevalence rates suggest that women make up about 75% of DA cases, so this figure actually fits with what we would expect.

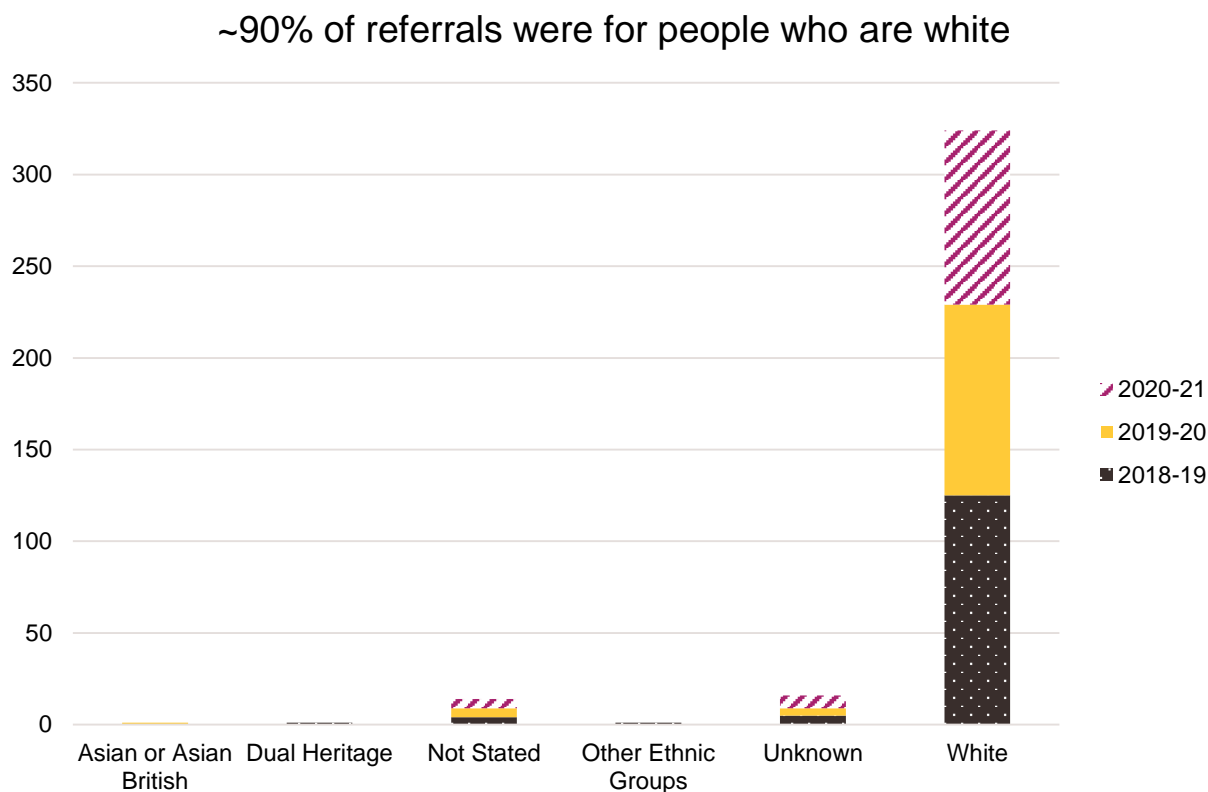


Figure 32 The number of referrals to Adult Social Care, where DA is a factor and the source of risk is a family member or partner, between April 2018 and March 2021 by ethnicity

~75% of referrals were for females

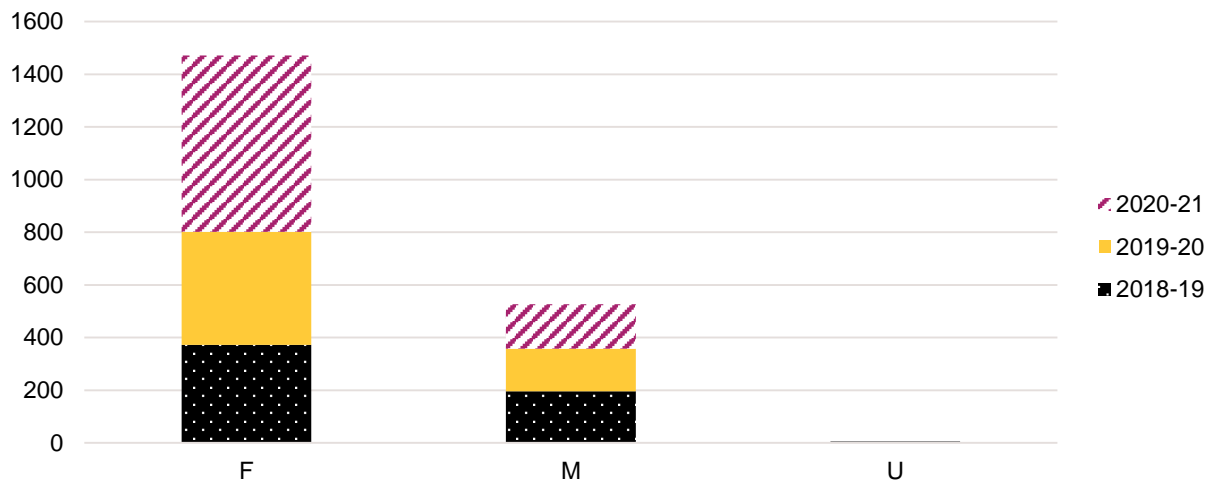


Figure 33 The number of referrals to Adult Social Care, where DA is a factor and the source of risk is a family member or partner, between April 2018 and March 2021 by sex

Referrals where source of risk was a partner was about 10% higher than where source of risk was a family member

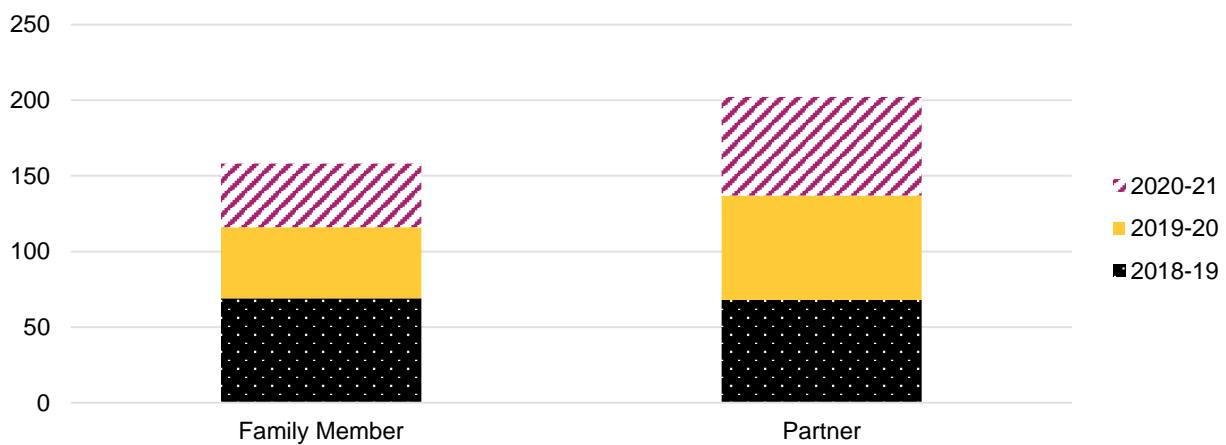


Figure 34 The number of referrals to Adult Social Care, where DA is a factor and the source of risk is a family member or partner, between April 2018 and March 2021 by source of risk

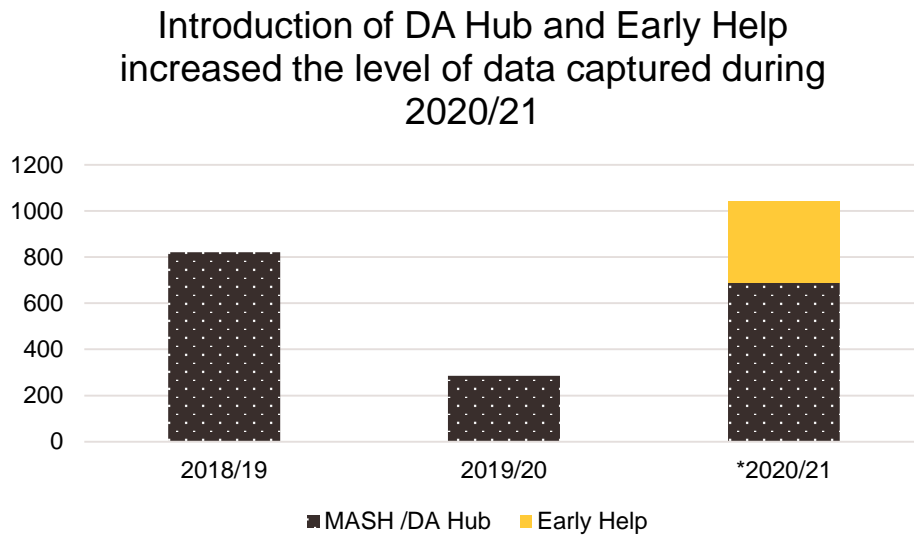
Figure 34 shows the source of risk of referrals which allows us to see whether the suspected perpetrator of the DA is a family member or partner. CSEW suggests that partner abuse is around twice as prevalent as familial abuse, which does not match what is seen in this data. This may suggest that familial abuse is disproportionately prevalent in those who have care and support needs. However, this is the only data set that separates out partner abuse to familial abuse, so it is not known whether this pattern is seen across Herefordshire or is specific to those with care and support needs.



## Children Social Care

This data was provided by the Children Social Care Performance team in June 2021 and covers the period April 2018 to March 2021. The figures relate to referrals made to Children Social Care when DA is recorded as a factor.

Figure 35 shows that there was a large fall in referrals in 2019/20 and then a large increase in 2020/21, however, these discrepancies have been accounted for by changes in the way referrals have been recorded rather than due to changes in levels of abuse. Before 2019/20, all referral forms were recorded as a referral, but after this time, only referrals agreed by the manager were recorded. From 2020/21, the introduction of the DA Hub and referrals coming through Early Help led to an increase of referrals recorded.



*Figure 35 The number of referrals to Children Social Care where DA was a factor by year and referral route*

~74% of referrals were for white children

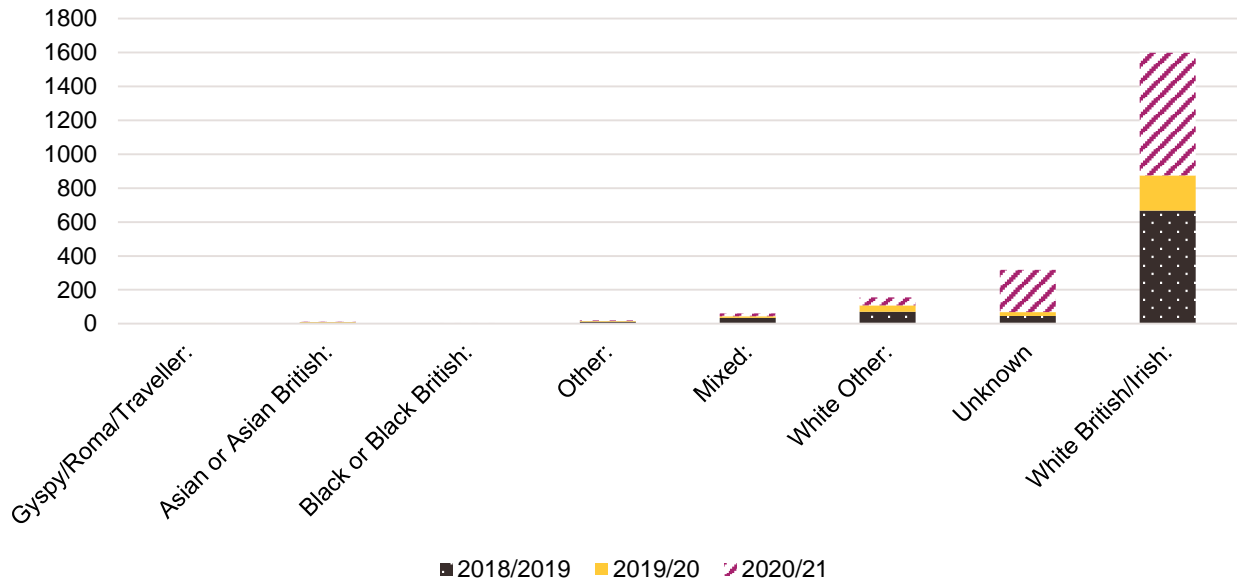


Figure 36 The number of referrals to Children Social Care where DA was a factor by ethnicity

Figure 36 shows that ~74% of referrals were for White British/Irish children, with a further ~15% comprising of those with “Unknown” ethnicity with the remaining ~12% children being BAME. The majority of BAME referrals are for children recorded as “White Other” at ~7% which is to be expected as “White: Other” is the largest ethnic minority group in Herefordshire.

Figure 37 shows which MSOA referrals have come from and it is clear that most referrals come from Hereford South West, and more generally from the city and market towns. This may be suggestive of the need for support in these areas for children who are victims or witnesses of DA, and also to ensure that in areas with lower numbers of referrals that there aren’t more hidden victims.

## Most referrals to children's social care were from Hereford South West (per 1,000 of under 18 population)

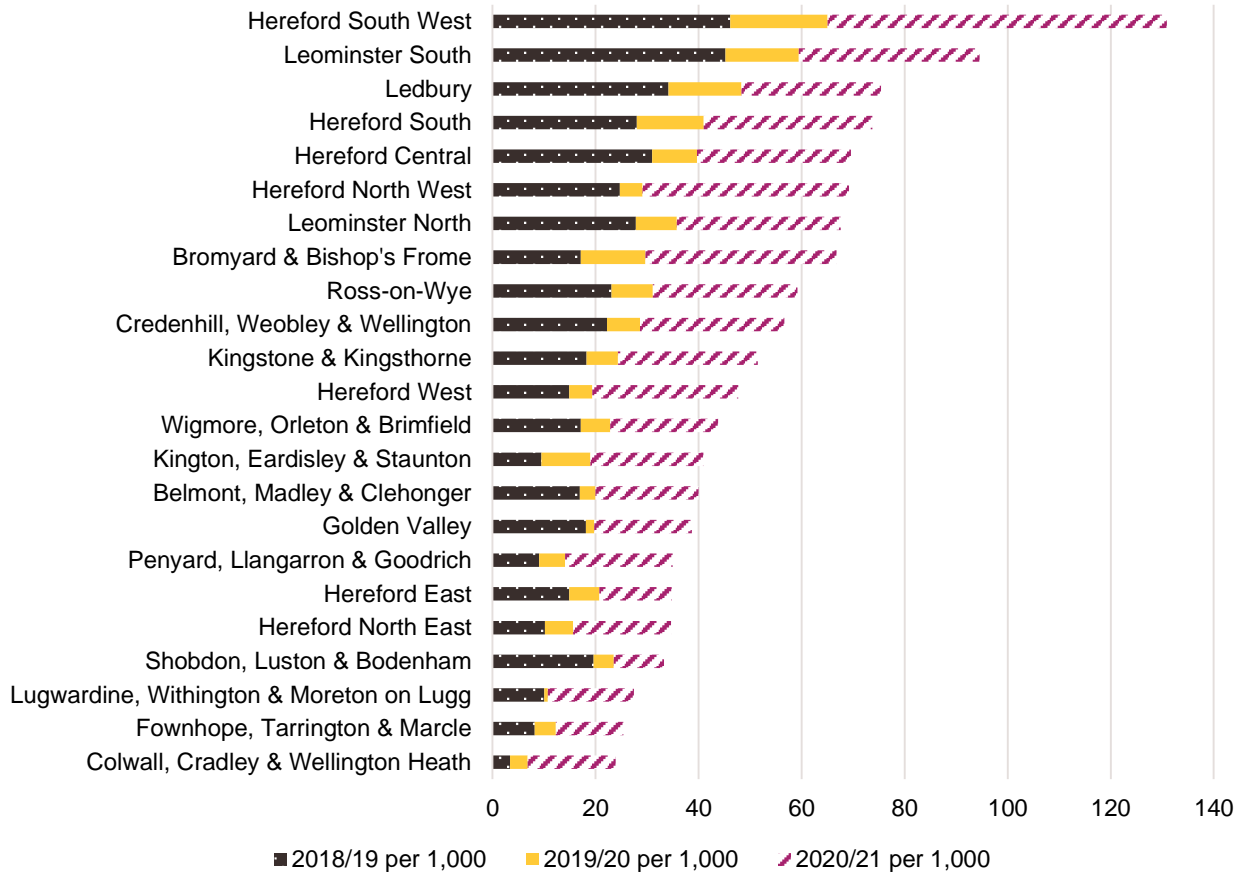


Figure 37 The number of referrals to Children Social care where DA is a factor by year and MSOA

Figure 38 shows that the majority of referrals are coming from the police which is reassuring that there appears to be a robust referral pathway between the police and children social care. However, the small number of referrals from other partners suggests that perhaps more work is needed to understand why there aren't more referrals and make changes if needed to ensure that all partners are referring to children social care when appropriate.

## Nearly 50% of all referrals came from the police

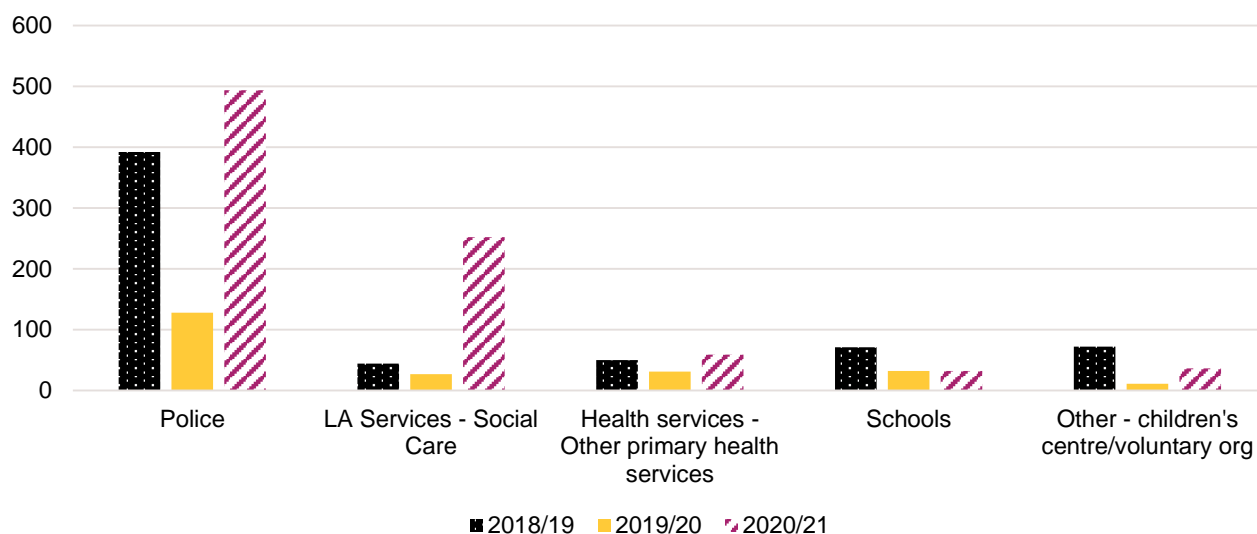


Figure 38 The number of referrals to Children Social care where DA is a factor by year and referral source

# Health Data

## General Practice

This data was provided by Taurus, which is a federation of all GP practices in Herefordshire, in April 2021 and covers the period April 2017 to March 2021. The figures are counts of when a GP records a code relating to DA on a patient's record, a list of the codes can be found in appendix B Table 3.

Figure 39 shows that GPs across Herefordshire have been seeing patients in relation to DA across all age ranges, but the majority of people were aged between 25-44. The low levels of people in the youngest age bracket does not align with what would be expected based on the prevalence levels seen in CSEW. This may in part be attributed to the fact that Herefordshire has a more aged population compared to England and Wales averages, but it would then be expected to see higher levels amongst older patients, which is not the case.

Figure 39 also shows that there was a substantial increase in the number of patients with a recorded DA code in 2019/20, especially in the 25-34 and 45-54 age groups, but the figures fell in 2020/21 to levels similar to 2018/19. A reduction in 2020/21 may be because patients have been unable to visit their GPs in person during the covid-19 pandemic, so GPs may have found it harder to pick up on cues from their patients, and patients may have found it more difficult to disclose this information over the telephone. It is uncertain when face-to-face GP appointments will resume to previous levels, so it may be beneficial to consider how GPs can ensure that they can better detect DA amongst their patients during these different ways of working.

## 25-44 year olds are most frequently recorded with a DA code by their GPs

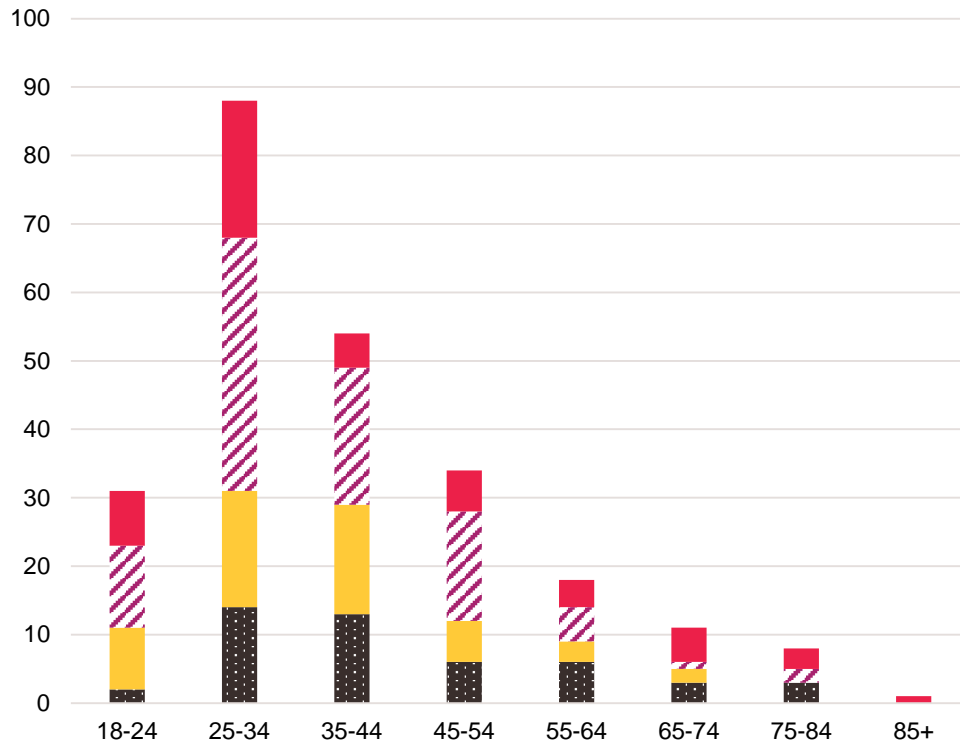


Figure 39 The count of DA codes recorded by GPs in Herefordshire by age band

As can be seen in Figure 40, 89% of recorded DA codes were for female patients, which is a much higher proportion than would be expected based on CSEW prevalence rates. This may be due to the fact that GPs use the Identification and Referral to Improve Safety (IRIS) system to identify victims of DA, and this system only considers women as victims, there is no acknowledgment of the potential for men to be victims of DA. A recent paper (Szilassy et al., 2021) highlighted this as an issue which meant that men and children were not being identified as victims of DA when they should be, and that GPs have not had the necessary training to identify male victims and don't know how to refer them on for additional support. This is of course a concerning situation and as suggested by Szilassy et al. (2021) this should be rectified so that all victims of DA are identified and supported.

## GPs are most likely to record a DA code for female patients

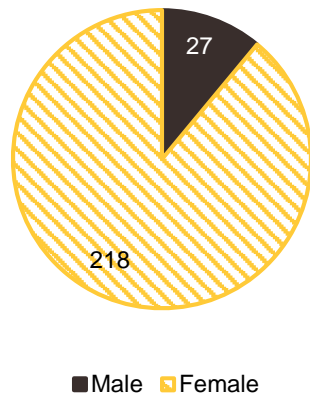


Figure 40 The count of DA codes recorded by GPs in Herefordshire by sex

Figure 41 shows how many DA codes were recorded per 1,000 registered patients by primary care network (PCN) in Herefordshire for 2020/21. The county is divided into 5 different PCNs: East Herefordshire, North West Herefordshire, South West Herefordshire and with Hereford Medical Group (HMG) and Wargrave, Belmont and Cantilupe (WBC) covering the city of Hereford. The data shows that WBC recorded many more DA codes than any other PCN, so it may be helpful to investigate further as to why this is the case and whether learning could be shared with the other PCNs to help them identify more potential victims.

## WBC recorded the most DA codes in total and per 1,000 registered patients in 2020/21



Figure 41 The count of DA codes recorded by GPs in Herefordshire by PCN

# Limitations

This needs assessment focuses on the current demand on numerous DA services within Herefordshire and the expected prevalence of DA in the county, but does not consider the importance of prevention. It would be advantageous for future reports to consider what work is currently being done around the prevention of DA, especially the DRIVE programme, and if this could be improved.

Family courts can play a large part in DA situations and a recent report from the West Mercia Police and Crime Commissioner (Senker & Scott, 2020) highlighted that many victims will not report DA to the police, but will pursue civil proceedings, for example for divorce or custody. The same report also describes that the family courts were unanimously viewed as traumatic. As family courts are a key part of understanding the DA situation in Herefordshire, it is recommended that any future needs assessment includes information from the family courts.

This report is based on statistical data provided by partners, but may benefit from an additional qualitative approach which could take into account the views of victims and professionals.

# Appendices

## Appendix A

*Table 2 Outcome of offences recorded by West Mercia Police in Herefordshire*

<b>Offence Outcome</b>	<b>2017/18</b>	<b>2018/19</b>	<b>2019/20</b>	<b>2020/21</b>	<b>Grand Total</b>
<b>Named Suspect identified: evidential difficulties prevent further action; victim does not support (or has withdrawn support from) police action</b>	737	1084	1364	1379	4564
<b>Named Suspect identified: victim supports police action but evidential difficulties prevent further action</b>	268	304	329	336	1237
<b>Charge/summons</b>	202	144	143	94	583
<b>Charge/Summons - alternate offence</b>	50	65	56	51	222
<b>Caution - adults</b>	38	50	46	42	176

<b>Offence Outcome</b>	<b>2017/18</b>	<b>2018/19</b>	<b>2019/20</b>	<b>2020/21</b>	<b>Grand Total</b>
<b>Evidential Difficulties Victim Based – Named suspect not identified: The crime is confirmed but the victim either declines/ or is unable to support further police investigation to identify the offender.</b>	29	44	49	54	176
<b>(blank)</b>	5	2	9	121	137
<b>Prosecution time limit expired: Suspect identified but prosecution time limit has expired.</b>	6	40	28	25	99
<b>Transferred to external agency</b>	16	20	44	4	84
<b>Investigation Complete: No suspect identified. Crime investigated as far as reasonably possible –Case closed pending further investigative opportunities becoming available</b>	16	17	17	13	63
<b>Caution - Adult - alternate offence</b>	5	13	11	14	43
<b>Prosecution prevented – Named suspect identified but is too ill (physical or mental health) to prosecute</b>	3	15	6	13	37
<b>Further investigation, resulting from the crime report, which could provide evidence sufficient to support formal action being taken against the suspect is not in the public interest – police decision.</b>	18	3	2	1	24



<b>Offence Outcome</b>	<b>2017/18</b>	<b>2018/19</b>	<b>2019/20</b>	<b>2020/21</b>	<b>Grand Total</b>
<b>Diversionsary, educational or intervention activity, resulting from the crime report, has been undertaken and it is not in the public interest to take any further action.</b>		1	14	8	23
<b>Prosecution not in the public interest (CPS) (all offences)</b>	3	7	3	2	15
<b>Formal action against the offender is not in the public interest (Police)</b>	10	3			13
<b>Caution - youths</b>	4	1	2	2	9
<b>Community Resolution</b>	5	2	1	1	9
<b>Prosecution prevented – Named suspect identified but victim or key witness is dead or too ill to give evidence</b>		3	2	4	9
<b>Caution - Youth - alternate offence</b>		2		1	3
<b>Prosecution prevented – Named suspect identified but is below the age of criminal responsibility</b>	1	2			3
<b>The Offender has Died (all offences)</b>				2	2
<b>Penalty Notice for Disorder</b>				1	1

## Appendix B

Table 3 Count of DA codes recorded by Herefordshire GPs

Code Term	2018	2019	2020	2021	Total
Advice about domestic abuse	1	0	2	0	3
Advice about domestic violence	2	2	1	0	5
DASH (Dom Abuse Stalking Harassment HBV) 2009 Risk Checklist	0	6	0	0	6
DASH (Domestic Abuse, Stalking and Harassment and Honour Based Violence) 2009 Risk Checklist	0	0	8	22	30
Domestic abuse	0	1	12	2	15
Domestic abuse of adult	0	0	3	0	3
Domestic abuse victim in household	4	0	0	0	4
History of domestic abuse	3	7	12	1	23
History of domestic emotional abuse	1	1	1	0	3
History of domestic sexual abuse	1	0	0		1
History of domestic violence	10	10	11	3	34
Routine enquiry about domestic abuse	1	4	7	7	19
Routine enquiry about domestic abuse declined		0	1	0	1
Routine enquiry about domestic abuse not made	1	0	0	0	1
Victim of domestic abuse	23	22	35	17	97

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