A community response to domestic violence in Rose Hill - Littlemore Sure Start, Spring 2000 – Spring 2003

Virginia MacNeill | Louise Harriss | Sarah Stewart-Brown

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Foreword

Domestic violence is a serious social problem which usually takes place behind closed doors and is clearly traumatic for everyone involved and often kept hidden from friends, family and the wider community because it is so stigmatising. Yet one in three women will experience domestic violence at some point in their lives, and although the majority of serious incidents are perpetrated by men on women, it is also perpetrated by women on men.

Sure Start’s key aims are to improve the health and the social and emotional well being of children and to strengthen communities. We know that a very high proportion of incidents of domestic violence take place when the child is in the room or the next room, and there is growing evidence regarding the seriously detrimental impact, in both the short- and long-term, on children’s health and well being.

We believe that if we take a public health approach to domestic violence and work with the whole community to raise the profile of these issues, try to reduce stigma, offer more accessible support and encourage informal local networks of help and back-up, we can more effectively support all involved.

Our aim has been to try to develop a whole community approach to this complex, damaging and often taboo issue. We need to work together with local people, community groups and specialist support services so that the children and families involved feel able to talk and to access support.

I would like to end by paying tribute to the courage of local families who have taken a very active role in our work to date, and particularly to those who have been involved in public speaking, and in creating and acting in our local drama project. The most moving testimony about the impact on children and families comes from people involved, and we need to include them at the heart of our planning and development of support services.

Tan Lea
Director
Rose Hill-Littlemore Sure Start
Poem by Kim, a local parent


Is he looking at me I said to my mate
I think he is she said – Oh isn’t this great
Well I didn’t know about love, I was just turned 15
But he asked me out and he seemed really keen

So I skipped home, well chuffed with myself
I had a boyfriend, good looking as well
Well is soon blossomed and we fell in love
He said I was the hand that fitted his glove

We went everywhere together, we had such a laugh
I couldn’t imagine us ever being apart
But I was just 16 the day I called round his flat
I stood on the doorstep and said you gonna be a dad

I was cold and confused when a tear left his eye
He pulled me close and started to cry
I’m gonna be a dad Kim do you know what this means
I’ll be the King and you’ll be my Queen.
Whatever you want Kim just say the word
Cos you and this baby – you are my world

Before we knew it the day had come
And we both were blessed with a beautiful son
Over the months we set up home and things were going great
Until one night he went out and got drunk and didn’t come home till late

What followed that night I could not have imagined
I fled babe in arms very tired, very frightened
He pleaded and pleaded so I went back home
The following week the doctor phoned
Hello Miss Adams, about that infection
There isn’t one dear, I’m afraid your pregnant

I had a girl this time, a beautiful daughter
Little did I know another lamb for the slaughter
His patience grew a little after I had the baby
Then I realised why cos I was isolated!
He would steal my keys so I couldn’t go out
If I was late back from shopping he’d scream and shout
Where have you been, what took you so long
I just couldn’t convince him I’d done nothing wrong

The years flew by and our family grew
We now were 6 from the original two
So now I had 4 children keeping me there
His power over me grew cos he knew I was scared

Physical, mental and financial abuse
But I couldn’t tell my secrets I’d look such a fool
12 years I stayed and things just got worse
Who took my prince charming and put him under this curse
Fear of not being in control and of loss and insecurity
There were the things that took my prince charming away from me

It’s been three years now since we parted
But don’t be sad I’m not broken hearted
I’m independent now and strong and healthy
I realised it wasn’t my fault, so no longer feel guilty

I have faith in myself, I’m not scared anymore
I won’t run and hide when fear knocks my door
I’ll open it wide and make sure I stand tall

So my message today is don’t take this abuse
Look for your strengths - you’ll find it cos it’s already within you
1. Introduction
This report describes the first years of the community response to domestic violence in Rose Hill-Littlemore Sure Start. The report and research on this programme was undertaken by the local evaluation team based at the Health Services Research Unit in the Department of Public Health, University of Oxford, under the direction of Sarah Stewart-Brown, Professor of Public Health at Warwick University. A report of the evaluation of the first few years of this trailblazer Sure Start was completed by the evaluation team in 2002 and is available on http://www.hsru.ox.ac.uk/surestartrep.pdf or from the Oxford Health Services Research Unit.

This report is based on qualitative interview data woven with other formal and informal documents, (such as notes, minutes of meetings, leaflets and advice sheets), which describe the development and impact of the domestic violence programme from its inception in 2000 until January 2003. Semi-structured interviews were conducted with a parent and three members of staff associated with Rose Hill-Littlemore Sure Start and the domestic violence programme. These people were selected for interview because of their knowledge of the programme and on the understanding that they would not be identified in this report.

2. The problem of domestic violence
Domestic violence is abuse that occurs between partners or ex-partners. This abuse can be physical, emotional, financial, or sexual, and often goes unrecognised or unacknowledged. It is usually understood as the misuse of power and control by one partner over another partner (Pence and Paymar, 1996).

Domestic violence has long been a taboo subject, reflecting a popular view that what happens within a family is a private rather than a public concern and assaults that take place within private relationships are less serious than those which happen between strangers. Until the end of the 18th century, British husbands could beat their wives for what was called “lawful correction”. The subordinate position of women was seen as natural and it was enshrined in the law and given religious backing. Although the image of the nagging wife is still put forward in some quarters as a justification for wife beating (Denney, 1998) times are changing and in recent years the problem of domestic violence has attracted considerable attention in the national and international public policy community.

Domestic violence against women – incidence and severity
Violence against women by partners, ex-partners and relatives is the most common form of physical interpersonal crime and 1 in 3 women will experience domestic violence at some point in their lives, regardless of race, ethnic or religious group, class, age, sexuality, disability or lifestyle (McGibbon and Kelly, 1989; Mooney, 1994). Post-traumatic stress disorder is present in 35% of women who have experience domestic violence (Duxbury, 2002) and on average a woman is murdered by a current or ex-partner every three days. Most of these women are in the process of leaving or have recently left the relationship. Domestic violence usually increases in frequency and severity over time and pregnancy is often a trigger for initiation or rising levels of violence. Women who suffer domestic violence are more likely to abuse
alcohol or drugs, to be diagnosed with depression or psychosis, and to attempt suicide.

**Domestic violence against men**
Although the majority of incidents of severe domestic violence are perpetrated by men on women, men may also be on the receiving end of domestic violence. Mirrlees-Black’s (1999) research showed similar rates of domestic violence for men and women but she also showed that men were less upset, injured or frightened by their experience, and less likely to seek medical help. Domestic violence by women on men is associated with an even higher level of taboo than men on women violence and rates are likely to be affected by significant under-reporting.

**Domestic violence between same sex partners**
While statistics for same sex domestic violence are difficult to come by, it is generally accepted that such abuse is not confined to heterosexual couples but is less reported through a fear of homophobic stereotyping (e.g. Merrill, 1998, amongst others). On 28th September 2000, the Metropolitan Police ‘Day to Count’ event recorded reported incidences of domestic violence as being 4% between females and 7% between males.

**The impact of domestic violence on adults**
The two most important health consequences of domestic violence in adults are physical injury and psychological effects. The British Medical Association has estimated that 1 in 9 women affected need medical attention for the injuries they suffer. The police are, on average, contacted only after the fortieth violent incident has occurred. In the rare event that an incident is reported, the perpetrator is unlikely to be prosecuted.

**The impact of domestic violence on children**
Living with domestic violence is damaging for children and can have a profound effect on their development. Whilst adults living in violent households often try to shield children from it and believe that they do not know that is occurring, Hughes (1992) found that 90% of incidents of domestic violence took place when the child was in the same or next room. A third of these children try to protect their mothers. Researchers from a number of British universities interviewed 54 children and young people who had been living in a violent household. The majority stated unequivocally that they had known about the violence, even when their mothers thought they had not. They wanted to be told what was happening, to be involved in decision making (for example, about going to a refuge), and to be consulted beforehand before any such major life changes occurred (Mullender et al, 2002). Family conflict of any kind has a detrimental effect on children’s emotional and social development and on their educational achievement with long-term implications for their mental health, interpersonal relationships and employability, and conflict involving physical violence is particularly damaging (Reynolds, 2001). A growing literature highlights the impact of domestic violence on children’s health. Evidence has emerged about its short-term and long-term effects on their behaviour, emotional wellbeing, cognitive abilities and attitudes (Humphreys and Mullender, 2000), while an Australian study has revealed post-traumatic symptoms present in children of mothers who live in refuges because of domestic violence (Mertin and Mohr, 2002). However it is important to acknowledge children’s resilience. Every child’s experience will
be different and some children show no obvious negative effects at all (Yates, 1996).

Domestic violence against women and the abuse of children are intimately connected. The Department of Health acknowledges that "nearly three quarters of children on the ‘at risk’ register live in households where domestic violence occurs", and that "often, supporting a non-violent parent is likely to be the most effective way of promoting the child’s welfare" (joint report by the Department of Health, Home Office and Department for Education and Employment, 1999).

**Ethnic minority community and domestic violence**
Take-up of domestic violence services by some ethnic minority women is poor. In a study of the take-up of services by Asian, African Caribbean and Arab women it was found that about half the women who had experienced domestic violence waited 5 years before they sought help (Rai and Thiara, 1997). Language barriers and fears about the type of accommodation they would find in refuges were major constraints.

**Disabled women and domestic violence**
Only one-quarter of refuges are adapted for women with disabilities and disabled women experience particular difficulties in seeking help because their abuser may also be their carer. Difficulties in accessing appropriate help, combined with the losses incurred if she were to separate and the ease with which she could be isolated by her abuser, increase his power and control in the relationship. North American research found in a survey of 245 women with disabilities that 40% had experienced domestic violence and 12% had been raped. More than half of the women had not sought help, mostly due to fear and dependency.

**Government initiatives on domestic violence**
In 1994 the UK government set up an official interdepartmental working party on domestic violence to promote a co-ordinated response to the problem at national and local level. In 1997 it began to develop a programme of measures to promote women’s rights through the Woman’s Unit and other government departments such as the Home Office. In 1998, the Crime and Disorder Act placed a statutory duty on local authorities and the police to develop local partnerships to reduce crime and disorder, including domestic violence. In 1999 a document, ‘Living without Fear’, set out the government’s strategic approach to domestic violence against women and in the same year, the government launched a campaign, ‘Breaking the Chain’, to raise public awareness of domestic violence. Finally, the Domestic Violence, Crime and Victims Bill was introduced in the House of Lords on 27th November 2003. This proposes to strengthen the rights of individuals who experience this form of abuse.

A number of measures have been implemented by government to address concerns about risks to children. In 1999, the issue was addressed formally through a consultation paper (Contact between Children and Violent Parents). In 2000, an Appeal Court judgement provided guidance with regard to contact orders in cases of domestic violence when it was ruled that four violent fathers should only be granted indirect contact with their children. In 2001, Guidelines for Good Practice on Parental Contact in Cases where there is Domestic Violence were introduced. Finally, the Adoption and Children Act 2002
extended the definition of ‘significant harm’ within the Children Act 1989 to include ‘impairment suffered from seeing or hearing the ill-treatment of another’.

**Domestic Violence in the context of Sure Start**

The key objectives of the Sure Start programme are to improve children’s social and emotional development, their health and their readiness to learn when they get to school, and to strengthen families and communities. Given the prevalence and impact of domestic violence on families and children and the increase in incidence during pregnancy outlined above, this is an issue local Sure Starts clearly need to tackle as part of their work. However the taboos and under-reporting associated with domestic violence, and the potential for escalation of problems in the face of help-seeking behaviour or attempts to leave the relationship, make this a challenging area for effective action. It also increases the need for dissemination of research on promising approaches.

3. The Rose Hill-Littlemore Sure Start domestic violence programme

Domestic violence crosses all social groups and communities, so its presence in Rose Hill-Littlemore is unsurprising and workers in the Rose Hill-Littlemore communities have always been aware of it. For many years the local authority-run Family Centre on Rose Hill provided a focal point in the community for families needing all kinds of help and once the Sure Start programme was launched in the area, the two services were integrated. This continuity of service has contributed to their knowledge and understanding of the needs of the local neighbourhoods. Sure Start workers know that families who experience domestic violence have different ways of dealing with it. Many will suffer in silence while others speak out, wanting support in remaining at home and living with it. Some really want some help in escaping to a safe place.

At the time that Rose Hill-Littlemore Sure Start was launched, there was an Oxford-wide range of services and agencies providing help for people experiencing domestic violence; however they were not well co-ordinated or accessible. Most did not provide a 24 hour service. For example, the three special units run by the local police force operated from 9 a.m. – 5 p.m. on weekdays only, while the three safe houses provided by Oxfordshire Women’s Aid did not provide 24 hour accessibility. Although Social Services could refer individuals to Oxford’s housing department for emergency temporary housing, this did not suit everybody. It was received opinion, for example, that for their own safety, Asian women needed to be offered rehousing in places as further afield as Reading.

The prevalence of domestic violence and what to do about it was raised by the community at a stakeholders’ meeting early in the life of Rose Hill-Littlemore Sure Start. This led the Director to set up Sure Start’s Community Response to Domestic Violence Project in the spring of 2000. At the same time, the Oxford Multi-agency Group on Domestic Violence (OMAGDV) approached Sure Start with offers of support.

The programme was an ambitious undertaking because of the silence around issues of domestic violence and its many forms. While public awareness is
increasing, there is a tendency within local communities for “everyone to pretty much keep schtum” (DV4).

3.1 Setting up the Domestic Violence Working Group
The Project drew together a group of local parents and staff as the Domestic Violence Working Group (also known as the Steering Group) to oversee domestic violence policy issues within Sure Start with OMAGDV as key partner. While Sure Start took the lead in co-ordinating the work, the contribution of OMAGDV was especially valuable in areas of training and policy development.

It was agreed from the outset that the Project would take a community development approach, working in partnership with local people to improve understanding of domestic violence, raise awareness of the issues and develop a model of good practice. It was recognised that effective delivery of this project required the active involvement of local staff and other voluntary and statutory agencies, working in innovative ways across professional and institutional boundaries. Rose Hill-Littlemore Sure Start’s multi-agency set-up was well placed to take the lead in this and allow the group to co-ordinate work across different agencies and ensure that they worked to a common purpose. The Domestic Violence Working Group met regularly, were properly convened, and the proceedings were minuted and conducted in accordance with a circulated agenda.

3.2 Formulating the Action Plan
These early Domestic Violence Working Group meetings, described as “very emotional and moving” (DV1), presented an opportunity for parents and staff to share their experiences of living with domestic violence. It was in this context that an action plan was drawn up which set out very clearly Rose Hill-Littlemore Sure Start’s commitment to supporting individuals who were living with, or had lived with, domestic violence. The plan proposed the introduction of a range of measures, including:

Raising awareness of domestic violence amongst staff, parents and the community.

- Developing a community response to domestic violence.
- Providing training for Sure Start staff and local agencies. All Sure Start staff needed to have a clear understanding of support structures and arrangements available for individuals they suspected were affected by domestic violence. The involvement of Sure Start health workers in this enterprise was considered to be crucial to its success.
- Providing training for local parents.
- Providing support for local parents and children experiencing effects of domestic violence.

These plans included the creation and maintenance of links with the local police force and allied agencies at local and national organisations.

1 The four interviewees have been assigned identity codes DV1-4 to safeguard their anonymity.
3.3 Developing the Community Response to Domestic Violence Statement

One of the first actions of the group was to develop a ‘Community Response to Domestic Violence Statement’ that would be owned by the local community, and to which Sure Start would encourage local families, community groups, and other agencies and organisations to sign up. A draft Statement was drawn up, and in July 2000 a letter was sent to local parents and organisations requesting opinion and comments on the Statement. By July 2001, the content and format had been agreed and the “Sure Start Response to Domestic Violence” policy and procedures document has been drawn up. The plan was for Sure Start staff to approach members of other organisations with a view to persuading them to commit their support to the Statement. The Statement was printed on small posters for display in their premises. Extracts from the Statement are set out below:

The locally agreed and published statement of the Sure Start Domestic Violence Project states:

‘We are seeking to create a safer and more secure community by bringing the issue of domestic violence out in the open and supporting people involved. We want to raise awareness and set up supportive services. We will take incidents seriously, by listening and offering help. Our aim is to reduce the impact of domestic violence on children and the whole family.’

The aims of the Sure Start Domestic Violence Project are:

To increase the safety of people experiencing domestic violence in Rose Hill-Littlemore, including all those that it impacts upon, such as children.

To develop a community approach, involving all agencies and the general public, in raising awareness of the range of domestic abuses and how they can be prevented. This approach also includes raising awareness of the current provision of local support services.

To help those that have experienced abuse to take control of their lives and create a safer living environment for themselves.

To work with violent people to increase public safety.

To recognise that domestic violence infringes children’s rights and to develop services to protect them.

The objectives of the Sure Start Domestic Violence Project are:

- Prevention of domestic violence – through education and awareness of the issue.
- Provision of services for those experiencing domestic violence – to include the development of domestic violence practices for service delivery and employment, training provision, monitoring and recording.
- Protection for those experiencing domestic violence through work with the criminal justice system, including provision for violent people.
- Provision of support for children who have experienced the impact of domestic violence.
3.4 Measuring the effectiveness of the domestic violence programme

The working group recognised the importance of measuring the effectiveness of their domestic violence work but they were also aware that this would be extremely difficult.

“I don’t know how we measure it. I don’t know, just being aware that it’s something people talk about…it’s a big issue. But whether we’re actually stopping people being there and going to the refuge or not, I don’t know. Or preventing them getting to that stage maybe…it’s very difficult.” DV1

Keeping records of incidents of domestic violence at a national and local level is a challenging task, made more difficult by differences in the way it is defined and the silence of the individuals concerned. While the following details taken from the Rose Hill-Littlemore Sure Start database are likely to represent significant under-reporting, the information does give a flavour of the impact of domestic violence on local families. Out of a possible 240 families living in the Sure Start area, there were 21 reports (self reports or third party reports) of incidents of domestic violence recorded in mid-May 2002 (a snapshot report). Three families had been referred to Sure Start from Women’s Aid and Sure Start had also referred two families to Social Services Family Support Conference (FSC).

In conclusion to this part of the report, the setting up of the Domestic Violence Working Group and the creation of the Domestic Violence Statement was the first vital stage in the implementation of a community response to domestic violence. The working group recognised that the next stage was to develop an infrastructure which would provide better understanding and support for people who experience domestic violence.

4. Developing the domestic violence programme

Developing the programme was a complex endeavour because of its multi-agency composition. Structural, policy and procedural issues had to be formulated and agreed; community awareness programmes had to be introduced; and support systems for parents and children had to be developed and put into place. This part of the report describes the development of:

- Infrastructures to support the domestic violence programme
- Strategies for supporting parents who experienced domestic violence
- Strategies for supporting children who experienced the impact of domestic violence

4.1 The infrastructure

A range of studies have highlighted the need for a multi-agency response to those experiencing domestic violence (cf. Peckover, 2003). Creating a solid infrastructure to support the programme included making links with other interested agencies. It also included promoting staff awareness of domestic violence and the issues surrounding its perpetration and of the needs of those on the receiving end. Training in this and in communication skills was accepted as vital for all Sure Start staff.
Developing links with other agencies
Very many different agencies in Oxford offered some level of services to people who were experiencing domestic violence. An important task for the Domestic Violence Working Group was to foster links with these agencies and to ensure that there was a common understanding and vision about how to develop effective preventative and supportive services for people living with violence.

Sure Start developed links with, and often co-ordinated procedures and activities of, the following key agencies and in most cases were represented on their strategic decision making panels:

- The Oxford Multi-Agency Group on Domestic Violence (OMAGDV)
  While this group contributed to the development of Sure Start’s domestic violence programme, members of the Rose Hill and Littlemore Sure Start Working Group also sat on the Oxford Multi-Agency Group on Domestic Violence. They were able to report on their experience in raising awareness of domestic violence in the community and how this was making open discussion of it more acceptable. Updates on the progress of the project became a standing agenda item.

- ATMOSphere
  This is an overarching multi-agency body responsible for leading on strategies for tackling community safety in Oxford City (the OMAGDV acted as a subgroup of ATMOSphere). Information sharing amongst agencies with a legitimate interest is permitted under section 115 of the Crime and Disorder Act.

- The Social Services Area Child Protection Committee
  This is a county based, multi-agency group. Rose Hill-Littlemore Sure Start have highlighted, during meetings with the Committee, the impact upon children of living in a household where violence is occurring.

- The Thames Valley Partnership
  This is a charity set up to promote and strengthen partnerships to reduce crime and the fear of crime, adding value to the quality and scope of work in community safety. It brings people and organisations together to work for safer communities. The charity runs projects with schools, arts bodies, prisons, probation teams, health authorities, musicians, film makers and businesses in and around the Thames Valley. Rose Hill-Littlemore Sure Start presented their work at a domestic violence workshop organised by the Thames Valley Partnership (Domestic Violence: Changing Directions Conference, November 2002)

Raising staff and local agencies’ awareness of domestic violence
Training was one of the items on the Action Plan of the Working Group. The group identified the importance of providing specific training for Sure Start staff and local agencies and also hoped to set up training for parents. The Working Group recognised that this could have a crucial impact on attitudes towards domestic violence within the local community and on the motivation of women living with domestic violence to seek help.
“You can see that you can get through this…their greatest support is other women and that’s very important.” DV2

During August 2001, all Sure Start staff took part in three domestic violence awareness training sessions. The training was facilitated by a public health specialist who belonged to a Sure Start partner agency and was a member of the Domestic Violence Working Group. For a number of years the public health specialist had been developing guidelines and training in domestic violence issues for midwives and health visitors. She had been involved with Sure Start during its early stages of development, and agreed to support its domestic violence work.

The training sessions covered a range of important issues concerning domestic violence: its definition; its prevalence; what those living with domestic violence most want and need from professionals; supportive and effective ways of working; and Sure Start’s own domestic violence policy.

Staff were enthusiastic about the awareness training that they received. However, it had not been possible for the sessions to proceed as the facilitator had hoped. When the first session took place, it became clear that there was some confusion over exactly what kind of training was appropriate. The facilitator had anticipated that staff would have already received some basic listening skills training, and that staff who attended the training sessions would have already become involved in policy development due to a particular interest in domestic violence. The facilitator had expected the training to be more focussed on policy understanding and implementation, i.e. “what does it mean they have to do as an employee of Sure Start”. Instead, many of those attending had not received any basic listening skills training, and had not been involved with the Working Group or any kind of domestic violence awareness discussions at that point.

The facilitator recognised that it was common for miscommunication to occur:

“I always find as a facilitator or a trainer or anything, that you go in and you have an idea about what you’re there for, everybody else has a slightly different idea about what you’re there for…and it’s not possible for us to communicate completely and completely understand what’s going on…Never in all my working years, I’ve never known it not to happen.” DV2

In the light of this misunderstanding, the facilitator revised the agenda at the last minute and so the training did not cover the issues as planned.

Nevertheless the training sessions were still very useful as they became an opportunity for those that had not been involved in the development of the policy to discuss the document itself, and how it could or should be altered, rather than its implementation. The staff reported that the domestic violence project, and specifically the training, has indeed led to an increased awareness about domestic violence amongst Sure Start staff. They confirmed that they were more adept at listening and responding appropriately, and at looking out for signs and symptoms that someone they were working with was experiencing violence.

**Developing safety guidelines for staff**
Sure Start has a duty of care to its staff and so risk assessment guidelines and procedures were drawn up for the safety of lone workers if they found
themselves in a volatile situation during the course of their work (see appendix – Health and Safety in Sure Start, Section 5: Home Visiting).

4.2 Developing strategies for supporting parents
Rose Hill-Littlemore Sure Start has attempted to raise local awareness of domestic violence through a number of initiatives.

Raising awareness in the community
Fundamental to Sure Start’s approach to domestic violence has been to bring the issue out into the open, in the hope that this, alongside provision of supportive services, will reduce the impact of domestic violence on children and the whole family. Domestic violence is widely considered to be a taboo subject, not to be discussed publicly; in this, Rose Hill-Littlemore is no different from most communities.

“I think especially in a community like [this] where it’s ‘oh, you don’t say nothing to no-one, you’re a grass or your this or your that’. [...] they don’t want to be involved, they don’t want their tyres done or they don’t want hassle from the neighbours or whatever. But no, I think it’s a very taboo subject, and I don’t think it’s talked about enough. You know, I don’t think there’s enough out there to say ‘you don’t actually have to take this’.” DV4

I think people are scared to be open about it to be honest, you know, what will it involve for them if they speak up, what will it involve for family if they speak up, if family even know. It’s not one of those things that’s easy to spot unless you’ve got the obvious fat lip, broken jaw or black eye. There are other ways that men or women can abuse men or women, and it doesn’t necessarily have to show.” DV4

Raising awareness through publicity materials
The Working Group identified a need for publicity materials that would not only provide useful advice for anyone living with domestic violence, but would also contribute to raising awareness by giving the issue a visual presence. Awareness of the programme was raised more generally through local press releases and radio programmes.

From the summer of 2001, posters about domestic violence were displayed on Sure Start premises and at other local organisations and health centres. These advertised a Sure Start contact number and named members of staff who could be contacted for support and advice.

A local leaflet was developed based on one produced by the Oxford Multi-Agency Group on Domestic Violence (OMAGDV). It provided information about where to go for help. Contact addresses included: Oxfordshire Women’s Aid; Oxford Police; Housing Services; Domestic Violence Emergency Alarm Scheme; Victim Support Oxfordshire; Oxford Housing Rights; Injunction Hotline; Oxford Sexual Abuse and Rape Crisis Centre; Health Services; Mind Health Resource Centre; Oxfordshire Social Services Department; and Oxford Women’s Training Scheme.

2 For more information contact OMAGDV on 01865 751511 – although you may be connected to an answerphone.
Sure Start also produced a small pocket-sized card that lists local and national helplines, phone numbers and contacts on one side. On the other is useful advice about practical preparations that might need to be made for anyone thinking about leaving a family home; for example, getting an extra set of keys cut, putting away some money, taking important legal documents such as birth certificates and money books, and for those leaving with children, a reminder to take something significant of theirs, such as a favourite toy.

**Raising parent awareness through training for parents**

Some parents asked for domestic violence awareness training but according to one of the staff members, this was not delivered because the parents did not really know what they wanted from the training.

**Raising parent awareness through drama – involving parents**

Love Me Tender – One of the most significant community events that evolved from the Working Group was a drama project about domestic violence, the idea for which arose from the early meetings during mid-2000, when local women and workers shared powerful and moving experiences of domestic violence. It was suggested that these should be written down and form the basis of a play. Through contacts with the Rose Hill Drama Group, a local playwright held a series of lengthy meetings with the women (and initially, one man) involved. As very emotionally charged experiences were being recalled, Relate counsellors were present to offer support if necessary.

The playwright produced a storyline (Love Me Tender) based on these conversations. It was truly grounded in the reality of domestic violence.

> “When I read the script I thought ‘**** that is my life...It’s so true to life’, I just couldn’t believe how real it was.” DV4

It was decided to produce the play locally. Actors were recruited from the local community, the Rose Hill Drama Group, and Sure Start staff. Not all of the women who had been involved in the early stages of the development of the play felt able to continue to be involved in its production, for their own diverse reasons. Some of the cast members had themselves lived through violent relationships, and found the process of talking about their experiences and rehearsing the play at times extremely challenging, but also therapeutic.

> “You’d go into the rehearsals, you’d have a giggle and it would be all funny but when you left you’d kind of realise how serious it was, and it would bring up memories, and some bits were emotional and tearful...so that bit was quite hard...but...Sure Start were always there in the background, saying we’ve got counsellors.” DV4

> “I don’t think counselling would have been any better than what I got through that play...I thought to myself ‘well, actually this is educating people, this is letting people know that this goes on out there and it doesn’t matter what background you come from or how much you’ve got, you can still be in a violent relationship’, and I think that’s what spurred me on. If there was one person in the audience that day that said ‘oh, so-and-so’s been acting a bit quiet lately...you know, if one person got sort of checked up on...then it would all be worth it, which evidently it was in the end.” DV4

Sure Start recognised that the production of the play might bring some difficult issues to light for those taking part. One member of staff who was also a cast
member served as a point of contact between Sure Start and those involved in the production, and was able to provide support and information about Sure Start services. In March 2002, ‘Love Me Tender’ was performed for two nights at the local community theatre, the Pegasus. Both nights were sold out. The play had a powerful impact on the audience.

“I saw so many people crying…professionals from Sure Start, friends from Sure Start, people that I’ve seen up there but don’t really know that closely and people were just saying ‘oh my god, that is so powerful and shocking’. And I think it was nice that it had a good ending because people didn’t leave crying their eyes out!…The feedback was enormous, and I think the amount of people that will get involved next time will be a lot bigger.”

The play was also videotaped, along with interviews with cast members and the director, who discussed the role of drama in important societal issues. The Love Me Tender Video was officially launched at Sure Start’s Annual General Meeting in September 2002, by the Lord Mayor of Oxford, Gill Saunders. Video extracts from the play and the interviews were shown, and one of the cast members, a local parent, read an extremely moving, insightful poem she had written about her own experiences of living in a violent relationship. Speaking out about her experience to a large public audience of local people and parents she knew, as well as agencies and strangers, showed remarkable courage. Sure Start staff who had been involved in the production, members of the working group, and the Director all spoke briefly about Sure Start’s domestic violence work.

The production of Love Me Tender has continued to generate discussion about domestic violence, providing a new opportunity to talk about personal experiences. It sparked an interest within the local community to create further opportunities for exploring other important issues. An example of this is that one of the original cast members has been asked a number of times what the subject of the next play will be. The drama increased awareness of the prevalence, range, subtleties and complexities of domestic violence and people were able to empathise with the characters in the play.

Raising awareness through dissemination to a wider audience

On the strength of their domestic violence work, Rose Hill-Littlemore Sure Start were invited to give a presentation about it to the Sure Start Unit’s National Good Practice Seminar, held in London on 7th October 2002 and opened by Baroness Aston and Naomi Eisenstadt. The seminar profiled examples of good practice from across the country and Rose Hill-Littlemore Sure Start was one of just four programmes selected out of sixty submissions. Once again the cast member who is also a local parent had the courage to read her poem to an audience of civil servants and she spoke movingly of the potential impact of domestic violence on children and school attainment.

3 Copies of the Love Me Tender video are available to buy or rent from the Sure Start Family Centre in Rose Hill. Tel 01865 716739.
Raising awareness through the provision of information
Staff also provide information about all external services that may be able to provide support. There are two Domestic Violence police co-ordinators in Oxford City, who generally receive a referral from the police if they have been called out to an incident. Oxfordshire Women’s Aid provides emergency accommodation and support for women and their children experiencing domestic violence. Women’s Aid operates a telephone helpline, as does Victim Support, which also has a separate arm, the Witness Service, that gives support to witnesses providing evidence in court. The Housing Department of the local authority will provide support and advice for anyone wanting to leave their home or obtain a written injunction, and solicitors will provide legal support. These agencies have tended to act in isolation from each other, as this parent so graphically explains:

“I remember situations where I’ve had to get out of this house at 8 o’clock in the morning and they’re saying ‘well you’ve got to go to the council for housing, you’ve got to go to the police, you’ve got to go to the solicitor, you’ve got to go to the doctor’ and it’s like ‘hold on a minute I’ve got a baby in a sling, a toddler on reins and a double buggy, how the **** do you expect me to go and see all these?’” DV4

Sure Start is helping families to negotiate a path through these different agencies and giving them the information they need.

Offering support through referrals to other agencies.
Sure Start supports families experiencing domestic violence by offering referrals to other agencies providing a range of freely available counselling services, including Relate, the Isis Centre, Oxpip, the Community Psychiatric Nurse, Family Therapy Service, the Ark, and Rose Hill and Donnington Domestic Advice Centre.

Support for Asian women
Personal and cultural beliefs about domestic violence can also influence how an individual may respond. This is a tricky area for many of the Sure Start staff.

“One of our […] family workers [did] not believe what a woman had told her. And the other worker [was] saying ‘but you have to listen to what’s going on’. And that is purely cultural and information sharing […]. Since then I know it’s been untangled” DV1

This is an important step as part of the community response to domestic violence is to raise awareness by recognising and openly discussing these perceived or actual differences.

Support for men experiencing domestic violence
Rose Hill-Littlemore Sure Start is a predominantly female environment where support for women who experience domestic violence is obvious. However, acknowledging women’s violence towards men is more of a struggle.

‘I’m aware I think of one, but I don’t know enough, whether it [was] absolutely genuinely true or whether it was six of one and half a dozen of the other, or whether it was her fighting back, and has been misunderstood; I don’t know.’ DV1
4.3 Developing strategies for supporting children

Local provision for supporting children living with domestic violence in Oxford has been limited. Women’s Aid employs a worker to support children of women living at its refuge. Another local charity called the Ark works with children who have experienced sexual abuse. Social Services will provide risk assessments, but without evidence of serious abuse, cannot provide support. There is no permanent service provision to help children who experience the impact of domestic violence.

The Children’s Intervention Project (CHIP)

The Oxford Multi-Agency Group on Domestic Violence identified services for children experiencing domestic violence as an area for development, and in 2002 established the Children’s Intervention Project (CHIP), a pilot programme chaired by Sure Start’s lead health visitor. In December 2002, CHIP submitted an unsuccessful funding proposal to the Children’s Fund. Funding was eventually secured from ATMOSphere, (the Oxford City Crime and Disorder Reduction Partnership). It has drawn together a group of professionals from a number of organisations – Sure Start, Oxford City Council, Thames Valley Police, the Learning and Culture Department (formerly known as the Education Department), the Ark, Oxfordshire Women’s Aid, Social and Health Care (Social Services), and Oxfordshire Victim Support – with the aim of increasing the safety and well-being of children experiencing the impact of domestic violence and providing a support service for them.

CHIP’s Objectives

The objectives of CHIP were stated to be:

- to develop awareness amongst relevant agencies and organisations of the impact of domestic violence on children
- to develop an intervention and referral system for agencies who work with children
- to establish a support service for children who experience domestic violence

CHIP also aspires to develop a programme with staff in schools and youth clubs which will equip them to respond appropriately to children experiencing domestic violence, and to identify funding for Children’s Support Worker posts.

CHIP’s Action Plan, July 2002

In July 2002, an Action Plan for the project was agreed, funding for session work identified, and the Agency Awareness Programme for schools and youth clubs was established. Ten two-hour group work sessions were planned, to incorporate up to 10 children per group in four sessions per week during term-time, initially for children between the ages of 5 and 13. The Children’s Intervention Project works mainly with children aged 9–13 years old although Sure Start’s involvement has, naturally, focussed on working with very young children. It is currently concentrating on working with children in the Sure Start crèche who display any kind of behaviour that might indicate that they have experienced, or are living with, domestic violence, and on enabling staff to respond appropriately. Sure Start aims to train all nursery and playroom staff in ‘positive behaviours’ working, to help children to understand and express emotion.
One of the members of the CHIP team visited a local secondary school council (constituting elected pupils) to talk about domestic violence, and received a wholly positive response. Pupils were keen to understand the meaning and impact of domestic violence and how to support their peers. At time of interviews, there was discussion of proposed projects with schools, youth clubs and playgroups.

5. Achievements and challenges
This report has focused on the domestic violence programme from its inception to January 2003. It is a very ambitious project and during that time Rosehill-Littlemore Sure Start faced a number of challenges to the development of the programme. Many of these challenges arose as a direct consequence of the increased sensitivity of Sure Start staff to the impact of domestic violence. They were concerned about their ability to give local individuals and families the support they needed.

5.1 Raising awareness
Obstacles to raising awareness through the community response statement
The Community Response Statement was agreed in July 2001 but, unfortunately, there were some obstacles to ensuring its wide dissemination amongst local organisations.

There were problems in identifying, making and developing links with other organisations that could provide appropriate services. Persuading them to display posters and leaflets about domestic violence was particularly difficult. The local housing office publicly displayed the Statement, so affirming its commitment, but other organisations did not follow suit. While they supported the sentiment contained in the Statement, they said that they were wary of the potential demands on their already overstretched time and resources.

Another, perhaps more complex, problem was that although Sure Start staff were committed to the Statement, they were still uncertain in their knowledge and understanding of domestic violence and this affected their confidence in responding to questions which might be raised by organisations they approached.

“I think it’s because it’s still generally...not so easy to talk about, and organisations take on the same sort of stance as the culture that they’re part of, and so we...essentially we collude with it...One of the main reasons that [people] have been loathe to get involved is that...they do think ‘well, it’s a private thing’ and what happens between two consenting partners is...nothing that we should get involved in, and it’s something that we don’t talk about...it’s something to be ashamed of, so they feed into all of that stuff that makes women find it difficult to talk about because ‘it’s a shameful thing’, and it would be like putting up posters about child abuse.” DV2

Pressure on staff time within Sure Start was another very important factor in the poor circulation of the Statement at the beginning, although it was fully disseminated within the community during 2003.

5.2 Working with perpetrators
One of the aims of Sure Start’s domestic violence work outlined in the policy document was to ‘work with violent people to increase public safety’.

15
However, up to January 2003 there had not been any direct work with perpetrators of domestic violence. When a known perpetrator and abused partner accessed Sure Start services, staff were mindful to provide positive role modelling for both parties, but did not feel able to address domestic violence openly. It was said, however, that anger management sessions were available for anyone who needed them, irrespective of gender, and bearing in mind that issues of confidentiality prevents the naming of perpetrators, this had the advantage of not identifying them. While a male member of staff at Sure Start was regarded as a useful role model, there seemed to be some ambivalence in the perception of men as a risk or a resource (Featherstone, 2001).

5.3 Screening
Some staff members remained unsure about how to respond when they suspected that violence was occurring within a family that they were working with, or how to provide support if approached by a woman seeking help. Most felt it was important to ask about domestic violence when appropriate but there was a lack of consensus about how to approach the subject. Some took a no-nonsense attitude:

“That’s what it’s about, how to ask questions and how to listen. Because we’ve all had conversations with [other staff members] about asking those questions: how do you do it? Sometimes it’s about not faffing around but just saying ‘has he hurt, has he hit you?’ But it’s being brave enough to say.”

DV1

However, another staff member felt that others were less willing to ask the questions or acknowledge what might be happening:

“I think it’s at different levels with lots of people. People who say… won’t need to have conversations like that with people.”

DV1

Research in health care settings shows that women do not disclose domestic violence because they are not routinely asked about it, but on the other hand, screening questions may be harmful unless handled sensitively (Richardson, 2001, and others). There was much discussion amongst the staff over whether they should screen parents about their experience of domestic violence as a matter of policy.

5.4 Training
Screening had become a central feature of the guidelines and training developed by the facilitator and it was one of the most challenging issues that arose during the training sessions. Some staff were uncomfortable with the prospect of asking such difficult questions; others felt that further training might be required. There was an agreed need to develop more sensitive practices and strengthen the support and safety planning for women suffering domestic violence. While the initial training may not have gone according to plan, it has been a vital first step.

Listening skills training
Listening skills training took place during a staff Away Day, but this was after the domestic violence awareness training session. The facilitator suggested that a sound base of listening skills training for all staff prior to the domestic violence awareness training would have made the sessions more effective.
Training issues were reviewed as part of the Working Group’s Action Plan in early 2002, although no training in listening skills had taken place by the time of the interviews for this study (January 2003). However the Sure Start Director has reported that since January 2003, the staff have been given the opportunity to take part in an off-site listening skills training course, as well as an on-site listening skills workshop. Another training session on listening skills is planned for the first Away Day in 2004.

Sure Start provides support during staff supervision sessions for those dealing with families experiencing domestic violence, and the Working Group carries out ongoing assessment of the policy and its implementation.

6. Successes – The impact of the domestic violence programme

The Domestic Violence Programme has achieved much during the relatively short time it has been in action. It has succeeded in the first tasks it set itself of raising awareness and developing a community response. It has also succeeded in developing a forum in which people working on domestic violence can co-ordinate and make best use of the services they offer.

“Posters and everybody talking about it does have an impact in terms of culture and what’s acceptable or not.” DV2

6.1 The Play

The play, Love Me Tender, was a very effective way of raising awareness of domestic violence and brought important social issues to the public domain. The use of drama was viewed very positively by participants and reached many more people in Oxford.

“Theatre is an extraordinary, effective way of bringing issues to light.”
(Sure Start Programme director, Love Me Tender video)

“Very powerful for participants and audience [...] more than drama therapy [...] broader because it’s looking at collective issues in a community or society and how we can deal with victims and perpetrators.” (Programme director, Love Me Tender video)

There are now 20 copies of the video of the play available on loan from the Sure Start Family Centre. A leaflet and card accompany the video. These provide information about domestic violence and the support that is available through Sure Start and the local community. Eight of the videos have been sold and the rest have been borrowed 26 times, mainly during October and November.

These are impressive achievements which need to be followed up with ongoing awareness raising. It can be difficult to keep up the momentum generated by large-scale events like the play. A cast member who is also a local parent received plenty of positive feedback from other local parents who had seen the performance or video, but stressed the importance of the ongoing work that Sure Start are doing.

“I think it makes a difference at the time, and you know when people see it they feel, I don’t know, somewhat guilty and they get involved and then a couple of weeks later it’s ‘oh, I don’t think I’ll go to that meeting this week’. And I know we all do it, I mean in this day and age with our lifestyles and school runs and whatever, we all kind of tend to
join these things and then don’t go back, but I think there should be 
some sort of core group that keep it up, and keep it going, and say 
that men or women don’t have to take that abuse.” DV4.

6.2 Staff training
The programme has offered training to staff and this was both useful and 
appreciated. However it also highlighted a need for more basic training than 
had been anticipated. During the interviews it was made clear that some staff 
were still uncomfortable with asking questions about domestic violence and 
would need more training and support to achieve this. This is hardly surprising 
because the challenges of overcoming social and cultural barriers of a lifetime 
should not be underestimated. In this respect it is important to celebrate what 
has been achieved.

6.3 Support for parents
This report covers the first year of the community response to domestic 
violence and it is clear that the services that were available were well received 
by parents and perceived to be effective.

One parent who had lived in a violent relationship for many years was 
enormously grateful for the support she received from Sure Start. She singled 
out the co-ordinated nature of the services and the links with the counselling 
services as vitally important in helping an individual break free from a violent 
relationship.

“I think Sure Start should be signposting like they are, basically. You 
know, the counselling thing up there is excellent, that is so good to 
have locally free of charge. A crèche that is accessible is brilliant. But I think that when it comes to police or council, I mean I 
know we have got the Portakabin who do sort of housing rights stuff like that, but if they did have something accessible there then it would have to be all in one rather than sort of having to go to the different 
agencies. I mean if they had the resources up there, you know, that would be brilliant I don’t think I’ve ever gone up there 
with a problem and not been given a hand with how to deal with it, so 
I think with their resources that’s the best they can do really, and 
thumbs up for the counselling, it’s brilliant.” DV4

“To have everything in one place, so that everyone knows the whole 
story, rather than somebody who’s got a broken jaw having to go and 
explain everything over and over again.” DV4

6.4 Accessibility of services
One local parent thought that the provision of 24 hour help was very 
important.

“Obviously to be accessible 24 hours, because people don’t always 
get beaten up between 9 and 3. You want somebody there to pick up 
the phone that can help you after the Family Centre’s closed, you 
know. And I know people say they’re in the offices until kind of 6, 7 
oc’clock, but somebody with a newborn baby might have to flee their 
house at 1 in the morning and I just think as somewhere to approach the Family Centre would be a lot nicer than going to, say, 
a solicitor or the police or the doctors or whatever.” DV4
6.5 Record keeping
A system of notification of incidents of domestic violence has been set up which may in the long term provide a system for monitoring the impact of the problem. Notification rates will need to be reliable before this approach is seen as robust.

7. Where Next?
7.1 Further training for staff
At the time that the interviews for this report took place, staff identified a crucial need for further training in listening skills and assertiveness and it was suggested that training about general communication would naturally address many of the difficulties that staff experienced in dealing with domestic violence. The facilitator of the domestic violence training also viewed ongoing training and support for staff as vital as the initial awareness training.

“You train them in what they’re supposed to be doing now in terms of asking questions, and [providing] support, but then they’ll need support in terms of supervision in order to come back and say ‘well, what were the problems’; ‘why was it difficult to ask?’.” DV2

“It’s training around the policy process, it’s about the process that you’d always need to be attending to, to make sure that it is working and what do we need to change, so it wouldn’t just be straight training but it would be, you know, meetings to thrash things out to see what isn’t working and what is working.” DV2

The support that Sure Start provides for staff, and the continued evaluation of the domestic violence policy within the Working Group, are essential for the effectiveness of Sure Start’s domestic violence programme to be maintained. The awareness-raising work is hugely important.

“I believe it can only be positive. I think the more people are aware of it, which are able to talk about it, who are aware of the complexities, the better.” DV2

For this to happen it was vital that staff understood what they were promoting and so the onus was on the Domestic Violence Working Group to clearly establish responses to potential questions which might face Sure Start staff. Once this issue was addressed, and staff felt fully equipped to promote the Statement, the Working Group would be able to organise a campaign of dissemination that could be shared by staff throughout Sure Start. All those involved would need to dedicate some time to identify organisations who could be encouraged to make a commitment of support for the Sure Start Statement, to identify appropriate individuals with whom to communicate, and to arrange necessary meetings. Then it might be possible for the statement to become established in the wider community.

7.2 More advertising
A local parent suggested that more advertising about domestic violence might be beneficial:

“Just be more accessible and to be well advertised as well. You know, if they did that kind of thing as well, for it to be well advertised not just in playgroups but everywhere where people will see it.” DV4
The members of the Working Group recognised that responsibility for dissemination of the Domestic Violence Programme must be shared by Sure Start staff and began to reassess how to get the community statement “out there”:

“I think if everybody identified two organisations, or it’s actually about buildings <<PAUSE>> in the area that everybody goes to, that are used <<PAUSE>> those committees <<PAUSE>> if we [each] did one or two of those then we can have it sorted” DV1

It was felt that this advertising could lead amongst other things to greater take up of the counselling services already available in Rose Hill-Littlemore Sure Start and could be helpful to people experiencing domestic violence.

7.3 Developing the use of resource material
The most effective way to reduce the impact of domestic violence on children and the whole family in the long term must be through education throughout the entire community. Members of the Working Group considered running short workshops with groups of young people, perhaps using the Love Me Tender video. The video of the play is an excellent resource as it generates discussion. It could be used in a number of settings (for example, further education colleges and secondary schools), either shown in its entirety, or using the briefer trailer clips, which easily generate conversation amongst viewers.

However the question of how the video of the play might be best used is still being discussed. Staff were keen for it to be used in teaching and training, both by Sure Start and by other organisations. Promotional ideas included contacting every Sure Start in the country and advertising it in the national press. No decisions had been taken at the time of publication of this report.

7.4 Increased collaboration between agencies
Given the pivotal role that health visitors and midwives play in working with those living with domestic violence, and the community approach that Sure Start is advocating, it would be beneficial for local health workers and Sure Start staff to work as closely as possible together to tackle this issue. It was suggested by one health professional that this was not happening and that closer collaboration was needed:

“They need to make a much better connection with the generic workers who are working in the area and pull them, you know, make them feel part of it and give them some more support” DV2

However others disagree and there is evidence of growing collaboration, for example between local health visitors via the Family Forum in relation to specific families. Another example of increased collaboration is that the lead health visitor in Sure Start heads the Public Health Practitioner Development Working Group (a sub-group of Oxford City PCT health visitor forum). Health visitors are also invited to other Working Groups. While there are differences of opinion amongst the Sure Start staff over how much collaboration is taking place, it is very important to acknowledge that it is happening and that inter-agency working relationships and structures are being established.

There is a multi-agency funded countywide domestic violence co-ordinator post but the reorganisation of the health authorities at local level resulted in the loss of a specialist post in domestic violence within the PCT. While the lost
post did not impact directly on Sure Start, there were fears that ‘domestic violence will fall off the agenda’ (taken from the minutes of the Children’s Intervention Project meeting, 2/12/02). According to one person interviewed in this study, domestic violence has been squeezed into already overloaded work schedules and it is important for the agencies to collectively address the need for the creation of a local co-ordinating post which has domestic violence work as its priority. This needs to be tackled if the work is not to lose momentum as it appears to be critical to its success.

More links could be forged with agencies out of area. Women In Need Gaining Strength (WINGS) are a group of women based in Blackbird Leys (a neighbouring deprived estate) who have had experience of living in violent relationships, and who provide support for other local women. It is likely that the Domestic Violence Working Group and WINGS could provide useful support for each other, especially regarding training for local parents.

7.5 Further development of services

Further development of services to support children who have experienced domestic violence is needed. This is likely to involve further training for staff working in the crèche in the identification of children, and more session provision to help the children identified either in groups or one to one.

Domestic violence is born out of domestic violence and is perpetuated in intergenerational cycles. Preventive approaches need to include relationships education and conflict management skills for parents and for children whose family backgrounds have taught them that it is appropriate to resolve conflict with violence. These skills are part of many of the parenting programmes that are available in Oxford, some of which are running in Rose Hill-Littlemore Sure Start. School-based programmes like Family Links help children develop conflict management skills which may enable them to offer a different experience of relationships to their future partners and children than they experienced as children.

Conclusions and Recommendations

This report has focused on the years of the community response to domestic violence in Rose Hill-Littlemore Sure Start and it is very important to acknowledge that this response is continually evolving. The impact of work done during this evaluation period may not be discernible until later. For example, the programme director is clear that the 2003 staff training resulted in increased awareness of the issues, and that this in turn is leading to increased disclosure from families experiencing domestic violence. Sure Start is investigating how it can support families to support other families in a way that strengthens the whole community. A local policy and strategy framework has been formulated and there is evidence of multi-agency working at an organisational and case level. Closer relationships have been built with the local housing office, which now takes a more sympathetic approach to these situations and has signed up to the Statement.

The way forward is to consolidate the work already begun and ensure that domestic violence awareness remains high on the staff and community agenda through provision of training, continued promotion of multi-agency working and further development of services.
This report has recorded the vital first steps towards creating a community response to domestic violence. Responding to deeply ingrained problems like domestic violence takes time and there is still much to be done, but it is important to celebrate what has been achieved in these initial steps and to commend the effort and commitment of Sure Start staff which has made them possible.
Appendix

HEALTH & SAFETY IN SURE START

‘Working to give local children the best start in life’

Section 5: HOME VISITING

For the guidance of Home Visitors:

5.1 There will be a Safety Book in each office with personal contacts, for you to sign out for mobile phone and diary of visits, together with the time you expect to be back and for you to sign back in. Individuals will take responsibility for ensuring that someone within the team or friends/family knows whereabouts and contact details and to log off with them. Anyone within Sure Start Team will be available to provide back up if requested and available.

5.2 Always carry an identifying tag, attack alarm and mobile phone.

5.3 Be careful about security, if you feel at all uneasy do not enter house, or if having already entered, then make a reason to leave, e.g. to make a phone call.

5.4 If you feel uneasy about any animal in the home, ask for it to be put into another room.

5.5 Be courteous at all times. Remember you are a guest in people’s homes.

5.6 Caution is needed when drinking hot drinks in the presence of young children.

5.7 Relay any concerns to your line manager and to colleagues.

5.8. If you are unsure about a home visit and would like someone to accompany you to a particular visit, speak to your line manager who will make the appropriate arrangements or ask someone to ring you while you are there and agree a prearranged code.
5.9. Home visitors will receive suitable training concerning home visiting and dealing with difficult situations.

5.10 If you have concerns about particular events or behaviour, you do not have a mandate to address them at the time, unless there are child protection concerns. Always discuss any concerns as soon as possible with your line manager and if they are not available report child protection issues to the local Children Protection Assessment Team (Tel: xxxxxx). It is possible to directly contact the Assessment Team or the Social Services Out of Hours Emergency Duty Team (Tel xxx) about the concerns for advice in the absence of a line manager (and refer to Sure Start Children Protection and Policy).

5.11 Ensure access to exits (sit near door, exit not blocked).

5.10 Carry out observational risk assessment in relation to home.

5.13 Sharing information – information should be shared within the team and with others in the Sure Start area if there are known risks in working with a family.

5.14 Remember that risk assessments are personal to each individual and should be drawn up accordingly – what is troubling to one person may not be to another, and the whole team should be sensitive to this.
Bibliography


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This Sure Start is supported by local parents and community groups, Home-Start, The Ark - NCH, East and South Oxfordshire Community Education Centre, Family Links, Family Nurturing Network, Rose Hill and Donnington Advice Centre, Relate, OxPip, PEEP, the ISIS Centre, Oxford City Council, Oxfordshire County Council, Oxfordshire Community NHS Trust, Oxford Radcliffe Hospitals NHS Trust, Oxford University Health Service Research Unit, and Oxford University Department of Social Policy and Social Work.

For more information about the local evaluation or this report please contact Tameron Chappell at Health Services Research Unit, University of Oxford, Old Road Campus, Old Road, Headington, Oxford, OX3 7LF.

Reports are also available to view or download at www.hsr.u.ox.ac.uk