

Gloucestershire Domestic Abuse Needs Assessment 2021



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1.Introduction

Domestic abuse as part of wider ‘violence against women and girls’ is a major global public health issue and a violation of human rights. Currently it is estimated to impact 30% of the global female population in their lifetime and as many as 38% of the world’s homicides of women are thought to be perpetrated by intimate partners¹.

Whilst domestic abuse is known to impact individuals regardless of their gender, ethnicity, age, sexuality, socio-economic background and religion, it is well understood as a gendered crime, impacting women and girls most significantly worldwide. The World Health Organisation (WHO) note that ‘Gender inequality and norms on the acceptability of violence against women are a root cause of violence against women’ in which domestic abuse is a feature.

Whilst domestic abuse is best understood as a dynamic of power and control, intimate partner and sexual violence is the result of a range of factors occurring at an individual, family, community and wider societal level that interact with one another; these factors (both for victimisation and perpetration) include²:

- lower levels of education;
- a history of exposure to child maltreatment;
- witnessing family violence;
- antisocial personality disorder;
- harmful use of alcohol;
- harmful masculine behaviours, including having multiple partners or attitudes that condone violence;
- community norms that privilege or ascribe higher status to men and lower status to women;
- low levels of women’s access to paid employment;
- low level of gender equality (discriminatory laws, etc.);
- past history of exposure to violence;
- marital discord and dissatisfaction;
- difficulties in communicating between partners;
- male controlling behaviours towards their partners.

Whilst domestic abuse is very much understood as a gendered crime, there is recognition, particularly at a national level that domestic abuse can and does impact on men as well as women, impacting over 7,000,000 men in the past year³. It is important therefore to consider domestic abuse as endemic across all sections of society.

The impact of domestic abuse is significant and in some instances life changing or life ending in its most severe form. It can impact on an individual’s health, mental health, finances, general self-esteem and wellbeing, education, employment and integration into society.

Not only does domestic abuse come at a significant cost to those who experience it, but it also incurs extreme economic costs, with a significant impact particularly on public services. In the year ending

¹ World Health Organisation: [Violence against women \(who.int\)](https://www.who.int/violence-injury-prevention/publications-and-reports/world-report-2019)

² World Health Organisation: [Violence against women \(who.int\)](https://www.who.int/violence-injury-prevention/publications-and-reports/world-report-2019)

³ Office for National Statistics (ONS): Domestic abuse victim characteristics, England and Wales: year ending March 2020

March 2017, Home Office Research⁴ estimated that the cost of domestic abuse was £66 billion in England and Wales, broken down by:

- Economic impact through lost output due to time off work/reduced productivity: £14 billion
- Health services in responding to the consequences of domestic abuse: £2.3 billion
- Police in responding to domestic abuse related crimes: £1.3 billion
- Physical and emotional harms incurred by victims: £47 billion

In addition to these costs, the provision of domestic abuse support services often falls to government departments and at a local level, local authorities and commissioning bodies.

In recent years, the profile of domestic abuse has increased significantly, not least due to the introduction of the Domestic Abuse Bill and the well-publicised impact of the Covid-19 pandemic on those experiencing domestic abuse. It is hoped that this higher profile will support local areas and organisations in continuing to raise awareness of domestic abuse, and improve localised responses. Most significant however, is the need to ensure that the local strategy and responses to domestic abuse are based on need and reflect the voice of the survivor.

1.1 Definition of domestic abuse

The Cross-Government Statutory Definition was introduced as part of the Domestic Abuse Act in 2021⁵. Domestic Abuse is defined as;

Behaviour of a person (“A”) towards another person (“B”) is “domestic abuse” if— (a) A and B are each aged 16 or over and are personally connected to each other, and (b) the behaviour is abusive.

Behaviour is “abusive” if it consists of any of the following:

- a) *physical or sexual abuse;*
- b) *violent or threatening behaviour;*
- c) *controlling or coercive behaviour;*
- d) *economic abuse (any behaviour that has a substantial adverse effect on B’s ability to— (a) acquire, use or maintain money or other property, or (b) obtain goods or services)*
- e) *psychological, emotional or other abuse;*

It does not matter whether the behaviour consists of a single incident or a course of conduct.

Definition of ‘Personally Connected’: two people are “personally connected” to each other if any of the following applies:

- they are, or have been, married to each other;
- they are, or have been, civil partners of each other;
- they have agreed to marry one another (whether or not the agreement has been terminated);
- they have entered into a civil partnership agreement (whether or not the agreement has been terminated);
- they are, or have been, in an intimate personal relationship with each other;
- they each have, or there has been a time when they each have had, a parental relationship in relation to the same child;

⁴ Oliver, R, Alexander, B, Roe, S and Wlasny, M (Jan 2019) The economic and social costs of domestic abuse. Research Report 107. Home Office. [The economic and social costs of domestic abuse \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/798447/research-report-107-the-economic-and-social-costs-of-domestic-abuse.pdf)

⁵ [Domestic Abuse Act 2021 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/2021/32/section/1)

- they are relatives;
- A is a carer for B who is a disabled person.

Children (anyone under the age of 18) as victims of domestic abuse is defined as;

A child who (a) sees or hears, or experiences the effects of, the abuse, and (b) is related to A or B (as per the above definition of DA).

A child is related to a person if— (a) the person is a parent of, or has parental responsibility for, the child, or (b) the child and the person are relatives.

1.2 Scope and purpose of the needs assessment

As part of the introduction of the Domestic Abuse Act in 2021, a statutory duty was placed on Tier one Local Authorities to provide support to victims of domestic abuse and their children in domestic abuse safe accommodation. Part of this statutory duty also included the requirement to conduct a local needs assessment that specifically explores the level of local need for support services within safe accommodation for victims of domestic abuse. This needs assessment will then be expected to support decision making around commissioning and the development of a newly required 3 year domestic abuse local strategy.

Whilst the statutory requirement for a local needs assessment is solely focused on accommodation based support services, local areas have been given the option of widening the scope to take a more holistic view. Given Gloucestershire's current strategy and commissioning model for domestic abuse, and that a formal needs assessment has not been conducted since 2013, a local decision was made to conduct a broad scope domestic abuse needs assessment covering both accommodation and community based support.

To inform the development of the domestic abuse Commissioning Framework, a local domestic abuse data project was completed in 2017. The scope for this needs assessment is therefore based on the requirements laid out by the MHCLG⁶ and the previous data project conducted to inform the commissioning framework.

The Gloucestershire Domestic Abuse needs assessment 2021 will consider data from years 2017/18, 2018/19 and 2019/20. In addition, data from 2020/21, where available, will be considered to reflect on the impact of Covid-19 locally.

Any variance in reporting periods used by different data sources will be clearly indicated.

With the new statutory definition of domestic abuse in mind, the areas under scope for this needs assessment are:

- Domestic Abuse
- Honour Based Violence and Forced Marriage
- Child to parent abuse
- Family violence
- Stalking

As in the statutory definition, the needs assessment will focus primarily on those aged 16+.

The needs assessment will consider:

⁶ Ministry of Housing, Communities and Local Government

- What is the national context surrounding domestic abuse?
- What is the picture of domestic abuse in Gloucestershire?
- What is the current provision of accommodation based services in Gloucestershire?
- What is the current provision of community based services in Gloucestershire?
- How does Gloucestershire currently respond to perpetrators of domestic abuse?
- What is the impact of domestic abuse on children in Gloucestershire?
- What is the picture of stalking, Honour Based Violence (HBV) and Forced Marriage (FM) in Gloucestershire and what is our local approach?
- What is the view of those with lived experience of domestic abuse and the general community?

Outside of the scope:

Sexual Violence: whilst domestic abuse and sexual violence are linked, a separate needs assessment on sexual violence has been commissioned by the Sexual Violence Partnership Board. Data submitted into the domestic abuse needs assessment may include links to sexual violence where offences have been flagged as ‘domestic abuse related’ however this needs assessment will not fully explore sexual violence. Both the domestic abuse partnership and sexual violence partnership will ensure the sharing of learning and joint working wherever necessary.

Female Genital Mutilation: whilst FGM is often connected to HBV/FM, strategically, FGM in Gloucestershire is responded to within the remit of child protection.

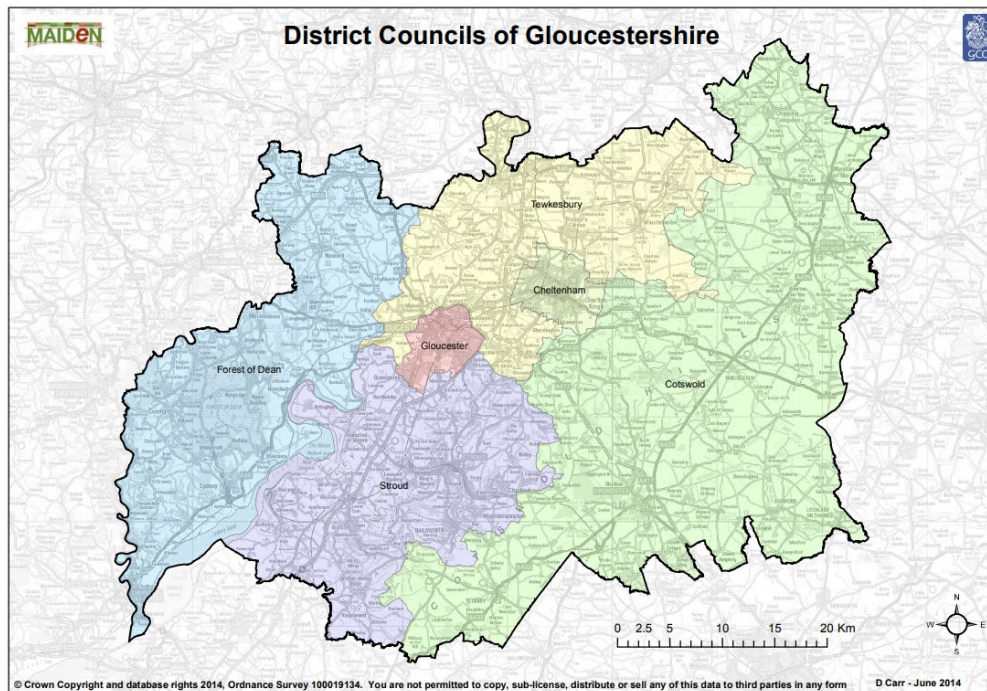
Modern slavery and female prisoners: whilst forming part of the wider ‘Violence against Women and Girl’s agenda’, these areas are currently considered locally under the modern slavery partnership and criminal justice board respectively. The DA local partnership board will however consider future links with these groups.

Teenage relationship abuse: whilst in Gloucestershire we recognise teenage relationship abuse, under the age of 16, and provide services to address this, plans to explore more widely the impact of such abuse will be considered at a later date and be separate from this needs assessment.

1.3 About Gloucestershire⁷

Gloucestershire is an English county situated at the northern edge of the south west region of the United Kingdom. It covers an area of 1,025 square miles including the largest Areas of Outstanding Natural Beauty in the country. Essentially a rural county, it has been known since Roman times for farming, forestry and horticulture with an industrial history featuring the wool trade. Gloucester and Cheltenham lie at the heart of the county, linked by the A40 and either side of the M5. There are good connections to the south west via the M5, to the north via the M5/M6 and M42, Wales using the A40 and the M4 and to London and the south-east using the A40 and the M4. The Fosse Way runs through the county north to south taking travellers from Cirencester to Stow on the Wold and Moreton in Marsh whilst the Ermin Way crosses east to west from Cirencester to Ross.

⁷ Source: <https://inform.gloucestershire.gov.uk/media/2099157/current-population-of-gloucestershire-overview-2019.pdf>



Population and Age Structure

The population of Gloucestershire was estimated to be around 637,070 in 2019, representing a rise of approximately 3,512 people since 2018. This is the equivalent to a growth of 0.6% in population from 2018 to 2019, which was higher than the rate of growth for England and Wales which stood at 0.5%.

The district of Gloucester has the largest population in the county and the Forest of Dean has the smallest. From 2018 to 2019, Tewkesbury had the fastest rate of growth in the county (2.6%) whilst Cheltenham had the lowest rate with a decline of -0.7%.

The proportion of children and young people aged 0-19 (22.4%) in Gloucestershire was slightly higher than that for the South West but lower than that for England and Wales. The working age population (aged 20-64) made up 56.0% of the population in Gloucestershire in 2019. This was slightly higher than the figure for South West, but lower than that for England and Wales. The proportion of people aged 65 or over (21.6%) was lower than that for South West but higher than that for England and Wales. The percentage of the population of working age in Gloucestershire at 56.0%, is nearly 2 percentage points lower than that of England and Wales, and has declined from 56.2% last year. The 90 years and over population continues to increase despite a decline in births in England and Wales 90 years ago; this reflects improvements in mortality going back many decades.

Deprivation

Gloucestershire is among the 20% least deprived local authorities in England. Life expectancy for both men and women is higher than the England average. However, there are notable variations across the county, from rural communities to urban towns. Notably, good health and wellbeing is not evenly distributed across the county and pockets of deprivation do exist, particularly in the main urban areas and in some of the market towns. Life expectancy is 8.4 years lower for men and 5.4 years lower for women in the most deprived areas of Gloucestershire than in the least deprived areas.

The following chart shows the proportion of the population in each deprivation quintile for Gloucestershire and each of the six districts in the county.

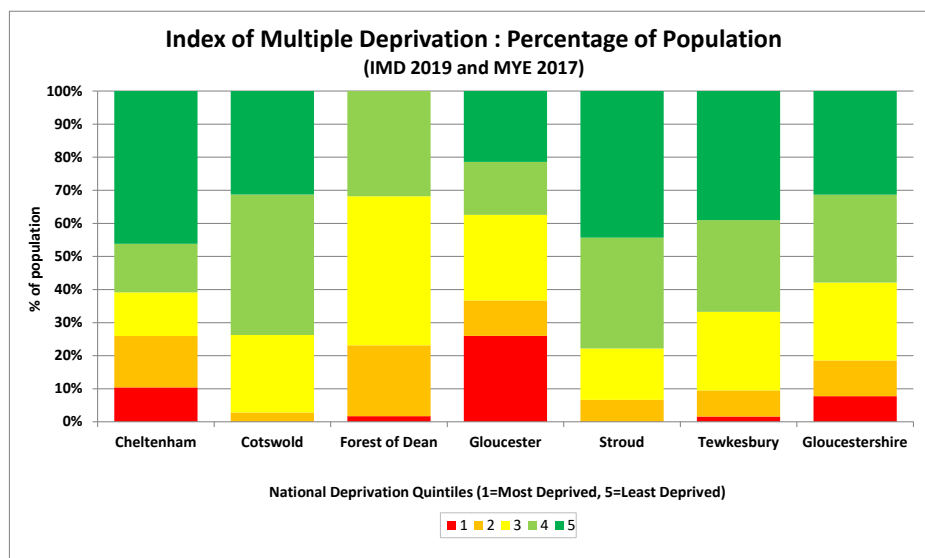


Figure 1: Overall Index of Multiple Deprivation 2019 – Percentage of Population by Quintile and District

Protected Characteristics and Groups with Particular Needs

Ethnicity

The population of Gloucestershire has become increasingly diverse in recent years. During the period 2001-2011, the percentage of the local population from non-white ethnic groups rose from 2.8% to 4.6%; while this has increased it remains lower than the national average (14.1%).

In terms of absolute numbers the biggest growth from 2001-2011 was among those classed as 'White-British' (up by 11,500). The proportion the county's population belonging to the 'White-Other' category was 3.1% in 2011, twice the proportion seen in 2001. This increase has been linked to inflow from Eastern European countries.⁸ There were also increases in the number of residents from Asian backgrounds (Other Asian (up 2,300) and Indians (up 2000)).

There are variations in the ethnicity profile between the districts. Gloucester has the highest Black and Minority Ethnic (BME) population at 10.9%, Cheltenham also has a higher proportion of people from Black and Ethnic Minorities (5.7%) compared to the county average (4.6%).

Religion

According to the 2011 Census, 63.5% of residents in Gloucestershire were Christian, making it the most common religion. This was followed by no religion which accounts for 26.7% of the total population. Gloucestershire has a higher proportion of people who are Christian, have no religion or have not stated a religion than the national figures. In contrast it has a lower proportion of people who follow a religion other than Christianity, which reflects the ethnic composition of the county.

Marital status, civil partnerships and sexual orientation

Gloucestershire has a lower proportion of people who are single or separated when compared to the national figure. In contrast the proportion of people who are married, divorced or widowed exceeds the national figures. According to the 2011 census, 30.5% of Gloucestershire residents are

⁸ Inform Gloucestershire 2016 <https://inform.gloucestershire.gov.uk/Resource.aspx?ResourceID=406>

single and have never married or registered a same-sex civil partnership; 50.2% are married; 0.3% are in a registered same-sex civil partnership; 2.3% are separated but still legally married or still legally in a same sex civil partnership; 9.5% are divorced or formerly in a same sex civil partnership which is now legally dissolved; 7.2% are widowed or a surviving partner from a same sex civil partnership.

There is no definitive data on sexual orientation at a local or national level. Estimates used by the Department of Trade and Industry in 2003 and quoted by Stonewall, suggest around 5-7% of the population aged 16+ are lesbian, gay or bisexual (LGB). If this figure were applied to Gloucestershire it would mean somewhere between 26,100 and 36,500 people in the county are LGB. A more recent estimate from the 2015 ONS Annual Population Survey (APS) suggests that 2.3% of the UK population is LGB: if this figure was applied to Gloucestershire it would mean that there are approximately 12,000 LGB people in the county⁹.

People with long-term conditions and disabilities

Long-term conditions (LTC)¹⁰ are more prevalent in older people and in more deprived groups. People living with a long term condition are more likely to use health and care services. According to the 2011 Census 16.7% of Gloucestershire residents reported having a long-term limiting health problem; this was below the national figure. At a household level, 24.2% of households had at least one person with a long-term limiting health problem or disability; slightly lower than the figure for England of 25.7%. It is estimated that in 2020, there are 63,271 people aged 65 and over in Gloucestershire living with a long-term health condition. This is projected to rise to 80,600 in 2030¹¹.

Learning and Physical disabilities

Estimates suggest that in 2020 there were approximately 12,004 people aged 18 years and over living with a learning disability in Gloucestershire¹², equating to 2.3% of the adult population. Of this group, about 2,459 (about 20.5%) are estimated to have moderate or severe learning disabilities. In 2020, 21,847 working age adults (18-64 years) in Gloucestershire are predicted to have impaired mobility moderate physical disability, while 19,103 are predicted to have a moderate or serious personal care disability¹³.

Homeless Households

Homelessness is both the cause and consequence of many other problems. The impact of homelessness on health can be stark; Homeless people are over twice as likely to report a physical health issue than the general public¹⁴. Local authorities have a duty to secure suitable accommodation for the statutory homeless¹⁵; this is referred to as acceptances.

⁹ Gloucestershire Equality Profile 2021

¹⁰ **LTCs**- conditions that cannot, at present, be cured, but people living with these conditions can be supported to maintain a good quality of life

¹¹ Projecting Older People Population Information (POPPI): <https://www.poppi.org.uk> (accessed 05/07/2021 - day-to-day activities are limited a little or a lot)

¹² Projecting Older People Population Information (POPPI): <https://www.poppi.org.uk/> (Assessed 05/07/2021)

¹³ Projecting Adult Needs and Service Information (PANSI): <http://www.pansi.org.uk/index.php?pageNo=388&areaID=8260&loc=8260> (Assessed 05/07/2021)

¹⁴ Homeless, Health Needs Audit 2016 <http://www.homeless.org.uk/our-work/resources/homeless-health-needs-audit> (assessed 4.9.17)

¹⁵ **Statutory homelessness**: refers to people who meet specific criteria set out in legislation. Broadly speaking, if they are unintentionally homeless, fall within a specified priority need group and do not have accommodation that they have a legal right to occupy, which is accessible and physically available to them and which it would be reasonable for them to continue to live in.

During the 2019/20 financial year, 3,141 households were initially assessed as homeless or threatened with homelessness and owed a statutory homelessness duty in Gloucestershire¹⁶. This equates to a rate of 11.5 per 1000 households which is lower than the national rate of 12.3. The highest rate of statutory homelessness in Gloucestershire is highest in Gloucester with a rate of 25.3, almost double the national rate. All other districts have statutory homeless rates below the Gloucestershire and England rates.¹⁷

Gypsies and travellers

Gloucestershire County Council has four residential sites for the travelling communities. There are also many privately owned sites particularly in the Tewkesbury and Gloucester areas. The Gloucestershire County Council owned sites are based in:

- Willows, Sandhurst Lane, Gloucester
- Cursey Lane, Elmstone Hardwicke
- Showborough, Twyning near Tewkesbury
- Culkerton, near Tetbury

Armed Forces Community

In Gloucestershire the serving Armed Forces community is predominantly based at three locations: Beachley Barracks, in the Forest of Dean, Imjin Barracks, on the outskirts of Gloucester, and Duke of Gloucester Barracks, on the outskirts of Cirencester. Serving personnel may reside at these locations; however, there are significant numbers that live in other locations across, or outside of, the County. Estimates published by the Ministry of Defence, based on the Annual Population Survey, put the figure for the number of Veterans located in the County at around 47,000 for 2015. Census data from 2011 lists the number of “associated members” (spouses, partners or children) to members of the Armed Forces living in the County at 2,779. However, this figure is intuitively low and anecdotal evidence suggests that the actual figure may be significantly higher than this.

Refugees and Asylum Seekers

At the end of March 2021, there were 116 asylum seekers and their dependents living in Gloucestershire, the majority (94) of which were in Gloucester. National evidence also shows that asylum seekers have specific mental and physical health issues and that they can experience difficulties accessing healthcare in the UK.¹⁸

Health Outcomes

Overall, the health of people living in Gloucestershire is better than the England average. Life expectancy for both men and women is higher than the England average; however life expectancy is 8.4 years lower for men and 5.4 years lower for women in the most deprived areas of Gloucestershire than in the least deprived areas¹⁹. The three biggest killers in Gloucestershire (and nationally) are cancer (25.7%), circulatory disease (28%) and respiratory diseases (14.6%)²⁰.

¹⁶ Ministry of Housing, Communities and Local Government, Homelessness statistics <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>

¹⁷ *Ibid.*

¹⁸ Asylum statistics (UK Parliament) <https://commonslibrary.parliament.uk/research-briefings/sn01403/>

¹⁹ PHE Public Health Profiles 2019 - <https://fingertips.phe.org.uk/static-reports/health-profiles/2019/E10000013.html?area-name=Gloucestershire>

²⁰ https://www.gloucestershire.gov.uk/media/1521071/health_overview_for_gloucestershire_2017-2.pdf

Mental Health

In 2018/19, 10.2% of patients (aged 18+) in Gloucestershire were recorded in GP Practice as having depression²¹ and 9% of patients (18+) responding to the GP patient survey reported having a 'long-term mental health problem'. This is lower than the England average of 10.7% of patients recorded as having depression and 9.9% as having a 'long term mental health problem'²².

Dementia

The ageing population is a factor for the rising number of dementia diagnosis in the county; estimates suggest that in 2021 there are 10,076 people aged over 65 living with dementia²³.

Lifestyle risk factors

Lifestyle factors are a significant factor in someone's risk of developing a LTC or dying prematurely. Smoking, excess consumption of alcohol, poor diet, low levels of physical activity and obesity are established risk factors for many chronic diseases.

- Smoking in Gloucestershire has steadily declined over the past years; The 2019 Annual Population Survey records prevalence of smoking in adults in the county (13%) as better than the national rate (England – 13.9%)²⁴.
- The percentage of physically active adults in Gloucestershire is better than that nationally, however only 70.8% meet the recommended levels of physical activity²⁵.
- Alcohol-related hospital admissions are one indicator of the extent of harmful drinking in a community. Until 2012/13, the rate of alcohol-related hospital admissions in Gloucestershire had been steadily rising for 4 years, and was considerably higher than both the regional and national benchmarks. However, the most recent year of data (18/19) shows no statistical significant difference to the regional and national rate²⁶.
- the percentage of adults' classified as overweight or obese (61.4%) is similar to that regionally and nationally²⁷

The NHS Health Check is a national health check-up program designed to spot early signs of stroke, kidney disease, heart disease, Type 2 diabetes or dementia. There have been almost 51,000 people who have received an NHS health check in the county over the last 5 years (2016/17 to 2020/21)

²¹ PHE Mental Health and Wellbeing JSNA - <https://fingertips.phe.org.uk/profile-group/mental-health/profile/mh-jsna/data#page/1/gid/1938132922/pat/6/par/E12000009/ati/102/are/E10000013/iid/93495/age/164/sex/4/cid/4/tbm/1>

²² PHE Common Mental Health Disorders - <https://fingertips.phe.org.uk/common-mental-disorders#page/3/gid/8000026/pat/44/par/E40000006/ati/154/are/E38000062/iid/358/age/164/sex/4/cid/4/tbm/1/page-options/car-do-0>

²³ Inform Gloucestershire - <https://www.gloucestershire.gov.uk/media/2105981/equality-profile-2021.pdf> (accessed 08.07.21)

²⁴ PHE Fingertips - <https://fingertips.phe.org.uk/search/smoking#page/4/gid/1/pat/6/par/E12000009/ati/102/are/E10000013/iid/92443/age/168/sex/4/cid/4/tbm/1/page-options/car-do-0>

²⁵ PHE Fingertips - <https://fingertips.phe.org.uk/physical-activity#page/4/gid/1938132899/pat/6/par/E12000009/ati/402/are/E10000013/iid/93014/age/298/sex/4/cid/4/tbm/1/page-options/car-do-0>

²⁶ PHE Fingertips - <https://fingertips.phe.org.uk/search/Alcohol%20related%20hospital%20admissions#page/4/gid/1/pat/6/par/E12000009/ati/102/are/E10000013/iid/91414/age/1/sex/4/cid/4/tbm/1/page-options/car-do-0>

²⁷ PHE Fingertips - <https://fingertips.phe.org.uk/search/obese#page/4/gid/1/pat/6/par/E12000009/ati/102/are/E10000013/iid/93088/age/168/sex/4/cid/4/tbm/1/page-options/car-do-0>

with the take up rate over this time being 26.7% which is considerably lower than the national rate²⁸.

The National Diabetes Prevention Program commenced roll-out in Gloucestershire in mid-2017. Patients considered at risk of diabetes from priority practices (those with high recorded prevalence of diabetes) were the first to be invited to take part in the NDPP, with a view to roll-out countywide. Prevalence of diabetes in Gloucestershire is currently 6.8% (2019/20), this is statistically similar to the regional rate and lower than the national rate²⁹.

Sexual Health

The Under 18s Conception rate in Gloucestershire is lower than the regional and national rate³⁰. The rate of chlamydia³¹ detection in young people (15-24year old) is higher than the rate of detection in England³²; the rate of diagnoses of all new sexually transmitted infections (excluding chlamydia in under 25 year olds) e.g. syphilis, gonorrhoea, genital herpes etc. among people accessing specialist and non-specialist sexual health services in Gloucestershire however is lower than the rate of diagnoses in England between 2012 and 2019³³. HIV testing coverage in Gloucestershire is lower than the national rate³⁴.

Illicit drug use and alcohol misuse

Using nationally representative estimates from the England and Wales Crime Survey, we can estimate that within Gloucestershire, an estimated 32,438 adults aged 16-59 years of age will have used an illegal drug within the last year with cannabis being the most frequently used drug and an estimated 7,247 will have used an illegal drug more than once in the last month (EWCS/ONS 2020). 12,362 people aged 18-64 within Gloucestershire are predicted to be dependent on drugs in 2020 (PANSI), this includes an estimated 2,849 heroin and/or crack users (LJMU 2019) who experience the most severe drug dependence.

In 2014 (latest figures available) within Gloucestershire a total of 2,154,286 litres of pure alcohol were purchased, this equates to a 4.4 litres of pure alcohol per adult (18+) within the county, which is lower than both the South West and England averages. However whilst the amount of alcohol purchased within the county is lower than both the regional and England averages, the rate of abstinence in the County is lower (12.8%) than that of England (15.5%) and the proportion of the Gloucestershire adult population who consume more than the recommended weekly limit of fourteen units of alcohol is higher (29.2%) than both the South West (26.8%) and England (25.7%)

²⁸ PHE Fingertips - <https://fingertips.phe.org.uk/profile/nhs-health-check-detailed/data#page/4/gid/1938132726/pat/6/par/E12000009/ati/202/are/E10000013/iid/91112/age/219/sex/4/cid/4/tbm/1/page-options/car-do-0>

²⁹ PHE Fingertips - <https://fingertips.phe.org.uk/search/diabetes#page/4/gid/1/pat/6/par/E12000009/ati/102/are/E10000013/iid/241/age/187/sex/4/cid/4/tbm/1/page-options/car-do-0>

³⁰ PHE Fingertips - <https://fingertips.phe.org.uk/profile/child-health-profiles/data#page/4/gid/1938133228/pat/6/par/E12000009/ati/302/are/E10000013/iid/20401/age/173/sex/2/cid/4/tbm/1/page-options/car-do-0>

³¹ Chlamydia is the most common diagnosed bacterial STI in England, with rates substantially higher in young adults

³² PHE Sexual and Reproductive Health Profiles - <https://fingertips.phe.org.uk/search/chlamydia#page/4/gid/1/pat/6/par/E12000009/ati/102/are/E10000013/iid/90776/age/156/sex/4/cid/4/tbm/1/page-options/car-do-0>

³³ PHE Sexual and Reproductive Health Profiles - <https://fingertips.phe.org.uk/sexualhealth#page/4/gid/8000035/pat/6/par/E12000009/ati/202/are/E10000013/iid/91306/age/182/sex/4/cid/4/tbm/1>

³⁴ PHE Fingertips - <https://fingertips.phe.org.uk/search/hiv#page/4/gid/1/pat/6/par/E12000009/ati/102/are/E10000013/iid/91525/age/1/sex/4/cid/4/tbm/1/page-options/car-do-0>

averages. Whilst heavier drinking is more prevalent within the county for the year 2016-17 the estimated prevalence of alcohol dependence within the County at 1.07 individuals per 100 population, equating to an estimated 5,297 individuals experiencing some degree of alcohol dependence and this rate is lower than the England average (1.35 individuals per 100 population) (PHE 2018).

According to findings from the 2018 England and Wales Crime Survey (EWCS/ONS 2019), victims of domestic abuse were more likely to report that they believed the offender was under the influence of alcohol (16.6%) rather than illicit drugs (10.6%). In the same survey victims were more likely to report that the offender was under the influence of alcohol or illicit drugs than they themselves. However, 8.1% of victims reported that they were under the influence of alcohol and 1.7% reported that they were under the influence of illicit drugs the last time they suffered abuse.

Strong links have been found between alcohol use and the occurrence of intimate partner violence and evidence suggests that alcohol use increases the occurrence and severity of domestic violence (WHO 2006). Gadd et al. (2019) highlights that the relationship between substance use and domestic abuse is not straightforward and they are used in variable quantities and combinations fostering a range of effects—including docility as much as aggression—that are contingent upon the user's experience of them, prehistory of use, mood and the context in which the consumption takes place (Gadd, D. et al. 2019).

2. National Approach to Domestic Abuse

2.1 Violence Against Women and Girls

Since 2010 the UK Government's approach to domestic abuse has been defined by its 'Violence against Women and Girls (VAWG)' agenda. Originally developed in 2010, the approach has focused on the proposition that 'no woman should live in fear of violence, and every girl should grow up knowing she is safe, so that she can have the best start in life'³⁵.

VAWG 2010 focused on making these issues 'Everybody's business' and introduced new offences of stalking, forced marriage and coercive control as well as protective orders for domestic abuse and Female Genital Mutilation (FGM).

The approach to VAWG continued with the Ending Violence against Women and Girls strategy 2016-2020³⁶ and most recently, Tackling Violence against Women and Girls 2021-2024³⁷, which focuses on:

- **Prioritising prevention:** Looking to tackle the root causes of VAWG, improving public awareness to reduce the stigma and considering options for early intervention.
- **Supporting victims:** Ensuring victims and survivors are at the heart of the Government's approach to tackling VAWG, increasing the awareness of available support, ensuring more tailored support services are available and ensuring a joined up cross-Government approach to tackle differences in support across the country.
- **Pursuing perpetrators:** Focus on perpetrators of all forms of VAWG being brought to justice, breaking the cycle of reoffending, improving the criminal justice response and changing perpetrator behaviour through early intervention.
- **A stronger system:** Looking to ensure a cross-system approach with clear pathways and a strengthened approach to commissioning that ensure the right services are in place to reduce a 'postcode lottery'.

Alongside the introduction of the VAWG strategy for 2016-2020, the Government released the National Statement of Expectations (NSE)³⁸ in 2016. This set out the expectations for local areas in their response to VAWG, ensuring approaches were collaborative, robust and effective and that victims and survivors can access the help they need.

The NSE outlined that the following were expected from local strategies and services:

1. Put the victim at the centre of service delivery;
2. Have a clear focus on perpetrators in order to keep victims safe;
3. Take a strategic, system-wide approach to commissioning acknowledging the gendered nature of VAWG;
4. Are locally-led and safeguard individuals at every point;
5. Raise local awareness of the issues and involve, engage and empower communities to seek, design and deliver solutions to prevent VAWG.

Whilst it is expected that local areas will still be measured against the NSE, a refresh is expected in support of the new VAWG strategy 2021-2024. At the time of writing, the Government are in the process of also developing a National Domestic Abuse Strategy.

³⁵ Call to end violence against women and girls 2010. UK Government

³⁶ Ending Violence against Women and Girls, Strategy 2016-2020. UK Government

³⁷ [Tackling violence against women and girls strategy - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/consultations/tackling-violence-against-women-and-girls-strategy)

³⁸ Violence Against Women and Girls, National Statement of Expectations. December 2016. UK Government

2.2 Domestic Abuse Act 2021³⁹

In spring 2018, the Government conducted a public consultation on Transforming the Response to Domestic Abuse. The response to the consultation and a draft Domestic Abuse Bill were published in January 2019, setting out 123 commitments, both legislative and non-legislative, designed to:

- promote awareness of domestic abuse;
- protect and support victims and their families;
- transform the justice process to prioritise victim safety and provide an effective response to perpetrators;
- drive consistency and better performance in the response to domestic abuse across all local areas, agencies and sectors.

In December 2019 the Government was elected with a manifesto commitment to “support all victims of domestic abuse and pass the Domestic Abuse Bill” originally introduced in the previous Parliament.

The DA Bill had its first reading in the House of Commons in July 2019 and its second reading in October 2019 before the dissolution of Parliament. The Bill was reintroduced in March 2020 and completed its Commons stages in July 2020.

The Domestic Abuse Act received Royal Assent on 29th April 2021.

The Domestic Abuse Act comprises of 7 parts:

Part 1: Definition of domestic abuse

The Act creates, for the first time, a cross-government statutory definition of domestic abuse.

The definition of domestic abuse is in two parts. The first part deals with the relationship between the abuser and the abused. The second part defines what constitutes abusive behaviour.

The Government sets out two criteria governing the relationship between the abuser and the abused. The first criteria states that both the person who is carrying out the behaviour and the person to whom the behaviour is directed towards must be aged 16 or over. Abusive behaviour directed at a person under 16 would be dealt with as child abuse rather than domestic abuse. The second criteria states that both persons must be “personally connected”. The definition ensures that different types of relationships are captured, including ex-partners, family members and child to parent abuse (CPA).

The definition also changes financial abuse to economic abuse to recognise behaviours that interfere with an individual’s ability to acquire, use and maintain economic resources such as money, transportation and utilities.

Part 2: Domestic abuse commissioner

The Act establishes in law the office of the Domestic Abuse Commissioner, to provide public leadership on domestic abuse issues and play a key role in overseeing and monitoring the provision of domestic abuse services in England and Wales.

The Commissioner will be tasked with encouraging good practice in preventing domestic abuse; identifying victims and survivors, and perpetrators of domestic abuse, as well as children affected by

³⁹ <https://www.gov.uk/government/collections/domestic-abuse-bill>

domestic abuse; and improving the protection and provision of support to people affected by domestic abuse.

The Act also places a duty on public authorities to cooperate with the commissioner, respond to recommendations made by the commissioner and to send conclusions of Domestic Homicide Reviews (DHRs) to the commissioner.

Part 3: Powers for dealing with domestic abuse

The Act introduces a new civil Domestic Abuse Protection Notice (DAPN) to provide immediate protection following a domestic abuse incident, and a new civil Domestic Abuse Protection Order (DAPO) to provide flexible, longer-term protection for victims.

The new DAPO will provide alternative application routes to victims other than the police, enabling specified third parties to apply for a DAPO directly to the family court.

The DAPO will impose both prohibitions and positive requirements on perpetrators. These could include prohibiting any form of contact with the victim and/or requiring the perpetrator to attend a behaviour change programme, an alcohol or substance misuse programme or a mental health assessment.

Part 4: Local Authority Support

The Act sets out the requirements of local authorities in providing support to victims, developing domestic abuse local partnerships and producing annual reports.

The Act will place a statutory duty on local authorities in England to provide support to victims of domestic abuse and their children in refuges and other domestic abuse safe accommodation.

Part 5: Protection for victims and witnesses in legal proceedings

The Act will enhance special measures directions in cases involving DA and prohibit cross-examination in person in family court proceedings.

The Act provides that victims of domestic abuse will also be automatically eligible for special measures on the grounds of fear or distress. This is also extended to civil and family court.

Part 6: Offences involving abusive or violence behaviour

The Act extends the remit of the offence of coercive and controlling behaviour to cover post-separation abuse.

It also introduces two new offences:

- Threats to disclose private sexual photographs and films with intent to cause distress
- Strangulation and suffocation

The Act will also enhance the criminal justice response to offences committed outside of the UK through extending extraterritorial jurisdiction.

The Act extends extraterritorial jurisdiction to other offences required by the Istanbul Convention, including murder and manslaughter in circumstances where the courts do not already have such jurisdiction and sexual offences where the victim of the crime is 18 or over.

Part 7: Miscellaneous and general

The Act will enhance the approach to management of offenders, provide guidance on police disclosures, grant secure tenancies in cases of DA, issue guidance about DA and develop regulations and outline financial provisions.

This includes commencing a three-year pilot of mandatory polygraph examinations on domestic abuse perpetrators released on licence identified as being at high risk of causing serious harm.

The Act will also

- Prohibit charging for the provision of medical evidence of domestic abuse
- Initiate a review of processing of victims personal data for immigration practices
- Report on the use of contact centres in England

2.3 Statutory Guidance Framework⁴⁰

The Domestic Abuse Act sets out the future approach to domestic abuse, with a clear statutory guidance framework in place. This guidance framework sets out the responsibilities for all statutory based services as well as employers, financial services and community/faith groups.

The aim of this guidance is to provide clear information on identifying and responding to domestic abuse; setting out the clear responsibilities placed on services in safeguarding and supporting victims. The guidance sets out clear duties for agencies to work together, ensure a focus on domestic abuse and ensure effective commissioning of services.

The framework will be a key component of future activity and planning in all local areas, including Gloucestershire to ensure local arrangements are in keeping with the statutory duties and ethos of the Domestic Abuse Act.

2.4 The Coordinated Community Response (CCR)⁴¹

The CCR has for a number of years been viewed as the best practice approach for local areas to respond effectively to domestic abuse. The model outlines the process for which work to tackle domestic abuse is integrated and managed across individual services, ensuring individual agencies work effectively to tackle domestic abuse as well as in clear partnerships.

The CCR includes the joint working model to address prevention, early intervention, dealing with crisis, responding to risk fluctuation, ensuring long-term recovery and safety for victims and their children. It promotes joint working across a wide range of services to ensure clear pathways and specialist support agencies and systems are in place for an overall effective response.

Standing Together Against Domestic Violence (STADV) are a national charity who have championed the CCR model for a number of years. They have developed 'In search of excellence', a guide for local areas to consider their local response against a range of key components that are required in order to achieve a successful CCR.

The key components of a CCR are outlined as follows:

1. Survivor engagement and experience

⁴⁰

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/896640/Draft_statutory_guidance_July_2020.pdf

⁴¹ In Search of Excellence: A refreshed guide to effective domestic abuse partnership work –The Coordinated Community Response (CCR). Standing Together against Domestic Violence. 2020.

2. Intersectionality
3. Shared vision and objectives
4. Structure and governance
5. Strategy and leadership
6. Specialist services
7. Representation
8. Resources
9. Coordination
10. Training
11. Data
12. Policies and processes

The CCR guidance will form a key part of Gloucestershire's local approach to domestic abuse. Appendix 1 outlines the local assessment against the key CCR components.

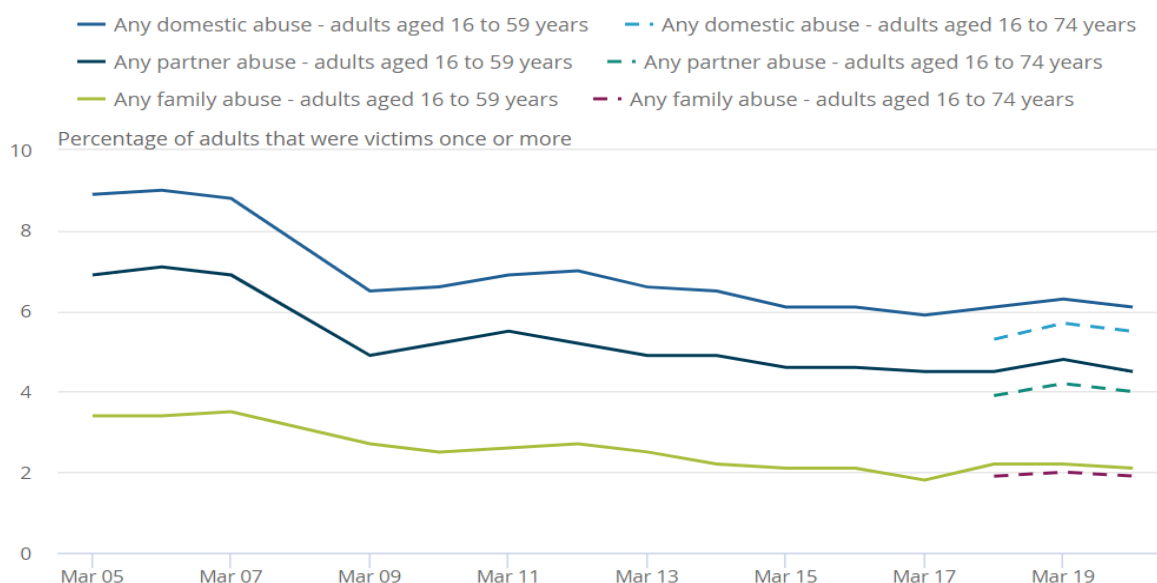
3. Prevalence of Domestic Abuse in England and Wales⁴²

The Crime Survey for England and Wales (CSEW) has been conducted since 1981, measuring crime by asking members of the public about their experiences of crime over the last 12 months. This data supports our national understanding of the prevalence of certain crimes, including domestic abuse.

The CSEW relies on the participation of those selected self-reporting their experiences of crime. Whilst the results are non-identifiable and confidential, sensitive issues such as domestic abuse and sexual violence may be underreported if the individual does not feel comfortable disclosing. Despite this, the CSEW does provide a reliable estimate of the prevalence of domestic abuse using a consistent methodology that is not affected by changes in recording practices and police activity, or by changes in the propensity of victims to report to the police.

Since 2005, the CSEW has reported a steady decline in the prevalence of domestic abuse, although not significant in more recent years. This is detailed as being linked mostly to a decline in partner abuse reported to the CSEW, decreasing from 6.9% to 4.5% from 2005-2020. Family abuse has also followed a similar trend. Prevalence over time is detailed in Graph 1. All data from the CSEW is statistically significant unless stated otherwise.

Graph 1: Prevalence of domestic abuse in the last year for adults aged 16-59 years and 16-74 years, England and Wales, year ending March 2005 to year ending March 2020.



The CSEW in April 2017 made changes to their upper age limit, from 59 to 74. When analysing data over a longer time period the ages of 16-59 continue to be used.

Despite this reduction in the prevalence of domestic abuse since 2005 it continues to have a significant impact on the population year on year. Data from the year ending March 2020 estimated that 5.5% of adults aged 16-74 experienced domestic abuse in the last year; this equates to 2.3 million people. There was no significant change in the prevalence of domestic abuse experienced in the year ending March 2020 compared with the year ending March 2019.

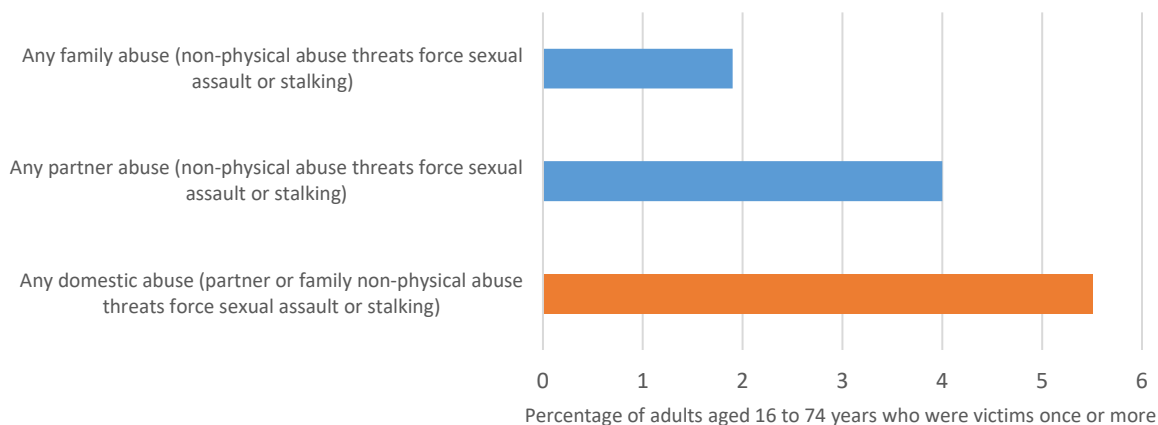
Whilst police reports of domestic abuse have increased during this time, with a 9% increase in domestic abuse recorded crimes from year ending March 2019 to March 2020, due to the lack of

⁴² Office for National Statistics (ONS): Domestic abuse prevalence and trends, England and Wales: year ending March 2020

change in prevalence data over this time period, the CSEW has indicated that police data increases may be linked to better crime recording and increased victim reporting.

The majority of domestic abuse reported through the CSEW is partner abuse, as detailed in Graph 2.

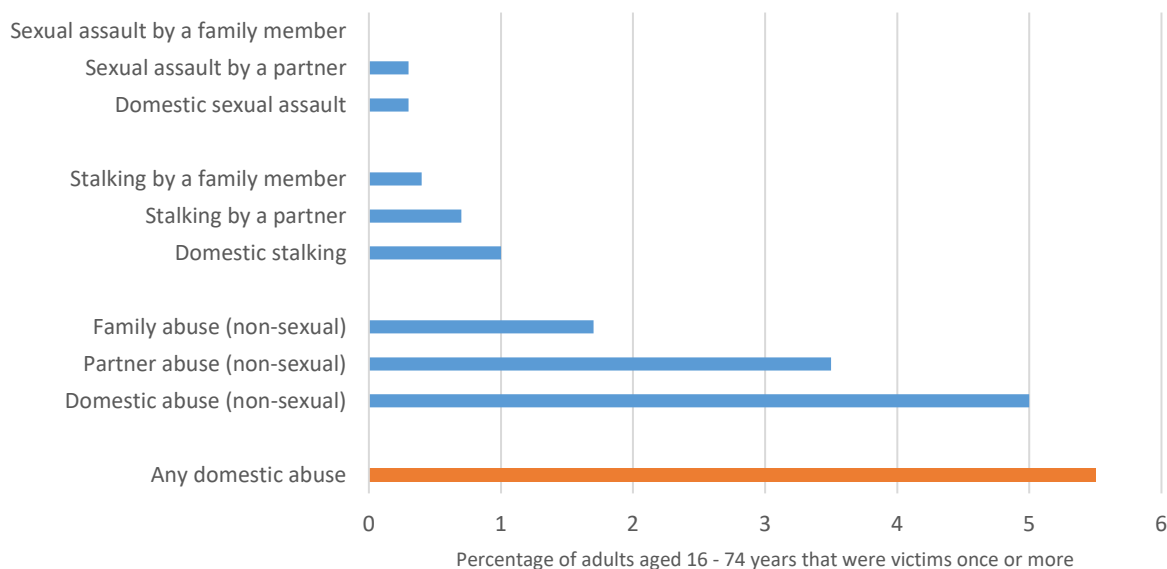
Graph 2: Prevalence of domestic abuse in the last year for adults aged 16 to 74 years, by perpetrator-relationship, England and Wales, year ending March 2020



Whilst the links between domestic abuse and sexual violence appear minimal in comparison to reported non-sexual abuse (less than 1% compared with 5%), it is important to note that reporting sexual violence can be difficult for victims and it is likely to be under-reported even via the CSEW, as is domestic abuse more generally.

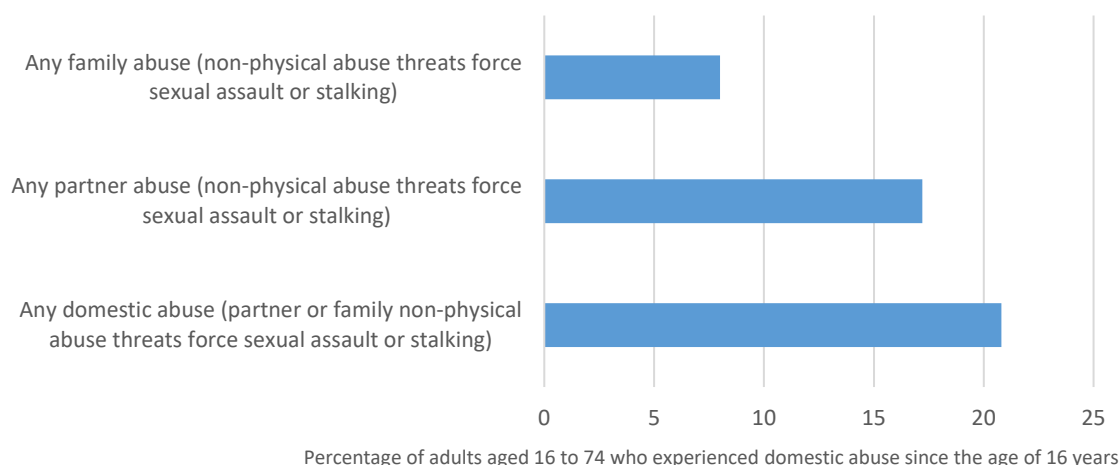
Graph 3 provides detail on the prevalence of domestic abuse by type of abuse.

Graph 3: Percentage of adults aged 16 to 74 years who have experienced domestic abuse in the last year, by type of abuse, England and Wales, year ending March 2020



The CSEW also considers the prevalence of domestic abuse experienced since the age of 16, with an estimated 8.8 million adults aged 16-74 years in this category. This equates to a prevalence rate of approximately 21 in 100 adults. Additionally, as detailed in Graph 4, 17.2% of adults had experienced partner abuse since the age of 16 years, and 8.0% had experienced family abuse since the age of 16 years.

Graph 4: Prevalence of domestic abuse since the age of 16 years for adults aged 16 to 74 years, by perpetrator-relationship, England and Wales, year ending March 2020



For those having experienced domestic abuse since the age of 16, as with the overall prevalence data, the majority reported non-sexual domestic abuse (19% of those reporting an experience of DA since the age of 16). 4% of adults reported domestic sexual assault having been experienced since the age of 16; it does however need to be considered that individuals may not feel comfortable reporting sexual assault, and may in some instances not recognise sexual violence within their abusive relationship.

3.1 Domestic Abuse Victim Characteristics (CSEW)⁴³

3.1.1 Age and Gender

The CSEW found that for the year ending March 2020, an estimated 1.6 million women and 757,000 men aged 16-74 years had experienced domestic abuse in the last year; this is a prevalence rate of approximately 7 in 100 women and 4 in 100 men.

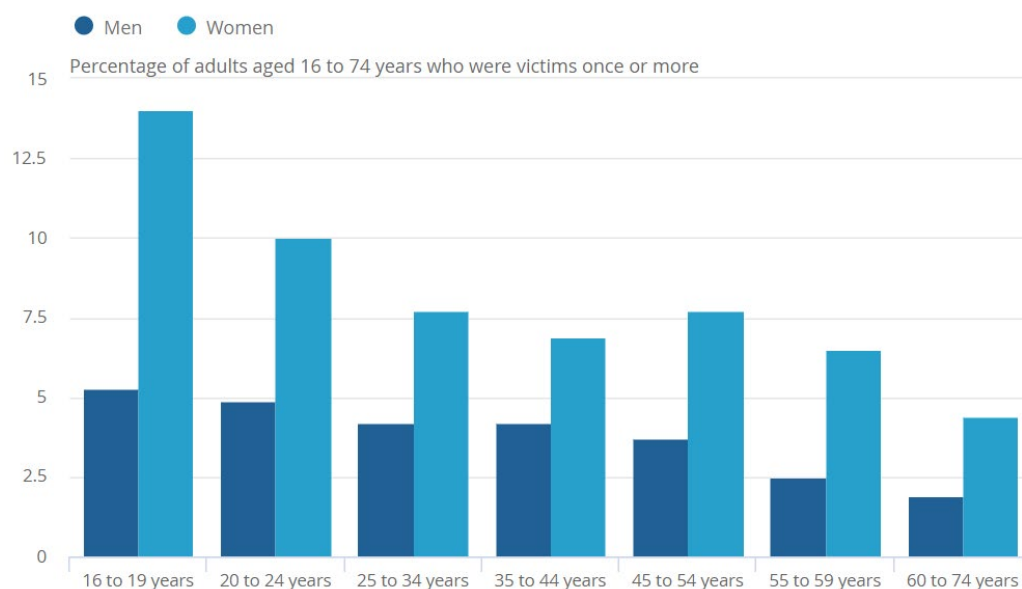
Women were found to significantly be more likely to be victims of each type of abuse⁴⁴ compared to men, with the exception of sexual assault by a family member in which there was no significant difference.

For the same time period the CSEW showed that women aged 16-19 years were significantly more likely to be victims of domestic abuse in the last year than women aged over 25. For men there were few significant differences by age; however those aged 55-74 were less likely to be victims of domestic abuse than any other age group. Graph 5 provides detail of the age breakdown for the year ending March 2020.

⁴³ Office for National Statistics (ONS): Domestic abuse victim characteristics, England and Wales: year ending March 2020

⁴⁴ Types of abuse include: DA non-sexual (both partner and family), DA stalking (both partner and family) and DA sexual (both partner and family)

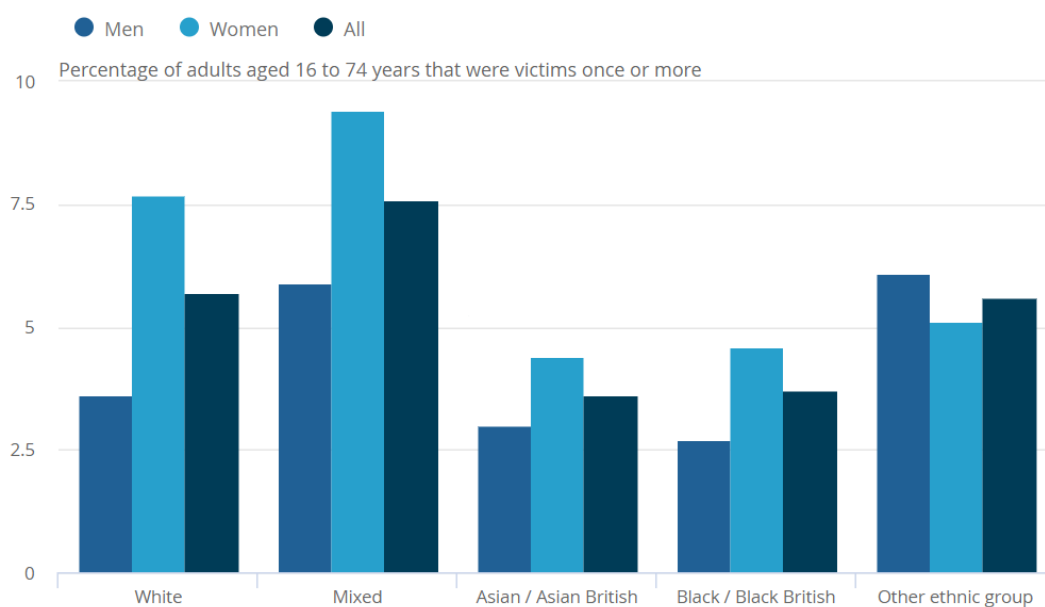
Graph 5: Prevalence of domestic abuse in the last year for adults aged 16 to 74 years by age and sex, England and Wales, year ending March 2020.



3.1.2 Ethnicity

When considering the ethnicity of victims of domestic abuse, the CSEW for the year ending March 2020 showed that those in the 'mixed' ethnic group were more likely to experience domestic abuse than any other ethnic group, as detailed in Graph 6.

Graph 6: Prevalence of domestic abuse in the last year for adults aged 16 to 74 years, by ethnicity and sex, England and Wales, year ending March 2020.



3.1.3 Marital Status

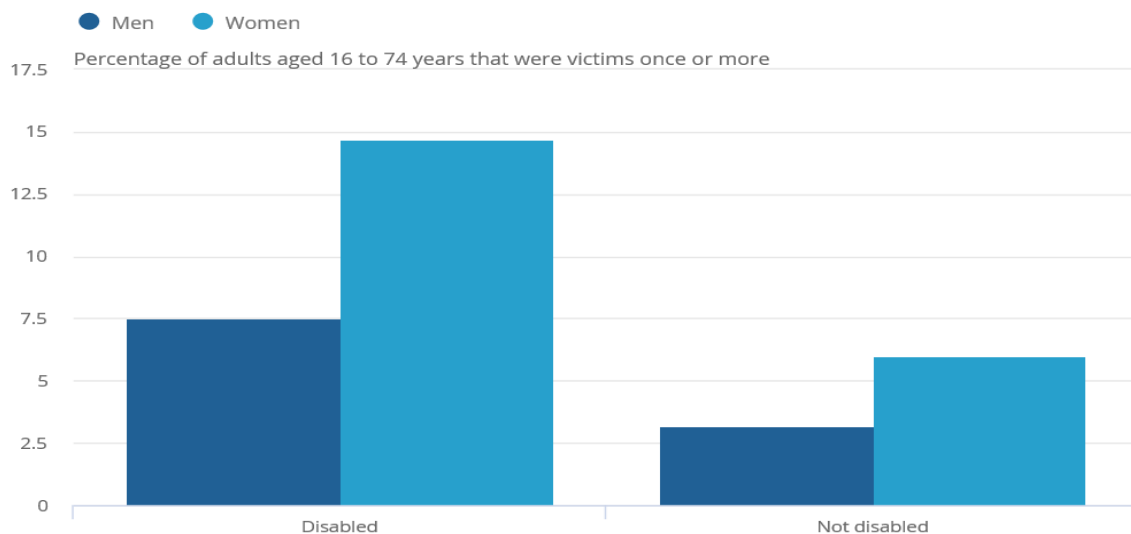
When considering the marital status of those who have experienced domestic abuse, the majority were found to be divorced or separated, with significantly higher levels of domestic abuse experienced in these categories compared with those who were married, cohabiting, single or widowed. This links strongly with risk assessments for domestic abuse where it is well known that

separation can escalate domestic abuse. It also defies the stereotype of domestic abuse, demonstrating that domestic abuse can continue and even begin at the point that an individual ends their relationship and is no longer living with their partner.

3.1.4 Disability

The CSEW also demonstrates that domestic abuse is strongly linked to other vulnerabilities, with those who identify as disabled being significantly more likely to experience domestic abuse, as illustrated in graph 7.

Graph 7: Prevalence of domestic abuse in the last year for adults aged 16 to 74 years, by disability and sex, England and Wales, year ending March 2020.



3.1.5 Indices of Deprivation⁴⁵

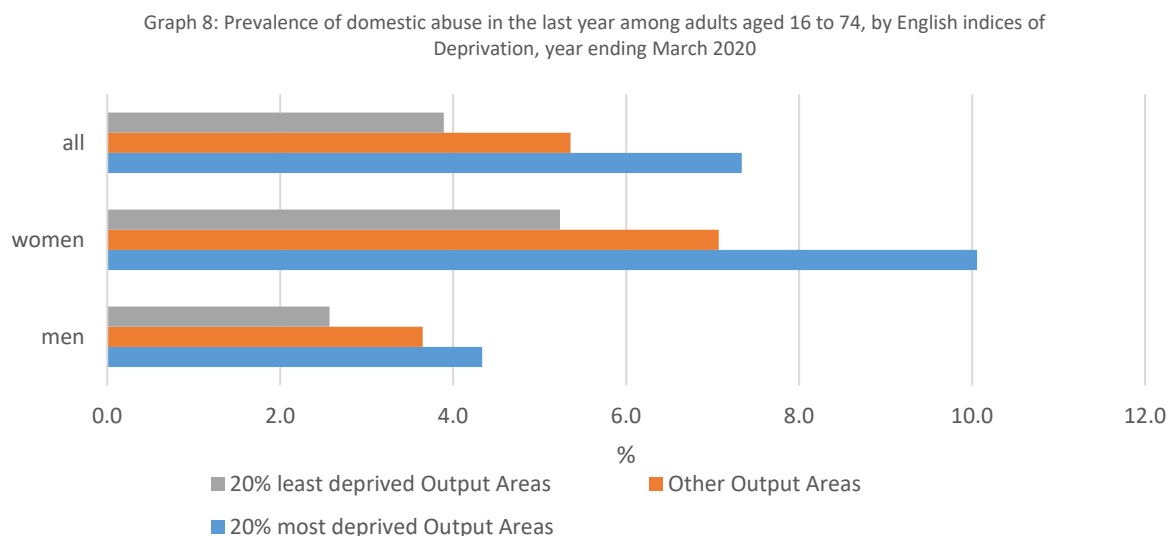
When considering the indices of deprivation, graph 8, provides clear insight into the social circumstances of those who report domestic abuse victimisation. The indices of deprivation are a unique measure of relative deprivation at a small local area level (Lower-layer Super Output Areas) across England. The Indices provide a set of relative measures of deprivation based on seven different domains, or facets, of deprivation:

- Income Deprivation
- Employment Deprivation
- Education, Skills and Training Deprivation
- Health Deprivation and Disability
- Crime
- Barriers to Housing and Services
- Living Environment Deprivation

As detailed in graph 8, female victims of DA, were significantly more likely to come from the 20% most deprived output areas; whilst this is the same for male victims, it is most significant for women. This is also consistent with the finding in the CSEW that shows the majority of females who identified as a victim of domestic abuse reported earning less than £10,400 (11.8% of women

⁴⁵ [English Indices of Deprivation 2019 FAQs \(publishing.service.gov.uk\)](#)

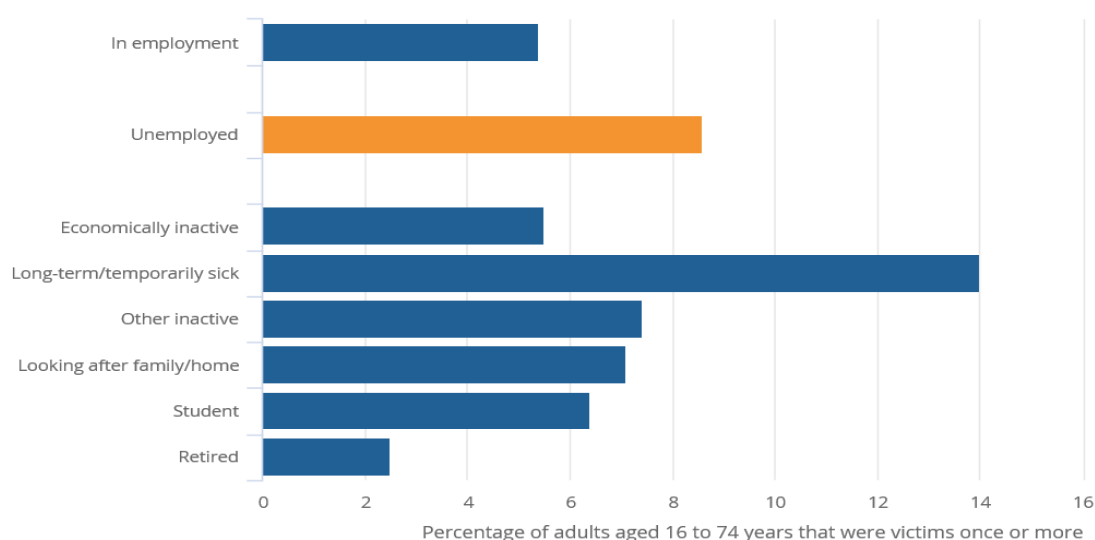
compared with 5.1% of men), and again, significantly more female victims were noted as living in social or private rented accommodation rather than owning their own home.



Consistent with the above findings, when considering the employment status of those who note an experience of domestic abuse within the last year, the CSEW finds that those who were unemployed were more likely to have experienced domestic abuse.

Significantly, a large proportion of this cohort were noted as being off work through long term or temporary sickness, demonstrating the huge impact that domestic abuse has on both victims and employers and the subsequent impact on the economy. Graph 9 provides more detail on the employment status of victims of domestic abuse for the year ending March 2020.

Graph 9: Prevalence of domestic abuse in the last year for adults aged 16 to 74 years by employment status, England and Wales, year ending March 2020



In addition, the CSEW identified that for each occupation type⁴⁶, with the exception of 'never worked' and 'long-term unemployed', women were more likely to have experienced domestic abuse

⁴⁶ Categories include: managerial/professionals occupations, intermediate occupations, routine and manual occupations, never worked and long term unemployed and full time students.

than men. This difference was most notable for full time students, where 10.5% of women were noted as having experienced domestic abuse in the last year, compared with 4.8% of men. The CSEW notes that many of these differences may also be linked to age, as detailed by graph 9, the vast majority of adults aged 16-74 who experienced domestic abuse in the last year were aged 16-19.

3.2 Impact on Children from CSEW

The impact of domestic abuse on children is well known, with one in seven children and young people under the age of 18 expected to have lived with domestic abuse as some point in their childhood⁴⁷. This is supported by the CSEW, with those victims aged 16-74 living in a single parent household more likely to have experienced domestic abuse in the last year than those living in no-children households. This finding was also consistent when compared to those living in a household with other adults and children; demonstrating the link to domestic abuse and being single or divorced as detailed above.

3.3 Police Recorded Crime in England and Wales⁴²

In the year ending March 2020, police forces in England and Wales (excluding Greater Manchester) recorded 1,288,018 domestic abuse-related incidents and crimes (an increase of 51,404 from the previous year). Of these incidents and crimes, 41% were not subsequently recorded as a crime, meaning 758,941 were recorded as domestic abuse-related crimes; a 9% increase in crimes from the year ending March 2019.

It is noted that this increase in police recorded incidents and crimes may be related to:

- Improvements in recording practices
- An increase in domestic abuse related incidents coming to the attention of police
- An increased willingness of victims to come forward and report domestic abuse.

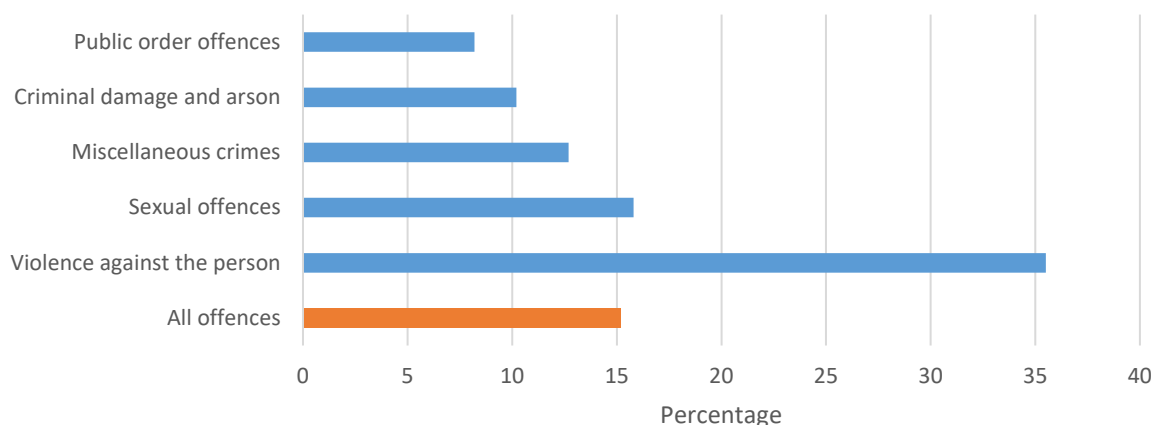
The vast majority of domestic abuse offences recorded by police are considered under the offence category 'Violence against the person', followed by 'sexual offences'; indicating the clear links between domestic abuse and sexual violence that were not demonstrated in the CSEW data.

The impact of domestic abuse is also clear, with 15% of all offences recorded by police being flagged as domestic abuse related.

Graph 10 provides detail on the proportion of domestic abuse offences against selected offence categories.

⁴⁷ Women's Aid: [Impact on children and young people - Womens Aid](#)

Graph 10: Proportion of offences recorded by the police that were flagged as domestic abuse-related, by selected offence groups, England and Wales (excluding Greater Manchester Police), year ending March 2020

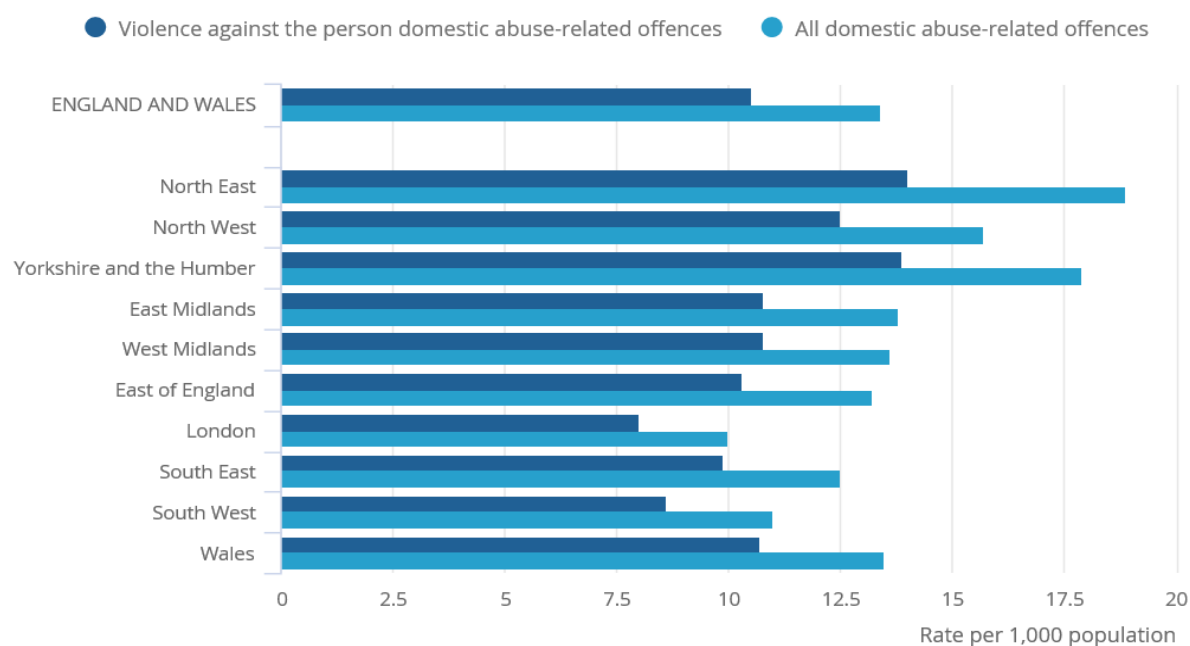


Whilst there is no crime of domestic abuse, in 2015 coercive or controlling behaviour became a criminal offence, providing an opportunity for victims of domestic abuse to report a key element of their abusive experience and for it to be treated as a crime in its own right.

In the year ending March 2020, 24,856 offences of coercive control were recorded by police in England and Wales (excluding GMP); this is a 49% increase from the year ending March 2019. It is likely that this increase can be attributed to improvements in police ability to recognise incidents of coercive control and using the law accordingly.

Police data on recorded crimes for the year ending March 2020 indicates that forces in the South West have one of the lowest rates of domestic abuse in the country, as detailed in graph 11.

Graph 11: Rate of domestic abuse-related crimes recorded by the police, by police force area, English regions and Wales, year ending March 2020.



The difference in these regional rates may be reflective of genuine differing rates across the country, it may however be linked to reporting of domestic abuse and crime recording by police forces.

3.4 Domestic Homicides⁴³

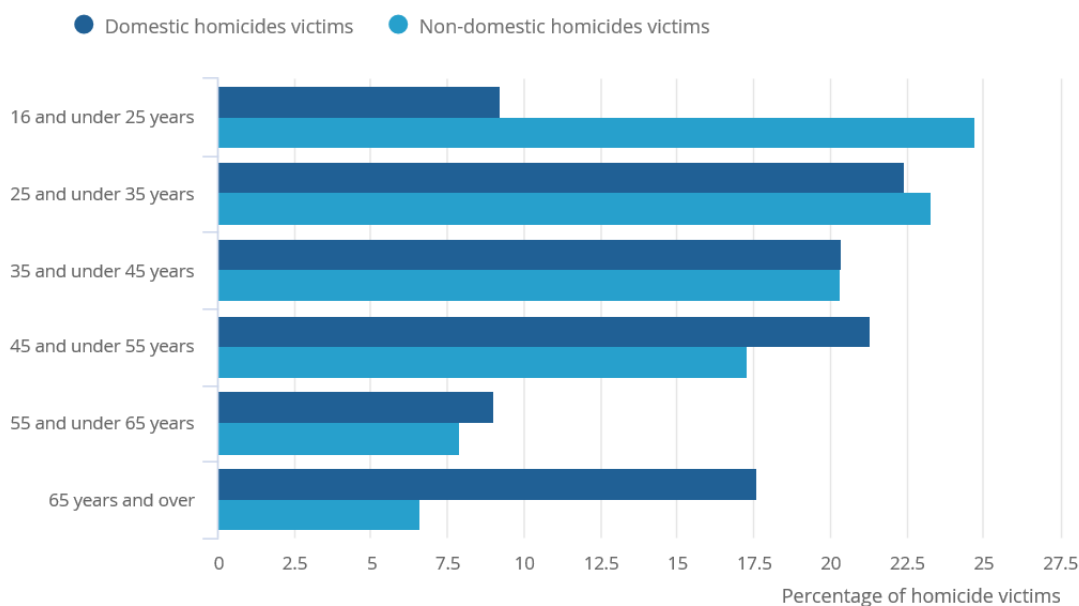
Police data nationally provides detail on the number of domestic homicides recorded, with 357 recorded in England and Wales between March 2017 and the year ending March 2019; this equates to approximately 3 domestic homicides per week in England and Wales and represents 19% of all homicides where the victim was aged 16+ years during this time period.

Domestic homicide data also indicates that 77% were female victims which is in stark contrast to non-domestic homicide data in which 87% were male; demonstrating that gendered nature of domestic homicide.

Alongside this, 96% of suspects for domestic homicide were male. In cases of male domestic homicide where 83 were recorded from March 2017 to year ending March 2019, 39 involved female suspects while 44 involved male suspects, indicating less gender difference for male domestic homicide than female domestic homicide; with only 4% of female domestic homicide involving a female suspect.

The highest proportion of domestic homicides victims were found to be aged 25-34 years, in contrast to non-domestic homicides where the majority of victims are aged 16-24. This is detailed in graph 12. The age range of the majority of domestic homicide victims is slightly higher than for the majority who identified having experienced domestic abuse in the last year within the CSEW; this may demonstrate an increase in risk as the abusive relationship continues or potentially a difference in the risk experienced by victims of domestic abuse based on their age.

Graph 12: Percentage of homicide victims by homicide-type and age, England and Wales, year ending March 2017 to March 2019.



As expected, 81% of domestic homicides from March 2017 to the year ending March 2020 involved suspects who were partners or ex-partner of the victim. This is in line with general findings on domestic abuse in which the majority of victims experience abuse from their partner or ex-partner.

4. Gloucestershire's Approach to Domestic Abuse

4.1 Local strategy and outcomes framework

Since 2014, the approach to domestic abuse in Gloucestershire has been developed alongside the sexual violence agenda.

The Domestic Abuse and Sexual Violence (DASV) Commissioning Strategy and Outcomes Framework (2014 – 2018) was due to be refreshed in 2018 but has remained the local strategic document whilst the county was awaiting the outcomes of the Domestic Abuse Bill.

The local vision set out in this strategy was that;

'Individuals, families and communities who are at risk of, or exposed to, domestic abuse and/or sexual violence are able to access information and support to minimise harm, and to maintain healthy relationships. Our commitment is to ensuring a zero-tolerance approach'

In order to support this local vision, three local strategic objectives were developed to outline the collective intentions of the domestic abuse and sexual violence partnership:

- Focus on early help programmes (alongside specialist services for victims) for the whole family affected by DASV, taking a risk reduction and recovery led approach to improving health and wellbeing, and reducing crime and disorder.
- Ensure health, social care, police and other professionals who are in contact with individuals and families vulnerable to DASV are confident and competent in their response to support them, creating environments for disclosure at all levels of contact.
- Provide a co-ordinated approach across partner agencies, aligning the commissioning and delivery of DASV services to ensure effective and efficient use of resources.

The strategy and outcomes framework has underpinned the local commissioning approach as well as local partnership actions. During this time the county has⁴⁸:

- Built a wide ranging community based support model of support for victims and perpetrators of DASV that is adaptive to changing demands and local needs
- Developed a local approach to respond to teenage relationship abuse
- Completed local assessments of data and service user engagement
- Developed a robust process for implementing and responding to Domestic Homicide Reviews (DHRs)
- Developed an annual approach to engagement and communications to raise awareness of DASV
- Produced guidance for professionals on how to identify and respond to DASV, stalking, Honour based abuse and teenage relationship abuse to ensure a collective and effective response
- Implemented a local DASV training pathway
- Developed a new approach to responding to stalking
- Increased the capacity of MARAC to ensure an effective multi-agency response to high risk victims of domestic abuse
- Developed a new partnership and strategic approach to sexual violence
- Developed Places of Safety

⁴⁸ This list is not exhaustive

- Developed a joint commissioning framework for domestic abuse

During the lifetime of this local strategy, the county has also developed its local approach to community safety, with the creation of Safer Gloucestershire in 2018. This countywide high level strategic group developed its four year strategy in 2019 in which DASV was identified as a key priority. The focus of Safer Gloucestershire has been to prioritise:

- Identifying and offering help earlier to victims and families affected by domestic abuse and sexual violence
- Supporting professionals from all organisations to support victims in coming forward
- Working together to make best use of resources

Safer Gloucestershire has also taken a key lead in governance and accountability in relation to the local approach to DASV, working in conjunction with the Health and Wellbeing Board as well as both children's and adults safeguarding boards.

4.2 Gloucestershire commissioning framework and current service provision

The Gloucestershire joint commissioning framework for domestic abuse was created in 2018 to improve joint commissioning and align current and future investment across the county and the spectrum of domestic abuse need. It is designed to allow commissioning partners to secure domestic abuse services as they are needed and:

- helps ensure a joined up approach by partners to tackling domestic abuse and in delivering the joint domestic abuse outcomes of the local DASV Strategy through selected suppliers
- creates the ability to respond more quickly to procuring services as well as ensuring providers are jointly working in line with the local DASV Strategy
- maintains flexibility for additional funding to be invested by partners in the commissioning framework over its lifetime, including any funding resulting from Government legislation
- allows local delivery of services relevant to local need

The framework also aims to:

- maintain the specialist approach for high risk domestic abuse victims and their families
- shift over time towards prevention and away from reactive crisis
- increasingly integrate domestic abuse support and influence practice across the system
- support the development of a more confident workforce system wide
- collect shared robust data/ intelligence

The commissioning framework is led by Gloucestershire County Council (GCC), with investment also made by the Office for the Police and Crime Commissioner (OPCC), District Councils and the Gloucestershire Clinical Commissioning Group (CCG).

The commissioning framework is split into 6 'Lots' in which a range of local services have already been commissioned:

Lot 1: Specialist Services for Victims of Domestic Abuse

This is a single provider lot to provide the main countywide domestic abuse support service. The model in Gloucestershire is currently geared toward providing community based support with the current commissioned service GDASS⁴⁹ provided by GreenSquareAccord, providing:

⁴⁹ Gloucestershire Domestic Abuse Support Service

- Support to all victims of domestic abuse aged 16+, both male and female and from all protected characteristic groups.
- Support across all risk levels:
 - Helpdesk support
 - Standard/Medium risk: Floating Support and Group Work
 - High Risk: Independent Domestic Violence Advisors (IDVAs), including IDVAs with specialist knowledge and a dedicated court IDVA.
 - Support service to the Multi-agency Safeguarding Hub (MASH)
- Support to victims in the context of the family:
 - Dedicated workers within the Gloucester multi-agency team within Children's Social Care
- Awareness raising and training to professionals in Gloucestershire
- Community awareness raising and engagement

This service is commissioned by GCC, with some investment from the OPCC to provide Court IDVA support.

In addition to the core service, the CCG have also commissioned the following provision which is embedded within GDASS:

- Health IDVAs: Based within Gloucestershire Royal Hospital (GRH) and Cheltenham General Hospital (CGH). The health IDVAs provide intervention to those experiencing DA at the earliest opportunity when they attend hospital. The health IDVAs also provide training to hospital staff.
- GP Development workers: Support to GP surgeries to identify and train DA champions and developing links into the GDASS service for victims. The GPDWs also support surgeries to become safe spaces for disclosures of DA.

Lot 2: Places of Safety

Services commissioned through this Lot are designed to provide:

- A range of places of safety in Gloucestershire which are accessible, affordable and suitable for victims of domestic abuse who will have a variety of needs, including single victims (female and male), family units, victims with disabilities and/ or additional support needs.
- A range of measures for maintaining victim safety at home by way of additional security measures, alarms, known as Target Hardening and the provision of Sanctuary measures.

Current provision is commissioned by the District Councils alongside the OPCC to provide a target hardening and sanctuary scheme service for the county, provided by Safe Partnership.

Alongside this service, the county also operates a Places of Safety scheme which comprises of 12 individual properties that can be accessed via GDASS in instances where a victim needs to flee their home. This provision pre-dates the development of the framework via funding from the MHCLG into the District Councils.

Lot 3: Services to address Perpetrator Behaviour

Services commissioned through this Lot are designed to provide a range of interventions to challenge beliefs and address the behaviour of domestic abuse perpetrators.

The commissioned service is Positive Relationships Gloucestershire (PRG) provided by Splitz Support Service and commissioned jointly by GCC, OPCC and CCG. The service provides:

- An accredited domestic violence prevention programme (DVPP). This is a behavioural change group programme for male perpetrators of DA
- 1:1 behavioural change work with female perpetrators of DA and male perpetrators who cannot attend the group programme
- Healthy relationships early interventions group work
- Partner safety work to ensure victims remain safe as perpetrators attend the programme
- Relapse prevention support for men completing the DVPP

Lot 4: Young People

Services commissioned through this Lot are designed to provide a range of prevention activity, targeted support, group work programmes and support to safeguard young people (male and female) aged 13-19.

Currently the service STREET Gloucestershire (Safe Teenage Relationship Education & Empowerment Team) is provided by West Mercia Women's Aid and is commissioned by GCC. The service provides:

- Countywide support to young people aged 13-19 affected by DA through:
 - Experience of teenage relationship abuse
 - Witnessing and affected by DA in the home
 - Displaying harmful behaviours in their own relationships
- 1:1 support
- Evidence based group programme CRUSH and the Recovery Toolkit

Lot 5: Early Identification and Workforce Development

Services commissioned through Lot 5 are designed to provide a range of initiatives for early identification of domestic abuse in various professional and community settings. Services within this lot will cover one of three elements:

- Specialist domestic abuse training to up skill front-line professionals.
- Specialist domestic abuse workers co-located and working alongside front-line services.
- Community awareness raising activity to engage the public and promote a zero tolerance approach to domestic abuse in the county.

Currently, no services have been commissioned on Lot 5.

Lot 6: Stalking

Services commissioned through this Lot are designed to provide a range of prevention activity; targeted support for victims of stalking, both within and outside the context of domestic abuse; and interventions to challenge beliefs and address behaviours of stalking perpetrators

Currently, an Independent Stalking Advocacy Caseworker (ISAC) service is provided by Splitz Support Service, commissioned by the OPCC. This service is designed to provide support to high risk victims of stalking across Gloucestershire, working in conjunction with GDASS, Victim Support and Gloucestershire Constabulary.

There are currently no stalking perpetrator interventions commissioned through this Lot due to a lack of national development in this area.

4.3 Local partnership structure

The Gloucestershire partnership structure has been redeveloped in 2021 in response to the Domestic Abuse Act and statutory duty placed on local authorities to set up a local partnership board. In addition, the recent separation of sexual violence (SV) from domestic abuse with the

creation of a sexual violence partnership board, in operation since 2018, meant that a new DA focused partnership board was needed; whilst ensuring clear links between these boards.

The Domestic Abuse Local Partnership Board (LPB) structure (2021) consists of three tiers, each with their own set of aims and objectives to drive forward the Gloucestershire approach to domestic abuse:

Local Partnership Board Strategic Group which:

- Is responsible for overarching strategic decision making related to the domestic abuse agenda.
- Helps to steer strategic commissioning/de-commissioning decisions to ensure there is a continued joined up approach to commissioning within the domestic abuse agenda.
- Is required to review activity from the operational group, providing ratification on key activity and decisions.
- Oversees the governance and accountability of the operational and consulting groups.
- Approves the local monitoring activity reports that will be required for submission to central government.

Membership of the LPB Strategic Group consists of key strategic leaders with responsibility for organisational policy and strategy across a range of organisations and thematic areas linked to domestic abuse.

Local Partnership Board Operational Group which:

- Facilitates access to data required for the needs assessment.
- Leads on the development of a Gloucestershire Domestic Abuse Strategy.
- Implements the Gloucestershire Domestic Abuse Strategy.
- Develop a multi-agency action plan to fulfil the strategy and drive forward activity.
- Completes ongoing assessments of need and demand and develop potential solutions/new approaches.
- Ensures the voice of the victim/survivor is reflected in local activity.
- Monitors and evaluate local delivery.

Membership of this group are senior enough to make decisions on behalf of their organisation, request resources from within their organisation to drive activity forward, as well as being willing and able to drive partnership activity that fulfils the local strategy.

Local Partnership Board Consultation Group which will:

- Consist of a range of key groups/individuals that enable the operational and strategic groups to ensure victim/survivor/community voices are considered and reflected in strategic decision making and local activity that aims to enhance our local response to domestic abuse.
- Look to utilise existing community and faith groups, as well as specialist services and victim/survivor groups that can be consulted with on a regular basis.

This work will be developed by a Consultation Group Coordinator (being recruited) who will also support the same function for the sexual violence partnership board.

Appendix 2 provides the governance structure for the local domestic abuse partnership board.

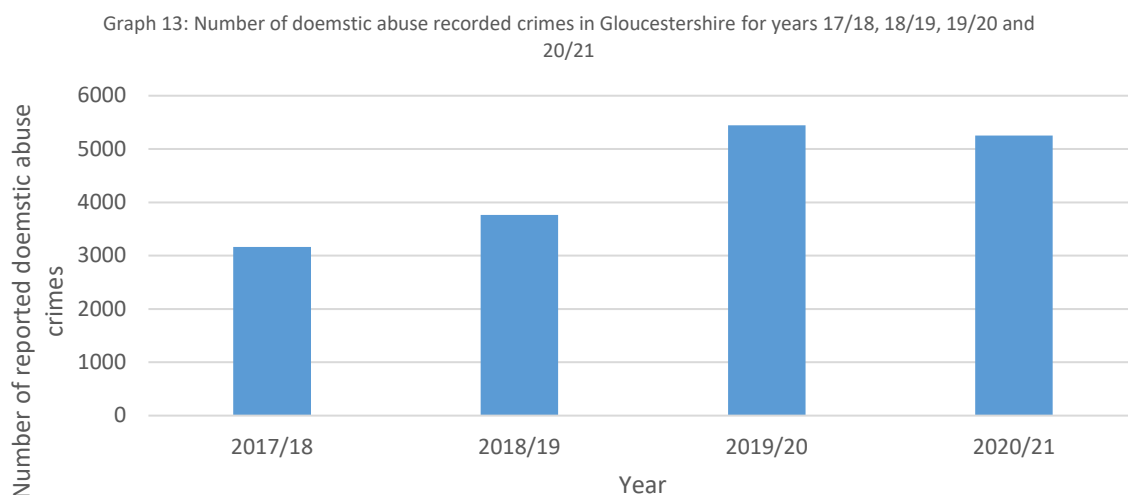
Gloucestershire's Coordinated Community Response Assessment can be found in Appendix 1.

5.Domestic Abuse Crimes in Gloucestershire

The data presented in this section of the needs assessment covers domestic abuse related crimes data in Gloucestershire for years 2017/18, 2018/19, 2019/20 and 2020/21.

Domestic abuse recorded crimes within Gloucestershire have continued to increase year on year, most notably with a 45% increase from 2018/19 to 2019/20.

During 2019/20, domestic abuse crimes accounted for 13% of all crime reported to Gloucestershire Constabulary and 38% of all 'Violence Against the Person' crimes.



During 2020/21 recorded crimes of domestic abuse reduced by 4%, reflecting the difficulties that some victims may have faced in accessing services and reporting crime during the National lockdown period of the COVID19 pandemic. During this time period, all crimes recorded by Gloucestershire Police dropped by 10%. During 2020/21, domestic abuse accounted for 14% of all crime recorded by Gloucestershire police, a slight increase from the year prior.

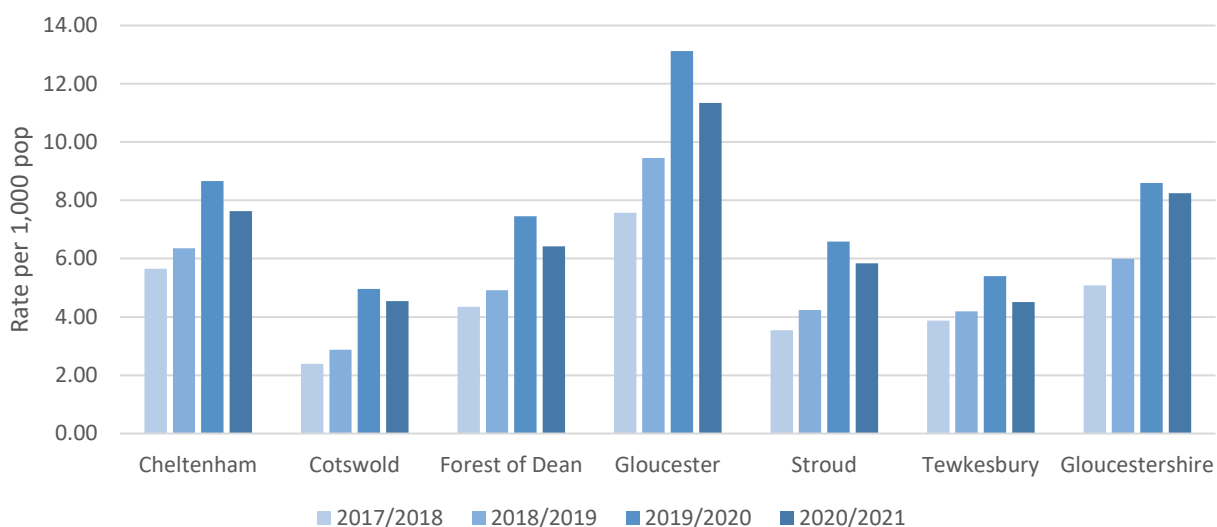
When considering the rate of domestic abuse crimes in Gloucestershire, this has increased from 5.08 DA crimes per 1000 of the population in 2017/18 to 8.60 in 2019/20. The drop in the DA crime rate for 2020/21 is reflected in the recorded crime figures as a result of the COVID19 pandemic.

Table 1: Rate of domestic abuse crimes in Gloucestershire per 1000 of the population for years 17/18, 18/19, 19/20 and 20/21.

Year	2017/2018	2018/2019	2019/2020	2020/2021
Rate of domestic abuse crimes in Gloucestershire per 1000 of the pop.	5.08	6.00	8.60	8.25

The highest rate of domestic abuse crimes are within Gloucester District, considerably higher than seen for Gloucestershire as a whole with a rate of 13.12 DA crimes per 1000 of the population in 2019/20 (dropping to 11.35 during the COVID19 pandemic year 2020/21). As detailed in graph 14, the rate of domestic abuse crimes is consistently higher in Gloucester year on year, with the rate in Cheltenham also high, but in line with the countywide rate.

Graph14: Domestic Abuse Recorded Crime Rate per District for years 17/18, 18/19, 19/20 and 20/21

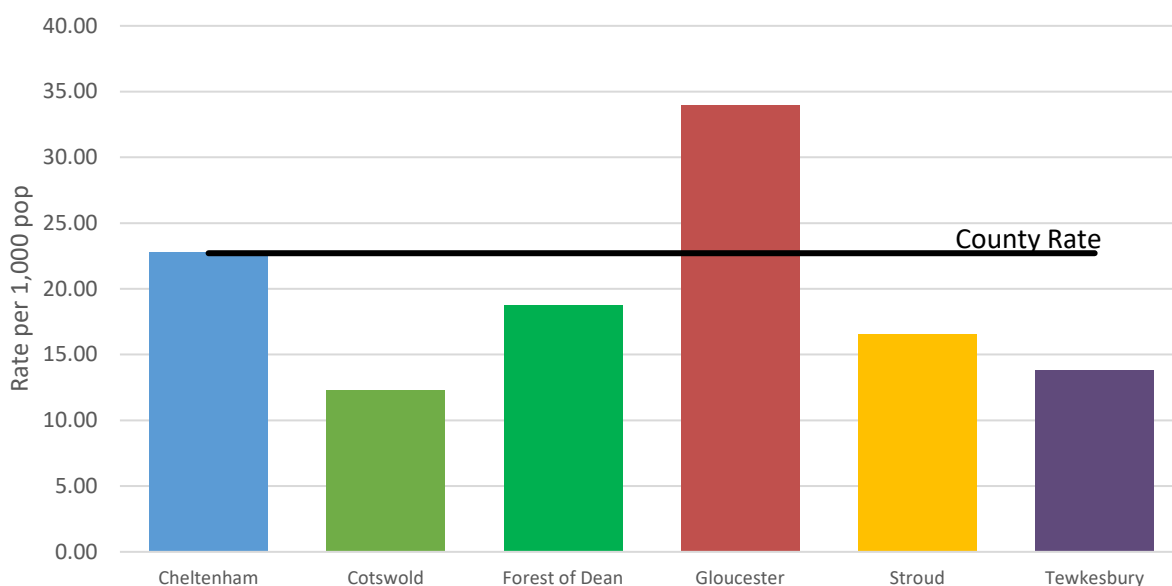


The higher rate of domestic abuse recorded crime in Gloucester and Cheltenham is to be expected, as the more urban areas of the county have greater access to services in order to report domestic abuse more easily. These areas are also more densely populated, and may increase the awareness of domestic abuse occurring via neighbours and the community more generally, increasing the likelihood of police involvement. Lower rates in more rural communities potentially indicate a need to increase opportunities for reporting by those experiencing domestic abuse in those areas.

Whilst it is not surprising to see higher rates of domestic abuse in the more urban areas of the county, the rate of domestic abuse within the Forest of Dean is the 3rd highest in the county at 7.45 per 1000 of the population in 2019/20 (dropping to 6.42 during 2020/21). Whilst lower than the countywide rate, it is still encouraging that a more rural district within the county is able to ensure higher levels of reporting of domestic abuse to the police than other areas in the county.

Graph 15 provides a summary of the domestic abuse rate per district across a 3 year time period.

Graph 15: 3 year Rate - Domestic Abuse Recorded Crime per district (01/04/18 to 31/03/2021)

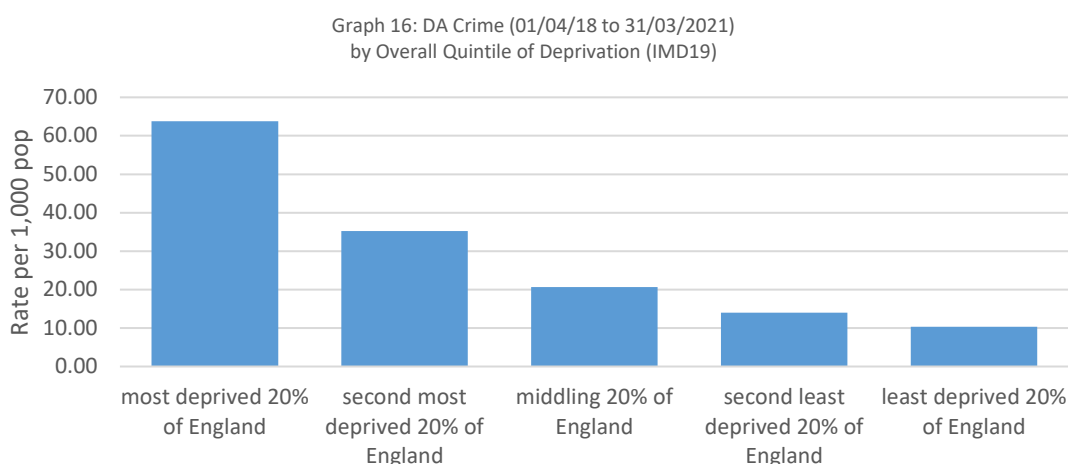


The location of where domestic abuse crimes are recorded within Gloucestershire are most likely to be from within areas of the county that fall within the most deprived 20% of England according the Indices of Deprivation 2019.

The Index of Multiple Deprivation 2019 (IMD 2019) is the official measure of relative deprivation for small areas (Lower Super Output Areas – LSOA's) in England, and ranks every LSOA in England from most deprived to least deprived.

The Index of Multiple Deprivation is part of the Indices of Deprivation and it is the most widely used of these indices. It combines information from seven domain indices, which are weighted to form the final index (weighting in brackets):

- Income Deprivation (22.5%)
- Employment Deprivation (22.5%)
- Education, Skills and Training Deprivation (13.5%)
- Health Deprivation and Disability (13.5%)
- Crime (9.3%)
- Barriers to Housing and Services (9.3%)
- Living Environment Deprivation (9.3%)



Graph 16 shows that over the last 3 years, residents in Gloucestershire are six times more likely to report a domestic abuse crime in the most deprived 20% of areas than in the least deprived 20% communities based on the national quintile of deprivation.

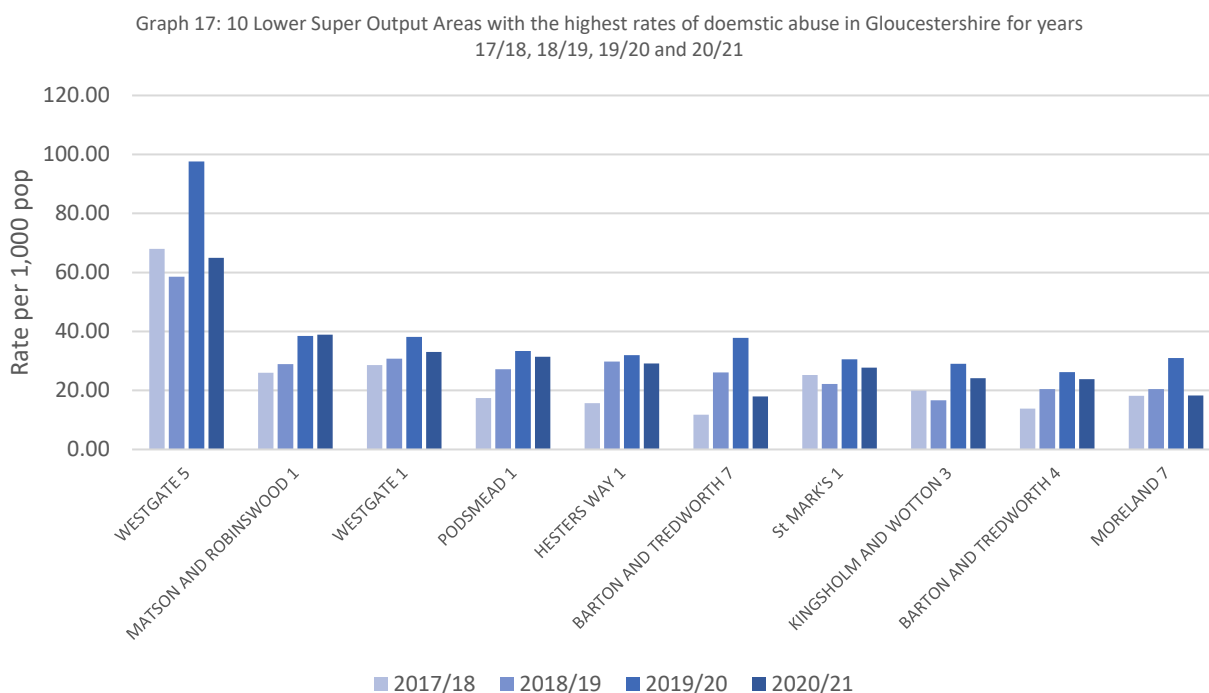
This finding is further confirmed when looking at the community areas with the highest rate of domestic abuse crimes. The communities with the highest rates of domestic abuse in the county are all within the Gloucester and Cheltenham District, with a considerably higher rate of domestic abuse crimes than seen for the county as a whole.

As detailed in graph 17, all of the smaller community areas identified as having the highest rates of domestic abuse in Gloucestershire fall within the top 20% of most deprived areas in England, with the exception of Barton and Tredworth 7 which falls within the second most deprived 20% of England.

For Westgate 5, which is in the top 10% of most deprived areas in England, has the highest rate of domestic abuse in the county; the rate was 11x the countywide rate in 2019/20 and 8x the

countywide prevalence rate in 2020/21. In addition, this area had 5x the rate of domestic abuse than seen for the district of Gloucester.

This area is within the city centre of Gloucester, and given this is the area where the crime has occurred rather than where the victim was living, it is likely that the high levels of domestic abuse are connected to public violence and abuse, possibly linked to the night time economy. This may result in the abuse being more likely to be reported and identified by police as a result. This area of Gloucester is however within the top 10% of deprivation within England, again, connecting domestic abuse in Gloucestershire with higher levels of deprivation.

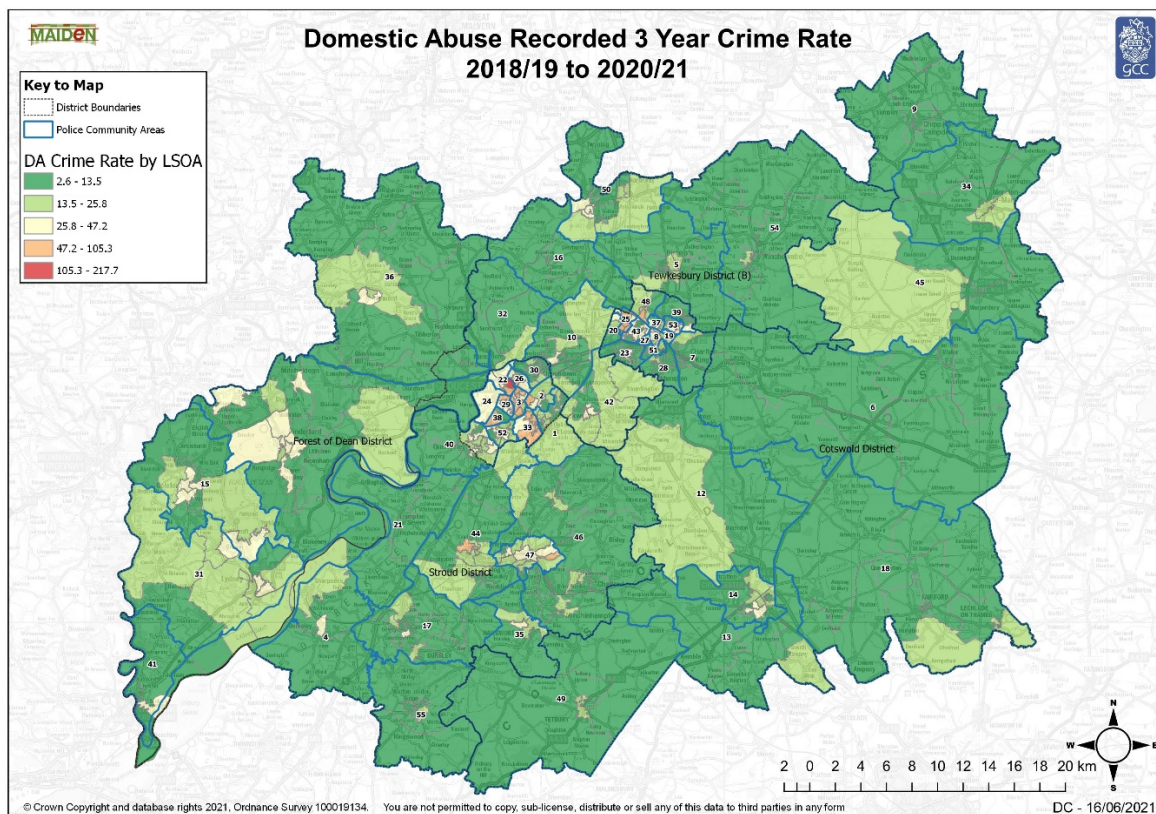


As detailed in map 1, whilst the majority of communities with the highest rates of domestic abuse are within the Gloucester and Cheltenham District, there are pockets across other districts with a rate of domestic abuse that is between 47.2 and 105.3, considerably higher than the countywide rate. These communities include:

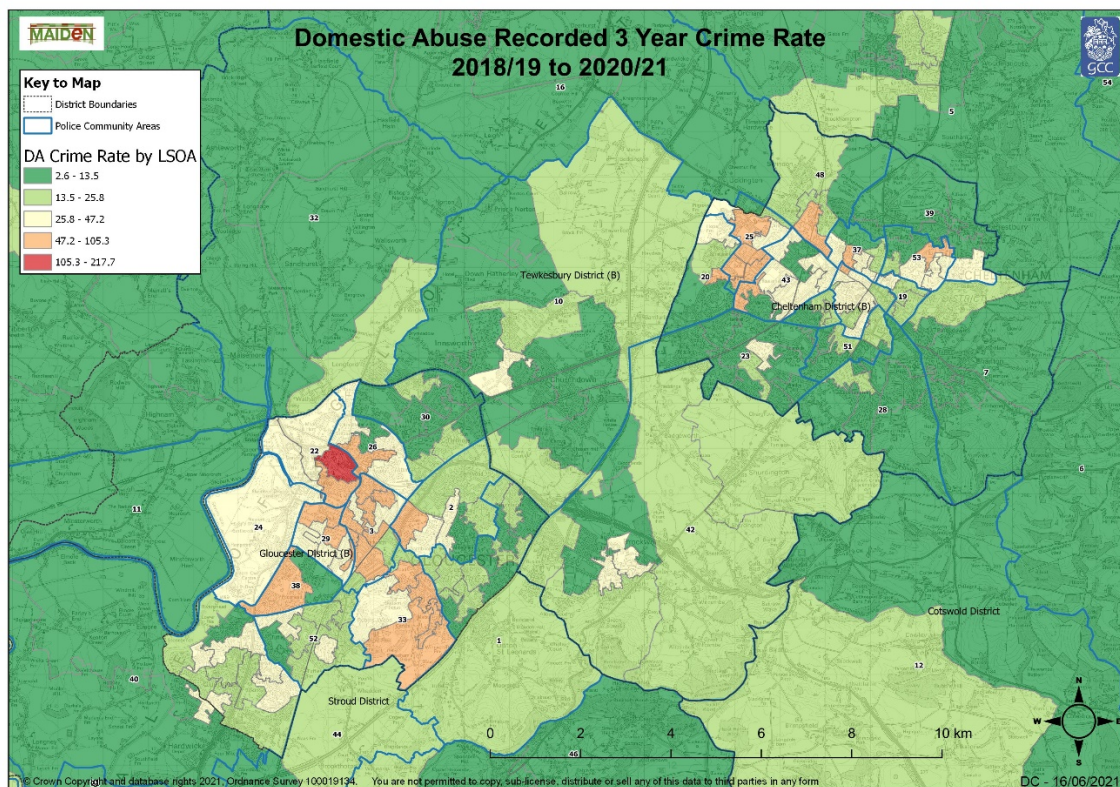
- Stonehouse, Stroud (Stonehouse 4)
- Stroud Urban, Stroud (Slade)

Both of these areas are also connected to deprivation within the county, with both areas considered in the second most deprived 20% of England.

Map 1: Domestic abuse 3 year crime rate across Gloucestershire communities from 2018/19 to 2020/21. (Key to maps is provided in Appendix 5).



Map 2: Domestic abuse 3 year crime rate across Gloucestershire communities from 2018/19 to 2020/21: Zoom for communities with highest rate of domestic abuse (Key to maps is provided in Appendix 5).



The differences in community levels of domestic abuse indicate a need to potentially consider a place based approach to addressing domestic abuse.

Those communities with the highest rates of domestic abuse may require greater focus on ensuring wider inequalities are tackled, working in conjunction with the community in a strengths based way, in order to reduce levels of domestic abuse alongside work to tackle deprivation. This may be work that involves the domestic abuse partnership working more closely with other partnerships and activities in the county that are striving to improve the deprivation experienced in the county and ensuring that individuals have access to services that meet their needs.

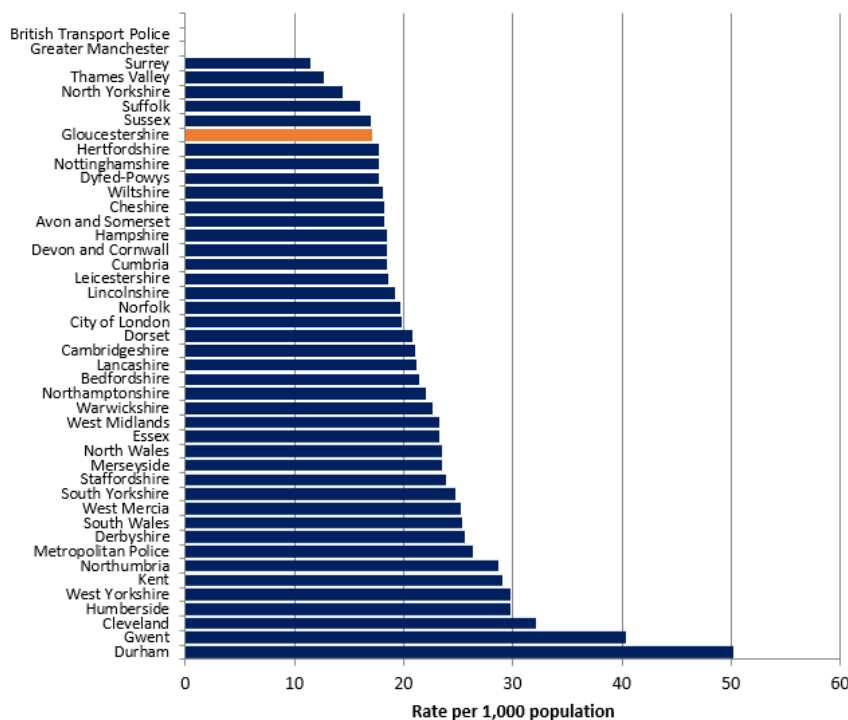
Those communities with lower levels of recorded domestic abuse may need a greater focus on awareness raising, access to services and community engagement to encourage disclosure of domestic abuse and reporting. In these communities it is likely that domestic abuse is happening, but is more hidden than the more urban communities where neighbours and services have a greater likelihood of identifying domestic abuse and encouraging reporting.

5.1 Comparisons to other Police Forces

The below comparisons have been taken from the Office for National Statistics (ONS) Domestic Abuse Data Tool for the year ending March 2020⁵⁰.

When considering the rate of combined domestic abuse related incidents and crimes recorded by police, Gloucestershire recorded a rate of 17 incidents and crimes per 1000 of the population, placing Gloucestershire as a force with one of the lowest rates of domestic abuse across England and Wales.

Graph 18: Rate of domestic abuse related combined incidents and crimes recorded by the police, by police force area. ONS, year ending March 2020.



⁵⁰ [Domestic abuse in England and Wales - Data Tool - Office for National Statistics \(ons.gov.uk\)](https://ons.gov.uk/domesticabuse/data)

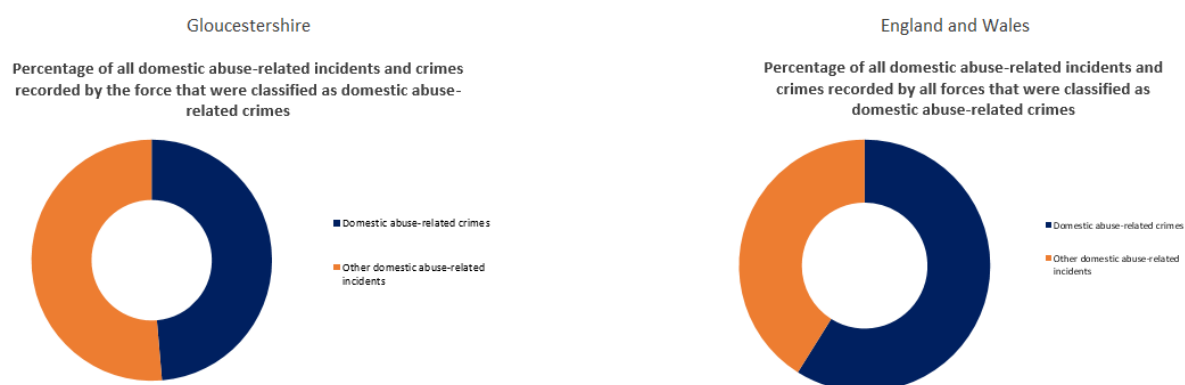
The data presented may differ from the Gloucestershire crime statistics for domestic abuse, based on the time period the data was collated.

This is similarly reflected when considering the rate of crimes recorded by police, with Gloucestershire Police recording a rate of 8 domestic abuse related crimes per 1000 of the population.

This low rate of domestic abuse related incidents and crimes may be reflective of a genuine lower rate of domestic abuse within Gloucestershire. It may however also signify a need to increase reporting of domestic abuse to police within Gloucestershire.

Alongside this, local crime recording practices will also need to be considered, with 49% of domestic abuse related incidents and crimes in Gloucestershire subsequently recorded as crimes in year ending March 2020. This compares to 59% across England and Wales.

Graph 19: Percentage of all domestic abuse related incidents and crimes recorded by police that were classified as domestic abuse related crimes for Gloucestershire and England and Wales. ONS year ending March 2020.

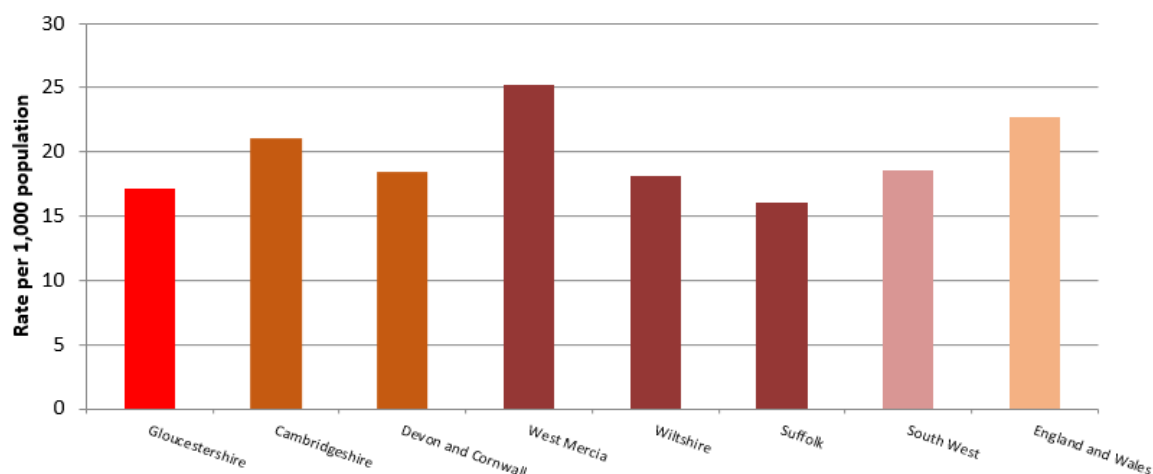


When considering the percentage of all recorded crimes classified as domestic abuse, Gloucestershire is only slightly lower at 13% than seen across England and Wales at 15%.

When comparing Gloucestershire to its most similar force areas, Gloucestershire has the lowest volume of domestic abuse related incidents and crimes. The rate of 17 per 1000 of the population is however higher than Suffolk at 16, and lower than Wiltshire and Devon and Cornwall, both at 18 per 1000 of the population.

Gloucestershire therefore has a similar rate of domestic abuse related crimes and incidents to its most similar force areas, but is lower than the South West rate at 19 and for England and Wales at 23.

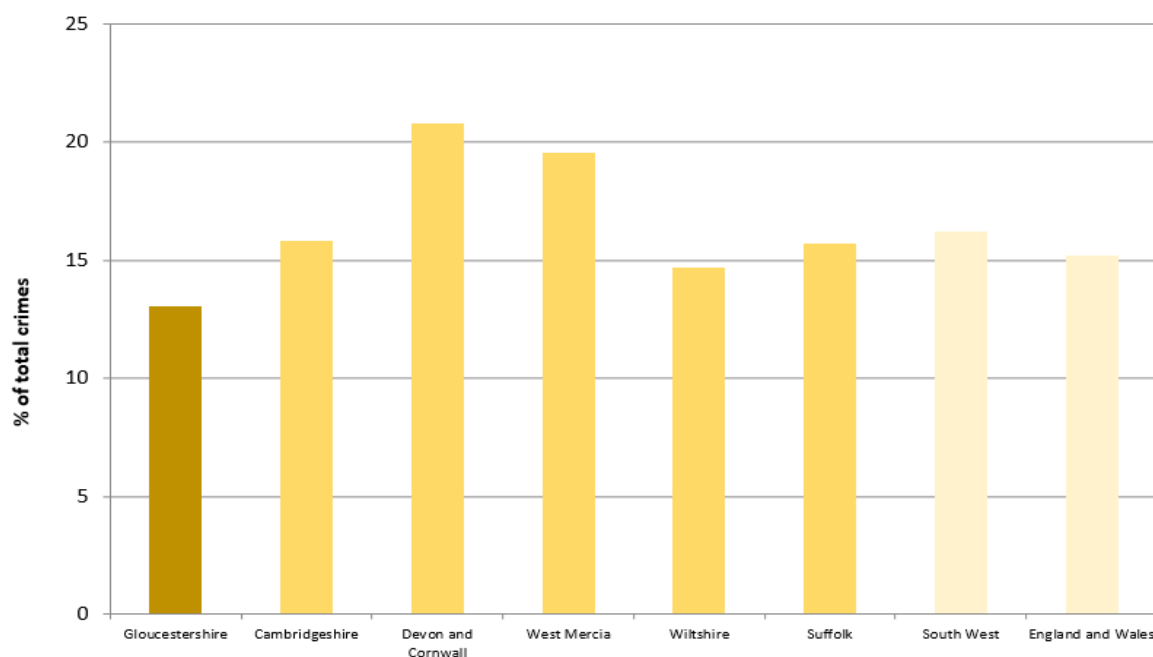
Graph 20: Rate of domestic abuse related incident and crimes combined, as recorded by police. Gloucestershire compared with its most similar force areas. ONS year ending March 2020.



When considering the percentage of total police recorded crime that is domestic abuse related, Gloucestershire is below its most similar force areas, as detailed in Graph 20.

This may be connected to lower levels of reporting of domestic abuse to Gloucestershire Constabulary when compared to other crime types, but may also be connected to local crime recording practices or the identification of domestic abuse.

Graph 21: Percentage of total police recorded crimes classified as domestic abuse related for Gloucestershire, its most similar force areas, South West and England and Wales. ONS year ending March 2020.



Alongside this, when considering Violence Against the Person (VAP) offences, domestic abuse related offences account for 32% in Gloucestershire, the lowest percentage seen when compared to most similar force areas and the South West percentage of 36%. Whilst this demonstrates that a significant volume of VAP offences are domestic abuse related within Gloucestershire, this is less significant than for other forces. This may be a genuine finding in that Gloucestershire has a lower

volume of domestic abuse related crimes, but again, may be connected to crime recording practices as well as the identification of domestic abuse.

Domestic abuse related crimes that result in an arrest were significantly lower in Gloucestershire than for England and Wales, with 13 arrests per 100 domestic abuse related crimes in Gloucestershire, compared to 34 arrests per 100 for England and Wales.

For Gloucestershire, this is also significantly lower than seen in its most similar force areas as detailed in table 1. This is potentially an area of consideration for Gloucestershire constabulary to ensure improvements are made in arrest levels for domestic abuse.

Table 1: Number of arrests per 100 domestic abuse related crimes. ONS year ending March 2020.

Gloucestershire	13
Cambridgeshire	27
Devon and Cornwall	29
West Mercia	28
Wiltshire	53
Suffolk	29
England and Wales	34

5.1.1 Domestic Abuse related prosecutions and convictions⁵⁰

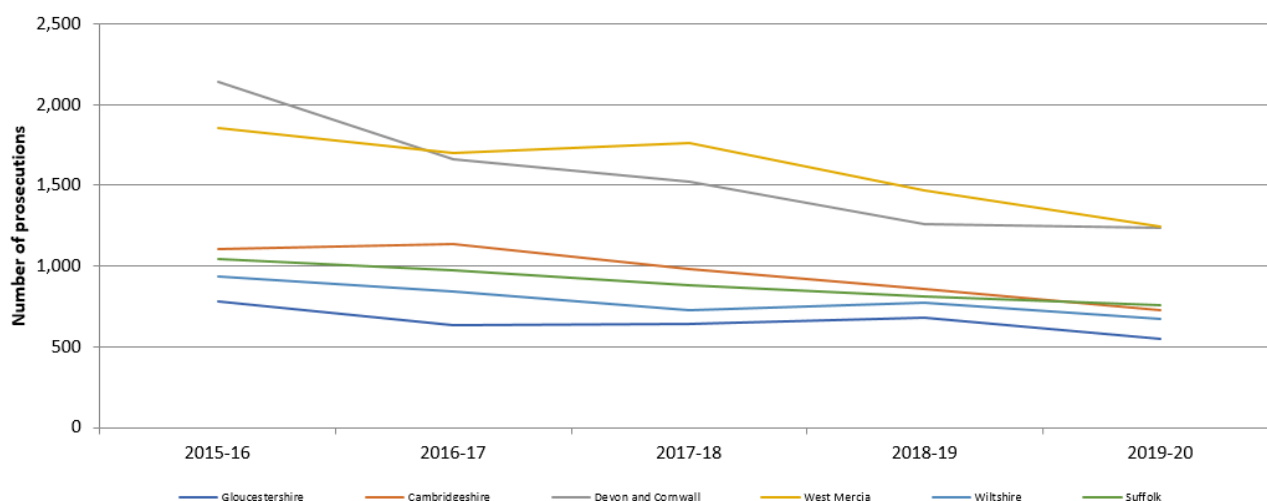
When considering domestic abuse prosecutions, despite Gloucestershire having the lowest volume when compared to its most similar force area; as would be expected given the lower volume of domestic abuse crimes; it has the highest percentage of domestic abuse prosecutions as a percentage of all prosecutions. Higher than the South West and England and Wales percentage; a positive finding for Gloucestershire.

Table 3: Number and percentage of domestic abuse related prosecutions for Gloucestershire, most similar force areas, South West and England and Wales. ONS year ending March 2020.

	Number of domestic abuse-related prosecutions	Domestic abuse-related prosecutions as % of all prosecutions
Gloucestershire	553	15
Cambridgeshire	728	14
Devon and Cornwall	1,236	13
West Mercia	1,241	14
Wiltshire	675	13
Suffolk	760	14
South West	4,792	13
England and Wales	61,166	14

Despite this, domestic abuse related prosecutions have over time been on decline, across Gloucestershire and its most similar force areas, as detailed in graph 22.

Graph 22: CPS domestic abuse prosecutions over time. ONS year ending March 2020.



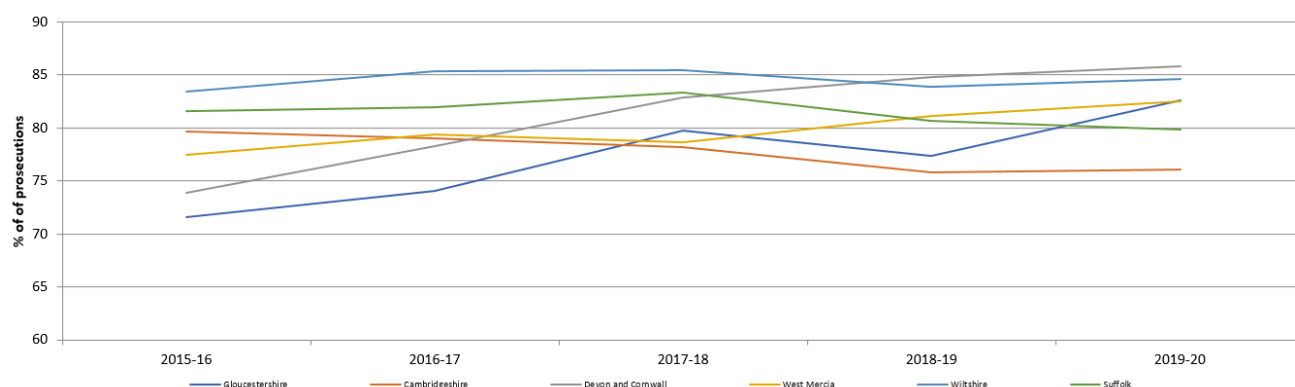
When looking at convictions as a percentage of domestic abuse prosecutions, Gloucestershire is in line with the South West percentage, which is higher than seen for England and Wales.

Table 4: Number of domestic abuse related convictions, prosecutions, and convictions as a percentage of domestic abuse related prosecutions, for Gloucestershire, Most similar force areas, South West and England and Wales. ONS year ending March 2020.

	Number of domestic abuse-related:		
	Convictions	Prosecutions	Convictions as a % of prosecutions
Gloucestershire	457	553	83
Cambridgeshire	554	728	76
Devon and Cornwall	1,061	1,236	86
West Mercia	1,024	1,241	83
Wiltshire	571	675	85
Suffolk	607	760	80
South West	3,971	4,792	83
England and Wales	47,531	61,166	78

Whilst domestic abuse related prosecutions have been declining over time, domestic abuse related convictions as a percentage of prosecutions have remained relatively flat over time for Gloucestershire and its most similar force areas, as detailed in graph 23. In 2019/20, 83 out of every 100 prosecutions lead to a conviction.

Graph 23: Time series for domestic abuse related convictions as a percentage of domestic abuse related prosecutions.



5.2 Domestic Violence Protection Notices/Orders (DVPN/O)⁵⁰

The following data has been taken from the Office for National Statistics (ONS) Domestic Abuse Data Tool for the year ending March 2020⁵⁰.

A DVPN is an emergency non-molestation and eviction notice which can be issued to a perpetrator by the police when attending a domestic abuse incident. Because the DVPN is a police-issued notice, it is effective from the time of issue giving the victim the immediate support they require in such a situation. Within 48 hours of the DVPN being served on the perpetrator, an application by police to a magistrates' court for a DVPO must be heard. A DVPO can prevent the perpetrator from returning to a residence and from having contact with the victim for up to 28 days. This allows the victim a degree of breathing space to consider their options with the help of a support agency. Both the DVPN and DVPO contain a condition prohibiting the perpetrator from molesting the victim.

A DVPN should only be issued in circumstances where there is no other enforceable restrictions that can be placed on the perpetrator.

For the year ending March 2020, Gloucestershire made 68 applications for Domestic Violence Protections Notices (DVPN), with 59 granted during the same time period. This accounts for 87% of applications being granted for Gloucestershire, compared with 75% granted across England and Wales.

When considering Domestic Violence Protection Orders (DVPOs), Gloucestershire applied for 31 in the year ending March 2020, with 27 being granted. This accounts for 87% of application being granted in Gloucestershire, compared with 91% granted across England and Wales.

This indicates a need for Gloucestershire to consider its volume of DVPN application compared with DVPO applications, and to consider why the rate at which DVPOs are granted is lower than seen across England and Wales.

5.3 Domestic Abuse Disclosure Scheme (DVDS/Clare's Law)⁵⁰

The below data has been taken from the Office for National Statistics (ONS) Domestic Abuse Data Tool for the year ending March 2020⁵⁰.

The Domestic Abuse Disclosure Scheme (DVDS) or 'Clare's Law' outlines the process by which disclosures can be made by police if there are concerns regarding an individual's previous offending history relevant to domestic abuse. The process works in 2 ways:

- “Right to ask” is triggered by a member of the public applying to the police for a disclosure.
- “Right to know” is triggered by the police making a proactive decision to disclose information to protect a potential victim.

For the year ending March 2020, Gloucestershire considered 140 ‘right to know’ applications, with 74 applications within the same year provided with disclosure. This accounts for 53% of ‘right to know’ applications provided with disclosure compared with 52% for England and Wales.

When considering ‘right to ask’ applications, for the year ending March 2020, Gloucestershire received 170 applications, with 54 in the same year provided with a disclosure. This accounts for 32% of ‘right to ask’ applications provided with disclosure compared with 37% for England and Wales.

The DVDS in Gloucestershire will benefit from further support from GDASS when the new Police Independent Domestic Violence Advisors (IDVA) start in post, as outlined in the ‘community based support’ section of this needs assessment.

5.4 Multi-Agency Risk Assessment Conference (MARAC)⁵¹

The MARAC is a process, adopted nationally, to support multi-agency information sharing and collective safety planning for victims of domestic abuse who are risk assessed as being at high risk of serious harm or homicide.

For Gloucestershire, the MARAC process is coordinated by Gloucestershire Constabulary and is based within the Multi-Agency Safeguarding Hub (MASH).

Over the past three years, in line with national trends, referrals into MARAC have steadily increased year on year, with 1215 referrals received for high risk victims in 2019/20 compared with 965 in 18/19 and 866 in 17/18. The rate of cases currently in Gloucestershire MARAC is slightly higher than the recommended level by Safe Lives (1010 cases annually). It is worth noting, that Safe Lives recommendations are focused on looking at the adult female population, so the higher level of referrals for Gloucestershire may be linked to referrals received for male victims and those aged 16-17⁵². Additionally, Safe Lives have noted that their figures are an average with some MARACs seeing much lower or higher rates. They caveat that there is a need to understand more about the variations in practice and recording across MARACs in order to fully understand the implications of higher than expected rates.

The national Safe Lives MARAC data set⁵³ indicates that across England in 2019/20, there were 42 referrals to MARAC per 10,000 of the adult female population. This is slightly higher than the expected number of cases for England (as calculated by Safe Lives) and means that an additional 3737 cases were referred into MARACs in England in 2019/20.

For Gloucestershire, there were 46 referrals into MARAC per 10,000 of the adult female population, slightly higher than the national level and higher than the South West level at 32. Higher levels of referrals into MARAC may indicate a need locally to identify domestic abuse at an earlier stage before it reaches high risk levels. It could also indicate that Gloucestershire is well placed in identifying high risk domestic abuse and making appropriate referrals with good local partnership

⁵¹ MARAC Operating Protocol available at www.glostakeastand.com

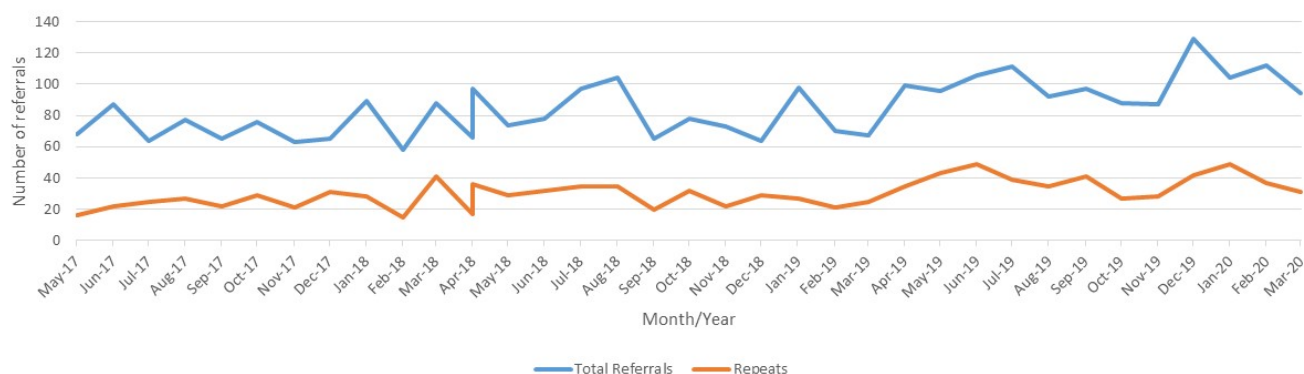
⁵² Safe Lives recommended level of referrals is based on the expected level of 40 cases per 10,000 of the adult female population. This has been established from work carried out by SafeLives, combined with police reporting rates and what we know about the likelihood of high-risk victims of domestic abuse reporting to the police.

⁵³ [Latest Marac National Dataset | Safelives](#)

working; this may in part be linked to recent training delivered locally to upskill professionals in conducting risk assessments and making referrals into MARAC.

As detailed below in Graph 24, the volume of referrals into MARAC changes on a month by month basis, with some notable peaks across the summer months and the December/January period.

Graph 24: Number of referrals into MARAC 2017/18, 2018/19 and 2019/20



The main performance measure for MARAC nationally is the level of repeat victimisation. Safe Lives have calculated that they would expect repeat referrals to account for between 25-40% of all referrals. This range is based on the need to ensure a balance between MARAC demonstrating its ability to identify further repeat incidents and respond, alongside demonstrating that its safety planning works well.

The repeat victimisation rate for Gloucestershire in 2019/20 was 38% of total referrals into MARAC; putting us at the higher end of the range expected by Safe Lives. This is a rise from 35% in 18/19 and 34% in 17/18 and compares to an England wide repeat victimisation rate of 31%⁵⁴. This higher repeat victimisation rate may indicate Gloucestershire's ability to readily identify repeat victims, but is an area that needs to be monitored to ensure the risk management plans at MARAC are robust and effective; this is something to be considered by the MARAC Steering Group and ultimately the Domestic Abuse Local Partnership Board.

The vast majority (approximately 70% per year) of referrals into MARAC are made by the police. This is in line with regional rates but compares with a national rate of around 60% in 2019/20. Both GDASS, A&E and Children's Social Care are also significant referrers into the process. Whilst it is positive that police are identifying high risk victims of domestic abuse and referring them into a process which supports multi-agency safety planning, there is a need to ensure locally that other agencies are able to readily conduct risk assessments and make appropriate referrals.

5.5 Victims of Domestic Abuse in Gloucestershire known to police

The below data reflects domestic abuse victims where there is a unique crime number⁵⁵ recorded by police against domestic abuse tagged crimes for years 2017/18, 2018/19, 2019/20 and 2020/21.

Across all 3 years, between 75-78% of victims were recorded as female. This is to be expected given the gendered nature of domestic abuse, with females most likely to be the victims. Despite this however, it is likely that a number of male victims also experience abuse from a male perpetrator as male perpetrators account for up to 93% of perpetrators.

⁵⁴ The level of repeat cases relies on individual MARACs accurately recording their repeat referral rate.

⁵⁵ This reflects wherever possible unique victims. There will however be some duplicates where offenders are connected to multiple victims or different crime numbers.

The majority of victims are aged 25-34 followed by 35-44 as detailed in graph 25. This is similarly reflected when considering the rate of victims per 1000 of the population based on age group (table 5), with a rate of 19.96 domestic abuse offenders per 1000 of the 25-34 year old population in Gloucestershire.

Graph 25: Age range of domestic abuse victims recorded by police for years 17/18, 18/19, 19/20 and 20/21

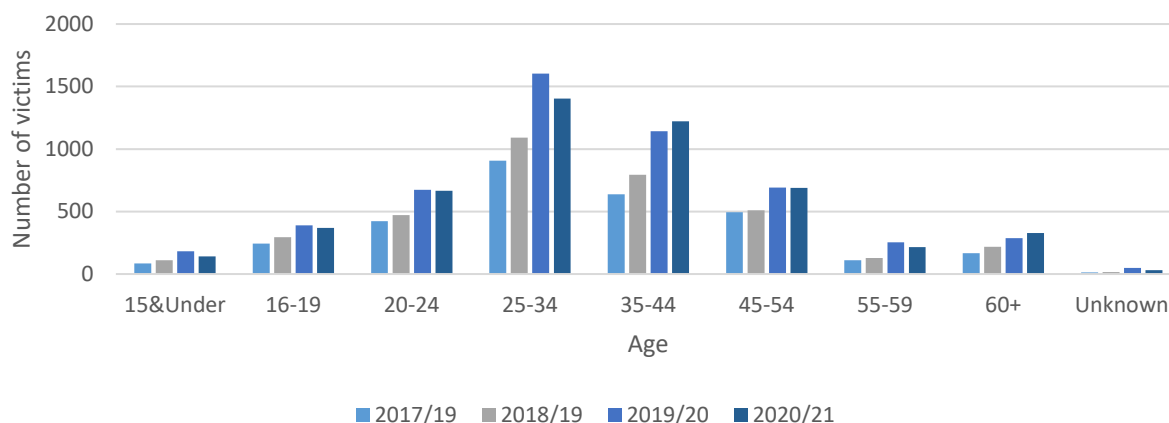


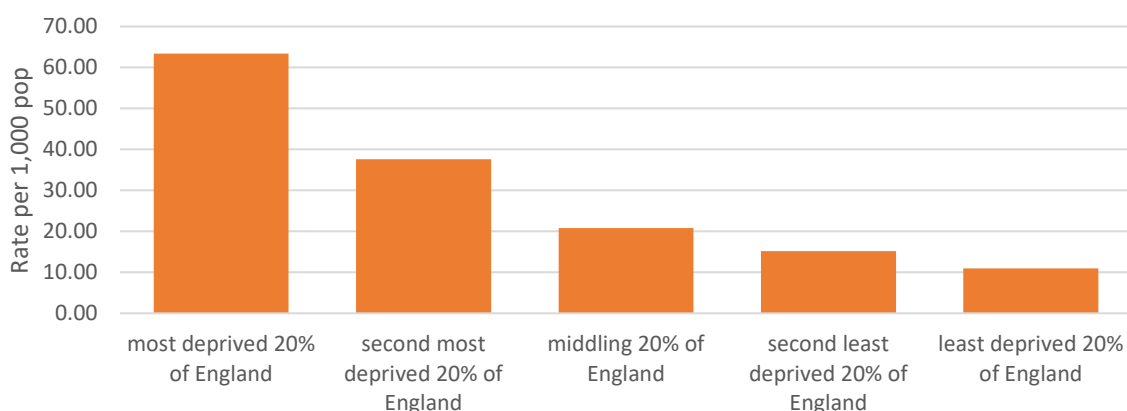
Table 5: Rate of offenders per 1000 of the population based on age.

	15 & under	16-19	20-24	25-34	35-44	45-54	55-59	60+
Rate per 1000 2020/21	1.22	13.5	19.96	19.57	16.2	7.5	4.7	1.9

Across all 3 years, the majority of victims are recorded as being from 'white ethnicities'. Despite this, 6% are consistently recorded as being from Black, Asian and Ethnic Minority groups, an overrepresentation when compared to the population of Gloucestershire which is at 4% Black, Asian and Ethnic Minority. This overrepresentation is to be expected given the overall prevalence data from England and Wales indicating that those from Black, Asian and Ethnic Minority groups experience domestic abuse at a higher rate than those from white ethnicities.

Domestic abuse victims are recorded within Gloucestershire are most likely to be recorded as being from within areas of the county that fall within the most deprived 20% of England according to the Indices of Deprivation 2019. This is consistent with the findings of where domestic abuse crimes take place.

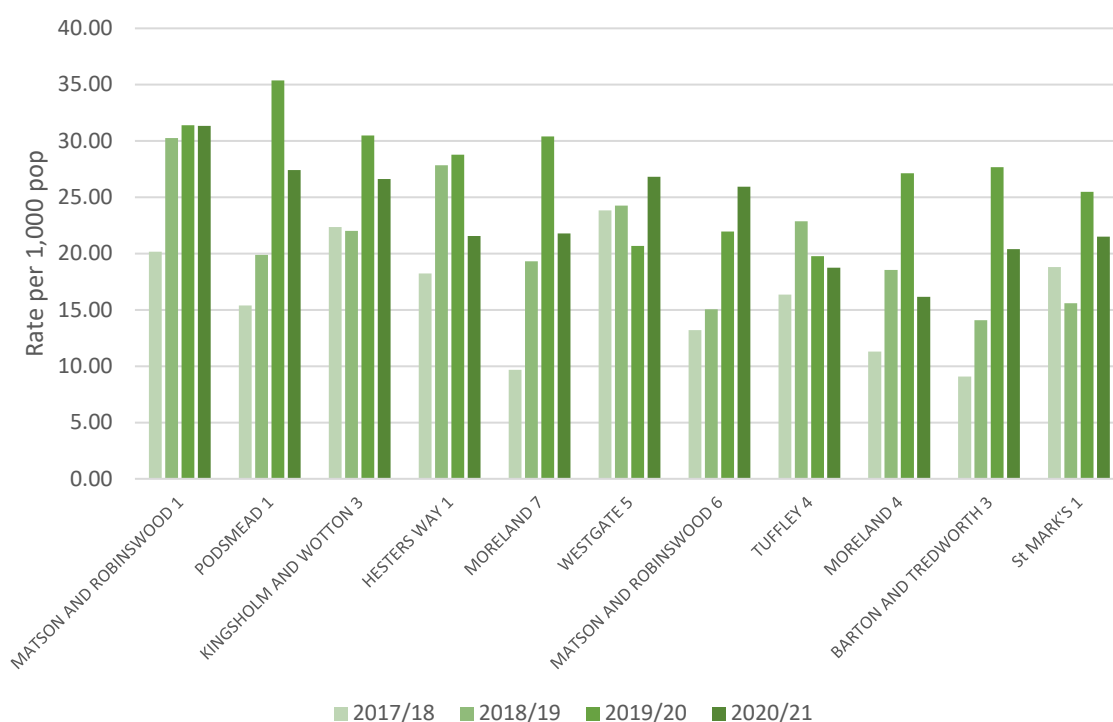
Graph 26: DA Victim (01/04/18 to 31/03/2021)
by Overall Quintile of Deprivation (IMD19)



When looking at the smaller communities identified as having the highest rate of domestic abuse victims, they all fall within the top 20% of most deprived areas in England.

The small community areas identified are reflective of those identified for crime location, with the introduction of Tuffley. A large volume of the areas identified fall within the 10% of most deprived areas in England indicating a clear link in Gloucestershire with domestic abuse and deprivation.

Graph 27: DA Recorded Victim Rate by Lower Super Output Area

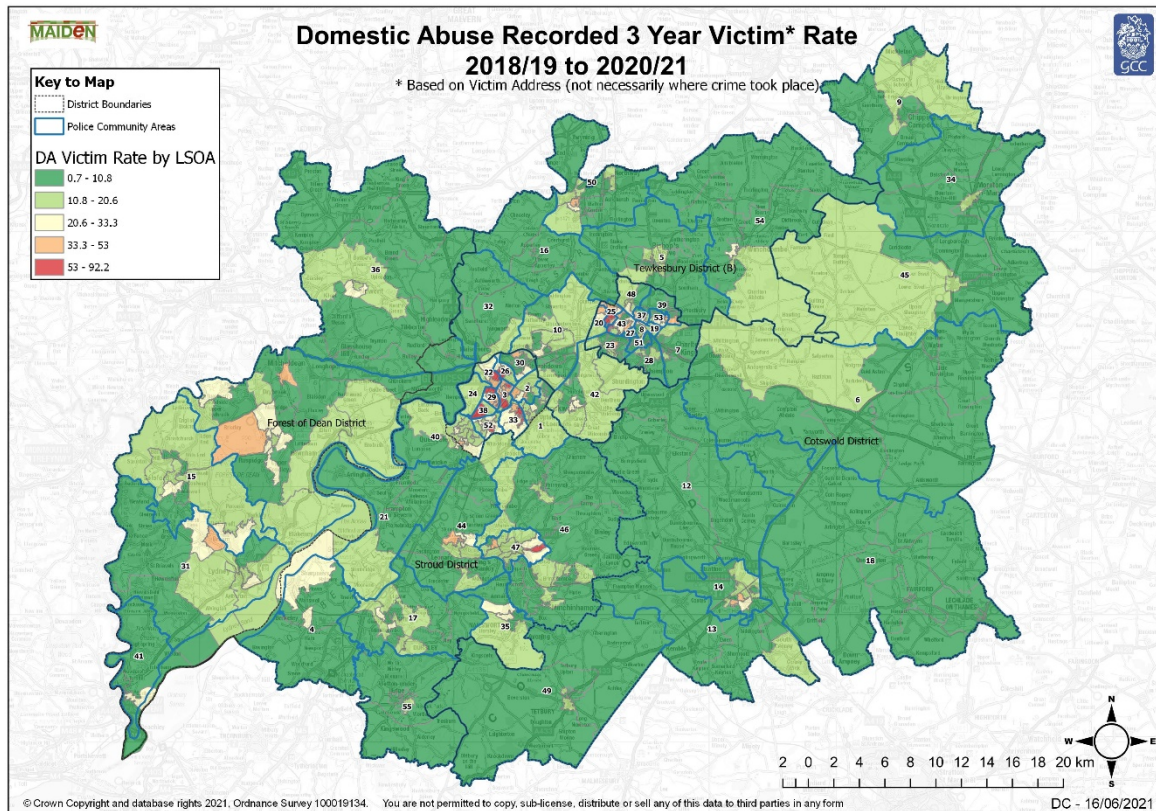


As detailed in map 3, whilst the majority of communities with the highest rates of domestic abuse victims are within the Gloucester and Cheltenham District, there are pockets across other districts with a rate of domestic abuse victims that is between 33.3 and 92.2, considerably higher than the countywide rate. These communities include:

- Stroud Urban, Stroud
- Stonehouse, Stroud

- Cirencester urban, Cotswolds
- Tewkesbury
- Lydney, Forest of Dean
- Cinderford, Forest of Dean

Map 3: Domestic abuse 3 year victim rate across Gloucestershire communities from 2018/19 to 2020/21. (Key to maps is provided in Appendix 5).



5.6 MARAC Victims

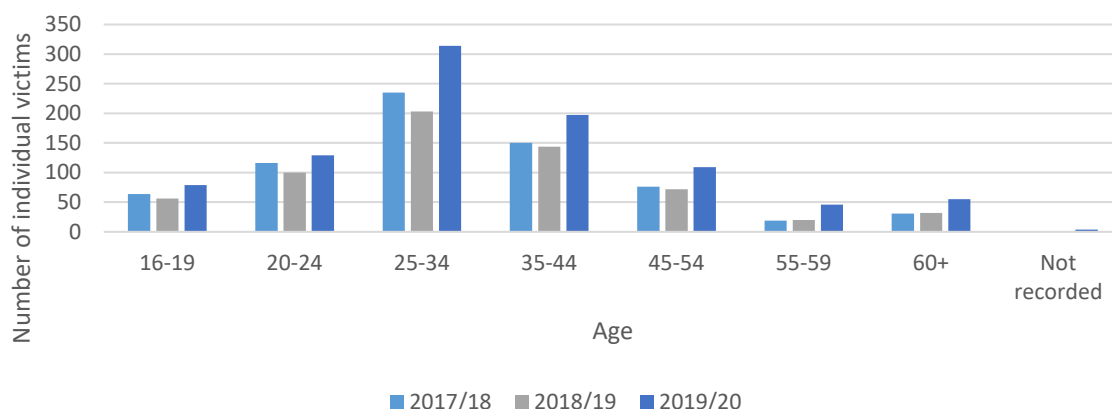
When considering the characteristics of MARAC victims, the below data will present ‘individual’ victims for each year rather than referrals, removing duplicates where the same victims may have been referred multiple times into the MARAC. For this purpose, the number of individual victims each year are as follows: 2017/18: 691, 2018/19: 627 and 2019/20: 933⁵⁶.

Across all 3 years, between 90-92% of individual victims discussed at MARAC were female, compared with 99.9% across England and Wales. This demonstrates that whilst the majority of Gloucestershire victims referred into MARAC are female, there is a greater likelihood locally of identifying male high risk victims; this is similarly reflected in data from GDASS where higher levels of male victims are engaged in the service than seen for similar services nationally. This is because the GDASS service offer is clear about the support that it offers for males victims, and has over the years adapted its approach to ensure the service offer is appropriate and accessible to male victims.

When looking at the age range of individual MARAC victims, the majority are aged 25-34, as detailed in Graph 28. This is a higher age bracket than prevalence data detailed in the Crime Survey for England & Wales (year ending March 2020).

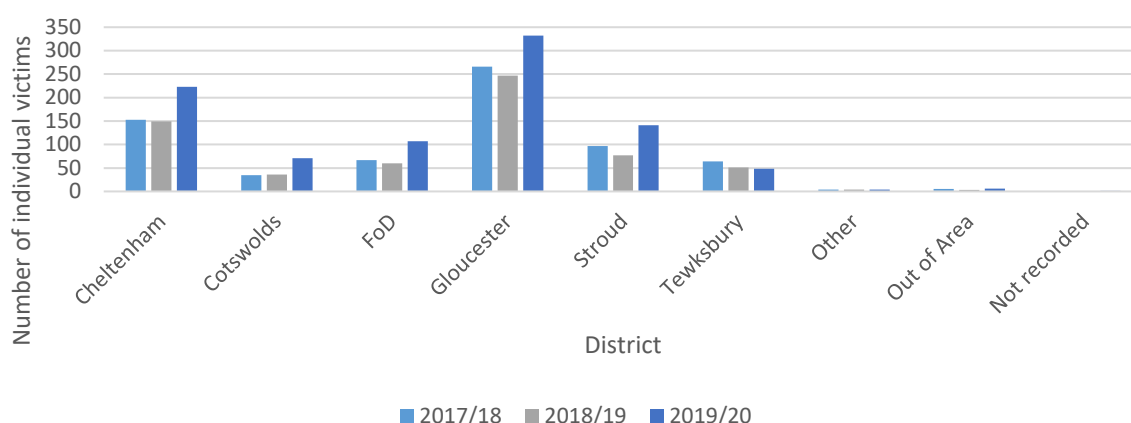
⁵⁶ Some duplicates may still be considered if a victim has been referred into MARAC across multiple years.

Graph 28: Number of individual victims considered by MARAC based on age for years 2017/18, 2018/19 and 2019/20



The majority of individual victims considered by MARAC were referred from the county's urban areas; this is likely linked to the higher numbers of domestic abuse incidences being reported in these areas, and the easier access to services that victims in these areas will have; making the identification of high risk domestic abuse easier for agencies.

Graph 29: Number of individual victims considered by MARAC based on locality for years 2017/18, 2018/19 and 2019/20



Across each of the years detailed, between 29-35% of victims were recorded as living with their perpetrator at the time they were referred in to MARAC. The majority of victims living elsewhere is consistent with a key area of understanding risk in domestic abuse, 'Separation', and also demonstrates that high risk domestic abuse can occur when individuals do not live with one another. This is also consistent with Gloucestershire's local model of providing target hardening and sanctuary schemes, to improve security and keep victims safe within their own homes.

MARACs across England receive around 16.8% of their referrals for victims from Black, Asian and Minority Ethnic groups, with the South West and North East receiving the fewest referrals at 6%. Gloucestershire MARAC is consistent with the South West average, with 6% of individual victims being from Black, Asian and Minority Ethnic groups in 2019/20 (down from 9% 2017/18).

Despite a lower rate of referrals for victims from Black, Asian and Minority Ethnic groups in Gloucestershire compared with the England average, in comparison to the percentage of individuals from Black, Asian and Minority Ethnic groups in the population as a whole in Gloucestershire (4.6%), this is relatively high. This finding is consistent with the prevalence data from the CSEW that

indicates a greater likelihood of domestic abuse victimisation from those in Black, Asian and Minority Ethnic groups.

MARAC victims from LGBTQ groups account for 1.3% of referrals across England, with similar rates seen in Gloucestershire MARAC at 1% of referrals in 2019/20 (1% in 18/19 and 2% in 17/18). Despite Gloucestershire being in line with the England average, it is well known that domestic abuse amongst those who are LGBTQ is significantly underreported, with those from LGBTQ communities facing greater barriers to accessing support often connected to their wider experience of homophobic abuse (Safelives Spotlight report #freetobesafe⁵⁷). There is therefore more work required locally to identify and respond effectively to LGBTQ victims.

In both 2017/18 and 2018/19 around 50% of individual victims considered by MARAC were recorded as having a disability, this dropped for 2019/20 where only 27% were noted as having a disability (compared with an England rate of around 7%). For the majority of those where a disability was noted, the type of disability was not known; it is not clear how accurate this data is, as it relies on the referring agency to identify. Where it was known, depression and anxiety was the most common. With a comparatively high percentage of victims noted as having a disability, some consideration may need to be given as to how this is being identified and whether this is a true picture of high risk victims in Gloucestershire or the way in which this is recorded locally.

5.7 Domestic Homicide Reviews in Gloucestershire

Domestic Homicide Reviews (DHRs) were established on a statutory basis under the Domestic Violence Crime and Victims Act 2004, with the provision coming into force in April 2011.

The purpose of a DHR is to:

- Establish what lessons are to be learned from the domestic homicide regarding the way in which local professionals and organisations work individually and together to safeguard victims.
- Identify clearly what those lessons are both within and between agencies, how and within what timescales they will be acted on, and what is expected to change as a result.
- Apply these lessons to service responses including changes to inform national and local policies and procedures as appropriate.
- Prevent domestic violence and homicide and improve service responses for all the domestic violence and abuse victims and their children by developing a co-ordinated multi-agency approach to ensure that domestic abuse is identified and responded to effectively at the earliest opportunity.
- Contribute to a better understanding of the nature of domestic violence and abuse.
- Highlight good practice.

Gloucestershire has developed its own local approach to conducting DHRs in line with the Home Office Statutory guidance. The local approach includes a local funding agreement for commissioning independent chairs, local funding for advocacy services to support families in participating in DHRs, a clear approach to agency accountability to ensure the adoptions of lessons learnt and most recently a new approach to ensuring the identification of suicide cases that fall under the statutory guidance.

Since DHRs were first enacted, Gloucestershire has commissioned 13 DHRs⁵⁸, 7 of which have been published, with the remaining reviews either awaiting publication or still ongoing. Whilst each

⁵⁷ [Free to be safe web.pdf \(safelives.org.uk\)](https://www.safelives.org.uk/free-to-be-safe-web.pdf)

⁵⁸ As of June 2021

review will have its own specific learning, there are a number of common themes that come from DHRs that require consideration in terms of local strategy and approach to continue to improve the response to domestic abuse. The below 'word cloud' provides a summary of the key themes from local DHRs:



5.8 Areas for development

Training

Within the county, the majority of domestic abuse training is delivered single agency, with individual agencies developing their own programme of activity to upskill their staff.

Multi-agency domestic abuse training is delivered and available via the Safeguarding Children's Executive with GDASS and the County DASV Strategic Coordinator often supporting the delivery as well as delivering wider ad hoc training.

Findings from DHRs indicate a need for a more consistent approach to training in the county, ensuring that all professionals are confident and competent in responding to domestic abuse.

At present, no investment has been made into Lot 5 of the Domestic Abuse Commissioning Framework which would provide a local training offer for domestic abuse. Investment in this area would enable the county to respond to findings from DHRs and also fully enact the domestic abuse training pathway developed in 2019.

Development and embedding of domestic abuse pathways

The county has well established pathway of support for domestic abuse and multi-agency working. Despite this, there are always areas for further development, particularly in response to emerging themes coming from DHRs, and to also ensure the existing pathways are embedded across the partnership response.

This further development and embedding is linked to the need for consistent training and awareness raising in the county as well as to the wider Coordinated Community Response (CCR) and ensuring that Gloucestershire's response includes all key principles for an effective CCR response.

Awareness Raising

The county has always developed a multi-agency annual domestic abuse communications plan. This plan has ensured a wide range of awareness raising activity to cover various aspects of domestic abuse, encouraging reporting and awareness of the services available in the county.

There is a need to continue this work and ensure awareness raising activity is influenced by the findings from DHRs as well as the findings from any service user and community engagement.

Multiple Disadvantage/Complex needs

Individuals experiencing domestic abuse who also experience additional complex needs, such as substance misuse, homelessness, poverty and mental health, are becoming a more prominent feature of domestic abuse support locally. A number of DHRs locally have highlighted a need to improve the local response to victims with complex needs, acknowledging that supporting these victims requires more intensive work and a trauma informed approach.

Gloucestershire County Council are currently reviewing the countywide response to complex needs and will consider the findings from DHRs in their ongoing work. This will be a longer term piece of work looking to establish wider systems change and collective response to those experiencing multiple disadvantage and complex needs.

There is a need to ensure domestic abuse is considered within the wider response to those with complex needs and develop specific processes to ensure victims with complex needs receive the right support at the right time and in a way that is accessible.

Place based approach to Domestic Abuse

Due to the variations in rates of domestic abuse recorded in the county, there is a need to consider different approaches in different communities. Considering engagement and awareness raising in certain communities to increase reporting, and considering prevention approaches in communities where a reduction in domestic abuse rates are required.

Taking a place based approach allows for work to tackle domestic abuse to take into account the individuality of communities and to adopt strengths based approaches that include the community in any actions that contribute to supporting those experiencing domestic abuse and tackling the attitudes that contribute.

There is a need locally to consider how deprivation is linked to domestic abuse and to connect into wider local activity that looks to build reliance within communities through social, economic, housing and educational improvements.

Arrest Rates and Crime Recording

Gloucestershire has a lower arrest rates and crime recording figures than we would expect to see for domestic abuse. Our local response therefore needs to ensure that officers are skilled in identifying domestic abuse, fully understand their role and responsibility and ensure that all crimes connected to domestic abuse are recorded effectively. This will encourage further reporting of what is known to be an underreported crime, but with improved crime recording, there will be a better

understanding of the prevalence of domestic abuse within the county to support decision making on victim services and wider partnership responses.

Preparations for the Domestic Abuse Act

As measures from the DA Act come into force, the county needs to be prepared to meet any new requirements, be aware of new measures that support victims and ensure professionals are upskilled to understand and respond to domestic abuse. The local response to the DA Act 2021 will need to be key feature of the local strategy to tackle domestic abuse.

Ongoing assessment against CCR 'In search of Excellence'

In order to ensure Gloucestershire's Coordinated Community Response to Domestic Abuse continues to fall in line with best practice, the Local Partnership Board should ensure a regular review of local processes against the criteria set out in the 'In search of Excellence' document.

6. Accommodation Based Support for victims of Domestic Abuse

The Violence Against Women and Girls (VAWG) Strategy 2016-2020, and its refresh in 2019, made clear the Government's commitment to ensuring 'no woman is turned away from the support she needs and that all victims get the right support at the right time'⁵⁹. The Ministry of Housing, Communities and Local Government (MHCLG) is the lead for Government in ensuring the provision of refuge and safe accommodation with support for survivors and victims of domestic abuse.

Following a review of existing locally-led approaches to commissioning of domestic abuse safe accommodation services across England in 2018, the MHCLG outlined the importance of having support accessible within a range of safe accommodation services to ensure victims have a safe and secure place to live. It was also acknowledged that a vital component of providing this support was stable funding and effective commissioning based on local need.

As a result of this review the Government included within the Domestic Abuse Act 2021, a statutory duty on Tier 1 local authorities to provide support in safe accommodation. Safe accommodation was defined by the MHCLG to include⁶⁰:

- Refuge accommodation – a refuge offers accommodation and intensive support which is tied to that accommodation. Victims, including their children, have to be refuge residents to access specialist emotional and practical support.
- Specialist safe accommodation – safe accommodation services which provide dedicated specialist support to victims with protected characteristics and/or complex needs, such as specialist refuges for BAME, LGBT, and disabled victims and their children.
- Dispersed accommodation:
 - Safe, self-contained accommodation with the same level of specialist domestic abuse support as provided within a refuge but which may be more suitable for victims who are unable to stay in a refuge with communal spaces due to complex support needs or for families with teenage sons for example.
 - Safe, self-contained 'semi-independent' accommodation which is not within a refuge but with floating support for victims who do not require the intense support offered through refuge.
- Sanctuary Schemes – properties within Sanctuary Schemes or other similar schemes which provide enhanced security measures. A Sanctuary Scheme is a survivor centred initiative which aims to make it possible for survivors of domestic abuse to remain in their own homes, where it is safe for them to do so, where it is their choice, and where the perpetrator does not live in the accommodation. This is done by providing additional security – 'installing a sanctuary' – to the victims' property or perimeter.
- Move-on and / or second stage accommodation – interchangeable terms for projects temporarily accommodating victims, including families who no longer need the intensive level of support provided in a refuge, but would still benefit from a lower level of domestic abuse specific support for a period before they move to fully independent and permanent accommodation. There is no expectation that every victim will require this. Many victims are ready to move straight to a permanent new home from refuge. However, move-on and / or second stage accommodation may be helpful in some cases.

⁵⁹ [Future Delivery of Support to Victims and their Children in Accommodation-Based Domestic Abuse Services: Consultation Response \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)

⁶⁰ MHCLG definition provided [Future Delivery of Support to Victims and their Children in Accommodation-Based Domestic Abuse Services: Consultation Response \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)

- Other forms of domestic abuse emergency accommodation – i.e. a safe place with support. To give victims an opportunity to spend a temporary period of time to consider and make decisions in an environment which is self-contained and safe. This would include access to wrap around support and specialist support for victims with complex needs (including mental health needs and substance misuse).

To support local authorities in meeting their statutory duty, funding has been allocated as of April 2021 from the MHCLG.

6.1 Best practice approaches

The refuge model for women fleeing domestic abuse has been in place since the 1970s as a service developed by women for women. Now in England there are 261 (2020) refuges with 3,923 bed spaces available⁶¹ for those looking to secure safety away from domestic abuse.

Whilst the model was developed in the main to protect women, in recent years, specialist refuge provision has also been developed to provide support to male victims of domestic abuse.

Refuge provision remains a core response to domestic abuse, enabling victims to relocate to a safe space, receive specialist support and look towards rebuilding their lives free from abuse.

Whilst the need for refuge will always be part of the response to domestic abuse, variations in the model have begun to emerge to allow greater flexibility, for instance, allowing women to access safe spaces alongside teenage sons, victims to take pets with them and enabling victims with substance misuse or significant mental health needs to access safe accommodation; often circumstances that can make access to traditional refuge accommodation difficult.

Varied models of refuge can now include the provision of safe, self-contained accommodation with specialist domestic abuse support provided and the provision of dedicated refuge spaces for those from particular protected characteristic groups. Alongside this services are being commissioned to provide security measures and safe rooms in victims' properties, to enable victims to remain safe in their own home.

Developments in safe accommodation have continued in recent years with a number of best practice models being rolled out across the country;

Whole Housing Approach⁶²:

The Whole Housing Approach (WHA) has been developed in order to improve the housing options and outcomes available for people who experience domestic abuse, enabling them to achieve safety, stable housing and overcome their experience of abuse and its impact.

The WHA has been promoted as a best practice model by the Government, noted for its mission to:

- Improve access to safe and stable housing across all housing tenure types (social, private rented and private ownership), considering the need for move on options from refuges, supported accommodation and other types of temporary accommodation.
- Ensure access to a range of housing and initiatives that are tailored for domestic abuse to provide choice, whether that is to relocate or remain in existing accommodation.

The aims of the WHA are to:

⁶¹ [Domestic abuse victim services, England and Wales - Office for National Statistics \(ons.gov.uk\)](https://ons.gov.uk/domesticabuse/articles/articles/2020-04-27-domestic-abuse-victim-services-england-and-wales)

⁶² [What is the Whole Housing Approach? - daha - Domestic Abuse Housing Alliance \(dahalliance.org.uk\)](https://dahalliance.org.uk/what-is-the-whole-housing-approach/)

- Create earlier identification and intervention for domestic abuse through mobilising social and private landlords and key institutions involved in private ownership
- Reduce the number of people who are made homeless as a result of domestic abuse
- Increase tenancy sustainment options so that people experiencing domestic abuse can remain safe in their home when it is their choice to do so or do not lose their tenancy status if they relocate. This includes social housing landlords taking action to remove perpetrators from properties through enforcement and positive engagement activities.

The below diagram provides a summary of all of the components of the WHA:



Housing First⁶³:

Housing First is a housing and support approach which was first developed in New York and has now been widely adopted in the USA, Canada, Denmark, Finland and France. Since 2010 it has become more widely adopted in the UK as a mechanism to meet the needs of the homeless population by:

- Providing a stable home for people who have experienced homelessness and chronic health and social care needs so they can rebuild their lives,
- Providing intensive, person-centred, holistic support that is open-ended,
- Placing no conditions on individuals; however, they should desire to have a tenancy.

It is an evidence-based intervention that is proven to successfully support people with repeat histories of homelessness who experience multiple disadvantages, helping them into independent and stable accommodation.

The majority of Housing First services across England are mixed gender, with a wider focus on the needs of men due to evidence of higher numbers of male homelessness compared to women nationally. In recognition of the potential hidden need for women and in particular their gender specific needs, best practice examples of the Housing First model are beginning to emerge that allow

⁶³ [12 -wha-housing-first-for-women.pdf \(dahalliance.org.uk\)](#)

for the support of victims of domestic abuse; with connections to the wider homelessness agenda and the common experience of multiple disadvantage.

The Housing First approach is a key trauma informed method of support, allowing choice and control to be prioritised; allowing for those who have experienced domestic abuse and routinely disempowered and abused by partners, services and the wider system to be given the autonomy and agency to make decisions for themselves. It is widely considered to be intensive, flexible and open ended; providing the necessary time and space for victims of domestic abuse to consider their options, with the support of strong and trusting relationships with specialist workers who coordinate a multi-agency response.

DAHA accreditation⁶⁴:

The Domestic Abuse Housing Alliance (DAHA) accreditation programme is a benchmark for how housing providers should respond to domestic abuse. It has been recognised as a best practice approach via the VAWG strategy⁶⁵.

Its accreditation programme is built around 6 core principles:

- Non-judgement
- Being person centred
- Amplifying survivor voice
- Intersectionality
- Safety
- Working towards a coordinated community response

The below diagram outlines the key priority areas that the accreditation programme covers to ensure an organisations operation and delivery is safe and effective for interventions in domestic abuse.



⁶⁴ [What is accreditation? - daaha - Domestic Abuse Housing Alliance \(dahalliance.org.uk\)](https://dahalliance.org.uk)

⁶⁵ [Strategy to end violence against women and girls: 2016 to 2020 - GOV.UK \(www.gov.uk\)](https://www.gov.uk)

6.2 Local Approach

The Gloucestershire approach to safe accommodation has focused on keeping victims safe in their own homes; recognising the importance of allowing victims and their children to remain within their communities and connected to those who can support them locally.

Whilst this model has been successful for Gloucestershire, it is recognised that in some circumstances, it is not safe for victims to remain in their own home, and there is a need to provide dedicated safe accommodation that allows victims to secure safety away from their home.

The Gloucestershire joint commissioning framework for domestic abuse Lot 2: Places of Safety outlines the county's commitment to ensuring the provision of safe accommodation with support for victims of domestic abuse.

Services commissioned under Lot 2 are designed to provide:

- A range of places of safety in Gloucestershire which are accessible, affordable and suitable for victims of domestic abuse who will have a variety of needs, including single victims (female and male), family units, victims with disabilities and/ or additional support needs.
- A range of measures for maintaining victim safety at home by way of additional security measures and alarms, known as Target Hardening and the provision of Sanctuary measures.

6.3 Service Provision

Across the county there are a range of accommodation options that are available to those who need to leave their home to escape domestic abuse. The emergency and short term accommodation options available are mainly for general access, and not specialist accommodation for domestic abuse. The table below provides a summary of the accommodation options available in the county (appendix 4 provides further detail):

	Emergency	Temporary/ short term	Move on/ long term
Specialist DA Safe Accommodation	Places of Safety (x12 units) Refuge (x9 bed spaces)		Own home with Target Hardening or Sanctuary GreenSquare – move on accommodation (x12 units tbc)
General Access Safe Accommodation	B&B (x93 rooms/bed spaces) Rapid Housing Pathway	Hostel (x83 rooms/bed spaces) Assessment Centre (x14) Temporary Accommodation – self-contained flats	Accommodation Based Support (rooms/self-contained units): 16+ (x141), 18+ (x190), Mental health (x40) Young parents (x19) Move On Accommodation Social Housing

The provision of specialist domestic abuse accommodation in Gloucestershire includes:

Places of Safety: 12 individual properties dispersed across the county, run by GDASS in conjunction with the District councils. These properties are designed to be used in a similar way to refuge but with additional flexibility, allowing for victims to enter places of safety in circumstances where

refuge access is restricted (e.g. substance misuse, pets, serious mental health, male victims etc.). Victims in these properties are provided with specialist support from GDASS.

Refuge: The refuge in Gloucestershire is provided by the Stroud Beresford Group, a charity that has been providing support in the county for over 40 years. The refuge is independently funded, with some regular support from MHCLG grant funding and support from the district councils.

The refuge provides support to women and their children, offering safe accommodation (9 bed spaces) alongside a range of services that help build skills, confidence and self-esteem.

Target Hardening and Sanctuary Scheme: This service ensures the provision of security measures within a victims own home, and in higher risk cases, the provision of a sanctuary room (reinforced doors and an alarm). The service is provided by Safe Partnership who work in conjunction with GDASS to ensure victims receive specialist domestic abuse support.

6.4 Access to Safe Accommodation in Gloucestershire

6.4.1 District Councils Homelessness Response to Domestic Abuse

Under current homelessness legislation, local authorities, in Gloucestershire the District Councils, are responsible for assessing the needs of those who present as homeless. The duties include providing advice and assistance to clients to prevent homelessness where possible and relieve homelessness where this has not been possible. They will also consider the households support needs and develop a personal housing plan with them.

The local authority will have an interim duty to provide temporary accommodation where a household is homeless and considered to be in priority need. Under the Domestic Abuse Act 2021, victims of domestic abuse will be given automatic priority need (effective from 5th July 2021).

The duty to provide temporary accommodation remains until such time as the duty is ended, either by an offer of settled accommodation or for another specified reason.

During the prevention and relief periods of homelessness the local authority will work with households to find a suitable solution. If the situation is unresolved after 56 days within 'homelessness relief' and the local authority are satisfied the applicant is eligible for assistance, in priority need, not intentionally homeless then a main housing duty is owed

The main housing duty can be carried out or 'discharged' when an applicant accepts an offer of accommodation, refuses an offer of suitable accommodation, or if an applicant becomes intentionally homeless from accommodation provided⁶⁶.

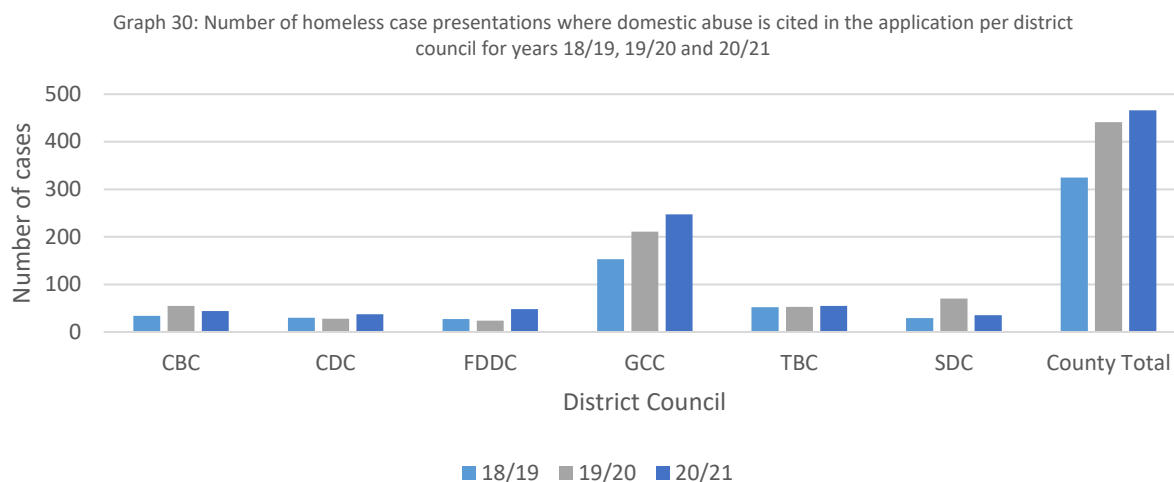
The data presented in this section will outline the number of individuals who present as homeless as a result of domestic abuse across Gloucestershire. The data available covers years 2018/19, 2019/20 and 2020/21.

Currently data is not available on the number of individuals who present as homeless to the District Councils as a result of domestic abuse where a duty is not accepted or where an individual does not accept the accommodation offered to them.

Across this time period the number of homeless cases presenting with domestic abuse to District Councils has increased year on year, with a 36% increase from 2018/19 to 2019/20 and a further 6%

⁶⁶ [Shelter Legal England - Main housing duty - Shelter England](#)

increase in 2020/21. There may be some duplicate data within this, taking into account cases that may have applied multiple times during this time period.



The number of cases presenting as homeless as a result of domestic abuse and placed within temporary accommodation has also increased year on year. There is some variation across districts when looking at the percentage of cases placed in temporary accommodation from the overall number of applications.

This variation in the figures may reflect some individuals securing their own accommodation, refusing the accommodation offered to them by the housing teams or lost contact through non-engagement.

During 2020/21, the number of individual cases placed in temporary accommodation was 162.

Table 6: Number of cases placed into temporary accommodation and percentage of all DA homeless applications across all 6 districts for years 18/19, 19/20 and 20/21.

		18/19	19/20	20/21
Cheltenham Borough Council	No. of cases placed into temp accom.	12	11	18
	% of all homeless DA applications	35%	20%	41%
Cotswold District Council	No. of cases placed into temp accom.	11	10	14
	% of all homeless DA applications	37%	36%	38%
Forest of Dean District Council	No. of cases placed into temp accom.	4	5	15
	% of all homeless DA applications	15%	21%	31%
Gloucester City Council	No. of cases placed into temp accom.	63	89	94
	% of all homeless DA applications	41%	42%	38%
Tewkesbury Borough Council	No. of cases placed into temp accom.	17	9	7
	% of all homeless DA applications	33%	17%	13%
Stroud District Council	No. of cases placed into temp accom.	3	12	14
	% of all homeless DA applications	10%	17%	40%
Countywide	No. of cases placed into temp accom.	110	136	162
	% of all homeless DA applications	34%	31%	35%

The District Council housing teams will, having placed a case into temporary accommodation, continue to work with individuals and families to prevent homelessness and wherever possible will

support cases in accessing private rented accommodation and accommodation via Home-seeker. Where this is not possible, final housing duty will be accepted.

Countywide, between 33-41% of those placed in temporary accommodation will have full housing duty accepted, this accounts for around 100 DA cases each year across the county.

The vast majority of those who are provided with temporary accommodation, will be accommodated within non-domestic abuse specific safe accommodation.

Snapshot data collated by Gloucestershire County Council based on District Council referral data for Dec 2020 and March 2021 indicates that the vast majority of DA homeless cases have their safe accommodation needs met in 'Self-contained units through registered provider/own stock'. Bed and Breakfast accommodation is also widely utilised, with some cases in the March 21 snapshot noted as 'Not accommodated - Homeless at home'⁶⁷.

Data available from the District councils cannot at this time provide details on the number of people who are referred on to the refuge following presentation as homeless as a result of domestic abuse.

The other available form of domestic abuse safe accommodation is the 12 Places of Safety.

Anecdotal evidence from the housing teams within the district councils identifies the following challenges and gaps in provision of safe accommodation for domestic abuse victims:

- Lack of specialist support for victims who are LGBTQ, with some seeking support from out of county providers.
- Accommodation for those with complex needs
- Accommodation for couples with complex needs where DA is a feature of the relationship that needs to be managed in order to address the complex needs first, reducing wider harm and not just the DA harm.
- Flexible provisions that can be adapted based on the needs presented most commonly at the time.
- Lack of move on accommodation and move on accommodation that provides ongoing support.

6.4.2 Places of Safety

Data available for Places of Safety covers 1 April 2018 to 31 December 2020.

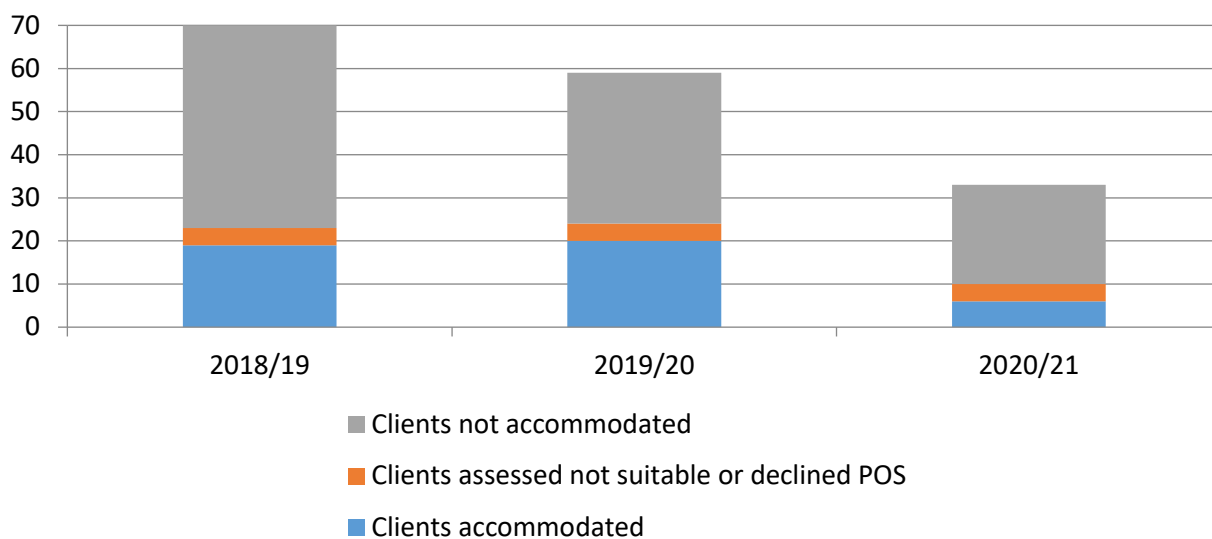
During this time period 162 referrals for Places of Safety were made to GDASS. Of these referrals, 28% (45) were accommodated, 7% (11) were assessed as not suitable and 65% were not able to be accommodated within a place of safety. This amounts to around 105 clients who were not able to access safe accommodation via GDASS across this time period (safe accommodation may have been accessed elsewhere, but available data cannot currently confirm this).

The number of referrals for Places of Safety have reduced year on year. For 2020/21 however, it is important to note that the available data does not reflect a full financial year.

Over half of referrals were for clients who were assessed as high risk. As Places of Safety are a scarce resource, they are prioritised for high risk clients.

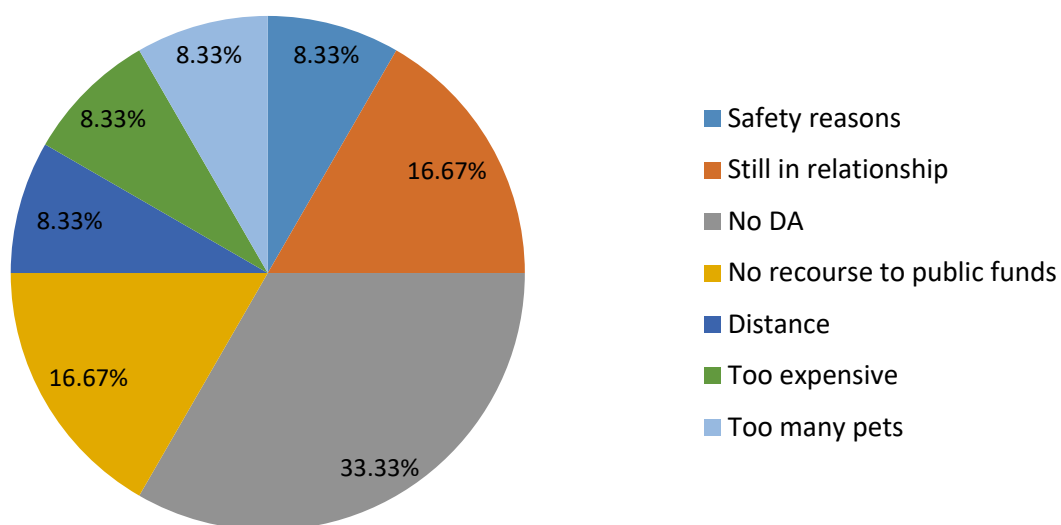
⁶⁷ Homeless at home means that the local authority have accepted either a relief or main duty to the household as they are satisfied that they are homeless and have determined that they have a priority need so have a duty to provide them with TA but the household has not yet needed to request TA (for example DA victim needing to leave their home due to risk, but can remain in the home until perpetrator is released from prison)

Graph 31: Number of request to GDASS for PoS 1 April 2018 to 31 December 2020

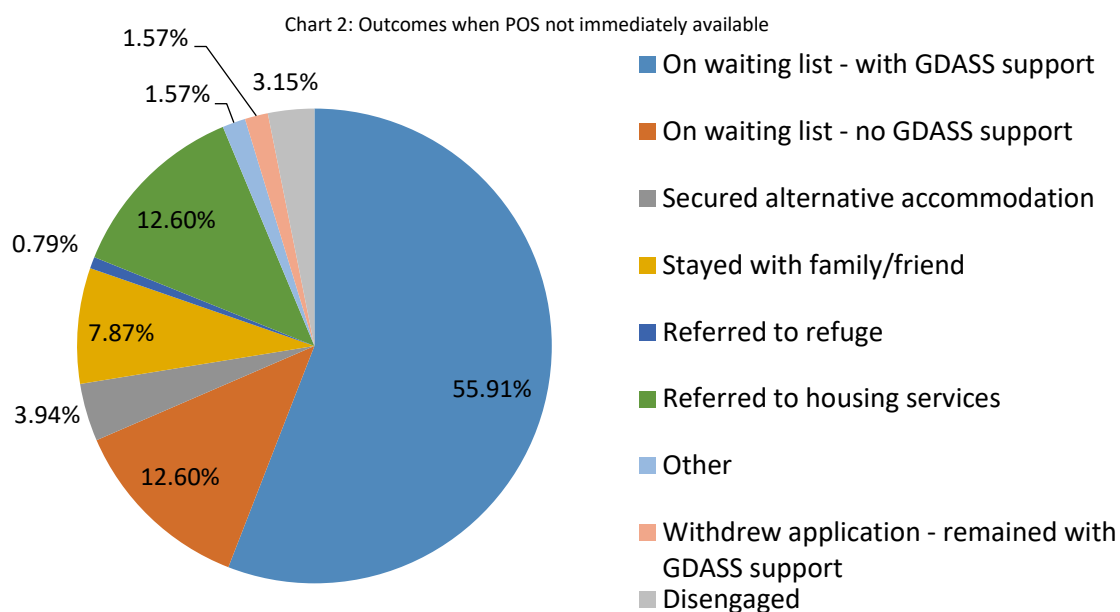


Where access to a place of safety is refused or deemed unsuitable, the most common reason stated was that there was no evidence of domestic abuse identified by GDASS. Where there was domestic abuse however, the most common reasons include 'no recourse to public funds' and the 'victim still being in the abusive relationship'.

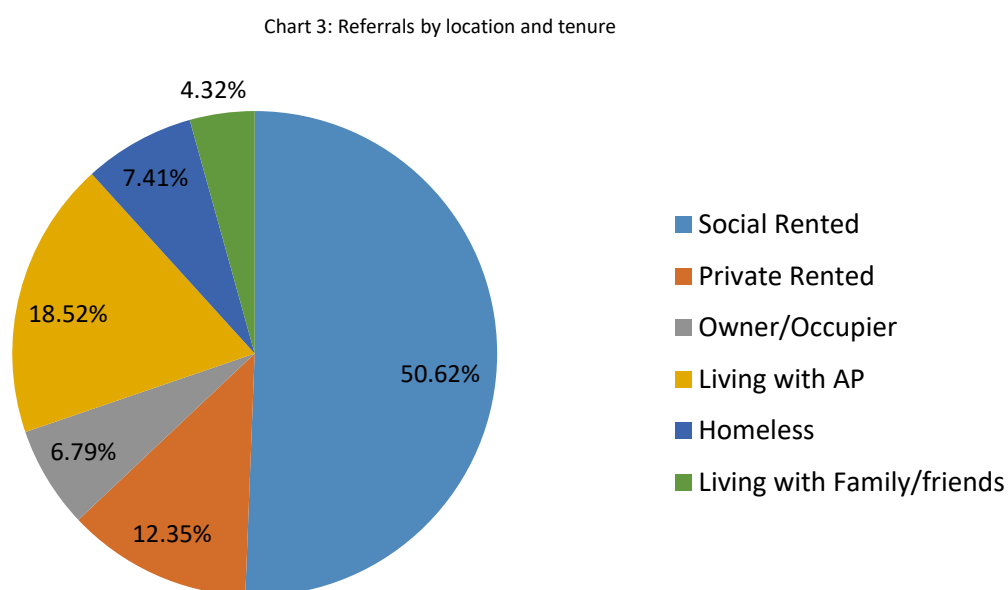
Chart 1: Reasons client assessed not suitable or declined PoS



Where it is not possible to accommodate someone within Places of Safety the majority (56%) remained on the waiting list with GDASS support and some without GDASS support (13%). Others found alternative accommodation or were referred to other forms of safe accommodation. Only 3% disengaged.



Those referred to Places of Safety were most likely to be living in social housing at the time of their referral. A further 19% were living with their alleged perpetrator at the time, with a further 7% noted as homeless.



Of those referred, the majority (80%) were recorded as single females with children, resulting in 287 children being accommodated within Places of Safety. In addition only 1% of those accommodated in Places of Safety were males.

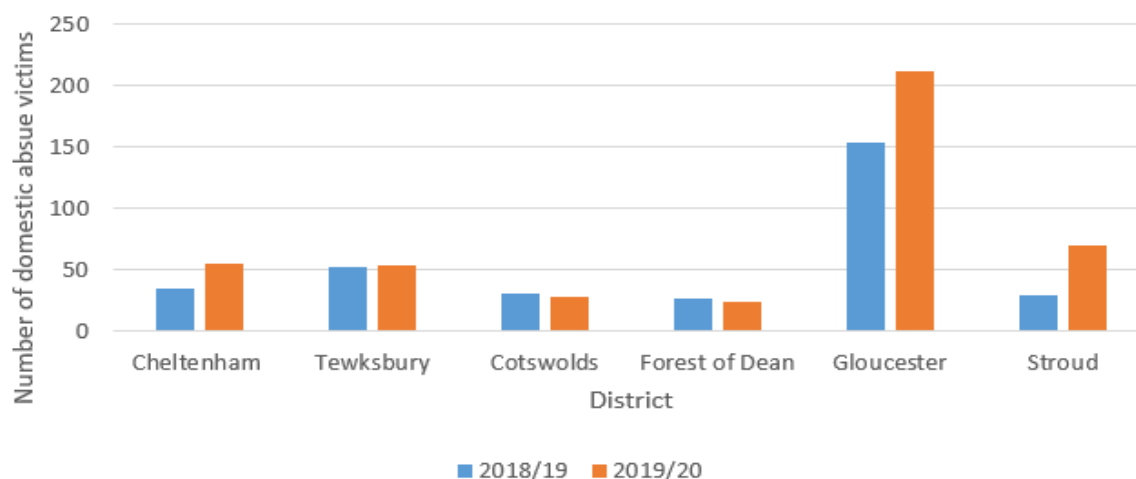
Move on outcomes from Places of Safety are not consistently recorded. Where they are recorded however, the majority of those moving on from this type of domestic abuse safe accommodation are housed within social housing.

6.4.3 Victim demographics from Homeless DA applications

Data available on victim demographics applying as homeless to the district councils are available for years 2018/19 and 2019/20.

Graph 31 provides the number of homeless applications for domestic abuse received by each district. The majority of homeless applications due to domestic abuse were seen in Gloucester, indicating that this is the highest area of need for securing safe accommodation from domestic abuse. This is also in line with wider data on domestic abuse locally indicating that the largest volume of domestic abuse incidents occurs within Gloucester.

Graph 31: Number of domestic abuse victims presenting as homeless to District Councils for years 2018/19 and 2019/20



From the data available, the below demographic information is available from domestic abuse victims applying as homeless:

- The majority of those applying as homeless due to domestic abuse were female ranging from 75-96%. The lowest proportion of female victims was seen for Cotswold District council at 75% in 2019/20; the numbers are however small with this accounting for only 21 female victims and 7 males.
Whilst the majority of domestic abuse related homeless applications are for females, it is positive that male victims are presenting and looking to seek safe accommodation. The number of males is however small, with 39 male victims presenting across all 6 districts in 2019/20.
- The majority of victims are recorded as heterosexual, ranging from 66-96%. The lowest proportion of victims recorded as heterosexual was in the Forest of Dean, this is however skewed by a large number of 'unrecorded' sexual orientation. Those indicating their sexual orientation as LGBTQ is in line with the population estimates for Gloucestershire.
- Across all districts, disability is recorded across 3 categories, Physical Disability, Learning Difficulty and Mental Health. Across these categories, mental health is most significant factor recorded:

District	% of domestic abuse homeless applications where mental health was identified 2019/20	No. of domestic abuse homeless applications where mental health was identified 2019/20
Cheltenham	25%	14
Tewkesbury	13%	7
Cotswold	43%	12
Forest of Dean	26%	6
Gloucester	47%	100
Stroud	79%	55

- The number of applications from Black, Asian and Ethnic Minority victims were minimal with the Cotswolds and Forest of Dean recording no victims from these groups in 2019/20, with Stroud, Cheltenham and Tewkesbury recording less than 10 victims from these groups collectively. For Gloucester, 5% of applications in 2019/20 were for those from Black ethnicities, 4% Mixed and 1% Asian. Whilst Gloucester has the highest level of applicants from Black, Asian and Ethnic Minority backgrounds, this is in line with the population for Gloucester (10% estimated population Black, Asian and Ethnic Minority⁶⁸).
- The majority of victims who apply as homeless to the local authority are recorded as 'unemployed'; indicating a need to consider partnership working to improve outcomes for these victims.

6.4.4 GDASS Safe Accommodation Requests

As part of the GDASS service, victims of domestic abuse will seek the support of GDASS in accessing safe accommodation, mostly via making a request for support in securing a refuge space.

Across a 3 year period, from 2018/19 to 2020/21 between 40 and 51 requests for refuge were made via GDASS annually, accounting for around 1% of total contacts made to GDASS.

These referrals include both single individuals and families seeking refuge space, across a 6 year time period from 1 April 2014 to 31 March 2020, 40% of requests for refuge were for a single individual and 60% were for a family.

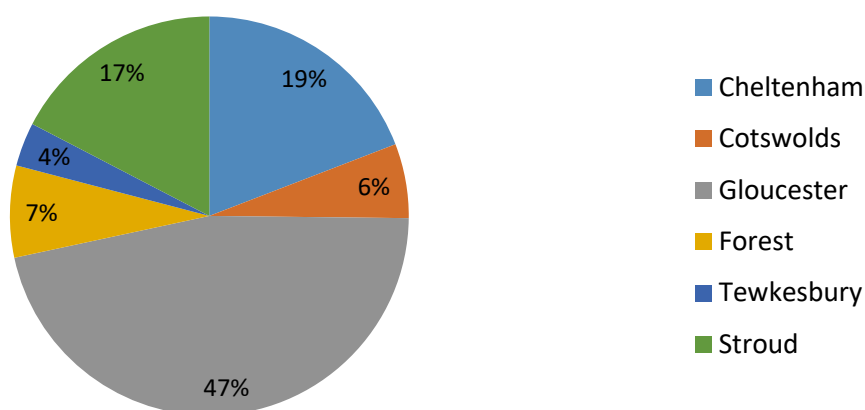
The vast majority make a refuge request with no preference as to the location in which they secure safe accommodation, with only 6% specifically requesting a local refuge space in 2020/21 (accounting for <5 individuals). The request for local refuge space has however dropped from requests made in 2018/19 in which 13 individuals requested this type of support.

Across a 6 year time period from 1 April 2014 to 31 March 2020, 97% of all refuge requests were made by clients residing within Gloucestershire. This is to be expected for a community based service, with many victims from out of county likely to seek refuge via the national network.

During this same 6 year time period, the majority of refuge request came from clients who were residing in Gloucester, accounting for 47% of requests. This is to be expected given the highest rates of police recorded domestic abuse crimes being from the Gloucester district. It is also consistent with the findings from the homeless district council data.

⁶⁸ [equality-profile-2020-final.pdf \(gloucestershire.gov.uk\)](#)

Chart 4: Refuge requests based on district. Total percentage 2014/15-2019/20

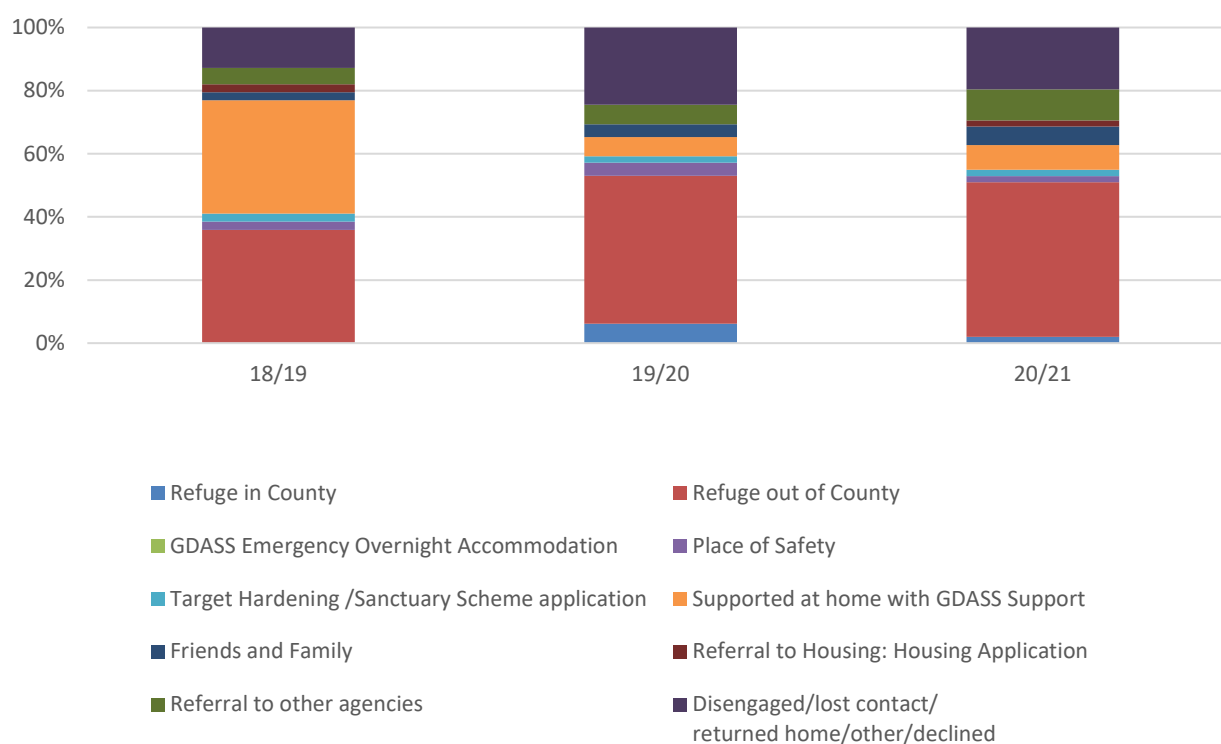


At the point of receiving a refuge request, GDASS will discuss the various options available to victims of domestic abuse, which can include:

- Securing refuge space
- Access to places of safety
- Target hardening or sanctuary scheme to remain safe in own home
- Safe accommodation with family/friends
- GDASS secured emergency overnight accommodation
- Remaining at home with GDASS support
- Access to housing advice

The vast majority of refuge requests made to GDASS result in securing refuge space out of county, as detailed below in Graph 32.

Graph 32: Outcomes - GDASS safe accommodation requests for years 18/19, 19/20 and 20/21



Across time period 2016/17–2019/20, where a refuge placement was refused or not possible to secure, the main cause was ‘client declined or lost contact’. Issues with supply of refuge space are also a factor, for example, the refuge refused the application, no space, or the location was unsuitable. These supply issues account for 44% of negative outcomes. Some of the reasons listed for a refuge refusing an application include previous offences, no evidence of domestic abuse, substance misuse, physical disability, complex needs, rent arrears, and proximity of perpetrator.

Table 7: Reason for refuge request disengagement/unsuccessful placement for 2016/17–2019/20.

Reason for disengaging or not getting refuge	No. of clients	Percentage
Unsuitable location	8	11.27%
Client declined refuge or lost contact	30	42.25%
Refuge declined	17	23.94%
No space	6	8.45%
Placement breakdown	3	4.23%
Not eligible, No recourse to public funds	3	4.23%
Other	4	5.63%
Total	71	

In addition, anecdotal evidence also indicates a need for specialised support or accommodation for people with specific needs or protected characteristics.

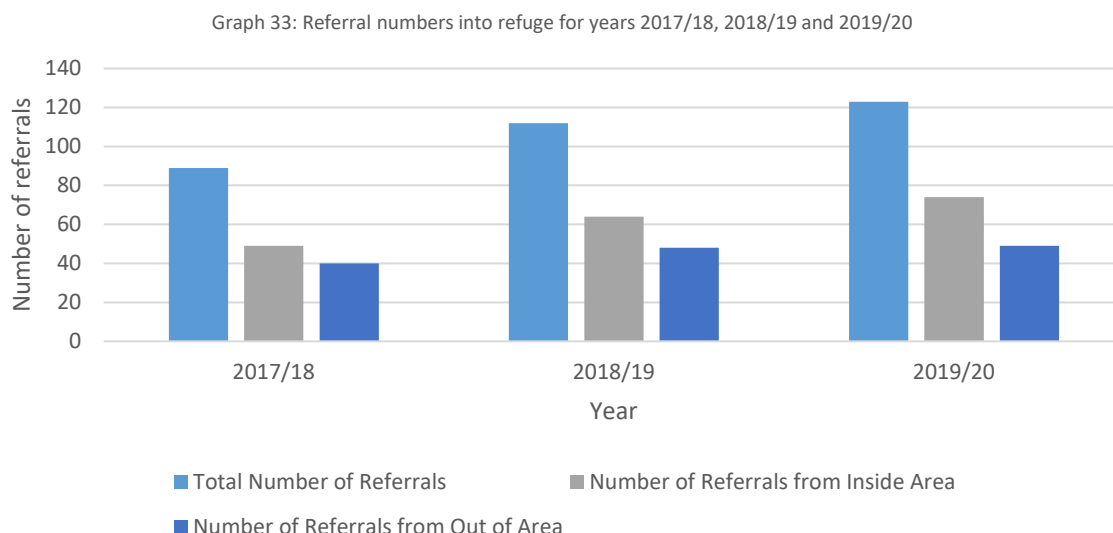
Overall, requests for refuge or safe accommodation support via GDASS are low, possibly due to a community based model that focuses on keeping victims of domestic abuse safe within their own homes that has been the priority for Gloucestershire for a number of years.

Where safe accommodation is required however, the majority of victims secure a refuge space outside of Gloucestershire. This may be the result of robust safety planning where it is not safe for some victims to remain in the county. It could however indicate a greater need for domestic abuse specific safe accommodation within the county, with GDASS identifying approximately 50 victims per year requesting this support.

6.4.5 Stroud Beresford Refuge

Data from Stroud Beresford Refuge covers years 2017/18, 2018/19 and 2019/20. The service is only available to women, so all data presented relates to women and their children.

Over the course of 3 years, the refuge has seen a steady increase in referrals into the service as detailed in Graph 33. Consistently between 40-45% of referrals to the refuge are for victims who live outside of Gloucestershire, demonstrating the need for victims to flee domestic abuse by relocating for their safety (contributing to the national refuge network). The majority of referrals are however from within the county, with victims seeking safety whilst looking to maintain some form of local connection.



Where victims present from out of area, table 8 details the most common areas in which victims are fleeing.

Table 8: Most common areas out of area victims are fleeing in their approach to refuge for years 17/18, 18/19 and 19/20.

	1	2	3	4	5
2017/18	South Wales	Bristol	Plymouth	Swindon	Devon
2018/19	Wiltshire	Bristol	Bath	Dewsbury	Herefordshire
2019/20	Southampton	Hampshire	Wales	Wiltshire	Bath

The refuge is a small scale service, and as such, was only able to accept 27% of referrals in 2019/20 (39% in 17/18 and 30% in 18/19). For 2019/20, this accounted for 90 victims who were not able to access the refuge; something which is likely to be a significant underrepresentation due to the refuge not being contacted by the national network when there is no bed space free.

Some of the challenges identified by the refuge include space within the refuge at the time of referral, families that are too large to accommodate and issues with victims presenting with insecure immigration status. Victims with no recourse to public funds often have difficulty accessing refuge provision as many refuges rely on housing benefit to fund individual victim spaces.

Further challenges faced by the refuge include the length of stay, with the average length of stay increasing from 83 days in 2017/18 to 101 in 2019/20. This is again connected to immigration issues, which require resolving prior to access to move on accommodation.

In addition, the refuge does receive referrals for victims whose support needs are too high to accommodate. This can include behaviour/needs which would be incompatible with a house where vulnerable children are housed (in practice often violent offences/substance misuse). Some people also present to refuge where it is not felt domestic abuse is the primary need.

Some victims who present to refuge will have also found alternative accommodation prior to the refuge being able to accommodate them and therefore no longer require this support.

Where the refuge is unable to accommodate a victim, they provide support in either seeking an alternative or signposting to other services.

Referrals in to the refuge are regularly received via a range of referral routes including:

- National Helpline
- Local helpline
- Professional referrals from MARAC, police, health agencies and local authority housing
- Self-referral

The vast majority of referrals are made for victims who are considered to be at high risk of serious harm or homicide, as would be expected for refuge provision.

Demographics within refuge

Across all three years (102 victims), the majority of victims accepted into refuge were aged 25-34 years (accounting for 39% of referrals across 3 years). This is followed by those aged 19-24 (25% across the 3 years) and 35-44 (22%).

The age of those accessing refuge is slightly higher than seen in national prevalence data, but may be linked to those aged 25-34 being more likely to have young children and the refuge being well placed to support high risk victims of domestic abuse with young children; with the refuge offering specialist support to children who have witnessed domestic abuse, particularly for ages 0-3.

Those victims accessing refuge with 2 children account for 44% of all victims over a 3 year period, followed by a further 41% with 1 child. In addition, 11% were recorded as pregnant at the time they entered refuge, acknowledging the well-known link between high risk domestic abuse and pregnancy.

The refuge consistently has more children access the service than adults (118 children across 3 years), with 69% of all children recorded as being aged 0-5years, with a further 26% aged between 6 and 11years.

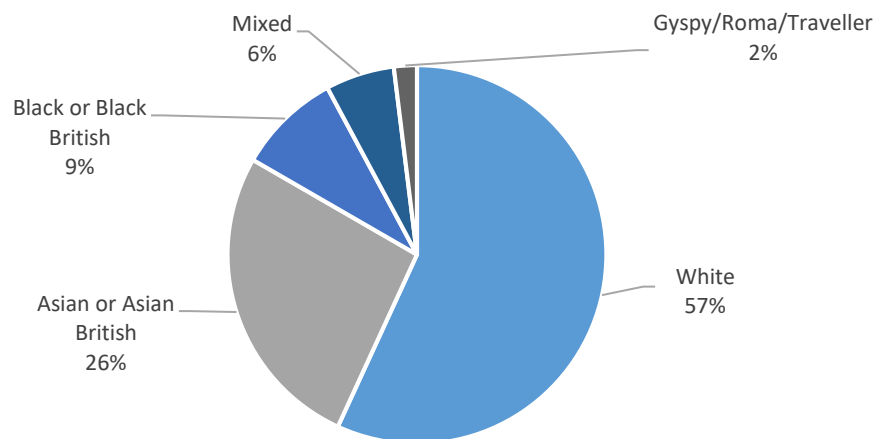
The majority of victims (71% across 3 years) have their marital status recorded as 'cohabiting', with 18% recorded as 'married'. This is considerably less than the wider Gloucestershire population of 50% married, indicating that those who are experiencing domestic abuse and seeking refuge support are far less likely to be married than the general population, and far more likely to be single. Those recorded as single account for 30% of the Gloucestershire population and would likely include those who are 'cohabiting' but not married⁶⁹.

The refuge notes that there are no barriers to access based on sexual orientation. Those accessing the refuge are in the main recorded as heterosexual/straight, at 96%. Whilst this may be linked to the general underreporting of DA by those from within the LGBTQ community, the refuge is in line with the population in Gloucestershire where there is an estimated 5% population from LGBTQ communities.

When considering the ethnicity of those accessing refuge, whilst the majority are noted as being from white ethnic groups, the refuge appears well placed to enable access for victims from Black, Asian and Minority Ethnic groups, particularly those who are noted as Asian or Asian British. This is positive given prevalence data indicates that victims from Black, Asian and Minority Ethnic groups are more likely to experience domestic abuse. The refuge has also indicated previously its ability to support those who experience Honour-Based Violence, a type of domestic abuse more likely to impact on those from Black, Asian and Minority Ethnic groups.

⁶⁹ [equality-profile-2020-final.pdf \(gloucestershire.gov.uk\)](#)

Chart 5: Percentage of victims accessing refuge based on ethnicity across 3 years
(17/18, 18/19 & 19/20)



When considering the disability status of victims entering refuge, 10% are noted as having some form of physical disability or mobility needs. Whilst the refuge is unable to provide wheelchair access, it is able to still support those with physical disabilities where wheelchair access is not required.

In addition, and most significantly, 90% of victims were recorded as having mental health issues. Whilst it is not clear what these issues are specially, it is clear that many victims accessing refuge will experience issues with their mental health; a common impact of experiencing domestic abuse.

Alongside the potential health needs of victims 28% of victims are noted as having children with health needs. This is likely linked to the ability of the refuge to accommodate families where children present with conditions such as Autism, something which the refuge has invested in to ensure appropriate services and space is in place; something which may present as a barrier in other refuge accommodation.

When considering the socio-economic status of victims entering refuge, the majority (96%) are recorded as Economically Inactive/Long or Short Term Ill/Other Inactive. Whilst the refuge does not collate any further specific data, anecdotally, it is noted that the majority of victims entering refuge are unemployed at the time they access the service.

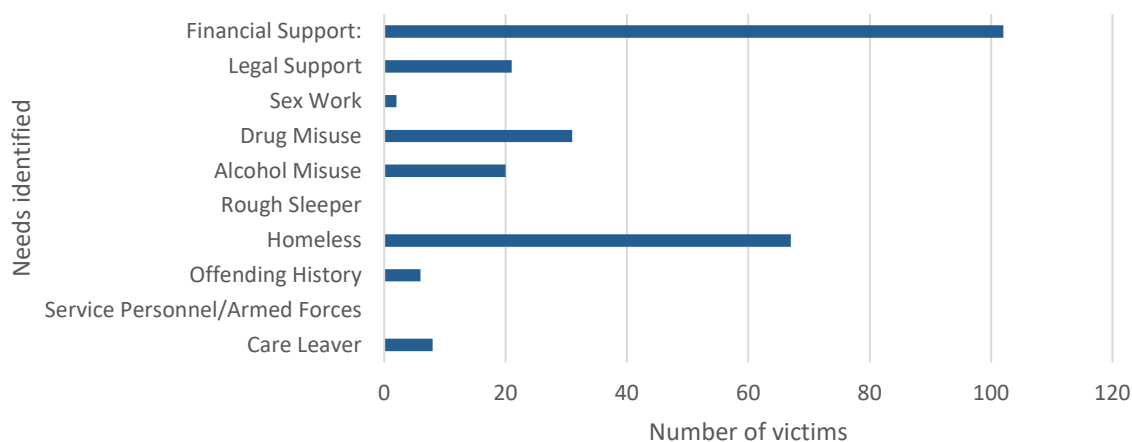
In addition and in line with the above finding, 94% of those accessing refuge are noted as having an annual income of less than £10,400. Anecdotally, the refuge also notes that many of those who access the service are known to have experienced long term poverty. It is likely that this finding indicates that those seeking safe accommodation from domestic abuse are most likely to access refuge provision in circumstances where they have minimal access to the resources needed to secure their safety without the support of this type of provision.

The refuge is able to provide support for those who present with multiple needs and vulnerabilities, with a large number of victims noted as requiring financial support and having experienced homelessness at the point that they access the refuge.

As detailed in Graph 34, the refuge is also able to provide support to those who experience issues with drugs and alcohol. Given the type of provision provided however, and the number of vulnerable children on site, risk assessments are regularly conducted to consider any substance use/behavioural issues surrounding alcohol or drug misuse to ensure the safety of all accessing the refuge. In some

circumstances therefore, refuge provision is not suitable for those with complex needs and alternative safe accommodation may be required.

Graph 34: Additional support needs identified by the Refuge over 3 years (17/18, 18/19 and 19/20)



The refuge does not routinely collect data on those unable to access the service. As such, it is not possible to ascertain if particular demographics make it harder for victims to access this type of support. The refuge does however note, that the service is available to all victims across a range of protected characteristics, with the only significant barriers to accessing the service being:

- Physical disability where wheelchair access is required (the refuge is not wheelchair accessible)
- No resource to public funds
- Complex needs (where the safety of others and their children may be compromised).
- Available space

6.4.6 Target Hardening and Sanctuary Scheme

A significant part of the Gloucestershire model is to ensure victim safety within their own home, enabling victims to maintain social contacts and networks to aid in their ongoing safety and recovery from abuse. In order to support this model, the county runs a Target Hardening and Sanctuary Scheme provided by Safe Partnership.

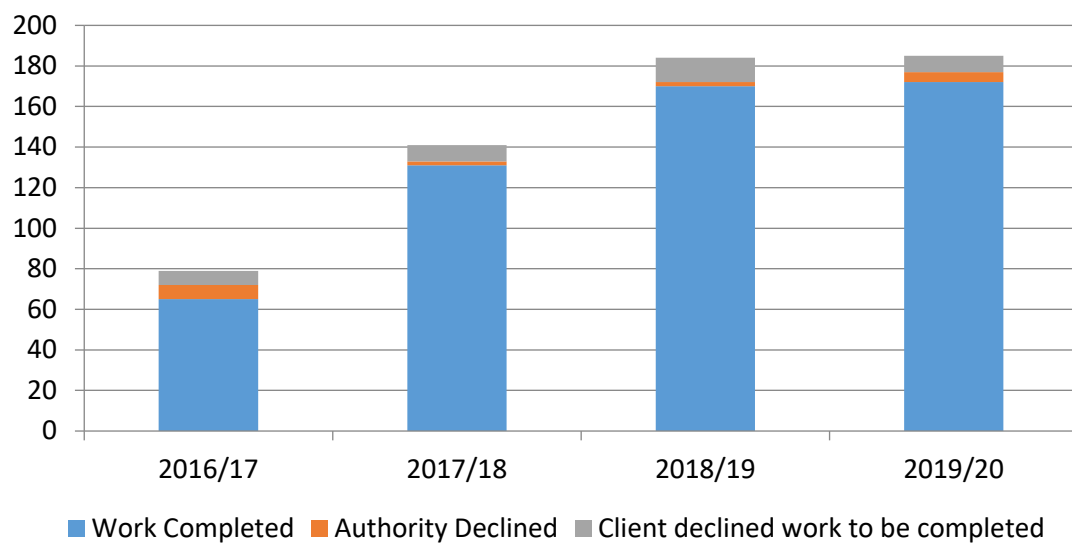
Across a 4 year time period from 2016-17 to 2019/20, referrals for the scheme have increased year on year, with 91% of referrals resulting in works being completed to keep a victim safe within their own home, as detailed in graph 35.

Works completed on victim's homes can include⁷⁰:

- Door and window locks
- Outside lighting
- Anti-climb paint
- Letterbox guards
- Reinforced doors
- Alarms

⁷⁰ Not an exhaustive list

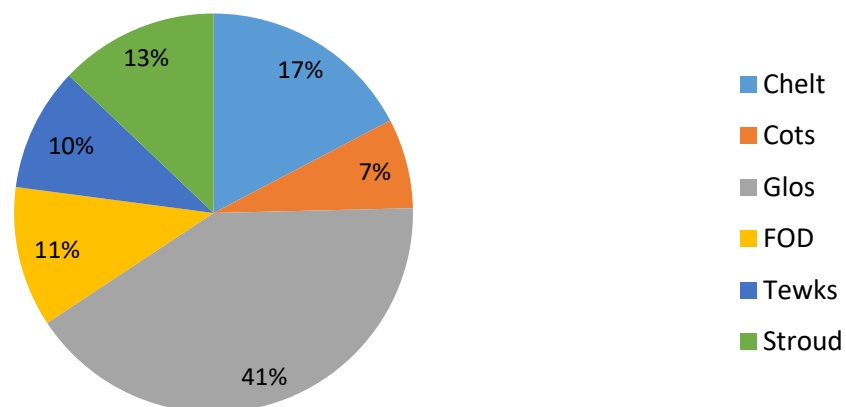
Graph 35: Outcomes from Target Hardening referrals by year from 2016-17 to 2019/20



The vast majority of referrals into the scheme are made internally by GDASS services, in particular, the IDVAs, Floating Support workers and the helpdesk.

As with requests for domestic abuse safe accommodation or temporary accommodation, the majority of referrals into the Target Hardening Scheme come from the Gloucester district, accounting for 41% of all referrals. This is to be expected given the prevalence data for domestic abuse in the county.

Chart 6: Referrals into Target Hardening and Sanctuary Scheme by district for years 2016-2020



Over the 4 year time period 2016-2020, 10 referrals for the Sanctuary Scheme were made via GDASS to Safe Partnership. The small numbers involved fluctuate by year. Of these referrals, 80% have had the work successfully completed. The Sanctuary Scheme provision involves creating a safe room for high risk victims of domestic abuse to enable them to remain safe in their home once an alarm has been triggered for police attendance.

Referrals to GDASS for the Target Hardening and Sanctuary Scheme are nearly 4 times higher than seen for refuge requests. This is to be expected for a community based model, and demonstrates the importance of a scheme that enables victims of domestic abuse to remain safe within their own

home. Many victims offered this scheme are provided with ongoing GDASS support within their own safe accommodation.

6.5 Gaps in provision and future developments

Space in domestic abuse safe accommodation

Within Gloucestershire, the main gaps are focused on the provision of domestic abuse specific safe accommodation, with many victims housed in general access accommodation when they present as homeless. Whilst the county does have domestic abuse provision in Places of Safety and the Stroud Beresford refuge, this provision is limited.

There is a clear need to increase the provision of domestic abuse specific safe accommodation, with the refuge unable to accommodate 90 victims of domestic abuse in 2019/20 and Places of Safety unable to accommodate 105 clients from April 18 to December 20. Whilst not all of these will be turned away due to space alone, space in refuge is a key factor, and likely to be an underrepresentation of the true volume requiring this type of support locally.

District Councils will also need to consider 'lessons learnt' from the Places of Safety model for the development of further roll out and ensure their effective use.

There is also a need to ensure access to domestic abuse safe accommodation at the right time.

Victims with no recourse to public funds (NRPF)

Those with NRPF will often be more difficult to accommodate in safe accommodation as they will have no access to housing benefit to fund their place within refuge, place of safety, or other accommodation.

Gloucestershire currently has no local specific scheme to support these victims.

Specialist accommodation based on specific needs

Provision in Gloucestershire is currently universal, with the exception of the refuge which provides support for female victims of domestic abuse and specialises in support for victim with young children.

There have been growing calls nationally, for greater use of 'by and for' services to meet the needs of victims from protected characteristic groups, ensuring the support provided meets the specific needs of certain groups.

Within Gloucestershire, current gaps in specific support within safe accommodation have been identified for LGBTQ victims and those with a disability where specific access requirements are needed. It is unclear at present if there are gaps in provision for those from Black, Asian and Ethnic Minority backgrounds due to a lack of specific data, there is however a likely need given the wider prevalence data.

Within Gloucestershire there is also a need to consider the accommodation options for larger families, a gap identified by the refuge.

Our Places of Safety model does allow for victims with specific needs and from protected characteristic groups to access safe accommodation. This provision is however small, and requires an increase in volume.

Complex Needs⁷¹

Victims of domestic abuse with complex needs is an emerging issue within Gloucestershire across all areas of specialist services and wider agency responses.

Within accommodation based support, those with complex needs may find it difficult to access safe accommodation due to their support needs, and may also find it more difficult to sustain their accommodation.

Many individuals with complex needs require more intensive support, which requires greater capacity across our whole system. There may therefore be a need to consider local provision that is designed to provide intensive support to those with complex needs to support their access to safe accommodation, sustain this accommodation and access wider services to meet their needs. Alongside this, dedicated specialist DA accommodation may also need to be explored.

The District Council also intend to review the option for the further roll out of the DA intervention officer within housing, to increase support for those with complex needs accessing housing support.

Move on accommodation with support

Those who access emergency accommodation, whether that is domestic abuse specific or not, require access to move on accommodation to secure longer term suitable safe housing. This not only allows victims of domestic abuse to move on with their lives, but also frees up emergency accommodation spaces for other victims who require this support at the point of high risk crisis.

There is a need therefore in Gloucestershire to develop an approach to increase move on accommodation for victims of domestic abuse. There is also a need to better understand our current provision.

Whole Housing Approach and DAHA Accreditation

Locally Gloucestershire has not implemented the Whole Housing Approach for domestic abuse or actively pushed for DAHA accreditation amongst local housing providers. As these best practice approaches are becoming more widespread across the country, Gloucestershire should look towards implementing these approaches locally to ensure effective approaches to domestic abuse in housing settings.

Cross Border Access

The requirements set out in the statutory duty for support in safe accommodation outline clearly the need to ensure support for those victims accessing services from other local authority areas. There is a need therefore to consider cross border collaboration to ensure fair and equitable access to support in safe accommodation for victims of domestic abuse who need to leave their local area to secure safety.

Cross border collaboration may also be an area of consideration for the development of any specific accommodation or support options for specific protected characteristic groups.

⁷¹ Adults experiencing three or more of the following five: homelessness, substance misuse, mental health issues, domestic abuse, and contact with the criminal justice system. Many people in this situation may also experience poverty, trauma, physical ill-health and disability, learning disability, and/or a lack of family connections or support networks.

Developing links with Registered Social Landlords

A large percentage of those locally accessing domestic abuse safe accommodation are already housed by registered social landlords. There is therefore a need to ensure the local partnership board has established links with these providers to ensure an appropriate response to victims of domestic abuse.

7. Community Based Services for Victims of Domestic Abuse

Community based services are delivered to domestic abuse victims and survivors within the community and include:

- Helplines
- Outreach support services and programmes
- Support groups
- Counselling
- Crisis support services

The provision of such services, alongside refuge and other accommodation based services are supported within the Violence Against Women and Girls (VAWG) Strategy 2016-2020 and its commitment to ensuring ‘no woman is turned away from the support she needs and that all victims get the right support at the right time’⁷². Alongside this, the National Statement of Expectations⁷³ outlined the need for commissioners to ensure that victims are at the heart of commissioning, by providing a range of flexible and responsive services to meet the differing needs of all victims; a model of support that includes both community and accommodation based services.

7.1 Best Practice Approaches

Community based services that are considered standard best practice often include a local helpline that offers information, advice and support to victims of domestic abuse. These helplines are frequently supported by the 24-hour National Domestic Abuse Helpline, with callers using both services to ensure access to wider community or accommodation based support.

Across England, for 2020, there were 133 local helpline services available, often connected to wider domestic abuse provision in local areas⁶¹.

Many community based domestic abuse services include a response to high risk victims of domestic abuse as a best practice approach. Independent domestic violence advisors (IDVAs) are professionally qualified, specialist domestic abuse workers, who support high-risk victims of domestic abuse. A 2019 practitioner survey found that there were 980 full time equivalent IDVAs across England and Wales, a 26% shortfall in England and Wales as recommended by Safe Lives⁵³.

Alongside the support provided to high risk victims, many community based services also provide support for victims who do not require a crisis response. This support often involves outreach/floating support workers who provide support in safety planning, access to other services, programmes of support to increase confidence and self-esteem and advocacy. This support is often provided alongside the provision of group work programmes such as the Freedom Programme; a group work programme that supports victims in understanding what has happened to them.

In more recent years, community based services have also expanded to provide dedicated young person’s violence advisors (YPVAs) and support for male victims. With most domestic abuse organisations developed to support women across a broad spectrum of need and characteristics, more recent best practice approaches have included the development of specific services that meet the needs of specific cohorts of victims.

⁷² [Future Delivery of Support to Victims and their Children in Accommodation-Based Domestic Abuse Services: Consultation Response \(publishing.service.gov.uk\)](#)

⁷³ [\[Title\] \(publishing.service.gov.uk\)](#)

Intersectionality and service provision⁷⁴:

The term intersectionality was coined by American Academic Kimberlé Crenshaw to describe the struggle that African American women experienced in being discriminated against on the basis of both their gender and race. The term has since been expanded from its original meaning to consider how all of an individual's identities interlock and influence their experience of the world and the people within it, including the role that social biases play in influencing how victims/survivors of domestic abuse experience barriers to support.

Adopting an intersectional approach to responding to domestic abuse is rapidly considered a best practice approach in the UK, allowing services to take a more holistic approach to an individual ensuring services take into account all parts of an individual's identity (e.g. race, gender, sexuality etc.) to effectively respond to their needs.

Alongside the inclusion of an intersectional approach to community based domestic abuse services, there is a growing call for service provision that is dedicated to specific groups, for example, dedicated domestic abuse services for Black, Asian and Minority Ethnic communities, or dedicated LGBTQ services. This is in recognition that some 'catch all' services are unable to meet the needs of specific groups and enable those groups to feel that the services will understand their specific needs.

The commitment to an intersectional approach is outlined in the current draft statutory guidance framework⁷⁵ as part of the Domestic Abuse Act alongside the Code of Practice for Victims of Crime ('the Victims' Code') in which victims are expected to have access to support services without any discrimination. Coupled with this is the need for local areas to consider the local need for dedicated services.

Safe Lives Leading Lights accreditation⁷⁶:

Safe Lives Leading Lights is the mark of quality for community based domestic abuse services and is increasingly being recognised by commissioners and funders across the UK.

The programme offers a set of standards for supporting victims of domestic abuse across all risk-led community based domestic abuse services, and provides training for service managers as well an external assessment that enables services to:

- Evidence the quality of their service: enabling them to make a stronger case for funding and to become commissioning ready
- Support the service to provide the most effective response to keep victims safe
- Improve morale: support staff to gain knowledge and confidence in their roles
- Support partnership work: enabling the service to develop a better relationship with commissioners
- Develop consistency across different functions and sites

There are currently more than 50 accredited leading lights services.

Shared Sustainability, Shared Standards⁷⁷:

In 2016, Imkaan, Rape Crisis England and Wales, Respect, Safe Lives and Women's Aid developed a set of shared standards for the domestic abuse and wider VAWG sector where local services are

⁷⁴ [Intersectionality and domestic violence – Genesis Women's Shelter & Support \(genesisshelter.org\)](https://www.genesisshelter.org/)

⁷⁵ [\[Title\] \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/)

⁷⁶ [Leading Lights: accreditation for domestic abuse services | Safelives](https://www.safelives.org.uk/)

⁷⁷ [Shared Standards Whole Document FINAL.pdf \(safelives.org.uk\)](https://www.safelives.org.uk/)

affiliated with the services developing the standards, for example, where services are leading lights accredited.

The standards include:

- **VAWG is 'gender based'**: Providing a response that is sensitive to the gendered dynamics of violence is a crucial component of specialist VAWG services. This does not mean that men are never victims of violence, or that women are not sometimes perpetrators.
- **Intersectional approach**: a service should be able to demonstrate its commitment to removing the barriers which prevent and/or limit both access and utilisation of services by some groups.
- **Diversity and equality**: The public sector equality duty within the Equality Act 2010 means that public services must take account of the protected characteristics within the Act, offer fair and effective services, and further the equality aims of the Act, including eliminating discrimination and advancing equality between different groups.
- **Safety**: Creating safety has been a central part of responses to VAWG and can have a variety of connotations and meanings in relation to different forms of VAWG and different women's experiences.
- **Dignity and respect**: Staff within all services should strive to treat service users with dignity, respect and sensitivity, and this should be reinforced in training. It is particularly important to create an environment in which survivors can feel believed and not judged.
- **Undoing the harms of violence**: A commitment to not replacing the control of perpetrators with control by experts/professionals. Creating an environment in which survivors can exercise self-determination is part of rebuilding the self in the aftermath of abuse.
- **Integrative pathways between specialised agencies**: Partnership working in the context of specialist VAWG support services is about clarity in relation to the aims and parameters of individual services, finding ways to pool strengths through creating efficient referral pathways and sharing expertise, and advocating within multi-agency settings on behalf of VAWG support service users and their needs.
- **Prevention**: The beliefs and norms that underpin violence against women are resistant to change, meaning that primary prevention requires long-term investment.
- **User participation and engagement**: Service user involvement and participation help promote a culture of empowerment. When survivors are directly involved in organisational decision-making, services benefit from their expertise, insights and knowledge.
- **Outcomes**: Regular outcome-based monitoring has the potential to enable services to become more effective for their users, and contribute to planning and service development, as well as tracking the progress of individual service users.
- **Governance and leadership**: Because of the centrality of power and control in VAWG, it is important that VAWG specialist organisations and governance structures model a positive relationship to power.

7.2 Local Approach

Gloucestershire has a long standing commitment to ensuring the provision of community based support for local victims of domestic abuse, with a focus on providing quality services that aim to keep victims and their children safe within their own homes and maintaining their links to their community as a means of helping victims to rebuild their lives.

Both the Domestic Abuse and Sexual Violence (DASV) Commissioning Strategy and Outcomes Framework (2014 – 2018) and Gloucestershire joint commissioning framework for domestic abuse

outline this commitment to a community based model. A range of services have been commissioned as a result which are ever evolving in order to meet changing demands and local needs.

7.3 Service Provision

The main service provision for the county is provided by Gloucestershire Domestic Abuse Support Service (GDASS) via GreenSquareAccord. The service provides a range of community based support for victims of domestic abuse aged 16+. The service is designed to meet the needs of all victims in Gloucestershire, regardless of risk, and whilst the county does not have separate domestic abuse services for particular protected characteristic groups, it does have specialist workers embedded within GDASS.

A summary of the service offer from GDASS is provided in the below table:

Helpdesk	<p>Operates Monday to Friday, 9am – 5pm.</p> <p>It is managed by First Response Workers who are able to offer immediate support and advice and take referrals for the GDASS support packages.</p> <p>The Helpdesk is able to offer:</p> <ul style="list-style-type: none"> -Immediate advice and support for those currently experiencing/historically affected by domestic abuse -Assessment of risks posed to individuals through domestic abuse -Access to places of safety -Advice around the dynamics of abuse -Access to longer-term support packages around domestic abuse issues -Access to GDASS service Group Work programmes -Advice for family and friends -Agency referrals -Signposting -Advice for professionals engaging with victims (via a separate phone number)
Floating Support	<p>GDASS offers a 12-week package of support, completely tailored around the individual victim/survivor and the support needs they have/may identify. This can be done face-to-face, over the phone or by email, or any combination of these to best suit the needs and lifestyle of the victim/survivor.</p> <p>Floating Support workers focus on supporting the victim/survivor in understanding the dynamics of domestic abuse and helping to develop a safety plan, their work includes:</p> <ul style="list-style-type: none"> -Safety Planning -Increasing awareness of domestic abuse -Confidence building and moving on -Advocacy between the victim/ survivor and agencies -Finances -Housing -Signposting

Group Work	<p>GDASS offer a range of group work programmes including:</p> <p>The Phoenix Programme: 10 week female only programme that provides an understanding of domestic abuse and helps women to develop their abilities and increase their confidence and self-awareness. This programme is for survivors who have left their abusive relationship.</p> <p>Breathe: 12 week female only programme that focuses on Boundaries, Respect, Empowerment, Awareness, Taking Control, Honouring Resistance and Education.</p> <p>Six Steps: A male victim/survivor group work programme. The programme is designed to be run virtually, and supports participants to understand domestic abuse behaviours and tactics. It supports participants to understand the impact of abuse on them and their families.</p>
MASH Support	GDASS have workers embedded within the Multi-Agency Safeguarding Hub ensuring joint working with police, social care, education and health to provide a collective safeguarding response to children and victims of domestic abuse.
GMAT	The Gloucester Multi-Agency Team is a social care team that has embedded within it specialist services to provide a complete package of support for families. GDASS are embedded within this team and provide direct support to families experiencing domestic abuse. This work includes the running of the Freedom Programme and Breathe.
IDVA Service	<p>Independent Domestic Violence Advisors are members of staff who have been trained to work with women and men who have been assessed as being at high risk of serious harm through Domestic Abuse. IDVAs specialise in assessing and reducing risk of harm. They work very closely with partner agencies (such as the police, social services, probation, and housing) to create safety plans that support victim/survivors to keep safe. IDVAs are an integral part of the MARAC (Multi Agency Risk Assessment Conference) process.</p> <p>GDASS have specialist Court IDVAs who work exclusively with people who are going through the Criminal Justice System. They work very closely with the court staff, police, the Crown Prosecution Service and Magistrates/Judges to ensure that victim voice is heard within the Criminal Justice System, and that any requests victim/survivors make to the court are heard and recorded.</p> <p>In addition, GDASS also employ a litigant in person who provides support to victim/survivors going through the family court process.</p> <p>The IDVA service will also have a dedicated Complex needs, substance misuse IDVA from 2021. This IDVA will be based within the Nelson Trust Women's Centre one day per week to ensure partnership approaches to women with complex needs who access this service.</p>
YPVA	Young Persons Violence Advisors are members of staff specifically trained and accredited to support young people at high risk of serious harm from domestic abuse. The GDASS YPVA works on a one-to-one basis, on issues experienced by younger victim/survivors and liaises with schools and other agencies to create a multi-agency plan to reduce the risk to the young person.
Health project	<p>Health Independent Domestic Violence Advisors (HIDVAs): GDASS employs two full-time HIDVAs based across Gloucestershire Royal Hospital (GRH) and Cheltenham General Hospital (CGH).</p> <p>The objective of the HIDVA project is to provide effective intervention to those experiencing domestic abuse at the earliest opportunity. Many domestic abuse victims will attend a hospital at some point during the period that they are being abused.</p> <p>A large part of the HIDVA role is up-skilling hospital staff to identify domestic abuse and to create effective discharge and safety plans. The HIDVAs offer training to individual staff,</p>

	wards and departments around domestic abuse and the referral pathways for further support. GP Development Workers (GPDWs): GDASS employ three GP Development Workers who are working across all 81 GP Surgeries in Gloucestershire to improve domestic abuse early identification and risk assessing. The GPDWs support GP surgeries to identify a domestic abuse champion who receives specialist training to support their surgery to deal with domestic abuse disclosures. The GPDWs offer support and training to surgeries and support them to become safe spaces for disclosures of domestic abuse.
New projects coming in 2021 (MoJ funding for 2 year pilot services)	
Police IDVA Service	The police response IDVAs will be based within our local Multi-agency Safeguarding Hub (MASH) and be aligned to the police Domestic Abuse Safeguarding Team (DAST) and police investigating teams to support police colleagues in engaging with hard to reach victims, supporting with Clare's Law Disclosures and supporting victims to navigate the criminal justice system. The Police IDVAs will also support access to the wider GDASS service.
Mental Health IDVA service	The mental health IDVAs will have a base within Wotton Lawn and work alongside wider mental health services to provide support to victims of domestic abuse accessing mental health services, develop pathways of support and develop links between mental health services and the wider GDASS service.

The GDASS service is Safe Lives Leading Light Accredited in line with best practice.

Alongside GDASS, Gloucestershire also operates a domestic abuse support service for young people. Safe Teenage Relationship Education & Empowerment Team (STREET) is a county-wide service for young people aged 13-19 who:

- Have experienced or are experiencing teenage relationship abuse
- Have witnessed domestic abuse in the home either current or historic
- Are displaying harmful behaviour in their relationships

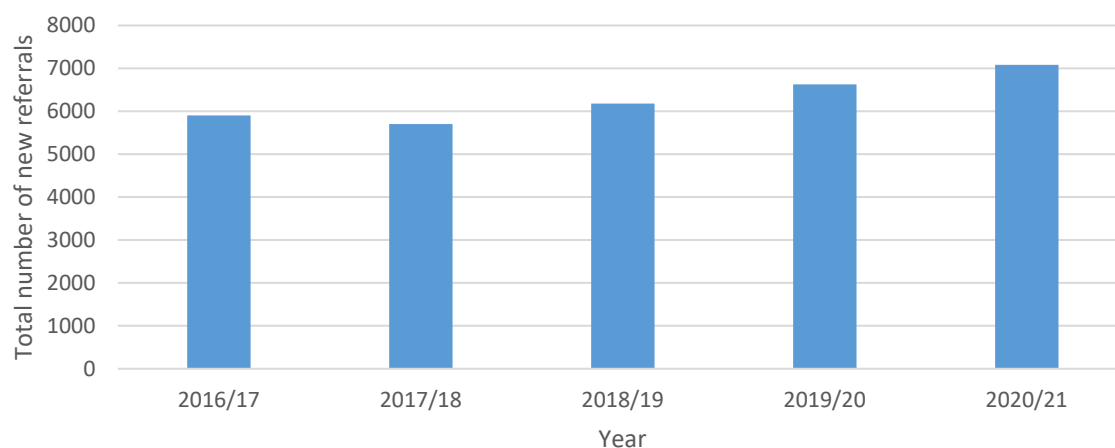
STREET offers 1:1 support and evidence-based group programmes CRUSH and The Recovery Toolkit.

The work of STREET is largely outside of the scope of this needs assessment, but will be reflected on where appropriate. Young people and domestic abuse will be considered in a separate needs assessment in the future.

[7.4 Access to Community Based Support in Gloucestershire](#)

Referrals in to GDASS have increased year on year with a 7% increase from 2019/20 to 2020/21.

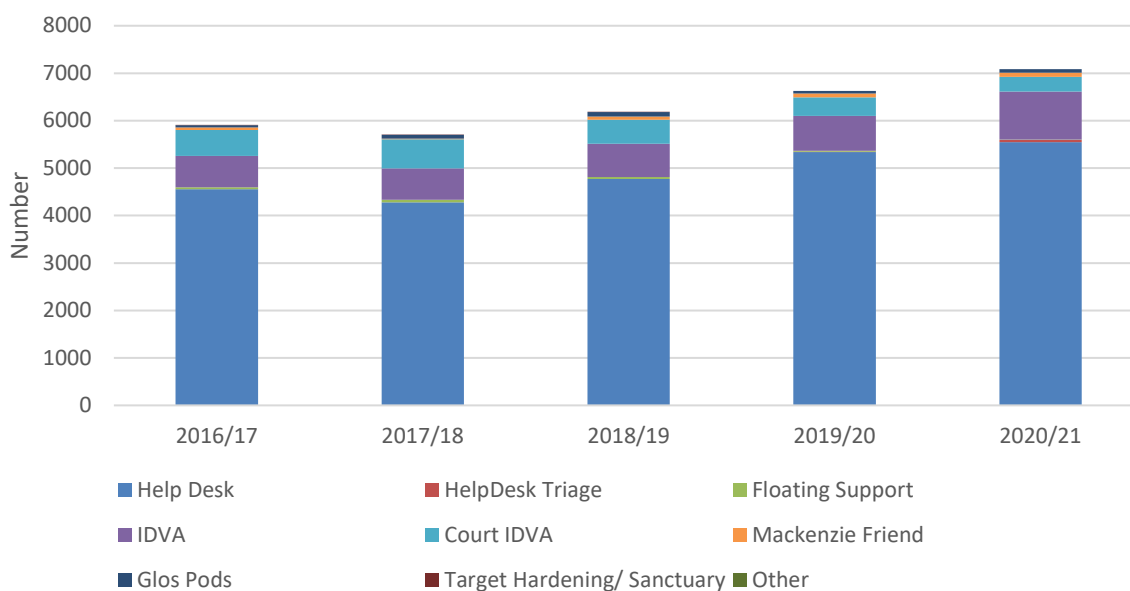
Graph 36: Total new referrals into GDASS based on year



The vast majority of referrals in to the service are via the helpdesk, as would be expected given this is the main access to the service. Many referrals via the helpdesk will move on to other areas of support within the service, such as floating support and IDVA and many victims will also choose to continue contact with the helpdesk for ongoing advice and support.

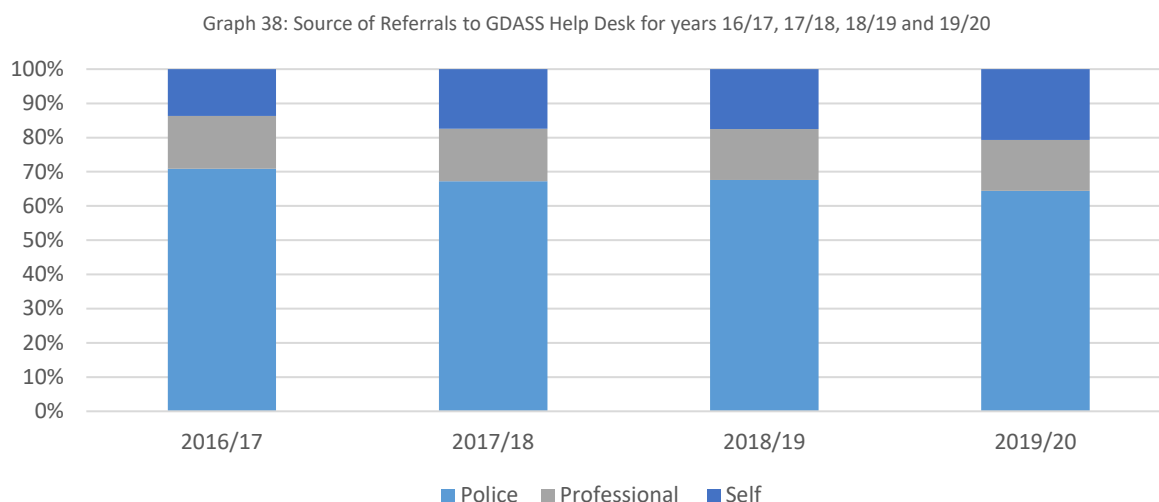
As detailed below is graph 37, the second largest volume of referrals into GDASS is for the IDVA service, accounting for 14% of new referrals in 2020/21, an increase from 11% of new referrals for years 2016/17 to 2019/20. This increase in high risk referrals into the IDVA service may be connected to the covid19 pandemic and the impact this has on victims of domestic abuse.

Graph 37: New referrals to GDASS based on service offer for years 16/17, 17/18, 18/19, 19/20 and 20/21



Referrals into GDASS are most consistently made by the police, accounting for 64% of referrals in 2019/20. This is a decrease from 2016/17 in which police referrals accounted for 71% of referrals into the service. The decrease in the percentage of police referrals is accounted for by an increase in

self-referrals rather than referrals into GDASS from other services.



The percentage of police referrals into GDASS are considerably higher than seen nationally, with the Safe Lives Insights dataset⁷⁸ indicating around 21% of referrals into domestic abuse services nationally come from the police. This higher rate of police referrals locally is likely the result of the police risk assessment process, in which the Vulnerability Identification Screening Tool (VIST) is automatically submitted to GDASS with victim's requiring to specially withdraw their consent for a referral.

There is a need locally to consider referrals into GDASS from other services, with 15% of referrals into GDASS helpdesk consistently being from other professionals, a considerable underrepresentation than seen from the Safe Lives Insights dataset nationally.

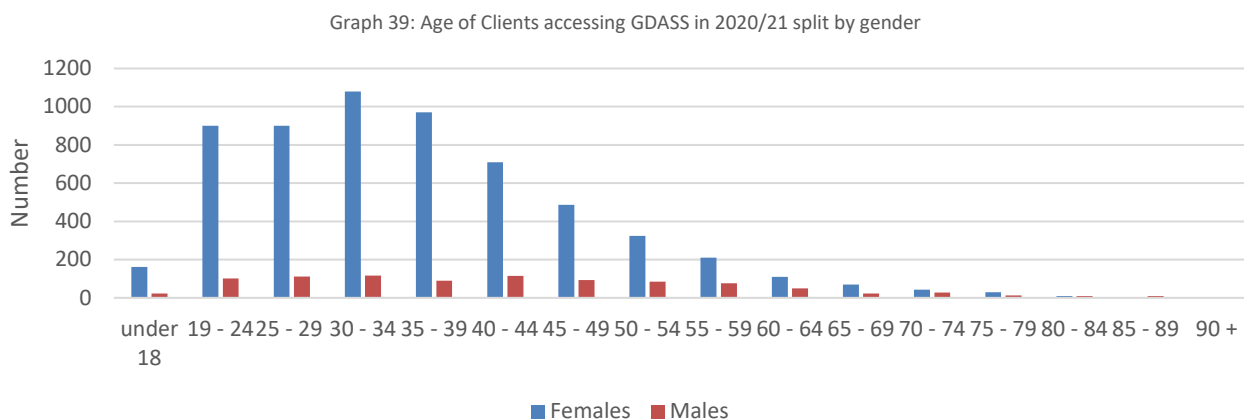
The vast majority of referrals into GDASS are made for female victims of domestic abuse accounting for 86% of referrals in 2020/21. Referrals for male victims of domestic abuse are however considerably higher within GDASS than seen in similar services nationally, with GDASS seeing 14% of referrals for males compared with national services seeing 4%⁷⁹. This is a positive demonstration on how GDASS has looked to promote its service to male victims of domestic abuse.

There are some variations in engagement with GDASS services based on gender however, with male service users accounting for approximately 10% of all engaged service users but 18% of all disengaged service users. This indicates that men are less likely to contact the helpdesk and, of those that do, are less likely to engage than women. This is similarly reflected when considering the IDVA service, although male victims are more engaged with the IDVA service than the helpdesk.

As detailed in graph 39, the majority of GDASS clients are aged between 19 and 39, in line with local prevalence data.

⁷⁸ [MergedFile \(safelives.org.uk\)](https://safelives.org.uk)

⁷⁹ <https://safelives.org.uk/sites/default/files/resources/Insights%20national%20dataset%20-%20Helpline%202014-2017%20-%20Final.pdf>



Engagement data from GDASS indicates that clients aged 30-49 are more likely to stay engaged with the service than other groups. Service users under the age of 24 are considerably more likely to be disengaged than other age groups. As well as being underrepresented those under 18 in particular were more disengaged than engaged, a finding not reflected in any other age groups. This finding may be indicative of the experience of abuse amongst younger people, with some being concerned about parental involvement, finding it harder to recognise the experience of abuse and many young people relationships being faster moving and more intense than adult relationships.

This finding differs from IDVA support however, indicating that young victims are more likely to remain engaged with the IDVA service, indicating greater engagement once the abuse is assessed as high risk.

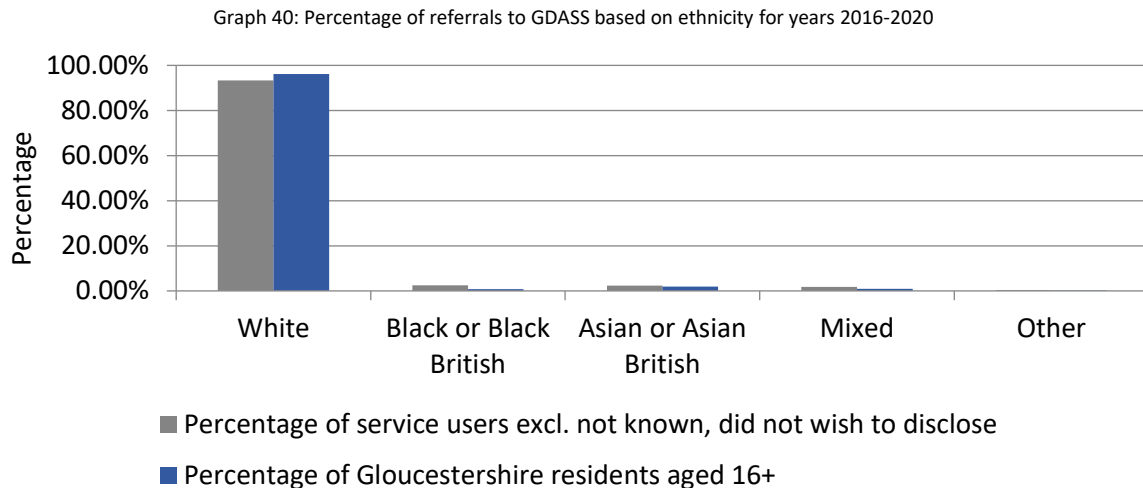
7.4.1 GDASS referrals and protected characteristics⁸⁰

Data presented from GDASS referrals based on protected characteristics covers collectively years 2016-2020.

Ethnicity

From years 2016-2020, the majority of referrals in to GDASS were for individuals from 'white ethnicities'. Despite this, service users from Black, Asian and Ethnic Minority backgrounds are overrepresented in the service. This is to be expected when considering the wider prevalence data.

⁸⁰ Lifted from the Gloucestershire Domestic Abuse Support Service (GDASS) Protected Characteristics Breakdown 2016 – 2020. Maria Arthurs-Hartnett



When considering engagement with the service helpdesk based on ethnicity, Black and Asian people are more likely to be disengaged than other ethnicities. This may indicate a need for GDASS to consider how it engages with these groups and maintains engagement following initial contact. This links to calls more widely nationally for services to become more intersectional in their approach.

As with other parts of the service, engagement improves from these groups when looking at IDVA provision. Indicating a greater likelihood of engagement once the abuse is assessed as high risk. This may also point to the success of GDASS having IDVAs with specialist knowledge to respond to particular protected characteristics.

Religion

The majority of individuals (25%) accessing GDASS were recorded as atheist/no religion. Where a religion was identified, the majority were recorded as Christian (10% of all clients).

When considering the engagement of service users with the helpdesk service Christian, Hindu, Muslim, Buddhist and Sikh service users account for a greater proportion of engaged service users than disengaged service users. The opposite is true for service users describing themselves as Atheist or with no religion.

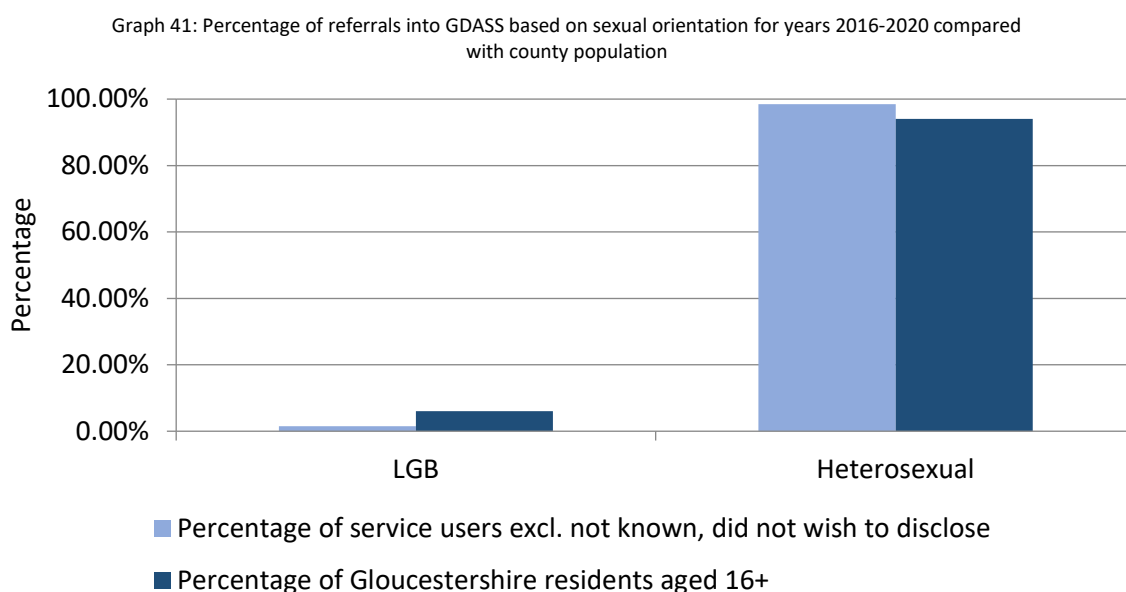
As with the helpdesk, for the IDVA service, people identifying as Christian make up a larger proportion of engaged service users than disengaged and the reverse is true for people describing themselves as Atheist or with no religion. Though the difference is not as marked. Likewise, Muslim people account for a larger proportion of engaged service users than disengaged.

In contrast to the helpdesk, Hindu, Jewish and Buddhist service users are more likely to be disengaged than other groups. Though the numbers are very small.

Sexual Orientation

Clients referred into GDASS who are LGBTQ are underrepresented within the service. Whilst GDASS referrals rates for LGBTQ victims are in line with other similar services nationally, it is acknowledged

that there is an underreporting from LGBTQ individuals.



When considering the engagement in the services, those victims who are LGBTQ accessing helpdesk, as well as being underrepresented in the service as a whole, are more likely to be disengaged than heterosexual people. The gap is greatest for lesbians of whom, over 50% were disengaged compared to 39% of all helpdesk service users. The exception is bisexual people who are less likely to be disengaged than other groups. This is similarly reflected when considering the IDVA service.

Service users who are identified as Transgender and non-binary make up a very small proportion of the referrals into GDASS, accounting for less than 1%.

There is a need therefore for GDASS to consider its engagement with the LGBTQ community, raising awareness and ensuring the service can meet the needs of this community and their experience of domestic abuse.

Disability

The majority (77%) of service users identified themselves as not having a disability. Where a disability was recorded, mental health was the most common, accounting for 9% of all services users. Those service users with complex needs/multiple disadvantage accounted for 3% of all service users.

Overall, the number of people disclosing disabilities is lower than the Gloucestershire average. Though people disclosing learning disabilities are overrepresented in the service. The proportion of service users reporting a mental health condition, sensory impairment or autism is below the Gloucestershire average.

Those service users who identified themselves as having a disability were more likely to remain engaged with the helpdesk service. When looking at the IDVA service however, those with a disability were more likely to be disengaged. This disengagement may be connected to the complexity of needs which can make engagement in services difficult.

Due to the underrepresentation of those with a disability in the service, there is a need for the service to consider how it raises awareness amongst the disabled population of Gloucestershire to ensure access to the service where required.

Married/Civil Partnership

Service users who were married/partnered, single, or in a civil partnership were all more likely to be disengaged as well as being underrepresented in the service as a whole. The opposite is true for people who were separated/divorced. People who consider themselves separated from a partner may be more likely to be motivated to seek GDASS support than people who consider themselves to still be in the relationship. This is reflected in both helpdesk and IDVA clients.

Pregnancy and maternity

Pregnancy and maternity is a key risk factor for domestic abuse. Despite this, service users who were pregnant during the period they used the service were underrepresented when compared to the Gloucestershire average.

This may indicate a need to consider the identification of domestic abuse during pregnancy and the onward referral into GDASS services.

7.4.2 GDASS Service Outcomes

Data on service outcomes for GDASS is in the main qualitative. The below provides a summary of feedback for July 2020 to March 2021⁸¹.

Outcome Indicator	*Based on feedback from 76 service users after completion of GDASS support (at 3, 6 or 12 months after support ended) Feedback taken during July 20 – March 21 (data wasn't available for Q1 due to covid19)
Evidence of increase in the number of Service Users reporting feeling safer	There is evidence of an increase in the number of service users reporting feeling safer as 87% of service users feedback indicated that GDASS had helped them feel safer*
Evidence of increase in the number of Service Users reporting that they are no longer victims of domestic abuse	There is evidence in an increase in the number of service users reporting that they are no longer victims of domestic abuse. only 13% of service users reported that they did not feel safe in their own home and only 20% of service users reported that they wanted contact with GDASS regarding their current situation*
Evidence of Service Users improved health and wellbeing; including improved self-esteem, self-confidence and ability to cope	There is evidence of improved health and wellbeing as 83% of service users stated that their self-esteem had improved and 91% reported that they would know what to do if they experienced domestic abuse again* One service user said <i>"I gained confidence and understanding that I can choose what I want to do with my life."</i>
Evidence that Service users are aware of and are able to access a range of enabling opportunities, for example, education, employment	There is evidence that GDASS has helped service users be aware of and access a range of enabling opportunities as 74% of service users reported that GDASS had helped them feel more confident to access other services in the community and 42% reported that accessing GDASS helped them improve their financial situation* GDASS have reflected that between 9-11% of service users have reported that access to education, training or employment had improved but that this was not a support need for many clients resulting in a low number of outcomes. A GMAT and IDVA client gave the following feedback <i>"I honestly believe if I didn't have the support from you and (IDVA) I may not be in position where I am currently led in my own bed safe and tired because I have</i>

⁸¹ Based on feedback from 76 service users after completion of GDASS support

	<i>been at work all day! Who knows I might not be here at all! You really are life savers! The fire in my belly burns more now than it ever did I will continue to keep it alight for my babies."</i>
Evidence that Service Users are able to remain safe and secure within their own home	<p>There is evidence that service users are able to remain safe and secure within their own homes as 81% of service users reported that they now felt safe in their own home*</p> <p>One group work client gave the following feedback <i>"my dream was to have a house with my son and be safe never thinking I could ever have that. WELL I DO I AM LIVING MY DREAM NOW. And because of this course I will be able to keep this dream and cherish it and be safe"</i></p> <p>GDASS also processed 149 referrals for target hardening (the majority of these referrals came from IDVAs). GDASS gave added context that <i>"Completed work through the Target Hardening Scheme prevents service users from needing to flee their properties, and maintains their safety at home. Preventing the need to make homelessness referrals for alternative accommodation."</i></p>
Evidence that Service Users demonstrate sustained positive outcomes	Service user feedback was collected from clients who had left the service, three, six or twelve months ago. Though the outcomes cannot be directly linked to the length of time since leaving the service, it is clear from the level of outcomes that a proportion of the positive outcomes are sustained beyond six and twelve months, but we are unable to infer further.
Evidence of increased family stability reducing exposure to DA by children and young people	<p>There is evidence of increased family stability as 38 service users reported that GDASS had helped improve their relationship with their children and 62 service users reported that GDASS had helped them understand the impact of domestic abuse on their family * (we cannot determine what proportion of service users completing the feedback had children)</p> <p>Social worker feedback on one of the IDVAs was:</p> <p><i>"I just wanted to feedback the conversation I had with one of my Mum's. As you already know I have put a referral in with a Mum regarding harassment and domestic abuse. When I mentioned that you may be the person who would offer her support she told me that all the women she knew had received your support, spoke very highly of you. Stating that you are always available, easy to discuss sensitive topics with and that you really have their best interests and safety at heart. From my own perspective, I just wanted to add to this good feedback and say I really appreciate the work you do and how you are open to discussing potential cases and concerns I may have."</i></p>
Evidence of fewer children at risk of witnessing or being harmed as a result of DA	<p>GDASS staff contribute to a range of safeguarding activity relating to children including have staff in the Multi Agency Safeguarding Hub, and directly contributed to safeguarding decisions through attending or sending reports to meetings including Child Protection and Strategy meetings. There is evidence that fewer children are at risk of witnessing or being harmed by domestic abuse as a result of this with exit forms completed by 989 parents during 2020/21 showing that 99% felt that their children's wellbeing and safety had improved or stayed the same.</p> <p>Testimonial from a service user <i>"I believe that (LIP) has the brightest and sharpest brain and she worked relentlessly including during her Evenings in order to fully support me through the difficult legal process to keep my son safe."</i></p>

	<p><i>(FSW) has provided me with emotional support throughout this stressful process / including sharing practical advice about having a safety plan and other support for my son and I.</i></p> <p><i>I can't express my gratitude to GDASS for all of the help I have experienced since 2016. The services provided by such a wonderful organisation - is literally life changing and result in enabling children and empowered parents to finally live a safe and empowered life."</i></p>
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7.5 STREET⁸²

STREET provides a Young Persons Violence Advisor to young people who are experiencing Medium Risk abuse from their intimate partner. The majority of referrals received are for young women but STREET also supports young male victim/survivors. These young people are more likely to still be in their relationship at the point of referral and may not yet be able or ready to end the relationship or do not recognise their partner's behaviour as abusive – particularly coercive and controlling behaviours. Almost all young people referred to STREET experience technological abuse, exerting control through social media, which, often continues after the relationship has ended through the continued harassment of making multiple accounts or ongoing texting. STREET has seen an increase in young people being forced to continually be on video calling or mobile in order to know where they are at all times and who they are with. Many young people's experiences of abuse include revenge porn with the threat or sharing of indecent images. Sexual abuse and violence has often been present in young people's relationships. Young people may often have additional vulnerabilities such as being a Child in Care or exhibiting mental health concerns such as depression, anxiety, self-harm and suicidal ideation.

Work with 16-17 year olds may take longer than adult support especially where the young person is still in the relationship. Outcomes can include increasing the safety of a young person in their relationship through joint safety planning and developing safe spaces, requiring a multi-agency approach. Young people have an increased understanding of the dynamics of domestic abuse, warning signs, understand how to safely end a relationship, know where to access help and support and help with coping strategies.

Young people are supported to access support from other agencies to address all their needs such as mental health, housing, drug and alcohol support or sexual health.

There is a growing number of referrals for young people aged 16+ who are referred for support around abuse from a family member where there may or may not be a history of domestic abuse within parent/carer relationships.

7.6 Gaps in provision and future developments

Capacity within service

Referral levels into GDASS are high, with increases year on year. Whilst further resources have been identified for the services, most notably, the new IDVA posts, there is a need to monitor referral levels and ensure the service is able to meet ever increasing demands.

⁸² Data from STREET is not currently available so a narrative has been provided by Service Manager Rebecca Twydell.

Multi-agency referrals and increasing referrals/engagement

Referrals into GDASS are overwhelmingly from the police. Whilst referrals from other organisations have improved over time, particularly following the introduction of dedicated roles such as the Health IDVAs, there is a need to ensure other organisations and professionals can appropriately identify and refer victims into GDASS.

This is a similar finding to the MARAC and links to the need for a dedicated training offer to be made available in the county.

Domestic abuse also remains an underreported crime, and there is a need therefore to ensure wider identification of domestic abuse and referrals into specialist services.

Engagement with protected characteristics

As a universal service, GDASS is in place to provide support to all victims of domestic abuse. The underrepresentation of certain protected characteristic groups within the service is an area to be explored however.

Greater engagement with particular communities is needed as well as ensuring dedicated awareness raising campaigns.

Alongside this, the wider domestic abuse partnership should consider its approach to intersectionality.

Consideration of 'By and For' Services

Connected to the intersectional approach, nationally, the role of 'by and for' services are increasing in their prominence and widely seen as best practice approaches to engage and work with victims from certain protected characteristic groups. These approaches are likely to increase engagement with underrepresented communities, an area that requires local consideration.

8. Perpetrators of domestic abuse

The Home Office Violence Against Women and Girls Strategy 2016-2020 highlighted the need to strengthen the focus on prevention and early intervention in tackling domestic abuse, with particular emphasis on addressing the underlying issues that drive perpetrators; preventing abuse from escalating and reducing repeat victimisation. The strategy focused on ensuring there is a sustainable approach to preventing abuse that is dependent on changing the attitudes and behaviours of perpetrators; challenging their behaviour through disruption and considering evidence of what works whilst ensuring a victim centred approach.

Over time, Domestic Violence Perpetrator Programmes (DVPP) have been developed and delivered across the county with many adopting a 20+ week behavioural change programme that supports perpetrators of domestic abuse to gain insight into their own behaviour to be accountable and develop social competence in relation to aggression and abusive behaviours.

8.1 Best practice approaches

Research projects looking into the effectiveness of DVPP have found that they resulted in perpetrators making positive steps to change, with specific reductions in physical and sexual abuse. Group work was identified as the approach that enables perpetrators to change and allow them to see themselves through the eyes of others and be challenged by peers and skilled facilitators (Project Mirabel⁸³).

As these programmes have developed 'Respect' accreditation has become more commonplace. It was developed so that everyone, including perpetrators, survivors, funders, commissioners and practitioners can be assured that a service is of a high-quality standard, regularly monitored and supported to frequently reflect and improve on best working practices.

The core principles of an effective domestic abuse perpetrator intervention outlined by Respect include⁸⁴:

- **Do no harm:** Organisations take all reasonable steps to ensure that their services do not create additional risks for survivors of domestic violence and abuse.
- **Gender matters:** Organisations work in a way that is gender informed, recognising the gender asymmetry that exists in the degree, frequency and impact of domestic violence and abuse. They understand that men's violence against women and girls is an effect of the structural inequality between men and women and that its consequences are amplified by this. A gender analysis includes violence and abuse perpetrated by women against men and abuse in same-sex relationships, and these also require a gender informed response.
- **Safety first:** The primary aim of work with perpetrators is to increase the safety and wellbeing of survivors and their children. The provision of an Integrated Support Service for survivors alongside the intervention for perpetrators is essential. When working with perpetrators it is important to recognise the need for behaviour change, but risk reduction should always be prioritised.
- **Sustainable change:** Organisations offer interventions that are an appropriate match to the perpetrator, considering the risks they pose, the needs they have and their willingness and ability to engage with the service offered. This will ensure that they are offered a realistic opportunity of achieving sustainable change.
- **Fulfilling lives:** Organisations are committed to supporting all service users to have healthy, respectful relationships and to lead fulfilling lives.

⁸³ projectmirabal.co.uk

⁸⁴ [Respect Standard FINAL.pdf \(hubble-live-assets.s3.amazonaws.com\)](#)

- **The system counts:** Domestic violence and abuse cannot be addressed by one agency alone and work with perpetrators should never take place in isolation. Organisations are committed to working with partners to improve responses as part of their local multiagency arrangements.
- **Services for all:** Organisations recognise and respect the diversity of their local community and take steps to respond to everyone according to their needs.
- **Respectful communities:** Organisations recognise that the environment their service users live in has an impact on their lives. They will make the links between individual change and the development of respectful communities.
- **Competent staff:** Organisations deliver a safe, effective service by developing the skills, well-being and knowledge of their staff through training, supervision and case work support.
- **Measurably effective services:** Organisations employ clear and proportionate measurement tools, which demonstrate both the individual benefits and the impact of interventions.

Following the development of their accreditation process, Respect have worked in partnership with a number of other specialist agencies in order to develop best practice programmes of perpetrator intervention including:

The DRIVE Partnership⁸⁵:

This is a programme run by Safe Lives, Social Finance and Respect to develop a sustainable, national response to perpetrators of domestic abuse. The primary aim is to reduce the number of victims of DA by developing a whole system response that sustainably changes the behaviour of perpetrators.

The key outcomes of the response are to:

- Reduce the number of serial perpetrators of DA
- Reduce the number of repeat and new victims
- Reduce the harm caused to victims and children
- More effectively address additional/related harm to children through earlier intervention

The programme aims to target more perpetrators and bring together a variety of agencies in a holistic approach, with tailored response to the individual and the use of both diversion and disruption techniques alongside therapeutic interventions to change behaviour.

Make a Change⁸⁶:

Make a Change (MAC) is a community-wide, early response approach to people using abusive behaviours in their intimate relationships (or who are concerned that they might be), developed by Respect in partnership with Women's Aid Federation England.

The MAC model is designed to fill a gap in current service provision, for situations where there are concerns about abusive behaviour, but where the threshold hasn't yet been met for a statutory, family court or criminal justice referral.

⁸⁵ [Drive Project](#)

⁸⁶ [About MAC — Make a Change](#)

Aims:

- To address abusive behaviour at an earlier stage than is typical – before it becomes entrenched, and before the intervention is mandated by the family courts, criminal justice or children’s social care.
- To encourage communities, including friends, family members, professionals and other agencies, to see themselves as part of the solution, and empower them to take action to address these behaviours.
- To improve the safety and wellbeing of adult and child survivors of domestic abuse.
- To work to reduce the wider societal and financial impact of abusive behaviour.

Safe and Together⁸⁷:

Safe & Together is designed to support children and family services and surrounding systems to improve the response to domestic abuse. Respect, with the London Boroughs of Waltham Forest and Hackney, have formed a partnership to implement the Safe & Together Model.

Safe & Together is premised around the principles of:

- Keeping children safe and together with non-offending parent
- Parenting with non-offending parent as a default position
- Intervening with perpetrator to reduce risk and harm to child

Building Better Relationships:

Alongside these Respect accredited programmes, the Probation Service has developed and run a nationally accredited programme designed to reduce re-offending by adult male offenders convicted of intimate partner violence. Building Better Relationships (BBR) is a programme based on group work, requiring cooperation between agencies to prioritise the safety of women and children. The aims of BBR include:

- Helping offenders to learn more about the types of behaviour that damage relationships.
- Helping offenders to gain a better understanding of themselves.
- Showing offenders how their personal issues play a part in the violence they show to their partners.
- Supporting offenders to discover their strengths and build on them to improve their relationships.
- Helping offenders to develop their skills and learn new ones to overcome difficulties.

The programme is for those offenders who have been assessed as very high, high or medium risk via the Probation risk assessment tool SARA⁸⁸.

8.2 Local Approach

Gloucestershire has a long standing commitment to ensure our local response to domestic abuse includes perpetrator work as a mechanism for protecting victims and their children.

The Domestic Abuse and Sexual Violence (DASV) Commissioning Strategy and Outcomes Framework (2014 – 2018) references a local response that includes all individuals impacted by domestic abuse,

⁸⁷ [Safe & Together | Respect](#)

⁸⁸ [Spousal Assault Risk Assessment \(SARA\) \(Forensic Psychology\) - iResearchNet](#)

acknowledging the need for early intervention and prevention as well as a need to prevent ongoing criminal behaviour.

This commitment to tackling perpetrator behaviour was further reinforced via the Gloucestershire Joint Commissioning Framework in its Lot 3 development, 'Services to address Perpetrator Behaviour'. Lot 3 was developed to ensure the commissioning of services that provide a range of interventions to challenge beliefs and address the behaviour of domestic abuse perpetrators via best practice group work initiatives, 1:1 behavioural change support and early intervention healthy relationships work.

Alongside the commissioned services to provide intervention for perpetrators of domestic abuse, Gloucestershire Constabulary runs an initiative to identify the top domestic abuse offenders locally.

On a monthly basis the top DA offenders (charged/convicted) and suspects (pre-charge) in the county are identified using the 'recency/frequency/gravity' matrix. This is a risk assessment tool that is informed by data from a variety of crime and intelligence sources. This list of suspects/offenders and other Integrated Offender Management (IOM) nominals are reviewed by a key stakeholder group chaired by the Detective Chief Inspector (Investigations), and a priority list marker added to those individuals identified as carrying the most risk. This is to ensure the list doesn't contain offenders who are in custody for extended periods.

Enhanced safeguarding tactics are then put in place to reduce the risk of offending. This may include allocating perpetrators to specific officers/departments for ownership, referrals to the stalking clinic and involvement of the Domestic Abuse Safeguarding Team (DAST). Where one of those top 5 perpetrators is arrested for a DA related matter, the duty CID team will take ownership of the investigation.

This initiative is designed to robustly manage the highest risk DA offenders and safeguard victims/associated persons deemed to be at risk of harm.

8.3 Service Provision

Positive Relationships Gloucestershire (PRG) provided by Splitz Support Service is a Gloucestershire perpetrator intervention jointly commissioned by Gloucestershire County Council, Office for the Police and Crime Commissioner and Gloucestershire Clinical Commissioning Group.

PRG is a service for men and women aged 18 and over, living in Gloucestershire, who want to make positive changes to improve relationships with their partner, ex-partner or future partners.

The service provides:

- Behavioural change group programmes for male perpetrators of DA: This is a 25 week group programme for men. It supports men who have been abusive towards their female partners or ex-partners to change their behaviour and develop respectful, non-abusive relationships. Regular attendance is essential.
- 1:1 behavioural change work with female perpetrators of DA, male perpetrators who cannot attend the group programme and perpetrators in same sex relationships.
- Healthy relationships, Healthy Families early intervention course to help build knowledge, understanding and skills for maintaining healthy relationships and families.
- Relapse Prevention Group: monthly meetings for men completing the DVPP to provide staff and peer support to maintain their positive change.
- Partner safety worker to ensure that the safety of the partner or ex-partner is not compromised by the intervention and that they are offered support to establish lives free from abuse.

This local provision is Respect Accredited and in line with best practice models of perpetrator intervention.

8.4 Perpetrators in Gloucestershire

8.4.1 Police recorded offenders

The below data reflects domestic abuse offenders where there is a unique crime number⁸⁹ recorded by police against domestic abuse tagged crimes for years 2017/18, 2018/19, 2019/20 and 2020/21.

Across all 3 years, between 88-93% of domestic abuse offenders were recorded as male. This is to be expected given the gendered nature of domestic abuse with males most likely to commit these kind of offences. It is clear however, that females can also be offenders of domestic abuse.

The majority of offenders are aged 25-34 followed by 35-44 as detailed in graph 42. This is similarly reflected when considering the rate of offenders per 1000 of the population based on age group (table x), with a rate of 2.71 domestic abuse offenders per 1000 of the 25-34 year old population in Gloucestershire.

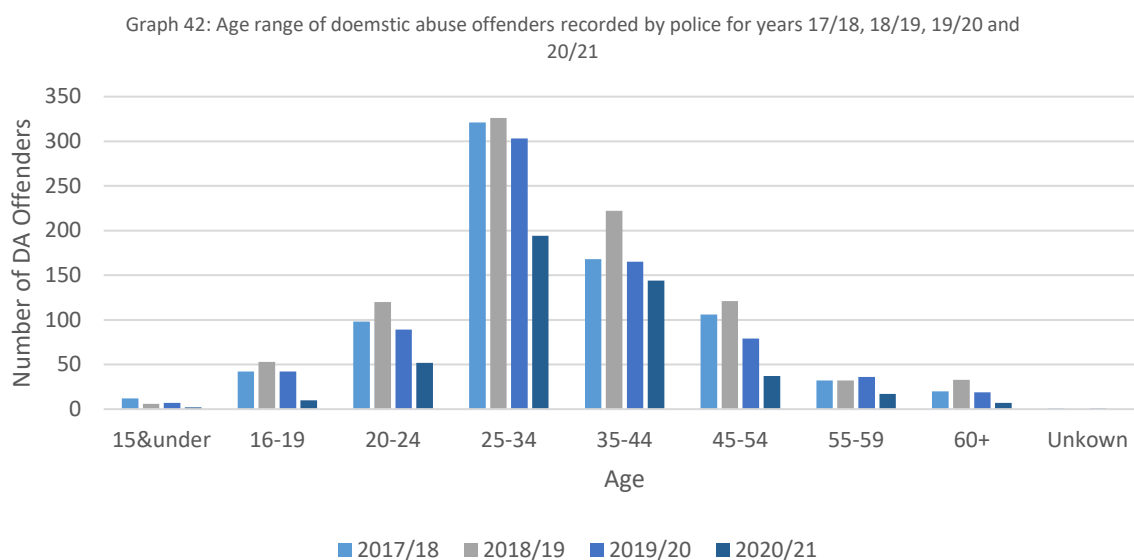


Table 9: Rate of offenders per 1000 of the population based on age.

	15&under	16-19	20-24	25-34	35-44	45-54	55-59	60+
Rate per 1000 2020/21	0.02	0.36	1.56	2.71	1.92	0.4	0.37	0.04

Across all 3 years, the majority of offenders are recorded as being from 'white ethnicities'. Despite this, between 8-10% are recorded as being from Black, Asian and Ethnic Minority groups, an overrepresentation when compared to the population of Gloucestershire which is at 4% Black, Asian and Ethnic Minority. Whilst this may be connected to wider prevalence data on increased levels of domestic abuse amongst these groups, it is also likely to be connected to the wider

⁸⁹ This reflects wherever possible unique offenders. There will however be some duplicates where offenders are connected to multiple victims or different crime numbers.

overrepresentation of Black, Asian and Ethnic Minority offenders across a range of crime types, particularly violence crime⁹⁰.

For domestic abuse offenders, their ACORN⁹¹ category was not consistently recorded and is only available for between 49-56% of offenders. Where an ACORN category was applied, it is clear that domestic abuse offenders come from a range of socio-economic backgrounds, supporting the understanding that domestic abuse is not limited to certain groups within society. Despite this however, when considered collectively, the vast majority of offenders are recorded as being from lower socio-economic backgrounds of 'financially stretched' and 'urban adversity'.

As detailed in Appendix 3, these categories tend to be for those families living in towns and cities, in smaller properties, with average or below average income. Whilst this may be an indication of a greater level of domestic abuse amongst these populations, it is also likely that families living in these circumstances have greater access to services and come to the attention of statutory agencies more easily when they commit crimes.

Table 10: Offender Acorn Category for years 17/18, 18/19, 19/20 and 20/21

	Affluent Achievers	Comfortable Communities	Financially Stretched	Not Private Households	Rising Prosperity	Urban Adversity
2017/18	17	85	113	64	16	124
	4%	20%	27%	15%	4%	30%
2018/19	28	99	138	76	18	151
	5%	19%	27%	15%	4%	30%
2019/20	28	101	71	46	12	106
	7%	28%	20%	13%	3%	29%
2020/21	28	65	60	36	6	60
	11%	25%	24%	14%	2%	24%

8.4.2 MARAC perpetrators

When considering the characteristics of MARAC perpetrators, the below data will present 'individual' perpetrators for each year rather than referrals, removing duplicates where the same perpetrator may have been referred multiple times into the MARAC during each year. For this purpose, the number of individual perpetrators each year are as follows: 2017/18: 666, 2018/19: 723 and 2019/20: 901⁹².

For years 2017/18 and 2019/20 there were more 'individual' perpetrators than 'individual victims', indicating that in some instances the same victim may have experienced abuse from multiple perpetrators during that time period.

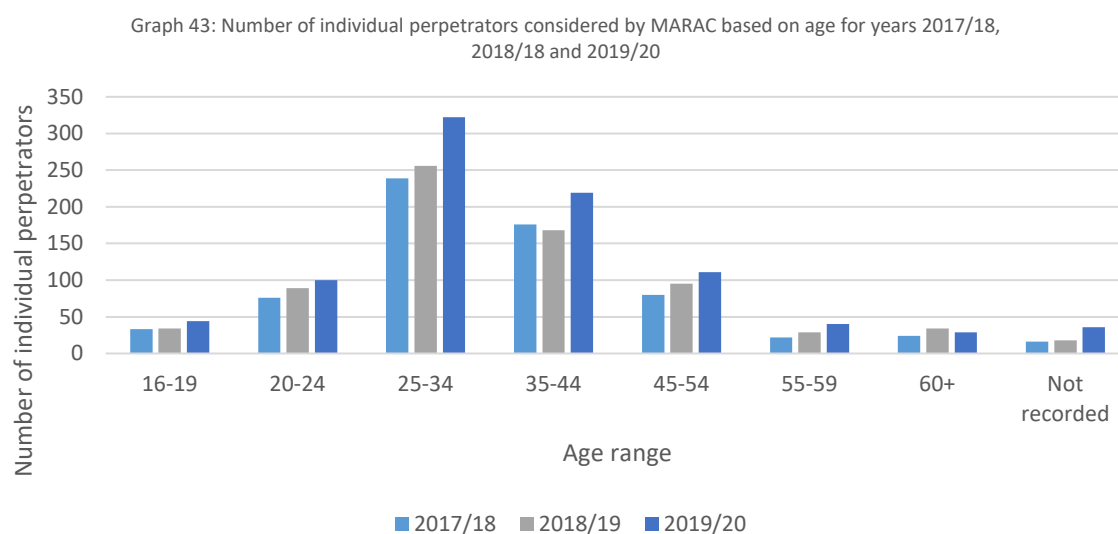
Across all 3 years, between 93-94% of individual perpetrators discussed at MARAC were male, with 6% of perpetrators female. There is no comparative data available within the Safe Lives MARAC dataset in relation to perpetrators.

⁹⁰ Violence prevention Needs Assessment for Gloucestershire 2019. Sophie Jarrett

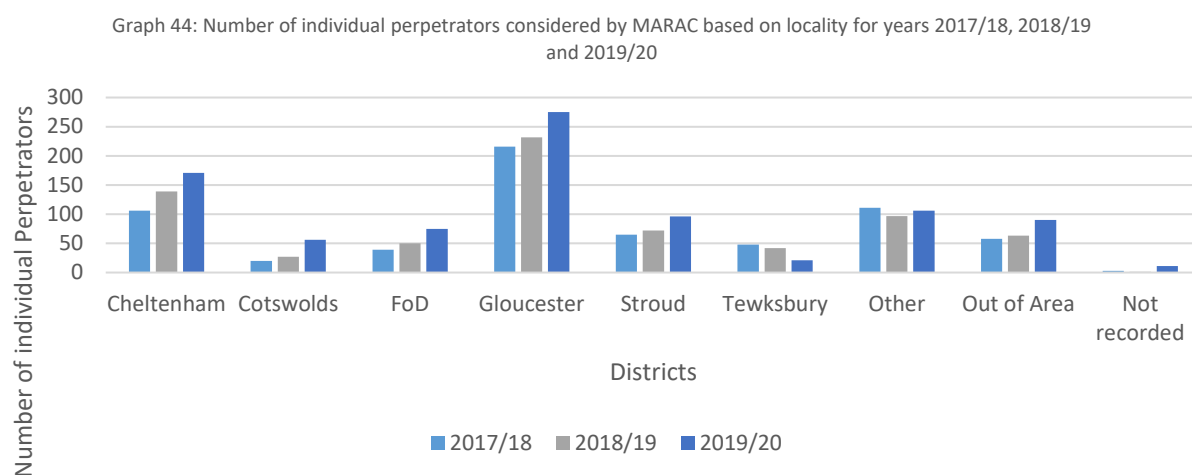
⁹¹ Acorn is a segmentation tool which categorises the UK's population into demographic types. Acorn provides a general understanding of the attributes of a neighbourhood by classifying postcodes into a category, group or type.

⁹² Some duplicates may still be considered if a perpetrator has been referred into MARAC across multiple years.

When looking at the age range of individual MARAC perpetrators, the majority are aged 25-34, as detailed in Graph 43. This is consistent with the findings for individual victims referred into MARAC and with the wider police perpetrator data across all risk levels.



The majority of individual perpetrators considered by MARAC were referred from the county's urban areas; this is reflected by the data on individual victims referred to MARAC. There are however a larger proportion of individual perpetrators where location is recorded as 'other' than there is for victims; this is likely to be reflective of the MARAC process being victim focused, and less focused on recording the location of the perpetrator; something which could be explored in the future to ensure greater accuracy of the data.



When considering the ethnicity of MARAC perpetrators, consistently between 11-13% are recorded as being from Black, Asian and Minority Ethnic groups. This is a larger proportion than seen for victims at 6% and an overrepresentation when compared to the Gloucestershire population (4.6%). This is a further overrepresentation than seen in the wider perpetrator police data covering all risk levels, indicating that high risk perpetrators are even more likely to be from Black, Asian and Minority Ethnic groups than those domestic abuse crimes risk assessed as standard and medium.

In line with MARAC victims, between 1-2% of MARAC perpetrators were recorded as LGBTQ.

Data on disability for perpetrators is limited. Where a disability is noted for perpetrators, it is recorded as 'non-confirmed' indicating that the referring agency believes there is some kind of disability or mental health issue, but this is not confirmed with either a diagnosis or confirmation from agencies engaged with the perpetrator.

The MARAC process is designed to respond to high risk domestic abuse; a key risk factor is to consider the previous history of a perpetrator of domestic abuse. The MARAC therefore records where a perpetrator is considered to be a repeat or serial perpetrator in order to support the assessment of risk. Across all 3 years the vast majority of individual perpetrators were noted as serial/repeat perpetrators; between 60-70%.

8.4.3 Probation Service⁹³

Many offenders who are convicted of domestic abuse related crimes are court mandated to complete the Probation run programme, Building Better Relationships. The below table outlines the number of positive completions of this programme for Gloucestershire.

Table 11: Number of positive completions of Building Better Relationships for years 17/18, 18/19 and 19/20.

Year	Number of positive completions
2017/18	23
2018/19	30
2019/20	43

The number of positive completions has increased year on year, however, the number of domestic abuse offenders completing the programme is low when compared the total number of offenders recorded in the county. This may be reflective of conviction rates and the willingness of the court to mandate attendance on the programme, but may also be connected to the capacity of the Probation Service to deliver the programme fully within the duration of an offender's sentence.

Alongside Building Better Relationships, the Probation Service also runs a Respectful Relationships course, with 7 positive completions in 2018/19 and 17 in 2019/20.

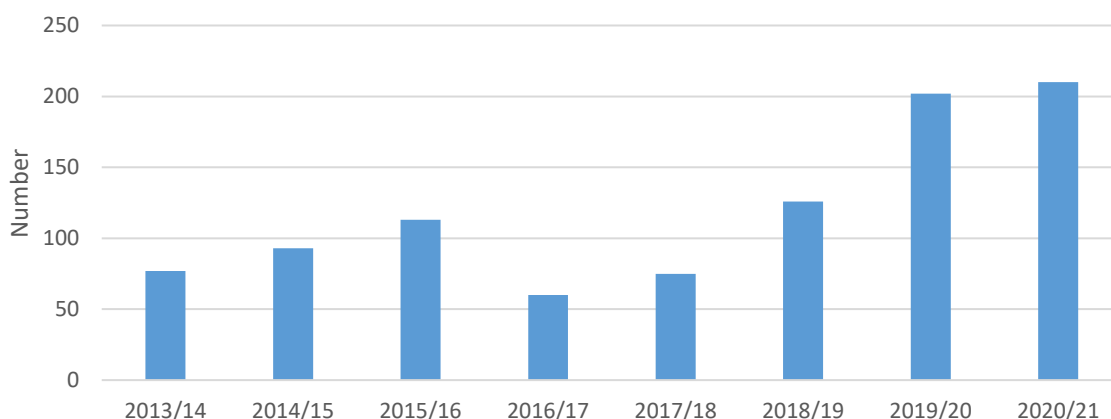
8.4.4 Positive Relationships Gloucestershire (PRG)

The Gloucestershire Domestic Abuse Perpetrator Programme has been in place since 2013. Formerly known as the 'Turnaround Programme', PRG has continued to evolve over time, in recent years offering a wider range of services and extending the age range to those aged 18+.

The evolving nature of the programme and increased awareness of the work that it does has seen its referral levels increase over time, in particular since 2018 when the latest incarnation of the programme was commissioned, as detailed in graph 50.

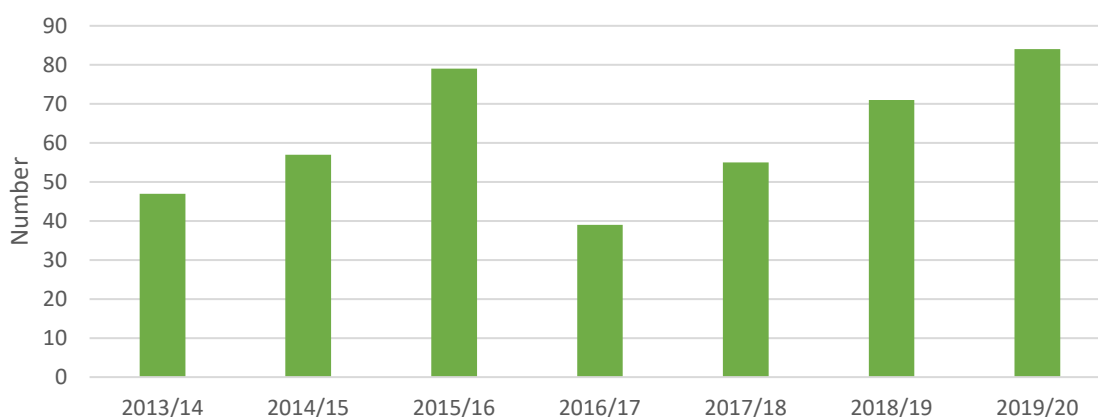
⁹³ Data provided by BGSW Probation CRC

Graph 50: Referral rate for PRG over last 8 yrs



Following referrals in to the service, those individuals referred are then required to undertake an assessment with PRG to assess their suitability for the programme. Not all referrals will make it on to the assessment phase, with 56% of referrals in 2018/19 going on to assessment and 42% in 2019/20⁹⁴.

Graph 51: Assessment completion rate from 2013/14-2019/20



Following assessment, for 2018/19 and 2019/20 between 70-79% of individuals assessed were then offered a service intervention. For these years of the service the offer would have included an offer of either DVPP, Health Relationships Course or one to one interventions.

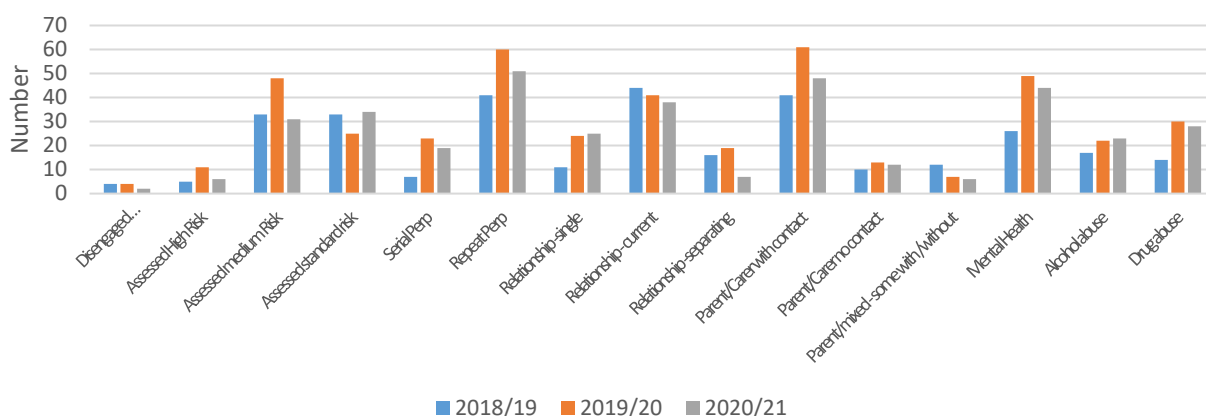
At the point of assessment, a number of areas are explored, with key findings detailed in graph 52.

Most significantly, those assessed by PRG are found to be:

- Repeat perpetrators
- A parent or carer with contact
- Mental health concerns
- Risk assessed as medium
- Current relationship
- Alcohol and drug misuse

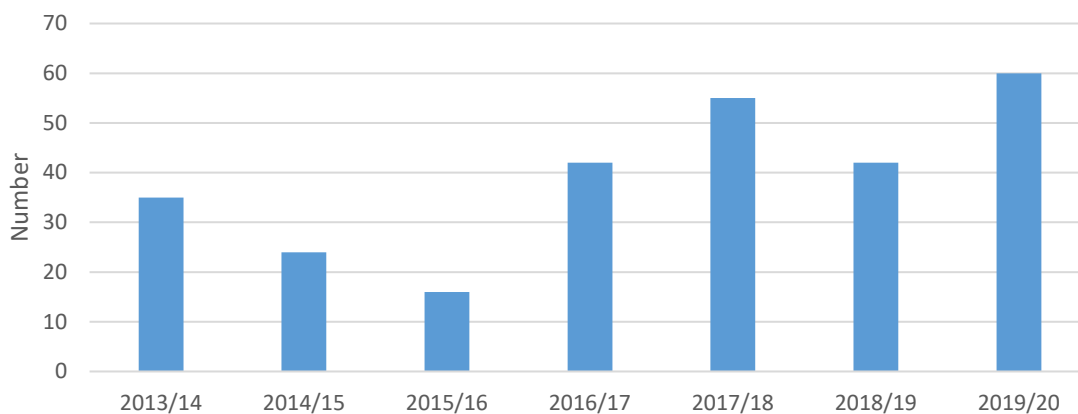
⁹⁴ Data not available for 2020/21.

Graph 52: Key findings from Assessments by PRG for years 2018/19, 2019/20 and 2020/21



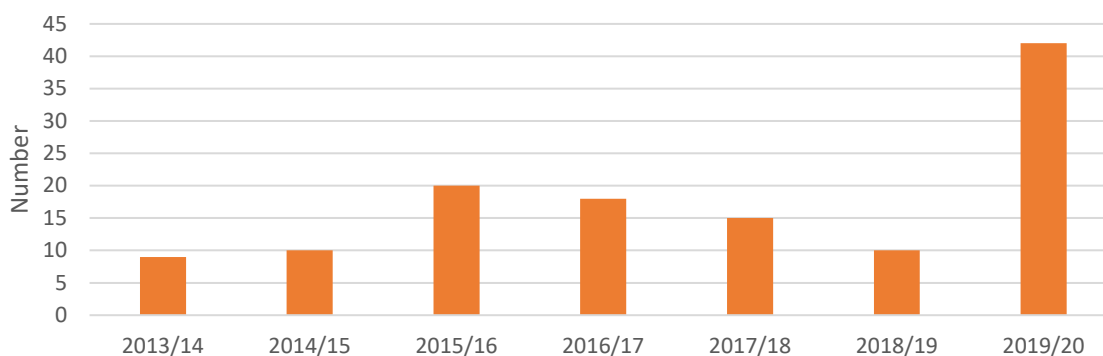
As detailed in graph 53, a small number of assessments identified high risk domestic abuse, an area that PRG is not able to support with; identifying a gap in local provision.

Graph 53: Number of new referrals taking up an intervention from 2013/14 to 2019/20



Once an individual accepts an offer of an intervention, there continues to be a dropout rate across the service. This is to be expected for a voluntary intervention and in particular for DVPP, the intervention is a significant commitment to those individuals undertaking it. Those completing the service for 2019/20 shows an increase to previous years⁹⁵.

Graph 54: Outcomes - completed Service intervention from 2013/14 to 2019/20



⁹⁵ Data not available for 2020/21

The increase in service completion levels has been commented on by Splitz, the provider of PRG. They note that Splitz have spent 2019/20 establishing a strong skill set, developing their community presence and collaborative relationship with partner organisations, and delivering a strong range of programmes to a diverse client base as well as supporting domestic abuse training to professionals.

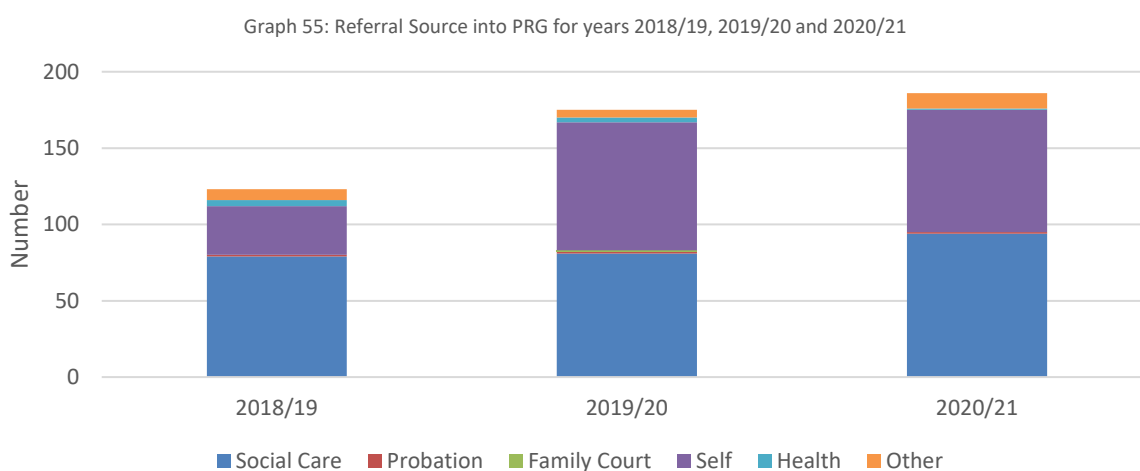
Alongside this, PRG have developed their reporting system to monitor the outputs and outcomes of the service more effectively.

For those who disengaged with the service, the following were noted as reasons given for disengagement:

- Relationship ended
- Difficult work pattern
- Probation order finishing
- Disengagement following closure of case by Children's Social Care
- Difficulty in engaging and responding well to conversations on the programme regarding motivation, honesty and demonstrating respect towards partner; indicating they were not ready for the programme.
- Disengagement due to mental health deterioration
- Disengagement due to a reprisal of substance misuse
- Disengagement due to undisclosed health reasons.

The remaining data on PRG referrals will be presented for years 2018/19, 2019/20 and 2020/21 in order to reflect the current service offer.

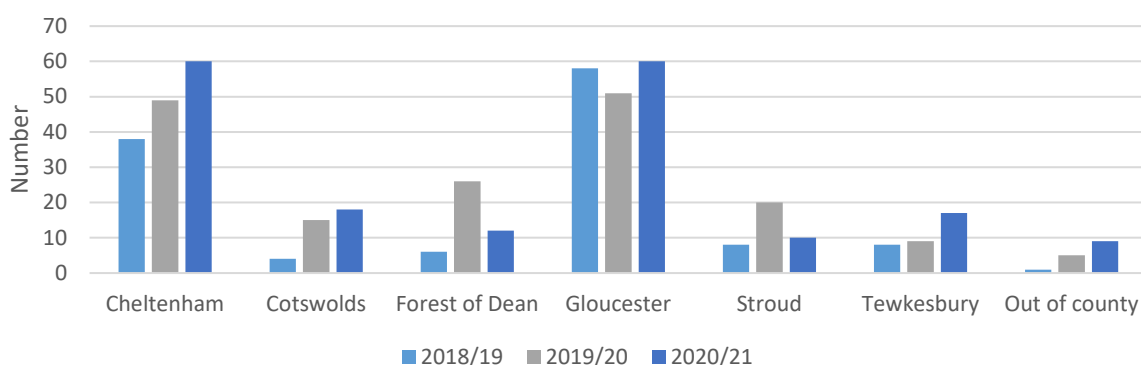
In the current service offer, referrals in to the service are in the main self-referrals alongside referrals from Children's Social Care (CSC). Those referrals from CSC are often a result of child protection interventions placing a requirement on those known to display abusive behaviours in their relationships to participate in the interventions offered. CSC may also suggest a referral is made to PRG as part of their plans to consider the safety and wellbeing of children.



Across all 3 years of the current service, the majority of referrals are received for individuals in Gloucester and Cheltenham. This is to be expected given the higher volume of domestic abuse known in these areas of the county. This may also be reflective of the greater ease in access to the interventions provided from the more urban areas of the county. PRG continue to develop the

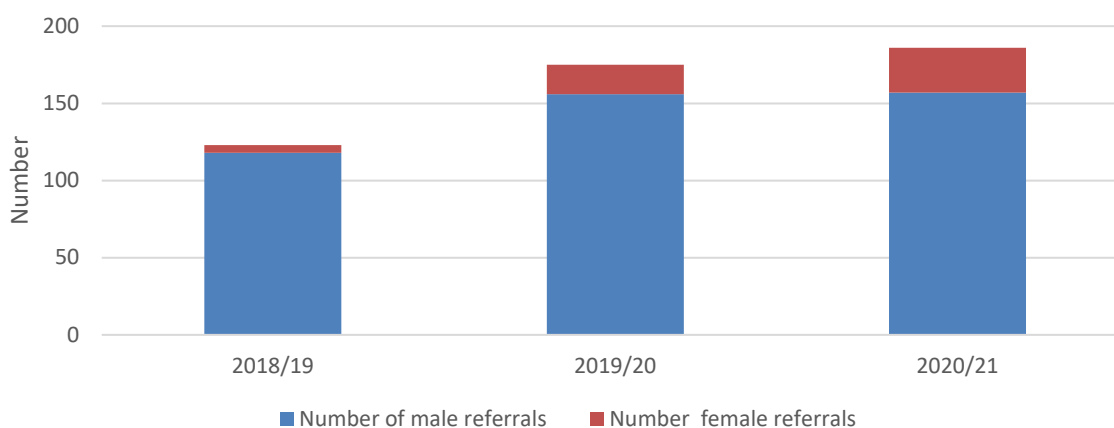
service and ensure it is accessible to those in the more rural parts of the county who may benefit from the service.

Graph 56: Referral Location for years 2018/19, 2019/20 and 2020/21



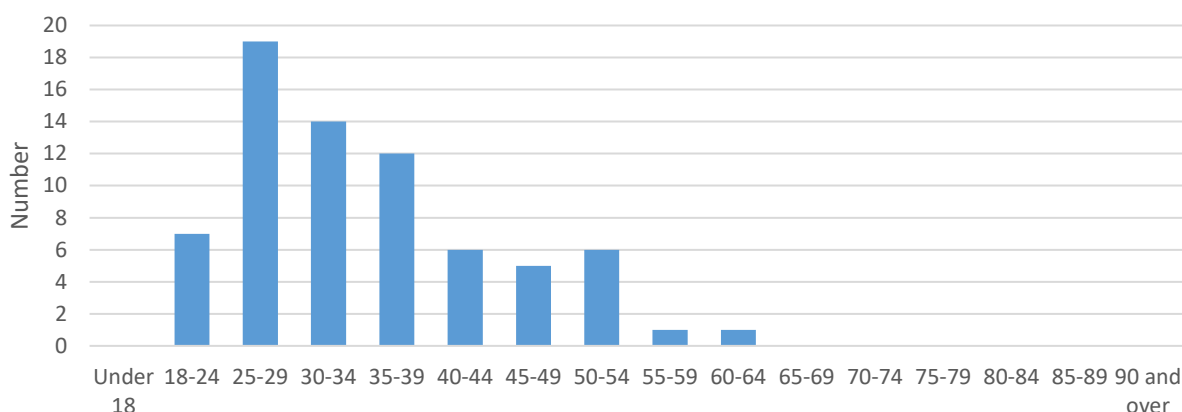
As would be expected, the majority of referrals into PRG are for males, reflective of wider data known about domestic abuse perpetrators in Gloucestershire and wider prevalence data for England and Wales. In years 2019/20 and 2020/21 however, referrals for females have increased, likely a result of the new service offer from 2018 and increased awareness of the service options for females who want to address their behaviour within their relationships.

Graph 57: Gender of New Referrals into PRG for years 2018/19, 2019/20 and 2020/21



The majority of referrals made into the service for 2020/21 were for those aged 25-29 and 30-34, a consistent finding to wider data on perpetrators of domestic abuse in Gloucestershire.

Graph 58: Age of Perpetrator open to PRG in 2020/21



Impact of Covid19 on PRG

PRG has a long standing commitment to delivering the DVPP in 2 locations in the county, delivering the service face to face. In light of the covid19 pandemic, contact with those on the programme moved to remote contact. During this time PRG remained focused on the safety and wellbeing of victims and their children, undertaking regular risk management review meetings with the partner safety worker and group facilitators.

8.5 STREET⁹⁶

Young People accessing STREET can display controlling and coercive behaviours such as jealousy and have a distinct lack of understanding or knowledge about healthy behaviours and expectations within their relationships. Young people can have mental health needs and may use threats to harm themselves as part of their harmful relationship behaviour. Referrals for young men displaying harmful relationship behaviours are higher than those for young women.

STREET provides interventions for young people aged 13-19 displaying low level emerging harmful relationship behaviours. For young people aged 13-16 whose behaviour is considered high risk for STREET can only provide a limited offer of support on a 1:1 basis and this offer would be made in partnership with another agency i.e. children's social care/youth support. Referrals for this age group are lower, which may in part be due to STREET being a voluntary service.

8.6 Gaps in provision and future developments

Programmes for high risk perpetrators 16+

The current service offer does not include work with high risk domestic abuse perpetrators who are aged 16-17, statutory services would be approached to meet this need. There is a need locally to consider the specific needs of this cohort and the best interventions to address their behaviour and prevent further domestic abuse.

Greater capacity to respond to young people and focus on prevention

STREET is a relatively small scale service, and whilst it can offer interventions to young people displaying harmful behaviours within their relationships, this service may require further investment to have a greater reach. This would also enable the service to have greater input in schools to provide prevention activity.

⁹⁶ Data from STREET was not available but a narrative has been provided by Service Manager Rebecca Twydell

Greater capacity within PRG

As with STREET, PRG is a small scale service where further investment is required to ensure greater reach of the service, offering more perpetrator interventions to a larger number of individuals.

Further investment in the service would also support the service in engaging more with rural communities, ensuring ease of access and engagement.

Court mandated perpetrator programmes

There is a need to better understand the offer via the Probation Service and any unmet need around the provision of court mandated perpetrator interventions.

Many offenders of domestic abuse are also given short term sentences where a requirement to complete a perpetrator intervention with probation can be difficult. Locally, there may be a need to consider how services can engage with these perpetrators and ensure appropriate interventions are offered to prevent further domestic abuse.

9.Children witnessing domestic abuse

The impact of domestic abuse on children cannot be underestimated, with children estimated to witness three-quarters of abusive incidents and many also having themselves experienced physical abuse as well as sexual and emotional abuse within families where domestic abuse is occurring⁹⁷.

The impact of domestic abuse is felt by children regardless of their age, with many children, particularly those of younger ages, becoming anxious, with difficulties sleeping and may find it hard to separate from their non-abusive parent. Older children may show signs of aggression and behavioural difficulties, particularly amongst boys, who may learn to use violence to try and solve problems and may copy the behaviour they are witnessing in the home. Others, particularly girls, they may become withdrawn, anxious and depressed. For all children, post-traumatic stress disorder is common, with many experiencing nightmares, flashbacks and suffering with hypervigilance, headaches and even physical pains ⁹⁷.

This impact on children has been recognised in the Domestic Abuse Act 2021 where children who live in a home where domestic abuse takes place will now be recognised as victims in their own right rather than witnesses for the first time. In addition to this, other areas of the Domestic Abuse Act also contribute to the protection of children:

- The statutory duty placed on local authorities to provide support in safe accommodation extends to victims and their families.
- The introduction of new Domestic Abuse Protection Orders and the role of the Domestic Violence Disclosure Scheme will look to increase the protection for families affected by domestic abuse.
- The statutory definition of domestic abuse recognises victims as those aged 16+, acknowledge abuse in teenage relationships. As such, all other provisions in the DA Act extend to those aged 16+.

This section of the needs assessment will not consider young people who are victims of domestic abuse in their own relationships, but will instead focus on children witnessing domestic abuse at home. Teenage relationship abuse will be explored in a later local needs assessment.

Alongside children witnessing domestic abuse in the home, the education of young people about issues relating to domestic abuse is considered to be an area of prevention. In support of this, in September 2020, the compulsory Relationships and Sex Education (RSE) and Health Education curriculum came in to force across England and Wales. This curriculum will aim to put in place the building blocks needed for positive and safe relationships, including with family, friends and online at primary school level. This will then move on at secondary level to cover content on what healthy and unhealthy relationships look like and what makes a good friend, colleague and successful marriage or committed relationship⁹⁸.

⁹⁷ [Domestic violence and abuse - the impact on children and adolescents | Royal College of Psychiatrists \(rcpsych.ac.uk\)](https://www.rcpsych.ac.uk/domestic-violence-and-abuse-the-impact-on-children-and-adolescents)

⁹⁸ [Relationships, sex and health education: guides for parents - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guides/relationships-sex-and-health-education-guides-for-parents)

9.1 Best Practice Approaches

There are a number of evidence based resources that have been developed to support children who have witnessed domestic abuse. The Recovery toolkit is one such resource which has seen greater roll out nationally in recent years and is delivered in Gloucestershire.

Recovery Toolkit⁹⁹

Rock Pool's Recovery Toolkit programmes use a trauma-informed psycho educational model, facilitating a safe space to ensure learning and promote collaboration. The training is designed to be strengths based and skills building aiming to give individuals knowledge to better understand and deal with their previous experiences. Programme participants are given practical strategies to help them thrive in their daily lives by developing resilience, increasing hope and enabling recovery.

There are 2 main toolkits that can be utilised to support families experiencing domestic abuse:

- The Adult Domestic Abuse Recovery Toolkit: a 12 week programme that helps participants understand the impact of having experienced domestic abuse, explaining how they were prevented from leaving an abusive relationship and the thinking patterns they developed as a method of managing the risk which can hold them back moving forward. The individual's own strengths, resources and coping skills and resilience are reinforced contributing to their own health and wellness on a long-term basis.
- The Children and Young People Domestic Abuse Recovery Toolkit: 8-week programme for any young person that has witnessed or experienced domestic abuse and are able to take part in a group. It uses a combination of trauma-informed resilience focused and specific trauma focused cognitive behaviour therapy and person-centred therapeutic principles.

'You and Me, Mum'¹⁰⁰

'You and Me, Mum' was developed by Women's Aid Northern Ireland and is a 10 week programme for mothers with experiences of domestic and sexual abuse. It aims to empower and support survivors in furthering their understanding of their role as mothers and in addressing the needs of children and young people who have lived with domestic abuse.

Therapeutic Interventions

Many services that offer support to children witnessing domestic abuse provide interventions such as play and art therapy as well as counselling service to children.

9.2 Local Approach

Gloucestershire's Domestic Abuse and Sexual Violence (DASV) Commissioning Strategy and Outcomes Framework (2014 – 2018) outlined an approach that focused on domestic abuse within the context of the family, acknowledging those at risk of domestic abuse as well as those exposed to it.

⁹⁹ <https://rockpool.life/course/combined-adult-children-and-young-people-domestic-abuse-recovery-toolkit/>

¹⁰⁰ [You and me, mum: facilitation programme - Womens Aid](#)

The joint commissioning framework for domestic abuse developed in 2018 focussed on commissioning service for those aged 13+. This was developed with an understanding that provision for children below 13 would fall under the responsibility of children's service commissioning.

The Gloucestershire Safeguarding Children's Executive (GSCE) also considers domestic abuse as one of its areas of priority, with the business unit ensuring that domestic abuse training is part of its core offer for social workers and their multi-agency partners.

9.3 Service Provision

Many children at risk of domestic abuse will be considered and supported by Children's Social Care. Many children however, will not come to the attention of Children's Social Care or may not meet thresholds for this intervention and support.

Within the county there are a range of services available to support children, where domestic abuse may be a feature of that child's experience, such as the Youth Support Team, Young Gloucestershire, Kingfisher Treasure-seekers and TIC+. These services are not however, dedicated to providing specialist domestic abuse support.

Locally, GDASS is commissioned to provide support to victims aged 16+ within the context of the wider family. The service is not however commissioned to provide direct support to children witnessing domestic abuse. GDASS does however have dedicated domestic abuse workers embedded in the Children's Social Care Gloucester Multi-Agency Team (GMAT), which enables specialist domestic abuse knowledge and support to be available to families open to social care in Gloucester where domestic abuse has been identified.

Safe Teenage Relationship Education & Empowerment Team (STREET) is commissioned to provide support to young people aged 13+, with part of their service offer focused on providing support to young people who have witnessed domestic abuse, alongside its wider offer of support to young people experiencing abuse in their own relationships, and demonstrating harmful behaviours. STREET offers 1:1 support and evidence-based group programmes CRUSH & The Recovery Toolkit.

Support in Gloucestershire for children under the age of 13 is primarily provided by the Children and Family Centres and is delivered within the context of supporting the non-abusive parent. The C&FCs provide a range of group work sessions for those experiencing domestic abuse, including Freedom Programme, Phoenix and Healthy Relationships. Alongside this, it offers support to child and parent that includes:

- You, me and Mum
- Helping Hands
- Trauma recovery combined domestic abuse for adults, children and young people toolkit.

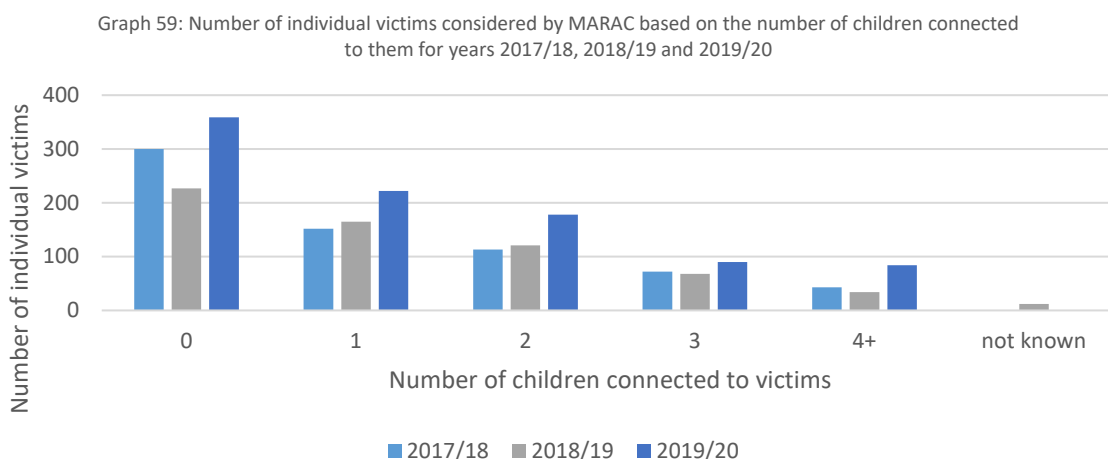
Stroud Beresford Refuge provides specialist support to women and children within the refuge, with art therapy a key tool that the refuge utilises for children.

9.4 Children living with domestic abuse in Gloucestershire

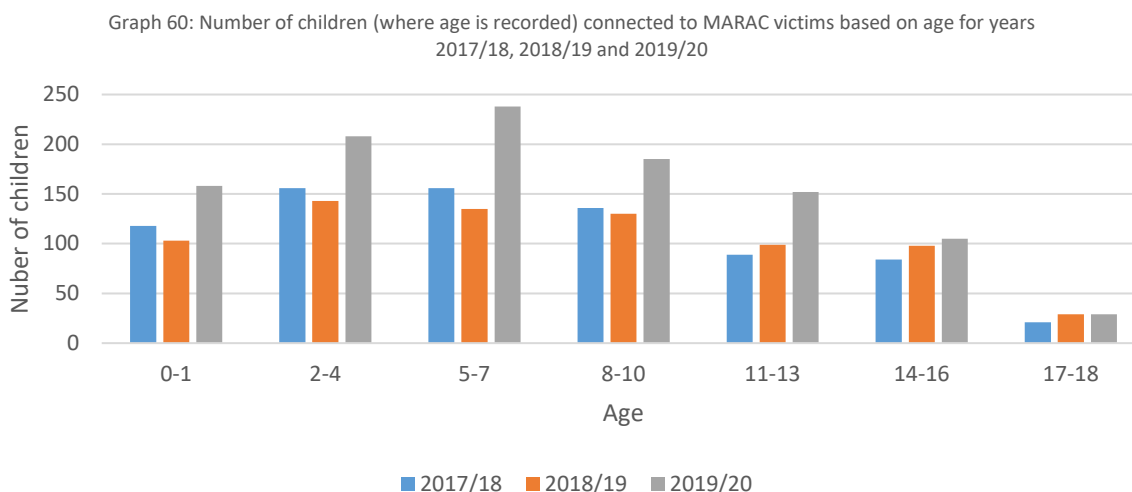
It is not possible to gather data on the number of children connected to domestic abuse incidents reported to police. The MARAC data does however give an indication of children and young people linked to high risk domestic abuse in the county.

9.4.1 Children connected to MARAC victims

The below data will provide information on the children connected to 'individual' MARAC victims. As detailed below in graph 59, the majority of MARAC victims were recorded as having no children connected to them. Where victims did have children, the majority were recorded as having 1 or 2 children.



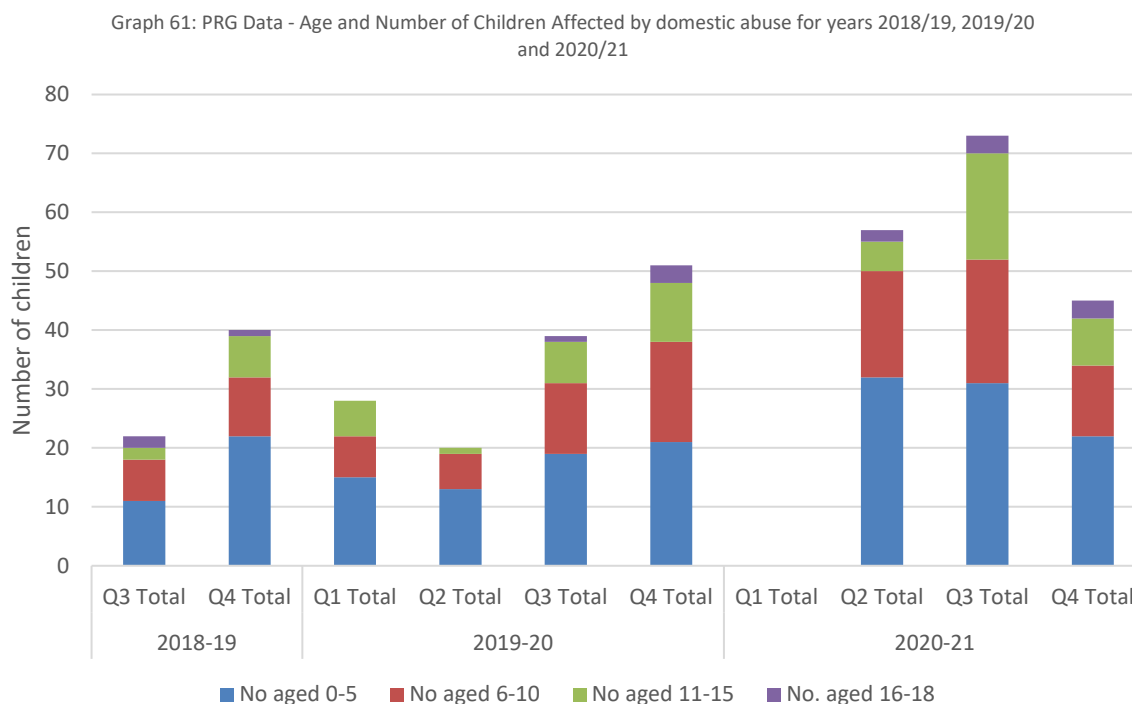
Graph 60 shows that children connected to MARAC victims, where age was recorded, were most likely to be aged 10 and younger. In addition, where children's age was recorded, consistently for each of the years explored, between 50-56% were recorded as being known to Children's Social Care.



In addition, between 6-7% of individual MARAC victims were recorded as being pregnant at the time of their referral into MARAC.

9.4.2 Children connected to perpetrators open to Positive Relationships Gloucestershire (PRG)

The local voluntary domestic abuse perpetrator programme (PRG) ensures that as a key part of its work, the safety and wellbeing of victims and children are their priority. As detailed below in graph 61, there are a number of children recorded by PRG who are noted as having been affected by domestic abuse.



In the main, children identified are aged 5 and under and whilst PRG do not support those identified as high risk domestic abuse, the finding on the age of children is consistent with the data presented for MARAC. This supports research into domestic abuse that it often begins or escalates during pregnancy or the early years of a child's life.

9.4.3 Children connected to victims open to GDASS

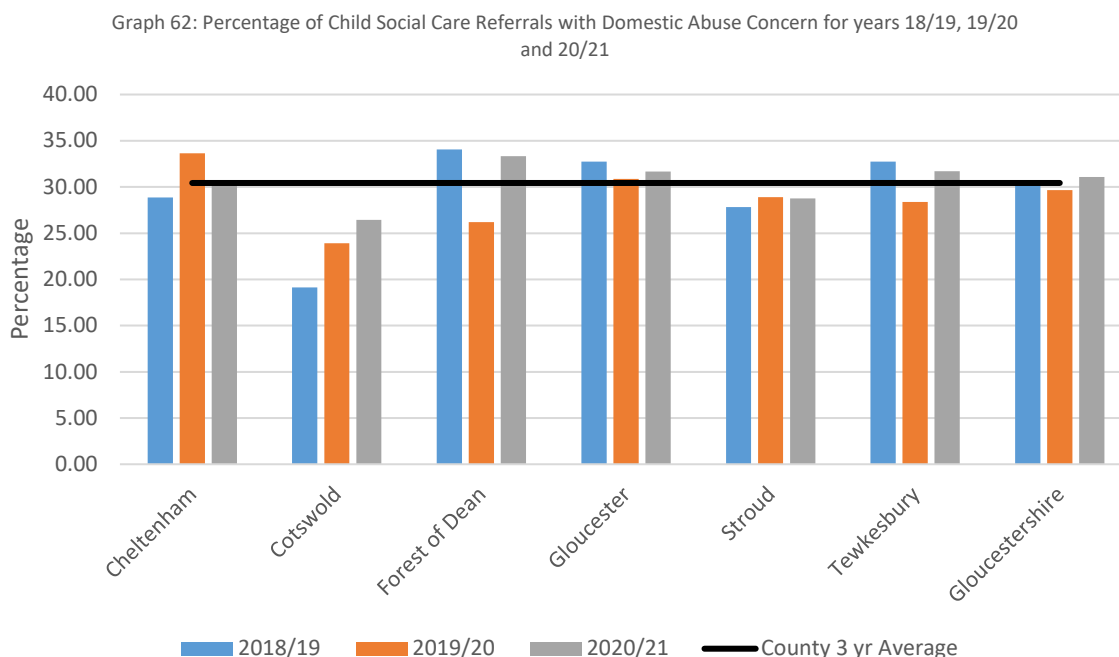
GDASS is not commissioned to provide direct support to children who are witnessing domestic abuse. They do however consider the support needs of children as a part of a whole family approach.

For 2020/21, GDASS recorded 8138 children connected to victims of domestic abuse. The majority of these children were aged 10 and under, with 33% aged 5 and under and a further 33% aged 6-10 years.

Outcomes data from GDASS indicated that service users report that GDASS support has helped to improve their relationship with their children and helped them understand the impact of domestic abuse on their family. In addition, there is evidence that fewer children are at risk of witnessing or being harmed by domestic abuse as a result of the support provided by GDASS in the multi-agency setting, with exit forms completed by 989 parents during 2020/21 showing that 99% felt that their children's wellbeing and safety had improved or stayed the same.

9.4.4 Children's Social Care

Across the county, around 30% of all children social care (CSC) referrals are made with a concern for domestic abuse, accounting for around 6000 referrals over the time period 2018-2021. It is not known how many individual children this relates to.

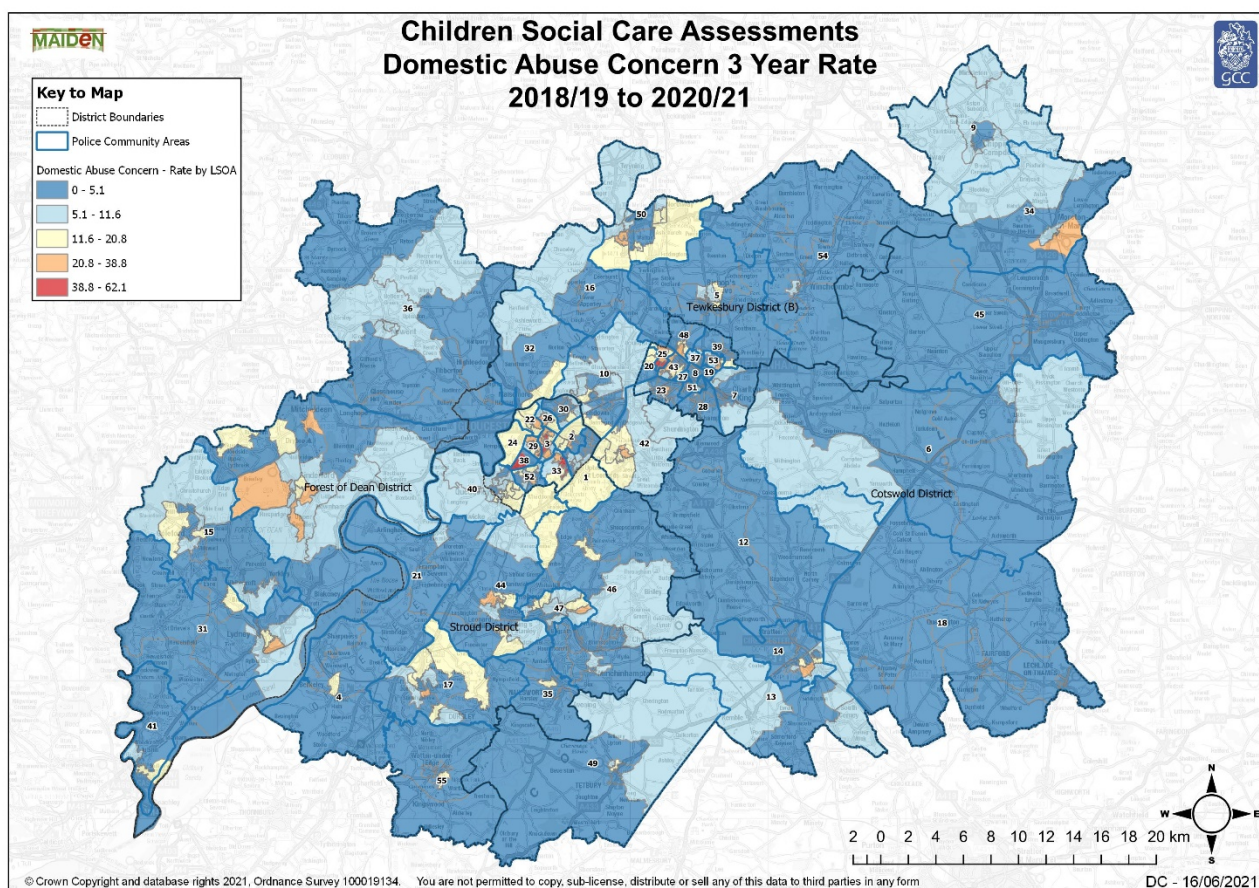


The largest proportion of referrals to CSC where domestic abuse is noted as a concern falls within the Forest of Dean. This is in contrast to wider countywide prevalence data on domestic abuse where the greatest volume falls within Gloucester and Cheltenham.

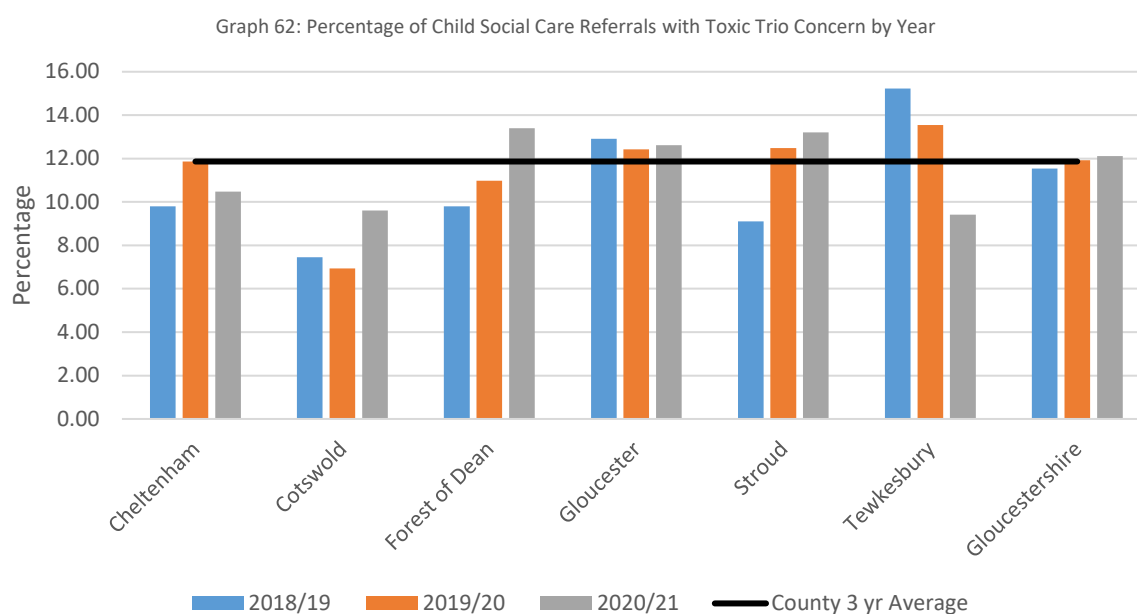
When looking at the 3 year rate of CSC domestic abuse referrals, this is also reflected, with areas within the Forest of Dean, Stroud and Tewkesbury demonstrating a rate of between 20.8 and 38.8. The areas with the highest rates however are still within Gloucester and Cheltenham where certain communities have a rate of between 38.8 and 62.1.

The communities identified in Map 4 below correlate to deprivation within the county as seen in the police reported domestic abuse, albeit some difference in the areas identified.

Map 4: Children's Social Care Domestic abuse concern 3 year rate across Gloucestershire communities from 2018/19 to 2020/21. (Key to maps is provided in Appendix 5).

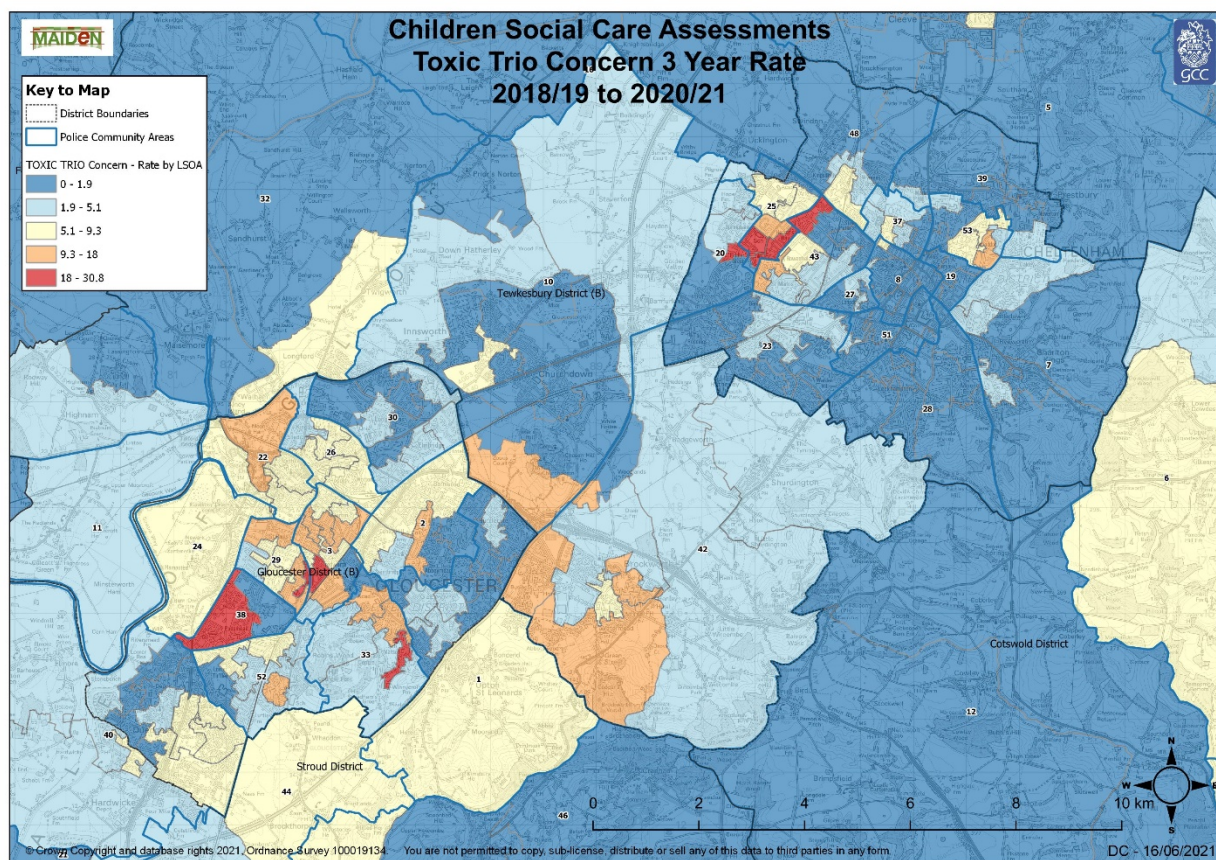


Referrals into CSC often flag domestic abuse coupled with mental health and alcohol/substance misuse as joint concerns, previously referred to as the 'toxic trio'. Within Gloucestershire around 12% of referrals into CSC state these 3 concerns, accounting for 753 referrals in 20/21. The Forest of Dean, Gloucester and Stroud have above the countywide 3 year average in 2020/21.



As with wider crime data and CSC referrals, the highest rates of 'toxic trio' referrals are within the Gloucester and Cheltenham areas.

Map 5: Children's Social Care 'Toxic Trio' concern 3 year rate across Gloucestershire communities from 2018/19 to 2020/21. (Key to maps is provided in Appendix 5).



9.4.5 Pupil Wellbeing Survey

The Pupil Wellbeing Survey conducted in 2016, 2018 and 2020 indicates that the majority of pupils report feeling safe at home. The 10% of pupils who report not feeling safe at home were more likely to be:

- Female
- In Year 10
- Identified as having 4+ ACEs (Adverse Childhood Experiences)
- Eligible for free school meals
- Identified as having special educational needs or have a disability

In addition, those feeling unsafe at home were also more likely to:

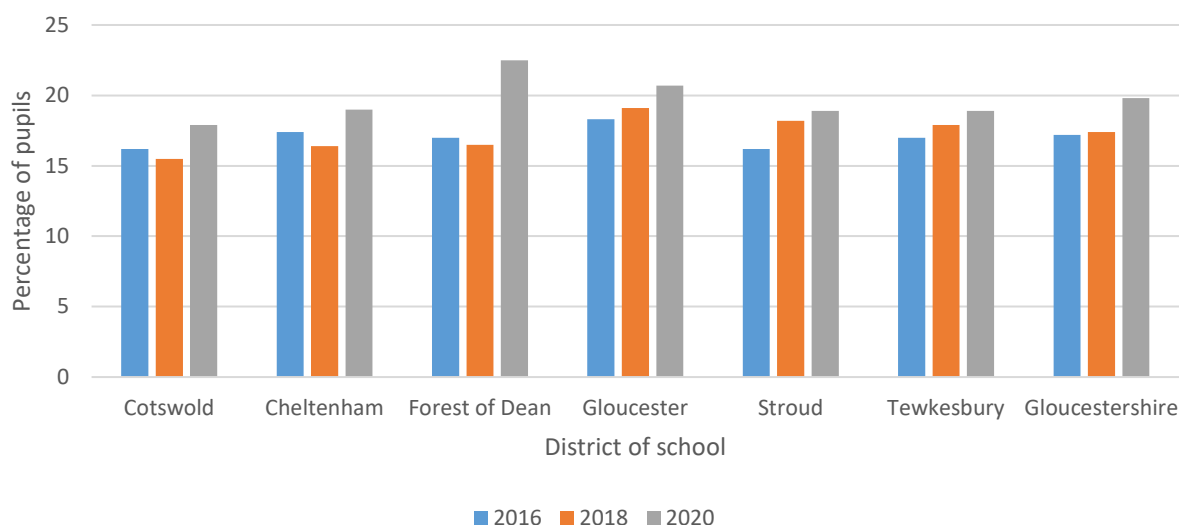
- Drink alcohol frequently
- Have tried drugs
- Be persistently absent from school or excluded from school
- Say that they are often aggressive or violent
- Carry a weapon
- Have over 9 hours of screen time daily
- Self-harm or take an overdose
- Having difficulty accessing healthy food at home

- Have issues with sleeping
- Have difficulty accessing regular exercise

Feeling unsafe at home is therefore connected to wider concerns about a student's health and wellbeing as well as their behaviour.

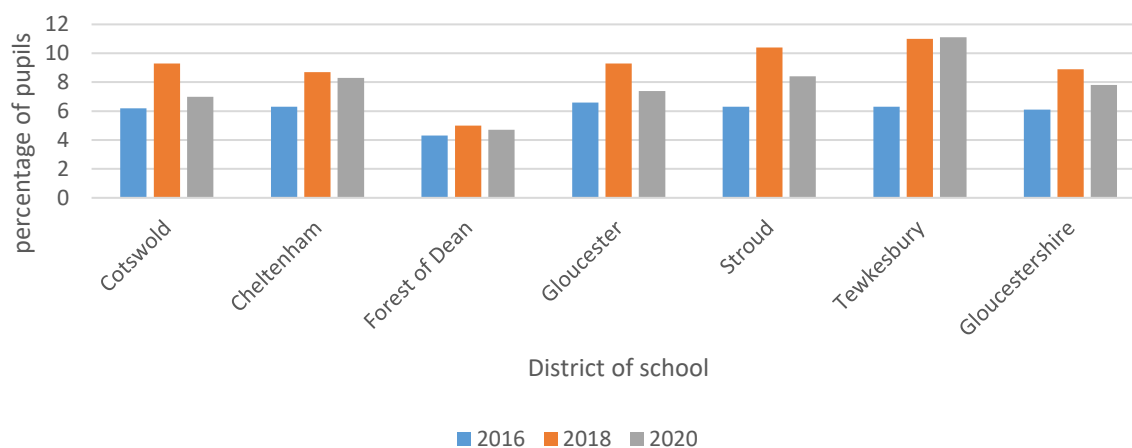
Whilst feeling unsafe at home only accounted for 10% of pupils, those reporting an experience of domestic abuse accounted for 20% of pupils across Gloucestershire. This includes witnessing domestic abuse at home or having experienced their own abusive relationship. This is most prevalent for the Forest of Dean and Gloucester, in slight contrast to wider crime data.

Graph 63: Children & Young people reporting experience of Domestic Abuse (Secondary and FE pupils)
Pupil Survey 2016, 2018, 2020



There is therefore a clear need to ensure children and young people have access to support for witnessing and experiencing domestic abuse. This is further identified by 8% of pupils identifying that there is a need for more support and education in domestic abuse. This is particularly apparent for students in Tewkesbury, in contrast to reports of experiencing domestic abuse.

Graph 64: Children & Young People reporting needing more support about domestic and relationship abuse (Secondary and FE)
Pupil Survey 2016, 2018, 2020



9.4.6 Links to violence prevention¹⁰¹

Family violence in the form of domestic abuse is well known to have a significant impact on children and young people who may be witness to this in the home. Whilst much research has previously indicated an increase in future victimisation if a child witnesses domestic abuse, it is now also evidenced that it can increase the likelihood of future violent offending, with a particular link to future psychopathy in males in particular (personality disorder that is characterised by traits such as grandiosity, callousness, as well as a disinhibited, antisocial lifestyle). Psychopathic individuals are significantly more likely to reoffend, both violently and non-violently, than non-psychopathic individuals¹⁰².

Research also indicates that witnessing domestic abuse can lead to children being more prone to engage in physical aggression, have higher levels of behavioural problems and engage in more problematic and aggressive behaviour with peers¹⁰³.

Whilst not all children who witness domestic abuse will go on to be victims or violent offenders, it is clear that it remains a significant risk factor connected to violent crime.

The Gloucestershire Violence Prevention Needs Assessment conducted analysis of the Youth Offending Cohort considering data available from the Youth Offending Service (YOS) database IYSS. It covers young violent offenders from Quarter 4 of 2018/19 and Quarter 1 of 2019/20.

Whilst the cohort considered is small, 24% of the young people in this cohort were noted as having witnessed domestic abuse in the family home. This is a significant finding, as nationally, estimates indicate that around 14% of children will have lived with domestic abuse at some point during their childhood¹⁰⁴.

Responding effectively to children who have witnessed domestic abuse is a key component of violence prevention. The Gloucestershire Violence Prevention Needs Assessment identified a key gap in dedicated provision of a Gloucestershire service that intervenes and supports children witnessing domestic abuse in the home, particularly for under 13's.

9.5 Gaps in provision and future developments

Dedicated specialist services for children witnessing DA for under 13's

Within the county there is no dedicated service commissioned to provide support to all children who witness domestic abuse where the children are under 13 years. Current provision requires families to need to meet the criteria for engaging with children and family centres and/or be open to Children's Social Care.

There is therefore a need to consider how all children witnessing domestic abuse in the home are provided with the support required, acknowledging the links to wider violence prevention.

This is also key given the DA Act now recognises children witnessing DA in the home as victims in their own right, and therefore our local response needs to consider support for all victims.

¹⁰¹ Gloucestershire Violence Prevention Needs Assessment 2019, Sophie Jarrett

¹⁰² Dargis, M and Koenigs, M (2018) Witnessing domestic violence during childhood is associated with psychopathic traits in adult male criminal offenders. *Law Hum Behav.* 2017 Apr; 41(2): 173–179.

¹⁰³ Sternberg et al (2006) referenced in Dargis, M and Koenigs, M (2018) & Graham-Bermann and Levendosky (1997) referenced in Dargis, M and Koenigs, M (2018)

¹⁰⁴ Women's Aid

Capacity within STREET

STREET is a relatively small scale service that is currently commissioned to provide support to young people aged 13+ who have witnessed domestic abuse in the home. Acknowledging the DA Act, there is a need locally to consider how this service can be extended to have greater reach, enabling the county to support all young people affected by domestic abuse.

Review of educational input in schools

As identified by the Pupil Wellbeing Survey, many students report feeling a need for greater support and education on domestic abuse. Whilst there is a statutory requirement for schools to deliver this input, and a priority area for the Schoolbeat officers, the Domestic Abuse LPB may wish to review the current input and consider if further support and investment is required in this area.

10. Vulnerable Adults and Domestic Abuse¹⁰⁵

A considerable proportion of safeguarding adults work relates to the abuse or neglect of people with care and support needs who are living in their own homes, including those experiencing domestic abuse.

The Care Act specifies that freedom from abuse and neglect is a key aspect of a person's well-being, with the following types of abuse acknowledged:

- physical abuse
- domestic violence
- sexual abuse
- psychological abuse
- financial or material abuse
- modern slavery
- discriminatory abuse
- organisational abuse
- neglect and acts of omission
- self-neglect

Safe Lives have conducted a range of 'spotlight' research projects that provide evidence on the experience of victims of domestic abuse who are more likely to also have care and support needs. This research highlights the following:

- For a disabled person, the abuse they experience is often directly linked to their impairments and perpetrated by the individuals they are most dependent on for care, such as intimate partners and family members. The Insights data from Safe Lives shows that disabled victims are much more likely to be suffering abuse from a current partner (31%) than non-disabled victims (18%). Intimate partners or family members often act as carers and this position of power can be exploited leading to widespread and pervasive means of coercive control and social isolation¹⁰⁶.
- For older victims, their experiences are often exacerbated by social, cultural and physical factors that require a tailored response. The Insights data from Safe Lives shows that clients over 60 are less likely to have attempted to leave than those under (17% vs 29%). Older people are statistically more likely to suffer from health problems, reduced mobility or other disabilities, which can exacerbate their vulnerability to harm. The Insights dataset showed that when asked to rate their physical health on a scale of 1 to 10 (1 being 'very poor' and 10 being 'excellent'), 11% of victims aged 61+ reported a number between 1 and 3, compared with 3% of victims who were 60 and under¹⁰⁷.
- Mental health problems are a common consequence of experiencing domestic abuse, both for adults and children and can in itself make a person more vulnerable to abuse. Victims of domestic abuse with mental health issues are also more likely to be experiencing multiple disadvantages than other victims of domestic abuse and this often coupled with additional complex needs such as drugs and alcohol misuse and financial difficulty. Research supports the existence of a bidirectional relationship; domestic abuse can lead to mental health difficulties, and having mental ill health can render people more vulnerable to domestic abuse. Safe Lives Insights IDVA 2017-18 dataset showed that 42% of people accessing

¹⁰⁵ [adult-safeguarding-and-do-cfe.pdf \(local.gov.uk\)](#)

¹⁰⁶ [Disabled Survivors Too CORRECTED.pdf \(safelives.org.uk\)](#)

¹⁰⁷ [Spotlight #1: Older people and domestic abuse | Safelives](#)

support from a domestic abuse service had mental health problems in the past 12 months, and 17% had planned or attempted suicide. Safe Lives' Spotlights series found mental health problems are more prevalent and severe amongst certain groups of victims and survivors, with those identifying as LGBT+ and those who have a disability being more likely to have mental health needs at the point of accessing domestic abuse services¹⁰⁸.

10.1 Local Approach

Gloucestershire's Domestic Abuse and Sexual Violence (DASV) Commissioning Strategy and Outcomes Framework (2014 – 2018) developed a vision that all who are at risk of domestic abuse can access the support and information required to minimise harm and maintain healthy relationships; inclusive of vulnerable adults.

The Gloucestershire Adult Safeguarding Board have long recognised domestic abuse as a priority area and have ensured awareness raising and training has been made available to those working in adult safeguarding.

10.2 Service Provision

In the main, concerns for vulnerable adults experiencing domestic abuse are responded to by Adult Safeguarding and Adult Social Care. Both of these services regularly engage with GDASS where required.

The Gloucestershire Domestic Abuse Support Service (GDASS) are commissioned to provide support to all victims of domestic abuse aged 16+, including those with care and support needs and complex needs. Whilst GDASS is a universal service it does have specialist workers embedded within it to ensure greater expertise in responding to victims with care and support needs.

Recent funding will also see further resources embedded within GDASS that will provide dedicated support to victims with mental health issues and complex needs; many of which may be known to adult safeguarding.

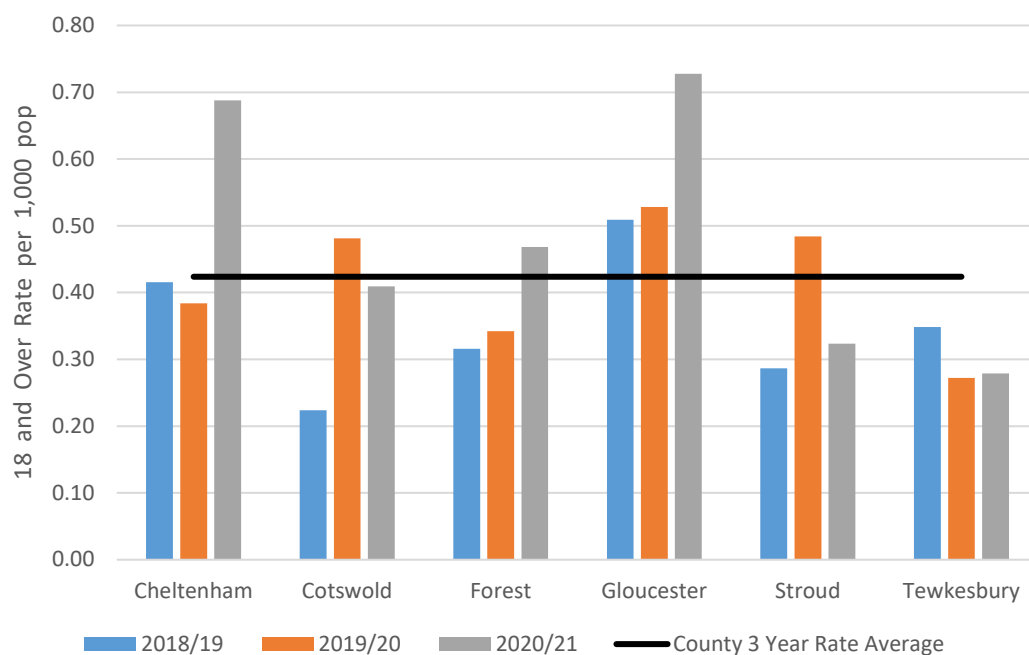
10.3 Vulnerable Adults and Domestic Abuse in Gloucestershire

From 01/04/2018 to 31/03/2021 Gloucestershire received 672 safeguarding alerts relating to individuals identified as experiencing domestic abuse. The majority of these alerts were for individuals living within Gloucester (26%) and Cheltenham (21%), in line with wider domestic abuse data within the county.

This prevalence is reflected when considering the rate of domestic abuse safeguarding alerts, with Gloucester and Cheltenham having the highest rate per 1000 of the population. In addition, the Forest of Dean has a rate higher than the countywide 3 year rate during 2020/21.

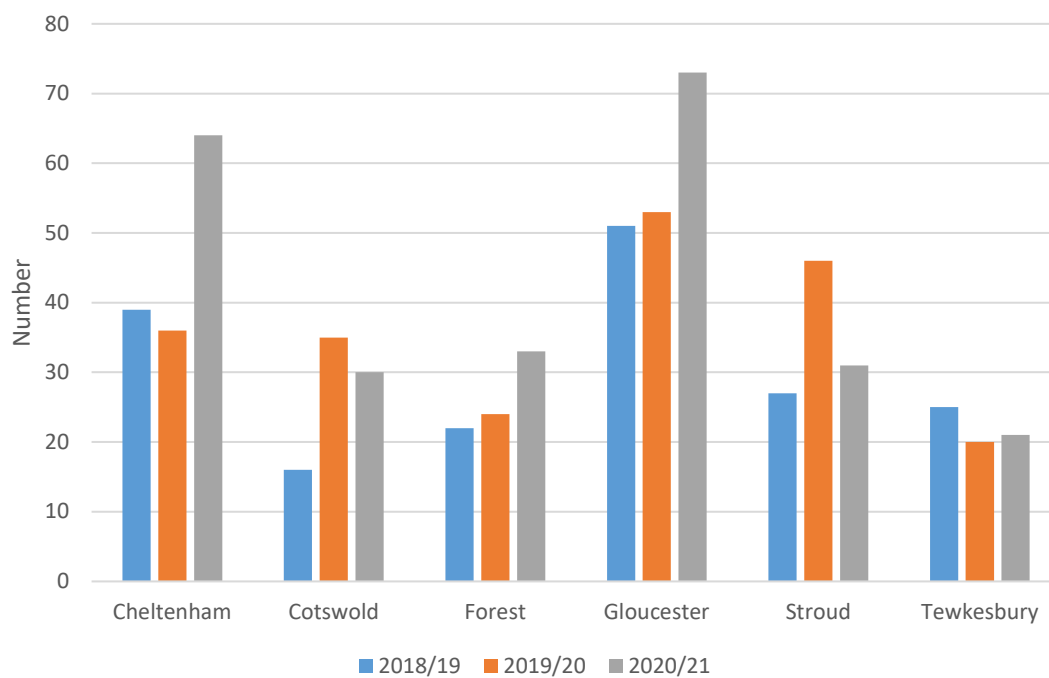
¹⁰⁸ [Spotlight 7 - Mental health and domestic abuse.pdf \(safelives.org.uk\)](https://safelives.org.uk/spotlight-7-mental-health-and-domestic-abuse.pdf)

Graph 65: Victim Prevalence of Domestic Abuse in Adult Social Care Safeguarding Alerts



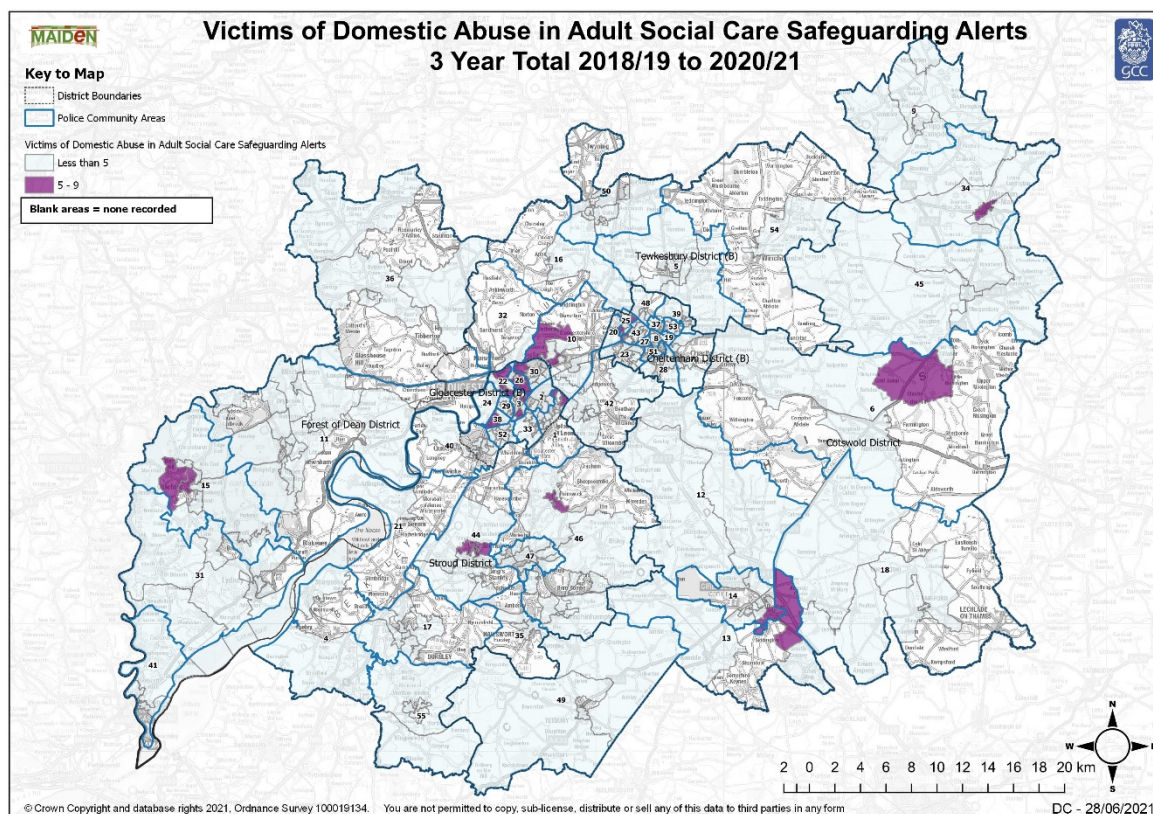
The number of domestic abuse victims connected to safeguarding alerts have continually increased, with a 18-19% increase year on year since 2018/19 across the whole of Gloucestershire. There are some variations between the districts however, with the most notable increases seen in Cheltenham where there was a 78% increase from 2019/20 to 2020/21 and Gloucestershire and Forest of Dean having a 38% increase.

Graph 66: Number of Victims of Domestic Abuse in Adult Social Care Safeguarding Alerts



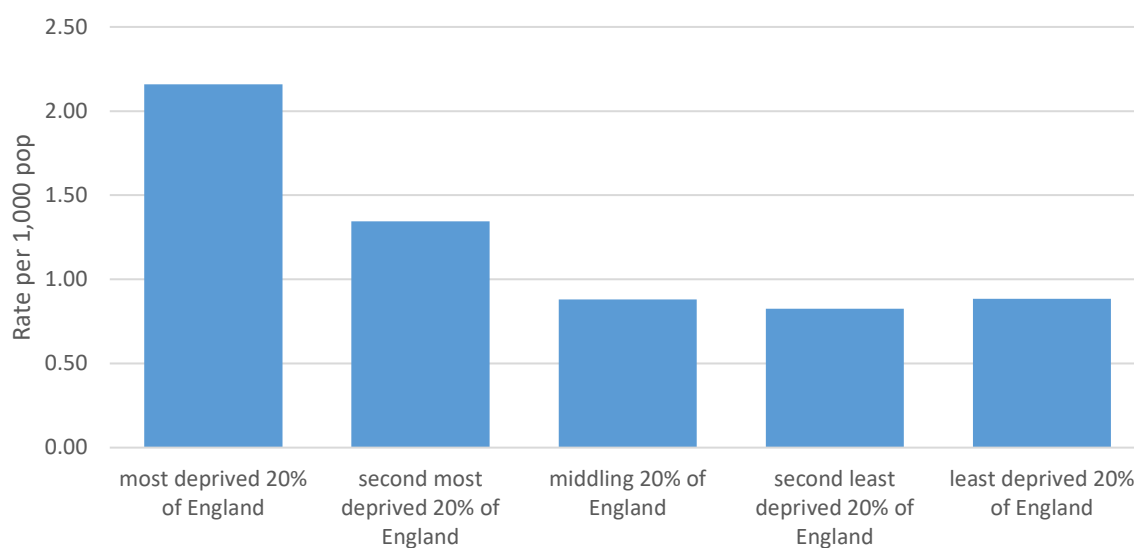
Map 6 below provides detail on the smaller community areas where victims of domestic abuse are identified through safeguarding alerts.

Map 6: Adult Safeguarding alerts 3 year total number across Gloucestershire from 2018-19 to 2020/21. (Key to maps is provided in Appendix 5).



As with wider crime data and children's social care referrals, adult safeguarding alerts connected to domestic abuse are also linked to deprivation in the county with the highest rates of safeguarding alerts connected to the most deprived 20% of England.

Graph 67: ASC Safeguarding Alerts - Domestic Abuse Victims (01/04/18 to 31/03/2021)
by Overall Quintile of Deprivation (IMD19)



10.4 Gaps in provision and future developments

Greater understanding of the links between adult safeguarding and domestic abuse

The available data for vulnerable adults and domestic abuse covers those cases where the safeguarding alert identifies domestic abuse as part of the initial concern. It is likely that domestic abuse will be identified following many assessments by adult social care and safeguarding and therefore it can be estimated that there is a greater connection to domestic abuse amongst vulnerable adults than the data currently suggests.

In gaining a greater understanding of the links there will an opportunity to then consider any service needs or multi-agency approaches required.

11. Stalking¹⁰⁹

11.1 Prevalence of stalking

Stalking became a criminal offence in England and Wales in 2012 as part of the Protection of Freedoms Act. Whilst not legally defined, it is best understood through the definition offered by Paladin¹¹⁰:

Stalking is a pattern of repeated and persistent unwanted behaviour that is intrusive and engenders fear, it is when one person becomes fixated or obsessed with another and the attention is unwanted. Threats may not be made but victims may still feel scared. Importantly threats are not required for the criminal offence of stalking to be prosecuted¹¹¹.

Stalking has a significant impact on society. For the year ending 2020, the CSEW note that 4.6 percent of women and 2.5 percent of men have reported an experience of stalking in the last year; this equates to a total of 25,254 adults aged 16-74. In addition, 19.9 percent of women and 9.6 percent of men indicated that they had experienced stalking at some point in their life since the age of 16; this equates to 25,259 adults aged 16-74.

Stalking has a significant link to domestic abuse, with 0.7 percent of men and 1.3 percent of women reporting to the CSEW domestic abuse related stalking, in which the perpetrator was either a partner or family member. Alongside this, police in England and Wales (excluding GMP) recorded 176,837 domestic abuse related stalking and harassment offences; this accounts for 23% of all domestic abuse related crimes⁴².

Stalking and harassment are considered under the broader crime category 'violence against the person'.

As detailed below in graph 68, the majority of domestic abuse-related stalking and harassment offences were in the harassment sub-group, followed by malicious communications.

Graph 68: Proportion of stalking and harassment offences recorded by the police that were flagged as domestic abuse-related, by offence sub-group, England and Wales (excluding Greater Manchester Police), year ending March 2020



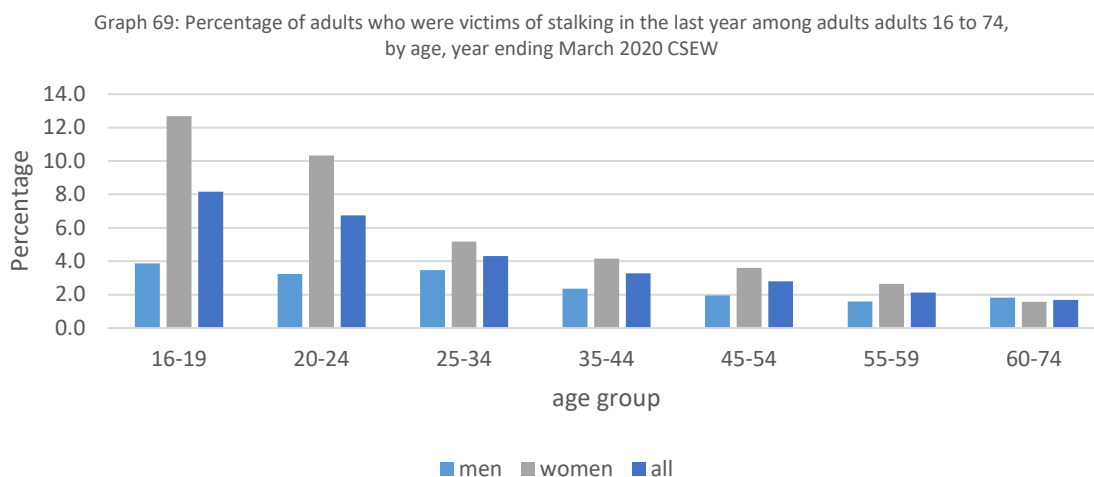
¹⁰⁹ Stalking: findings from the Crime Survey for England and Wales Year ending March 2020. ONS

¹¹⁰ Paladin: National Stalking Advocacy Service

¹¹¹ [Paladin National Stalking Advocacy Service - Who We Are \(paladinservice.co.uk\)](https://paladinservice.co.uk)

Data from the Suzy Lamplugh Trust indicates that 80% of people are stalked by someone they know, with ex-partners making up the majority of this. Stalking can of course also be perpetrated by acquaintances (22%), colleagues (5%) and in 20% of cases strangers¹¹².

As with domestic abuse, and demonstrating the clear link, the vast majority of those who report having experienced stalking in the last year are aged 16-19, accounting for 12.7 percent of females and 3.9 percent of men. Graph 69 below provides more detail on the age breakdown.



When looking at the ethnicity of those who report having experienced stalking in the last year, the majority were categorised under 'other ethnicity', followed by 'mixed ethnic groups'. This is a similar finding as seen for domestic abuse, where those from a Black, Asian and Minority Ethnic background are more likely to experience both domestic abuse and stalking than those from 'white ethnicities'.

As with domestic abuse, when considering the marital status of victims of stalking, the majority are noted as either divorced or separated. This is in line with the vast majority of stalking being linked to domestic abuse, where stalking behaviour is common post separation and is a significant risk factor to consider in domestic abuse risk assessments.

Significantly, the CSEW for year ending March 2020, identified that those identifying as LGBTQ are significantly more likely to report an experience of stalking in the last year, with 12.8% of bisexual and 7.8% of gay/lesbian adults aged 16-74 noting an experience of stalking, compared with 3.3% of heterosexual adults. Some of this will be linked to domestic abuse, with stalking a common feature and risk factor.

As with domestic abuse, a higher proportion of those who have experienced stalking in the year ending March 2020 are noted as disabled, demonstrating again that link to other vulnerabilities.

As detailed below in graph 70, female victims of stalking are significantly more likely to come from the 20% most deprived output areas based on the English indices of deprivation. Men however, were more likely to come from the 20% least deprived output areas, or other. This finding is consistent with the majority of females reporting an experience of stalking in the last year noted as earning less than £10,400 (6.3% of females compared with 2.5% of men) and significantly more likely to be social or private renters than home owners (12.4% of females compared with 5.4% of men).

¹¹² Suzy Lamplugh Trust - National Stalking Awareness Week 2015 - IS IT STALKING? #IsItStalking



The percentage of adults, aged 16-74, who were victims of stalking in the last year, by employment status shows that the majority were recorded as either students (6.2%), long term/temporarily sick (6.4%) or unemployed (5.6%); highlighting the link to younger victims as well as the impact that stalking is likely to have on the individual.

11.2 Local approach

In 2016, stalking was identified locally as a significantly under-reported and under-recorded crime by Gloucestershire Constabulary, with only 54 incidents of stalking recorded from June 2014-October 2016. At this time, it was estimated, based on the population of Gloucestershire, that the county could have around 51,643 women aged 16+ and 19,524 males aged 16+ who may experience stalking at some point in their lifetime¹¹³.

Following this recognition that stalking was not being properly identified and reported, a local awareness campaign was launched, alongside piloting a new innovative approach to stalking; the stalking clinic.

The overall aim of the Gloucestershire Stalking Clinic is to reduce harm caused to victims by assessing and identifying risks, considering offender management and supporting officers in their investigation of stalking crimes.

The stalking clinic is a multi-agency panel that meets regularly to review high risk stalking cases and provide a forum for information sharing, referral, consultation, case formulation, sign posting and risk assessment of stalking cases. It will provide advice and guidance to those professionals managing or investigating the stalking case.

The stalking clinic has its own dedicated coordinator who regularly reviews stalking cases, offers advice and guidance and liaises with the stalking tactical lead in order to ensure high risk stalking cases are responded to effectively. The clinic coordinator also liaises regularly with the Independent Stalking Advocacy Caseworker (ISAC).

The stalking clinic is seen as a national best practice approach, with many other police forces exploring options to adopt a similar model of response to stalking. This approach also includes an enhanced understanding of risk by utilising the Stalking Risk Profile Typology, which supports the

¹¹³ Based on the population at the time, and the data on prevalence from the Suzy Lamplough Trust

response to victim safety and offender management through better understanding the type of stalker and their motivations for their behaviour.

Strategically, stalking has been considered under the Domestic Abuse and Sexual Violence (DASV) Commissioning Strategy and Outcomes Framework (2014 – 2018) given its strong links to domestic abuse; the strategy does however also consider non-DA stalking under the wider VAWG agenda.

11.3 Service Provision

Following the successful pilot of the stalking clinic and Independent Stalking Advocacy Casework (ISAC) role, funding was secured to maintain this service longer term; now being commissioned by the OPCC.

The ISAC is a specially trained role to provide support to high risk victims of stalking. The role aims to not only support victims, but to also work with other agencies, such as police, probation and CPS, to ensure a coordinated response to the stalking is taken.

The ISAC role aims to:

- Provide advice to victims to stalking and specialist advocacy to high risk victims
- Raise awareness of the dangers and risks associated with stalking
- Provide advice and raise awareness with professionals
- Campaign on behalf of victim and represent their voice in multi-agency meetings/risk management processes

Currently the ISAC service consists of 1 FTE ISAC, who are commissioned from Splitz. Given its small scale, the service is commissioned to primarily work with stalking victims outside of the context of domestic abuse, and within DA where stalking is the primary risk facing the victim.

As stalking is a key risk factors connected to domestic abuse, GDASS provide support to stalking victims when this occurs within the context of DA. In addition, the OPCC commission Victim Support to provide wider victim services across the county; within this contract, standard and medium risk non-DA stalking victims are supported. Both of these services link closely with the ISAC service.

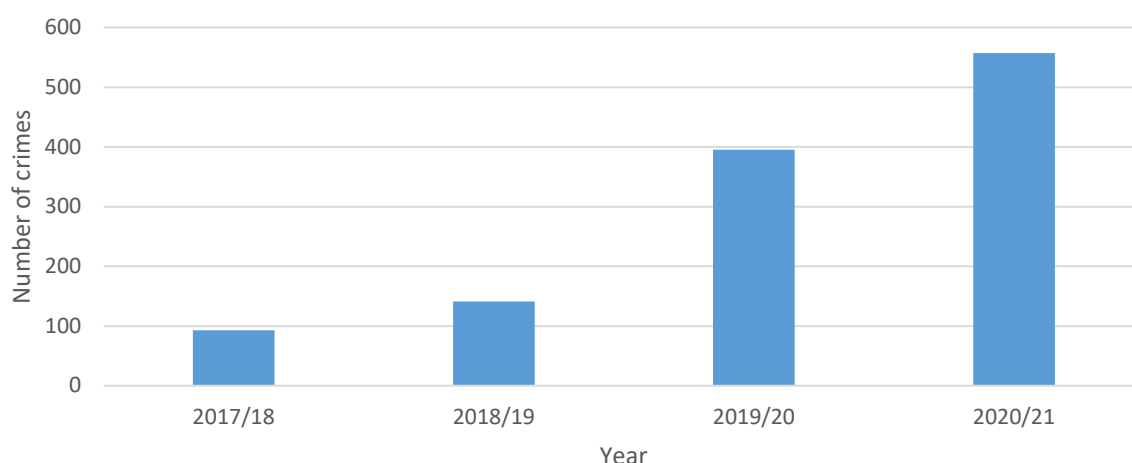
11.4 Stalking crimes in Gloucestershire

Stalking Crimes in Gloucestershire have increased considerably since 2017/18, with 93 crimes recorded in 17/18 compared with 557 recorded in 20/21. This increase is likely due to an increased awareness of stalking amongst the public, encouraging reporting, coupled with an increase in police recognition of stalking resulting in better recording. This increase is also likely linked to the work of the stalking clinic, where regular advice is provided to officers to support the identification of stalking.

Despite these increases, given the prevalence of stalking, greater awareness is needed to support victims in identifying their experience as stalking, and to ensure it is effectively identified by agencies to encourage reporting.

There will be some inevitable cross over with domestic abuse in the below data. It is however not possible at present to determine the volume of stalking crimes currently recorded that relate to domestic abuse.

Graph 71: Number of recorded stalking crimes for years 2017/18, 2018/19, 2019/20 and 2020/21

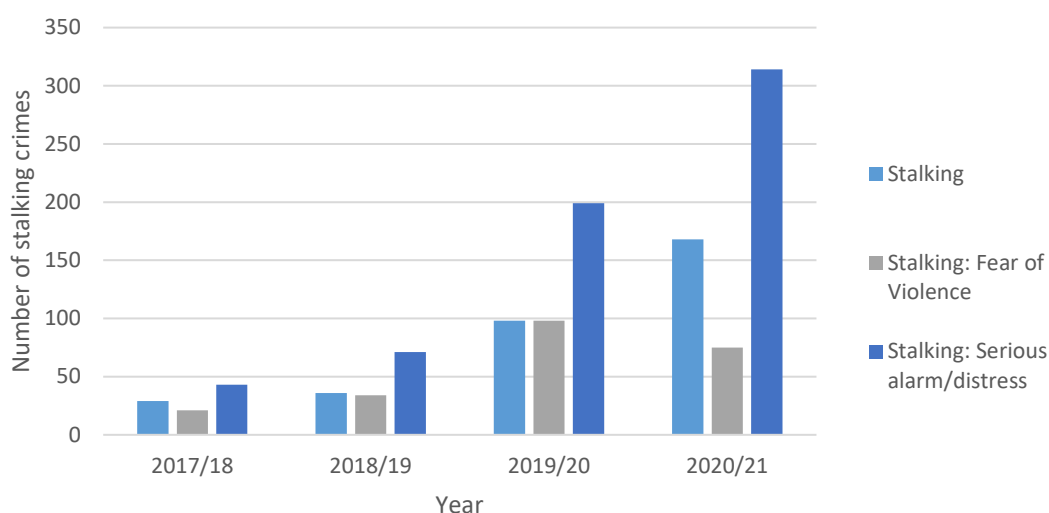


For 2020/2021 the rate of stalking crimes accounts for 0.87 crimes per 1000 of the population.

The majority of stalking crimes recorded across all years are those noted as involving the serious alarm or distress' caused to the victim, highlighting the impact that stalking has on its victims.

Stalking can cause a wide range of psychological, physical, occupational, social and general lifestyle effects as a consequence of being stalked. As with many aspects of stalking, the experience and impact can vary greatly between victims with behaviours that may be considered annoying to one victim can have a shattering effect on another¹¹⁴; this can make defining stalking based on fear of violence or serious alarm or distress difficult for police and other agencies.

Graph 72: Number of recorded stalking crimes by offence category for years 2017/18, 2018/19, 2019/20 and 2020/21



As detailed in Graph 73, the majority of stalking crimes are recorded in Gloucester. This is a consistent finding across wider crime data including domestic abuse and for MARAC referrals.

¹¹⁴ [Impact of stalking on victims | Stalking Risk Profile](#)

For 2020/21, Gloucester also had the highest rate of stalking crimes at 1.3 per 1000 of the population, a higher rate than for the county as a whole. This may be reflective of better reporting of stalking crimes from Gloucester and greater access to services as with domestic abuse.

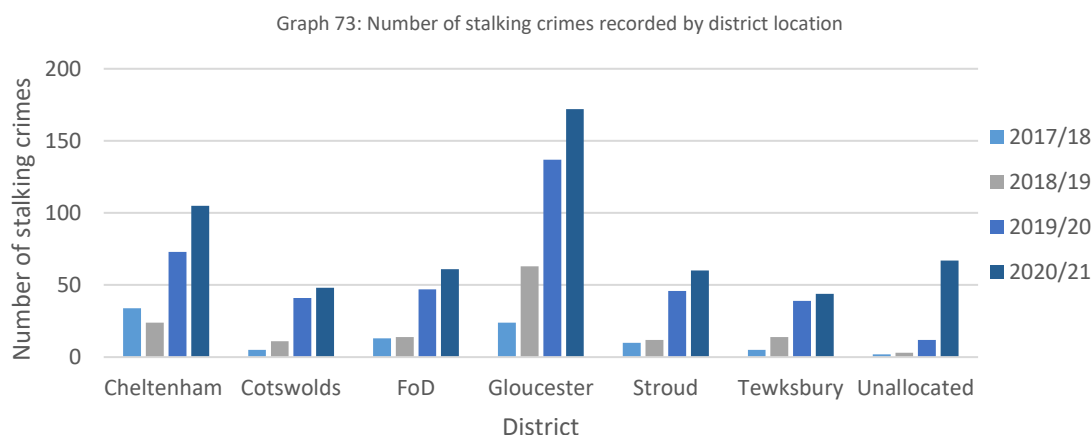


Table 12 shows the rate of stalking crime per 1000 of the population per district for 2020/21.

District	Cheltenham	Cotswolds	Forest of Dean	Gloucester	Stroud	Tewkesbury
Rate of stalking crimes per 1000 of the population	0.9	0.5	0.7	1.3	0.5	0.5

11.5 Victims

11.5.1 Police recorded victims¹¹⁵

Data on victims of stalking accounts for multiple victims per crime. This accounts for multiple victims being stalked by the same offender and for those being stalked due to their connection with the primacy stalking victim. Data presented will cover years 2017/18, 2018/19, 2019/20 and 2020/21.

Across all 3 years between 83-94% of stalking victims were recorded as female, indicating, alongside the offender data, that the majority of stalking victims are female and being stalked by a male offender. The proportion of female victims is lower than that seen for male offenders however, so females stalking females is a pattern seen within Gloucestershire.

The majority of stalking victims are recorded as aged 25-34, in line with the stalking offender data. Despite this, when considering the rate of stalking victims per 1000 of the population, the majority are aged 20-24 followed by 25-34, as detailed in Table 13. This is more closely linked to the stalking prevalence data, although still demonstrating a slightly higher age range for stalking victims in Gloucestershire where reported to police.

¹¹⁵ Data on victims may differ from local stalking crime and offender data. This is due to the time in which the data was sourced and some changes to crime recording in that period.

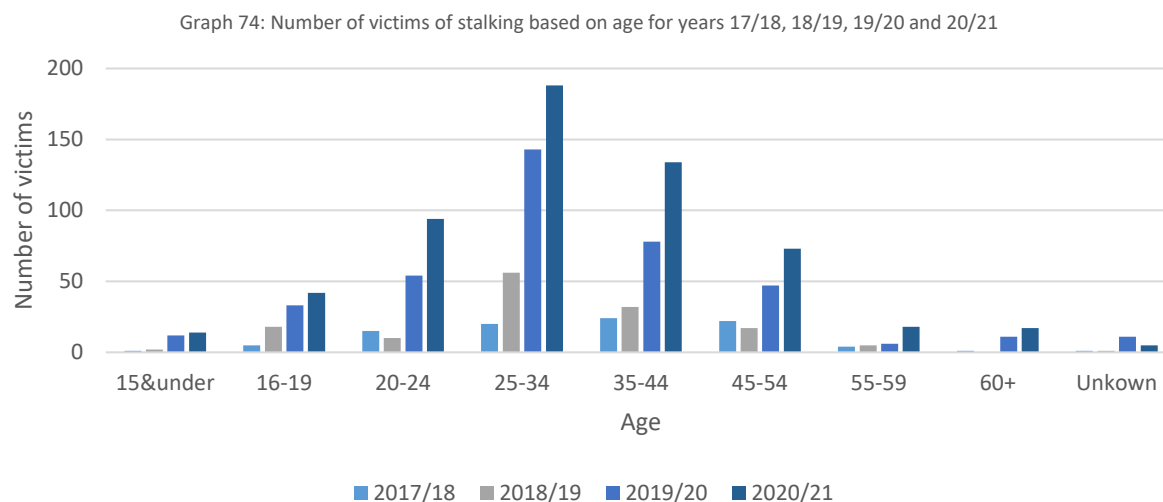


Table 13: Rate of stalking victims per 1000 of the population based on age for 2020/21.

	15&under	16-19	20-24	25-34	35-44	45-54	55-59	60+
Rate per 1000 of Pop.	0.12	1.53	2.82	2.62	1.78	0.8	0.4	0.1

When considering the ethnicity of stalking victims, the majority are recorded as being from ‘white ethnicities’ (between 86-91%). The ethnicity of stalking victims is therefore in line with the Gloucestershire population with stalking victims from a Black, Asian and Ethnic Minority background accounting for between 3-5% of all victims whilst accounting for 4% of the population. There are however between 5-9% of victims where their ethnicity is not recorded.

For stalking victims, their ACORN¹¹⁶ category was not consistently recorded and is only available for 54% of stalking victims in 2020/21¹¹⁷. Where an ACORN category was applied, the majority, 28%, were recorded under the category ‘Urban Adversity’, with a further 27% recorded as ‘Financially Stretched’. This is in line with ACORN data for victims of domestic abuse, indicating that victims of both stalking and domestic abuse within Gloucestershire are more likely to come from lower socio-economic circumstances. It is likely that given individuals in these circumstances are more likely to live in towns and cities, they have greater access to services in order to report or be supported to make disclosures.

In addition to those within lower socio-economic status, 20% of stalking victims were defined under ‘Comfortable Communities’ and 14% ‘Affluent Achievers’. This demonstrates that stalking victims can come from a range of socio-economic circumstances, and supports the themes coming from the stalking clinic, in that professionals are often stalked as part of their work.

11.5.2 Independent Stalking Advocacy Caseworker (ISAC) service

Data available for the ISAC service cover the year September 2019-August 2020.

¹¹⁶ Acorn is a segmentation tool which categorises the UK’s population into demographic types. Acorn provides a general understanding of the attributes of a neighbourhood by classifying postcodes into a category, group or type.

¹¹⁷ Data from 2020/21 is the year in which ACORN data was most consistently collected.

During this year, the ISAC supported 140 high risk victims of stalking. Of these, 96% were female victims with 4% males.

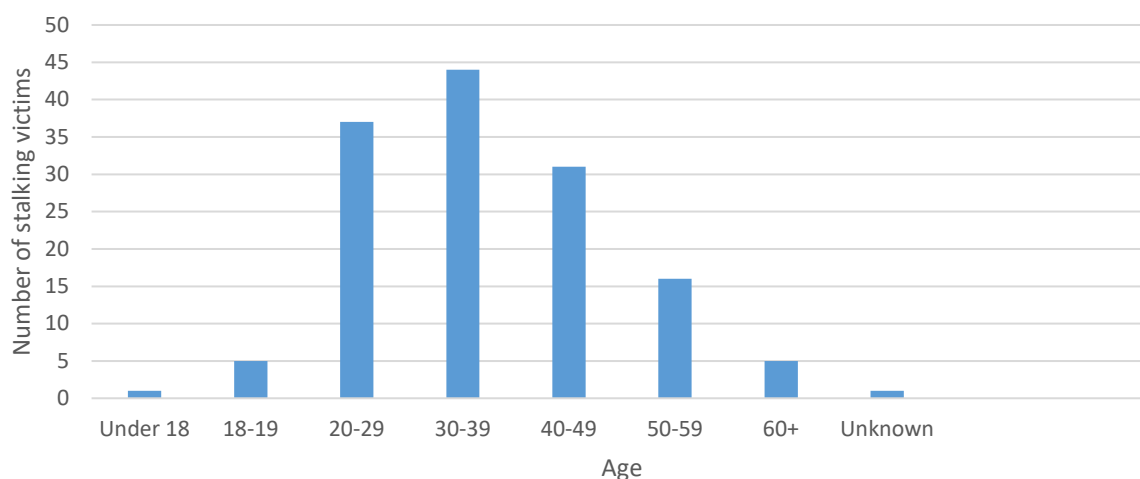
The largest proportion of these victims reported being stalked by an ex-partner (69%) indicating a strong link to domestic abuse. Whilst the ISAC role is dedicated more towards non-domestic abuse stalking, referrals can be made in these circumstances where the main risk factor is stalking, or where the stalking behaviour starts after a significant period of separation from a partner. It is unclear currently if stalking behaviour from an ex-partner follows the breakdown of an abusive relationship, or if the stalking behaviour begins with no known history of domestic abuse.

Stranger stalking accounts for only 4% of ISAC referrals, with the remaining victims being stalked by someone they know such as a neighbour, colleague or acquaintance. The percentage of stranger stalking is lower than the estimates from the Suzy Lamplugh Trust (20%) and may therefore be an indication locally of the need to raise further awareness of access to support in stranger stalking cases.

In addition, 4% of victims reported being stalked by a client, highlighting the impact of stalking on professionals being stalked by those that they either deliver service to or support. This is similarly reflected in some themes from the stalking clinic, in which health professionals and social workers in particular are the most common professionals highlighted as stalking victims locally.

The majority of victims accessing the ISAC service in one year were aged 30-39, followed by 20-29, an older age range than seen in national prevalence data. There may therefore be a need to ensure wider awareness raising and engagement with younger people to support the identification of stalking and ensure support is in place for these age groups.

Graph 75: Age of stalking victims supported by the ISAC from Sept19-Aug20



Victims who identified as LGBTQ accounted for 3% of ISAC referrals, an underrepresentation when compared to the Gloucestershire population estimates of 5% LGBTQ. In addition, 9% were identified as being from Black, Asian and Minority Ethnic backgrounds; the majority however were noted as being from 'white other' backgrounds rather than Black, Asian or Mixed.

In 11% of referrals, mental health was identified and in addition 4% were identified as having multiple and complex needs; a theme that has also arisen through domestic abuse and in particular in local domestic homicide reviews.

The majority of victims (52%) were noted as wanting emotional support from the ISAC, with practical and safeguarding support also a high priority. Many victims also accessed the service to get support in arranging access to other services such as mental health, financial support, housing and substance misuse services.

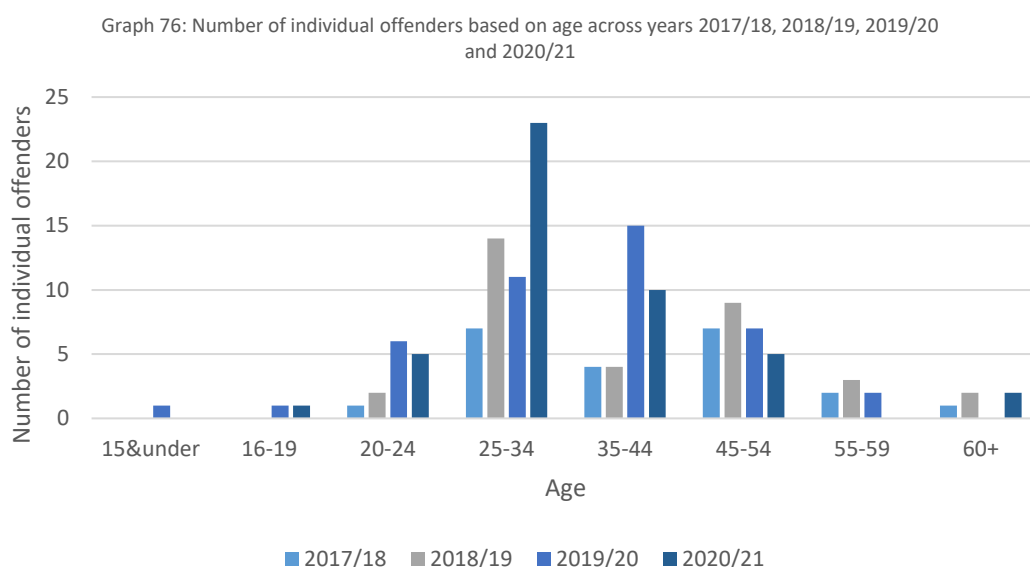
Outcomes data for the year 2020/21 is not fully complete, with end of service assessments not completed for all service users. Where completed however, the majority of service users noted that following the support of the ISAC they had noted an improvement in health and wellbeing, feeling better able to cope with everyday life, feeling safer, and feeling better informed and empowered.

11.6 Offenders¹¹⁸

When considering individual offenders of stalking, it is clear that staking is a repeated crime, with data from 2020/21 showing an average of 12.1 crimes per offender. This is to be expected, given the definition of stalking notes its persistence and repeated nature.

For all years from 2017/18 through to 2020/21, between 90-97% of individual offenders are recorded as male. This is to be expected given the link to domestic abuse and the gendered nature of these crime types. Females can of course be perpetrators of stalking.

Offenders of stalking recorded in Gloucestershire are most likely to be aged 25-34, similarly reflected in stalking victim data. Unlike victims however, the highest rate of stalking offenders per 1000 of the population were those aged 25-34 at a rate of 0.32.



The vast majority (between 90-95%) of stalking offenders are noted as being from 'white ethnicities', with the exception of the year 2018/19 where this dropped to 80%.

For stalking offenders, their ACORN¹¹⁹ category was not consistently recorded and is only available for 54% of stalking offenders. Where an ACORN category was applied, 28% (in 2020/21) were recorded under category 'Comfortable Communities', with a further 16% recorded as 'Affluent Achievers'. This potentially indicates that stalking offenders are most consistently not considered to

¹¹⁸ Police recorded offenders

¹¹⁹ Acorn is a segmentation tool which categorises the UK's population into demographic types. Acorn provides a general understanding of the attributes of a neighbourhood by classifying postcodes into a category, group or type.

be from low income households. In addition to this however, 24% were considered to be 'Financially Stretched'.

This compares with domestic abuse offender data in which a larger proportion are known to be from lower income groups with 24% of domestic abuse offenders being from ACORN group 'Financially Stretched' and 24% from 'Urban Adversity' (where recorded in 2020/21).

What is clear however, as with victims, is that stalking offenders come from a range of backgrounds, and as such, our local responses need to reflect this.

11.7 Stalking clinic

The stalking clinic is well placed to identify themes in the stalking behaviour identified. Within the last year (2020/21), the clinic has identified stalking behaviour linked to sexual violence, as well as behaviour linked to the experience of social isolation amongst the elderly. It has also highlighted the role of social media and internet in supporting stalking offences.

The clinic has also identified that where victims in professional roles are stalked, in the main those at risk appear to be from social work and health related careers, where those that they are either supporting or working with become fixated and obsessed and perpetrate stalking against them.

These identified themes have enabled stalking to be considered more widely by other existing partnerships, including the sexual violence partnership board and the social isolation working group formed from priorities identified by the Health and Wellbeing Board and Safer Gloucestershire.

11.8 Comparisons to other forces

Comparisons to other forces are only available for domestic abuse related stalking and harassment incidents and crimes. The data presented is taken from the Office for National Statistics Domestic Abuse Data Tool Year Ending March 2020.

For Gloucestershire, 32% of stalking and harassment offences were considered to be domestic abuse related. This is lower than the majority of most similar force areas, and significantly lower than the South West and England and Wales Percentage.

Table 13: Number and percentage of police recorded domestic abuse related stalking and harassment offences, for Gloucestershire, its most similar force areas, South West and England and Wales. ONS year ending March 2020.

	Number of offences	% of all stalking and harassment offences that were domestic abuse-related
Gloucestershire	1,267	32
West Mercia	4,341	43
Devon and Cornwall	4,610	45
Wiltshire	1,075	34
Suffolk	1,774	32
Cambridgeshire	2,038	42
South West	13,650	39
England and Wales	176,837	37

This lower percentage for Gloucestershire may be an indication that non-domestic abuse stalking is more readily identified in Gloucestershire than other forces. It may also however, be an indication that stalking in the context of domestic abuse is not easily identified or recorded as it should be; an area for future exploration.

11.9 Gaps in provision and future developments

Perpetrator services

Currently, at a national level, there is a gap in perpetrator interventions for stalking. Programmes in existence at present are focused on behavioural change for perpetrators of domestic abuse, something which is not suitable for perpetrators of stalking; mainly due to the interventions focusing on healthy relationships, reinforcing to a stalker that there is a relationship, fuelling their obsession and fixation.

This gap in provision makes addressing stalking difficult, as the root causes of the behaviour are never addressed even when an offender is incarcerated for their crimes. Pilots are ongoing in some areas of the country to develop perpetrator intervention in conjunction with the Suzy Lamplugh Trust. Locally, these pilots will be monitored and future consideration given as to how Gloucestershire can respond effectively to perpetrator behaviours.

Capacity in specialist victim support services

At present, victim services that are bespoke to stalking, the ISAC, consist of 1FTE worker. Whilst this is managed by linking the role with domestic abuse support options, as continued awareness raising increases reports of stalking, the provision of further ISAC support will need to be considered.

Training and awareness

Alongside these potential gaps in provision, there is also work to be done to increase training and awareness raising for stalking, ensuring the public and professionals are able to appropriately identify stalking behaviours, seek support and fully understand risk and address this effectively.

Should this work increase reports of stalking, capacity within the stalking clinic will also need to be considered and addressed.

Stalking Protection Orders (SPOs)

Stalking Protection Orders came into force in January 2020. They are civil orders which can be applied for by the police, designed to be utilised as an early intervention for stalking cases reported to police, offering protection for victims whilst investigations are ongoing.

In Gloucestershire, the Stalking Clinic has oversight of SPOs, with the constabulary successfully having been granted 2 interim SPOs and 1 full SPO in 2020/21.

Gloucestershire Stalking Clinic is aware that the number of SPOs locally is considerably fewer than seen in other forces. This is therefore an area of future development to ensure their proper use.

Workplace responses to employees

As identified by the stalking clinic, professionals are at risk of being stalked as a direct result of their job, particularly those in public facing roles. There is a need locally to therefore consider the role of employers in safeguarding their employees; developing workplace policies and implementing safety plans to protect from stalking.

12. Honour Based Violence (HBV) and Forced Marriage (FM)

12.1 Prevalence of HBV/FM

Honour based violence/abuse is a form of domestic abuse in that it mostly comprises of familial abuse. It is defined by the Crown Prosecution Service as:

‘an incident or crime involving violence, threats of violence, intimidation, coercion or abuse (including psychological, physical, sexual, financial or emotional abuse) which has or may have been committed to protect or defend the honour of an individual, family and/or community for alleged or perceived breaches of the family and/or community’s code of behaviour.’¹²⁰

Connected to this is the crime of Forced Marriage, defined as:

‘A forced marriage is where one or both people do not (or in cases of people with learning disabilities or reduced capacity, cannot) consent to the marriage as they are pressurised, or abuse is used, to force them to do so. It is recognised in the UK as a form of domestic or child abuse and a serious abuse of human rights.

The pressure put on people to marry against their will may be:

- *physical: for example, threats, physical violence or sexual violence*
- *emotional and psychological: for example, making someone feel like they are bringing ‘shame’ on their family.’¹²¹*

The prevalence of honour based violence and forced marriage is thought to be extensive in both the UK and worldwide, data is however limited when compared with data available on domestic abuse and stalking. Whilst research is clear that domestic abuse is an underreported crime, honour based violence and forced marriage are thought to be further underreported, with a number of barriers preventing victims from coming forward, including the risk of reporting further triggering the HBV and the conflict a victim may feel with regards to reporting their family and community to the police¹²².

Data from Police Forces in England and Wales (excluding GMP) for year 2019/20, shows 2024 offences were recorded and tagged as ‘Honour Based Abuse’ related. Of these offences, the majority (28%) were recorded as ‘assault without injury’ with a further 17% recorded as ‘assault with injury’¹²⁰.

It is important to note that police data is reliant on individuals officers and staff identifying the offence as honour based abuse related and recording it as such; there may therefore be further crimes reported to the police that are not correctly identified as recorded as ‘HBA’ related.

With prevalence data so limited, Safe Lives spotlight on HBV, FM and domestic abuse, provides the following information to aid our understanding of these crimes types and their impact¹²²:

- Victims of HBV/FM are likely to experience abuse for 5 years before seeking support (compared with 3 years for victims of DA)
- 68% of victims of HBV/FM were considered at high risk of serious harm or homicide (compared with 55% of DA victims not at risk of HBV)

¹²⁰ [Statistics on so called ‘honour-based’ abuse offences recorded by the police - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/statistics/honour-based-violence-and-forced-marriage-statistics)

¹²¹ [Forced marriage - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/statistics/forced-marriage-statistics)

¹²² [Spotlight on HBV and forced marriage-web.pdf \(safelives.org.uk\)](https://safelives.org.uk/wp-content/uploads/2020/04/Spotlight-on-HBV-and-forced-marriage-web.pdf)

- Victims of HBV were 7 times more likely to experience abuse from multiple perpetrators than DA victims not at risk of HBV
- Research suggest that at least one honour killing occurs in the UK every month
- Data from the CPS indicates that 76% of victims of HBV/FM were female

12.2 Local Approach

HBV and FM have both been areas of Violence Against Women and Girls (VAWG) that have strategically been considered under the Domestic Abuse and Sexual Violence (DASV) Commissioning Strategy and Outcomes Framework (2014 – 2018) given its strong links to domestic abuse.

Action taken in to increase awareness of both HBV and FM locally has included:

- Specialist multi-agency training and workshops
- Awareness campaigns
- Development and circulation of guidance for professionals on responding to 'harmful traditional practices'

Alongside this, a working group was established in 2016-2017 in order to consider actions needed to address HBV/FM in Gloucestershire. This working group however, was short lived, and struggled with attendance in order to progress any bespoke actions to respond affectively to HBV/FM. This in part was linked to the lack of information and data to provide insight into the prevalence of these crime types in Gloucestershire; something which continues to be an issue.

12.3 Service Provision

Honour Based Violence and Forced Marriage are areas that are supported by GDASS as a form of domestic abuse. In order to support victims of HBV/FM GDASS have workers with specialist knowledge and skills to address the risks posed and provide appropriate and effective support.

Alongside this, the places of safety model for supported accommodation has proven its effectiveness in responding to victims of HBV/FM by allowing a vulnerable high risk victim to be housed safely with others who may be at risk; something that can be difficult to achieve in other forms of safe accommodation.

The Stroud Beresford Refuge has also supported those seeking a safe space and support from HBV/FM.

12.4 HBV/FM crimes in Gloucestershire

It is not currently possible from police data locally to ascertain the level of HBV/FM crimes recorded. These types of crimes are collected under the banner of domestic abuse, and are not tagged separately. Anecdotally however, the level of HBV/FM crimes is low in Gloucestershire.

This low level of reported HBV/FM is reflected in referral data from GDASS where in 2019/20 FM was referenced as an additional concern for victims in less than 5 cases, and for HBV, less than 10¹²³.

12.5 Gaps in provision and future developments

Currently, the lack of data available makes it difficult to understand the level of service provision required for HBV/FM. The low levels of reporting may be an indication of a need to raise awareness of HBV/FM locally and look to improve community engagement to encourage reporting into existing

¹²³ This data reflects where GDASS record the 2nd/3rd 'issue' for victims of domestic abuse presenting to the service.

services. Ongoing community engagement and service user consultation will also support the development of existing services to ensure they can appropriately respond to HBV/FM.

13. Child to Parent Abuse (CPA)

13.1 Prevalence of CPA

Child to parent abuse is an emerging type of domestic abuse, gaining greater national recognition. Previously referred to only as 'adolescent to parent abuse', there is no legal definition in place to cover this type of abuse and it is not currently universally tagged on police databases; making it difficult to fully understand what the picture of CPA is nationally.

Despite not being defined, parents who report being abused by their child indicate an experience of the same behaviours as detailed in domestic abuse, including physical, emotional, psychological, financial and sexual abuse. It is essentially a type of abuse that aims to alter and shift the parent and child dynamic¹²⁴.

Research detailed by the charity PEGS indicates that 20% of teenagers are violent to their parents, with 10% of these being seriously violent¹²⁵.

PEGS information booklet also provides the following information on CPA¹²⁶:

- 1 in 10 families will experience child to parent abuse
- In 2018 there were 14,000 calls to the police about child violence and abuse
- In a 2 year period, parentline received over 22,000 calls in relation to child to parent abuse
- 65% of adopted families will experience child to parent abuse
- Child violence is not just against parents. Many children are also violent to their siblings

Research conducted by Oxford University indicates a significant rise of CPA as a result of the Covid19 pandemic with an increase of 70% found amongst families, and practitioners noting an increase of 69% in referrals for families experiencing CPA with 64% noting an increase in severity¹²⁷.

It is anticipated, that as a result of the new statutory definition of domestic abuse now including reference to CPA, further research and focus will be placed in this hidden area of DA, aiding our understanding and response both nationally and locally.

13.2 Local Approach

Child to parent abuse is a relatively new area of consideration for Gloucestershire under the domestic abuse agenda and is not currently considered within the existing strategy or commissioning approach.

In November 2020, for the 16 days of action, Gloucestershire focused on raising awareness of CPA alongside domestic abuse amongst young people. This awareness raising included:

- Social media campaign posts
- Circulation of guidance and information to professionals
- Training for professionals in identifying CPA

¹²⁴ [Adolescent to parent violence and abuse | Iriss](#)

¹²⁵ Parental Education Growth Support (PEGS) www.pegssupport.co.uk

¹²⁶ PEGS Child to parent abuse Booklet www.pegssupport.co.uk

¹²⁷ [Study finds 'significant increase' in child-to-parent violence in lockdown | University of Oxford](#)

Following this awareness raising, discussions have begun locally on ensuring a robust strategic and operational response to this area of domestic abuse and it will be considered in the local strategy for 2021 onwards.

13.3 Service Provision

There is currently no dedicated support for CPA commissioned in Gloucestershire. There are however services that are responding to CPA within their wider remit.

STREET, the local service for young people aged 13+ has received referrals in relation to CPA in the past year as part of its service to address harmful domestic abuse related behaviour in young people. In response to this, STREET have also formed a partnership relationship to newly established national CPA organisation PEGS, who provide support to parents.

In addition to the above service, ExChange, run by Young Gloucestershire, commissioned by the OPCC, is a current pilot service to work with young people who are demonstrating the signs of entering into violent criminality. This violence prevention service, whilst not established to support in cases of CPA, has found that young people perpetrating CPA are eligible for the 1:1 based support service.

13.4 CPA crimes in Gloucestershire

Currently, police data does not allow for CPA to be recorded separately, so the prevalence of CPA is somewhat unknown at this stage. Police data showing perpetrators under the age 16 may be an indication of CPA locally, but it is not possible to verify this.

Following the awareness raising conducted during the 16 days of action 2020, national organisation PEGS have seen an increase in referrals from Gloucestershire for parents experiencing CPA. Since Jan 2021, PEGS have received referrals for 21 parents in Gloucestershire. Alongside this PEGS have identified further families from Gloucestershire joining their online peer support network.

STREET receive referrals for young people who are displaying harmful behaviours towards family members, most commonly siblings or the non-abusive parent. Where there is a history of domestic abuse between parents/carers, STREET are able to offer support using The Recovery Toolkit to support understanding of the impact of abuse on the young person – young people are often seeking support for help with feelings of anger and frustration and may be both physically or emotionally abusive.

Young people can show a reduction in this behaviour with increased coping strategies and understanding of the impact of domestic abuse on their thoughts, feelings and behaviours. Support for the family is often needed from other agencies such as Early Help alongside the support from STREET to help make changes within the family home as needed. Where there is no history of domestic abuse STREET does not currently have the adequate support programmes to ensure positive outcomes and change for the young person and families are signposted/referred to Early Help, PEGS or other services.

13.5 Gaps in provision and future developments

There is little information to ascertain the impact of CPA in Gloucestershire. It is however an emerging theme, and it is positive that Gloucestershire has services in place to support young people and begin to identify CPA, but there is no specialist service available to support young people and their parents to address CPA.

Further awareness raising and connections to PEGS would be positive for Gloucestershire, with an opportunity to consider the adoption of the PRAM risk model developed by PEGS to risk assess CPA and greater connections to ensure parents in Gloucestershire are supported.

14. Service User and Community Engagement

To ensure the needs assessment and subsequent domestic abuse strategy are informed by service user and community voices, Gloucestershire County Council commissioned Perpetuity Research & Consultancy International (PRCI) Ltd to conduct an engagement exercise.

This work included the development of an online survey to seek the views of:

- Those with lived experience of domestic abuse
- Members of the community who may or may not know someone who has experience domestic abuse
- Perpetrators of domestic abuse (via the service provided by PRG)

The survey ran from the 10th June 2021 until 19th July 2021. To support a diverse and wide range of responses, the survey was promoted on social media through targeted advertising.

A full report on the Service User and Engagement work is available separate to this needs assessment. Results from this work support the identified areas for development within this needs assessment. In addition, the following areas have also been identified for the Domestic Abuse Local Partnership Board to consider in its strategy and development plan:

- Consider the development of longer term recovery services for survivors of domestic abuse and their children.
- Improve links between domestic abuse and substance misuse services.
- Increase awareness raising on services available locally, particularly PRG, STREET, Stalking services and specific aspects of the GDASS service e.g. Places of Safety.
- Increase awareness raising and communications that aim to reduce the stigma of reporting domestic abuse.
- Develop a better understanding of the role of mental health in identifying domestic abuse and improving pathways to specialist support.
- Increase and enhance training for all professionals, with particular focus on the police to ensure a consistent approach to policing domestic abuse.
- Improve links between the Domestic Abuse Local Partnership Board and the Courts (both criminal and family) to ensure appropriate response and support for victims.
- Improve capacity and accessibility of existing specialist services.
- Build on the role of the community in identifying domestic abuse and support access to reporting and access to specialist services.
- Ensure the promotion of information and support for family and friends to help them in responding to domestic abuse.
- Improve links to the Black, Asian and Ethnic Minority community to encourage access to specialist support and seek their ongoing engagement in service and strategy development.

15. Conclusions and Areas of Development

Overall Gloucestershire is a county with well-established domestic abuse partnerships and specialist services that offers a variety of provision to meet the needs of a broad range of victims/survivors of domestic abuse.

Local services are formally accredited in line with national best practice and these services receive a large number of referrals each year to provide support to both victims/survivors, perpetrators and professionals responding to domestic abuse. Services are ever evolving to meet changes in need and demand and regularly look towards innovative practice to continually develop the pathways to support.

The Domestic Abuse Local Partnership Board (DA LPB) and Coordinated Community Response (CCR) adheres to national standards and the local commissioning arrangements are considered best practice nationally.

There is a clear understanding of the prevalence and impact of domestic abuse locally and the strategic response ensures a focus on all areas of the domestic abuse agenda including:

- Prevention and early identification
- Provision of Service
- Partnership working
- Perpetrator responses

Gloucestershire is well placed to respond to the requirements of the Domestic Abuse Act 2021 and ensure the ongoing implementation of a shared vision and collective aims and objectives to continue the development of the local approach to addressing domestic abuse.

There are however key areas for further development that have been identified by this needs assessment. These will be taken forward by the DA LPB its Strategy development and ongoing multi-agency delivery plan.

15.1 Overarching areas of development

The needs assessment has identified some key areas of development that are across all areas of the domestic abuse agenda for the DA LPB to take forward in its strategy and delivery plan:

Training for frontline staff across all agencies (early identification & prevention)

Further development and embedding of DA Pathways (CCR) and partnership approach

Ongoing awareness raising and community engagement to increase reporting and access to support (including the role of community champions in supporting the identification of DA)

Improvements in early identification of domestic abuse, risk assessment and referral into specialist services

Response to DA victims with complex needs &/ or multiple disadvantage/ intersectionality (particularly LGBTQ, BAME and Disability)

Place based approach to DA/ deprivation/ access to support/Urban and Rural

Improve DA data collection across all agencies

Preparations for the new measures introduced in the DA Act

Ongoing assessment against 'In Search of Excellence' to ensure best practice CCR

15.2 Themed areas of development

The needs assessment has identified specific areas of development that are broken down into thematic areas of the domestic abuse agenda for the DA LPB to take forward in its strategy and delivery plan:

Accommodation Based Support

Increase DA specific accommodation across all tenures

Specialist accommodation to meet specific needs
(protected characteristics)

Whole Housing Approach

Consider cross boarder access to accommodation

Develop better links with registered social landlords to ensure
appropriate responses to victims of DA

Consider support for victims with NRPF

Access to DA safe accommodation at the right time

Community Based Support

Capacity within current service (need for growth)

Multi agency engagement & increasing referrals

Engagement with protected characteristics groups
(consideration of 'by and for' approach)

Improve links between DA and to substance misuse services

Consideration of long term recovery services

Understanding role of MH and development of pathways

Perpetrators

Capacity within the service (need for growth)

Increasing perpetrator support 16+

Young people prevention & early intervention

CJS response to perpetrators

Improvement of arrest rates and crime recording for DA

Children and Young People

Dedicated services for under 13 witnessing domestic abuse

Capacity within current 13+ service (need for growth)

Review of educational input in schools

Vulnerable Adults

Consider and clarify multi agency response to vulnerable adults

Greater understanding of local need required

Stalking

Capacity within current service (need for growth)

Training and awareness raising

Response to stalking perpetrators

Increased use of SPOs

HBV/FM

Greater understanding of local need required

Community engagement & awareness raising

CPA

Greater understanding of local need required

Community engagement & awareness raising

Investment in dedicated services

Appendices

Appendix 1: In Search of Excellence CCR local assessment

In Search of Excellence: The Coordinated Community Response

Gloucestershire Assessment

Assessment completed July 2021

(This assessment will be continually reviewed as progress is made in the local approach)

Component	Gloucestershire's Position
<p>1. Survivor engagement and experience</p> <p>-Are a diverse range of survivors' voices heard within the partnership?</p> <p>-Is survivor engagement safe and trauma-informed?</p> <p>-Is there a system and process for embedding the experience of survivors into the CCR?</p>	<p>Gloucestershire has previously conducted service user engagement and services are designed and commissioned to reflect service user feedback. There is an expectation that Providers maintain service user engagement as part of their contract.</p> <p>Future plans: The short term plan is to conduct consultation engagement work with service users and the community to feed in to the local needs assessment. This work has been commissioned to ensure a trauma informed approach with respondents signposted to support and the option to request a bespoke response.</p> <p>The engagement work has utilised targeted advertising to ensure a diverse range of responses. As part of the Local Partnership Board (LPB) there will be a Consultation Group which will reflect a diverse range of service user voices as well as community groups in the county. We will be recruiting a consultation group coordinator to lead this work and represent the service users and community at the LPB; working alongside the county leads for domestic abuse (DA). This new approach will ensure that all activity from the DA LPB is driven and informed by the service user experience.</p> <p>This activity will be required to ensure a diverse range of survivor and community voices are heard and to ensure any consultation work is conducted in a trauma informed way.</p>
<p>2. Intersectionality</p> <p>-Do all members of the partnership have an understanding of intersectionality and how it relates to the experiences of survivors?</p> <p>-Is intersectionality a genuine strategic priority?</p> <p>- Does your CCR include a wide range of communities?</p>	<p>Future plans: To deliver training/awareness raising to the LPB to ensure our local approach reflects on intersectionality and increase awareness of the Co-ordinated Community Response (CCR) approach. The local needs assessment and DA strategy will consider intersectionality and local needs.</p> <p>The Consultation Group will ensure a wide range of communities and service users are able to feed into our local approach on a regular basis.</p>

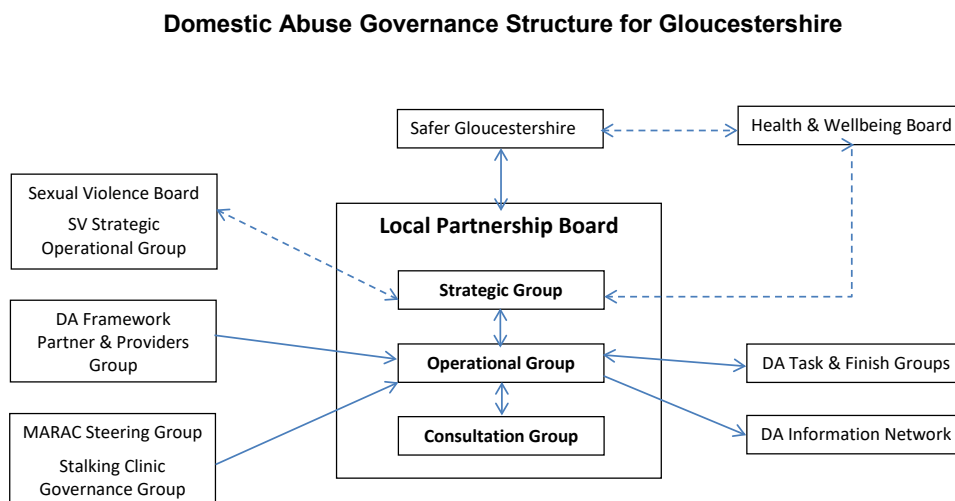
<p>3. Shared vision and objectives</p> <p>-Is there a shared vision?</p> <p>-Can partners name the objectives?</p> <p>-Do they recognise the need to collaborate on equal terms?</p>	<p>The County DASV strategy has been in place from 2014-2018. The shared vision within this is still relevant today.</p> <p>Future plans: The LPB held a workshop in July 2021 to develop our new shared vision and collective objectives. Work is now ongoing to develop the Gloucestershire DA strategy for 2021-2024 which will outline our vision, approach and expectations for DA which will be approved and signed off by the LPB and Safer Gloucestershire on behalf of all partner agencies. A local delivery plan will be developed following this to ensure all partners are aware of our objectives and how we will deliver the strategy.</p> <p>The TOR for the LPB consider each member as an equal partner and this will be continually reviewed to ensure all partners are able to equally contribute to this agenda.</p>
<p>4. Structure and governance</p> <p>-Do all partners understand the governance structure?</p> <p>-Does the governance structure allow for challenge from smaller agencies?</p> <p>-How do you know that the structure is effective?</p>	<p>The establishment of the LPB has enabled us to review our governance arrangements. These arrangements have been widely communicated and agreed by all partners. The LPB is made up of 3 groups: Strategic, Operational and Consultation. Each with their own TOR which clearly sets out their roles and responsibilities. This structure enables all partners from statutory agencies to the voluntary and community sector to have a voice alongside victims and the wider community.</p> <p>The effectiveness of this structure will be considered at the planned review October 2021 and regularly reviewed after that.</p>
<p>5. Strategy and leadership</p> <p>-Do the strategic objectives of the partnership and the action plan include prevention and early intervention alongside high-risk responses?</p> <p>-Are all statutory agencies aware of their responsibility to deliver multi-agency responses effectively as well as the specialist sector?</p> <p>-Does your strategy incorporate an intersectional, gendered, survivor-led and trauma informed approach in its strategic aims and delivery?</p> <p>-Do you have a VAWG / DA Strategic Lead / Coordinator to support the effective delivery of the strategy?</p>	<p>The County DASV strategy has been in place from 2014-2018. The strategic objectives within this have all been met and remain relevant for ongoing work. This included work on prevention and early intervention.</p> <p>We are currently developing the Gloucestershire DA strategy for 2021-2024 which is a collaborative effort alongside the LPB and will reflect national priorities including prevention and early intervention as well as high risk responses. Our local strategy will also ensure we meet the requirements as set out in the Domestic Abuse Act 2021 and later the revised VAWG strategy. The local needs assessment has highlighted local areas for development which include;</p> <p>recommendations around our intersectional approach, plans for ongoing survivor-led activity and trauma informed practice.</p> <p>We have a local DASV Strategic Coordinator who is fully involved in the delivery of the strategy. We also</p>

<p>-How is the learning from your local Domestic Homicide Reviews (DHR) embedded in your local strategy?</p>	<p>have local DA dedicated commissioning leads that are also fully involved in the delivery of the strategy.</p> <p>Learning from DHRs will be discussed at the LPB, incorporated in the local delivery plan as well as having oversight from Safer Gloucestershire to hold agencies to account for their actions/ learning.</p>
<p>6. Specialist services</p> <p>-Is there sustainable funding for specialist services?</p> <p>-Are there gaps in service provision for survivors?</p> <p>-Is the statutory sector playing its part in responding to survivors?</p>	<p>We have a domestic abuse joint commissioning framework 2018-2023 in place which ensures the provision of specialist domestic abuse services for the county. The framework covers the provision of; community based DA services, access to safe accommodation, addressing perpetrator behaviour, support for young people, workforce development and early intervention and stalking.</p> <p>A range of statutory partners are signed up to the use the framework to support a joint commissioning approach. Our aim is to ensure contracts of sufficient length are in place that allow sustainable service delivery.</p> <p>As a county we have funded commissioning activity across the DA agenda for a number of years and are committed to sustaining, and where possible increasing the level of investment to address growing demand and emerging gaps in DA provision.</p> <p>The current DA needs assessment and subsequent strategy will identify current gaps in provision and outline plans for addressing these in the future. Our local strategy will clearly outline the role of statutory organisations in supporting survivors of DA and their role in working alongside our commissioned services.</p>
<p>7. Representation</p> <p>-Are key agencies represented at the relevant level?</p> <p>-Is strategic leadership supported by resources?</p> <p>-Are 'by and for' agencies able to engage meaningfully?</p>	<p>Our LPB ensures a wide range of agency representation at a strategic and operational level across statutory agencies, commissioned providers and voluntary/community sector organisations. The tier 1 local authority takes the strategic leadership around the DA agenda for Gloucestershire. The MHCLG burdens funding will support this activity. We have dedicated roles focused on DA which support the delivery of the strategy and ongoing development of the local approach.</p> <p>The Consultation Group which is part of the LPB will ensure the ongoing identification and engagement with local 'by and for' services/agencies. Regular feedback will be used to inform our local approach.</p>
<p>8. Resources</p>	<p>The local DA needs assessment supports our understanding of the scale of the issue within the</p>

<ul style="list-style-type: none"> -Does the partnership collaborate, grasp the scale of the problem and its costs? -Is domestic violence fully embedded within each agency's own planning? -Are strategic partners working to improve capacity within specialist services? -Are commissioning practices undermining collaboration partnership working? 	<p>county. There are however some gaps in our knowledge which will be addressed through the DA Strategy delivery plan overseen by the LPB moving forward.</p> <p>There is work to be done to fully understand the cost impact of DA within Gloucestershire across all sectors and the cost of fully addressing DA need locally. It is our intention that the LPB will ensure each partner agency represented is addressing DA appropriately within their own organisation and collectively working towards addressing capacity within specialist services. The mechanism for achieving this will be discussed and agreed by the LPB.</p> <p>The joint commissioning framework ensures that commissioning practices are collaborative across all partner agencies and that commissioned services are encouraged to work in partnership with each other and the wider system.</p>
<p>9. Coordination</p> <ul style="list-style-type: none"> -Are partners aligned with the principle of a coordinated approach? -Are partners committed to collaboration? -Is the significance of the coordinator's role acknowledged and supported? 	<p>Agencies in Gloucestershire are working in a coordinated way to address DA but without formally recognising the CCR approach.</p> <p>The new DA strategy will ensure the CCR approach is fully acknowledged and outline the expectation of partners to commit to formal and ongoing collaboration.</p> <p>The DASV Strategic Coordinator role is fully embedded within the partnership as a whole and is recognised and supported across all partners in leading this agenda.</p>
<p>10. Training</p> <ul style="list-style-type: none"> -Is there a common understanding amongst staff of the dynamics of domestic abuse? -Do colleagues at all levels have the skills and knowledge to identify and respond to domestic abuse? -Is there a policy for service users and staff? 	<p>A DA training pathway has been developed and in place for some time alongside the mechanism for commissioning workforce development across all agencies and delivered in multi-agency settings. It is acknowledged that investment is required locally to provide a clear, consistent and sustainable training offer. This will be considered in the new DA strategy. Many agencies ensure DA training is part of their 'in house' offer and many organisations have policies in place for both service users and staff.</p>
<p>11. Data</p> <ul style="list-style-type: none"> -Has the partnership mapped existing data? -Do all partners contribute data that is collated for the whole partnership? 	<p>The DA needs assessment has provided a good understanding of local need. It has however also highlighted some gaps in data, with not all organisations in the county able to contribute fully to our local understanding of DA.</p>

<p>-Does the partnership have an agreed method of defining and measuring success?</p>	<p>The new DA strategy and action plan will look to making ongoing improvements in DA data collection and sharing for the future.</p> <p>The LPB will need to consider any actions they may want to take to ensure the measurement of success. All commissioned services through the DA framework are required to collate both output and outcomes data.</p>
<p>12. Policies and processes</p> <p>-Does the partnership have policies and protocols to work with other strategic boards effectively? (for example, Safeguarding Boards)</p> <p>-Are policies and procedures evidence based and survivor informed?</p> <p>-Do all partners have a clear understanding of information sharing and is this cascaded to all staff?</p>	<p>The LPB has clear TOR and governance arrangements that outline the links to wider partnership boards (including safeguarding) and the role of its membership in maintaining these links.</p> <p>There is clear policy and guidance in place for specific DA processes, such as MARAC, DHRs and identifying and responding to DA/Stalking/HBV/Teenage relationship abuse etc.</p> <p>All partners are signed up to the GISPA which outlines clearly the information practices for the county. Where necessary, there are also specific information sharing protocols in place, for example, for the MARAC.</p>

Appendix 2: Gloucestershire Domestic Abuse Partnership Structure



Appendix 3: ACORN Categories

Acorn is a geo-demographic segmentation of residential neighbourhoods in the UK. It classifies each postcode in the country into one of 62 types. The 62 types aggregate into 18 Acorn groups which lie within 6 Acorn categories at the top level.

The 6 Acorn Categories are:

Affluent Achievers: These are some of the most financially successful people in the UK. They live in wealthy, high status rural, semi-rural and suburban areas of the country. Middle aged or older people, the 'baby-boomer' generation, predominate with many empty nesters and wealthy retired. Some neighbourhoods contain large numbers of well-off families with school age children, particularly the more suburban locations. These people live in large houses, which are usually detached with four or more bedrooms. Some will own homes worth many millions. Other homes are significantly more expensive than the average for their locality. Around one in eight of these families will own a second property. A high proportion of these people are very well educated and employed in managerial and professional occupations. Many own their own business. Incomes are generally well above average. Many can afford to spend freely and frequently and have also built up savings and investments. Wealth has also been, or is being, built up through their expensive houses. Most of these people are owner occupiers, with half owning their home outright and the remainder often having significant equity in their homes. Usually confident with new technology and managing their finances, these people are established at the top of the social ladder. They are healthy, wealthy and confident consumers.

Comfortable Communities: This category contains much of middle-of-the-road Britain, whether in the suburbs, smaller towns or the countryside. All life stages are represented in this category. Many areas have mostly stable families and empty nesters, especially in suburban or semi-rural locations. There are also comfortably off pensioners, living in retirement areas around the coast or in the countryside and sometimes younger couples just starting out on their lives together. Generally people own their own home. Most houses are semi-detached or detached, overall of average value for the region. Incomes overall are average, some will earn more, the younger people a bit less than average. Those better established might have built up a degree of savings or investments.

Employment is in a mix of professional and managerial, clerical and skilled occupations. Educational qualifications tend to be in line with the national average. Most people are comfortably off. They may not be very wealthy, but they have few major financial worries.

Financially Stretched: These are younger couples and families who own smaller lower-value homes, generally in towns or the outskirts of cities. Houses typically have a couple of bedrooms and are often semi-detached. A proportion may be recently built houses designed for the starter end of the market and there may be some element of shared equity ownership. Generally these streets experience more frequent house moving than average.

Household incomes tend to be a little higher than average, often as a result of there being two full time salaries. Most are basic rate taxpayers. Occupations might be less senior white collar or semi-skilled. Educational achievement varies, some will have degrees while others left school with GCSEs. Some will have savings in the form of an ISA or a modest savings account. Other investments are less frequently found. Most have mortgages with many years repayments still to come and focus on seeking discounted rates. Some might seek savings through the use of price comparison sites. A number will be coping adequately with unsecured debt and possibly some residual student loans. Generally these households tend to have insurance and life cover. Household insurance may be arranged online. They may be part of their employer's pension scheme and some will also have a private pension. Credit cards are slightly more prevalent than average. Some will need to make use of their overdraft facility. Around half may manage their bank accounts or credit cards online, occasionally using mobile devices. A higher proportion than usual may own modern technology and electrical equipment, a number having videogame consoles, either for themselves or their children. Most shop online less often than average perhaps purchasing toys and cinema tickets. Mortgages may be researched online and a number will be regular users of online auctions such as eBay. Typical high street names where these families might spend money include DFS, BHS, Peacocks, Debenhams, McDonald's and KFC. They may use their smartphones to access sports, entertainment and games content online. Apps providing mapping, weather and travel information might be used more frequently. Some may respond to advertising on their smartphone.

Not Private Households: These are postcodes where the bulk of the residents are not living in private households. The category forms a single group, R – Not private households, which is subdivided into three types; Type 60: Active communal population These people may be in communal establishments yet still consumers to some degree. This includes defence establishments, for example people living on military bases. Although military married quarters is generally not communal accommodation so it will be classified in one of the other Acorn types according to the characteristics of the residents. It also includes hotels and other holiday accommodation. Generally this is accommodation that may be unoccupied for part of the year, or where the people living in the accommodation regularly change. Other active communal accommodation might include hostels, children's homes, refuges and local authority accommodation for travellers. Type 61: Inactive communal population. These people may be in communal establishments but unlikely to be active consumers. This includes care homes, hospitals, and other medical or nursing establishments where due to their health, the residents are unlikely to get out and about to function as regular consumers. It also includes prisons. Type 62: Business addresses without resident population. These are postcodes where we believe there is no regular resident population. An example of this might be a business or industrial park with no residents.

Rising Prosperity: These are generally younger, well educated, and mostly prosperous people living in our major towns and cities. Most are singles or couples, some yet to start a family, others with younger children. Often these are highly educated younger professionals moving up the career

ladder. Most live in converted or modern flats, with a significant proportion of these being recently built executive city flats. Some will live in terraced town houses. While some are buying their home, occasionally through some form of shared equity scheme, others will be renting. While many have good incomes not all might yet have had time to convert these into substantial savings or investments. They are likely to be financially confident, managing their money and choosing the provider of their financial, or other, services. They are the internet generation, 'early adopters' most likely to use smart phones and frequently use the internet and new technology. These people have a cosmopolitan outlook and enjoy their urban lifestyle. They like to eat out in restaurants, go to the theatre and cinema and make the most of the culture and nightlife of the big city

Urban Adversity: This category contains the most deprived areas of large and small towns and cities across the UK. Household incomes are low, nearly always below the national average. The level of people having difficulties with debt or having been refused credit approaches double the national average. The numbers claiming Jobseeker's Allowance and other benefits is well above the national average. Levels of qualifications are low and those in work are likely to be employed in semi-skilled or unskilled occupations. The housing is a mix of low rise estates, with terraced and semi-detached houses, and purpose built flats, including high rise blocks. Properties tend to be small and there may be overcrowding. Over half of the housing is rented from the local council or a housing association. There is some private renting. The relatively small proportion of the housing is owner occupied is generally of low value. Where values are influenced by higher urban property prices these are still lower value relative to the location. There are a large number of single adult households, including many single pensioners, lone parents, separated and divorced people. There are higher levels of health problems in some areas. These are the people who are finding life the hardest and experiencing the most difficult social and financial conditions.

The 18 Acorn groups are used as explanatory variables within the UK HPI regression, these are;

Lavish Lifestyles: Lavish Lifestyles are the most affluent people in the UK. As well as premiership footballers, hedge fund managers, and entrepreneurs this group includes people in high status senior managerial and professional positions.

Many are very well-educated individuals. Many are company directors or business owners. These neighbourhoods have the greatest concentrations of higher rate taxpayers. The typical family will live in a large house worth over £1million. A good number will own additional property, either abroad or in the UK.

These people often read the financial pages to keep up with economic affairs in general and their investments in particular. They are often financially sophisticated, purchasing a wide range of financial products, or have advisors to do so for them. They are unlikely to have suffered any meaningful impact as a result of the recession.

They use new technology for its practical benefits. The internet is used for practical research and news-gathering more than for shopping or social activity. Social media will be used more for making business contacts rather than leisure activity. In short these consumers have money to enjoy very comfortable lifestyles with few financial concerns.

Executive Wealth: Executive Wealth are wealthy families living in larger detached or semi-detached properties either in the suburbs, the edge of towns or in semi-rural locations. While these are generally family areas there are also some empty nesters and better-off retired couples. Many families own their home but a good number may still be repaying a mortgage.

The likelihood of these families owning a second home, in the UK or abroad, is over five times the UK average. Incomes are good since many have managerial and professional occupations with perhaps one in five being company directors. It is rare to find households earning less than the average.

They tend to be financially literate people more likely to have multiple bank accounts and credit cards and the incomes to spend relatively freely. These families are usually financially secure and three times more likely to have a variety of investment vehicles. Personal pensions and significant levels of savings are also more likely. They tend to be frequent users of the internet, generally more for practical than entertainment purposes such as shopping and keeping up with current affairs, although many will also read the broadsheets.

Modern technology such as DAB radio, iPads or tablet PC's, portable media players and smartphones are more likely to be owned, and those with children may well have purchased games consoles. These are high income people, successfully combining jobs and families.

Mature Money: Mature Money tend to be older empty nesters and retired couples. Many live in rural towns and villages, others live in the suburbs of larger towns. They are prosperous and live in larger detached or semi-detached houses or bungalows. Many have two cars, others may have down-sized to live in good quality apartments. Some will own second homes.

These are high income households and even those that have retired have good incomes. Employment is typically in managerial and professional roles. A good number own their homes outright and with many having no mortgage to pay are able to invest their money in a wide range of financial products.

While some might have a DAB radio these people do not generally favour new technology and are less likely than average to have a smartphone or tablet PC. Some may prefer free digital TV services to Sky or cable options. In their leisure time they enjoy gardening, walking, photography or golf.

They appreciate good food and wine and will go on regular holidays. They often shop at Waitrose, Marks & Spencer and John Lewis and may well read the Daily Telegraph, the Times, the Mail and the Daily Express. These older, affluent people have the money and the time to enjoy life.

City Sophisticates: City Sophisticates are affluent younger people generally own flats in major towns and cities. Most of these are purpose built apartments although there is also a significant number that have been converted from older terraced town houses. These flats are over twice the cost of the average UK house and more expensive than the average property in these more expensive urban locations. The majority are buying their flats with perhaps a third renting from a private landlord.

Single people and couples without children form the majority of people in these areas. Many are graduates and white collar occupations tend to predominate, including senior managerial and professional jobs. Perhaps one in five might be a company director. While not all are highly paid, incomes are above the national average and a good number pay higher rates of tax. Many of these people are financially aware, reading the financial pages, switching accounts, carrying out financial transactions online and with multiple cards and accounts. A number will have built up significant saving accounts or investments in shares. Although incomes are relatively high some of these people will be utilising their overdraft facility or making the minimum repayment on their credit cards.

Ownership of iPhones, iPads and other smartphone and tablet devices is double the national average. Generally these people access the internet quite frequently, to keep up with current affairs, shop, download music or films, to watch TV channels and the like. These people enjoy the lifestyle

that comes with living in larger cities where there are lots of people and opportunities to socialise & spend.

Career Climbers: Career Climbers are younger people, singles, couples and families with young children. They live in flats, apartments and smaller houses, which they are sometimes renting and often buying with a mortgage, occasionally using a shared equity scheme. Usually these are in urban locations, where the flats cost more than the national average price of a house.

Overall they tend to have higher educational qualifications than average and incomes reflecting the urban locations, are well above average. A good proportion will be in white-collar occupations including both managerial and professional roles, some paying higher rate tax. Although they are more likely than average to have some savings, investments and pensions, others are more likely to have loans, perhaps the residue of student borrowing and to have mortgage repayments. As a result the good jobs may not always reflect high disposable income and a few may even be having some difficulties with debt.

The Career Climbers are more likely than many to switch provider of all forms of financial services. Generally these people are confident users of new technology and frequent users of the internet. Ownership of smartphones, media players, tablet PC's and games consoles are likely to be above average. They use the web to research purchases, read newspapers, buy and download music. They prefer marketing communications by email and dislike commercial contact on their phones, which are for social use.

Countryside Communities: Countryside Communities are areas of the lowest population densities in the country, ranging from remote farming areas to smaller villages and housing on the outskirts of smaller towns. Housing is typically owner occupied, detached or semi-detached however there will be some renting and tied property. Up to a third of the homes will be a named property rather than street number, terms such as cottage or farm will often feature in these names.

While there is a fair amount of agricultural employment there are also many other skilled occupations and some professional people. These might be stable areas with much lower turnover of home ownership than usual. Overall the mix of people is older than the average. Although incomes might be lower than the national average some families will have built up savings and investments and be in a better financial position than many in urban areas.

Leisure interests will tend to reflect the opportunities offered by the relatively rural locations, walking, wildlife, photography, gardening and food.

Successful Suburbs: Successful Suburbs comprises home-owning families living comfortably in stable areas in suburban and semi-rural locations. They mainly live in three or four bedroom detached and semi-detached homes of an average value for the locality. Families might include young children, teenagers or even young adults who have not yet left home. These areas will also include some empty nesters. Within this group, there are also some neighbourhoods with high numbers of comfortably off families of Asian origin.

Incomes are at least of average levels and many earn well above the national average. Many have A level or higher qualifications. People are employed in a range of occupations, including middle management and clerical roles. There also a number of shop workers and skilled manual workers. Most people in this group have some savings and would consider themselves financially prudent. The more affluent will have good company cars and will have built up somewhat greater levels of

savings and investments. Many will have pensions through their employer and others will have private pensions.

These are occasional rather than heavy users of the internet although their phone is more likely to have internet capability than not. Generally they are less keen on marketing communications other than by email. Leisure interests are varied with photography, computing, gardening, travel, and golf a little more popular than average. These are the stable suburban families that make up much of Middle Britain.

Steady Neighbourhoods: Steady Neighbourhoods are home-owning families, often middle-aged, living comfortably in suburban and urban locations. They mainly own older, lower priced, three bedroom terraced or semi-detached homes, which they may have occupied for many years. Families might include young children, teenagers or young adults who have not yet left home. These areas will also include some empty nesters.

People typically have GCSE and A level qualifications although some have degrees. They tend to be employed in a range of middle management and clerical roles or as shop workers and semi-skilled manual workers and overall household incomes are around the national average. Their spending and interaction with financial services broadly mirrors the national average. Most in this group have some small savings, an ISA and perhaps a few shares. Although they do generally use the internet, few of these people will go online extensively on a regular basis.

They are more likely to read the Daily Mirror, the Daily Express or the Daily Star than a broadsheet paper. Celebrity, travel, cooking and glossy women's magazines may be popular with some. These working families form the bedrock of many towns across Britain.

Comfortable Seniors: Comfortable Seniors are established communities generally made up of retired and older empty nester couples. Property tends to be two and three bedroom semi-detached houses, bungalows and some smaller purpose-built flats. These will typically be slightly below the average value for the area, although there will be variation around this level. The majority will have paid off their mortgage and own their homes outright. The working population are in a mix of middle, lower management and supervisory jobs while some of the pensioners might have had more senior roles. Overall incomes are relatively modest since a good number of these people are now living off their pension. However since their children tend to have left home and they have little or no mortgage left to pay, many will have a reasonable disposable income. They may also have some investments for security in their old age. Broadly these people feel comfortable with few in financial difficulties. However lower investment incomes due to low interest rates is likely to be a concern for some.

They are unlikely to use the internet more than sporadically for practical purposes such as email, purchasing travel tickets. New technology is unlikely to attract these people and their phone is unlikely to be able to access the internet. They are likely to prefer to be contacted by regular mail rather than any other channel. Free digital services are likely to be preferred to a cable or satellite service. Whilst most people get their news from the TV, the Daily Mail is the most popular newspaper. These older people have sufficient investments and pensions to feel secure about their future.

Starting Out: Starting Out are younger couples in their first home, starting a family, and others who are at an early stage of their career form a substantial proportion of the households in these areas. Some are still renting but most will be buying their home with a mortgage. Junior executive jobs and other white collar or professional occupations are typical.

Although household incomes tend to be above average the need to have built up a deposit and to have paid off student loans means housing is usually lower cost relative to the local area. Terraced or smaller semi-detached homes are typical. This is the internet generation and they spend more time online than average. New technology including smartphones and tablet computers might be popular. These younger people might expect to develop their careers further in the future. They have money but might also have higher outgoings with their mortgage and an active social life.

Student Life: Student Life areas are dominated by students and young people, often recent graduates. At least half of the people here, usually more, are studying. Students will be living in a hall of residence or in flats or shared houses. There will be little in the way of incomes other than to fund their time at university. Some will be utilising overdrafts or be building up debts.

Internet use is likely to be extensive whether for their studies, or leisure purposes. They will be happy to go online to research their purchases, download music, stream TV or videos and play games. Ownership of smartphones, tablet and hand-held computers will be well above average, as will the proportion owning portable media players and games consoles. They will find time for going out as well as going online. Their interests may focus around social and leisure activities. In addition to the broadsheet newspapers, film, computing, educational and style magazines may be their preferred reading matter.

Modest Means: Modest Means own or rent smaller older terraced housing and flats, which often includes some of the least expensive housing in the area. The mix of families is likely to include singles, couples with children and single parents and the age profile may tend to be younger than average. Incomes are likely to be well below the national average.

Jobs reflect a mix of educational qualifications that are generally lower than average. Employment tends to be in a mixture of clerical, semi-skilled and other office or manual occupations. Unemployment may well be above average. In addition to Jobseeker's Allowance the proportion of people claiming other benefits, disability and income support is likely to be above average. Generally there will be average levels of investments and savings. However, a few people may be having difficulties keeping up with loan repayments.

There are fewer cars than in many other areas. Shopping may tend towards cheaper stores. Fast food, burgers, fried chicken and traditional baked goods are likely to be favoured more than average. Football, DVD's, betting, bingo and the lottery are amongst the more common leisure activities. A relatively high number of these people dislike receiving marketing communications, whatever channel is used, although traditional channels are more acceptable than others.

Striving Families: Striving families are low income families who typically live on traditional low-rise estates. While many rent their homes from the council or housing association an equal number have bought their houses. Estates are typically either terraced or semi-detached with two or three bedrooms. Relatively high numbers of children are typical and there may be high numbers of single parents. Incomes are likely to be well below the national average and unemployment is above average. Jobs may reflect the general lack of educational qualifications and tend to be in a mixture of clerical, semi-skilled and other manual occupations in factories and shops.

A proportion of these families may be reliant on state benefits. In addition to the unemployment the proportion of people claiming other benefits, disability and income support are also likely to be above average.

The majority will not have a credit card and perhaps one in four might have been refused credit in the past. Most will have few investments and minimal savings. The financial services more often required in these areas may be loans and a few people may be having difficulties keeping up with the repayments.

Their phone is less likely to have internet capabilities and with the possible exception of games consoles and TV's these people are less likely to purchase the latest technological goods. There are fewer cars than most other areas. Money is tight and shopping tends to focus on cheaper stores and catalogues. Visiting the pub, computer games, DVD's, betting, bingo and the lottery are amongst the more common leisure activities. With the possible exception of people in more rural locations fewer than average are likely to consider marketing communications acceptable, whatever the channel. These families are struggling to get by on limited incomes in urban areas.

Poorer Pensioners: Poorer Pensioners areas are dominated by pensioners and older people. The majority are renting social housing but there are a few who own their home or rent privately. Some will not have extensive educational qualifications, partly because they are of an age to have left school before the age of 16.

Those who have not reached pensionable age are more likely to work in semi-skilled or manual jobs, in shops or administrative roles. Household incomes are well below average. The numbers claiming benefits will be higher than average. In addition to some claiming Jobseeker's Allowance there will be claimants of benefits relating to disability. The incidence of health issues will be higher than usual. Traditional attitudes to money might be expected. These people have little requirement for financial services products since they are unlikely to have much savings or any investments. Most will not have a credit card.

Angling, bingo, gambling and television may attract these people's leisure time. New technology holds no interest, many will never have used the internet, or have a mobile phone with more than basic functionality.

Young Hardship: Young Hardship areas are dominated by younger people. They own or rent small terraced houses or flats that tend to be amongst the cheapest housing in the town. A number of the residents might be first time buyers and it is usual for mortgages to have many years left to run. While there are couple and families with young children, single people or single parent residents are found more frequently than average. Some may be financially supporting a child that does not live with them.

In some cases the residents of these areas may include people from an East European background.

Educational qualifications tend to be lower than average and much of the employment is in junior office roles and semi-skilled or manual occupations. There are pockets of deprivation in this group. Incomes range from moderate to low and unemployment is higher than the national average. The numbers claiming benefits may be up to double the national average in some places.

Generally these people have modest levels of savings and many find it hard to save regularly from modest incomes. There are some households with high levels of debt. Some will have been refused credit and generally these people are less likely to use a credit card. A number of these people will have loans that they may be having difficulty repaying. A small number may have accumulated debts in excess of their annual income.

Car ownership is below the national average and cars tend to be lower value and usually bought second hand. Some will own smartphones, although these are less likely to be an iPhone than a less

expensive less fashionable model. These people have a modest lifestyle and some may be struggling to get by in the current economic climate.

Struggling Estates: Struggling Estates are low income families living on traditional urban estates. While typically two-thirds rent their homes from the council or housing association some have bought their houses, typically under right to buy, or from a prior tenant who has done so. Since house prices are low the few homeowners may include a number of first time buyers.

A substantial proportion of the housing will be flats or terraced houses although there may also be some semi-detached estates. Small properties are more typical but the larger families may be housed in three bedroom houses. Either way there may be some element of overcrowding. There may be a high proportion of children and the level of single parent households may be double the national average. Childless couples and pensioners are relatively rare. As is typical of more urban locations the population may include some minority ethnic groups.

Jobs reflect the generally lower educational qualifications and tend to be of a routine nature, perhaps in factories, shops or other manual occupations. Incomes are low and the numbers claiming Jobseeker's Allowance is typically double the UK average. The numbers claiming income support, disability and other benefits are similarly high. Many will have been refused credit and people having difficulties with debts is likely to be double the average. Money is tight and shopping tends to focus on cheaper stores, fast food outlets and inexpensive food.

Difficult Circumstances: Difficult Circumstances are streets with a higher proportion of younger people. Although all age groups may be represented those aged under 35 and with young children are more prevalent. There are twice as many single parents compared to the national average. The bulk of the housing is flats rented from the council or housing association although there may also be some socially rented terraced housing. Generally these are small flats and a good proportion of Britain's high rise blocks make up a small part of this group. These are relatively deprived neighbourhoods. The numbers claiming Jobseeker's Allowance, Income Support, and Employment and Support Allowance are all at their highest levels in this group.

There may be high levels of long term unemployment and of households relying entirely on state benefits. Educational qualifications are usually low. Those in work are likely to be employed in routine or semi-skilled manual jobs perhaps in factories or shops. Incomes may be particularly low and nearly half these people may not earn enough to pay tax. It is rare for these people to have a credit card or to have savings. Loans, which some will have difficulty repaying are more typical. One in ten might have debts in excess of their annual income.

There might be a higher than usual proportion of people with health problems, including asthma and diabetes. Leisure interests include computer games, football, gambling, bingo and television. The tabloids are favoured reading. Many people are enduring hardship and for them, life is a struggle.

Not Private Households: Not Private Households are postcodes where the bulk of the residents are not living in private households. The category forms a single group, R - Not private households, which is sub-divided into three types;

Type 60: Active communal population. These people may be in communal establishments yet still consumers to some degree. This includes defence establishments, for example people living on military bases. Although military married quarters is generally not communal accommodation so it will be classified in one of the other Acorn types according to the characteristics of the residents. It

also includes hotels and other holiday accommodation. Generally this is accommodation that may be unoccupied for part of the year, or where the people living in the accommodation regularly change.

Other active communal accommodation might include hostels, children's homes, refuges and local authority accommodation for travellers.

Type 61: Inactive communal population. These people may be in communal establishments but unlikely to be active consumers. This includes care homes, hospitals, and other medical or nursing establishments where due to their health, the residents are unlikely to get out and about to function as regular consumers. It also includes prisons.

Type 62: Business addresses without resident population. These are postcodes where we believe there is no regular resident population. An example of this might be a business or industrial park with no residents.

Appendix 4: Accommodation options in Gloucestershire

Type of accommodation based provision type	Specialist domestic abuse accommodation	Other specialist accommodation	Provider /s	Commissioned by:	Client group	Specialist DA support	Level of support for DA	Other specialist support	Level of support (other)	Access pathways	Number of rooms/ units	notes on volume
Short-term/emergency												
B&B	no	no	Private landlords	Not commissioned – spot purchased by district councils	Private individuals and homeless clients Men, women and families. Residents may have a range of support needs or no support needs	No	n/a	no	n/a - just general support/s ervices associated with accommo dation	DA clients placed through statutory homeless services. Direct access for private individuals and other referring agencies	76	Capacity is greater than 76 as data missing on some premises
B&B	no	no	Private landlords	Not commissioned – spot purchased by district councils	Private individuals and homeless clients Women only Residents may have a range of support needs or no support needs	No	n/a	no	n/a - just general support/s ervices associated with accommo dation	DA clients placed through statutory homeless services. Direct access for private individuals and other referring agencies	5	

B&B	no	no	Private landlords	Commissioned or block purchased by district councils	Homeless clients Men, women and families . Residents may have a range of support needs or no support needs	No	n/a	no	n/a - just general support/s ervices associated with accommo dation	Statutory homeless pathway	12	
Rapid Rehousing Pathway	no	yes - rough sleepers	P3	Commissioned by the county council	Rough sleepers (or at risk of RS)- Men and women Likely to be entrenched support needs associated with homelessness /rough sleeping such as drug or alcohol misuse, mental health, domestic abuse, offending etc.	No	n/a - would refer to specialist DA services	yes	intensive housing related support plus mental health and drug and alcohol support workers	Referrals from Outreach Service; District Councils, Police, VCS, and Community based support services	flexible	Multiple sites. outside of C19 - dual occupancy of rooms and shared sit-up spaces
Temporary accommodation												
Refuge	yes	no	Stroud Beresford	n/a	women and women with children who are fleeing domestic abuse	Yes	high	yes	low - housing related support to move on	referral system	9	across two sites, accommodati on for 9 families including up to 22 children depending on ages

Places of Safety	yes	no	Greensquare/GDASS	District councils	people fleeing domestic abuse	Yes	high	yes	low - housing related support to move on	Via GDASS and district councils (both approaches needed)	12	11 currently in use (1 to be sourced)
Hostel type accommodation	no	yes - homelessness	GCH	Gloucester City Council	Homeless clients Men, women and families . Residents may have a range of support needs or no support needs	No	n/a - but staff would refer/sign post to specialist DA services	yes - housing related support	low	Statutory homeless pathway	23	across two buildings
Hostel type accommodation	no	yes - homelessness	GCH	Gloucester City Council	Homeless clients Men and women Residents may have a range of support needs or no support needs	No	n/a - but staff would refer/sign post to specialist DA services	Yes - housing related support from staff at another site	low	Statutory homeless pathway	5	
Hostel type accommodation	no	yes - homelessness	YMCA	Gloucester City Council	Homeless clients Men, women and families . Residents may have a range of support needs or no support needs	No	n/a - but staff would refer/sign post to specialist DA services	yes - housing related support	low	Statutory homeless pathway	49	
Hostel type accommodation	no	yes - homelessness	not known	Publica	Homeless clients Men and women Residents may have a range of support	No	n/a	n/k	n/k	Statutory homeless pathway	6	

					needs or no support needs							
Assessment Centre	no	yes - homelessness	P3	Gloucestershire County council	Homeless clients/rough sleepers Men and women Unknown support needs but may include mental health, drug and alcohol issues, offending, trauma, domestic abuse etc.	no	n/a - would refer to specialist DA services	housing related support	high - assessment of housing related support needs	START	14	rooms in two projects
Temporary accommodation (self-contained flats)	no	yes - homelessness		Publica	Homeless clients Men and women Residents may have a range of support needs or no support needs	No	n/a	n/k	n/k	Statutory homeless pathway	10	one site
Temporary accommodation (self-contained flats)	no	yes - homelessness	CBH	Cheltenham Borough Council	Homeless clients Men and women Residents may have a range of support needs or no support needs	No	n/a	n/k	n/k	Statutory homeless pathway		volume not known

Temporary accommodation (self-contained properties)	no	yes - homelessness	Tewkesbury Borough Council	n/a	Homeless clients Men and women Residents may have a range of support needs or no support needs	No	n/a - but staff would refer/sign post to specialist DA services	yes - housing related support from LA staff	low	Statutory homeless pathway	5	
Temporary accommodation (self-contained properties)	no	yes - homelessness	GCH	Gloucester City Council	Homeless clients Men and women Residents may have a range of support needs or no support needs	No	n/a - but staff would refer/sign post to specialist DA services	yes - housing related support from staff at another site	low	Statutory homeless pathway		volume not known
Temporary accommodation (self-contained properties)	no	yes - homelessness	Stroud District Council		Homeless clients Men and women Residents may have a range of support needs or no support needs	no	n/a - but staff would refer/sign post to specialist DA services	n/k	n/k	Statutory homeless pathway	3	
Move on or second stage accommodation												
Move on accommodation	yes	no	Greensquare	District councils	Homeless clients Men and women Residents may have a range of support needs or no support needs	yes	not yet known	not yet known	not yet known	District councils via allocation process		12 to come online across 20/21 - 21/22

Accommodation based support (18+)	no	yes - housing related support	Riverside	Gloucestershire County council	men and women ages 18+ with complex/chaotic support needs which could include homelessness /rough sleeping, trauma, drug or alcohol misuse, mental health, domestic abuse, offending	No	n/a - would refer to specialist DA services	housing related support	high housing related support + signposting/referrals to other specialist support services	START	70	across two properties including 16 self-contained flats
Accommodation based support (18+)	no	yes - housing related support	YMCA	Gloucestershire County council	men and women ages 18+ with complex/chaotic support needs which could include homelessness /rough sleeping, trauma, drug or alcohol misuse, mental health, domestic abuse, offending	No	n/a - would refer to specialist DA services	housing related support	high housing related support + signposting/referrals to other specialist support services	START	28	on one site - mixture of self-contained flats and shared cluster flats

Accommodation based support (18+)	no	yes - housing related support	Elim	Gloucestershire County council	men and women ages 18+ with complex/chaotic support needs which could include homelessness /rough sleeping, trauma, drug or alcohol misuse, mental health, domestic abuse, offending	No	n/a - would refer to specialist DA services	housing related support	high housing related support + signposting/referrals to other specialist support services	START	34	on one site - mixture of rooms, self-contained flats and shared cluster flats
Accommodation based support (18+)	no	yes - housing related support	Home Group	Gloucestershire County council	men and women ages 18+ with complex/chaotic support needs which could include homelessness /rough sleeping, trauma, drug or alcohol misuse, mental health, domestic abuse, offending	No	n/a - would refer to specialist DA services	housing related support	high housing related support + signposting/referrals to other specialist support services	START	58	multiple sites and geographic locations - mixture of rooms in projects, self-contained flats in projects and single self-contained flats

Mental health accommodation based support	no	yes - housing related support	Rethink	Gloucestershire County council	men and women ages 18+ with complex support needs which will include mental health but could include homelessness /rough sleeping, trauma, drug or alcohol misuse, domestic abuse, offending	No	n/a - would refer to specialist DA services	housing related support	high housing related support + signposting/referrals to other specialist support services	START	40	self-contained flats within projects across multiple geographic locations
Accommodation based support (16+)	no	yes - housing related support	CCP	Gloucestershire County council	young people ages 16- 24, men and women with limited/no experience of independent living with support needs which could include ACEs, mental health, offending, substance misuse, domestic abuse/unhealthy relationships, leaving care	No	n/a - would refer to specialist DA services	housing related support	high housing related support + signposting/referrals to other specialist support services	START	44	across three sites, mixture of rooms with shared facilities and self-contained flats within projects

Accommodation based support (16+)	no	yes - housing related support	Riverside	Gloucestershire County council	young people ages 16- 24, men and women with limited/no experience of independent living with support needs which could include ACEs, mental health, offending, substance misuse, domestic abuse/unhealthy relationships, leaving care	No	n/a - would refer to specialist DA services	housing related support	high housing related support + signposting/referrals to other specialist support services	START	11	rooms with shared facilities on one site
Accommodation based support (16+)	no	yes - housing related support	Home Group	Gloucestershire County council	young people ages 16- 24, men and women with limited/no experience of independent living with support needs which could include ACEs, mental health, offending, substance misuse, domestic abuse/unhealthy relationships, leaving care	No	n/a - would refer to specialist DA services	housing related support	high housing related support + signposting/referrals to other specialist support services	START	37	multiple sites and geographic locations - mixture of rooms in projects and self-contained flats in projects

Accommodation based support (16+)	no	yes - housing related support	YMCA	Gloucestershire County council	young people ages 16- 24, men and women with limited/no experience of independent living with support needs which could include ACEs, mental health, offending, substance misuse, domestic abuse/unhealthy relationships, leaving care	No	n/a - would refer to specialist DA services	housing related support	high housing related support + signposting/referrals to other specialist support services	START	7	rooms in a shared cluster
Accommodation based support (Young parents)	no	yes - housing related support	Rooftop	Gloucestershire County council	young people ages 16- 24, men and women with limited/no experience of independent living with support needs which could include ACEs, mental health, offending, substance misuse, domestic abuse/unhealthy relationships, leaving care	No	n/a - would refer to specialist DA services	housing related support	high housing related support + signposting/referrals to other specialist support services	START	42	multiple sites and geographic locations - mixture of rooms in projects and self-contained flats in projects

Accommodation based support (Young parents)	no	yes - housing related support	Home Group	Gloucestershire County council	young parents (men and women) with children or women in third trimester of pregnancy ages 16- 24, limited/no experience of independent living with support needs which could include ACEs, mental health, offending, substance misuse, domestic abuse/unhealthy relationships, leaving care	No	n/a - would refer to specialist DA services	housing related support	high housing related support + signposting/referrals to other specialist support services	START	7	self-contained flats within one project
Accommodation based support (Young parents)	no	yes - housing related support	Elim	Gloucestershire County council	young parents (men and women) with children or women in third trimester of pregnancy ages 16- 24, limited/no experience of independent living with support needs which could include ACEs, mental health, offending,	No	n/a - would refer to specialist DA services	housing related support	high housing related support + signposting/referrals to other specialist support services	START	12	mixed of self-contained flats on one site and dispersed self-contained properties

					substance misuse, domestic abuse/unhealthy relationships, leaving care							
social housing	no	no	registered providers	n/a	mixed - anyone 18+ qualifying for an offer of social housing and their households. Would have had a housing need but not necessarily any support needs. May include victims and survivors of domestic abuse either experiencing abuse in the property or having moved on from above services	no	no	tenancy related support	low - but signposting or referrals to CBS or specialist support	Homeseecker plus or Homewapper	1000+	total volume not known due to number of providers across multiple districts

Appendix 5: Map Key

MapKey	Police Community Area
1	Hucclecote, Abbey, and Upton St. Leonards
2	Barnwood
3	Barton and Tredworth
4	Berkeley
5	Bishops Cleeve
6	Bourton-on-the-Water
7	Charlton Kings
8	Cheltenham Town Centre
9	Chipping Campden
10	Golden Vale
11	Cinderford
12	Cirencester Rural North
13	Cirencester Rural South
14	Cirencester Urban
15	Coleford
16	Coombe Hill
17	Dursley and Cam
18	Fairford and Lechlade
19	Fairview
20	Springbank and Fiddlers Green
21	Sevenside
22	Gloucester City Centre
23	Benhall and Hatherley
24	Hempsted
25	Hesters Way
26	Kingsholm and Wotton
27	Lansdown
28	Leckhampton

MapKey	Police Community Area
29	Linden
30	Longlevens and Elmbridge
31	Lydney
32	Severn Banks
33	Matson and Robinswood
34	Moreton-in-Marsh
35	Nailsworth
36	Newent
37	St. Pauls and Pittville
38	Podsmead
39	Prestbury
40	Quedgeley
41	Tidenham and Sedbury
42	Glevum West
43	St. Marks
44	Stonehouse
45	Stow-on-the-Wold
46	Stroud Rural
47	Stroud Urban
48	Swindon Village and Wymans Brook
49	Tetbury
50	Tewkesbury
51	Tivoli
52	Tuffley and Grange
53	Whaddon, Lynworth, and Oakley
54	Winchcombe
55	Wooton-under-Edge