Domestic Abuse Strategy
November 2016-2019

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Contents

Introduction to the Domestic Abuse Strategy .................................................................................. 3
   Our vision: ................................................................................................................................. 3
   Anticipated Outcomes: .......................................................................................................... 3
   Strategic Priorities: ................................................................................................................ 4
   Definition of Domestic Abuse .................................................................................................. 4

The Context in which this strategy sits .......................................................................................... 5
   The current picture of domestic abuse prevalence in North Somerset .................................... 5
   North Somerset Population Demographic Information ......................................................... 5

Strategic links .................................................................................................................................. 10
   The local agenda .................................................................................................................... 10
   The national agenda: ............................................................................................................. 11

Governance and Partnership Work ............................................................................................... 11

Domestic Abuse Services in North Somerset ................................................................................. 12

Strategy Priorities in Year 1 ........................................................................................................... 14

Strategy implementation ................................................................................................................. 18
With thanks to Hammersmith & Fulham, The Royal Borough of Kensington & Chelsea and City of Westminster who produced *Shared Services Violence Against Women and Girls Strategy 2015-16*, which identified the priorities which we have adopted as a framework for this strategy.
Introduction to the Domestic Abuse Strategy

This strategy sets out the domestic abuse priorities in North Somerset and how partners aim to address them.

Domestic abuse has a negative impact on people who experience it; they may suffer many ill effects including injuries, fear and low self-esteem and it is the leading cause of ill health for women of childbearing age, having a particularly adverse impact upon mental health.¹

Sadly, domestic abuse can also have a significant impact upon the well-being of children who live with it. They may be directly affected, for example, by being injured whilst getting in the way of an assault or having to move to a refuge and they may also suffer indirect effects such as becoming isolated through not being allowed to have friends to visit, becoming confused and upset by the need to keep secrets and being frightened of being hurt or of what may happen to their non-abusive parent.² The impact upon a child of living with domestic abuse may continue into adulthood and consequently, without the right support, they have a greater risk of developing substance misuse issues, having a juvenile pregnancy and engaging in criminal behaviour³.

Therefore failing to address the issue of domestic abuse in North Somerset would mean leaving many families in the district to suffer from its ill effects and would also have a lasting social and financial impact on the community.

Our vision:

We want to develop a society in which all agencies, governances and institutions work together to prevent domestic abuse and stand beside adults and children affected by it in order to help them rebuild their lives.

Anticipated Outcomes:

- Adults and children affected by domestic abuse are helped and protected
- Adults and children affected by domestic abuse have improved health and well-being
- Adults and children affected by domestic abuse have improved personal resilience
- Perpetrators of domestic abuse are challenged and supported to change their abusive behaviour

² https://www.unicef.org/media/files/BehindClosedDoors.pdf
**Strategic Priorities:**

1. Access
2. Response
3. Community
4. Practitioners
5. Children and Young People
6. Perpetrators
7. Justice and Protection

**Definition of Domestic Abuse**

Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass, but is not limited to, the following types of abuse:

- psychological
- physical
- sexual
- financial
- emotional

Controlling behaviour is: a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

Coercive behaviour is: an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim."

This definition, which is not a legal definition, includes so called 'honour' based violence, female genital mutilation (FGM) and forced marriage, and is clear that victims are not confined to one gender or ethnic group.

Home Office 2013
The Context in which this strategy sits

Domestic abuse prevalence in North Somerset

There has been a significant increase in numbers of reports of domestic abuse to the police and support services which has coincided with activities to increase domestic abuse awareness carried out by the Avon and Somerset Police and Crime Commissioner and the North Somerset Partnership. To illustrate, from 2014-2016 the specialist domestic abuse outreach service saw a doubling of its referral rate from 119 to 238 cases and the IDVA service experienced a 49% increase in the same period (from 244 to 364 cases).

Despite this success, still more needs to be done – we calculate that 6,732 adults experience domestic abuse in the district each year\(^4\) but in fact just under 3,000 incidents are reported to the police.

Geographical occurrence of domestic abuse reported to the police:

In 2014/15 and 2015/16 the highest proportion of police occurrences flagged with domestic abuse were in Weston-super-Mare South, Central and Hillside wards. Approximately one third of all occurrences recorded in North Somerset happen in these three wards however only around 13.6% of the North Somerset population live in these three wards. This demonstrates that domestic abuse affects many families in these areas although the relative reporting rate comparative to other wards, may also reflect a greater willingness to call for a police intervention in an abusive relationship, greater agency involvement with families enabling third party reporting and encouraging victims to contact the police and/or greater unwillingness in relatively more affluent areas to involve the police.

Map 1 below shows all recorded occurrences in 2014/15 to 2015/16 that were flagged with domestic abuse. This includes crimes, no crimes, non-recordable and unscreened occurrences. Mapped data (not shown) looking at crimes only produced a very similar image with the highest number of crimes recorded in and around Weston-super-Mare followed by Portishead East, Portishead West and Yatton.

North Somerset Population Demographic Information

Population as a whole mid-year estimates from the Office of National Statistics (2015) give the population of North Somerset as 209,944 people. Of these just over half, 107,752 were female and 102,192 were male. This is a similar split to that seen nationally.

\(^4\) Based on our adult population and reports of domestic abuse experiences to successive Crime Surveys of England and Wales
Compared to the National Census\(^5\), undertaken in March 2011, North Somerset has seen a population increase. Between 2011 and 2015 estimates suggest an increase of 6,853 people. This population rise is attributed mainly to a combination of births and internal migration from elsewhere within the UK. Estimates suggest the North Somerset population will continue to rise over the next two decades, reaching 253,120 people by 2039.

**Age profile**

The age profile of the population differs slightly from the national average. North Somerset has less residents in all five year banded age groups below 44 years but more in all five year banded age groups over 45 years. On the whole, North Somerset has an increasingly ageing population with a median age of 45 years compared to a national figure of 40 years\(^6\).

Population projections suggest that by 2039 21% of the North Somerset population will be young people aged below 19 years and 30% will be people aged over 65 years. It is predicted that the elderly population will grow at a faster rate than the younger population.

The projected under 19 population percentage of North Somerset in 2039 is similar to that of the national population (21.4% compared to 22.6%).

However the projected over 65 population is significantly higher than that projected nationally (31% compared to 24%), though it should be noted that the over 65 population is growing both nationally and locally.

**Population density**


\(^6\) ONS Population Analysis Tool mid – 2015 ‘Note that the pyramid contains data for ages 0-89 inclusive. Age 90 comprises data for ages 90 and above and is omitted from this chart’.
154,000 residents live within towns in North Somerset, with the remaining 54,000 spread across rural areas. The rural area of North Somerset is three times the size of the towns and has 2 people per hectare, compared to 16 within a town. Portishead is the most densely populated area, with Portishead East ward recording 52 people per hectare. It is also the smallest town, with an area of 899 hectares. Wards recording 50 people or more per hectare include Weston-super-Mare Central, Mid and North Worle and Clevedon South.

It is anticipated that there will be another 8,327 new homes built in North Somerset over the next five years, of which 3,061 are expected to be in the Weston-super-Mare villages. This will impact on potential services, particularly in already densely populated areas.

Deprivation

Deprivation in North Somerset can be measured through a number of indicators, but the principal estimate is the Index of Multiple Deprivation (IMD). The IMD is a Lower Layer Super Output Area (LSOA) measure of deprivation covering the population of England. It is based on the premise that multiple deprivation is made up of the following separate dimensions, or domains of deprivation, each of which is weighted as follows:

- income deprivation (22.5%)
- employment deprivation (22.5%)
- health deprivation and disability (13.5%)
- education, skills and training deprivation (13.5%)
- barriers to housing and services (9.3%)

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8 Lower Layer Super Output Areas are relatively small areas, each with an average population of 1,500 residents, and enable comparison of like-sized areas across the country. In England there were 32,844 LSOAs compared to around 7,669 wards.
- crime (9.3%)
- living environment deprivation (9.3%)

North Somerset overall has relatively low deprivation, with almost three quarters of LSOAs less deprived than average. However, population estimates show that over 27,100 North Somerset residents live in one of the 25% most deprived LSOAs in England, including over 4,770 children aged between 0-15 years. This will create additional barriers to escaping domestic abuse in these areas.

There are clear geographical differences in terms of deprivation within North Somerset.

The map below shows areas within North Somerset that have high relative deprivation as shaded darkly. These are predominantly in Weston-super-Mare, although there are also areas of deprivation in Pill, Banwell and parts of central Clevedon.

**Deprivation in North Somerset LSOAs relative to all English LSOAs**

![Deprivation Map](image)

**Ethnicity**

Over 97% of North Somerset residents answered that their ethnic group was white in the 2011 census; this is a larger proportion than that for the South West and England (95% and 85% respectively). By ward, the black and ethnic minority population (BME) in North Somerset varied between 1.1% of residents in Clevedon Walton and 8.1% in Weston-super-Mare Central.

Domestic abuse affects women from all ethnic groups, and there is no evidence to suggest that women from some ethnic or cultural communities are any more at risk than others. However, the form the abuse takes may vary; in some communities, for example, domestic abuse may be perpetrated by extended family members, or it may include forced marriage or so called Honour Based Violence. Whatever their
experiences, women from minority ethnic communities are likely to face additional barriers to receiving the help that they need.

**Sexual Orientation**

There is limited information on sexuality at a local level; however UK figures are available. In the 2014 Integrated Household Survey from the Office for National Statistics (ONS), a question on sexual identity was included; this survey had around 325,000 respondents from across the UK aged 16 years and over.

By gender across the UK, 1.5% of males answered that they were gay and 0.3% of males answered that they were bisexual. Amongst females, 0.7% of respondents answered that they were gay/lesbian and 0.7% answered that they were bisexual. Regional figures for the South West are similar to those for the UK.

*Self-perceived sexual identity by age for the UK, including estimates for the North Somerset population*

<table>
<thead>
<tr>
<th>Age group</th>
<th>UK proportion answering gay, lesbian or bisexual</th>
<th>Estimated number of people in North Somerset</th>
</tr>
</thead>
<tbody>
<tr>
<td>16-24</td>
<td>2.6%</td>
<td>484</td>
</tr>
<tr>
<td>25-34</td>
<td>2.2%</td>
<td>476</td>
</tr>
<tr>
<td>35-49</td>
<td>1.7%</td>
<td>703</td>
</tr>
<tr>
<td>50-64</td>
<td>1.3%</td>
<td>541</td>
</tr>
<tr>
<td>65+</td>
<td>0.6%</td>
<td>293</td>
</tr>
<tr>
<td><strong>Total 16+</strong></td>
<td><strong>2497</strong></td>
<td><strong>2497</strong></td>
</tr>
</tbody>
</table>

Research studies indicate that domestic abuse rates are similar regardless of sexuality. However, people in same sex relationships may face additional barriers to asking for help.
Strategic links

The local agenda

Domestic abuse has an impact on many aspects of our communities’ lives and so it can be linked to strategies across North Somerset. The strategies are reviewed and updated on a regular basis with domestic abuse remaining a key element in all:

1. **North Somerset Sustainable Community Strategy 2008-2026**

   “Challenges for North Somerset include: Reducing incidents of domestic violence and victimisation rates by addressing perpetrators’ behaviour and providing more support to those who have survived domestic abuse.”

2. **North Somerset Public Health Strategy, 2013-15** (currently being reviewed and updated with domestic abuse a key aspect)

   **Mission statement:**
   
   To improve and protect the health and well-being of all individuals in North Somerset with a focus on those with poorest health, in order to:
   
   - Increase the quality of healthy life expectancy
   - Reduce differences in life expectancy and healthy life expectancy between communities

   **Improving the wider determinants of health:**
   
   Aim: Improvements against wider factors that affect health and wellbeing, and health inequalities:
   
   Actions include
   
   - Reducing health inequalities
   - Reducing domestic violence
   - Improve child health and increasing children’s life chances
   - Housing

3. **North Somerset People and Communities Strategy, 2013-16** (the new strategy is being considered by the People and Communities Board in January 2017)

   Making our streets and communities safer is one of 6 intended outcomes. Domestic abuse is one of the 4 community safety priorities under this objective.

4. **North Somerset Joint Commissioning Group: Crime, Drugs and Alcohol Commissioning, Strategy** (reviewed annually)

   **Domestic abuse section:**
   
   - Secure funding to continue the delivery of domestic abuse services
   - Collect and analyse information and data to best inform domestic abuse service development
   - Support and further develop sustainable service user involvement
- Improve responses to perpetrators
- Ensure that support for children affected by domestic abuse is part of the wider agenda
- Support, continue and extend the IRIS GP practices project
- Ensure that domestic abuse and alcohol and substance misuse support is co-ordinated

For up to date information on current strategies contact community@n-somerset.gov.uk

**The national agenda:**

The government has published its *Strategy for Ending Violence Against Women and Girls 2016-2020* in March 2016. This will be followed by a National Statement of Expectations (NSE) which will set out what the government expects from commissioners and service providers.

**Governance and Partnership Work**

This strategy is being implemented by the multi-agency Domestic Abuse Strategy Group which is accountable to the Safeguarding Boards and North Somerset People and Communities Board (the joint Community Safety Partnership and Health and Well-being Board). The DASG will report regularly upon progress to the safeguarding boards.
## Domestic Abuse Services in North Somerset

North Somerset has a range of specialist domestic abuse services

<table>
<thead>
<tr>
<th>Service</th>
<th>What is provided:</th>
<th>Criteria for support provision</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Local specialist services: commissioned</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Refuge</strong></td>
<td>Shared accommodation refuge – provides a safe space for those fleeing domestic abuse. Includes support for children</td>
<td>Available to male and female victims and their children from anywhere in the UK. Referrals are assessed for suitability on an individual basis.</td>
</tr>
<tr>
<td><strong>Floating support</strong></td>
<td>One to one practical and emotional support intended to reduce risk and vulnerability to repeat victimisation, homelessness and the need for additional services such as social care involvement.</td>
<td>Male and female victims living in North Somerset at low to medium risk of domestic abuse with a housing related issue.</td>
</tr>
<tr>
<td><strong>Independent Domestic Violence Advisers (IDVAs)</strong></td>
<td>One to one intensive practical and emotional support aimed at reducing the risk of the highest risk victims</td>
<td>High risk victims in North Somerset</td>
</tr>
<tr>
<td><strong>Multi Agency Risk Assessment Conferences (MARAC)</strong></td>
<td>Monthly multi-agency meetings to discuss high risk cases (or twice monthly when necessary)</td>
<td>High risk adult victims</td>
</tr>
<tr>
<td><strong>Specialist Domestic Violence Court (SDVC)</strong></td>
<td>The magistrates’ course hears all DA cases on the same day (Thursday,) enabling IDVA attendance and trained magistrates</td>
<td>Cases going through the Criminal Justice System</td>
</tr>
</tbody>
</table>
| **Pattern Changing Courses** | Key to Change – helps survivors move on from their experiences and reduces their vulnerability to repeat victimisation  
My Kids and Me – helps mothers to rebuild healthy relationships with their children  
Breaking the Chains – helps women living with domestic abuse to make plans to improve their safety | Women survivors |
<p>| <strong>Delivering Differently in Neighbourhoods</strong> | New Beginnings Drop-ins to help reduce isolation of survivors to reduce their vulnerability to repeat victimisation and use of specialist services | Women survivors |</p>
<table>
<thead>
<tr>
<th>Service</th>
<th>What is provided:</th>
<th>Criteria for support provision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substance Misuse Project</td>
<td>Spaces in Western Counselling Specialist alcohol and drugs rehabilitation Centre</td>
<td>Male and female victims unable to stay in the refuge due to problematic behaviour</td>
</tr>
<tr>
<td>The IRIS Project</td>
<td>Domestic abuse training for GP practices and advocacy for patients reporting domestic abuse</td>
<td>Male and female victims who are patients at 50% of GP surgeries in North Somerset</td>
</tr>
<tr>
<td>Young people’s worker</td>
<td>Healthy relationships training for schools</td>
<td>All secondary schools</td>
</tr>
<tr>
<td><strong>Local specialist services: voluntary and charitable sector</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The Reclaim Project</td>
<td>Free counselling</td>
<td>Male and female victims</td>
</tr>
<tr>
<td>The Mankind Initiative</td>
<td>Drop-ins in Bridgwater</td>
<td>Male victims</td>
</tr>
<tr>
<td><strong>Information</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DAFFS line</td>
<td>Helpline 9am-6pm weekdays</td>
<td>Male and female victims in North Somerset</td>
</tr>
<tr>
<td>WAFE/Refuge helpline</td>
<td>24 hour helpline</td>
<td>Any female victim in the UK</td>
</tr>
<tr>
<td>Mankind Initiative helpline</td>
<td>National helpline – 10am - 4pm weekdays</td>
<td>Any male victim in the UK</td>
</tr>
<tr>
<td>Male helpline</td>
<td>National helpline 10am-5pm</td>
<td>Any male victim in the UK</td>
</tr>
<tr>
<td>Domestic abuse literature</td>
<td>Leaflets aimed at victims, handbooks aimed at workers Survivors' handbook aimed at survivors</td>
<td>All male and female victims in North Somerset</td>
</tr>
<tr>
<td>Building Better Relationships</td>
<td>Course for perpetrators to enable them to change their abusive behaviour</td>
<td>Male perpetrators convicted of domestic abuse related offences, ordered onto the course by a court</td>
</tr>
</tbody>
</table>

Evaluation from people using the services and from partner agencies is largely positive and there is a real local commitment to continuing and expanding domestic abuse support services, however, the funding for most of these is short-term. In addition, the current increase in referrals although welcome, is putting additional pressure on already overstretched services and a continued increase will inevitably add to this.
Strategy Priorities

This strategy will work towards meeting the objectives listed below against our stated priorities. This document outlines the objectives and some specific identified actions which will be carried out to deliver them. A full list of actions with timescales and involved agencies is available from community@n-somerset.gov.uk

Priority 1: Access

We want to ensure that adults and children affected by domestic abuse are able to access appropriate support when it is first needed. They need to know what help is available and where to get it and they should feel confident enough to ask for support and be able to trust that it will be both appropriate to their needs and sensitively provided.

Objectives

Information on domestic abuse services is widely available across the district so that people recognise the signs of domestic abuse and know where to get help. People know what to expect from services and are confident that they will be helpful.

Risks to families living with domestic abuse are prevented and reduced though meeting the needs of the child, their non-abusive parent and the perpetrator at an early stage through timely access to effective help.

Actions:
- Annual awareness campaigns, including initiatives aimed at the LGBT and BME communities and other groups who face barriers in accessing services.
- Continued development and dissemination of information on support services using a range of means
- Information on what to expect from support services and reassurance that the support will be sensitive
- All staff are made aware of how to access the Early Help offer for domestic abuse
- NQSWs to meet with Gemini staff as part of their induction and to receive training and information on support processes
- Health based initiatives such as The IRIS Project are continued and developed in order to maximise the opportunities for domestic abuse to be identified through health services

Priority 2: Response

We are committed to continuation and development of existing good practice services as well as innovative responses appropriate to identified needs and opportunities alongside a framework for performance monitoring and management.

Objectives:

The LSCB actively monitors, promotes, co-ordinates and evaluates the work of the statutory partners that help and protect adults and children at risk of domestic abuse,
including working effectively with other multi-agency groups that have responsibility for responding to domestic abuse

Leaders and managers recognise the challenges in working with domestic abuse and provide appropriate support, training and challenge to practitioners so that effective practice can flourish

Multi agency data is collected against agreed indicators and used to monitor outcomes for all adults and children affected by domestic abuse (victims and perpetrators) and to inform commissioners

Support is provided which addresses the complexity of the lives of many families affected by domestic abuse, in particular the needs of those who also have mental health and/or substance misuse/alcohol issues

Support development of reflective practice in supervision

Develop emotional resilience of workforce

Funding is secured to continue and expand domestic abuse services

Actions:

- New bespoke training to be designed which incorporates survivors’ stories with a focus on the impact of adult behaviour on the child.
- Funding bids and the business case for domestic abuse services are updated utilising partnership data
- Funding bids and resource allocations reflect the funding needs for domestic abuse services, including those aimed at people with complex needs
- The LSCB dataset includes information on the numbers of children experiencing domestic abuse at each level of the continuum of need, supporting the LSCB to understand the prevalence of all children in receipt of services around domestic abuse
- The voices of survivors of domestic abuse are listened to and, they are enabled to provide and seek informal support from peers and other members of the community where they so wish
- Commissioning plans address children’s needs for early help arising from parental substance misuse, mental ill health and domestic abuse

Priority 3: Community

We want North Somerset to be a place where domestic abuse is not tolerated. We want all people living and working in the area to have an understanding of domestic abuse so that they know how to recognise when it might be happening and how to help anyone experiencing it.

Objectives:

The council and partner agencies lead the way in giving out a clear message that domestic abuse is not acceptable within our community.
Awareness campaigns which enable communities to identify and challenge domestic abuse and which support people who need help

**Actions:**
- Annual awareness campaigns aimed at the community using a range of media and which target identified communities
- Focussed work in specific neighbourhoods to increase awareness of domestic abuse and reduce toleration of it

**Priority 4: Practitioners**
We will aim to ensure that all workers in the district who may come across anyone experiencing domestic abuse can identify this and know how to respond

**Objectives:**
Staff are well trained, confident and knowledgeable so that they understand the impact of domestic abuse and what support is needed. This will enable them to identify how to help and protect adults and children affected by domestic abuse and to take action to do so

**Actions:**
- New bespoke training to be designed which incorporates survivors’ stories with a focus on the impact of adult behaviour on the child
- Lunch and Learn and briefing sessions on Domestic Abuse
- Bespoke regular training to be delivered on domestic abuse awareness and responding to domestic abuse for key staff groups

**Priority 5: Children and Young People**
We are committed to providing support for children and young people who have been affected by domestic abuse within their families.

We want all children and young people to grow up to have a good understanding of what a healthy relationship is and an expectation that their own relationships will be healthy

**Objectives:**
Professionals and support staff see incidents of domestic abuse through the eyes of the child so that children who live with domestic abuse experience a child-centred approach from all professionals and the risks to them and their needs are assessed effectively and responded to appropriately.

Children living with domestic abuse receive the right help and protection and that the application of appropriate thresholds, effective information sharing and timely intervention take place. (This includes thresholds for early help, children in need, child protection processes, children becoming looked after and MARAC)

Risk of harm to children is reduced through the identification and assessment of the risks that perpetrators and adult offenders post. This leads to appropriate and targeted interventions by all professionals
Young people are given information and guidance on healthy relationships in order to help them avoid abuse within their current and future relationships.

Leaders and managers understand the experiences of children living with domestic abuse and the prevalence of this issue in their area. This leads to effective action to meet children’s needs and improve the help and support provided to children and their families.

**Actions:**

- Police to report incidents to Children’s Social Care within 24 hours of their attendance at a domestic abuse incident
- Introduction of One Front Door Pilot, in 2017, supported by Safelives to improve multi-agency working and early intervention for families where there is domestic abuse
- Development of a pilot to improve parents’ awareness of schools’ role in supporting children affected by domestic abuse
- Health and Social Care use recording template which prompts to ask for child’s voice
- Agency partners understand the benefits of using the Early Help module
- All staff are aware of how to access the Early Help offer for Domestic Abuse
- NQSW’s to meet with Gemini Services as part of their induction
- Good practice initiatives such as therapeutic groups for children, Operation Encompass and Caring Dads are identified and developed as appropriate
- There is appropriate Children’s Services participation and attendance at MARACs
- “Sarah’s journey” is developed and disseminated to staff and families—providing information on the support and issues at each stage of a family’s experiences of domestic abuse
- Re-writing of CPS and ICPC child’s experience
- Breaking the cycle for those new parents who have experienced DVA in their childhood, parenting support from Children’s Centres should target parents with low self-esteem and educate on positive relationships rather than badge support under DA
- Continue the Healthy Relationships project in schools

**Priority 6: Perpetrators**

We will ensure that there are improvements in our ways of working with perpetrators of domestic abuse to manage and/or change their offending behaviour.

**Objectives:**

Practitioners can identify domestic abuse and have the skills to challenge perpetrators’ behaviour and support those affected, ensuring that survivors are aware that they are not held responsible for the abuse.
Perpetrators of domestic abuse are offered support to change their behaviour and offending behaviour is challenged and managed.

**Actions:**
- Training and support to be provided to practitioners including social workers and IMPACT officers so that they can work safely to challenge offending behaviour with couples and families where domestic abuse is occurring, including when it has not been possible to identify a primary perpetrator.
- Innovative responses to working with perpetrators will be developed and funding sought to pilot initiatives.

**Priority 7: Justice and Protection**

We need to ensure that agencies involved in the Criminal Justice System work effectively together to deliver justice and protection for families affected by domestic abuse.

**Objectives:**
Those affected by domestic abuse have confidence that the criminal justice agencies are effective in protecting them and their families and that specialist support will help them access justice.

**Actions:**
- The Police force ensures that cases of domestic abuse are investigated effectively and ensures that families are supported by the most appropriate agency to keep them safe.

**Strategy implementation**

The above actions arising from this strategy are set out in the North Somerset Domestic Abuse Strategy Action Plan 2016-19 available from community@n-somerset.gov.uk

The work will be delivered and monitored by the multi-agency Domestic Abuse Strategy Group (DASG) which is accountable to the People and Communities Board (PCB).

The DASG will report annually on progress to the PCB and safeguarding boards who own this strategy.

**Contact for updates or more information on this strategy:**
community@n-somerset.gov.uk or louise.branch@n-somerset.gov.uk