



HOME OFFICE FULL EQUALITY IMPACT ASSESSMENT

Directorate	Crime and Policing Group
Unit	Violent and Youth Crime Prevention Unit
Date	30.03.2011

Name of Policy
Section 9 of the Domestic Violence, Crime and Victims Act 2004. Implementation will create an expectation for local areas to undertake a multi-agency review following a domestic violence homicide. The provision allows the Secretary of State, in particular cases (e.g. when a local area fails to initiate a review itself) to direct that a specified person or body establishes or participates in a review. Section 9 also introduces a duty for every person or body establishing or participating in the review to have regard to statutory guidance.

What are the aims, objectives & projected outcomes?
<p>Tackling domestic violence is a priority for this government and as part of the strategic narrative <i>Call to End Violence Against Women and Girls</i> and the supporting Action Plan published on 8th March 2011, we committed to implementing this provision by April 2011. This provision is closely aligned with our focus on 'prevention' which is at the heart of our approach to tackling violence against women and girls:</p> <ul style="list-style-type: none">• <u>prevent</u> such violence from happening by challenging the attitudes and behaviours which foster it and intervening early where possible to prevent it <p>In 2009/10, 21 men and 94 women were killed by a partner, ex-partner or lover. Domestic violence and domestic homicide affects all communities and transcends age, gender, race, sexuality and social status. The dynamics of such abuse mean that it is often frequently repeated by the perpetrator and the violence can escalate over time. A domestically violent incident which results in the death of the victim is often not a first attack. Many people and agencies may have known of such incidents – for example, neighbours may have heard or reported a dispute, a GP may have examined injuries, housing organisations may have been called repeatedly for repairs to homes, the police may have been called, there may have been previous prosecutions or injunctions, and so on. This can sometimes make serious injury and homicide in domestic violence cases preventable with early intervention.</p>

Implementation of domestic homicide reviews (DHRs) will allow local areas to work together following a domestic homicide 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 policies and procedures as appropriate; and
- Prevent domestic homicide and improve service responses for all domestic violence victims and their children.

The Home Office has been working closely with ACPO and other statutory and voluntary agencies to develop a robust and affordable process for implementing Section 9 which is fit for purpose and ensures local areas can learn from such tragedies. Implementation will be supported with statutory guidance, an e-learning training package, information leaflets for friends and family members of the victim, and the development of an expert group (Quality Assurance Group) managed by the Home Office which will be responsible for the quality assurance of reviews and national dissemination of effective practice and learning. The final statutory guidance, e-learning training package and leaflets will be available to download from 31st March 2011 at www.homeoffice.gov.uk.

DHRs have been designed to complement the process used in serious case reviews (SCR) which take place when a child dies or is seriously injured. Most agencies are already familiar with the format of SCRs so using a similar structure for DHR's not only provides consistency and more aligned processes but has the added benefit of ease of implementation.

It should be noted that when victims of domestic homicide are aged between 16 and 18, a SCR should take precedent over a DHR. However, it is vital that any elements of domestic violence relating to the homicide are addressed fully and the review includes representatives with a thorough understanding of domestic violence.

Local agencies will need to consider whether there is an overlap with other review processes i.e. an existing or proposed SCR or Mental Health Investigation (MHI). This may arise particularly in cases involving a victim between the ages of 16-18 as highlighted above. In general agencies should avoid duplicating reviews of the same case, unless it is felt that there are further issues that need to be considered in a second review. Agencies are free to combine reviews into a single process and final report. If there are combined reviews, the terms of reference should make it clear that both procedures are fully addressed and specific actions included. Local agencies will need to decide which review process will best suit the circumstances of the case.

Reviews will vary in their breadth and complexity, but in all cases lessons should be learned and acted upon as quickly as possible. A decision on whether to hold a review or not should be taken within one month of a case

coming to the attention of the CSP. The terms of reference for the review will also need to be drawn up and agreed within this time.

Reviews should be completed, where possible, within six months of commencement. This may not involve six whole months of actual work on the review, for example it may be structured as fifteen/twenty days work spread over this period of time.

Once a domestic homicide review has taken place the review body should produce a concluding report that brings together and analyses the findings of the various review reports from agencies and individuals involved in the review. They then need to make recommendations for future action. This is arguably the most important aspect of the process in that the outcomes of the review should lead to actions. The action plan should set out who will do what, by when and with what intended outcome.

1 SCOPE OF THE EIA

1.1 Scope of the EIA work

Extensive consultation was undertaken in June 2006 when the initial Guidance for Domestic Homicides Reviews under Domestic Violence, Crime and Victims Act 2004 was published. This set out a draft procedure for the DHR's and a significant number of internal and external stakeholders were invited to comment. The Consultation included requesting feedback on equality issues/concerns that may have needed highlighting. It should be noted that the guidance document was sent to a number of (diversity) staff networks and associations within the Home Office, however, they did not comment.

While some of the points raised from consultation concern specific areas in terms of equality issues (e.g. race, religion, gender etc) many of the responses can be applied to all of the diversity strands. As such general themes will be discussed with focus on specific areas at the end.

Following the extensive consultation in June 2006, Interim Guidance for conducting informal DHRs was published in the public domain in March 2010. The aim of this document was to assist agencies wishing to carry out voluntary DHRs to improve their local practices and policies. The Interim Guidance was disseminated widely and requested comments and feedback between March 2010 and March 2011, which has been incorporated into the Statutory Guidance.

A mechanism for the effective monitoring of reviews needs to be in place to ensure there has been no detrimental impact on any particular groups and that decision making processes are transparent.

Where possible (and appropriate) the Quality Assurance Group will request feedback following the completion of a review to determine how individuals felt

about the process and their involvement with it. Outcomes of the reviews will also be monitored by this group. This will consist of monitoring by ethnicity, disability, sexual orientation etc in order to ensure that different groups are not experiencing differential outcomes.

One of the most important aspects of monitoring will be in terms of the progress on actions and recommendations made. The Quality Assurance Group must ensure actions are followed up. Failure to do so could have a detrimental effect on public trust and confidence in the review process and individuals may be reluctant to participate in the future.

1.2 Will there be a procurement exercise?

No. The guidance for this provision has been produced internally in consultation with statutory and voluntary organisations working on domestic violence and homicide.

2 COLLECTING DATA

2.1 What relevant quantitative and qualitative data do you have?

<p>Race</p>	<p>(¹&² relevant to all information below)</p> <p>Victims of domestic violence from a black, minority-ethnic (BME) background may find it more difficult to leave an abusive situation due to cultural beliefs or a lack of appropriate services.</p> <p>Forced marriages, female genital mutilation (FGM) and so called ‘honour’-based violence (HBV) are more likely to be prevalent in (although are not limited to) certain communities, including BME communities, although the data we have on these crimes is limited.</p> <p>Careful consideration must be given to individuals selected for the review process to provide specialist cultural knowledge, as there may be issues of confidentiality with regards to using individuals from local communities.</p>
--------------------	---

¹ Women’s National Commission (2007) *Still We Rise* http://www.thewnc.org.uk/publications/doc_details/418-still-we-rise-wnc-focus-groups-report-november-2009.html

² Smith, K. et al. (2011) Homicides, Firearm Offences and Intimate Violence 2009/10. Home Office Statistical Bulletin 01/11. London: Home Office

<p>Religion/ belief & non belief</p>	<p>As outlined above, domestic violence and homicide cuts across geographical, religious, ethnic and national boundaries. Certain types of violence do disproportionately impact women from some communities, and these have been listed and outlined above under Race.</p>
<p>Disability</p>	<p>People with a long-term illness or disability are more likely to be a victim of domestic abuse and stalking than people without. It should be noted that this does not imply causation and these findings should be treated as indicative rather than conclusive.</p> <p>Further research indicates that disabled women or those with mental health problems are at a higher risk of victimisation. Disabled women may be around twice as likely to be assaulted or raped, and more than half of all women with a disability may have experienced some form of domestic violence in their lifetime. In addition, at least half of all women in touch with mental health services have experienced violence and abuse, yet the level of awareness amongst mental health professionals can be low and women are rarely asked about their experience of violence.</p>
<p>Gender</p>	<p>Women are more likely than men to have experienced intimate violence across all the different types of abuse. Since the age of 16, 29% of women have experienced domestic abuse. The equivalent figure for men is 16%.</p> <p>The vast majority of the incidents of domestic abuse, are perpetrated by men on women. This is in contrast to findings on overall crime victimisation where men, particularly young men, were more likely to have experienced violent crime.</p> <p>In 2008/09, a greater proportion of female victims (53%) than male victims (7%) were killed by their partner, ex-partner or lover. Females accounted for 77 per cent of all partner, ex-partner homicide victims in 2008/09.</p> <p>Latest published figures show that just over half of female victims of homicide aged 16 or over had been killed by their partner, ex-partner or lover (54%, 94 offences), a slightly lower proportion than in 2008/09 (58%, 100 offences). In contrast, only five per cent of male victims aged 16 or over were killed by their partner, ex-partner or lover in 2009/10.</p>

Gender Identity	<p>The report from focus groups run by the Women’s National Commission found that transsexual women reported harassment, violence and routinely experienced abuse from children and young people.</p>
Sexual Orientation	<p>A national survey in 2002 found that 64 per cent of lesbian women surveyed had experienced some form of homophobic violence or harassment. A London based study, also in 2002, found that 75 per cent of lesbians who had been assaulted felt unable to report the crime to the Police.</p> <p>One study of LGBT people in Brighton and Hove showed that 30% of this sample had experienced violence, abuse or harassment from a family member or someone close to them in their lifetimes. There were differences between those within the LGBT grouping, with bisexual and transgender people more likely to experience domestic violence and abuse than lesbians and gay men, as well as those with a disability or poor mental health.</p> <p>Where a homicide occurs in a same-sex relationship, this should not automatically be treated in the same way as a heterosexual relationship. This is due to the dynamics involved in the relationship and whether any further specialist knowledge needs to be obtained to determine the situation.</p>
Age	<p>The British Crime Survey reports that the risk of domestic abuse was higher for females in younger age groups. Females aged between 16 and 24 were at a higher risk of domestic abuse.</p>
Socio-economic	<p>The British Crime Survey shows that there is little evidence of variations in the prevalence of domestic abuse at the local level by type of area or socio-economic grouping. It affects women and girls in every socio-demographic group, age and ethnic background.</p> <p>Certain types of violence do disproportionately impact women from some communities, and these have been outlined above.</p>

Human Rights	Anyone who is in the UK for any reason has fundamental human rights which government and public authorities are legally obliged to respect. These include the right to life and the right to be free from torture, inhuman and degrading treatment (Articles 2 & 3 respectively of the EU Convention on Human Rights).
---------------------	--

2.2 What are the overall trends/patterns in this data?

Existing data sources were reviewed to better understand the prevalence of domestic violence. Data is largely drawn from the Home Office Statistical Bulletin: Crime in England and Wales, which is based on figures from the British Crime Survey and police recorded crime.

However, gathering robust data on the prevalence and the disproportionate impact on groups with protected characteristics is difficult: domestic violence is a hidden crime which often goes underreported.

Further research does indicate that some groups may be more vulnerable to abuse.

Key domestic violence statistics include:

- Domestic violence accounts for 14% of all violent incidents.
- Seven per cent of women and four per cent of men reported having experienced any domestic violence in 2009/10.
- In 2009/10, women were the victims of nearly three quarters (73%) of incidents of domestic violence. In four out of five (81%) incidents, the offender was male.
- In 2009/10, 29 per cent of women and 16 per cent of men had experienced any domestic abuse (any emotional, financial or physical abuse, sexual assault or stalking by a partner or family member) since the age of 16.³
- There has been a 71% decrease in the number of incidents of domestic violence between 1995 and 2009/10.
- From April 2009 - March 2010, the Crown Prosecution Service (CPS) dealt with 74,113 cases of domestic violence (an increase of over 7,009 cases from 2008-09) – with a successful prosecution rate of 72%.
- The convictions rose from 60% in 2005-06 to 72% in 2009-10. During the four year period from 2006-07, the numbers prosecuted by the CPS rose by 16,752, or 29%, from 57,361 in 2006-07 to 74,113 in 2009-10.
- Prosecution outcomes for domestic violence crimes over the three year period ending March 2010, prosecution volumes increased by 16% or

¹ Edited by: Flatley J, Kershaw C, Smith K, Chaplin R and Moon D (2010) Crime in England and Wales 2009/10: Findings from the British Crime Survey and police recorded crime. London: Home office

10,294. Guilty pleas increased from 62% to 65%, contributing to improved conviction rates of 72% overall in 2008-09 and 2009-10. Prosecutions dropped by CPS, including discontinuances and those in which no evidence was offered, fell from 25% to less than 22%.

Although evidence suggests that women are much more likely to be the victims of domestic violence, it should not be overlooked that it may be particularly difficult for men to report incidents of domestic violence due to societal attitudes, fear of not being believed etc...

Other risk indicators for domestic violence:

Pregnancy: Studies show that 30 per cent of domestic violence starts during pregnancy and up to 9 per cent of women are thought to be abused during pregnancy or after giving birth. A further study indicates that 70 per cent of teenage mothers are in violent relationships.

Marital status: People who were separated, divorced or widowed may have higher odds of being victim of domestic abuse and stalking compared with all other marital status groups. It is important to note that this link does not imply causation.

Drugs and alcohol statistics: According to the 2008/09 BCS self completion module, 27% of victims of partner abuse in the past 12 months perceived that the offender was under the influence of alcohol at the time of the incident (or the most recent incident if they were victim of more than one) and 10% perceived that the offender was under the influence of drugs.

In relation to domestic homicide:

In 2004/05 there were a total of 146 domestic homicides (106 females, 40 males);

In 2005/06 and 2006/07 there were 110 domestic homicides in each of those years (88 females, 22 males; and 83 females and 27 males respectively).

In 2008/09, a greater proportion of female victims were killed by their partner, ex-partner or lover; a total of 101 of the 132 victims of domestic homicides were female and 31 of the 132 victims were male.

Latest published figures for 2009/10 show that just over half of female victims of homicide aged 16 or over had been killed by their partner, ex-partner or lover (54%, 94 offences). In contrast, only five per cent of male victims aged 16 or over were killed by their partner, ex-partner or lover in 2009/10 (21 offences)⁴.

It should be noted that the above figures may not accurately reflect the actual

⁴ Smith, K. et al. (2011) Homicides, Firearm Offences and Intimate Violence 2009/10. Home Office Statistical Bulletin 01/11. London: Home Office

⁵ <http://www.lancs.ac.uk/fass/sociology/papers/walby-costdomesticviolence.pdf>
http://www.lancs.ac.uk/fass/doc_library/sociology/Cost_of_domestic_violence_update.doc

⁶ <http://rds.homeoffice.gov.uk/rds/pdfs05/rdsolr3005.pdf>

number of domestic homicides. In particular, where a victim has died following a forced marriage, families and communities may not admit to the context in which the offence occurred and as a result it may not be recorded as a domestic homicide.

Data is also shown according to the year in which the offences were recorded by police as homicide. This is not necessarily the year in which the incident took place, or the year in which any court decision was made.

The above highlights the fact that there are also likely to be more male victims of domestic violence than official statistics show, as in many cases men are more reluctant to disclose, or indeed see, the abuse in the context of domestic violence. In addition to this, the information suggests that the factors involved in domestic homicides where a male is the victim may be different to that of female victims and this may influence the way in which a review is carried out.

‘Honour’-based violence and Honour’ killings:

Between December 08 and April 10 the Metropolitan Police recorded 228 Honour Based Violence Offences including: Assault with Injury, harassment, common assault, GBH and murder.

In 2004, the Metropolitan Police decided to re-open 114 murder cases from the previous decade, which they now think may be so-called ‘honour’ killings. While there are no published statistics of honour-related violence, it is thought that there are around 12 honour-related killings annually.

The cost of domestic violence:

Sylvia Walby’s research⁵ published in 2009 estimated the total cost of domestic violence to society in monetary terms as £15.7 billion per annum (in 2008).

There are three major forms of cost:

- the cost of public services i.e. health care, housing, the criminal justice system;
- human and emotional costs (quantified using methodology developed by the Department for Transport and the Home Office – what people would pay to avoid such injuries);
- and lost economic output based on time off work due to injury.

2008	Cost £m
Services	3856
Human and emotional costs	9954
Economic Output	1920
Total cost	15,730

The statistics collated by Walby above are recognised as an under-estimate because public services do not collect information on the extent to which their services are used as a result of domestic violence. The research doesn’t include costs to those areas for which it was difficult to collect any baseline information – for example cost to social services work with vulnerable adults,

cost to education services, the human cost to children, (including moving schools and the impact this has on their education), and it excludes the cost of therapeutic and other support within the voluntary sector.

The cost of domestic homicide

The cost of homicide is estimated by the Home Office at over one million pounds: a total of £1,458,975 for each death.⁶

Based on this estimate and the domestic homicide figures for 2009/10 (115 homicides), the cost of the homicides alone could have amounted to around £167,782,125 in 2009/10.

2.3 Please list the specific equality issues and data gaps that may need to be addressed through consultation and/or further research?

Cultural and language barriers in some communities were considered to have an impact on some groups' willingness to share information e.g. Gypsy & Traveller groups, victims of honour killings. This may be a significant factor when attempting to gather information in such cases. In these situations there is often wider collusion in the abuse from extended family, and the community as a whole are less likely to disclose, or be honest, about the circumstances of the death. There was also concern about those individuals who may have a fear of deportation.

The statutory guidance directs review panels to involve individuals across a broad spectrum of both statutory and voluntary agencies and ensuring that 'experts' in particular fields are included in the review process as appropriate.

At all times in the review process, qualified interpreters should be used rather than other family members or individuals from local community. This will help to maintain confidentiality which is essential in such cases. Experts with experience in handling such cases should also be involved.

It was identified that where information/review findings were published, this needed to be made available in a variety of formats, for example: large print, Braille, different languages, audio and internet. It was also high-lighted that some ethic groups/communities have their own media/methods of communicating, and that this may lead to messages from the review being misinterpreted.

The statutory guidance makes clear that where appropriate, consideration should also be given to translating the report into different languages and other formats, such as Braille, British Sign Language.

Partners in statutory services have raised concerns about whether the statutory guidance will be able to reach the front-line practitioners that do not currently engage in DHRs, rather than simply reinforcing the knowledge of those already

aware of the issue.

To ensure the guidance does reach the right audience, a launch and communications plan was developed in conjunction with corporate partners.

The Quality Assurance Group will request feedback (where appropriate) once a review has been completed to determine how individuals felt about the process and their involvement within it. Outcomes of the reviews will also be monitored. This will consist of monitoring by ethnicity, disability, sexual orientation etc in order to ensure that different groups are not experiencing differential outcomes.

3 INVOLVING AND CONSULTING STAKEHOLDERS

In this section, describe the data you have gathered through stakeholder involvement and engagement.

3.1 Internal consultation and involvement: e.g. with Other Government Departments, Staff (including support groups), Agencies & NDPBs

A Steering Group was established for the implementation of Section 9 in 2006. Members of this group will also be invited to join the Quality Assurance Group. Officials from the following departments were involved in the development of the review process and drafting of the statutory guidance:

- Department for Education
- Department of Health
- Welsh Assembly Government
- Communities and Local Government
- Department of Justice (Northern Ireland)
- National Offender Management Service
- Crown Prosecution Service
- Lancashire Police on behalf of the ACPO Homicide Working Group
- Wiltshire Police on behalf of the ACPO lead on Public Protection
- Gwent Police on behalf of the ACPO lead on Domestic Abuse
- Metropolitan Police
- Thames Valley Police
- Sussex Police
- Independent Police Complaints Commission

3.2 External consultation and involvement: strand specific organisations e.g. charities, local community groups, third sector

Extensive consultation was undertaken in June 2006 when the initial draft of Guidance for Domestic Homicides Reviews was published. This set out a draft procedure for the DHR's and a significant number of internal and external

stakeholders were invited to comment.

A Victim-focus workshop took place on 11th February 2011 which helped to identify the gaps around engaging with friends and family members of homicide victims. They have also been involved in the development of the statutory guidance.

The partners involved included:

- Southall Black Sisters
- Women's Aid
- Welsh Women's Aid
- Refuge
- Against Violence and Abuse
- Iranian and Kurdish Women's Rights Organisation
- IMKAAN
- Respect
- Action After Fatal Domestic Abuse

The Quality Assurance Group will replace the Steering Group and become a useful information- and best practise-sharing opportunity to inform the government's work to prevent and tackle domestic homicide and disseminate lessons learned at a national level.

4 ASSESSING IMPACT

In this section please record your assessment and analysis of the evidence. This is a key element of the EIA process as it explains how you reached your conclusions, decided on priorities, identified actions and any necessary mitigation.

4.1 Assessment of the impact

Domestic violence and homicide occurs across society, regardless of age, gender, race, sexuality, wealth, and geography. Therefore, in a number of cases, there will be issues relating to equality and diversity. There will also be times where violence and homicide may be preventable.

Implementation of this provision will allow local agencies involved in the review process to identify the lessons that can be learned from domestic homicides with a view to preventing future homicides and violence and improving local and national policy and practice.

In addition to the devastating impact it has on individuals and their families, the scale of the costs involved in both incidents of domestic violence and homicide can only strengthen the need for a policy which focuses on homicide prevention.

The statutory guidance for conducting DHRs seeks to take account of issues of diversity that need to be borne in mind when DHR is taking place. Specific examples of this may include:

- Careful consideration to be given to who is selected to provide specialist cultural knowledge during the course of a review, as there may be issues of confidentiality with regards to using individuals from local communities. This should apply in instances such as when an interpreter is used.
- The need to ensure that procedures are sensitive and appropriate to the gender and sexual orientation of the victim/perpetrator and their families. There may also be different dynamics where same sex relationships are involved, particularly those living with children.

The Home Office has been working closely with ACPO and other statutory and voluntary agencies to develop a robust and affordable process for implementing Section 9 which is fit for purpose and ensures local areas can learn from such tragedies. Implementation will be supported with statutory guidance, an e-learning training package, information leaflets for friends and family members of the victim, and the development of an expert group managed by the Home Office which will be responsible for the quality assurance of reviews and national dissemination of effective practice and learning.

The Quality Assurance Group will request feedback (where appropriate) once a review has been completed to determine how individuals felt about the process and their involvement within it. Outcomes of the reviews will also be monitored. This will consist of monitoring by ethnicity, disability, sexual orientation etc in order to ensure that different groups are not experiencing differential outcomes.

One of the most important aspects of monitoring will be in terms of the progress on actions and recommendations made. The Quality Assurance Group must ensure actions are followed up. Failure to do so could have a detrimental effect on public trust and confidence in the review process and individuals may be reluctant to participate in the future.

The Home Office will undertake a review of implementation following one year in operation to assess the impact of the policy on local areas and to ensure particular issues highlighted above, are being addressed effectively.

Date of completion of EIA	28 March 2011
Compiled by	Jenna Marsh
SCS sign-off	Justin Russell
<i>I have read the Equality Impact Assessment and I am satisfied that all available evidence has been accurately assessed for its impact on equality strands. Mitigations, where appropriate, have been identified and actioned accordingly.</i>	
Date of publication of EIA Report	31 March 2011
Review date	31 March 2012

EIA ACTION PLAN FOR IMPLEMENTATION OF SECTION 9, DOMESTIC VIOLENCE, CRIME AND VICTIMS ACT 2004

ACTION / ACTIVITY	OWNER AND INTERESTED STAKEHOLDERS	DEPENDENCIES / RISKS / CONSTRAINTS	COMPLETION DATE	PROGRESS UPDATE
Quality Assurance of all DHR overview reports	Home Office and Quality Assurance Group	Resource constraints	Ongoing – to be completed on a case-by-case basis	<i>To begin from 1st April 2011</i>
Actions and recommendations from the overview report should be followed up locally	CSP (local actions) Quality Assurance Group (national actions)		Ongoing - to be completed on a case-by-case basis	<i>To begin from 1st April 2011</i>
Review of use of guidance	To be reviewed by the Quality Assurance Group following one year of operation. Involvement from relevant government departments, statutory agencies, local areas and NGO partners.	Resource constraints	By end of April 2012	<i>To begin in 2012</i>
Review of the impact on local areas	Home Office with involvement from relevant government departments, statutory agencies, local areas and NGO partners.	Resource constraints	By end of April 2012	<i>To begin in 2012</i>