



Keeping Adults Safe
in Shropshire
Network



Joint Adult Safeguarding Event 2019: Domestic Abuse and Older People

Wednesday 20 November 2019
Barnabas Centre, Shrewsbury

Domestic Abuse in relation to The Care Act 2014 and ‘Making Safeguarding Personal’

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research
in practice
for adults

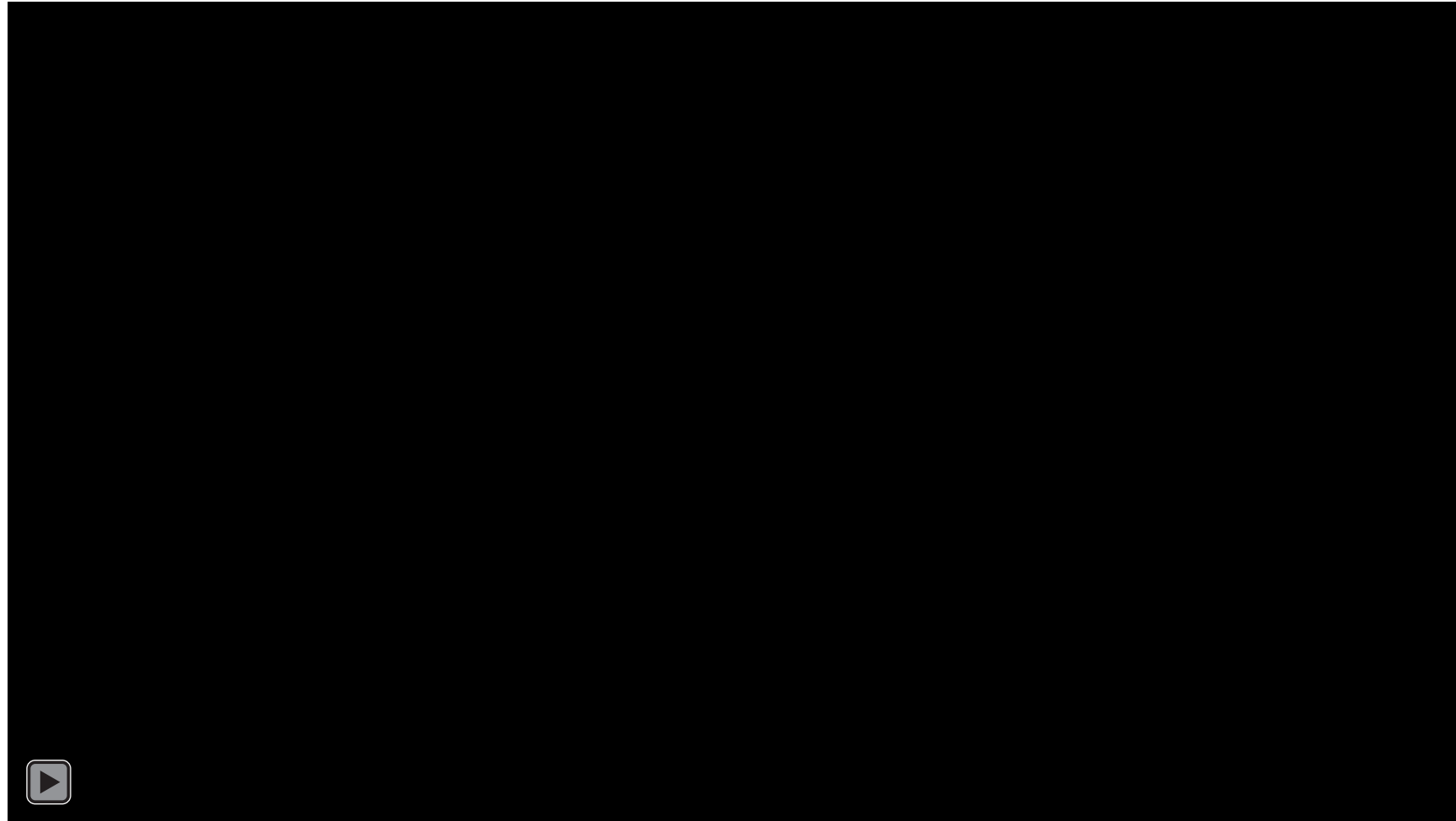
Before we start....

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Controlling and Coercive behaviour

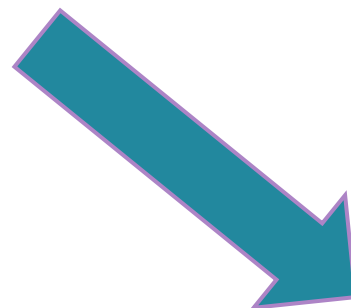
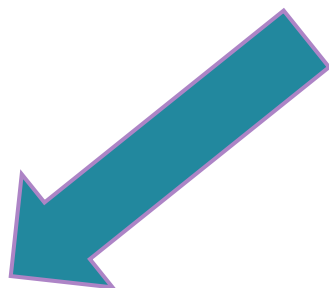
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What is coercive control?



Coercive control

- ▶ Coercive control is central to understanding domestic abuse
- ▶ It is a crime
- ▶ It is best understood in terms of:



(A) Coercive & controlling behaviours & (B) Effects on the victim

Section 76

The offence “**repeatedly or continuously;**” had a “**serious effect**” on the victim;

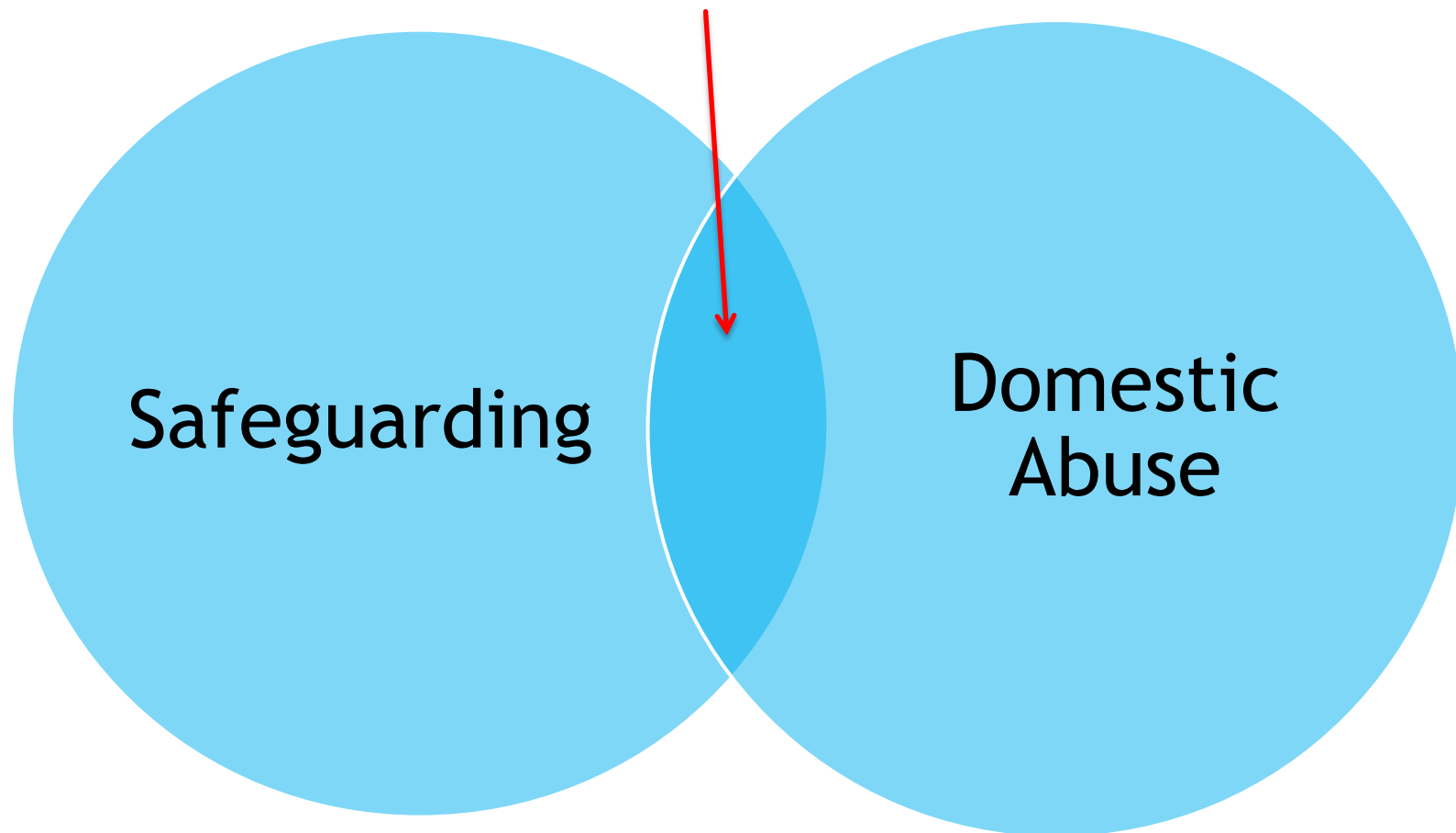
- ▶ Meaning it caused the victim to fear that violence would be used against them on “at least two occasions”

or

- ▶ It has had a “substantial adverse effect on their day to day activities”

AND the alleged perpetrator must have known that their behaviour would have a serious effect on the victim, or the behaviour must have been such that he or she “ought to have known” it would have that effect.

Where people have care & support
needs



Safeguarding adults under the Care Act

Principles:

- ▶ Empowerment
- ▶ Protection
- ▶ Prevention
- ▶ Proportionality
- ▶ Partnership
- ▶ Accountability

New categories of abuse:

- ▶ Domestic violence
- ▶ Self-neglect
- ▶ Modern slavery

Section 42, Care Act 2014

Where a local authority has reasonable cause to suspect that an adult in its area:

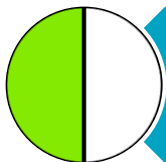
- a) has needs for care and support (whether or not the authority is meeting any of those needs)
- b) is experiencing, or is at risk of, abuse or neglect, and
- c) as a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it

the local authority must make (or cause to be made) whatever enquiries it thinks necessary to enable it to decide whether any action should be taken in the adult's case and, if so, what and by whom

Care needs and domestic abuse



Women who are disabled are at significant and higher risk of DA (Rich, 2014)



More than 50% of disabled women may have experienced domestic abuse (Magowan, 2004)



People who experience poor mental health are more likely to experience domestic abuse (Trevilion et al, 2012)



Older women face particular barriers to seeking support (McGarry 2014)



More disabled men experience domestic abuse than other men, with the risk to a disabled man being similar to that to women in general (PHE 2015)

Making Safeguarding Personal

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Safeguarding is:

- ▶ Person-led
- ▶ Outcome-focused
- ▶ Enhances involvement, choice and control
- ▶ Improves quality of life, wellbeing and safety
- ▶ Strengths based

(Care Act Guidance)



What do people at risk of domestic abuse want?

- ▶ Contact with others, Friendship and mutual support
- ▶ Proactive asking about abuse
- ▶ Quality time and the opportunity to talk
- ▶ Acceptance and understanding/no blame
- ▶ Encouragement
- ▶ Recognition of risks/prioritising safety
- ▶ Practical support and assistance

(Humphreys and Thiara (2003), Abrahams (2007))

Risk led vs Needs led

Risk led

- ▶ Professionals are the experts
- ▶ Policy based
- ▶ Rigid and responsive to immediate risk
- ▶ Compliance
- ▶ Taking control
- ▶ Risk assessment at a point in time
- ▶ Disengagement

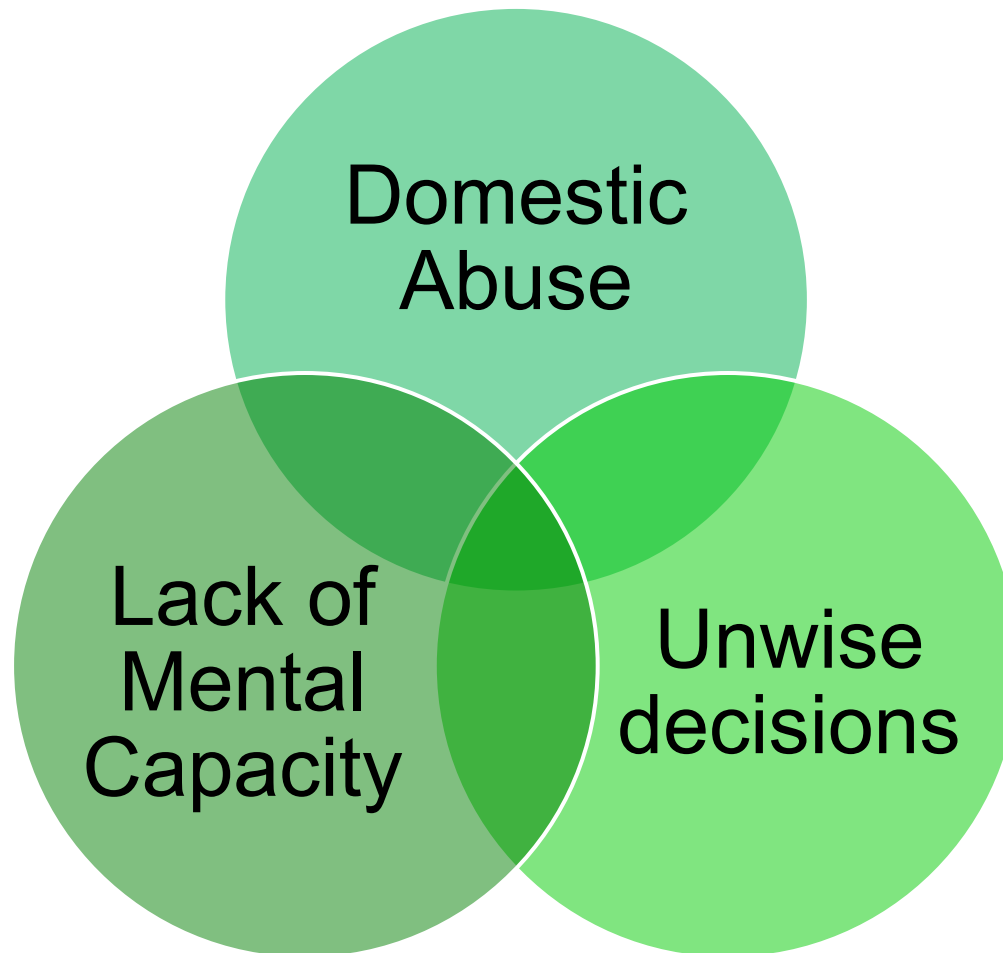
‘Making Safeguarding Personal’

Needs led

- ▶ Survivors are experts by experience
- ▶ Recovery focused
- ▶ Long-term lasting effects
- ▶ Gives options
- ▶ Giving control
- ▶ Fluid and moving
- ▶ Satisfaction with services

‘Change that Lasts’

Mental capacity and domestic abuse



Mental capacity, domestic violence and adult safeguarding

“Many of the social workers discussed domestic violence in safeguarding terms - with which they were familiar. However, further work is needed to unpack the complexities of safeguarding, mental capacity and domestic violence in cases where both domestic violence and safeguarding processes may need to be followed in parallel”

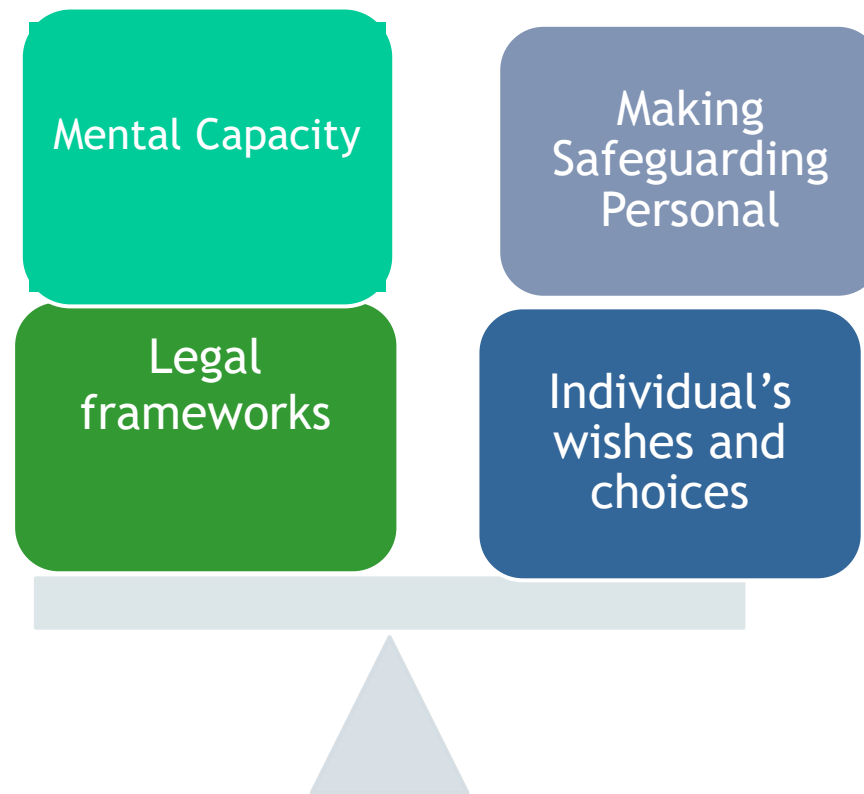
(Domestic violence, adult social care and MARAC's : implications for practice. McLaughlin et al 2015)

Mental capacity and coercion

“in my judgment... the **inherent jurisdiction can be exercised in relation to a vulnerable adult** who, even if not incapacitated by mental disorder or mental illness, is, or **is reasonably believed to be**, either (i) under constraint or (ii) **subject to coercion** or undue influence or (iii) for some other reason deprived of the capacity to make the relevant decision, or disabled from making a free choice, or incapacitated or disabled from giving or expressing a real and genuine consent.”

Per Munby J in *A Local Authority v (1) MA (2) NA and (3) SA* [2005] EWHC 2942, at paragraph 77

How do we balance these factors?



Considering older people

- ▶ Domestic violence as a ‘largely hidden phenomenon’ comprising of multiple forms of harm or abuse by people who are or have been intimate partners
- ▶ A lack of conceptual clarity between domestic violence and elder abuse
- ▶ The complexity of family dynamics and abusive relationships
- ▶ Deficit in dedicated service recognition and provision

McGarry et al (2014)



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