

Gloucestershire Domestic Abuse Needs Assessment

2024

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Contents

1. Introduction	- 1 -
1.1. Definition of domestic abuse	- 2 -
1.2. Scope and purpose of the needs assessment.....	- 3 -
1.3. About Gloucestershire	- 4 -
2. National Approach to Domestic Abuse.....	- 11 -
2.1. Violence Against Women and Girls.....	- 11 -
2.1.1. Position Statement on Male Victims.....	- 12 -
2.2. Domestic Abuse Act 2021	- 12 -
2.2.1. Tackling Domestic Abuse Plan	- 14 -
2.2.2. Statutory guidance.....	- 14 -
2.3. Related Legislation	- 15 -
2.3.1. Police, Crime, Sentencing and Courts Act 2022.....	- 15 -
2.3.2. Victim and Prisoners Act 2024	- 15 -
2.3.3 Domestic Homicide Sentencing Review.....	- 16 -
2.4. The Coordinated Community Response (CCR)	- 17 -
3. Prevalence of Domestic Abuse in England and Wales	- 19 -
3.1. Domestic Abuse Victim Characteristics (CSEW).....	- 21 -
3.1.1. Age and Gender	- 21 -
3.1.2. Ethnicity	- 22 -
3.1.3. Marital Status.....	- 22 -
3.1.4. Disability.....	- 23 -
3.1.5. Religion.....	- 23 -
3.1.6. Sexual Orientation	- 23 -
3.1.7. Employment and Education.....	- 24 -
3.2. Police Recorded Crime in England and Wales	- 26 -
3.3. Domestic Homicides	- 27 -
4. Gloucestershire's Approach to Domestic Abuse	- 28 -
4.1. Local strategy	- 28 -
4.1.1. Sexual Violence Partnership	- 29 -
4.2. Gloucestershire commissioning of specialist services	- 30 -
4.3. Local partnership structure.....	- 32 -
5. Domestic Abuse Crimes in Gloucestershire	- 34 -
5.1. Comparisons to other Police Forces	- 42 -
5.1.1. Domestic Abuse related prosecutions and convictions.....	- 45 -

5.2. Domestic Violence Protection Notices/Orders (DVPN/O)	- 46 -
5.3. Domestic Abuse Disclosure Scheme (DVDS/Clare's Law)	- 47 -
5.4. Multi-Agency Risk Assessment Conference (MARAC)	- 47 -
5.5. Victims of Domestic Abuse in Gloucestershire known to police	- 49 -
5.6. MARAC Victims	- 51 -
5.7. Domestic Homicide Reviews in Gloucestershire.....	- 53 -
5.8. Areas for development	- 55 -
6. Accommodation Based Support for victims of Domestic Abuse	- 58 -
6.1. Best practice approaches.....	- 59 -
6.2. Local Approach.....	- 62 -
6.3. Service Provision	- 62 -
6.4. Access to Safe Accommodation in Gloucestershire.....	- 63 -
6.4.1. District Councils' Homelessness Response to Domestic Abuse.....	- 63 -
6.4.2. Accommodation in temporary accommodation.....	- 66 -
6.4.3. Challenges and gaps identified by District Councils.....	- 68 -
6.4.4. Victim demographics from Homeless DA applications.....	- 69 -
6.4.5. Domestic Abuse Intervention Officers.....	- 70 -
6.5. Refuge requests to Gloucestershire Domestic Abuse Support Service (GDASS).....	- 71 -
6.6. Places of Safety (Dispersed Refuge).....	- 73 -
6.7. Target Hardening and Sanctuary Scheme.....	- 76 -
6.8. Stroud Beresford Women's Refuge	- 77 -
3.5.1. Challenges facing the refuge.....	- 78 -
6.8.1 Demographics within refuge.....	- 79 -
6.9. Areas for development	- 81 -
7. Community Based Services for Victims of Domestic Abuse	- 83 -
7.1. Best Practice Approaches	- 84 -
7.2. Local Approach.....	- 86 -
7.3. Service Provision	- 86 -
7.4. Access to Community Based Support in Gloucestershire.....	- 89 -
7.4.1. Perpetrator type	- 92 -
7.4.2. GDASS referrals and protected characteristics.....	- 92 -
7.4.3. GDASS Service Outcomes.....	- 95 -
7.5. STREET.....	- 98 -
7.6. Other Service Providers	- 99 -
7.6.1. The Nelson Trust	- 99 -
7.6.2. Gloucestershire Rape and Sexual Abuse Centre (GRASAC)	- 100 -

7.6.3. Drug and Alcohol Support Services.....	- 100 -
7.7. Health.....	- 100 -
7.8. Gaps in provision and future developments.....	- 101 -
8. Perpetrators of domestic abuse	- 102 -
8.1. Best practice approaches.....	- 102 -
8.2. Local Approach.....	- 105 -
8.3. Service Provision	- 105 -
8.4. Perpetrators in Gloucestershire.....	- 106 -
8.4.1. Police recorded offenders.....	- 106 -
8.4.2. MARAC perpetrators.....	- 107 -
8.4.3. Probation Service	- 109 -
8.4.4. Positive Relationships Gloucestershire (PRG).....	- 110 -
8.6. Gaps in provision and future developments.....	- 114 -
9. Children and Young People impacted by Domestic Abuse in Gloucestershire 2023 Executive Summary.....	- 115 -
9.1. Introduction and Research Summary	- 115 -
9.2. Services Data.....	- 117 -
9.3. Consultation Work Summary.....	- 118 -
9.3.1. Findings from the parents.....	- 118 -
9.3.2. Findings from Professionals	- 118 -
9.4. Recommendations	- 119 -
10. Vulnerable Adults and Domestic Abuse.....	- 122 -
10.2. Local Approach.....	- 123 -
10.3. Service Provision	- 123 -
10.4. Vulnerable Adults and Domestic Abuse in Gloucestershire	- 123 -
10.5. Vulnerable Adults experiencing abuse in their own home.....	- 125 -
10.6. Gaps in provision and future developments.....	- 128 -
11. Stalking.....	- 129 -
11.1. Prevalence of stalking	- 129 -
11.2. Local approach	- 131 -
11.3. Service Provision	- 132 -
11.4. Stalking crimes in Gloucestershire	- 133 -
11.5. Police recorded victims	- 135 -
11.6. Police recorded offenders.....	- 136 -
11.7. Independent Stalking Advocacy Caseworker (ISAC) service	- 137 -
11.8. Stalking clinic.....	- 140 -

11.9. Victim Support	- 140 -
11.10. Gaps in provision and future developments.....	- 141 -
12. So-called Honour Based Abuse (HBA) and Forced Marriage (FM).....	- 143 -
12.1. Prevalence of HBA/FM.....	- 143 -
12.2. Local Approach.....	- 144 -
12.3. Service Provision	- 145 -
12.4. HBA/FM crimes in Gloucestershire.....	- 145 -
12.5. Gaps in provision and future developments.....	- 145 -
13. Child to Parent Abuse (CPA).....	- 146 -
13.1. Prevalence of CPA.....	- 146 -
13.2. Local Approach.....	- 147 -
13.3. Service Provision	- 147 -
13.4. CPA crimes in Gloucestershire	- 148 -
13.5. Gaps in provision and future developments.....	- 148 -
14. Consultation	- 151 -
Theme 1: Victim Focused Support	- 152 -
Theme 2: Specialist domestic abuse support	- 152 -
Theme 3: Professional response	- 153 -
Theme 4: Housing	- 154 -
Theme 5: Awareness raising and training	- 155 -
Theme 6: Religion and culture	- 155 -
Theme 7: Increased support for perpetrators	- 156 -
Overall Summary.....	- 156 -
15. Conclusion and areas for development	- 157 -
15.1. Overarching areas for development	- 157 -
15.2. Thematic areas of development	- 158 -
Appendices.....	- 160 -
Appendix 1: In Search of Excellence CCR Local Assessment.....	- 160 -
Appendix 2: Gloucestershire Domestic Abuse Partnership Structure	- 165 -

1. Introduction

Domestic abuse, as part of the wider ‘violence against women and girls’ priority, is a major global public health issue and 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’², in which domestic abuse is a feature.

Whilst domestic abuse is best understood as a dynamic of power and control, sexual and intimate partner violence are 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) include³:

- lower levels of education;
- a history of exposure to child maltreatment;
- witnessing family violence;
- antisocial personality disorder;
- harmful use of alcohol and other substances;
- 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 affect men as well as women, impacting over 751,000 men in the past year⁴. 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 physical 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/news-room/detail/violence-against-women)

² <https://www.who.int/news-room/fact-sheets/detail/violence-against-women>

³ World Health Organisation: [Violence against women \(who.int\)](https://www.who.int/news-room/detail/violence-against-women)

⁴ Office for National Statistics (ONS): Domestic abuse victim characteristics, England and Wales: year ending March 2023

March 2017, Home Office Research⁵ 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 Act 2021 and the Government focus on the broad Violence Against Women and Girls (VAWG) agenda. 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 2021⁶. 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;
- they are relatives;

⁵ 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://www.gov.uk/government/publications/the-economic-and-social-costs-of-domestic-abuse)

⁶ [Domestic Abuse Act 2021 \(legislation.gov.uk\)](https://www.legislation.gov.uk)

- 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, a local decision was made to conduct a broad scope domestic abuse needs assessment covering both accommodation and community based support every 3 years. In order to meet requirements from the Ministry of Housing, Communities and Local Government (MHCLG)⁷ (formerly the Department of Levelling Up Housing and Communities (DLUHC), an annual refresh of the accommodation based needs assessment is conducted annually alongside the MHCLG data return.

The Gloucestershire Domestic Abuse needs assessment 2024 will follow on from the 2021 needs assessment considering data from years 2021/22, 2022/23 and 2023/24.

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

With the 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:

- 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?

⁷ [Department for Levelling Up, Housing and Communities - GOV.UK \(www.gov.uk\)](https://www.gov.uk)

- What is the current provision of community based services in Gloucestershire?
- How does Gloucestershire currently respond to perpetrators of domestic abuse?
- What is the picture of Stalking, Honour Based Violence (HBV), Forced Marriage (FM) and Child to Parent Abuse (CPA) in Gloucestershire and what is our local approach?
- What is the view of those with lived experience of domestic abuse and the general community?

In reference to children being recognised as victims in their own right where they have witnessed or felt the effects of domestic abuse, a separate needs assessment was conducted in 2023. Given this focus already placed on children and young people, this needs assessment will provide a summary of the 2023 CYP needs assessment and embed the recommendations.

Outside of the scope:

Sexual Violence: whilst domestic abuse and sexual violence are linked, the local need for sexual violence provision is considered by the Sexual Violence Partnership Board (SVPB). 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; including shared priorities across their respective strategies.

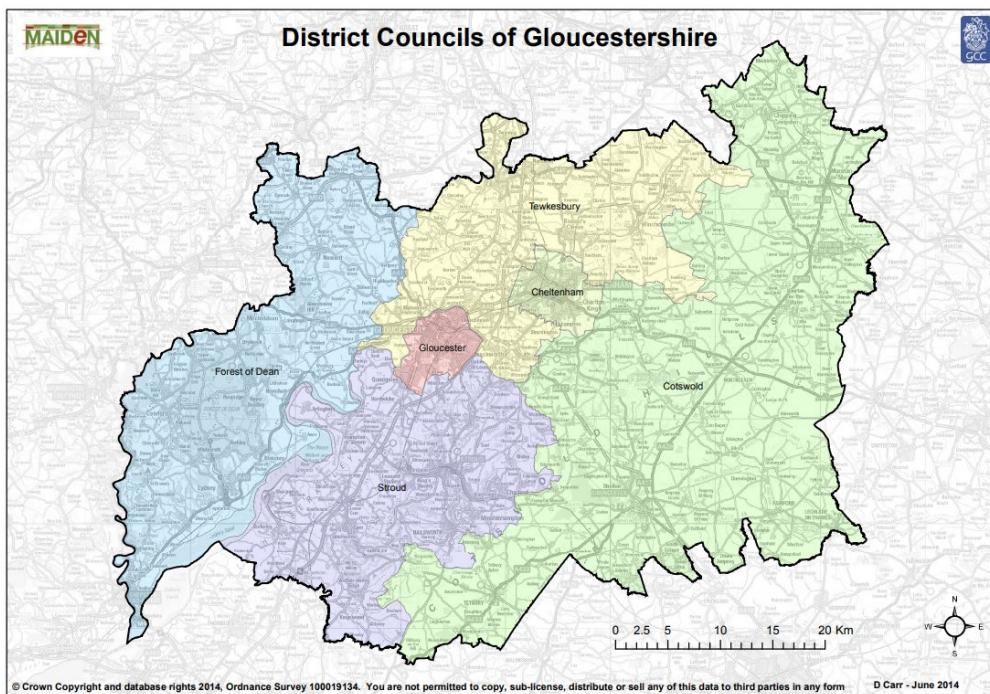
Female Genital Mutilation: whilst FGM is often connected to HBV/FM, strategically, FGM in Gloucestershire is responded to within the remit of child protection.

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 does however consider links with these groups via some shared membership.

1.3. About Gloucestershire⁸

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.

⁸ Source: <https://www.goucestershire.gov.uk/media/3jzcmzvv/mid-2022-report.pdf>



Population and Age Structure

The population of Gloucestershire was estimated to be around 652,409 in 2022, representing a rise of approximately 5,924 people since 2021. This is the equivalent to a growth of 0.92% in population from 2021 to 2022, which was lower than the rate of growth for England and Wales which stood at 0.97%.

The district of Gloucester has the largest population in the county and the Forest of Dean has the smallest. From 2021 to 2022, Tewkesbury had the fastest rate of growth in the county (1.68%) whilst Cotswold had the lowest rate with a growth of 0.26%.

The proportion of 0-15 year olds (17.55%) in Gloucestershire was higher than that for the South West but lower than that for England and Wales. The working age population (aged 16-64) made up 60.53% of the population in Gloucestershire in 2022. This was comparable to the figure for the South West, but lower than that for England and Wales. The proportion of people aged 65 or over (21.92%) 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 60.53%, is more than 2 percentage points lower than that of England and Wales and has declined slightly from 60.8% in 2021. 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 7.6 years lower for men and 5.8

years lower for women in the most deprived areas of Gloucestershire than in the least deprived areas⁹.

Protected Characteristics and Groups with Particular Needs

Ethnicity

The population of Gloucestershire has become increasingly diverse in recent years. During the period 2011-2021, the percentage of the local population from non-white ethnic groups rose from 4.6% to 6.9%; while this has increased it remains lower than the national average (19%).

In terms of absolute numbers, the biggest growth from 2011-2021 was among those classed as 'White-British' (up by 19,212). The proportion the county's population belonging to the 'White-Other' category was 4.5% in 2021, a 55% increase on 2011. This increase has been linked to inflow from Eastern European countries.¹⁰ There were also increases in the number of residents from Mixed or Multiple Ethnic Groups, Black (Black British, Black Welsh, Caribbean or African), Other Ethnic Groups and Asian backgrounds.

There are variations in the ethnicity profile between the districts. Gloucester has the highest Ethnic Minorities population at 15.1%, Cheltenham also has a higher proportion of people from Ethnic Minorities (8.6%) compared to the county average (6.9%).

Religion

According to the 2021 Census, 49.2% of residents in Gloucestershire were Christian, making it the most common religion. This was followed by no religion which accounts for 41.4% 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, in a same sex marriage, or separated when compared to the national figure. In contrast the proportion of people who are married, are divorced, or are widowed exceeds the national figures. According to the 2021 census, 33.6% of Gloucestershire residents are single and have never married or registered a same-sex civil partnership; 47.8% are married; 0.2% are in a registered civil partnership; 2% are separated but still legally married or still legally in a civil partnership; 9.9% are divorced or formerly in a civil partnership which is now legally dissolved; 6.5% are widowed or a surviving partner from a civil partnership.

The Census 2021 has provided the first set of official data on sexual orientation in England and Wales, which included a new multiple-choice question, asking 'which of the following best describes your sexual orientation?' The voluntary question was directed only at people aged 16 and over, and overall, 93.2% of residents in Gloucestershire aged 16 and over answered the question. The majority of people who answered described their sexual orientation as 'straight or heterosexual' (90.4% of the population). This is slightly higher than the national average of 89.4%.

There were almost 15,000 people (2.8%) who described their sexual orientation as being in one

⁹ Source:

https://fingertips.phe.org.uk/search/life%20expectancy%20at%20birth#page/7/gid/1938133217/pat/15/par/E92000001/ati/502/are/E1000013/iid/92901/age/1/sex/1/cat/-1/ctp/-1/vrr/3/cid/4/tbm/1/page-options/car-do-0_ine-ao-0_ine-pt-0_ine-yo-3:2018-1:-1_ine-ct-1

¹⁰ Inform Gloucestershire 2016 <https://www.goucestershire.gov.uk/inform/equality-and-diversity/overview/>

of the LGBTQ+ categories. This is lower than the national average of 3.2%. A total of almost 36,200 people chose not to answer this voluntary question, which is more than double the total number of LGBTQ+ people who did choose to respond. Due to the sensitive nature of the question, it might be reasonable to assume that some LGBTQ+ people felt reticent to provide an answer.¹¹ The approximate figure of 15,000 LGBTQ+ people should be regarded as the minimum number in the county, but this could potentially be considerably higher.

People with long-term conditions and disabilities

Long-term conditions (LTC)¹² 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 2021 Census, 16.8% of Gloucestershire residents reported having a long-term limiting health problem; this was below the national figure (17.3%). At a household level, 30.3% of households had at least one person with a long term limiting health problem or disability; this was slightly lower than the figure for England of 32.0%.

Learning disabilities

Estimated projections suggest that in 2024 there will be approximately 12,373 people aged 18+ living with a learning disability in Gloucestershire equating to 2.3% of the adult population.¹³ Of this group, about 2,517 (about 20%) are estimated to have moderate or severe learning disabilities, equating to 0.5% of the adult population.

Homeless

Homelessness is both the cause and consequence of many other problems. The impact of homelessness on health can be stark; the average age at death of someone experiencing homelessness is around 30 years lower than that of the general population¹⁴. Local authorities have a duty to secure suitable accommodation for the statutory homeless¹⁵; this is referred to as accepting a main duty.

In 2022-23 there were 2,979 households in the county which were assessed as 'homeless and owed a prevention or relief duty'. This equates to a rate of 1.5 per 1,000 households which was lower than the national rate of 12.4 per 1,000 households. Across the county, Gloucester has the highest rate of households 'assessed as homeless and owed a prevention or relief duty' at 22.7 per 1,000 households. All other districts in the county have rates below the Gloucestershire and national average.¹⁶

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:

¹¹ LGBT Foundation LGBT Foundation - <https://lgbt.foundation/news/lgbt-foundation-cautiously-welcomes-the-first-snapshot-of-lgbtq-identities-in-the-census/499>

¹² LTCs- conditions that cannot, at present, be cured, but people living with these conditions can be supported to maintain a good quality of life

¹³ Pansi - <http://www.pansi.org.uk/index.php?pageNo=388&areaID=8260&loc=8260> Crown copyright 2020.
Accessed 22/02/2023

¹⁴ Deaths of homeless people in England and Wales: 2019 registrations, ONS

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.

¹⁶ Statutory homelessness: Detailed local authority-level tables, April 2022 – March 2023, MHCLG

- 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. The information captured relates to armed forces veterans rather than current personnel and was captured by the 2021 Census.

In 2021 there were 27,418 people who had previously served in the UK armed forces resident in Gloucestershire, which equates to 5.2% of the 16+ population. This is just over 1 in 20 people aged 16 years and over in Gloucestershire. The proportion of armed forces veterans was higher in Gloucestershire than it was across England (3.8%). All districts in Gloucestershire had a higher proportion of armed forces veterans than the national average. Cheltenham had the lowest proportion of armed forces veterans at 4.5%, while Tewkesbury had the highest proportion at 6.2% of the 16+ population.

Gloucestershire and its districts had a higher proportion of residents who had served in UK regular armed forces than England. The proportion of Gloucestershire residents who had served in the UK reserve armed forces or both the regular and reserve armed forces was in line with the national average. 9.2% of households (25,598) in Gloucestershire included one or more UK armed forces veterans, which was higher than the national average of 7.0%. At district level, Tewkesbury had the highest proportion of households where at least one person had served in the armed forces at 10.8%.

There is substantial variation between the age profiles of the veteran and non-veteran populations. The veteran population is much older with 53.5% being aged 65 and over.

Refugees and Asylum Seekers

Asylum seeker and refugee populations are increasing worldwide through war and conflict. The UK has seen increases in refugees and asylum seekers through ongoing global conflict including the war in Ukraine. Refugees and Asylum seekers have specific health needs and vulnerabilities that need considering in both health care terms and the wider determinants of health. Asylum seekers and refugees have large health inequalities and the need to understand and address them to enable positive health and wellbeing is essential.

Resettled people are granted refugee status or another form of humanitarian protection by the UK while abroad and then brought to live in the UK.

In the period January 2014-December 2023, 471 people have been resettled in Gloucestershire under the Vulnerable Children's Resettlement Scheme, Vulnerable Persons Resettlement Scheme, UK Resettlement Scheme, Community Sponsorship Scheme, Mandate Scheme and Afghan Schemes. This equates to a rate 7.3 resettled persons per 10,000 population, which was broadly in line with

the UK average of 7.5. At a district level Cheltenham and Gloucester had the highest rate of resettled persons at 14.0 per 10,000 population.¹⁷

The number of Ukrainians arriving in Gloucestershire under one of the UK support schemes stood at approximately 1,678 in March 2024.¹⁸

An asylum seeker is someone who has applied for asylum and is awaiting a decision on whether they will be granted refugee status. An asylum applicant who does not qualify for refugee status may still be granted leave to remain in the UK for humanitarian or other reasons. An asylum seeker whose application is refused at initial decision may appeal the decision through an appeals process. Asylum applicants initially refused refugee status may be granted leave to remain following an appeal. As of 31 March 2024 there were 499 asylum seekers receiving support in Gloucestershire. This equates to a rate of 7 per 10,000 population, lower than the national average of 16 per 10,000 population. At a district level Gloucester had the highest rate of asylum seekers at 32.2 per 10,000 population.¹⁹

Health Outcomes

Overall, the health of people living in Gloucestershire is generally better than the England average.²⁰ 83.1% of people in Gloucestershire describe themselves as being in good or very good health.²¹ The three biggest killers in Gloucestershire (and nationally) are cancer (malignant neoplasms), Dementia and Alzheimer disease and ischaemic heart diseases. These were also the main three leading causes of death in both England and the South West region.²²

Mental Health

In 2022/23, 12.4% of patients (aged 18+) in Gloucestershire were recorded in GP Practice as having depression²³ and 9% of patients (aged 16+) responding to the GP patient survey reported having a 'long-term mental health problem'.²⁴ This is lower than the England average of 13.2% of patients recorded as having depression and 9.9% as having a 'long term mental health problem'.

Dementia

The ageing population is a factor for the rising number of dementia diagnosis in the county; estimates suggest that in 2023 there are 6,062 people aged over 65 living with dementia.²⁵

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.

¹⁷ Resettled Persons by Local Authority 2024, House of Commons Library

¹⁸ Regional and Local authority data - Immigration groups, year ending 2024, Home Office

¹⁹ Supported Asylum Seekers by Local Authority 2024, House of Commons Library

²⁰ PHE Public Health Profiles 2019

²¹ Census 2021

²² Mortality Trends – Inform Gloucestershire <https://www.goucestershire.gov.uk/media/01nfhj3y/mortality-trends-report-2022.pdf>

²³ Public Health Outcomes Framework -

<https://fingertips.phe.org.uk/search/depression#page/4/gid/1/pat/15/par/E92000001/ati/502/are/E10000013/iid/848/age/168/sex/4/cat/-1/ctp/-1/yr/1/cid/4/tbm/1/page-options/car-do-0>

²⁴ Fingertips - <https://fingertips.phe.org.uk/common-mental-disorders#page/4/gid/8000026/pat/15/ati/167/are/E38000062/iid/358/age/164/sex/4/cat/-1/ctp/-1/yr/1/cid/4/tbm/1>

²⁵ Fingertips -

<https://fingertips.phe.org.uk/search/dementia#page/4/gid/1/pat/15/par/E92000001/ati/502/are/E10000013/iid/92949/age/27/sex/4/cat/-1/ctp/-1/yr/1/cid/4/tbm/1/page-options/car-do-0>

- Smoking in Gloucestershire has steadily declined over the past years; current prevalence of smoking in adults in the county in 2022 (11.5%) is better than the national rate (England – 12.7%).²⁶
- The percentage of physically active adults in Gloucestershire is better than that nationally, however only 71.1% meet the recommended levels of physical activity.²⁷
- Alcohol-related hospital admissions are one indicator of the extent of harmful drinking in a community. From 2022/23, the rate of alcohol-related hospital admissions in Gloucestershire has been steadily falling for 3 years and has been significantly lower than the national benchmark for the past seven years.²⁸
- The percentage of adults classified as overweight (including obesity) (64.5%) is similar to that nationally.²⁹

The NHS Health Check is a national health check-up programme designed to spot early signs of stroke, kidney disease, heart disease, Type 2 diabetes or dementia. The uptake of NHS health checks in the county has shown improvement from 37.9% in 2013/14 to 46.4% in 2022/23 which is significantly better than the England rate.³⁰

Sexual Health

The rate of underage pregnancy in Gloucestershire is significantly better (i.e., lower) than the national rate. The rate of chlamydia detection in young people (15-24 year old) is however decreasing and getting worse than the rate of detection in England;³¹ 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 is also lower than the rate of diagnoses in England as a whole. The latest available data (2022) shows that HIV testing uptake in Gloucestershire is significantly better than the national rate.³²

Illicit drug use

Using nationally representative estimates from the England and Wales Crime Survey, we can estimate that within Gloucestershire, an estimated 33,396 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. An estimated 8,085 people will have used an illegal drug more than once a month in the last year.³³

²⁶ Fingertips - <https://fingertips.phe.org.uk/profile/tobacco-control/data#page/4/gid/1938132885/pat/15/par/E92000001/ati/502/are/E10000013/iid/92443/age/168/sex/4/cat/-1/ctp/1/yr/1/cid/4/tbm/1>

²⁷ Fingertips - <https://fingertips.phe.org.uk/physical-activity#page/4/gid/1938132899/pat/15/par/E92000001/ati/502/are/E10000013/iid/93014/age/298/sex/4/cat/-1/ctp/1/yr/1/cid/4/tbm/1/page-options/car-do-0>

²⁸ Fingertips - <https://fingertips.phe.org.uk/profile/local-alcohol-profiles/data#page/4/gid/1938132984/pat/15/par/E92000001/ati/502/are/E10000013/iid/93765/age/1/sex/4/cat/-1/ctp/1/yr/1/cid/4/tbm/1/page-options/car-do-0>

²⁹ Fingertips - <https://fingertips.phe.org.uk/profile/national-child-measurement-programme/data#page/4/gid/1938133368/pat/15/par/E92000001/ati/502/are/E10000013/iid/93088/age/168/sex/4/cat/-1/ctp/1/yr/1/cid/4/tbm/1/page-options/car-do-0>

³⁰ Fingertips - <https://fingertips.phe.org.uk/profile/nhs-health-check-detailed/data#page/1>

³¹ PHE Sexual and Reproductive Health Profiles - <https://fingertips.phe.org.uk/profile/sexualhealth/data#page/4/gid/8000057/pat/15/par/E92000001/ati/502/are/E10000013/iid/90776/age/156/sex/2/cat/-1/ctp/-1/yr/1/cid/4/tbm/1>

³² <https://fingertips.phe.org.uk/profile/sexualhealth/data#page/1>

³³ Crime Survey England and Wales - <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/drugmisuseinenglandandwales/yearendingmarch2023>

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'³⁴.

Between December 2020 and March 2021 the government ran a call for evidence to help inform the development of its tackling VAWG strategy. The '[Tackling violence against women and girls strategy](#)' was published in July 2021, setting out three ambitions:

- to increase support for victims and survivors, ensuring they have access to quality support,
- to increase the number of perpetrators brought to justice, including an increase in the number of crimes reported to the police and increased victim engagement with the police and wider public service response,
- to reduce the prevalence of violence against women and girls.

The key areas for action included prioritising prevention, supporting victims and survivors, pursuing perpetrators and ensuring there is a 'whole system' approach, with police, the education sector, local authorities, prisons and probation services and other organisations working together effectively.³⁵

Alongside the introduction of the VAWG strategy, the Government refreshed its National Statement of Expectations (NSE)³⁶ in 2022. 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.

In addition to national strategy on VAWG, there has also been a focus on this agenda specifically for policing.

In December 2021 the National Police Chiefs' Council (NPCC) in association with the College of Policing released the national framework for delivery which aimed to improve, coordinate and standardise the policing of VAWG. The framework established three pillars of activity focused on areas policing should improve immediately: building trust and confidence, relentless pursuit of perpetrators, and safer spaces. Using this framework, all forces were then required to develop their own VAWG plans.³⁷

In February 2023, the Government made VAWG part of the Strategic Policing Requirement (SPR), recognising VAWG as a national threat alongside terrorism, serious and organised crime and child sexual abuse. The inclusion of VAWG within the SPR sets out clear expectations for local and regional

³⁴ Call to end violence against women and girls 2010. UK Government

³⁵ [Tackling violence against women and girls in the UK - House of Lords Library \(parliament.uk\)](#)

³⁶ Violence Against Women and Girls, National Statement of Expectations. December 2016. UK Government

³⁷ [vawg-framework-for-delivery.pdf \(npcc.police.uk\)](#)

police capabilities to tackle VAWG, and sets out expectations on how local forces should work together as well as collaborate with other agencies.³⁸

‘Policing Violence Against Women and Girls – The National Framework for Delivery: 2024 – 2027’³⁹ was updated in February 2024 and sets out a strategic approach based on the 4P model:



2.1.1. Position Statement on Male Victims

In 2019, the Government published its position statement on male victims of crimes traditionally considered under the VAWG umbrella, in recognition that men and boys can also be victims of domestic abuse, sexual offences, stalking and honour based abuse.

The position statement acknowledged and considered the response to:

- Identification and reporting: noting that male victims can often find it difficult to identify themselves as a victim of the crimes framed under the VAWG strategy and harmful gender norms, shame or honour, and stereotypes of masculinity and sexuality can act as barriers for male victims and survivors to seek support and can impact on reporting.
- Access to support services: noting that all victims, regardless of their gender, have the right to access specialist support. It is vital that support services are clear about what support they offer and to whom, taking a gender-informed approach; understand the harmful gender and societal norms that can act as barriers for men to engage; take into consideration the needs of the victims and survivors; and understand the gendered experiences of these crimes while recognising the need for a proportionate response.
- Prosecution: noting that while the majority of victims and survivors will not go through a formal criminal justice process, there is an aim to encourage all victims and survivors to come forward and report incidents to the police, so perpetrators can be brought to justice.

2.2. Domestic Abuse Act 2021

The Domestic Abuse Act received Royal Assent on 29 April 2021 and remains a significant piece of legislation on the response to domestic abuse across England and Wales. The Domestic Abuse Act comprises of 7 parts:⁴⁰

Part 1: Definition of domestic abuse

The Act creates, for the first time, a cross-government statutory definition of domestic abuse, which is in two parts. The first part deals with the relationship between the abuser and the abused, and the second part defines what constitutes abusive behaviour.

³⁸ [Strategic Policing Requirement \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)

³⁹ [vawg-framework-for-delivery.pdf \(npcc.police.uk\)](https://www.nationalpolicecadetcentreservice.gov.uk/vawg-framework-for-delivery.pdf)

⁴⁰ [Domestic Abuse Act 2021 \(legislation.gov.uk\)](https://www.legislation.gov.uk)

The Government sets out two criteria governing the relationship between the abuser and the abused, the first stating 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 ensuring 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.

The definition also recognises children as victims in their own right if they witness or experience the effects of domestic abuse. This definition change ensures children have the same rights as adult victims of abuse and should as a result have access to specialist services.

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 is tasked with encouraging good practice in preventing domestic abuse; identifying victims and survivors, and perpetrators of domestic abuse, as well as children affected by 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 Abuse Related Death Reviews (DARDR) (formally 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. At the time of writing, the new DAPO is currently being piloted in a number of police force areas before national roll out.

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 has enhanced special measures directions in cases involving domestic abuse, and prohibits 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, and 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 introduced two new offences:

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

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

Part 7: Miscellaneous and general

The Act enhances the approach to management of offenders, provides guidance on police disclosures, grants secure tenancies in cases of domestic abuse, issues guidance about domestic abuse and develops regulations and outlines 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 also:

- Prohibits charging for the provision of medical evidence of domestic abuse,
- Initiates a review of processing of victims' personal data for immigration practices,
- Reports on the use of contact centres in England.

2.2.1. Tackling Domestic Abuse Plan

In March 2022, the government published the 'Tackling domestic abuse plan', which aligns to the tackling violence against women and girls strategy. This plan is based on four pillars:

- Prioritising prevention: seeking to improve the understanding of what prevention measures work and which risk factors contribute to an increase risk of domestic abuse. This pillar aims to also focus on education in schools and the role of the Domestic Violence Disclosure Scheme (DVDS).
- Supporting victims: seeking to improve outcomes for victims and survivors via specialist service provision. This pillar focuses on funding for community base provision, funding the roll out of 'Domestic Abuse Matters' training to police forces, and reviewing the police response to children experiencing domestic abuse.
- Pursuing perpetrators: seeking to hold perpetrators to account and drive down the prevalence of domestic abuse and domestic homicide. This pillar focuses on measures such as an increase in tagging offenders when leaving custody, considering options for the management of offenders and funding specialist perpetrator interventions.
- A stronger system: seeking to improve coordination and collaboration between agencies and to improve data on and knowledge of domestic abuse.

2.2.2. Statutory guidance

Following the introduction of the Domestic Abuse Act 2021, a range of statutory guidance documents have been published to direct local responses:

- **Delivery of support to victims of domestic abuse in domestic abuse safe accommodation service 2021:**⁴¹ issued by the Department for Levelling Up, Housing and Communities

⁴¹ [Delivery of support to victims of domestic abuse in domestic abuse safe accommodation services - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/delivery-of-support-to-victims-of-domestic-abuse-in-domestic-abuse-safe-accommodation-services)

(DLUHC), it supports the new duties (contained in Part 4 of the 2021 Act) on relevant local authorities with the aim of ensuring victims of domestic abuse have access to the right accommodation-based support when they need it. It sets out the operation of Part 4 of the Domestic Abuse Act to be delivered by local authorities, and what they should do to fulfil their statutory responsibilities and provides further clarity on how the new duties should be delivered on the ground.

- **Domestic Abuse Statutory Guidance 2022:**⁴² issued by the Home Office to increase awareness and inform the response to domestic abuse, it also conveys standards and promotes best practice. The guidance is aimed at organisations working with victims, perpetrators and commissioning services, including the police, local authorities, and the NHS. It is also of relevance to organisations dealing with consequences of domestic abuse such as employers and financial institutions. The guidance covers areas such as: understanding domestic abuse; recognising domestic abuse; the impact of domestic abuse; different experiences, needs and related considerations; agency response to domestic abuse; and multi-agency response to domestic abuse.
- **Controlling and coercive behaviour statutory guidance 2023:**⁴³ issued by the Home Office to provide clear information on: what constitutes controlling or coercive behaviour and how to identify the offence; guidance to the police and other criminal justice agencies on circumstances where the offence applies and where other offences might be considered; guidance to the police and criminal justice agencies on the different types of evidence that can support in identifying, evidencing and charging the offence, and how this should support prosecutions and sentencing; and information on reducing risk to the victim.

2.3. Related Legislation

2.3.1. Police, Crime, Sentencing and Courts Act 2022⁴⁴

The Police, Crime, Sentencing and Courts Act was established primarily to provide police with additional powers and tools, introduce tougher sentences for the worse offenders and to improve the efficiency of the court system.

Relevant to the domestic abuse agenda, the Act brought in a new Serious Violence Duty; requiring local authorities, police, fire and rescue authorities, specified criminal justice agencies and health authorities to work together to formulate an evidence based analysis of the problems associated with serious violence in a local area, and then produce and implement a strategy detailing how they will respond to those particular issues. Included within this duty is a need to detail what actions local areas need to take collectively to reduce violent crime, including domestic abuse and sexual offences.⁴⁵

In addition, the Act extended the time limit for prosecution of common assault or battery in domestic abuse cases from 6 months to 2 years.

2.3.2. Victim and Prisoners Act 2024

The Victim and Prisoners Act received Royal Assent in May 2024, and includes a range measures for victims, including those of domestic abuse, including:

- Placing the overarching principles of the Victims' Code in primary legislation,
- Puts a duty on relevant bodies to promote awareness of the Victims' Code,

⁴² [Domestic Abuse Statutory Guidance \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/uk/government/publications/police-crime-sentencing-and-courts-bill-2021-factsheets/police-crime-sentencing-and-courts-bill-2021-serious-violence-duty-factsheet)

⁴³ [Controlling or coercive behaviour statutory guidance \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/uk/government/publications/police-crime-sentencing-and-courts-bill-2021-factsheets/police-crime-sentencing-and-courts-bill-2021-serious-violence-duty-factsheet)

⁴⁴ [Overarching Police, Crime, Sentencing and Courts Act 2022 factsheet - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/police-crime-sentencing-and-courts-bill-2021-factsheets/police-crime-sentencing-and-courts-bill-2021-serious-violence-duty-factsheet)

⁴⁵ <https://www.gov.uk/government/publications/police-crime-sentencing-and-courts-bill-2021-factsheets/police-crime-sentencing-and-courts-bill-2021-serious-violence-duty-factsheet>

- Expands the duty to keep code compliance under review,
- Introduces a requirement to publish compliance information,
- Introduces a duty on Police and Crime Commissioners, local authorities and Integrated Care Boards in England to collaborate locally when commissioning victim services,
- Retains the Victims' Commissioner's role in oversight of the Victims' Code,
- Statutory guidance about the roles of Independent Sexual Violence Advisors (ISVAs) and Independent Domestic Violence Advisors (IDVAs) roles.

The most significant element of the Act with regards the future response to domestic abuse relates to the introduction of a joint statutory duty on Police and Crime Commissioners, Integrated Care Boards and local authorities to work together when commissioning support services for victims of domestic abuse, sexual abuse and other serious violence. It is expected that this will primarily relate to the provision of community based services given the Domestic Abuse Act provides the focus on accommodation based services.

The duty requires these groups to:

- Collaborate with each other when commissioning victim support services,
- Conduct a Joint Needs Assessment to inform a joint local strategy,
- Ensure the strategy is informed by certain activities such as:
 - Existing assessments of victims' needs, including children and those with protected characteristics,
 - the views of victims, providers and other relevant groups,
 - Existing commissioning activity in the local area,
- Publish a joint local strategy on commissioning of these services,
- Review and revise the strategy on a regular basis.

At the time of writing, timescales for the implementation of the Act are unknown, however considerations for local implementation will need to be considered within the revised county domestic abuse strategy.

2.3.3 Domestic Homicide Sentencing Review

The government commissioned an independent expert, Clare Wade KC, to review sentencing in domestic homicide cases to establish whether current law and sentencing guidelines are fit for purpose and to identify options for reform. This review was initiated as a response to an open letter from the Victims' Commissioner and the Domestic Abuse Commissioner to the previous Lord Chancellor, the Right Honourable Robert Buckland MP.

The letter highlighted systemic misogyny within the criminal justice system and also identified those aspects of the criminal justice process where it was thought female victims were being routinely let down. It coincided with an ongoing campaign by the families of two women who were murdered by their male partners within their own homes where weapons in the form of knives had been readily available to the offender who could therefore not be said to have taken a knife or other weapon to the scene. If an offender who is aged 18 or over has taken a knife or other weapon to the scene of an offence intending to (a) commit any offence, or (b) have it available to use as a weapon, and (c) used that knife or other weapon when committing the murder, the starting point for the minimum term that the offender must serve in custody as part of a mandatory life sentence is much higher than it would be (all other things being equal) if the offender has not taken a knife or other weapon to the scene. There is a disparity of ten years between the respective starting points.⁴⁶

The Domestic Homicide Sentencing Review was published in March 2023 alongside an interim response from the Government. The full government response was published in July 2023,

⁴⁶ [Domestic Homicide Sentencing Review \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)

announcing a package of proposed reforms to change the law so that sentencing reflects the seriousness of domestic homicides. The package of measures in the full response includes (non-exhaustive):

- Legislative changes to give domestic murders specialist consideration in the sentencing framework for murder:
 - A history of controlling or coercive behaviour by the perpetrator against the victim will be made a statutory aggravating factor for murder.
 - A history of controlling or coercive behaviour by the victim against the perpetrator will be made a statutory mitigating factor for murder.
 - Violence which amounts to overkill will be made a statutory aggravating factor for murder.
 - Murders which take place at the end of the relationship or when the victim has expressed a desire to leave the relationship will be made a statutory aggravating factor for murder.
- A proposal to the Sentencing Council for England and Wales, that they revise their guidelines in light of both the Review and the Government's response to its recommendations.
- The Law Commission to be invited to undertake a review of the use of defences in domestic homicide cases
- A new Domestic Homicide Library to be launched by the Home Office to enable greater analysis of patterns, trends, and risk factors.
- The Crown Prosecution Service to continue to work with partners and improve mandatory training on understanding controlling and coercive behaviour.

In addition, a public consultation was launched in November 2023 (closing in March 2024) to seek views on whether there should be a starting point of 25 years for cases of murder preceded by controlling or coercive behaviour. The consultation also explored the sentencing starting point for murders committed with a knife or other weapon which was already at the scene.⁴⁷ At the time of writing, consultation responses were being analysed.

2.4. The Coordinated Community Response (CCR)⁴⁸

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:

⁴⁷ [Murder sentencing consultation - Ministry of Justice - Citizen Space](#)

⁴⁸ [In Search of Excellence: A refreshed guide to effective domestic abuse partnership work –The Coordinated Community Response \(CCR\)](#). Standing Together against Domestic Violence. 2020.

1. Survivor engagement and experience,
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.

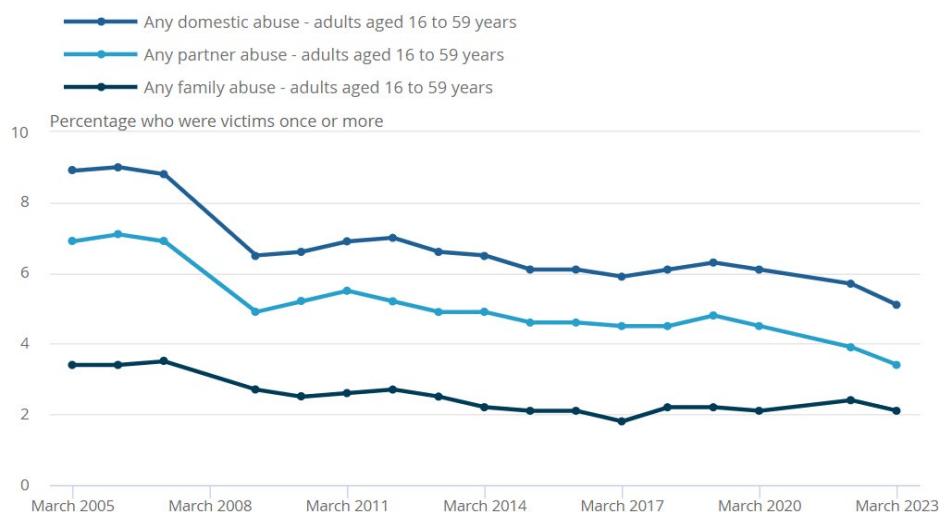
3. Prevalence of Domestic Abuse in England and Wales⁴⁹

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 preceding 12 months. This data supports our national understanding of the prevalence of certain crimes, including domestic abuse.

The CSEW relies on self-reported experiences of crime by those selected to participate. 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. This is detailed as being linked mostly to a decline in partner abuse reported to the CSEW, decreasing from 6.9% to 3.4% from 2005-2023. Family abuse, whilst seeing a decline since 2005, has shown little change in recent years. Prevalence over time is detailed in Graph 3.1. All data from the CSEW is statistically significant unless stated otherwise.

Graph 3.1.: 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 2023.



Note: 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 to enable comparisons over time

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 2023 estimated that 4.4% of adults aged 16-74 experienced domestic abuse in the last year; this equates to 2.1 million people across England and Wales. There was no significant change in the prevalence of domestic abuse experienced in the year ending March 2023 compared with the year ending March 2022.

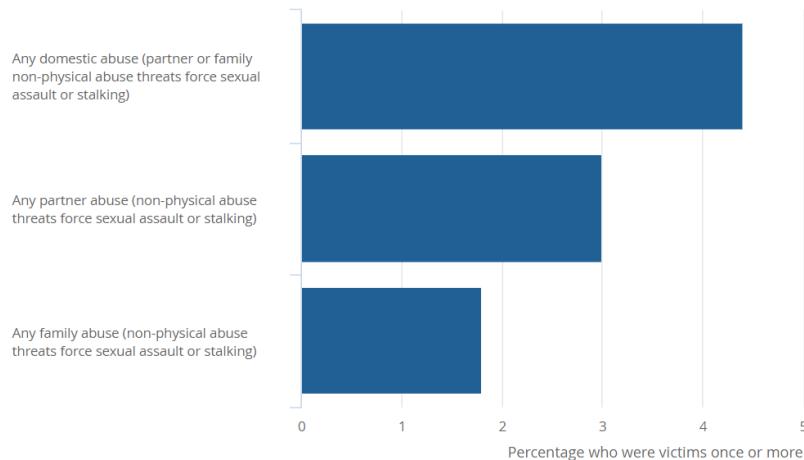
Despite the decline in prevalence data, police recorded crime nationally has remained stable from year ending March 2022 to year ending March 2023. A 14.4% increase is, however, seen when comparing to the year ending March 2020. This increase may be indicative of increased confidence

⁴⁹ Office for National Statistics (ONS): Domestic abuse prevalence and trends, England and Wales: year ending March 2023

in reporting to police and/or improvements seen in crime recording practices across many police forces nationally.

The majority of domestic abuse reported through the CSEW is partner abuse, as detailed in Graph 3.2.

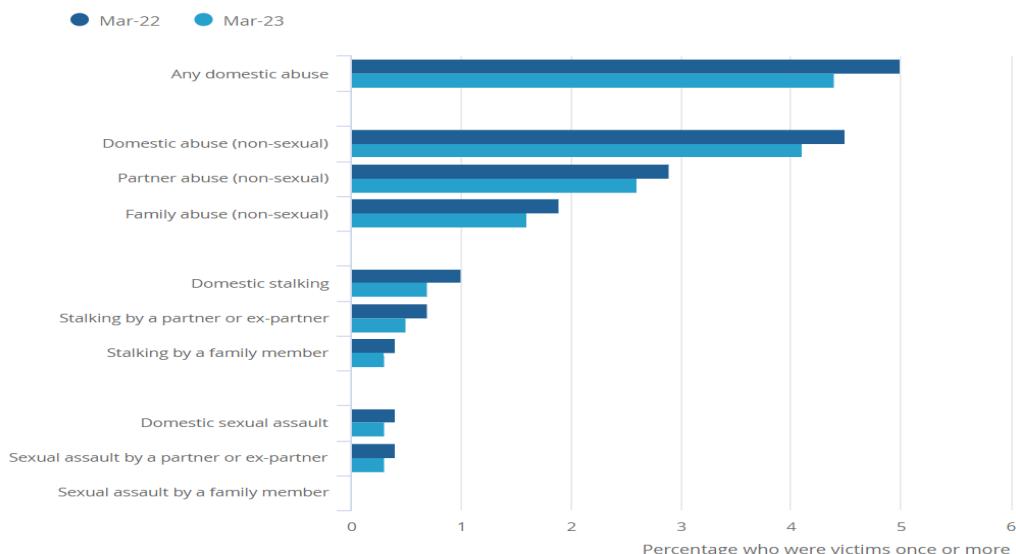
Graph 3.2.: Prevalence of domestic abuse in the last year for adults aged 16 to 74 years, by perpetrator-relationship, England and Wales, year ending March 2023



When considering the type of domestic abuse disclosed via the CSEW, non-sexual abuse makes up the highest percentage. 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. As detailed in Graph 3, it can also be seen that domestic stalking accounts for less than 1% of crimes reported to the CSEW, something which may indicate: a lack of awareness of stalking behaviours; the difficulty that can arise from differentiating between stalking and coercive and controlling behaviour and; that often stalking behaviours can take place primarily after an abusive relationship ends.

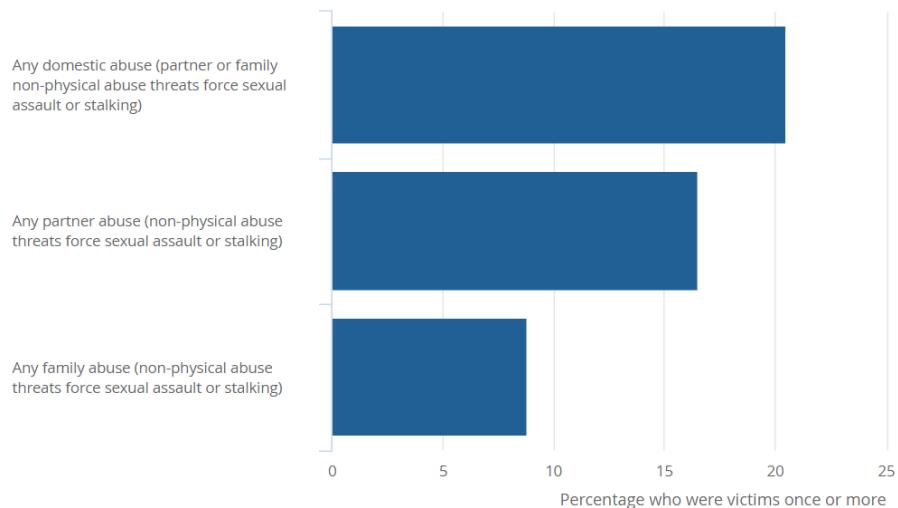
Graph 3.3 provides detail on the prevalence of domestic abuse by type of abuse.

Graph 3.3.: 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 2023



The CSEW also considers the prevalence of domestic abuse experienced since the age of 16, with an estimated 9.8 million adults aged 16-74 years in this category. This equates to a prevalence rate of approximately one in five people aged 16 years and over.

Graph 3.4.: 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 2023



For those having experienced domestic abuse since the age of 16, as with the overall prevalence data, the majority reported non-sexual domestic abuse. 18.3% of individuals reported non-sexual domestic abuse experienced since the age of 16 compared with 5.1% reporting domestic sexual assault. 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)⁵⁰

3.1.1. Age and Gender

The CSEW found that for the year ending March 2023, an estimated 1.4 million women and 751,000 men aged 16-74 years had experienced domestic abuse in the last year; this is a prevalence rate of approximately 6 in 100 women and 3 in 100 men. The greater prevalence of women and victims is seen across all types of abuse considered within the CSEW⁵¹.

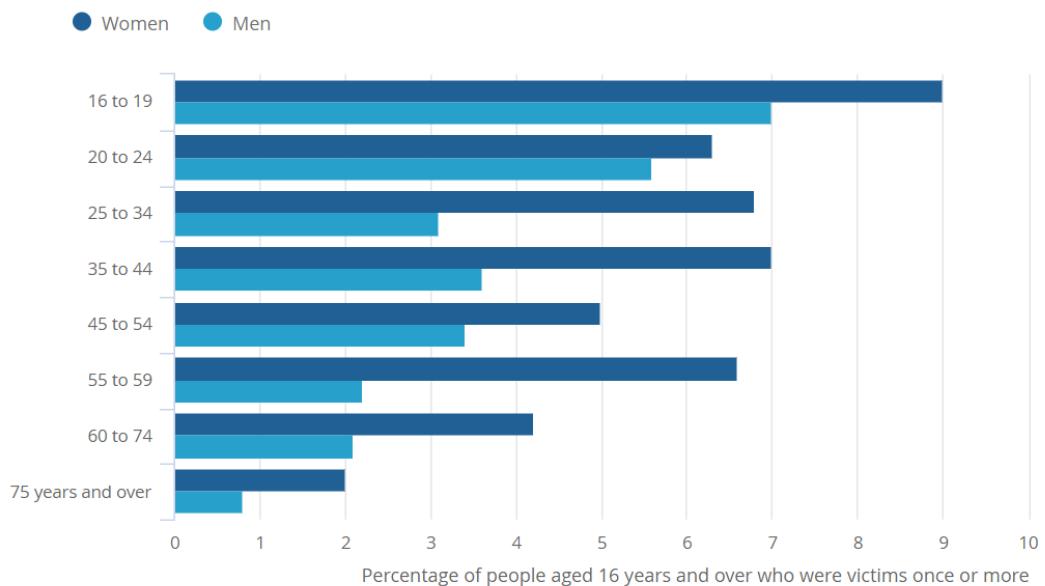
For the same time period, the CSEW showed that those aged 16-19 years were more likely to be victims of domestic abuse in the last year accounting for 8% in total (9% for women aged 16-19). For those aged 75 years and over, the percentage of victims was lower than all other age groups (1.4%). Women are more likely to be victims across all ages.

Graph 3.5. provides detail of the age breakdown for the year ending March 2023.

⁵⁰ Office for National Statistics (ONS): Domestic abuse victim characteristics, England and Wales: year ending March 2023

⁵¹ 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 3.5.: 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 2023.

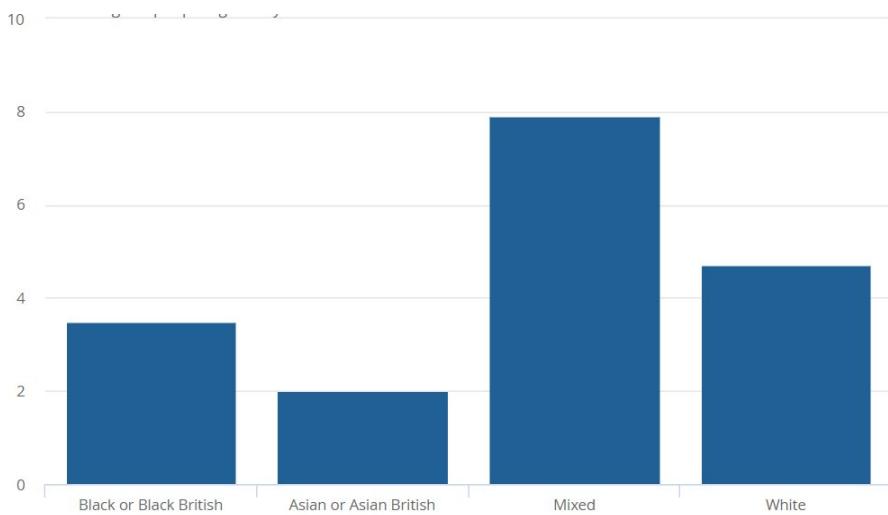


When considering gender identity, there is a significantly higher prevalence for those who identify as transgender at 15.1% compared with 4.4% of those who identify as cisgender.

3.1.2. Ethnicity

When considering the ethnicity of victims of domestic abuse, the CSEW for the year ending March 2023 showed that those in the 'mixed' ethnic group were more likely to experience domestic abuse than any other ethnic group, as detailed in Graph 3.6.

Graph 3.6.: 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 2023.



3.1.3. Marital Status

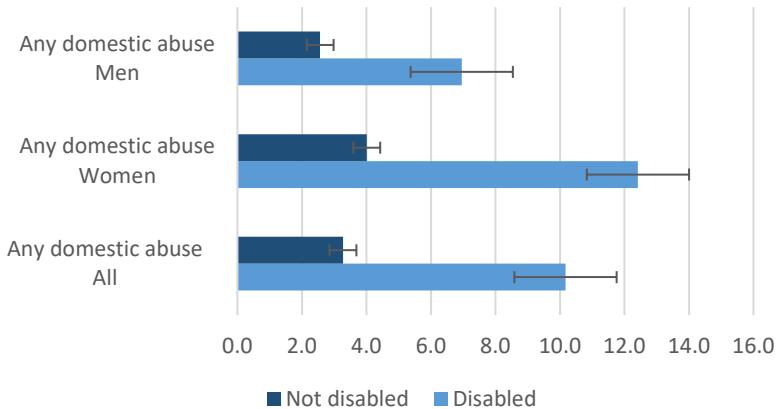
When considering the marital status of those who have experienced domestic abuse, the majority were found to be divorced or separated, with higher levels of domestic abuse experienced in these categories compared with those who were married, in a civil partnership, cohabiting, single or widowed. This may relate to the known evidence from risk assessments that separation can escalate domestic abuse. It may also demonstrate that domestic abuse can continue and even begin at the

point that an individual end their relationship and is no longer living with their partner, which is contrary to the commonly believed stereotype of domestic abuse.

3.1.4. Disability

The CSEW also demonstrates that domestic abuse is strongly linked to other vulnerabilities, with those who identify as disabled being more likely to experience domestic abuse, as illustrated in Graph 3.7.

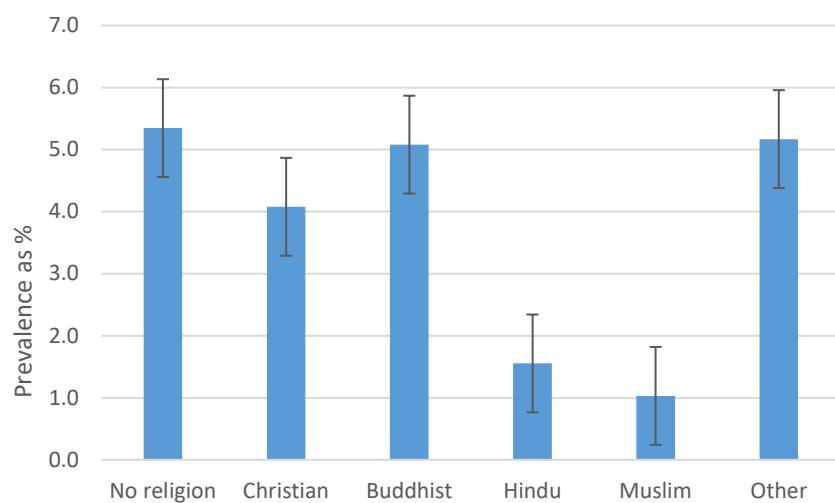
Graph 3.7.: Prevalence of domestic abuse in the last year for adults aged 16 to 74 years, by disability and sex, England and Wales, year ending March 2023.



3.1.5. Religion

When considering the prevalence of domestic abuse based on religion in the year ending March 2023, the majority of victims were noted as having no religion (5.3%) or recording their religion as 'other' (5.2%). Where a specific religion was noted, Buddhist accounted for 5.1%.

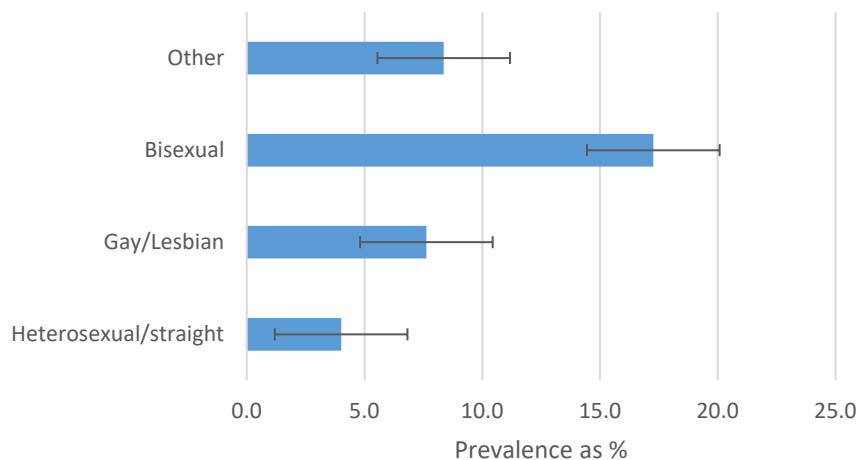
Graph 3.8.: Prevalence of domestic abuse in the last year for adults aged 16 to 74 years, by religion, England and Wales, year ending March 2023.



3.1.6. Sexual Orientation

In the year ending March 2023, the highest prevalence was for those who reported their sexual orientation as bisexual at 17.3%; higher than other sexual orientations, with those identifying as heterosexual having the lowest prevalence rate of 4%.

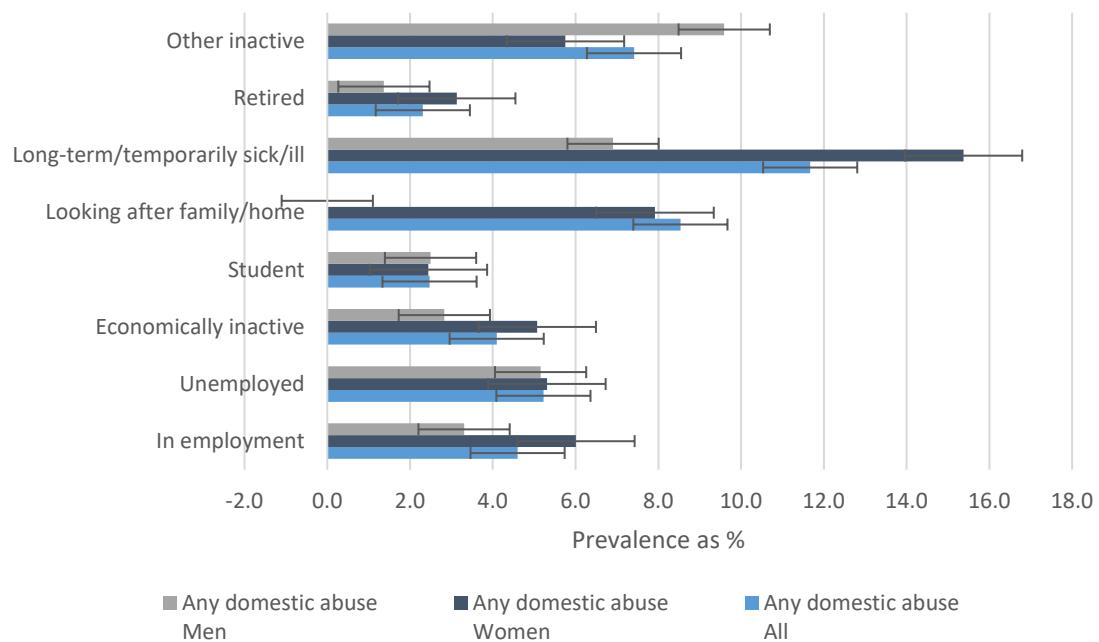
Graph 3.9.: Prevalence of domestic abuse in the last year for adults aged 16 to 74 years, by sexual orientation, England and Wales, year ending March 2023.



3.1.7. Employment and Education

When looking at the prevalence of domestic abuse based on employment status, the majority of victims within the year ending March 2023 are noted as being Long-term/temporarily sick/ill at 11.7%; this is higher for female victims at 15.4% compared with 6.9% of men. This indicates the impact that domestic abuse has on victims, with potential impacts on both their physical and mental health and preventing stable employment. Those in employment account for only 4.6%.

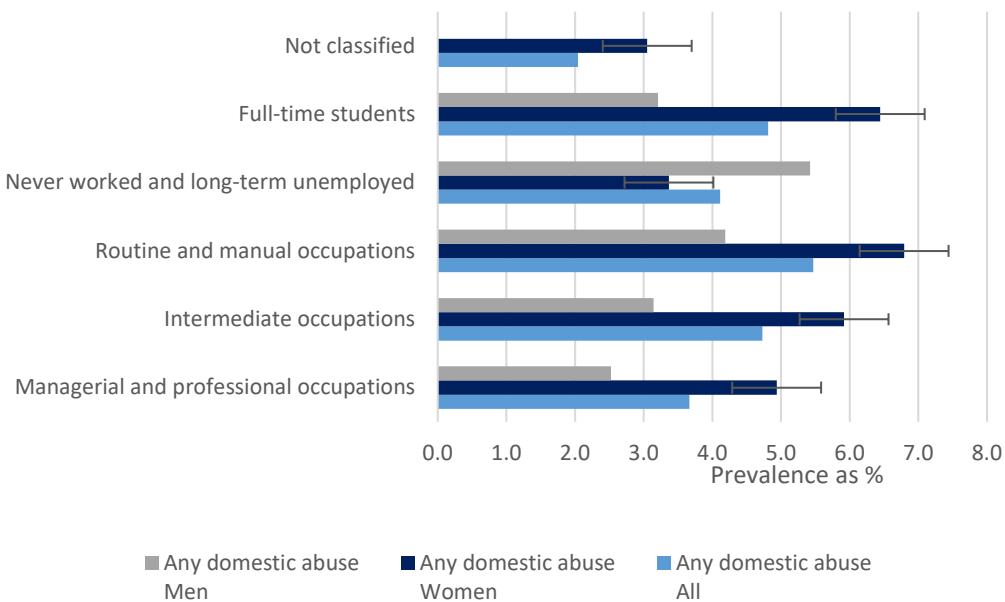
Graph 3.10.: Prevalence of domestic abuse in the last year for adults aged 16 to 74 years, by employment status and gender, England and Wales, year ending March 2023.



For those in employment, the highest prevalence was found within occupations classed as 'Routine and manual occupations' at 5.5% across both men and women. Individually women victims had the higher prevalence at 6.8% compared with men at 4.2%. Women victims have a higher prevalence

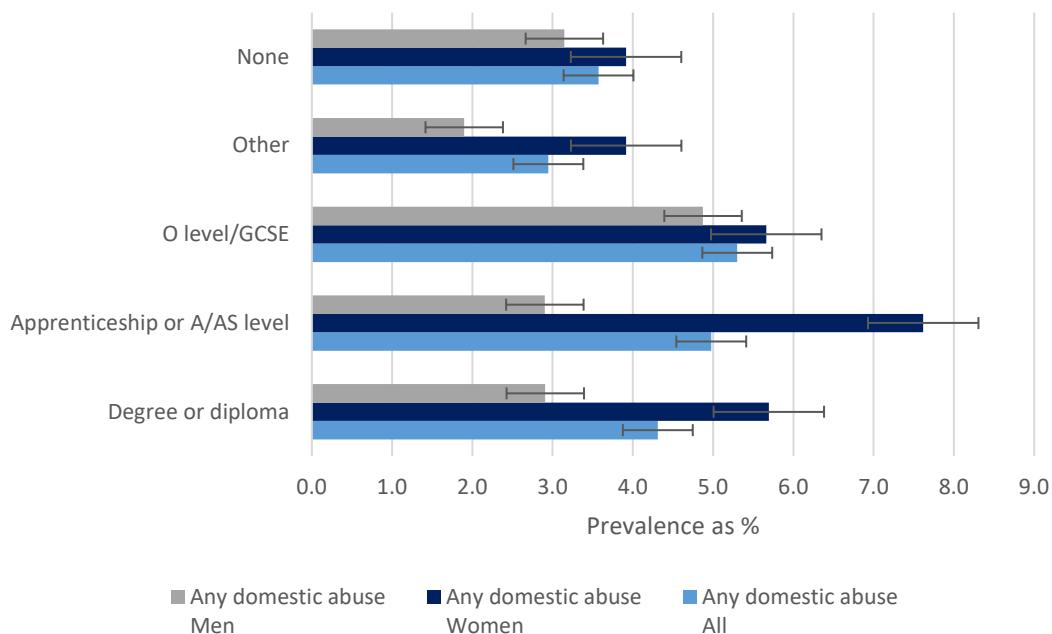
rate across all occupation types with the exception of those classed as 'Never worked and long-term unemployed' where men accounted for 5.4% compared to 3.4%.

Graph 3.11.: Prevalence of domestic abuse in the last year for adults aged 16 to 74 years, by occupation type and gender, England and Wales, year ending March 2023.



When considering the prevalence of domestic abuse based on a person's highest qualification, the majority are noted as 'O level/GCSE' at 5.3% or 'Apprenticeship or A/AS level' at 5%. This differs when introducing gender, with women recorded under the category 'Apprenticeship or A/AS level' accounting for 7.6% compared with 2.9% of men.

Graph 3.12.: Prevalence of domestic abuse in the last year for adults aged 16 to 74 years, by highest qualification and gender, England and Wales, year ending March 2023.



3.2. Police Recorded Crime in England and Wales⁵²

In the year ending March 2023, police forces in England and Wales (excluding Devon and Cornwall)⁵³ recorded 1,453,867 domestic abuse-related incidents and crimes. This was a 0.8% decrease from the previous year (from 1,466,270) but remained 7.9% higher than the year ending March 2020 (from 1,347,536).

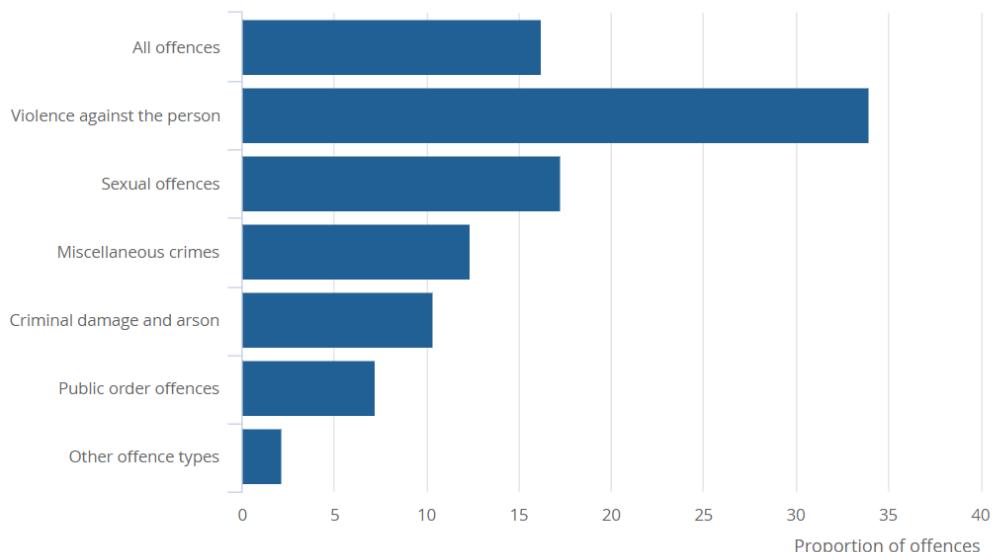
Of these incidents and crimes, 39% were not subsequently recorded as a crime⁵⁴, meaning 889,918 were recorded as domestic abuse-related crimes; a similar level to that seen in the year ending March 2022, but a 14.4% increase since year ending March 2020.

The Office for National Statistics (ONS) note that increases seen in previous year may be, in part, driven by increased willingness and confidence of victims to report domestic abuse-related crimes.

The vast majority of domestic abuse offences recorded by police are considered under the offence category 'violence against the person', followed by 'sexual offences'. The extent of domestic abuse is also clear, with 16.2% of all offences recorded by police being flagged as domestic abuse related.

Graph 3.13. provides detail on the proportion of domestic abuse offences against selected offence categories.

Graph 3.13.: Proportion of offences recorded by the police that were flagged as domestic abuse-related, by selected offence groups, England and Wales (excluding Devon and Cornwall), year ending March 2023



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 that behaviour to be treated as a crime in its own right.

In the year ending March 2023, 43,774 offences of coercive control were recorded by police in England and Wales (excluding Devon and Cornwall); this is a 6% increase from the year ending March 2022 and a 76% from the year ending March 2020. It is likely that this increase can be

⁵² [Domestic abuse prevalence and trends, England and Wales - Office for National Statistics \(ons.gov.uk\)](#)

⁵³ From CSEW - Data for Devon and Cornwall Police Force Area have not been included in the year ending March 2023 because of issues with their supply of data following the implementation of new force IT systems

⁵⁴ From CSEW - Domestic abuse-related incidents cover reports where, after initial investigation, the police have concluded that no notifiable crime was committed.

attributed to improvements in police ability to recognise incidents of coercive control and using the law accordingly.

3.3. Domestic Homicides⁵⁵

There were 370 domestic homicides recorded by the police in the three-year period between year ending March 2020 and year ending March 2022. This represents approximately one in five of all homicides where the victim was aged 16 years and over during this period.

Domestic homicide data also indicates that 67.3% were female victims which is in stark contrast to non-domestic homicide data in which 87.8% were male; demonstrating that gendered nature of domestic homicide.

Alongside this, 97% of suspects for domestic homicide were male. In the majority of female domestic homicides, the suspect was a male partner or ex-partner (74.7%), whereas in the majority of male domestic homicides, the suspect was a male family member (66.1%).

The highest proportion of domestic homicide victims were found to be aged 25-34 years, in contrast to non-domestic homicides where the majority of victims are aged 16-24. 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.

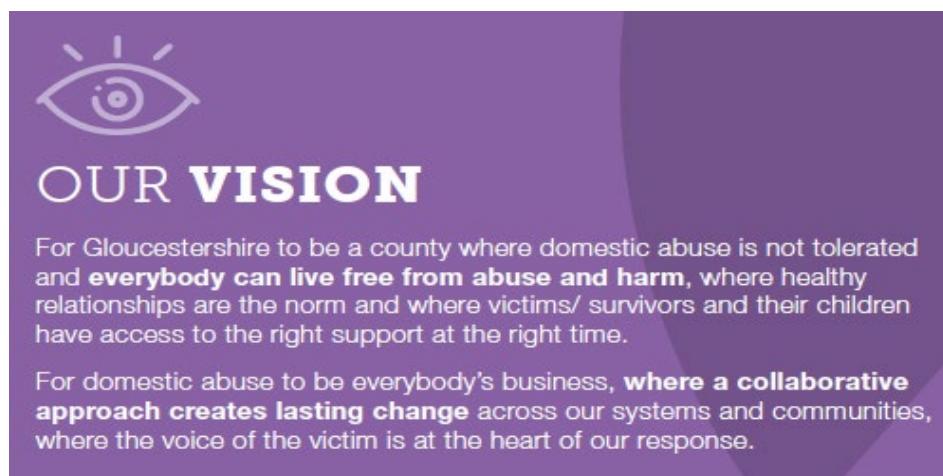
⁵⁵ [Domestic abuse prevalence and trends, England and Wales - Office for National Statistics \(ons.gov.uk\)](https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/datasets/domesticabuseprevalenceandtrendsenglandandwales)

4. Gloucestershire's Approach to Domestic Abuse

4.1. Local strategy

The Gloucestershire Domestic Abuse Strategy 2021 – 2024 was created and published in September 2021 in response to the requirements set out in the Domestic Abuse Act 2021. Whilst the statutory requirement to develop a local strategy is focused on the provision of support within safe accommodation for victims of domestic abuse, a local decision was taken to develop a broader strategy that also considers community-based provision.

The local strategy was developed by the County Domestic Abuse Local Partnership Board (DA LPB) and was informed by the Gloucestershire Domestic Abuse Needs Assessment 2021, as well as through the voice of local survivors via a countywide consultation. The collective vision for the county, set out in the Gloucestershire Domestic Abuse Strategy 2021 – 2024, was;



This vision, and the countywide approach to tackling domestic abuse is underpinned by three core principles:

- We will respond to our local need based on a needs assessment and lessons learnt from domestic homicide reviews.
- We will ensure the voice of the victim is at the heart of our response.
- We will work collaboratively to promote a consistent response to domestic abuse across our agencies and communities.

The vision and principles are then put into action through work streams that focus on five priority areas:



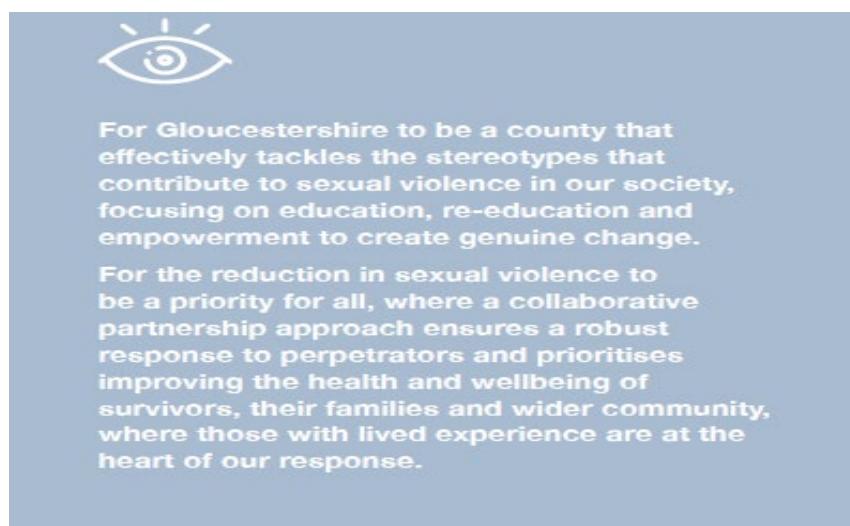
The delivery of this strategy has been outlined in a 200 action delivery plan that has included a range of activities and outcomes such as (non-exhaustive list):

- Evaluating provision of healthy relationships work in schools.
- Development of a countywide training pathway.
- Development of a communication strategy.
- Creation of a domestic abuse champions network in rural districts and policing.
- Assessment of local needs to respond to children and victims of domestic abuse.
- Co-location of domestic abuse specialists within housing, health and policing.
- Development of guidance for ensuring organisational policies on responding to domestic abuse.
- Ongoing development of professionals' guidance.
- Commissioning of specialist victim services to increase provision and funding bids to bring more funding into the county.
- Roll out of specialist training.
- Roll out of DA Matters to police.
- Development of a consultation network to ensure survivor voice drives local activity.
- Development of a model to manage highest risk offenders.
- Ongoing learning from Domestic Abuse Related Death Reviews (DARDRs) (previously Domestic Homicide Reviews (DHRs)).
- Commissioning of a new therapeutic service for victims.
- Re-commissioning of Places of Safety to increase number of dispersed units.

4.1.1. Sexual Violence Partnership

In 2019 the Sexual Violence Partnership (SVP) was created, separating out the sexual violence agenda from domestic abuse to ensure it receives its own specific focus. While the SVP has its own strategy and delivery plan, the work of the SVP is aligned to the DA LPB in recognition of the links between domestic abuse and sexual violence.

The collective vision for the county set out in the Gloucestershire Sexual Violence Strategy 2023 – 2026 was;



As with the domestic abuse strategy, the SVP will focus its activity across five priority areas and, wherever possible, conduct joint activity with the DA LPB. The five priorities for the SVP are:



4.2. Gloucestershire commissioning of specialist services

Since 2018, the commissioning of specialist services in Gloucestershire has been conducted through a joint commissioning framework, led by Gloucestershire County Council in conjunction with Gloucestershire's Office of the Police and Crime Commissioner (OPCC) and Gloucestershire's Integrated Care Board (ICB).

Whilst this framework has now come to an end, the commitment to commission jointly remains, and a number of specialist services commissioned during the lifetime of the framework remain in place. The current specialist service provision for the county includes:

Community Based Specialist Domestic Abuse Service

The main provision of specialist domestic abuse support for victims is the Gloucestershire Domestic Abuse Support Service (GDASS), provided GreenSquareAccord Ltd. This service is commissioned to provide within its core contract:

- Support to all victims of domestic abuse aged 16+, both male and female and from all protected characteristic groups (including LGBTQ+).
- 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 dedicated court IDVAs.
 - Support service to the Multi-agency Safeguarding Hub (MASH).
- Support to victims in safe accommodation including Places of Safety and target hardened properties.
- 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, including a professionals' helpline.
- Community awareness raising and engagement.

This service is commissioned by Gloucestershire County Council, with investment from the OPCC, to provide Court IDVA support as well as the use of MHCLG grant funding in relation to the delivery of support in safe accommodation.

In addition to the core service, a number of other services are commissioned within the GDASS service:

- Health based provision commissioned by the ICB:
 - Health IDVAs: Based within Gloucestershire Royal Hospital (GRH) and Cheltenham General Hospital (CGH), health IDVAs provide intervention to those experiencing domestic abuse at the earliest opportunity when they attend hospital. The health IDVAs also provide training to hospital staff.

- GP Development Workers (GPDWs): Supporting GP surgeries to identify and train domestic abuse champions and developing links into the GDASS service for victims. The GPDWs also support surgeries to become safe spaces for disclosures of DA.
- New pilot IDVA roles commissioned by the OPCC with funding provided by the Ministry of Justice (MoJ):
 - Response IDVAs: Working alongside the police to provide support to victims that the police or other agencies may struggle to engage; supporting the safeguarding of victims where an offender is being released from prison and; supporting victims who receive a disclosure under the Domestic Violence Disclosure Scheme (DVDS). The response IDVAs have also provided training to police as part of the roll out of DA Matters.
 - Mental Health IDVAs (MHIDVAs): Based within Gloucestershire Health and Care (GHC) NHS Trust to support victims of domestic abuse who are engaged with mental health services. The MHIDVAs also provides training to mental health professionals.
- Rural Champions network funded by the rural district councils (Cotswold District Council, Forest of Dean District Council, Stroud District Council and Tewkesbury Borough Council): Providing training and building a network of community and professionals domestic abuse champions within Stroud, Cotswolds, Forest of Dean and Tewksbury.

Training Support

Training provision funded by the county council and district councils has been provided by GreenSquareAccord (the same provider as the GDASS service). This training included DASH (Domestic Abuse, Stalking and Honour Based Violence) training and DA domestic abuse awareness training, provided to 1000 professionals across the county to ensure an understanding of domestic abuse, how to risk assess and how to safety plan.

Accommodation Based Support

As part of the statutory duty under the Domestic Abuse Act 2021, local areas have received annual funding from the Ministry of Housing, Communities & Local Government (MHCLG)⁵⁶ to provide support within safe accommodation for victims of domestic abuse.

The provision of both safe accommodation and the support within that accommodation includes the following provision within Gloucestershire:

- Stroud Beresford Women's Refuge: provides the only refuge in Gloucestershire, which can accommodate 9 households including up to 22 children at any one time.
- Places of Safety: a dispersed accommodation-based support that currently provides 19 dispersed units, with work ongoing to increase to 36 units by the end of the contract.
- Target Hardening and Sanctuary Scheme: provides additional security measures to enable a victim of domestic abuse to remain within their own home if they wish to and it is safe to do so.
- GDASS provide domestic abuse support to victims accessing Places of Safety and target hardening.
- Gloucestershire Healing and Empowerment service: provides therapeutic support for adult victims of domestic abuse who are living in safe accommodation.

Addressing Perpetrator Behaviour

Positive Relationships Gloucestershire (PRG), provided by FearFree, is a behavioural change perpetrator service commissioned by Gloucestershire County Council, OPCC and ICB. The service provides:

⁵⁶ Formally the Department of Levelling up Housing and Communities (DLUHC).

- An accredited domestic violence prevention programme (DVPP), which is a behavioural change group programme for male perpetrators of domestic abuse.
- 1:1 behavioural change work with female perpetrators of domestic abuse 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 perpetrators completing behaviour change work.

In addition to the main perpetrator service, the OPCC has commissioned, via Home Office funding, the roll out of Domestic Abuse Routine Enquiry (DARE) training, provided by the Hampton Trust. The training provides professionals with the tools they need to identify, explore and engage domestic abuse perpetrators so they can be successfully referred on to specialist local services.

Children and Young People

Services for children and young people have recently been considered within a dedicated needs assessment in 2023. As a result, a number of recommendations for future services provision are being considered. At present, services for children and young people impacted by domestic abuse include:

- Safe Teenage Relationship Education & Empowerment Team (STREET), provided by Victim Support is commissioned by the county council with additional funding from the OPCC (MoJ funding). The service provides countywide support to young people aged 13-19 affected by domestic abuse through:
 - Experience of teenage relationship abuse.
 - Witnessing and affected by domestic abuse in the home.
 - Displaying harmful behaviours in their own relationships.
 - 1:1 support.
 - Evidence based group programmes the Recovery Toolkit and the Dating Detox.
- Children and Family Centres (C&FCs) provide a range of group work sessions for those experiencing domestic abuse, including Freedom Programme, Phoenix and Healthy Relationships. Alongside this, they offer support to child and parent that includes:
 - You, me and Mum.
 - Helping Hands.
 - Trauma recovery combined toolkit for domestic abuse for adults, children and young people.
- Therapeutic support for children and young people within safe accommodation is currently being commissioned.

Stalking

An Independent Stalking Advocacy Caseworker (ISAC) service is provided by FearFree and commissioned by the OPCC. This service is designed to provide support to high risk victims of stalking, primarily for non-domestic abuse cases, but also works alongside GDASS for high risk domestic abuse related stalking cases.

In addition, Victim Support are commissioned to provide support to stalking victims at standard and medium risk.

4.3. Local partnership structure

The Gloucestershire partnership structure was redeveloped in 2021 in response to the Domestic Abuse Act and the statutory duty placed on local authorities to set up a local partnership board.

The DA LPB 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.
- Develops a multi-agency action plan to fulfil the strategy and drive forward activity.
- Completes ongoing assessments of need and demand and develops potential solutions/new approaches.
- Ensures the voice of the victim/survivor is reflected in local activity.
- Monitors and evaluates 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 Network which:

- Ensures survivor voice is considered through the work of the partnership.
- Conducts bespoke consultation to ensure survivor voice is built in to commissioning decisions.
- Looks to engage with a broad range of survivors to ensure the voice of survivors gathered is reflective of Gloucestershire communities.

This work is led by a dedicated Consultation Officer and is a shared resource with the county Sexual Violence Partnership.

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

5. Domestic Abuse Crimes in Gloucestershire

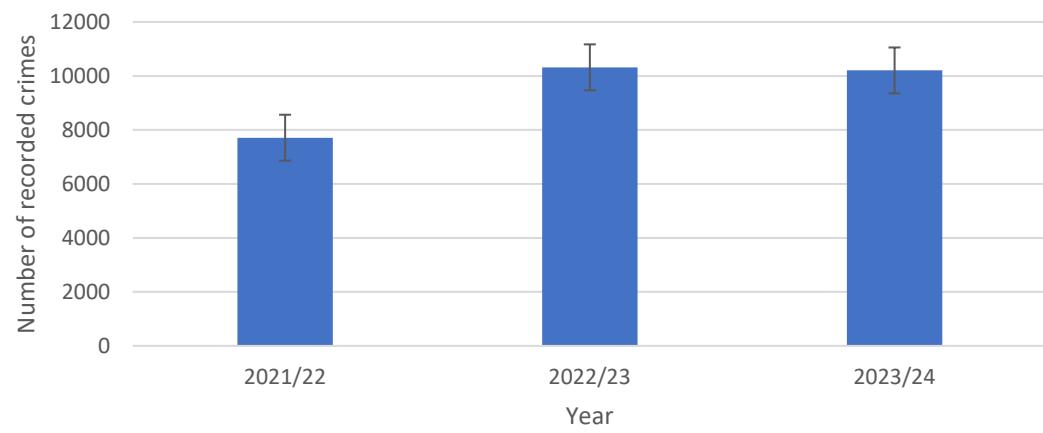
The data presented in this section of the needs assessment covers domestic abuse related crimes data in Gloucestershire for years 2021/22, 2022/23 and 2023/24.

Domestic abuse recorded crimes in Gloucestershire show a 32% increase from 2021/22; remaining consistent for 22/23 and 23/24. Whilst increases have been seen since the previous needs assessment and data presented from 2018/19, data from 22/23 to 23/24 is indicating a slight downward trend (as detailed below in Graph 5.2) and requires further monitoring.

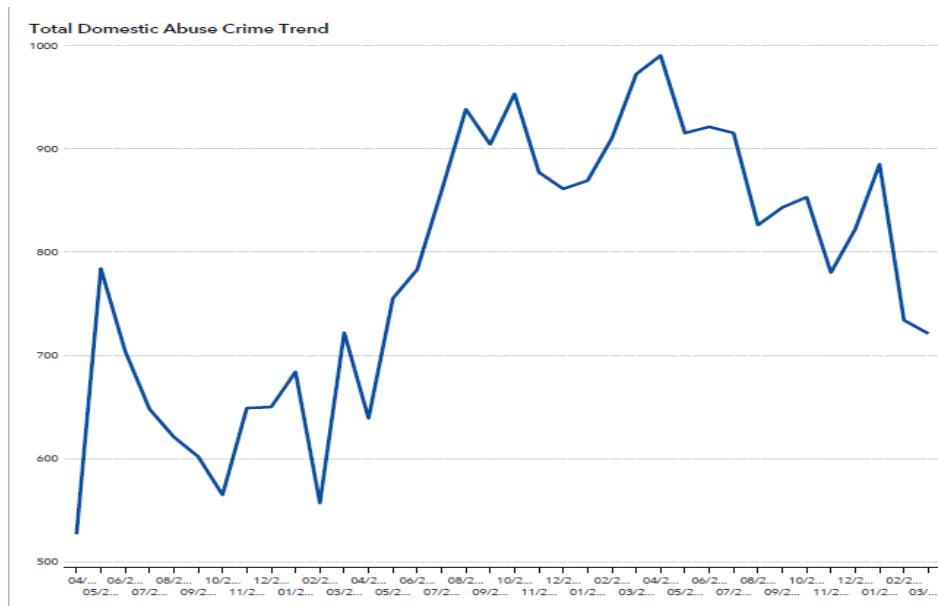
Despite the slight downward trend, crimes tagged as domestic abuse account for 19% of all crimes reported to Gloucestershire Constabulary; an increase from the 13% seen in the 2021 needs assessment. In addition, for 2023/24, 38% of 'Violence Against the Person' crimes are tagged as DA (38% in 2021 needs assessment).

The indicative downward trend seen below in Graph 5.2 is consistent with prevalence data nationally and may also be suggestive of previous improvements in crime recording now being business as usual. It is still, however, well understood that domestic abuse remains an under reported crime, so further monitoring of the trend is required and consideration needs to be given as to the potential reasons if this downward trend continues.

Graph 5.1.: Number of domestic abuse recorded crimes in Gloucestershire for years 21/22, 22/23 and 23/24



Graph 5.2.: DA recorded crime trend from April 2021-March 2024



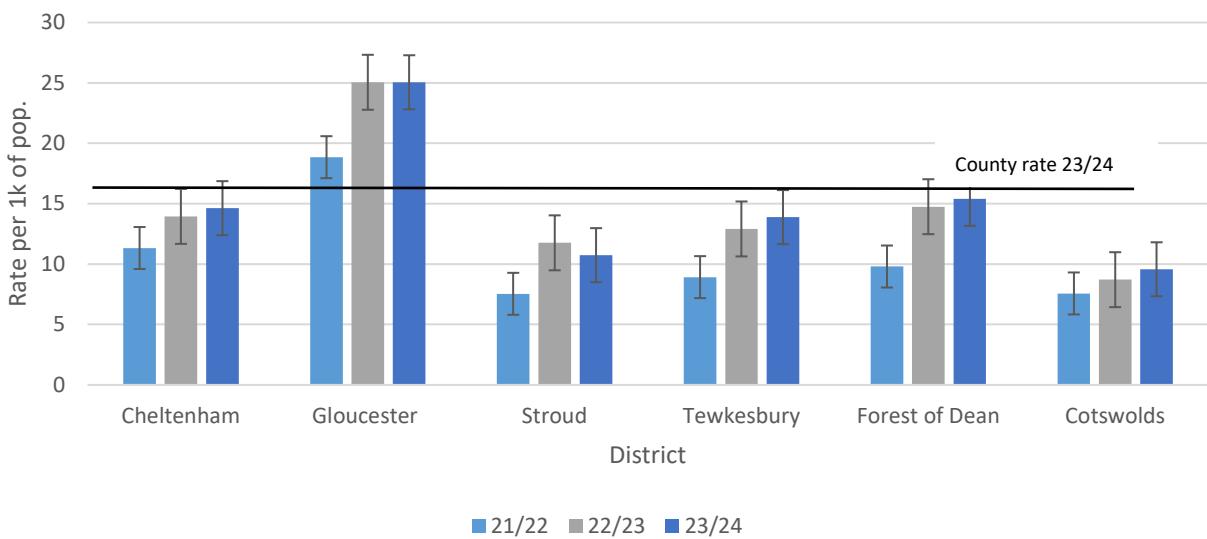
When considering the rate of domestic abuse crimes in Gloucestershire, this has increased from 8.25 per 1,000 in 2020/21 to 15.8 per 1,000 in 2023/24. This increase is aligned to the improvements seen in crime recording in that time despite the downward trend in reporting.

Table 5.1.: Rate of domestic abuse crimes in Gloucestershire per 1,000 of the population for years 20/21, 21/22, 22/23 and 23/24.

Year	2020/2021	2021/2022	2022/2023	2023/2024
Rate of domestic abuse crimes in Gloucestershire per 1,000 of the population.	8.25	11.96	16	15.82

The highest rate of domestic abuse crimes is within Gloucester district, which is considerably higher than seen for Gloucestershire as a whole, with a rate of 25.05 domestic abuse crimes per 1,000 of the population in 2023/24. As detailed in graph 5.3, the rate of domestic abuse crimes is consistently higher in Gloucester year on year. The Forest of Dean is now noted as having the second highest rate of domestic abuse reported crimes per 1,000 population, though statistically similar to Cheltenham and Tewksbury, it is almost in line with the county average of 15.4 (23/24).

Graph 5.3.: Domestic Abuse Recorded Crime Rate per District for years 21/22, 22/23 and 23/24

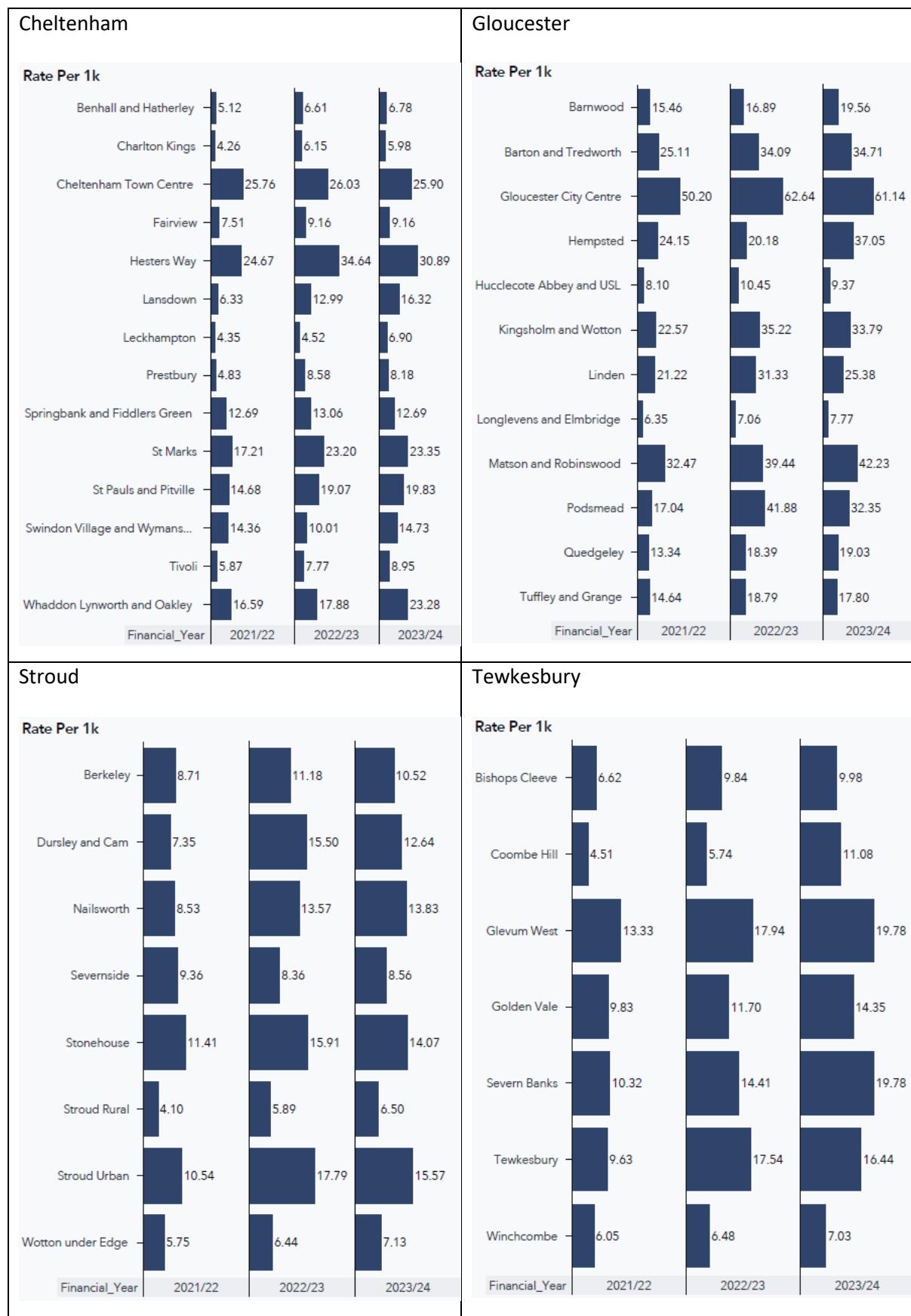


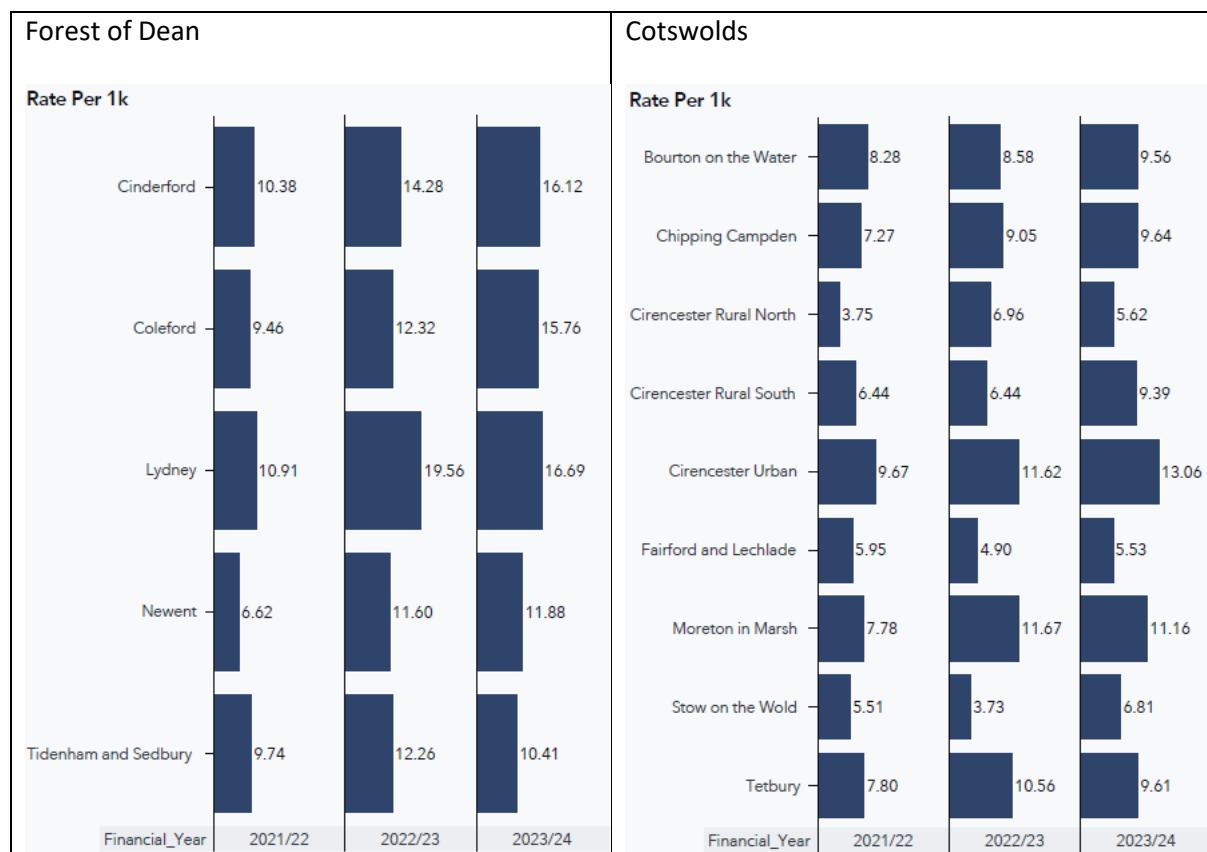
The higher rate of domestic abuse recorded crime in Gloucester is to be expected, as the more urban areas of the county have greater access to services in order to report domestic abuse more easily. It is an area that is also more densely populated, and may increase the awareness of domestic abuse occurring 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 higher than in previous years. This increase could be viewed as encouraging that a more rural district within the county is able to enable higher levels of reporting of domestic abuse to the police than other areas in the county.

Within each district, the rate of domestic abuse varies across different policing communities as outlined below.

Table 5.2: Rate of domestic abuse at police community level per district for years 2021/22-2023/24





Across all six districts, the below policing communities all have a rate of domestic abuse per 1,000 of the population that is higher than the countywide average in 2023/24. The policing communities listed all have a number of Lower Super Output Areas (LSOAs) within them. When looking at the LSOAs, it is possible to then consider the Index of Multiple Deprivation (IMD). Table 5.2 below details the policing communities with the highest rate of domestic abuse and the IMD score for each LSOA; 1 being the most deprived and 10 the least. Those highlighted are areas within an IMD score of 5 or below, indicating the most deprived areas in Gloucestershire.

The Index of Multiple Deprivation 2019 (IMD 2019) is the official measure of relative deprivation for small areas (Lower Super Output Areas – LSOAs) 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%)

Table 5.3: Gloucestershire policing communities with the highest rate of domestic abuse for 23/24 compared with Index of Multiple Deprivation (IMD).

Policing Community with highest rate of domestic abuse	Lower Super Output Areas (LSOA)	IMD Score (1=most deprived, 10=least deprived)
Cheltenham Town Centre	ALL SAINTS 3 COLLEGE 2 LANSDOWN 4 LANSDOWN 3	5 7 7 6
Lansdown	LANSDOWN 2 LANSDOWN 1	9 4
St Marks	St MARK'S 2 St MARK'S 1 St MARK'S 4 St MARK'S 3 St PETER'S 2 St PETER'S 1 St PETER'S 4 St PETER'S 3	5 1 5 4 4 6 6 3
St Pauls and Pitville	St PAUL'S 4 St PAUL'S 1 St PAUL'S 2 St PAUL'S 3	6 4 1 3
Whaddon, Lynworth and Oakley	OAKLEY 3 OAKLEY 4 OAKLEY 1 PITTVILLE 1 PITTVILLE 3 PITTVILLE 2	2 3 2 8 8 9
Glevum West	BADGEWORTH BROCKWORTH WEST 1 BROCKWORTH EAST BROCKWORTH WEST 2 BROCKWORTH WEST 3 CHURCHDOWN BROOKFIELD HUCCLECOTE 3 SHURDINGTON	5 4 4 8 8 7 6
Severn Banks	INNSWORTH 1 HIGHNAM WITH HAW BRIDGE 3	5 7
Tewkesbury	ISBOURNE 2 TEWKESBURY EAST 1 NORTHWAY 1 NORTHWAY 2 NORTHWAY 3 TEWKESBURY EAST 3 TEWKESBURY SOUTH 2 TEWKESBURY SOUTH 1 TEWKESBURY SOUTH 3 TEWKESBURY NORTH AND TWYNING 1 TEWKESBURY SOUTH 4 TEWKESBURY NORTH AND TWYNING 2 TEWKESBURY NORTH AND TWYNING 3 TEWKESBURY EAST 2	8 9 4 8 8 9 3 8 2 5 7 10 8 10
Cinderford	NEWNHAM 1 LONGHOPE AND HUNTER 1 CINDERFORD EAST 1 CINDERFORD EAST 2 CINDERFORD WEST 3 CINDERFORD WEST 2 CINDERFORD WEST 1 RUSPIDGE 1 RUSPIDGE 2 MITCHELDEAN, RUARDEAN , DRYBROOK 4 MITCHELDEAN, RUARDEAN ,DRYBROOK 5 LYDBROOK MITCHELDEAN, RUARDEAN ,DRYBROOK 3 MITCHELDEAN, RUARDEAN, DRYBROOK 2 MITCHELDEAN, RUARDEAN, DRYBROOK 1 NEWNHAM 2 WESTBURY ON SEVERN	4 7 6 3 4 7 1 6 5 7 4 6 6 8 5 4 5
Lydney	LYDNEY WEST AND AYLBURTON 2	5

	LYDNEY WEST AND AYLBURTON 1 BREAM 1 BREAM 2 TIDENHAM 5 LYDNEY EAST 1 LYDNEY EAST 2 LYDNEY EAST 3 LYDNEY NORTH ST BRIAVELS	7 5 7 7 3 8 3 8 6
Barton and Tredworth	BARTON AND TREDWORTH 2 BARTON AND TREDWORTH 4 BARTON AND TREDWORTH 1 BARTON AND TREDWORTH 5 BARTON AND TREDWORTH 6 BARTON AND TREDWORTH 7 BARTON AND TREDWORTH 3 MATSON AND ROBINSWOOD 5 MATSON AND ROBINSWOOD 3 MORELAND 4 TUFFLEY 1	2 1 2 2 3 3 2 1 5 1 6
Gloucester City Centre	WESTGATE 5 WESTGATE 4 WESTGATE 1	1 2 1
Hempsted	WESTGATE 2	6
Kingsholm and Wotton	KINGSHOLM AND WOTTON 2 KINGSHOLM AND WOTTON 3 KINGSHOLM AND WOTTON 1 KINGSHOLM AND WOTTON 4	4 1 3 5
Linden	MORELAND 5 MORELAND 7 MORELAND 1 MORELAND 3 MORELAND 2 MORELAND 6	5 2 4 2 5 4
Matson and Robinswood	MATSON AND ROBINSWOOD 4 MATSON AND ROBINSWOOD 2 MATSON AND ROBINSWOOD 1 MATSON AND ROBINSWOOD 7 MATSON AND ROBINSWOOD 6	2 2 1 4 2
Podsmead	PODSMEA 1 PODSMEA 2	1 5
Quedgeley	QUEDGELEY FIELDCOURT 4 QUEDGELEY FIELDCOURT 1 QUEDGELEY FIELDCOURT 2 QUEDGELEY FIELDCOURT 6 QUEDGELEY SEVERN VALE 1 QUEDGELEY SEVERN VALE 2 QUEDGELEY SEVERN VALE 4 QUEDGELEY SEVERN VALE 3 KINGSWAY 1 KINGSWAY 2 KINGSWAY 3 HARDWICKE 1 HARDWICKE 2 HARDWICKE 3	6 8 7 6 10 9 9 6 6 6 9 6 8
Tuffley and Grange	GRANGE 1 GRANGE 4 GRANGE 3 GRANGE 2 TUFFLEY 4 TUFFLEY 3 TUFFLEY 2	6 7 4 8 1 7 5

As demonstrated in Table 5.2, there are some links in Gloucestershire between higher rates of reported domestic abuse and deprivation.

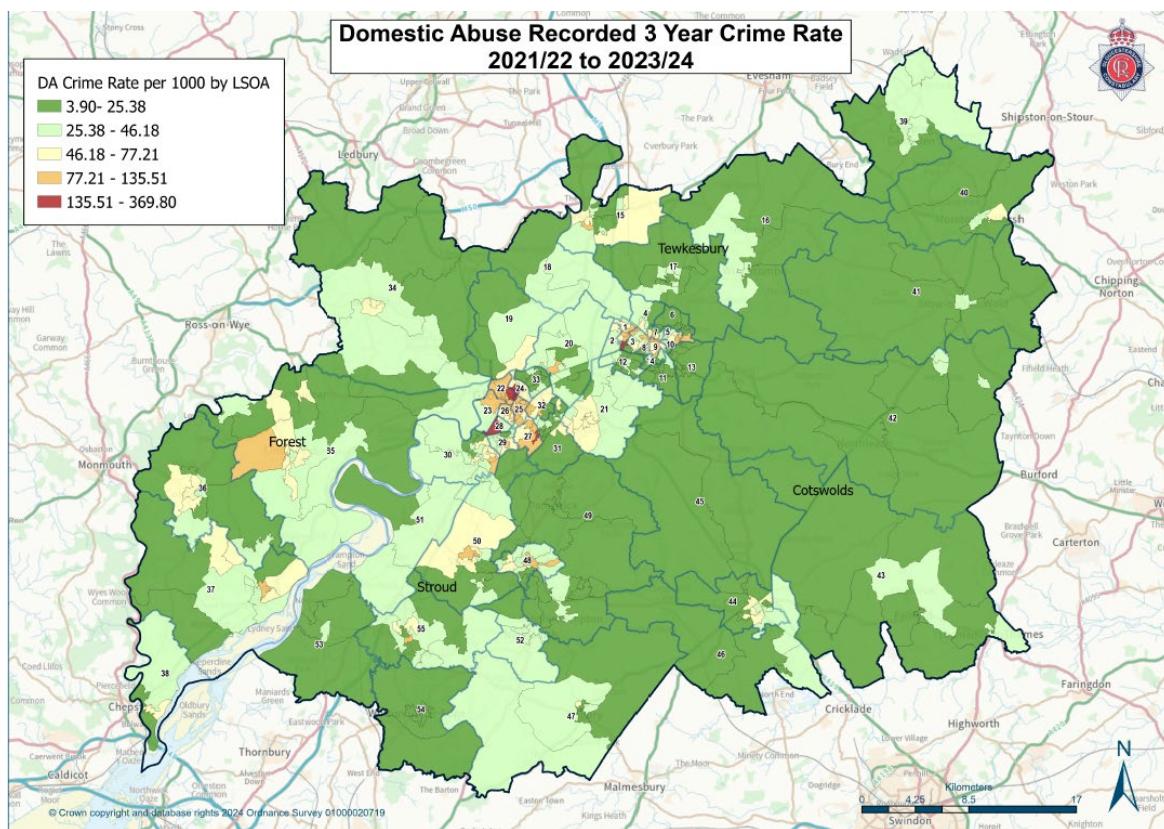
The link between deprivation and the experience of domestic abuse was found within a study conducted by University of Bristol in 2019. The study found that 'Women who spend longer periods of their early lives in less affluent neighbourhoods are at greater risk of experiencing violence during their early adulthoods at the hands of their intimate partners'⁵⁷. This experience of intimate partner abuse was 36% more likely for those women who had lived within the most deprived neighbourhoods and they were also more likely to experience more frequent abuse.

It is important to note that areas identified via the IMD are likely to receive a greater focus from statutory agencies such as health, police, education and social care. As such, the identification of domestic abuse in these areas may be easier. This link therefore does not mean that domestic abuse does not happen in more affluent areas of the county, but it may be less likely to be identified or reported.

The highest rate of domestic abuse in any policing community is found in Gloucester City Centre. Whilst this aligns to the most deprived areas of the county, there is also a potential link to be considered where domestic abuse takes place in public, possibly linked to the night time economy; something that could be considered as part of wider violence prevention activity.

The below map highlights the 3 yearly rate of domestic abuse crime in Gloucestershire.

Map 5.1.: Domestic abuse 3 year crime rate across Gloucestershire communities from 2021/22 to 2023/24.



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,

⁵⁷ [November: deprived neighbourhood domestic violence | News and features | University of Bristol](#)

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.

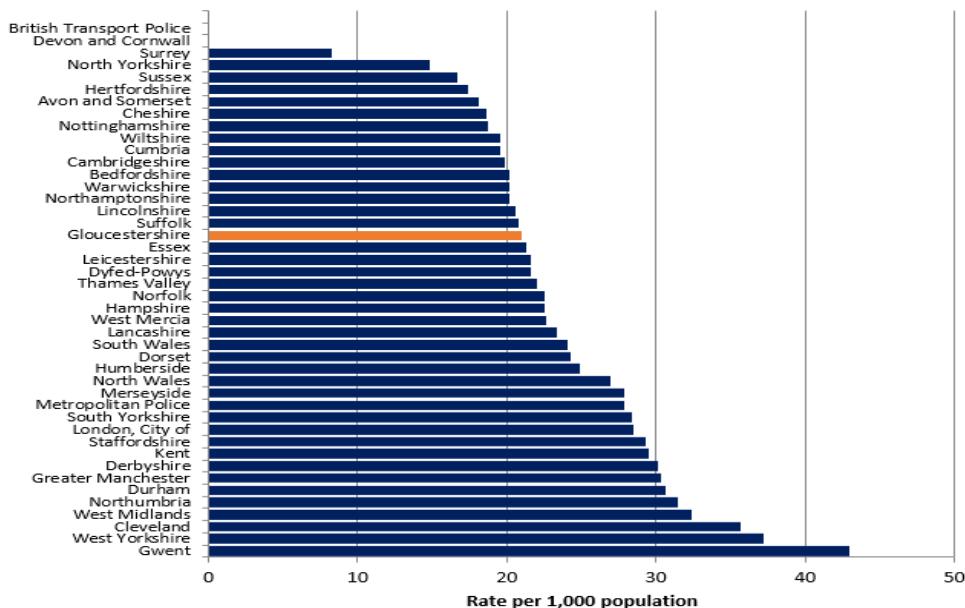
Those communities with lower levels of recorded domestic abuse may need a greater focus on awareness raising, access to services and community engagement to encourage disclosure of domestic abuse and reporting. In these communities it is likely that domestic abuse is happening, but is more hidden than 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 2023⁵⁸. As national data for the year ending March 2024 is not yet available at the time of writing, some comparisons will not accurately reflect Gloucestershire's current performance; as such, wherever possible, current performance will be referenced.

When considering the rate of combined domestic abuse related incidents and crimes recorded by police, Gloucestershire recorded a rate of 21 incidents and crimes per 1,000 of the population, placing Gloucestershire as a force with lower rate of domestic abuse across England and Wales. This has, however, increased from a rate of 17 in the year ending March 2020, as detailed in the previous needs assessment, showing an increase.

Graph 5.4.: Rate of domestic abuse related combined incidents and crimes recorded by the police, by police force area. ONS, year ending March 2023.

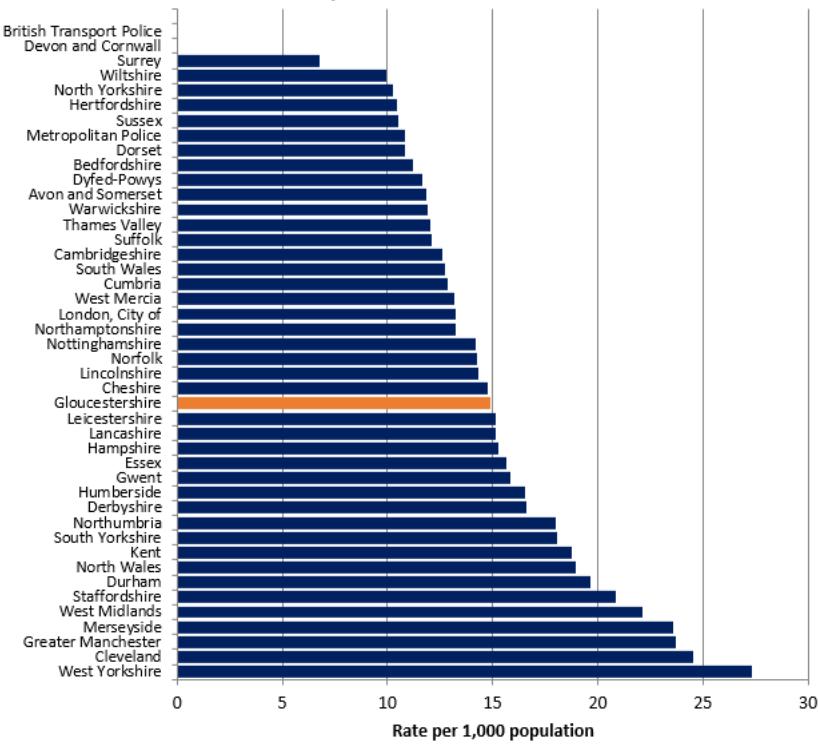


When considering the rate of recorded crime in comparison to other forces however, Gloucestershire is performing well, placing the force in the mid range. This is likely due to crime recording improvements made in Gloucestershire Constabulary over recent years, demonstrating an improvement in identifying domestic abuse related crimes within incidents reported.

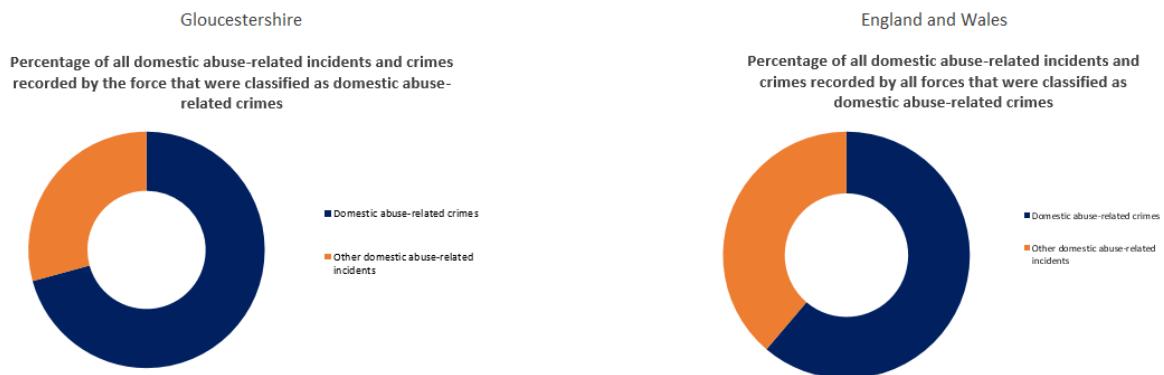
⁵⁸ [Domestic abuse in England and Wales – Data tool - Swyddfa Ystadegau Gwladol \(ons.gov.uk\)](https://www.ons.gov.uk). The data presented may differ from the Gloucestershire crime statistics for domestic abuse, based on the time period the data was collated.

This is further demonstrated in Graph 5.5. below in which Gloucestershire is noted as having 71% of incidents and crimes subsequently recorded as a crime in the year ending March 2023; this compares to 61% for England and Wales.

Graph 5.5.: Rate of domestic abuse related crimes recorded by the police, by police force area. ONS, year ending March 2023.



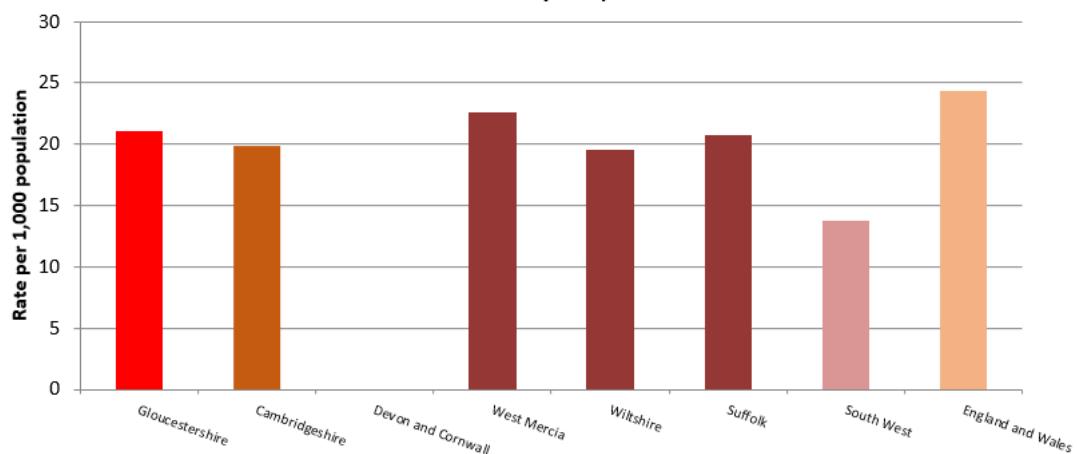
Graph 5.6.: Percentage of all domestic abuse related incidents and crimes recorded by police that were classified as domestic abuse related crimes for Gloucestershire and England and Wales. ONS year ending March 2023.



When considering the percentage of all recorded crimes classified as domestic abuse, Gloucestershire is similar to that seen across England and Wales. Data from 2023/24 however indicates Gloucestershire has increased to 19%; the comparison for England and Wales is not yet available, however.

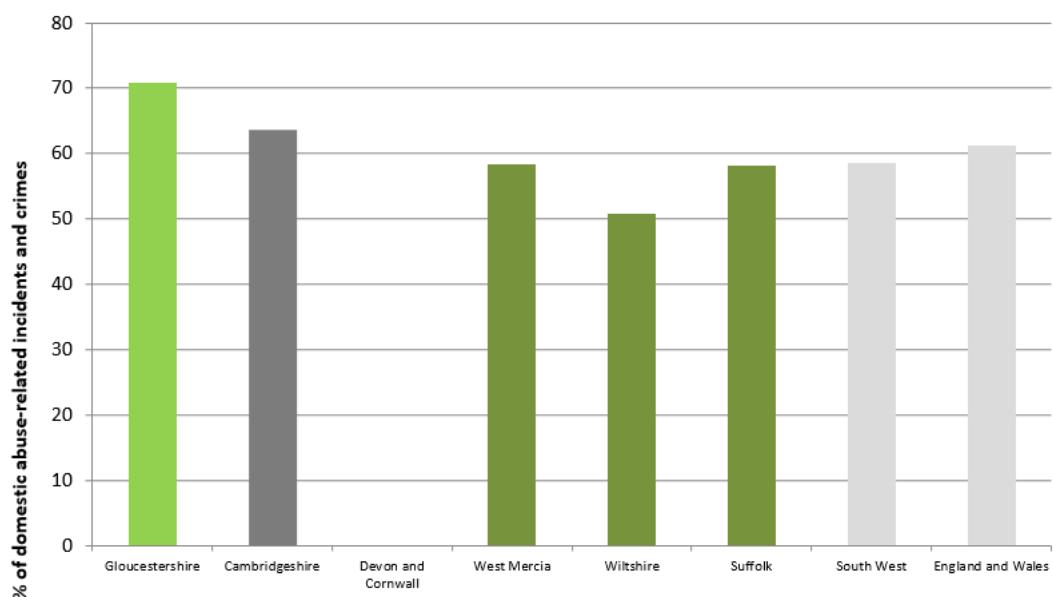
When comparing Gloucestershire to its most similar force areas, Gloucestershire has the lowest volume of domestic abuse related incidents and crimes. The rate of 21 per 1,000 of the population is, however, in line with most similar forces but higher than the rate for the South West region at 14. Data is unavailable for Devon and Cornwall police, so this may be impacting on the data.

Graph 5.7.: Rate of domestic abuse related incidents and crimes combined, as recorded by police. Gloucestershire compared with its most similar force areas. ONS year ending March 2023.



When considering the percentage of total police recorded crime that is domestic abuse related, Gloucestershire is higher than its most similar force areas and the South West and England and Wales percentages. As already detailed, this is likely to be linked to improvements in crime recording within Gloucestershire Constabulary rather than an increase in domestic abuse.

Graph 5.8.: 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 2023.



Alongside this, when considering Violence Against the Person (VAP) offences, domestic abuse related offences account for 32% in Gloucestershire, relatively in line with most similar force areas and the South West percentage.

Domestic abuse related crimes that result in an arrest were lower in Gloucestershire than for England and Wales, with 20 arrests per 100 domestic abuse related crimes in Gloucestershire, compared to 36 arrests per 100 for England and Wales. This is an improvement for Gloucestershire, however, when compared with data from the year ending March 2020. Further improvements will also likely be seen for the year end March 2024 once available, as Gloucestershire Constabulary has placed focus in the last year on positive action in domestic abuse cases.

5.1.1. Domestic Abuse related prosecutions and convictions⁵⁹

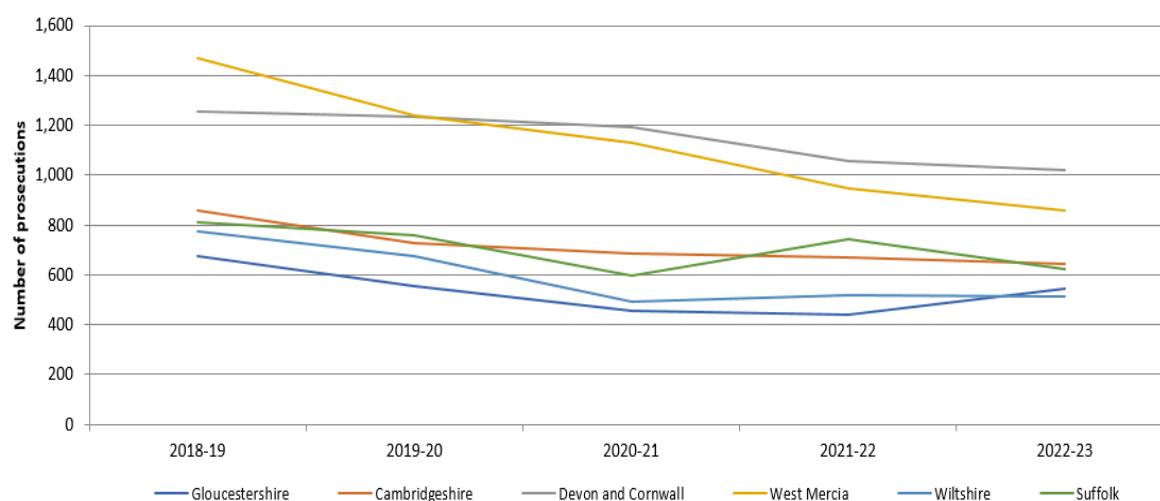
When considering domestic abuse prosecutions, Gloucestershire is aligned to its most similar force group as well as with the South West and England and Wales as a whole.

Table 5.4.: Number and percentage of domestic abuse related prosecutions for Gloucestershire, its most similar force areas, South West and England and Wales. ONS year ending March 2023.

	Number of domestic abuse-related prosecutions	Domestic abuse-related prosecutions as % of all prosecutions
Gloucestershire	545	15
Cambridgeshire	644	13
Devon and Cornwall	1,020	13
West Mercia	861	13
Wiltshire	512	12
Suffolk	625	13
South West	3,955	13
England and Wales	51,288	13

When considering prosecutions in Gloucestershire for domestic abuse over time, there has been a decline since 2018/19 across the most similar force areas to Gloucestershire; but with improvement being seen in Gloucestershire for 2022/23.

Graph 5.9.: CPS domestic abuse prosecutions over time for Gloucestershire and its most similar force areas. ONS year ending March 2020.



As detailed in table 5.5, the percentage of domestic abuse related convictions and prosecutions in all areas fluctuates over time from 77% to 86%.

⁵⁹ [Domestic abuse in England and Wales – Data tool - Swyddfa Ystadegau Gwladol \(ons.gov.uk\)](https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/datasets/domesticabuseinenglandandwalesdatatool)

Table 5.5.: Number of domestic abuse related convictions, prosecutions, and convictions as a percentage of domestic abuse related prosecutions, for Gloucestershire, its most similar force areas, South West and England and Wales. ONS year ending March 2023.

	2018-19	2019-20	2020-21	2021-22	2022-23	Percentages
Gloucestershire	77	83	82	80	77	
Cambridgeshire	76	76	80	78	76	
Devon and Cornwall	85	86	84	84	81	
West Mercia	81	83	82	78	80	
Wiltshire	84	85	83	82	81	
Suffolk	81	80	84	77	81	
South West	80	83	81	82	79	
England and Wales	77	78	78	76	76	

Work to improve the joint response to domestic abuse by both police and CPS will be a focus in the coming years following the announcement of the Joint Justice Plan (JJP) for domestic abuse in December 2023. The JJP outlines a joint commitment to transforming how criminal justice investigate, handle and prosecute domestic abuse to ensure victims are better supported, timeliness is improved, and more offenders are brought to justice⁶⁰.

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

The following data has been taken from the Office for National Statistics (ONS) Domestic Abuse Data Tool for the year ending March 2023. Since this time, Gloucestershire Constabulary have focused on improving its response to domestic abuse and part of this has included an aim to increase its use of DVPN/Os. As such, more recent data is not available yet, however nationally will show an improvement.

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.

Gloucestershire data on DVPN applications has been provided from 1st January 2023 until 30th September 2024. During this time, 160 DVPN applications were made, with 128 of those granted. In the same timeframe, 112 then proceeded to a DVPO application, with 101 being granted.

The timescales of the data provided do not allow for a direct comparison to be made to the national data, but with 90% of DVPOs being granted in Gloucestershire, this is relatively comparable to the national picture of 92% having been granted.

There has been a focus in Gloucestershire Constabulary over the last year to increase the volume of DVPN/DVPO applications made, following previous data that indicated a significantly low application rate locally. This focus has increased the volume of applications, with ongoing work in place to sustain this approach longer term to ensure the correct protections are put in place for victims of domestic abuse.

⁶⁰ [Transforming investigation and prosecution of domestic abuse \(npcc.police.uk\)](https://npcc.police.uk)

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

The below data has been taken from the Office for National Statistics (ONS) Domestic Abuse Data Tool for the year ending March 2023.

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 two 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 2023 Gloucestershire considered 235 'right to know' applications, with 69 applications within the same year provided with disclosure. This accounts for 29% of 'right to know' applications provided with disclosure compared with 42% for England and Wales.

When considering 'right to ask' applications, for the year ending March 2023, Gloucestershire received 427 applications, with 143 in the same year provided with a disclosure. This accounts for 33% of 'right to ask' applications provided with disclosure compared with 36% for England and Wales.

A significant increase in 'right to ask' applications has been seen within Gloucestershire, from 170 applications made in the year ending March 2020 to 427 in the year ending March 2023. This increase has placed a significant amount of pressure on the Domestic Abuse Safeguarding Team (DAST) to try and meet the statutory timescales for research and disclosure. This capacity issue has been highlighted within the force and may explain why 'right to know' disclosures are below the average for England and Wales, with 'right to ask' being prioritised. There is a need for Gloucestershire Constabulary to consider its response to DVDS applications to ensure enough capacity to run the scheme and to ensure 'right to know' disclosures are considered to bring the force in line with national figures.

5.4. Multi-Agency Risk Assessment Conference (MARAC)⁶¹

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). The process within Gloucestershire differs to the national model, so comparisons via the ONS DA data tool are not accurate for Gloucestershire. Wherever possible, comparisons to local data will be made utilising local data on the MARAC.

Over the past three years, referrals into Gloucestershire MARAC have continued to increase with referral levels in 2023/24 reaching 2,430 (with 1,700 referrals during 2021/22 and 1,714 referrals during 2022/23). The level of referrals into Gloucestershire MARAC are higher than the level recommended by Safe Lives of 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-

⁶¹ MARAC Operating Protocol available at www.glostakeastand.com

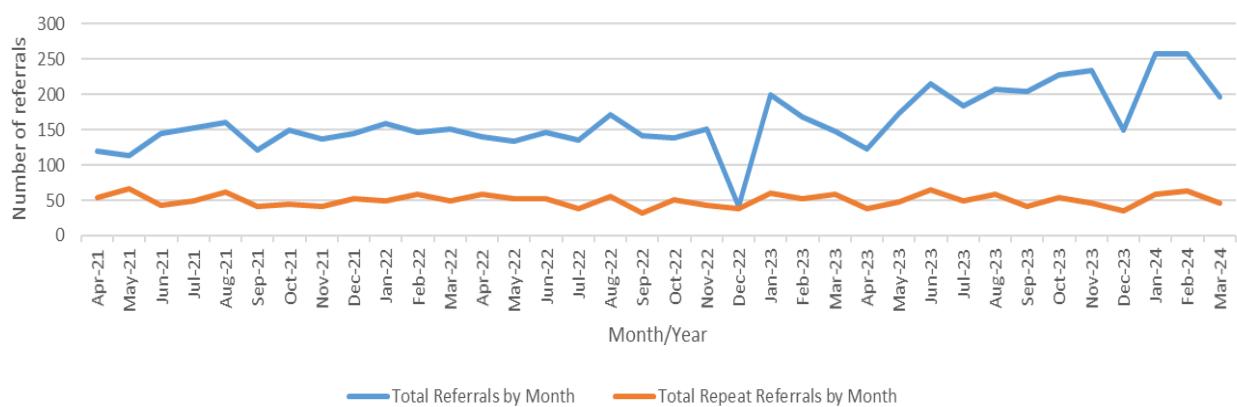
17⁶². Additionally, Safe Lives have noted that their figures are an average with some MARACs seeing much lower or higher rates. They caveat that there is a need to understand more about the variations in practice and recording across MARACs in order to fully understand the implications of higher than expected rates.

The national Safe Lives MARAC data set⁶³ indicates that across England in 2022/23, there were 48 referrals to MARAC per 10,000 of the adult female population. The number of cases discussed at MARACs across England is higher than the expected number of cases for England (as calculated by Safe Lives) and means that an additional 17,051 cases were referred into MARACs in England in 2022/23. This indicates that all MARACs are seeing increased levels of referrals beyond the recommended level for the population.

For Gloucestershire, there were 46 referrals into MARAC per 10,000 of the adult female population, similar to the national level and higher than the South West level at 31. 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 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 5.10. the volume of referrals into MARAC remained relatively steady from April 2021 to November 2022. A dip in referrals in December 2022 is of note, but an upward trend is then seen beyond this.

Graph 5.10.: Number of referrals into MARAC 21/22, 22/23 and 23/24.



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 2023/24 was 25% of total referrals into MARAC; placing Gloucestershire within the expected levels set by Safe Lives (the levels for 2021/22 and

⁶² 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.

⁶³ [Latest Marac National Dataset | Safelives](#)

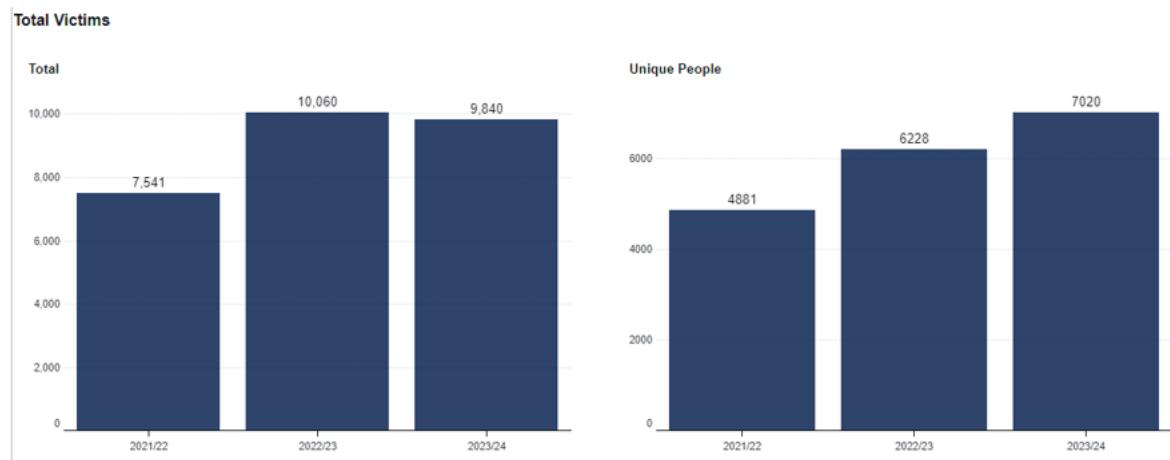
2022/23 are also with range at 33% and 34% respectively). As a comparison, in 2022/23, the England wide repeat victimisation rate was 33%⁶⁴ and 34% across the South West.

The vast majority (66% across years 2021/22-2023/24) of referrals into MARAC are made by the police. This is in line with referral routes seen via national data from Safe Lives in which 65.5% of referrals to MARACs across England are made by police. For other agency referrals, 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. It is important to note however, that police have a direct referral route into MARAC as the MASH automatically receives all police risk assessments and ensure that MARAC are sent all identified as high risk.

5.5. Victims of Domestic Abuse in Gloucestershire known to police

The below data reflects domestic abuse victims recorded by police against domestic abuse recorded crimes for years 2021/22, 2022/23 and 2023/24. Graph 5.11 details the total number of recorded victims and the number of unique individuals recorded within those crimes. As detailed, the number of unique individuals has increased slightly over time with 7,020 unique victims recorded in 2023/24.

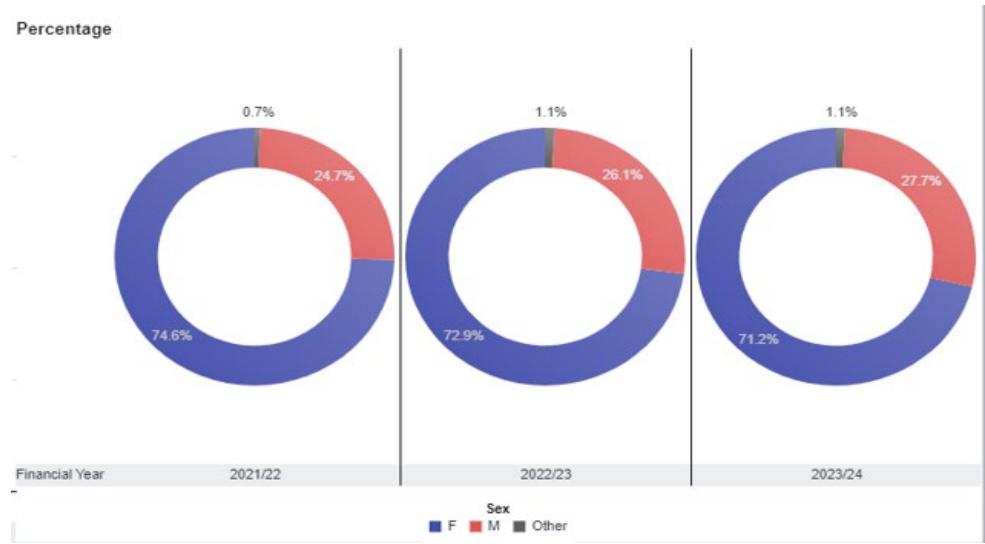
Graph 5.11.: The number of victims recorded within domestic abuse crimes compared with the number of unique victims for years 21/22, 22/23 and 23/24.



Across all 3 years, the majority of victims were recorded as female. This is to be expected given the gendered nature of domestic abuse, and aligns with the prevalence data. Despite this however, it is positive that male victims are identified and recorded.

⁶⁴ The level of repeat cases relies on individual MARACs accurately recording their repeat referral rate.

Graph 5.12.: Gender split of victims of crime recorded for years 21/22, 22/23 and 23/24.



Most victims are aged 25-34 followed by 35-44 as detailed in graph 5.13, which is the same finding from the needs assessment in 2021. This is similarly reflected when considering the rate of victims per 1,000 of the population based on age group (table 5.5), with a rate of 31.4 victims per 1,000 of the population; this is an increase for the same age group from the 2021 needs assessment in which there was a rate of 19.96.

It is unclear as to why a proportion of victims have been recorded as aged 15 or under as this does not currently meet the definition of domestic abuse in which victims must be 16+. These may be children connected to crimes of domestic abuse, or may be children experiencing crimes themselves that are aligned to the definition of domestic abuse, but inaccurately recorded as such.

Graph 5.13.: Age range of domestic abuse victims recorded by police for years 21/22, 22/23 and 23/24.

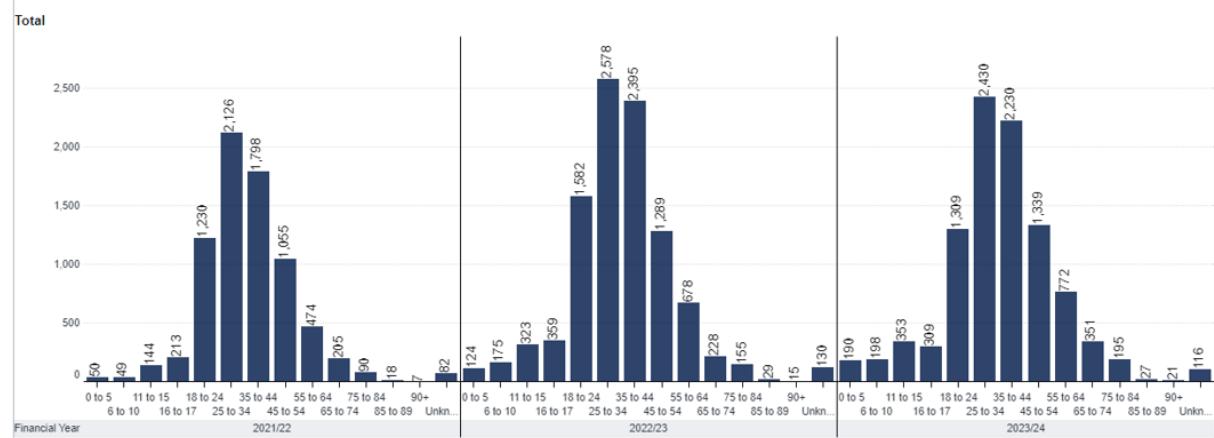


Table 5.5.: Rate of victims per 1,000 of the population based on age.

	15 & under	16-17	18-24	25-34	35-44	45-54	55-64	65+
Total Number of victims 2023/24	741	309	1309	2430	2230	1339	777	594
Rate per 1,000 2023/24	6.5	21.6	28.2	31.4	27.7	15.8	8.5	4.2

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, in line with the population for the county. Whilst these figures align to the population of the county, given prevalence data, we may expect to see a higher volume of victims from Black, Asian and Ethnic Minority groups, indicating possible underreporting. Further work may also be needed to understand possible underreporting from victims from 'non-white' ethnicities, given the age profile of victims and the knowledge that younger populations tend to be more diverse.

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: 2021/22: 1,084; 2022/23: 1,159 and; 2023/24: 1,559⁶⁵.

Across all 3 years, between 89-92% of individual victims discussed at MARAC were female, compared with 94% across England. This demonstrates that whilst Gloucestershire is aligned to the figures for England, it is positive that between 8-11% of referrals are for male victims.

Gender

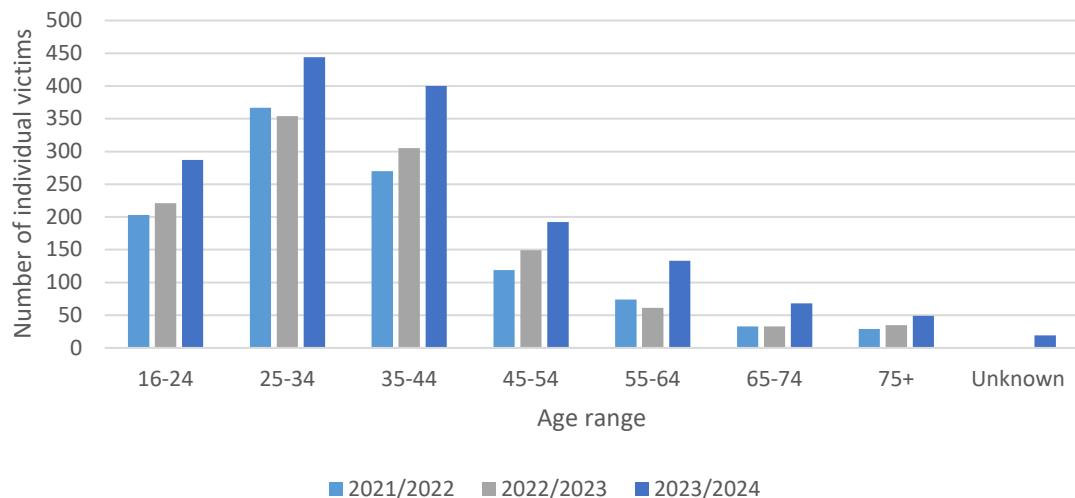
The gender split seen in MARAC referrals is slightly higher for female victims than seen in overall police data on recorded crimes. This may indicate that male victims are less likely to be assessed as high risk than female victims; although further in depth analysis may be needed to understand if this is indicative of a gender bias or if there is a true difference in risk levels experienced based on gender.

Age

When looking at the age range of individual MARAC victims, the majority are aged 25-34, as detailed in Graph 5.14. This is consistent with the previous 2021 needs assessment and remains a higher age bracket than prevalence data detailed in the Crime Survey for England & Wales (year ending March 2023) in which the highest prevalence is found amongst those aged 16-19.

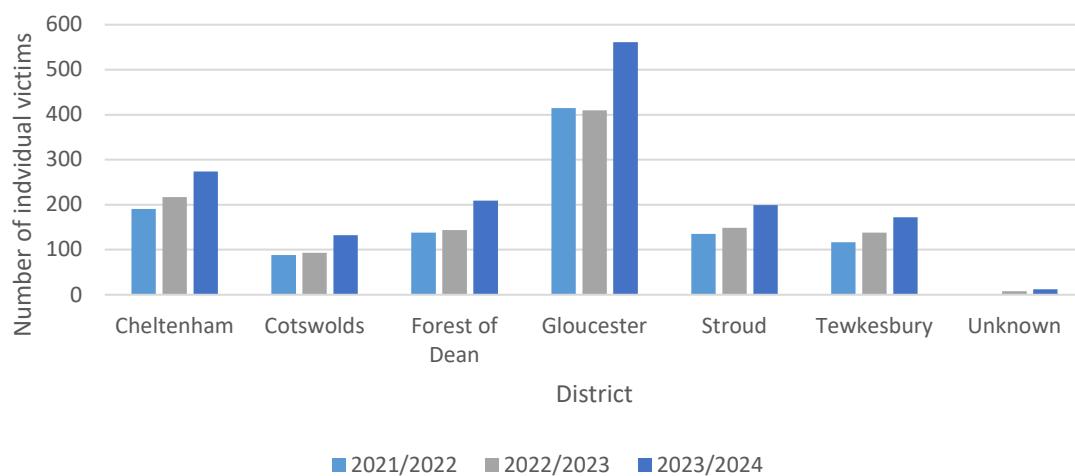
⁶⁵ Some duplicates may still be considered if a victim has been referred into MARAC across multiple years.

Graph 5.14.: Number of individual victims considered by MARAC based on age for years 2021/22, 2022/23 and 2023/24.



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 to police in these areas, and the higher rate at which police referrals are represented in the MARAC.

Graph 5.15.: Number of individual victims considered by MARAC based on locality for years 2021/22, 2022/23 and 2023/24.



Co-habitation status

Across years 2021/22-2023/24, most victims are recorded as not living with their perpetrator at the time of the MARAC referral; accounting for 58% of victims in 21/22, 85% in 2022/23 and 62% in 2023/24. This finding is consistent from the 2021 needs assessment and may be indicative of what is known to be a high risk factor in cases of domestic abuse; 'separation'. This 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 schemes⁶⁶, to improve security and keep victims safe within their own homes.

Ethnicity

MARACs across England receive around 17.8% of their referrals for victims from Black, Asian and Minority Ethnic groups, with the South West and North East receiving the fewest referrals at around

⁶⁶ See Chapter 6

6%. Gloucestershire MARAC is consistent with the South West average, with 6% of individual victims being from Black, Asian and Minority Ethnic groups in 2023/24.

Despite a lower rate of referrals for victims from Black, Asian and Minority Ethnic groups in Gloucestershire compared with the England average, the referral levels are consistent with the population of Gloucestershire where individuals noted as non-white ethnic groups account for 6.9%.

Gender and sexuality

MARAC victims from LGBTQ+ groups account for 1.5% of referrals across England, with similar rates seen in Gloucestershire MARAC at 1% of referrals in 2023/24 (1% in 21/22 and 2% in 22/23). 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 #freetobesafe⁶⁷). There is therefore more work required locally to identify and respond effectively to LGBTQ+ victims.

Disability

Across years 2021/22 - 2023/24, between 33-35% of individual victims considered by MARAC were recorded as having a disability. This is significantly higher than referrals seen across England as a whole at 9.7%. It is not currently clear if definitions for recording disability are the same within Gloucestershire MARAC as seen nationally. For around 90% of all victims where a disability was noted, this was in relation to a mental health concern, with only 1% recorded as having a physical disability. 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), are now referred to as Domestic Abuse Related Death Reviews (DARDRs) and 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/DARDR is to:

- Establish what lessons are to be learned from the domestic homicide regarding the way in which local professionals and organisations worked 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.

⁶⁷ [Free to be safe web.pdf \(safelives.org.uk\)](https://safelives.org.uk)

Gloucestershire has developed its own local approach to conducting DHRs in line with the Home Office Statutory guidance⁶⁸. 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 adoption of lessons learnt and an approach to ensuring the identification of suicide cases that fall under the statutory guidance. In the last year, Gloucestershire has also joined the DHR oversight mechanism pilot being run by the Domestic Abuse Commissioner's Office.

Since coming into force and up until June 2024, Gloucestershire have commissioned 22 DHRs, with 13 of these commissioned in the last four years (January 2020 - June 2024). Of those commissioned in the last four years, nine have been for victims of domestic abuse who have died by suicide⁶⁹. The increase in suicide cases directly coincides with developments in the local approach to DHRs, with new processes embedded with the county suicide prevention group to ensure appropriate identification and referral of cases that require consideration for a DHR.

Whilst individual agencies will have identified learning from reviews specific to their organisation, the below provides a broad summary of the overall themes and learning from DHRs in the last 4 years (January 2020 - June 2024) primarily relating to the DHRs conducted that involved suicide.

- Victims' experience of coercive and controlling behaviour: this was a strong feature in all suicide DHR cases, but was not often fully identified by agencies in contact with the victim prior to their death.
- Complex presenting needs: many victims of domestic abuse in suicide DHRs were recorded as presenting primarily with mental health issues in addition to the abuse they were experiencing. In addition, many also presented with additional complex needs such as substance misuse, alcohol misuse, children being taken into care and previous childhood trauma. In these instances, the presentation of complex needs often masked the experience of domestic abuse, and agency responses therefore focused on other presenting issues in the first instance.
- Perceived lack of engagement: many victims of domestic abuse, especially those who presented with the complex needs, found it difficult to engage with agencies in a meaningful way. This is often interpreted as a lack of willingness to engage, rather than a need for services to explore how they might make engagement easier for victims. This is also connected to a need for agencies to make referrals for victims into specific services, rather than simply signposting.
- Experience of trauma: many victims had an experience of previous trauma that affected the way in which they were able to engage with agencies, highlighting a need to consider trauma informed practice amongst agencies.
- A need to see the bigger picture of domestic abuse and not look at incidents in isolation: this is a feature of DHRs, not just in the last 3 years, but more broadly across all reviews in Gloucestershire. Many agencies receive multiple reports of disclosures of domestic abuse, but when assessing risk, only consider the incident being disclosed in that moment, rather than viewing the abuse as a pattern of behaviour.
- Economic abuse: many victims were found to have experienced economic abuse, often affecting their access to money, housing and services. It is noted in many of the reviews that there is a need to improve awareness of what constitutes economic abuse and how professionals can identify this and ensure victims are provided with the right support.

⁶⁸ At the time of writing, the refreshed Home Office Statutory Guidance for the conduct of DHRs was out for consultation.

⁶⁹ The statutory guidance requires consideration of the conduct of reviews for cases of suicide where there has been domestic abuse

- Protected characteristics: some of the DHRs conducted highlighted a need for professionals to recognise the impact of certain protected characteristics on victim's ability to engage with services. This includes victim's sexual orientation, religion and culture affecting their ability to disclose abuse to services and professionals recognising them as victims.
- Domestic abuse and risk of suicide: given the volume of DHRs currently being conducted that relate to suicide, there is general learning from all reviews that professionals need to be more aware of the risk of suicide in domestic abuse cases, how to spot the signs, risk assess and respond.

For the recent DHRs commissioned in which the deaths were homicides rather than suicides, all have been inter-familial rather than intimate partner homicides. Over the last four years there have been four DHRs commissioned of this nature. The themes from these cases do differ slightly to the intimate partner cases with the below being highlighted:

- Child to parent abuse: all recent domestic homicides in the county relate to adult child killing a parent. In some of these instances, there have been known incidents of abuse from child to parent prior to the death, but often these are not fully reported or disclosed. In some instances however, there is no known prior abuse from child to parent.
- Mental health: this has been a strong identifying feature for the offender prior to the incident. There is therefore a need to recognise the risk that mental ill health can pose.
- Physical ill health: in a recent DHR (still ongoing) the experience of significant physical ill health of the victim and suspect are being explored and the impact of these on the family dynamic.

5.8. Areas for development

The below themes have been identified from this section of the needs assessment for consideration by the Gloucestershire Domestic Abuse Local Partnership Board in development of the county strategy and delivery plan.

Ongoing improvement of police response

Domestic Abuse remains a force priority for Gloucestershire Constabulary, and since October 2023 a real focus has been placed on improving the overall response to domestic abuse, with a dedicated internal policing steering group and action plan. This has been supported by the recent roll out of DA Matters training to all frontline officers and staff.

The below are areas of focus for the force:

- Ongoing roll out of DA Matters.
- Continuation of the DA Matters Champions development. Currently the force has over 170 DA champions identified with an ongoing training plan continuing to be rolled out.
- Consideration of the roll out of Rapid Video Response (RVR) to improve response times to domestic abuse victims; something already progressing.
- Consideration of the establishment of a dedicated domestic abuse investigations team; with work already progressing.
- Review of the capacity within MARAC given the increase in referrals, including technical solutions to improve efficiency; already in progress as part of plans to review the wider Multi-Agency Safeguarding Hub (MASH).
- Review of the process and capacity to respond to DVDs given the increase in referrals.

- Continuation of a positive action policy to increase arrest rates and respond effectively to perpetrators of domestic abuse.
- Continuation of improvements in the use of DVPN/Os.
- Consideration around downward trend in reported domestic abuse crime and any action required to address this.
- Consideration around data recording within MARAC focused on disability status of victims and if local approaches to those differ to the national approach.
- Local implementation of the Joint Justice Plan.

Training

In order to promote and embed the learning from local DHRs, there is an ongoing need to ensure access to appropriate training across the multi-agency partnership.

Following the previous needs assessment in 2021, in which a training need was also highlighted, training was commissioned under the previous domestic abuse commissioning framework for the county. This training was commissioned to train 1,000 professionals annually, with a focus on domestic abuse awareness, risk assessment and safeguarding.

This training service offer was designed to be a temporary offer whilst the county multi-agency domestic abuse training pathway was revised. This training pathway, now approved by the DA LPB, is now being considered for funding options to fully commission its implementation; something which needs to remain a priority for the DA LPB into its 2024 - 27 strategy.

Awareness Raising

The DA LPB has developed a multi-agency communications strategy and there is a need to ensure this is fully implemented with a rolling plan of activity to increase awareness of domestic abuse, encourage reporting and ensure awareness of the services available in the county.

There is also a need to ensure learning from DHRs is fully promoted, with learning events rolled out to support this.

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 in Gloucestershire. 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 have been leading on the county approach to this, having commissioned the King's Fund to conduct a review of the partnership landscape across Gloucestershire. Work to respond to this is ongoing, and addressing multiple and complex needs will require long term system change; it is key that learning from DHRs continues to feed into this work.

Domestic Abuse and wider deprivation and societal inequalities

Given the links locally between high rates of domestic abuse and wider indicators of deprivation, a focus for the DA LPB could be to explore how work to tackle societal inequalities across the county can be joined up with the domestic abuse agenda, aiming to reduce the rate of domestic abuse in these areas.

Response to victims from underrepresented and protected characteristic groups

- Consideration of the identification and support available to victims who identify as LGBTQ+ to increase reporting.
- Exploration of ongoing engagement with minoritised communities to increase engagement and reporting, considering any needs for inclusivity and cultural competency training across the partnership.
- Research locally into any potential gender bias in the identification of high risk victims of domestic abuse who are male.
- Consideration of how disability is being identified locally and if the comparatively high percentage of victims noted as having a disability is a true picture of high risk victims in Gloucestershire or the way in which it is recorded locally.

Early identification and intervention

Given the increases seen in referrals to MARAC, there is a need locally to consider approaches that focus on early identification of domestic abuse across all agencies and ensuring that interventions are available to prevent risk from escalating.

Place based approach

Given the variation in reported crimes across each district, it is recommended that district community safety partnerships (CSPs) consider their localised approach to awareness raising and intervention.

Domestic abuse and suicide risk

The increase in DARDRs for cases of suicide may be indicative of improved identification of cases that require a DARDR, but also indicate a need to locally consider the links between domestic abuse and suicide and ensure appropriate awareness and intervention.

6. Accommodation Based Support for victims of Domestic Abuse

The Domestic Abuse Act 2021 placed a statutory duty on Tier 1 local authorities to provide support in safe accommodation for victims of domestic abuse and their children. This has provided a clear focus for local areas in considering their safe accommodation offer, whilst also ensuring that the housing sector is robustly able to respond to the needs of victims of domestic abuse; both from the perspective of meeting needs via the homelessness and housing duty, as well as within registered provider properties.

The Ministry of Housing, Communities and Local Government (MHCLG)⁷⁰ is the government department responsible for the implementation of the Domestic Abuse Act 2021 statutory duty nationally. The MHCLG defines domestic abuse safe accommodation to include⁷¹:

- Refuge accommodation – a refuge offers accommodation and intensive support which is tied to that accommodation. Victims, including their children, must be refuge residents to access the specialist emotional and practical support provided within.
- 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 Black and minority ethnic, lesbian, gay and bisexual 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, for example, unable to stay in a refuge with communal spaces due to complex support needs, or for families with teenage sons.
 - 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 the perimeter of their property.
- 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.
- Other forms of domestic abuse emergency accommodation – i.e. a safe place with support, to give victims an opportunity to spend a temporary period to consider and make decisions in an environment which is self-contained and safe. This would include access to wrap-

⁷⁰ Formally the Department of Levelling Up, Housing and Communities (DLUHC)

⁷¹ 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://www.gov.uk/government/publications/future-delivery-of-support-to-victims-and-their-children-in-accommodation-based-domestic-abuse-services-consultation-response/publishing.service.gov.uk)

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 annually since April 2021 from the MHCLG. At the time of writing, funding beyond March 2025 has not been confirmed.

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. As of 2020, there are 261 refuges with 3,923 bed spaces available⁷² across England 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 or transgender 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, permitting 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 a particular protected characteristic group. 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 Approach⁷³:

The Whole Housing Approach (WHA) has been developed in order to improve housing options and outcomes available for people who experience domestic abuse, allowing them to secure stable housing, creating a safe environment in which they can 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.

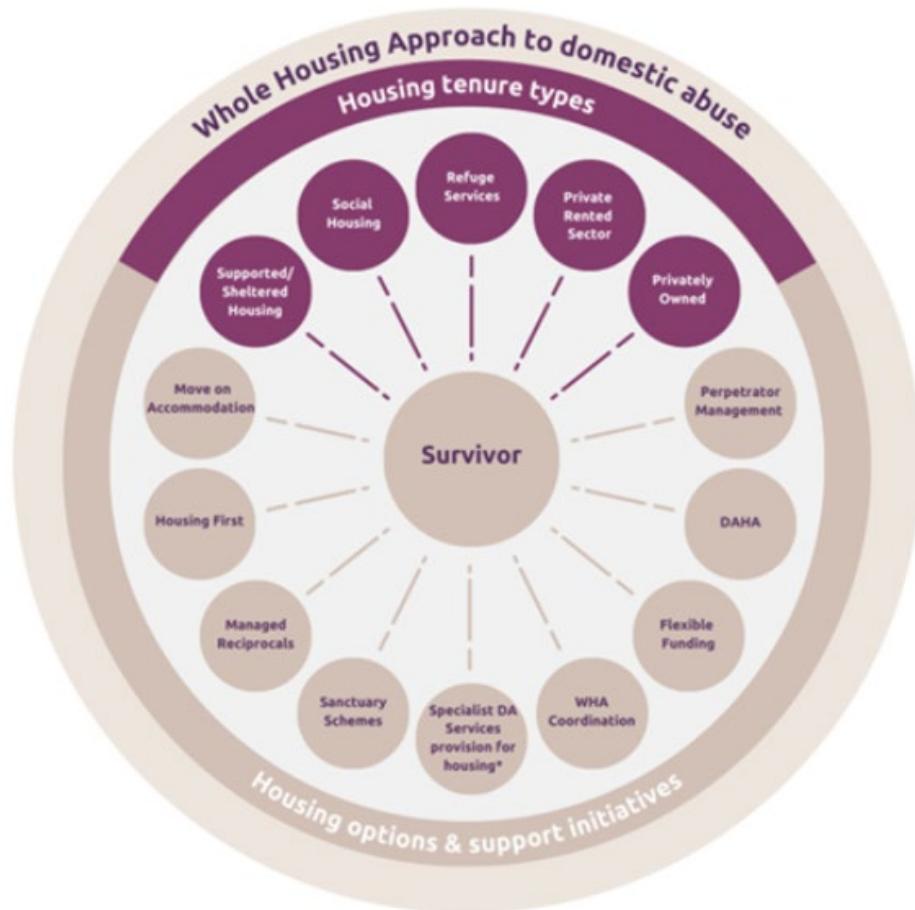
The aims of the WHA are to:

⁷² [Domestic abuse victim services, England and Wales - Office for National Statistics \(ons.gov.uk\)](https://www.ons.gov.uk/peoplepopulationandcommunity/householdcharacteristics/datasets/domesticabusevictimservices)

⁷³ [What is the Whole Housing Approach? - daha - Domestic Abuse Housing Alliance \(dahalliance.org.uk\)](https://daha.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 diagram below provides a summary of the components of the WHA:



Housing First⁷⁴:

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 and;
- Placing no conditions on individuals other than their desire to have a tenancy.

⁷⁴ [12_wha-housing-first-for-women.pdf \(dahalliance.org.uk\)](http://12_wha-housing-first-for-women.pdf (dahalliance.org.uk))

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 suggesting higher numbers of male homelessness compared to women nationally. Growing evidence of the 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 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 who have been 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.

Domestic Abuse Housing Alliance (DAHA) accreditation⁷⁵:

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 strategy⁷⁶.

Its accreditation programme is built around 6 core principles:

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

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



⁷⁵ [What is accreditation? - daha - Domestic Abuse Housing Alliance \(dahalliance.org.uk\)](http://dahalliance.org.uk)

⁷⁶ [Strategy to end violence against women and girls: 2016 to 2020 - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

6.2. Local Approach

The Gloucestershire approach to safe accommodation has, for a number of years, primarily 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.

Following the implementation of the Domestic Abuse Act 2021, there has been greater focus placed on the provision of safe accommodation in Gloucestershire, with increased commissioning in this space. Services commissioned locally were primarily done so under the Gloucestershire joint commissioning framework for domestic abuse in which Lot 2 outlined the county's commitment to ensuring the provision of safe accommodation with support for victims of domestic abuse. The Places of Safety scheme was however previously funded via a grant agreement between the district councils and GreenSquareAccord rather than commissioned formally via the Framework (although has since been commissioned formally outside of the framework). The joint commissioning framework has now come to end, but the commitment to joint commissioning and a focus on safe accommodation remains.

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.

Table 6.1.: Domestic Abuse Safe Accommodation Options in Gloucestershire

	Emergency	Temporary / short term	Move on / long term
Specialist DA Safe Accommodation		Places of Safety (x19 units, moving to 36 by end of contract) Refuge (x9 bed spaces)	Own home with Target Hardening or Sanctuary Scheme
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
Rough Sleeper Pathway		Rough Sleeping Hubs	NSAP and Housing First

The provision of specialist domestic abuse accommodation in Gloucestershire includes:

Places of Safety: 12 individual properties dispersed across the county, run by GreenSquareAccord 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.

This service was re-commissioned in 2023 and is currently in the process of upscaling to 24 individual properties, with an aim to eventually reach 36.

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 alongside funding provided by the County Council as part of the MHCLG grant.

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 victim's 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.

Trauma Recovery Service: This service was commissioned in 2024 and is provided by Family Action to provide trauma recovery support for adult victims residing in safe accommodation. Work is currently underway to commission bespoke support for children up to 18 yrs within safe accommodation.

Domestic Abuse Intervention Officers (DAIO): This team includes two full time roles that support survivors to navigate the housing and homelessness systems across the six District Councils in Gloucestershire. They advocate for survivor-led housing solutions and best practice responses to survivors' housing needs.

Domestic Abuse Housing Officer: This role, based at Gloucester City Council, supports survivors facing multiple disadvantage to navigate the homelessness system and engage with suitable housing options. The Officer is co-located within the Nelson Trust Women's Centre, to overcome barriers to access and support close multiagency working.

Cotswolds Cats and Dogs Home: This service has been provided with local funding to foster pets when victims of domestic abuse need to flee their home and enter into safe accommodation.

[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 household's 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 were given automatic priority need from 5th July 2021 (prior to this date priority need on the grounds of domestic abuse was assessed on whether a person was vulnerable as a result of having to leave accommodation because of violence (including domestic abuse) from another person, or threats of violence from another person that were likely to be carried out). The districts have not noticed an increase in positive priority need decisions for victims of domestic abuse; this reflects that many districts implemented this change ahead of the legislation as the best practice model.

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 and 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 provided⁷⁷.

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 presented covers the last five years (2019/20, 2020/21, 2021/22, 2022/23 and 2023/24).

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. A new data task was developed to capture a broader data set to reflect the needs of victims and their households. It will capture barriers to accessing services, record the referrals made to specialist support and the outcome of those referrals. The data will also capture the movement of victims into Gloucestershire and across district borders. Use of the new data task has been limited so far, so there is too small a sample size to report on. Further work is needed to embed the data task as business as usual for all officers.

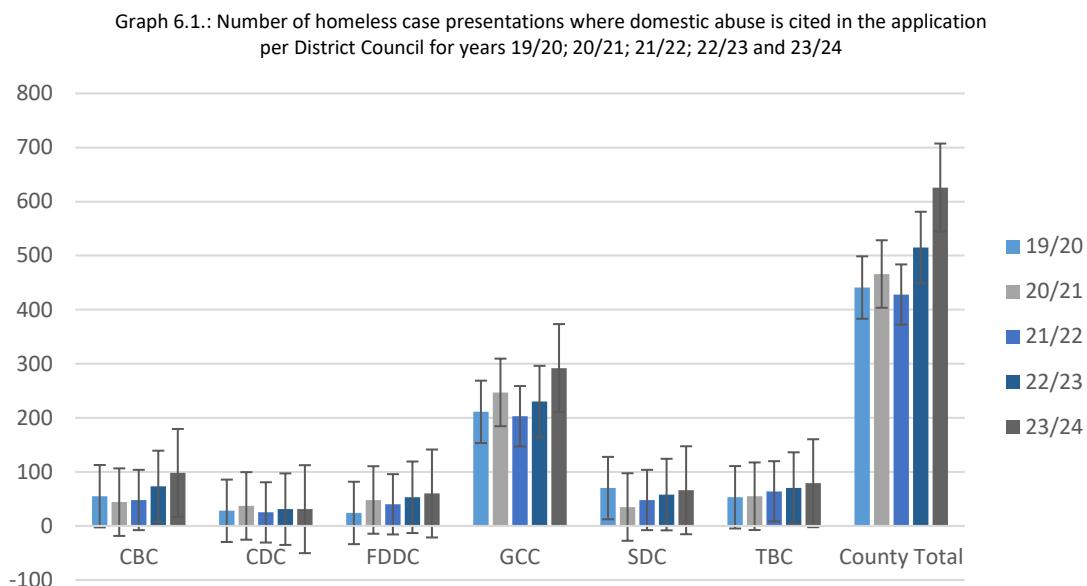
Across 2018-21 the number of homeless cases presenting with domestic abuse to District Councils increased year on year, with a 36% increase from 2018/19 to 2019/20 and a further 6% increase in 2020/21. This increase may be connected to increased awareness of domestic abuse both locally and nationally. The increase in homeless cases presenting with domestic abuse between 2018/19 to 2019/20 replicates an increase (45%) in reporting of domestic abuse related crimes to Gloucestershire Constabulary for the same period (although it is recognised that increases in recorded crime during this time period will have been impacted by improvements to crime recording more broadly).

In 2021/22, overall numbers dropped by 13% (it is not currently clear what the reason for this drop may be). However, Cheltenham, Tewkesbury and Stroud all saw an increase in numbers presenting as homeless due to domestic abuse, whereas Cotswold, Forest of Dean and Gloucester saw reductions. 2022/23 was the first year (within the data set available) that all six District Councils saw an increase in the number of homelessness approaches due to domestic abuse. In 2023/24 five out of six districts saw an increase in the number of homelessness approaches due to domestic abuse (see Graph 6.1.). Cotswolds had no change, with the same number of cases as the previous year. Overall, case numbers increased by 22% as a countywide total. Cheltenham Borough Council saw the largest increase in approaches, with a 34% increase in case numbers, followed by Gloucester City Council whose cases increased by 27%. Whilst it is not clear what the reason for this increase is, there are some indications from district housing teams that the cost-of-living pressures may be having an impact alongside an increased awareness of domestic abuse. The impact of the cost-of-living also links to the housing crisis, meaning that individuals who may have previously been able to

⁷⁷ [Shelter Legal England - Main housing duty - Shelter England](#)

source alternative accommodation without the need for local authority intervention, for example in the private rented sector, may now be struggling to do so without statutory support.

There may be some minimal duplication of data in these figures, as the District Councils record cases that are referred or present multiple times during the same year rather than report on unique individuals. The data will also include some instances where individuals were referred to the district council under the 'duty to refer'⁷⁸ but contact with the individual was unsuccessful. Work is underway to ensure a consistent approach to the data reported, including reporting data to show repeat presentations.



Those who are eligible can apply to access social housing through the county-wide choice based lettings system, Homesseeker Plus. Applicants are given priority banding based on their individual circumstances and the urgency of their housing need. As a snapshot, data from end of April 2023 showed 199 live applications on Homesseeker Plus that had been assessed as experiencing domestic abuse and awarded banding of Silver and above. There were 487 applications where the applicant had self-reported domestic abuse as their reason for requiring housing assistance. Where an applicant provides this reason on their application, they will be contacted by the District Council and offered housing advice and signposted to specialist domestic abuse services.

Since 2021/22, the District Councils have been able to record applications from alleged perpetrators of domestic abuse who are homeless because of being excluded from their property. There may be gaps in this data as it is a relatively new field, and it may not always be clear that this is the reason for homelessness so cannot be relied on to show the true extent of homelessness experienced by perpetrators of abuse. The number of alleged perpetrators has increased by 63% across 23/24. Graph 6.2. shows the total number of approaches for homelessness assistance relating to domestic abuse, when combining case data for victim and those excluded from accommodation due to perpetration of abuse.

⁷⁸ The Duty to Refer was introduced in the Homeless Reduction Act 2017. The Act introduced a duty on specified public authorities to refer service users who they think may be homeless or threatened with homelessness to the local authority housing options/advice service.

Graph 6.2.: Total number of cases where domestic abuse is the cause of homelessness (victim/perpetrator) per District Council for years 21/22; 22/23; 23/24

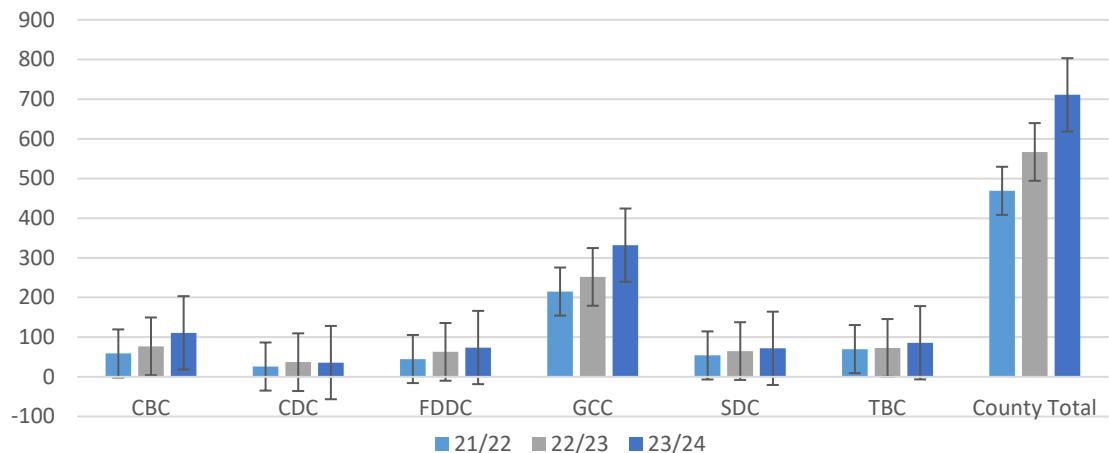


Table 6.2. below sets out the number of approaches from alleged perpetrators of domestic abuse who are excluded from their property because of the domestic abuse, which makes up 12% of all homelessness cases identified as DA related. The data set regarding perpetrators could be developed to get a broader picture of the demographics, housing and support needs of perpetrators of domestic abuse, along with understanding the impact of Domestic Abuse Protection Notices/Orders as cause of homelessness within Gloucestershire.

Table 6.2.: Number of Alleged Perpetrator excluded from property homeless approaches per district for 21/22; 22/23; 23/24

District	2021/22	As % of all DA approaches 21/22	2022/23	As % of all DA approaches 22/23	2023/24	As % of all DA approaches 23/24
Cheltenham Borough Council	11	19%	4	5%	13	12%
Cotswold District Council	1	4%	6	16%	5	14%
Forest of Dean District Council	5	11%	10	16%	14	19%
Gloucester City Council	12	6%	22	9%	40	12%
Stroud District Council	6	9%	7	9%	6	8%
Tewkesbury Borough Council	6	11%	3	5%	7	8%
County Total	35	8%	52	10%	85	12%

6.4.2. Accommodation in temporary accommodation

The number of cases presenting as homeless because of domestic abuse and placed within temporary accommodation has remained the same overall compared to last year, despite the increase in applications. 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 disengaging with the process.

During 2023/24, the number of individual cases placed in temporary accommodation was 200.

Table 6.3.: Number of cases placed into temporary accommodation and percentage of all DA homeless applications across all 6 districts for years 19/20, 20/21; 21/22; 22/23; 23/24

		19/20	20/21	21/22	22/23	23/24
Cheltenham Borough Council	No. of cases placed into temp accom.	11	18	7	14	23
	% of all homeless DA applications	20%	41%	15%	19%	23%
Cotswold District Council	No. of cases placed into temp accom.	10	14	6	9	8
	% of all homeless DA applications	36%	38%	24%	29%	26%
Forest of Dean District Council	No. of cases placed into temp accom.	5	15	10	14	9
	% of all homeless DA applications	21%	31%	25%	26%	15%
Gloucester City Council	No. of cases placed into temp accom.	89	94	83	69	108
	% of all homeless DA applications	42%	38%	46%	30%	37%
Tewkesbury Borough Council	No. of cases placed into temp accom.	9	7	13	21	26
	% of all homeless DA applications	17%	13%	20%	30%	33%
Stroud District Council	No. of cases placed into temp accom.	12	14	19	10	26
	% of all homeless DA applications	17%	40%	40%	17%	39%
Countywide	No. of cases placed into temp accom.	136	162	132	132	200
	% of all homeless DA applications	31%	35%	31%	26%	32%

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 Homeseeker. Where this is not possible, final housing duty will be accepted.

Countywide, around 43% of those placed in temporary accommodation will have full housing duty accepted, year on year this accounts for 60-100 DA cases across the county.

The vast majority of those who are provided with temporary accommodation will be accommodated within non-domestic abuse specific temporary accommodation. Some access temporary accommodation whilst waiting for a suitable space to become available in safe accommodation. Aside from refuge, the other available form of domestic abuse safe accommodation is Places of Safety, which is a dispersed refuge model of safe accommodation across Gloucestershire. The districts will also work with individuals who wish to remain or return home, to prevent or relieve homelessness through Target Hardening or Sanctuary Scheme measures.

Snapshot data collated by Gloucestershire County Council based on District Council referral data for December 2020 and March 2021 indicates that the vast majority of DA homeless cases have their emergency 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 2021 snapshot noted as 'Not accommodated - Homeless at home'⁷⁹. This trend was replicated in 2021/22

⁷⁹ 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

and 2022/23, however in 2023 the District Councils commissioned an expansion of Places of Safety, with the potential to triple the number of units of accommodation. This will mean that more victims can access safe accommodation, reducing the numbers needing to access (and the time spent in) temporary accommodation.

Data available from the District Councils still cannot at this time provide accurate details on the number of people who are referred on to refuge or Places of Safety following presentation as homeless as a result of domestic abuse. The data showed 11 households were recorded as accessing Places of Safety; of these 11 households, 10 contained children. These figures are an under-representation compared to the data held by GDASS. 1 household was recorded as being housed in refuge, again, this is likely to be an under-representation. Homelessness and Safe/Temporary Accommodation Data from Stroud District Council is also an under-representation due to the move-on agreement between Stroud Beresford Group and the Council, as this pathway is not currently recorded in the same way. Data around refuge and safe accommodation referrals and placements will be reported more accurately once the new DA data task is being utilised across the District Councils. Within the temporary accommodation data there may be duplicates, as applicants may approach for homelessness assistance more than once in a year, and they may also be accommodated in multiple types of temporary accommodation and safe accommodation whilst being supported by the District Council.

6.4.3. Challenges and gaps identified by District Councils

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.
- Pathways to Safe Accommodation for survivors with No Recourse to Public Funds.
- Lack of move on accommodation and move on accommodation that provides ongoing support. Difficulties with move on particularly impact when household sizes are larger (in 2023/24, 13% of victims who approached District Councils in Gloucestershire as homeless due to domestic abuse were part of households containing 3 or more children). Sourcing suitable accommodation for those with accessibility needs is also a barrier for timely move on from temporary/safe accommodation, as well as providing safe locations and property types based on the available housing stock.

It is anticipated that the expansion of Places of Safety will meet some of these needs, as the dispersed refuge provision is flexible and accessible to meet the needs of survivors with protected characteristics.

yet needed to request Temporary Accommodation (for example DA victim needing to leave their home due to risk, but can remain in the home until perpetrator is released from prison)

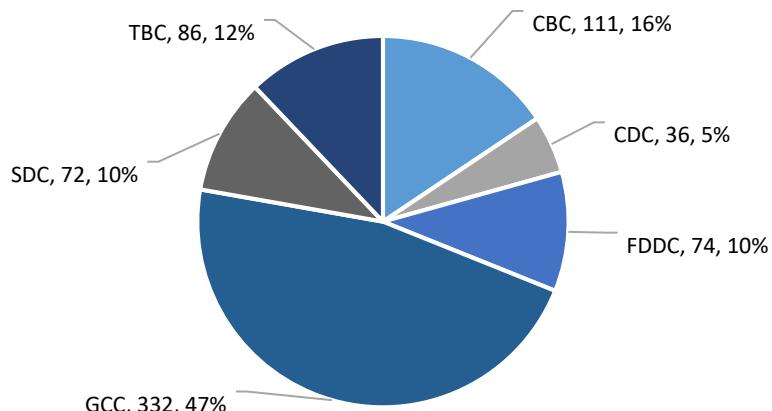
It is worth noting however, that there will be additional capacity needed to ensure there are more options available for victims of domestic abuse to free up the Places of Safety for those in crisis.

6.4.4. Victim demographics from Homeless DA applications

Data available on the demographics of victims applying as homeless to the District Councils are available for the last six years. The new DA data task will develop the demographic data set beyond the statutory homelessness data collection fields, which will produce a broader picture of the demographics of domestic abuse victims presenting as homeless in Gloucestershire.

Graph 6.3. shows the number of homeless applications for domestic abuse received by each district. The majority of homeless applications due to domestic abuse continue to be seen in Gloucester, indicating that this is the highest area of need for securing safe accommodation from domestic abuse and robust housing responses to perpetrators of abuse. This is also in line with wider data on domestic abuse locally, indicating that the largest volume of domestic abuse incidents that come to the attention of statutory services occur within Gloucester.

Graph 6.3.: Domestic Abuse Homeless Approaches (victim and perpetrator) 23-24



From the data available for 2023/24, 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 at around 90% based on countywide total. 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 58 male victims presenting countywide in 2023/24 which accounts for 9% of victims applying as homeless. There were 6 cases across the county where the gender was marked as unknown/did not wish to disclose. It may be that within that figure there were transgender or non-binary victims.
- The majority of victims are recorded as heterosexual (89%), although all districts recorded approaches from applicants who identified as lesbian, gay, bi-sexual, or other sexual orientation (LGBTQ+) accounting for 4.5% collectively. This compares to the 2021 Census data for Gloucestershire, where 2.8% of the population described their sexual orientation as

LGBTQ+ (national average of 3.2%)⁸⁰. As with the census data, a small percentage of applicants (7%) preferred not to disclose their sexual orientation.

- Across all districts there was very limited reported data on disability. This is recorded across 3 categories, Physical Disability, Learning Difficulty and Mental Health. Historically, across these categories, mental health has been the most significant factor recorded. This data and data around a range of different support needs will be recorded in more detail once the new DA data task is utilised.
- The number of applications from victims identified as ethnic minorities were minimal, with Cotswold, Forest of Dean, Stroud, Cheltenham and Tewkesbury recording 26 victims from these groups collectively in 2023/24. For Gloucester, 4% of applications in 2023/24 were for those from Black ethnic backgrounds, 3% Mixed ethnic backgrounds and 3% Asian ethnic backgrounds. Whilst Gloucester records that 12% of applicants are from ethnic minoritised backgrounds, this compares to the population for Gloucester where 15.1% are estimated population Black, Asian and Ethnic Minority⁸¹. For Cheltenham 11% of applicants were recorded as being from people from ethnic minoritised backgrounds, compared to the population data for Cheltenham at 8.6% of the population recorded as Black, Asian and Ethnic Minority .
- The majority of victims who apply as homeless to the local authority are recorded as 'unemployed'.
- The districts are not aware of the numbers of victims in Gloucestershire who have No Recourse to Public Funds. It is likely that these victims do not approach District Councils for housing services, this is likely to be for a range of reasons.

6.4.5. Domestic Abuse Intervention Officers

During 2023/24 the housing Domestic Abuse Intervention Officers (DAIOs) supported 116 households. Most referrals come via the districts' housing options teams, but, through strong partnership working, referrals also occasionally come through specialist services and registered providers meaning that the DAIOs can intervene at an earlier stage. The DAIOs can spend time building supportive relationships with survivors, which is having a positive impact, particularly for those who have had poor experiences with services previously.

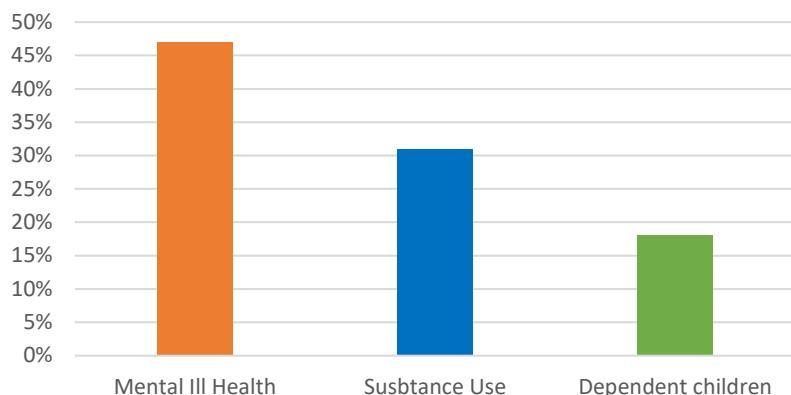
Data about the support needs of survivors referred to the DAIOs is currently limited but shows that 47% of survivors referred to the DAIOs have mental ill health as a support need. This data shows a reduction based on previous reporting (80% caseload with mental ill health support needs), however, the previous data only represents a five month sample so cannot form an accurate comparison. Anecdotally, the DAIOs report that the reduction in figures may relate to the assumption of a baseline of mental ill health support needs for survivors, therefore the data may only represent those cases where mental ill health is particularly marked or present within a complexity of other needs. Nearly a third of the survivors working with DAIOs have support needs regarding their substance use; whilst the data currently does not record the nature of the substance use disorder, anecdotal evidence suggests that the DAIOs support more survivors with drug use support needs than alcohol. 18% of survivors supported by the DAIOs presented with dependent children, and it is also worth noting further anecdotal evidence that there are significant numbers of survivors referred to the DAIOs who have had children removed from their care. Work to develop

⁸⁰ [equality-profile-2024-refresh.pdf \(gloucestershire.gov.uk\)](https://www.gov.uk/government/publications/equality-profile-2024-refresh.pdf)

⁸¹ [equality-profile-2024-refresh.pdf \(gloucestershire.gov.uk\)](https://www.gov.uk/government/publications/equality-profile-2024-refresh.pdf)

the data collected is an ongoing task in order to show more detail regarding the needs, outputs and outcomes of the DAIOs work.

Graph 6.4.: Survivor Support Needs identified by the DAIOS 23/24



6.5. Refuge requests to Gloucestershire Domestic Abuse Support Service (GDASS)

As part of the GDASS service (community based DA service), victims of domestic abuse will seek the support of GDASS in accessing safe accommodation.

Requests for refuge support via GDASS have steadily increased year on year, with 2023/24 seeing 64 requests made, a 68% increase from the year before. This increase could be connected to wider increases seen in the GDASS service itself, or possibly demonstrating an increased need for accommodation during the current economic climate. Despite this increase, refuge requests still account for less than 1% of all contacts to GDASS, indicating a higher need for community-based provision rather than support within safe accommodation.

Table 6.4.: Number of refuge requests made to GDASS for year 2021/22, 2022/23 and 2023/24.

	Number of Refuge Requests to GDASS	As a % of all contacts made to GDASS
2021/22	26	0.30%
2022/23	38	0.30%
2023/24	64	0.70%

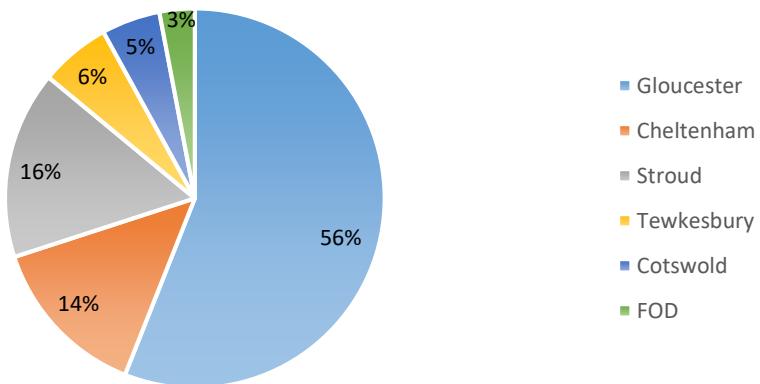
These requests for refuge include both single individuals (52% in 23/24) and families (48% in 23/24) seeking refuge space. Averaged across a 6 year time period from 1 April 2018 to 31 March 2024, 50% of requests for refuge were for a single individual and 50% were for a family. This demonstrates a need for a variety of safe accommodation spaces that can cater to families of varying size as well as single individuals.

The vast majority make a refuge request with no preference as to the location in which they secure safe accommodation; this accounted for 58% of referrals in 2023/24, a similar finding to previous years. Where a specific location was requested in 2023/24, 25% requested a specific location that was outside of Gloucestershire and less than 5 people requested a local refuge space.

Across a 6 year time period from 1 April 2018 to 31 March 2024, 100% of all refuge requests were made by clients residing within Gloucestershire. This is anticipated for a community-based service, with many victims from out of county likely to seek refuge via the national network.

During 2023/24, the majority of refuge requests came from clients who were residing in Gloucester, accounting for 56% of requests. This is a similar finding to previous years but indicate a potential increase in need for the Gloucester area with a 19% increase from 2022/23. Given the highest rates of referrals overall to GDASS come from clients living in the Gloucester district, we expect to see this in the data.

Graph 6.5.: Refuge request to GDASS based on district of victim 2023/24



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 Place of Safety
- Securing temporary accommodation in county
- 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 majority of refuge requests made to GDASS which secure an offer move to a refuge out of county; a finding consistent with previous data presented in 2022/23. Of the 64 refuge requests which progressed to a move, 5 were accepted at refuge in county with 11 accepted at out of county refuges. This is to be expected given the limited refuge provision in the county and also a likelihood that the security of the individual is better serviced by an out of county placement. As the Places of Safety scheme increases locally however, there may be a move to more local placements as a result of increased availability.

In 2023/24, all negative outcomes relating to refuge requests involved applications being withdrawn and engagement with GDASS not progressing. It should be noted that all clients in this category had mental health support / complex needs, with all requests for refuge being made by professionals rather than from the person directly.

This is in contrast to previous years where the majority of negative outcomes related to a refuge declining the application. This may therefore indicate that the national availability of refuge spaces

has improved, as previous years indicated a refuge decline was primarily connected to a lack of space.

Table 6.5.: Reason for refuge request disengagement/unsuccessful placement for 2021/22, 2022/23 and 2023/24.

Reason for disengaging or not getting refuge	Percentage of refuge requests 2023/24	Percentage of refuge requests 2022/23	Percentage of refuge requests 2021/22
Client declined refuge – affordability/housed in Places of Safety	0	0	12.50%
Client declined refuge – safe to return home	0	0	12.50%
Refuge declined application	0	56%	37.50%
Withdrew application	100%	11%	25%
No availability	0	33%	12.50%

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 is likely to be the result of robust safety planning which identifies it is not safe for some victims to remain in the county.

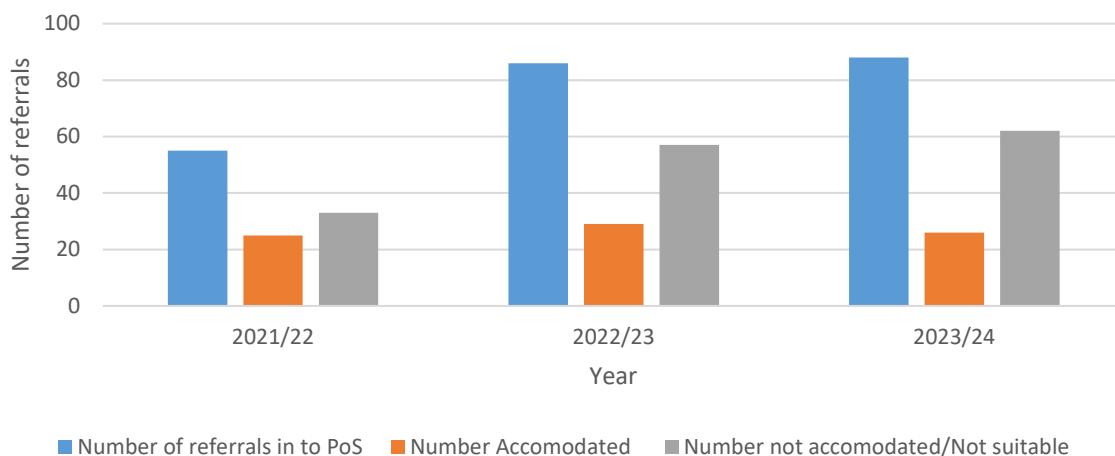
6.6. Places of Safety (Dispersed Refuge)

The Places of Safety (PoS) scheme is currently run by GreenSquareAccord. This model offers an alternative model to refuge accommodation and is accessible to all victims regardless of gender or other protected characteristics.

From 1st November 2023, following a re-commissioning process, GreenSquareAccord are responsible for increasing the number of accommodation units within the PoS scheme from twelve to, at least, twenty-four (but no more than thirty-six).

Over the last 2 years, referrals into the PoS scheme have remained relatively stable. Across all 3 years, the number of referrals able to be accommodated by the scheme has remained stable with 25-29 referrals accommodated year on year. It is hoped that the number of referrals to be accommodated will increase as the scheme itself increases its provision of available units.

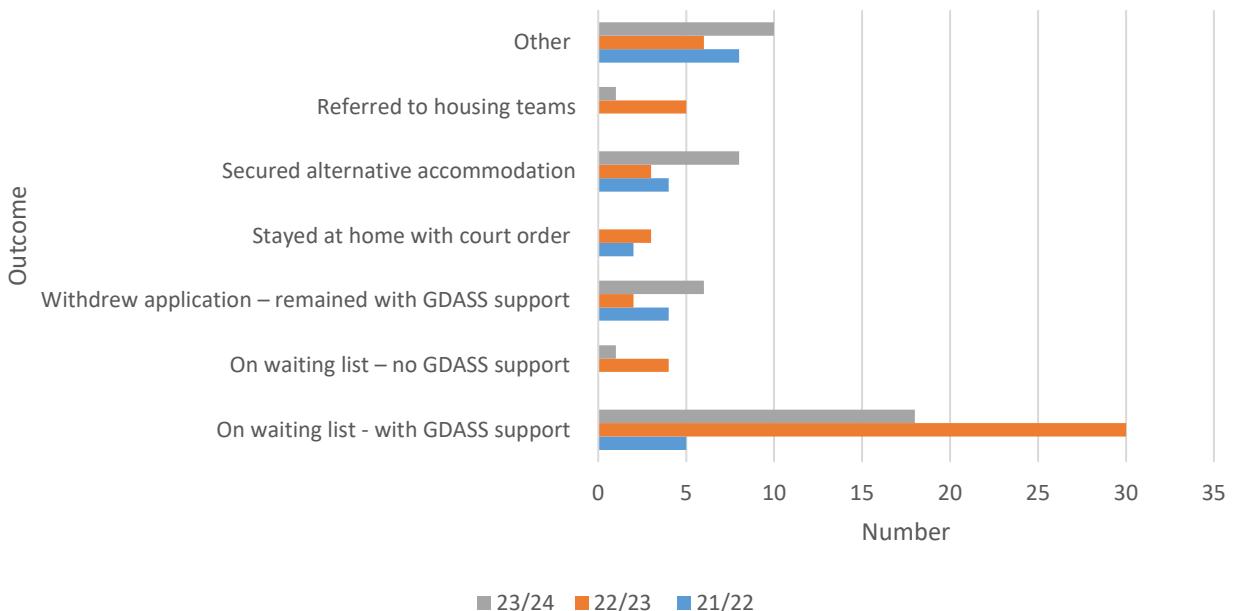
Graph 6.6: Referrals in PoS scheme across years 21/22, 22/23 and 23/24



Due to the limited number of units in the PoS scheme, access is prioritised for those who are assessed at high risk of serious harm. As such, in 2023/24 57% of those accommodated were clients assessed as high risk. This is an increase from 41% of referrals in 2022/23 and 44% in 2021/2022. This aligns to the increase seen in the wider GDASS service for high risk victims.

Where it was not possible to accommodate someone within Places of Safety, the majority remained engaged with GDASS support.

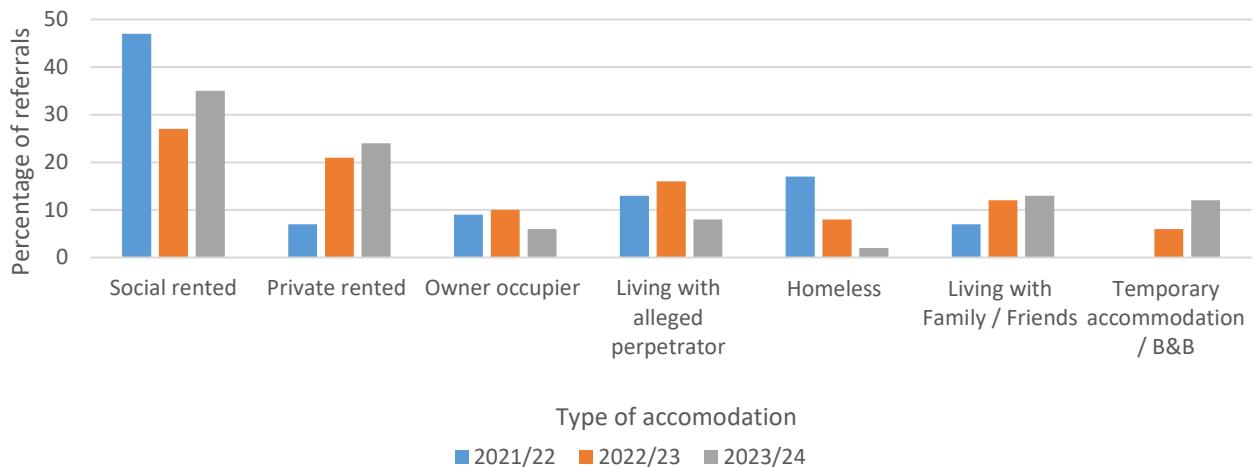
Graph 6.7.: Outcomes when PoS not available for years 21/22-23/24



Across 3 years, the majority of referrals for the PoS scheme are for victims who were residing in a social rented property at the time, accounting for 35% of referrals in 2023/24. Following this, 24% in 2023/24 were residing in the private rented sector.

Whilst living with the perpetrator at the time of referral accounts for 8% of referrals in 2023/24, it is clear from the data across 3 years that those accessing the PoS scheme are not always doing so because they live with their abuser. This may be connected to the high risk indicator of separation and the PoS scheme prioritising clients considered high risk; demonstrating that safe accommodation is a key factor in safety planning even when the victim is not residing with their abuser.

Graph 6.8.: Percentage of referrals based on type of accommodation victim/survivor was living in at time of referrals from years 21/22 to 23/24



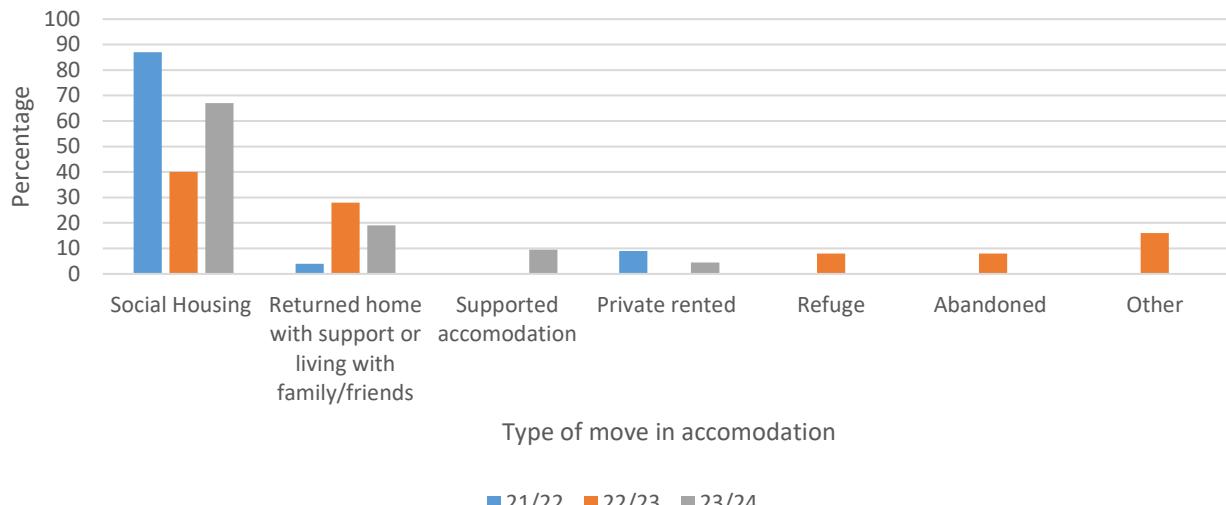
Across all 3 years, the majority of referrals into the PoS scheme were for single females with children, accounting for 71% of referrals in 2023/24 (65% in 2022/23 and 75% in 2021/22). This is followed by single females without children, although the proportion of referrals in this category is more changeable over time, accounting for 25% of referrals in 23/24 compared with 31% in 2022/23 and 18% in 2021/22.

The PoS scheme is able to accept referrals for male victims of domestic abuse, with 4% of referrals in 2023/24 for males with children; bringing the referral figures more in line with the 5% of referrals seen in 2021/22 following no referrals in 2022/23.

Where victims are housed in the PoS scheme, the majority in 2023/24 were females with children, accounting for 69%, and 19% females without children.

Over 3 years, the majority of those accommodated in PoS were housed in social housing properties following leaving PoS, accounting for 67% in 23/24. This is followed by victims either returning home or moving in with family and/or friends.

Graph 6.9.: Outcomes from PoS for years 21/22, 22/23 and 23/24



6.7. Target Hardening and Sanctuary Scheme

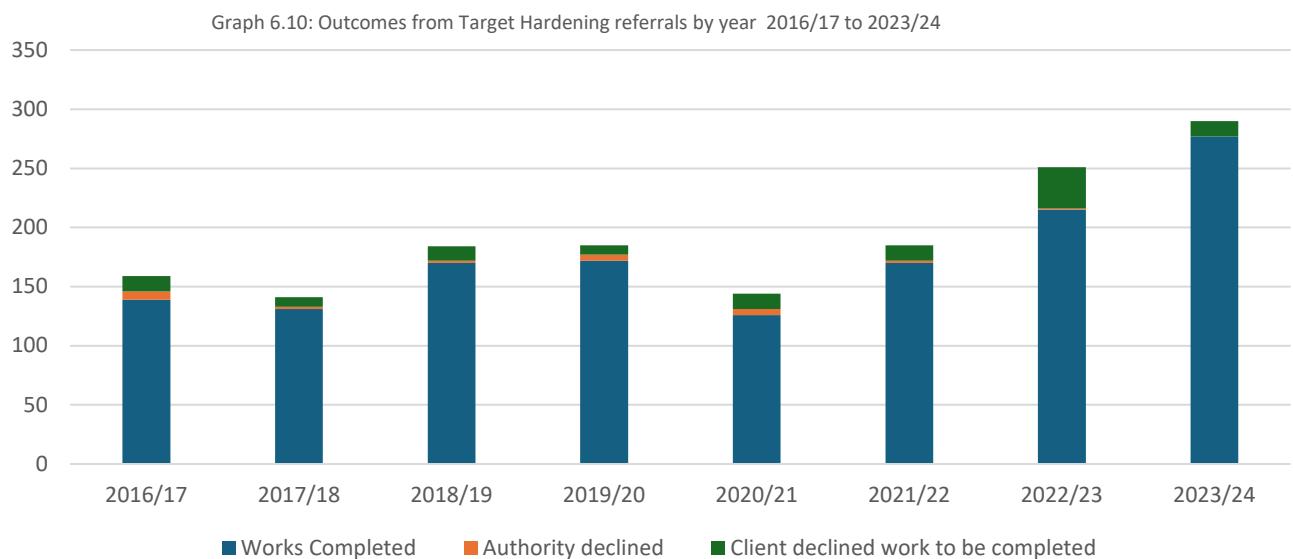
A significant part of the Gloucestershire model is to secure a victim's safety within their own home, enabling victims to maintain social contacts and networks to aid in their ongoing safety and recovery from abuse. In order to support this model, the district councils commission a Target Hardening and Sanctuary Scheme provided by Safe Partnership and GDASS make referrals in to the scheme.

In 2023/24, there were 325 referrals for the scheme, demonstrating a 26% increase from 2022/23 and a 76% increase from 2021/22. This increase may be aligned to the overall increase in referrals to GDASS over time or may also demonstrate a greater need for this type of service.

Where a referral was made into the scheme, 85% resulted in works being completed to keep a victim safe within their own home. This is a similar finding from previous years.

Works completed on victim's homes can include:

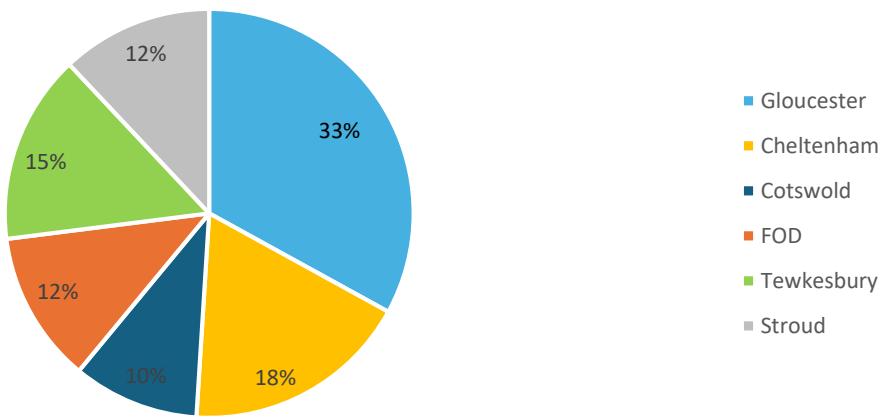
- Door and window locks
- Outside lighting
- Anti-climb paint
- Letterbox guards
- Reinforced doors
- Alarms



The GDASS high risk team account for 63% of the Target Hardening referrals with the remaining 37% coming from the standard and medium risk projects within GDASS.

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 33% of all referrals. This is to be expected given the prevalence data for domestic abuse in the county.

Graph 6.11.: Target Hardening Referrals by District 2023/24



In 2023/24, 2 referrals for the Sanctuary Scheme were made via GDASS to Safe Partnership. 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. Both requests were approved; 1 was installed and the other did not progress as the client's circumstances changed and they moved to a refuge out of county. Year on year, sanctuary scheme referrals remain low.

Referrals to GDASS for the Target Hardening and Sanctuary Scheme are over 5 times higher than seen for refuge requests, with a year-on-year increase demonstrating 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.

6.8. Stroud Beresford Women's Refuge

Data from Stroud Beresford covers years 2018/19 to 2023/24. The service is only available to women, so all data presented relates to women and their children.

The number of referrals to the refuge is influenced by whether vacancies are showing live on the Routes to Support database. It is noted that the refuge has been fully occupied at 97% throughout this time.

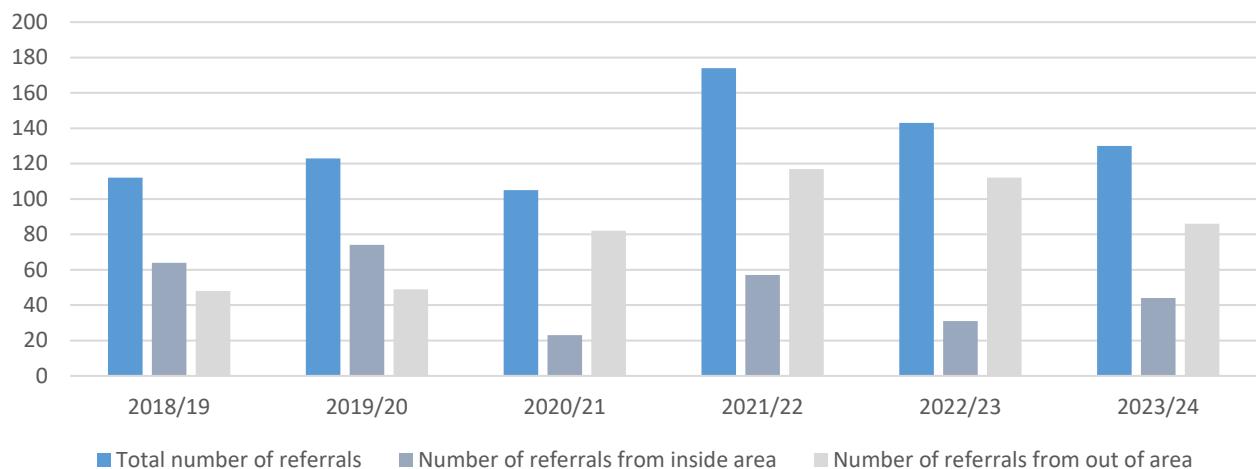
Over the last 5 years, referrals from Gloucestershire based households have remained between 20%-30%. Each referral includes a robust risk assessment and safety planning; where it is recognised that the risks may be too high for women to remain in county, support is provided to identify refuge or safe accommodation out of county. 39 women and 27 children were accommodated in refuge between 2023/24, this has been around the average number over the last 3 years. 44% of households had one child, 12% had two children and 44% were single women.

The refuge is a relatively small service (housing up to 9 families at any one time) and, as such, was only able to accept 30% of referrals in 2023/24. This meant that 91 households referred to refuge were unable to access the service, something that is likely to be a significant underrepresentation.

The refuge has good working relationships with local and national partners who support women with immigration needs, including Children's Social Care and Specialist Advisors/support services and as such has accommodated 3 women and 3 children with No Recourse to Public Funds between

2023/24. These households often have extended stays within refuge due to the immigration process and individual needs.

Graph 6.12.: Referral numbers into refuge from 2017/18 to 2023/24



Where victims present from out of area, table 6.6. details the most common areas from which victims are fleeing.

Table 6.6: Top 5 most common areas out of area victims are fleeing in their approach to refuge for years 17/18 to 2023/24.

Year	Wiltshire	Bristol	Bath	Dewsbury	Herefordshire
2018/19	Wiltshire	Bristol	Bath	Dewsbury	Herefordshire
2019/20	Southampton	Hampshire	Wales	Wiltshire	Bath
2020/21	Gloucestershire	Bristol	Wiltshire	Oxfordshire	North Somerset
2021/22	Wiltshire	Bristol	Somerset	Birmingham	Wales
2022/23	Wiltshire	Wales	Worcestershire	West Yorkshire	Hampshire
2023/24	Gloucestershire	Bristol	Oxfordshire	Swindon	Bath and Northeast Somerset

3.5.1. Challenges facing the refuge

The cost of living continues to have an impact on women leaving abusive situations, women are continuing to frequently report to the refuge that rising living costs are being used by perpetrators of abuse to entrap women in relationships, promoting fear in victims that they will not be able to afford to live alone or manage the costs of supporting their children. Women who are working are also facing difficulties in accessing refuge due to limited access to financial support and benefits, with many having to face leaving employment or managing the costs of accommodation on their limited income, and some are having to make the difficult choice not to leave their abusive relationship.

The refuge has been proactively working with partners (commissioners, trusts and other funders and private companies) to try to reduce the impact of the cost of living for residents of the refuge where possible. This has included support with everyday items, transport costs and other costs that would otherwise be a barrier to living in the refuge or moving on from the refuge. The refuge has also raised the concern regarding the choices women who are in employment are having to make.

Most families who are re-housed moved from the refuge into social housing due to affordability; securing privately rented accommodation is becoming increasingly difficult across all counties. There

is a noticeable increase in demand for social housing and this is having a direct impact on families who are moving on from refuge. The wait for social housing is increasing and this is impacting on the length of stay for each household and the ability to accommodate new referrals.

The average length of stay in 2023/24 has been 93 days. In this year, 20% of households resided within refuge for over 6 months, with two of these households waiting nearly 12 months for secure move on accommodation. The majority of households move on from refuge between 4 and 6 months.

Refuge data shows a number of reasons why refuge provision was not offered, the most common reasons being that the victim changed their mind about coming to refuge, that the household size was larger than could be accommodated or that the geographical risks were still too high. The refuge also receives referrals for victims whose support needs are unable to be accommodated. This can include behaviour or needs which are often violent offences or substance misuses which would be incompatible with a house where vulnerable children are housed.

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 into the refuge are regularly received via a range of referral routes including:

- Self-referral
- VAWG services
- Local authority housing teams
- Children's Social Care
- Police
- No Recourse to Public Funds teams

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. In the last year (2023/24), 30% have been self-referrals (service-users who make direct contact with the refuge to request support), 29% local or national specialist domestic abuse services and 23% from local authority housing teams.

[6.8.1 Demographics within refuge](#)

Across the last 3 years (2021-2024) the majority of women in refuge were aged 31-35 (18%), 17% aged 18-25, 16% aged 26-30, and 14% aged 36-40.

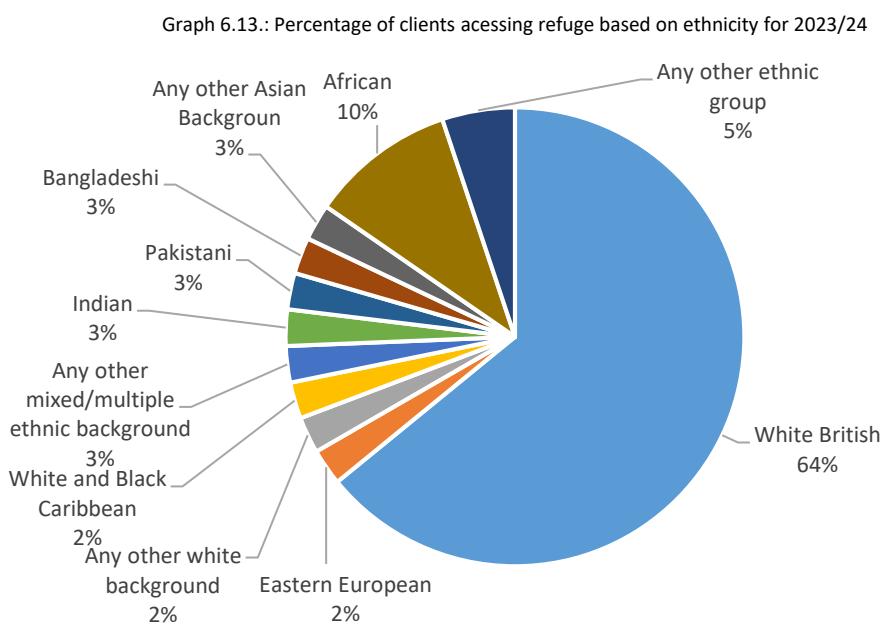
Across the last 3 years (2021-2024) 57% of all children have been aged 0-5 years, with a further 22% aged between 6 and 10 years. 19% of children were aged between 11 and 15 years and 2% aged over 16.

Between 2023/24 the majority of victims (57%) have their relationship status recorded as single, which correlates with a number of victims stating during referral that they had recently separated from their partner and behaviours and risks had escalated, therefore leading to them needing refuge. 2% were recorded as married; this is considerably less than the wider Gloucestershire population of 47.8% 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 33.6% of the Gloucestershire population and would likely include those who are 'cohabiting' but not married⁸².

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 93%, with 7% identifying as LGBTQ+.

When considering the ethnicity of those accessing refuge, whilst the majority are noted as being from white ethnic groups (70%), 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 (30%). This is positive given prevalence data⁸³ indicates that victims from Black, Asian and Minority Ethnic groups are more likely to experience domestic abuse.



When considering the disability status of victims entering refuge, 15% of women identified with a disability. This is then broken down to note that 7% are recorded as having a physical disability, 5% as a mental health disability, 2% as a hearing disability, 2% as a learning disability and 2% with a long-term health condition (it is important to note that some will have identified across more than one disability strand). In addition, 2% of women identified that they had more than one disability. Whilst the refuge is unable to provide wheelchair access, it is able to support those with physical disabilities where wheelchair access is not required.

In addition, and most significantly, 68% of victims were recorded as having mental health concerns. Whilst it is not clear what these concerns are specifically, it is clear that many victims accessing refuge will experience concerns relating to anxiety, stress and post-traumatic stress disorder, affecting their mental health and wellbeing; a common impact of experiencing domestic abuse.

When considering the socio-economic status of victims entering refuge, the majority (85%) are recorded as unemployed and not seeking employment. 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, whilst a small number are on maternity leave, or employed part time.

⁸² [equality-profile-2020-final.pdf \(gloucestershire.gov.uk\)](https://www.gov.uk/government/statistics/equality-profile-2020-final.pdf)

⁸³ Office for National Statistics (ONS): referenced in Gloucestershire DA full needs assessment 2021

In addition and in line with the above finding, 94% of those accessing refuge are in receipt of benefits. 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.

6.9. Areas for development

Target Hardening and Sanctuary Scheme: The scheme has seen increasing demand over recent years and the upcoming recommissioning of the service will need to consider how future demand can be met.

DAHA Accreditation: This accreditation is viewed as best practice and taking this forward locally would show a commitment to the improvement of responses to victims of domestic abuse across housing services in Gloucestershire. It would also support the implementation of the statutory duty to provide support within safe accommodation to victims of domestic abuse. Some registered providers in the county have already started their DAHA accreditation process, but it would be a positive step for further registered providers to begin this process as well as securing buy in and support from the district councils to adopt this approach within local homelessness and housing teams.

Housing Partnership Team: This team has had a role and remit around domestic abuse since the statutory duty from the DA Act was introduced in 2021. The team has focused on the commissioning of specialist accommodation based services and ongoing policy and project work to improve the housing response to domestic abuse. Work is underway to review the team's function and seek agreement on the team's future role and remit for domestic abuse in the county. Consideration needs to be given to the role this team can play in supporting the implementation of best practice approaches such as DAHA accreditation and the Whole Housing Approach for both the districts and registered providers, as well as supporting changes in practice following learning from process such as Domestic Abuse Related Death Reviews, and the role of the DAIOS.

Whole Housing Approach: Developing this approach locally will be a long-term piece of work that requires buy in at a strategic level across the county. With the refresh of the countywide domestic abuse strategy, there is an opportunity to seek a commitment to the Whole Housing Approach and begin work ensuring Gloucestershire is aligned to best practice nationally in regards to domestic abuse accommodation based support, in the same way in which the county's community based provision is.

A need to improve collaboration with neighbouring authorities: The Housing Partnership Team have been leading work to develop a Managed Reciprocal scheme that could operate across the South West of England. This scheme, which is being developed in collaboration with neighbouring authorities and registered providers, would enable survivors to access managed moves across local authority borders, and across different registered providers whilst maintaining security of tenure.

Ongoing local needs: There are a range of local needs that have been identified since 2021 locally with regards gaps in safe accommodation locally. These gaps include:

- A need to increase capacity of domestic abuse safe accommodation (places of safety developments are supporting this)
- A need to develop services to overcomes barriers such as:
 - No recourse to public funds
 - Complex needs (domestic abuse grant funding has been allocated by the county council towards a pilot Respite Rooms scheme which is due to be commissioned by the Housing Partnership Team)
 - Specialist support to meet the needs of protected characteristic groups
 - Larger families
 - Support for mental health within safe accommodation
- A need to develop the provision of move on accommodation
- A need to improve collaboration with neighbouring authorities
- A need to improve links with registered providers to secure safe moves for victims who already hold tenancies with them (GDASS now have an IDVA and floating support worker who work within the registered provider/social housing sector providing both direct support to victims and indirect support through advice/support to their landlords)
- A need to consider the approach to the housing of perpetrators of domestic abuse when they are made homeless as a result of being excluded from their property, ensuring victim safety by preventing the perpetrator from looking to return to previously shared homes.

Local intelligence and contextual information gained from the Local Partnership Board also highlights the following gaps/areas for development:

- Limitations on the volume of existing housing stock across all tenures in the county which may impact on the sourcing and availability of DA safe accommodation. MHCLG funding cannot be used for capital investment to develop the accommodation base. There is therefore a need to explore investment in housing stock and options that fit the definition of DA safe accommodation in order for the MHCLG funding to be utilised for the support provision within that accommodation.
- The need to maintain capacity in the specialist DA support workforce; reflecting national recruitment issues in the sector that impact on sustaining specialist roles.
- The potential challenge of developing 'by and for' DA support services in a rural county.
- A need to maintain/grow provision of community based support to meet victim's needs alongside the development of accommodation based support.

At the time of writing, the provision on the ongoing grant from MHCLG is currently unknown, so the activities to meet the statutory duty are yet to be determined until funding allocations are made known.

7. Community Based Services for Victims of Domestic Abuse

Community based services are delivered to domestic abuse victims and survivors within the community, often within their own homes and can include:

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

The provision of such services has primarily been highlighted to commissioners nationally via the National Statement of Expectations⁸⁴ which outlines 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. This model of support includes both community and accommodation based services.

Since the Domestic Abuse Act 2021 placed a focus on safe accommodation, the Domestic Abuse Commissioner's (DAC) Office produced a report mapping the provision of community-based services across the country; 'A Patchwork of Provision: How to meet the needs of victims and survivors across England and Wales'⁸⁵. The main findings highlighted within this report are the 'postcode lottery' that exists for survivors of domestic abuse, and that community-based services are rarely able to meet the demand; underlining a need for national sustainable funding. Other key findings included:

- The need for a wide range of support (not just advocacy)
- The identification of barriers to support for victims / survivors from minoritised communities and those with multiple disadvantages
- The desire for victims from minoritised communities to receive support delivered 'by and for' their own community; this provision is lacking in many local areas
- The independence of specialist DA support services is critical
- An inability to access support when they want it
- Difficulties in accessing counselling and mental health support
- Accessibility issues specific to disabilities e.g. LD, sensory impairment
- Difficulties for men accessing specialist DA services
- Identified need to increase specialist support available for child victims of DA
- Identified gap in the availability of services for victims / survivors with No Recourse to Public Funds (NRPF)

The focus on the need to ensure the provision of community based support has been included within the recent Victim and Prisoners Act 2024⁸⁶. This act includes a statutory duty to collaborate for the future commissioning of community based services to tackle domestic abuse, sexual violence and serious violence.

⁸⁴ [Title] (publishing.service.gov.uk)

⁸⁵ https://domesticabusecommissioner.uk/wp-content/uploads/2022/11/DAC_Mapping-Abuse-Survivors_Long-Policy-Report_Nov2022_FA.pdf

⁸⁶ [Victims and Prisoners Act 2024 \(legislation.gov.uk\)](https://www.legislation.gov.uk)

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 2022, there were 148 local helpline services available, often connected to wider domestic abuse provision in local areas⁸⁷.

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.

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 all victims 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, for example, bespoke 'by and for services' for those from LGBTQ+ groups or from various minority ethnic communities.

Intersectionality and service provision⁸⁸:

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 to enable those groups to feel that the services will understand their specific needs. This type of service provision is commonly referred to as 'by and for' provision; services that

⁸⁷<https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/domesticabusevictimservicesenglandandwales/2022>

⁸⁸[Intersectionality and domestic violence – Genesis Women's Shelter & Support \(genesisshelter.org\)](https://genesisshelter.org/)

have been set up by those from a protected characteristic group to provide support for those from the same protected characteristic group.

The commitment to an intersectional approach is outlined in the Code of Practice for Victims of Crime ('the Victims' Code')⁸⁹ 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 need for dedicated services, and central government organisation taking a keen interest in local 'by and for' provision.

Safe Lives Leading Lights accreditation⁹⁰:

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 as 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 by supporting staff to gain knowledge and confidence in their roles
- Support partnership work by 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 Standards⁹¹:

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 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.

⁸⁹ [The Code of Practice for Victims of Crime in England and Wales and supporting public information materials - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/the-code-of-practice-for-victims-of-crime-in-england-and-wales-and-supporting-public-information-materials)

⁹⁰ [Leading Lights: accreditation for domestic abuse services | Safelives](https://safelives.org.uk/leading-lights-accreditation/)

⁹¹ [Shared Standards Whole Document FINAL.pdf \(safelives.org.uk\)](https://safelives.org.uk/assets/documents/SharedStandardsWholeDocumentFINAL.pdf)

- **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 is essential. 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 enabling them to maintain their links to their community as a means of helping victims to rebuild their lives.

This commitment was demonstrated within the previous Domestic Abuse and Sexual Violence (DASV) Commissioning Strategy and Outcomes Framework (2014 – 2018) and the Gloucestershire Joint Commissioning Framework for domestic abuse (2019-2023). A range of services have been commissioned under these commissioning approaches, with an ongoing commitment to the joint commissioning of community based services now in place as a part of the county Domestic Abuse Strategy (2021-2024) and within its refresh for 2025-2028.

7.3. Service Provision

The main service provision for the county is Gloucestershire Domestic Abuse Support Service (GDASS) and is currently provided by 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 aged 16+ 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:

Table 7.1.: Summary of services offered by GDASS

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 and resources for professionals engaging with victims (via a separate phone number and through the website)
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>Breathe: 12 week female only programme that focuses on Boundaries, Respect, Empowerment, Awareness, Taking Control, Honouring Resistance and Education.</p> <p>Six Steps: The programme supports participants who are survivors of domestic abuse to understand domestic abuse behaviours and tactics. It supports participants to understand the impact of abuse on them and their families. Six Steps is delivered to separate groups for female and male survivors and has been run virtually and in-person.</p>
MASH Support	GDASS have workers embedded within the Multi-Agency Safeguarding Hub (MASH) 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 (GMAT) 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 Breathe group work provision.
IDVA Service	Independent Domestic Violence Advisors (IDVAs) 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)

	<p>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>The IDVA service will also provide a regular drop in service with 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 (YPVAs) 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 and direct support to those experiencing domestic abuse at the earliest opportunity whilst they are in the hospital. 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, wards and departments around domestic abuse and the referral pathways for further support.</p> <p>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.</p>
Pilot projects funded from 2021 until March 2025	
Police IDVA Service	The police response IDVAs are based within the local Multi-agency Safeguarding Hub (MASH) and are aligned to the police Domestic Abuse Safeguarding Team (DAST) and police investigating teams to support police colleagues to engage with victims they have not been able to engage with, 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 work alongside 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 countywide service run by Victim Support for young people aged 13-19 who:

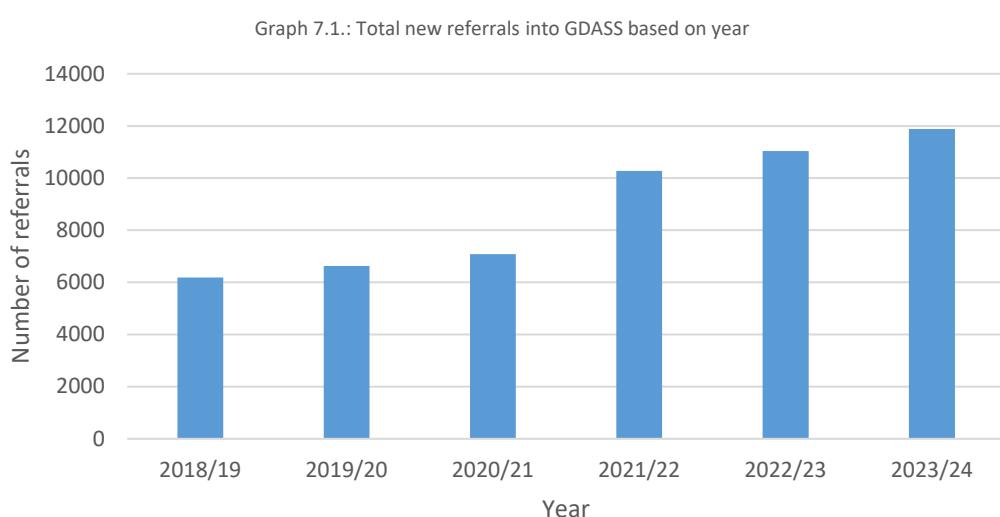
- Have experienced or are experiencing teenage relationship abuse
- Have witnessed domestic abuse in the home (either current or historic)
- Are displaying harmful behaviour in their relationships

STREET offers 1:1 support and evidence-based group programmes Dating Detox 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 have been considered in a separate needs assessment for [children and young people](#).

7.4. Access to Community Based Support in Gloucestershire

Referrals into GDASS have continued to increase year on year, with a 92% increase from 2018/19 to 2023/24 and an increase of 8% in a year from 2022/23 to 2023/24.

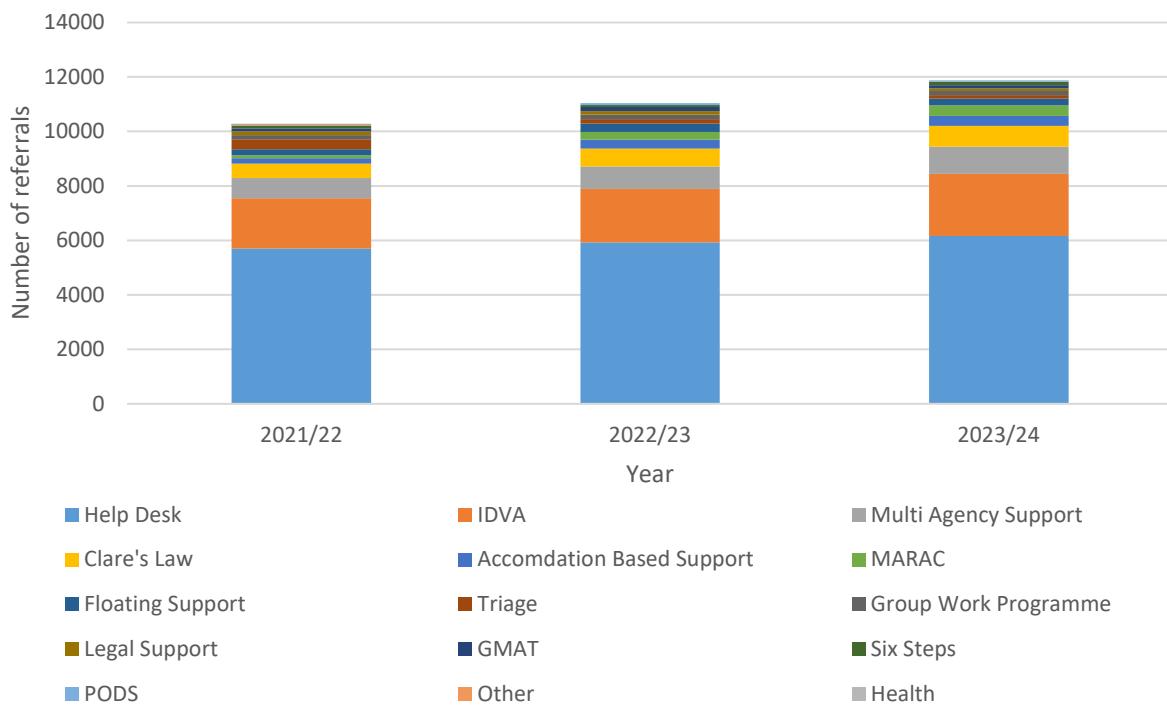


The vast majority of referrals into the service are via the helpdesk, as would be expected given this is the main access to the service. Many referrals via the helpdesk will move on to other areas of support within the service, such as floating support and IDVA, and many victims will also choose to continue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

As detailed below in graph 7.2., the second largest volume of referrals into GDASS is for the IDVA service, accounting for 19% of referrals in 2023/24, a significant increase from the 14% seen in the 2021 needs assessment. The referrals into the IDVA service have also increased year on year, with a 16% increase seen from 2022/23 to 2023/24.

The increase in referrals to the IDVA service may be indicative of a genuine increase in high risk domestic abuse, or may indicate improved risk assessment and identification of high risk cases. The increase seen by GDASS is reflective of the increase seen within MARAC, as would be expected.

Graph 7.2.: New referrals to GDASS based on service offer for years 21/22, 22/23 and 23/24



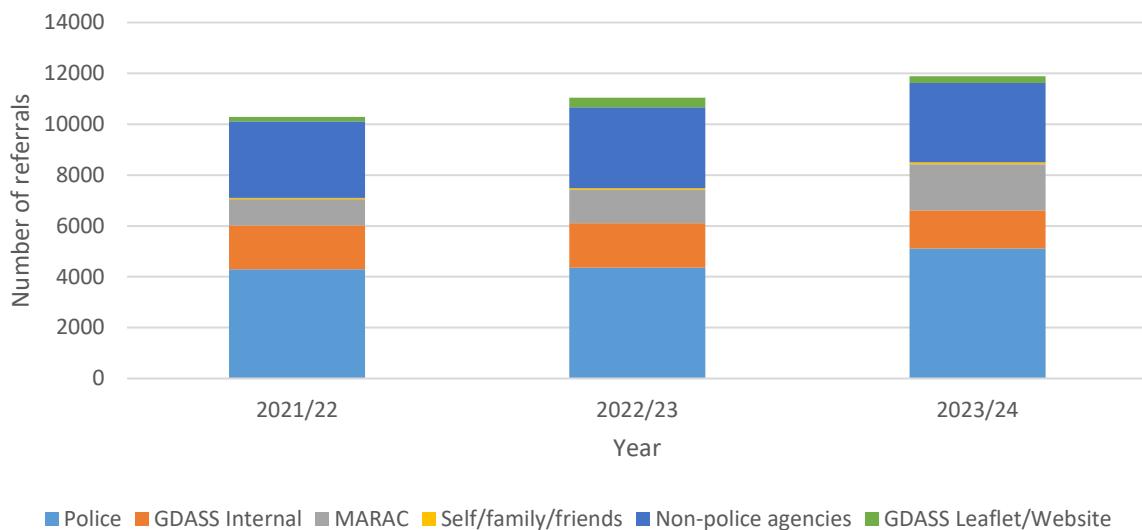
Referrals into GDASS are most consistently made by the police, with helpdesk referrals the most reliable source of comparison. When considering helpdesk referrals in 2023/24, police account for 65% of referrals into GDASS, a slight increase from the 64% seen in the 2021 needs assessment.

It is worth noting that in addition, around 15% of referrals into GDASS come from the MARAC, which will likely include a high proportion of police identified high risk cases, given police referrals into MARAC account for the highest referral levels.

The previous needs assessment identified a need to increase the volume of non-police referrals into the GDASS service, ensuring there were clear pathways to support outside of the criminal justice system. Whilst volume of non-police referrals into GDASS have increased by 24% (from 2021/22 to 2023/24), the proportion of non-police referrals has changed very little, accounting for 14% of all referrals in 2023/24 (15% seen in the 2021 needs assessment). It is therefore positive that volume increases may demonstrate an improved awareness of referral pathways amongst non-police agencies, there may still be work to do in this area to ensure victims who do not wish to access the criminal justice system can still access specialist support.

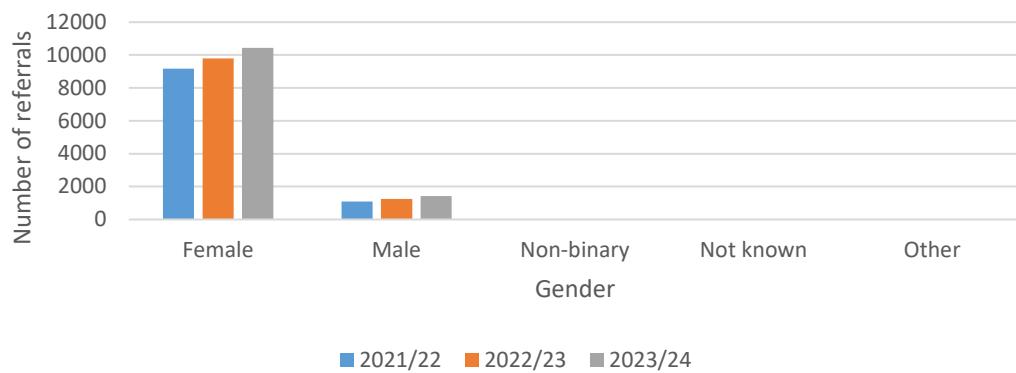
Of the non-police referring agencies, children's social care and referrals from other voluntary sector organisations account for the majority of referrals into the GDASS helpdesk, both accounting individually for 13% of referrals in 2023/24. Housing associations and landlords follow, accounting for 5% of helpdesk referrals in 2023/24.

Graph 7.3.: Source of Referrals to GDASS Help Desk for years 21/22, 22/23 and 23/24



The vast majority of referrals into GDASS are made for female victims of domestic abuse, accounting for 88% of referrals in 2023/24. Referrals for male victims of domestic abuse are, however, considerably higher within GDASS than seen in similar services nationally, with GDASS seeing 12% of referrals for males compared with national services seeing 4%⁹². This is a positive demonstration of how GDASS has looked to promote its service to male victims of domestic abuse, but is a slight decrease from the 14% seen in the 2021 needs assessment.

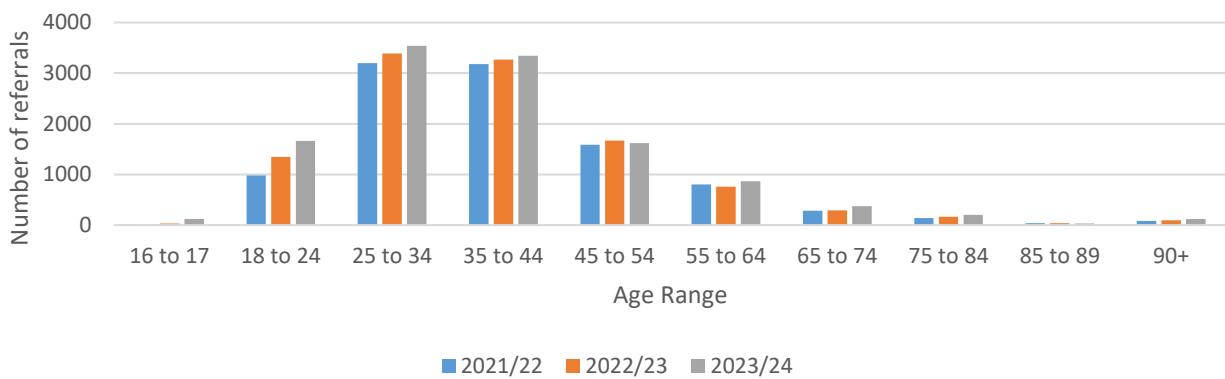
Graph 7.4.: Number of referrals to GDASS based on gender for years 21/22, 22/23 and 23/24



As detailed in graph 7.5., the majority of GDASS clients are aged 25-34 followed by 35-44, in line with local police data. This may indicate a need to increase engagement options with other age groups, or may be indicative of higher rates of domestic abuse within certain age groups.

⁹² <https://safelives.org.uk/sites/default/files/resources/Insights%20national%20dataset%20-%20Helpline%202014-2017%20-%20Final.pdf>

Graph 7.5.: Number of referrals to GDASS based on age for years 21/22, 22/23 and 23/24



Whilst all referrals into GDASS are in relation to support needs connected to domestic abuse, data collected by the service records the most common secondary and tertiary issues identified by service users in relation to the concerns they present to the service with.

Across three financial years (21/22, 22/23 and 23/24), the most common secondary issues noted by service users was a concern for coercive and controlling behaviour, accounting for 10% of secondary issues. This is followed by a concern for children witnessing domestic abuse (8%), stalking and harassment (8%), concerns connected to separation/divorce (6%) and concerns around mental health (6%).

When considering the most common third issues noted by services users, the same key issues are most prevalent.

7.4.1. Perpetrator type

Across three financial years from 2021-2022 to 2023-2024, the majority of referrals related to services users whose abuser was reported as their former partner, accounting for 53%, with 26% reporting their abuser as their current partner. This indicates that the majority of survivors access support when they are no longer in a relationship with their abuser, but where the abuse has continued, or potentially worsened at the point of separation.

Abuse from a family member accounted for 6% of referrals across the three year period.

GDASS receive many referrals for repeat victims of domestic abuse. Of repeat referrals into the service, 54% were for victims re-entering the service due to abuse from the same perpetrator as per their previous referral. A further 7% of referrals were for repeat victims of abuse experiencing abuse from a different perpetrator than seen in their previous referral into the service.

7.4.2. GDASS referrals and protected characteristics

Ethnicity

Across three financial years from 2021-2022 to 2023-2024, the majority of referrals into GDASS were for individuals recorded as 'White British', accounting for 82% of referrals into the service. This is followed by other white ethnicities, which collectively accounted for 7% of referrals over the three year period.

As detailed below in table 7.1, for non-white ethnicities, individuals who identified as a mixed ethnicity accounted for 2.50% of referrals into GDASS collectively, with individuals identifying as 'Mixed White/Black Caribbean' making up the majority of these referrals at 1.43%.

Overall, 6.67% of referrals into GDASS across three years were for individuals recorded as 'non-white' ethnicities; slightly below the population of 'non-white' ethnicities in the county at 6.69%.

Whilst GDASS as a service has been working towards increasing its engagement with victims from 'non-white' ethnicities, there is a clear need to continue this work, ensuring the service is not only able to meet the needs of survivors from 'non-white' ethnicities, but also ensure all survivors across the county are aware of the support options available and feel confident that these services can meet their needs.

Table 7.2.: Percentage of referrals into GDASS based on ethnicity across three financial years 21/22, 22/23 and 23/24.

Ethnicity	Percentage total for years 2021/22 to 2023/24
Asian other	1.11%
Bangladeshi	0.12%
Bangladeshi British	0.02%
Black African	0.76%
Black African British	0.08%
Black British	0.06%
Black Caribbean	0.45%
Black Caribbean British	0.11%
Black Other	0.45%
Chinese	0.13%
Eastern European	0.14%
Gypsy and Traveller	0.19%
Indian	0.45%
Indian British	0.16%
Mixed Other	0.63%
Mixed White/Asian	0.20%
Mixed White/Black African	0.25%
Mixed White/Black Caribbean	1.43%
Not known	2.01%
Not provided on referral	1.47%
Other	0.24%
Pakistani	0.19%
Pakistani British	0.07%
Refused to provide	0.03%
White British	82.22%
White European	0.21%
White Irish	0.52%
White Other	6.30%

Religion

The majority of individuals referred into GDASS over financial years 21/22 to 23/24 were recorded as having 'no religion identified' (in that no religion was recorded or disclosed); accounting for 46% of

referrals. This is followed by 38% of referrals recorded as individuals who identified as having 'no religion'.

Where a religion was identified, the majority of referrals were for individuals who identified as Christian, accounting for 10% of referrals. As around 49% of the county population are recorded as identifying as Christian, this is a significant underrepresentation.

The underrepresentation of religion may mean that the majority of individuals accessing GDASS are reluctant to disclose their religion or that religion in itself is a barrier for accessing support for domestic abuse. This may also indicate a need for the service to reach out across the various religious communities in the county and ensure an awareness of domestic abuse and support options available. It may also indicate a need for GDASS to improve its mechanism for identifying and recording religion, given the volume of referrals where no religion was identified.

Sexual Orientation and Gender Identity

Clients referred into GDASS who identified under one of the LGBTQ+ categories are underrepresented within the service, accounting for 1.99% of referrals compared with 2.8% of the countywide population identifying as LGBTQ+.

Table 7.3.: Percentage of referrals into GDASS based on sexual orientation across three financial years 21/22, 22/23 and 23/24.

Sexual Orientation	Percentage total for years 2021/22 to 2023/24
Bisexual	0.64%
Gay	0.75%
Heterosexual	94.60%
Lesbian	0.60%
None Identified	1.08%
Not Known	2.17%
Other	0.14%
Refused	0.02%

As with other protected characteristics, there is a need therefore for GDASS to consider its engagement with victims of domestic abuse who identify as LGBTQ+, raising awareness and ensuring the service can meet the needs of all victims and their individual experiences of domestic abuse.

Disability

Across three financial years (21/22-23/24), the majority (68%) of service users identified themselves as not having a disability, with a further 3.16% recorded as either 'unknown', or where the details were not provided on the referral.

Where a disability was recorded, mental health was the most common, accounting for 18% of all services users; an increase from 9% recorded in the 2021 needs assessment. Those service users with complex needs/multiple disadvantages accounted for 6% of all service users; an increase from 3% recorded in the 2021 needs assessment.

Individuals where a physical disability was recorded accounted for 2% of referrals, those with a sensory impairment (both sight and hearing) accounted for 0.17% and those recorded with neurodiversity needs accounting for 0.21% of referrals.

Overall, the number of people disclosing disabilities is lower than the Gloucestershire average.

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

Across three financial years (21/22-23/24), the majority (41%) of service users were recorded as separated and/or divorced at the time of their referral into GDASS. This is followed by 38% recorded as married or partnered.

Pregnancy and maternity

Pregnancy and maternity are a key risk factor for domestic abuse. Despite this, only 3% of those accessing the service were recorded as pregnant at the time of referral.

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

7.4.3. GDASS Service Outcomes

Across three financial years (21/22-23/24), the majority of referrals into GDASS at the point of case closure were closed as the victim's needs were recorded as having been met, accounting for 51% of closed cases. A further 14% of referrals were noted as either having been referred internally within the GDASS service for one of their other service offers, or for having been referred externally to ensure needs were met⁹³.

Around 19% of referrals into GDASS did not enter the service due to failed contact with the victim who was referred into the service. In addition, 9% declined support, 4% were deemed not eligible for support and 2% disengaged from the service.

Data on service outcomes for GDASS is in the main qualitative. The below provides a summary of feedback for July 2023 to June 2024.

Table 7.4.: Summary of feedback for GDASS July 2023 – June 2024

Outcome Indicator	*Based on feedback from 56 service users after completion of GDASS support (at 3, 6 or 12 months after support ended) Feedback taken during July 23 – June 24
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 98% 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	There is evidence in an increase in the number of service users reporting that they are no longer victims of domestic abuse. Only 12% of service users reported that they wanted contact with GDASS regarding their current situation when follow up was completed 3, 6 and 12 months after exiting the service. Given 2% of service users reported they did not feel safe in their own home, the other 10% of re-contact requests did

⁹³ The outcomes presented in the needs assessment are for all elements of the GDASS service as a collective. When considering 'needs met' for individual parts of the service, the % may differ.

victims of domestic abuse	<p>not relate to either safety. This gives an indication of reduced repeat incidents of DA during the time frame for feedback*</p> <p>Feedback from a client who left service 12 months ago to say they have reconnected with family and friends, secured a 'dream job' and are now in a healthy relationship: <i>'So, this is really how I have been doing, I really can't thank you enough for all your support during the worst time of my life, you really showed me that there's more to me than staying with an abusive, drug addicted man. I have such a massive support network around me now, and I have never smiled so much! I'm shining so bright!..'</i></p>
Evidence of service users improved health and wellbeing; including improved self-esteem, self-confidence and ability to cope	<p>There is evidence of improved health and wellbeing as 96% of service users stated that their self-esteem had improved and 98% reported that they would know what to do if they experienced domestic abuse again*</p> <p>One service user said <i>*I have met new friends, I have increased my self-esteem and learnt how to set boundaries. I have learnt how to reward myself and take time for myself. I have joined the gym. I have regained my confidence.</i></p>
Evidence that service users are aware of and are able to access a range of enabling opportunities, for example, education, employment	<p>There is evidence that GDASS has helped service users be aware of and access a range of enabling opportunities as 93% of service users reported that GDASS had helped them feel more confident to access other services in the community and 71% of those who said this was applicable reported that accessing GDASS helped them improve their financial situation* Whilst this is not a support need for the majority of the GDASS clients, of the 1,472 exit forms completed, 59 people said their access to education, training and employment had directly improved as a result of engaging with the service.</p> <p>Feedback from a group work client: <i>* I left my abusive partner several years ago but I had found it difficult to move on from the ongoing impact on my mental health. The programme helped me gain the skills and coping mechanisms to be able to put nondestructive strategies into place. I intend to keep in touch with some of the Group and will be volunteering at CANDI [a Gloucestershire-based charity] to help me gain further in confidence.</i></p>
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 98% reported that they now felt safe in their own home*</p> <p>GDASS also processed 343 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. This reduces the need to make homelessness referrals for alternative accommodation."</i></p>

Evidence that service users demonstrate sustained positive outcomes	<p>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.</p>
Evidence of increased family stability reducing exposure to domestic abuse by children and young people	<p>41% of the clients surveyed had children under the age of 18. Of these, 87% of service users reported that GDASS had helped improve their relationship with their children. All service users, regardless of their family composition, were asked if GDASS had helped them understand the impact of domestic abuse on their family, with 98% sharing positive feedback*</p> <p>Feedback from a Gloucester Safeguarding Children Multi Agency Team (GMAT) Social Worker regarding GDASS role in supporting change for a family with a long children's social care history: <i>I just wanted to share with you what the mum spoke to me about last week. As you know, mum has just finished her work with GDASS and wanted to talk about the work that you have completed with her. Mum stated that without your support she would not have been able to make the necessary changes and subsequently protect her boys. The family has a long history of Social Care involvement and a pattern that was throughout was mum's decision making and who she would introduce to the boys. Mum will explain that with the support and work she has achieved with GDASS this has given her the ability to make better and informed choice. She will also mention that she now feels a much stronger person and stated she feels like the person she was before she suffered and experienced the abuse. Can I just add my thank you, alongside mum's, for the fab work you do.</i></p>
Evidence of fewer children at risk of witnessing or being harmed as a result of domestic abuse	<p>GDASS staff contribute to a range of safeguarding activity relating to children. This includes staff co-located in the Multi Agency Safeguarding Hub (MASH), with GMAT and in directly contributing 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 the GDASS activity; exit forms completed by 1,472 parents between July 2023 and June 2024 show that 99.8% felt that their children's wellbeing and safety had improved or stayed the same.</p> <p><i>Group work client feedback: I have lost faith in myself as a person, as a mother and lost my identity. I am building an intimate relationship with myself again. I lost the essence of who I am but with the help of GDASS I have managed to re-establish a loving relationship with myself. I feel I am rewriting mine and my children's futures, and will now be able to model relationships for my sons and daughters</i></p>

7.5. STREET

STREET provides Young Persons Violence Advisor (YPVA) support to young people aged 16-19 who are assessed as medium risk in relation to the domestic abuse they have experienced or demonstrated within their own intimate relationship or within their familial relationships, as well as to young people aged 16-17 who are victims of domestic abuse by seeing or hearing, or experiencing the effects of, domestic abuse experienced or perpetrated by their parent/relative (in line with the statutory definition of domestic abuse). STREET provide a group work offer and support on a one-to-one basis for young people aged 16-19 who are assessed as standard risk. STREET support is also available to young people aged 13-15 including those at high risk. Young people may often have additional vulnerabilities such as exhibiting mental health concerns such as depression, anxiety, self-harm and suicidal ideation.

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

The support delivered by STREET is tailored to the needs of young people reflecting that they may be displaying or experiencing domestically abusive or harmful relationship behaviours or may have more than one support need. STREET have seen several young people who have approached the service in need of support as victims of domestic abuse who have also realised they are starting to exhibit harmful relationship behaviours themselves and have gone on to access support for this as well. Also, a young person may be both a victim of domestic abuse through witnessing domestic abuse within the home, and also experiencing domestic abuse in their own intimate relationship.

STREET's support is also tailored to the developmental/age-specific needs of the young people accessing the service and there is a fairly even split in the ages of service users:

- 15% were aged 13
- 15% were aged 14
- 14% were aged 15
- 14% were aged 16
- 15% were aged 17
- 14% were aged 18
- 13% were aged 19

Data on the demographics for service users accessing support through STREET includes all young people accessing the service rather than just those aged 16-19.

- STREET is accessed by mostly by females who accounted for 61% of service users, followed by 28% male service users, with 9% of young people identifying instead as trans, non-binary or another gender identity, and 2% not providing this information.
- There is almost a 50/50 split between young people who identified having disability and those who do not.
- STREET have very good engagement with young people who are trans, non-binary or have another gender identity (9% of service users).
- Data on ethnicity and religion was skewed by the number of young people who did not wish to provide this data at the start of support (protected characteristic data is reported on service users who started support during the quarter).

YPVA and one-to-one support have the most positive engagement rates* with 71% and 70% respectively having their needs met during the first two years of the service. Groupwork has been

less successful to date, but STREET continue to try new approaches to increase take-up and positive outcomes, including introducing a different group work programme for young people causing harm, and publicising their annual group work programme with professionals. (*STREET's outcomes include service users aged 13-19.)

7.6. Other Service Providers

7.6.1. The Nelson Trust

The Nelson Trust, whilst not commissioned to provide domestic abuse support by commissioners, does provide a women's centre in Gloucester to which victims of domestic abuse will present for support.

The women's centre primarily focuses its support on women with multiple and complex needs, and data is collected to identify the number of clients the service sees who present with an unmet need in relation to domestic abuse and sexual violence (DASV).

Across 3 years, the service has seen a gradual increase in referrals for women who present for DASV:

- 2021/22: 236
- 2022/23: 244
- 2023/24: 252

The below summarises the demographic details of these referrals.

Table 7.5.: Demographic data from Nelson Trust referrals related to DASV from years 21/22-23/24

Data	2021-22	2022-23	2023-24
Clients' Ethnicity	94% White British 4% Mixed Ethnic Groups 2% Black / African /Caribbean /Black British	89% White British 7% Mixed Ethnic Groups 3% Black /African /Caribbean /Black British 1% Other	88% White British 7% Mixed Ethnic Groups 3% Black /African /Caribbean /Black British 2% Other
Clients' Disability	31% reported a disability 56% reported no disability 15% not stated	37% reported a disability 43% reported no disability 20% not stated	40% reported a disability 43% reported no disability 18% not stated
Clients' Sexual Orientation	75% heterosexual 4% bisexual 1% homosexual 1% other 19% not stated	66% heterosexual 7% bisexual 2% homosexual 1% other 24% not stated	65% heterosexual 8% bisexual 2% homosexual 2% other 23% not stated
Clients' Age	13 to 17 4% 18 to 34 33% 35 to 54 56% 55 to 74 7%	13 to 17 6% 18 to 34 42% 35 to 54 51% 55 to 74 5% 75 + 1%	13 to 17 3% 18 to 34 44% 35 to 54 46% 55 to 74 6%

7.6.2. Gloucestershire Rape and Sexual Abuse Centre (GRASAC)

GRASAC provide support to victims of sexual violence across the county and are the current commissioned provider for the Independent Sexual Violence Advisor (ISVA) service.

Data from 1 September 2022 to the 1 October 2024 indicates that GRASAC provides support to victims of sexual violence who also present with support needs connected to DA.

Across this time period, GRASAC supported 164 adults and 106 children who presented with additional concerns connected to domestic abuse. In addition, 9 adults and less than 5 children present with concerns for stalking.

Once the new criminal offence of non-fatal strangulation came into place, the service collected data that indicated 22 adults, and less than 5 children presented with concerns connected to both recent and non-recent strangulation.

7.6.3. Drug and Alcohol Support Services

Data from commissioned drug and alcohol services comprises of information from Change, Grow, Live (CGL) and Via who took over delivery of the service in Gloucestershire in 2024.

Data from CGL indicates that for year 2023/24, they were supporting 382 clients who were known to MARAC. In addition, for quarter 1 of 2023/24, Via were supporting 96 clients who were known to MARAC. It is not known from this data if this relates to victims or perpetrators.

This data demonstrates a strong need to ensure links between drug and alcohol services and domestic abuse services to ensure both victims and perpetrators are provided with the right support to meet all their support needs.

In addition to the above for quarter 1 of 2023/24, Via have identified 83 children connected to an alcohol-using parent where domestic abuse is also present, and 111 children connected to a drug-using parent where domestic abuse is also present. This demonstrates a need to ensure that support services for children witnessing domestic abuse in the home consider the wider complexities and risk these children may be exposed to.

7.7. Health

Data from our local NHS Health providers on domestic abuse is limited, so it is not possible to ascertain the number of domestic abuse victims the NHS in Gloucestershire comes into contact with. The below represents the information that has been provided for the needs assessment.

Gloucestershire Hospitals NHS Foundation Trust (GHFT) can provide data on the number of domestic abuse risk assessments they have completed over a 3 year period, providing indication of the number of victims who have presented to the hospitals trust and made a disclosure of domestic abuse:

- 2021/22: 386
- 2022/23: 366
- 2023/24: 512

Both GHFT and Gloucestershire Health and Care NHS Foundation Trust (GHC) also collate data on the number of requests they receive from MARAC to share information. The below table provides details on the number of requests received, highlighting the research capacity required in health to provide information into MARAC. The data does not, however, indicate the number of MARAC cases where

health have been involved in the care of individuals, as some requests will have resulted in a nil response from health back to the MARAC.

Table 7.6.: The number of MARAC information sharing requests by health.

Note: Data from GHFT refers to the number of requests from MARAC which may include multiple people, but data from GHC refers to the number of individuals the services researched for MARAC.

	Number of requests received by GHFT from MARAC	Number of adults and children researched by GHC for MARAC
2021/22	1640	4987
2022/23	1795	5100
2023/24	2173	6239

7.8. 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. This was the same finding from the 2021 needs assessment, and despite increased capacity provided to the service, demand has continued to grow.

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 2021 needs assessment and the work undertaken since to improve awareness of pathways to support, there is a need to ensure that survivors are referred into specialist services when their needs are identified across all services.

Engagement with protected characteristics

As a universal service, GDASS is in place to provide support to all victims of domestic abuse. Despite this, there is an underrepresentation of protected characteristic groups within the service and the reasons for this are a key area to be explored.

Greater engagement with particular communities is needed, as well as ensuring dedicated awareness raising campaigns to ensure all survivors of domestic abuse are aware of local service provision and feel confident that services can meet their needs.

Consideration of 'By and For' Services

There is an ever-growing focus nationally on the need to support 'by and for' provision, something which has been challenging within Gloucestershire due to a lack of existing 'by and for' services that can be supported through local commissioning.

Exploration of local 'by and for' services that are non-domestic abuse related could support future exploration of possible integration with specialist domestic abuse services. This could then support the national desire to support 'by and for' provision, whilst also supporting local domestic abuse services in engaging with protected characteristic groups. This work is funding dependant, however.

8. Perpetrators of domestic abuse

The government approach to tackling Violence Against Women and Girls, in particular domestic abuse, has maintained an emphasis on the need to address perpetrator behaviour. The ‘Tackling Domestic Abuse Plan⁹⁴’, published in March 2022, included the pursuit of perpetrators as one of its key four pillars, focusing on a range of measures to manage domestic abuse offenders and prevent repeat offending, and the funding of specialist perpetrator interventions.

The focus on perpetrators takes nothing away from work to ensure a victim centred approach, but instead recognises that in order to truly support victims of domestic abuse, perpetrators need to be held accountable, prevented from continuing their abuse and wherever possible, prevented from becoming abusive in the first place.

8.1. Best practice approaches

Research projects looking into the effectiveness of Domestic Violence Perpetrator Programmes (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 best supports effective change in perpetrators’ behaviour and allow them to see themselves through the eyes of others and be challenged by peers and skilled facilitators (Project Mirabel⁹⁵).

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 include⁹⁶:

- **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. However, 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 perpetrators 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.

⁹⁴ [Tackling Domestic Abuse Plan - GOV.UK](https://www.gov.uk/government/publications/tackling-domestic-abuse-plan)

⁹⁵ <https://projectmirabal.co.uk/>

⁹⁶ [Respect Standard FINAL.pdf \(hubble-live-assets.s3.amazonaws.com\)](https://hubble-live-assets.s3.amazonaws.com/Respect_Standard_FINAL.pdf)

- **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 Partnership⁹⁷:

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 domestic abuse 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 domestic abuse
- 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 responses to the individual and the use of both diversion and disruption techniques alongside therapeutic interventions to change behaviour.

Make a Change⁹⁸:

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.

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.

⁹⁷ [Drive Project](#)

⁹⁸ [About MAC – Make a Change](#)

- 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 Together⁹⁹:

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 SARA¹⁰⁰.

Project CARA¹⁰¹:

Originally piloted in 2011 by the Hampton Trust alongside Hampshire Constabulary, Project CARA offered an out of court disposal option in the form of a conditional caution in response to an incident of domestic abuse.

The conditional caution was only made available for incidents classified as 'standard' or 'medium' risk (utilising the DASH risk assessment), for those had no previous convictions or cautions for violence within the previous two years and where the victim agrees to their partner/ex-partner attending CARA workshops.

⁹⁹ [Safe & Together | Respect](#)

¹⁰⁰ [Spousal Assault Risk Assessment \(SARA\) \(Forensic Psychology\) - iResearchNet](#)

¹⁰¹ <https://justiceinnovation.org/project/project-cara>

CARA utilises a trauma informed approach and motivational interviewing techniques delivered across two workshops set four weeks apart, with the aim to ensure offenders:

- reflect on the incident, including personal triggers
- gain an understanding of different types of abuse within a family dynamic
- recognise physical symptoms of anger and the feelings which lead to anger and then violence
- recognise the damaging effects of behaviour on themselves and others
- understand personal risk and protective factors
- reflect on self-esteem and self-regulation, designed to increase personal resilience
- establish personal time out strategies and safe conflict techniques
- understand communication and conflict resolution skills
- identify future strategies for sustaining change
- provide signposts to other relevant agencies or organisations.

Following the pilot and its evaluation, Project CARA is now viewed as a best practice model for out of court disposals for domestic abuse offenders and is being looked to as a model for many police forces to consider as they move to meet their statutory duty around this type of provision.

[8.2. Local Approach](#)

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

Breaking the cycle of perpetrator behaviour is the current fifth priority in the Gloucestershire Domestic Abuse Strategy, and will remain a priority for the strategy running from 2025-2028.

[8.3. Service Provision](#)

Positive Relationships Gloucestershire (PRG) provided by FearFree is a Gloucestershire perpetrator intervention jointly commissioned by Gloucestershire County Council, the 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 relationship/early intervention course to help build knowledge, understanding and skills for maintaining healthy relationships and families.
- Relapse Prevention Group: monthly meetings to service users who have completed programmes 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.

This service, whilst having been commissioned for some time, has benefitted from additional funding from a successful local bid to the Home Office Perpetrator fund which runs up until March 2025. This funding also enabled further interventions to be introduced to Gloucestershire:

- **Domestic Abuse Routine Enquiry (DARE) training:** provided by the Hampton Trust to frontline professionals to support them in;
 - How to identify domestic abuse perpetrators
 - How to explore risks and context associated with domestic abuse perpetrators
 - How to engage domestic abuse perpetrators and encourage them into specialist services
- **Multi-Agency Tasking and Coordination (MATAC) Coordinator:** a new role based within the constabulary to develop and roll out the MATAC approach. This process identifies the top domestic abuse and sexual violence offenders and works across the multi-agency partnership to target and manage these offenders, with the aim of preventing them from causing further harm to their victim(s).

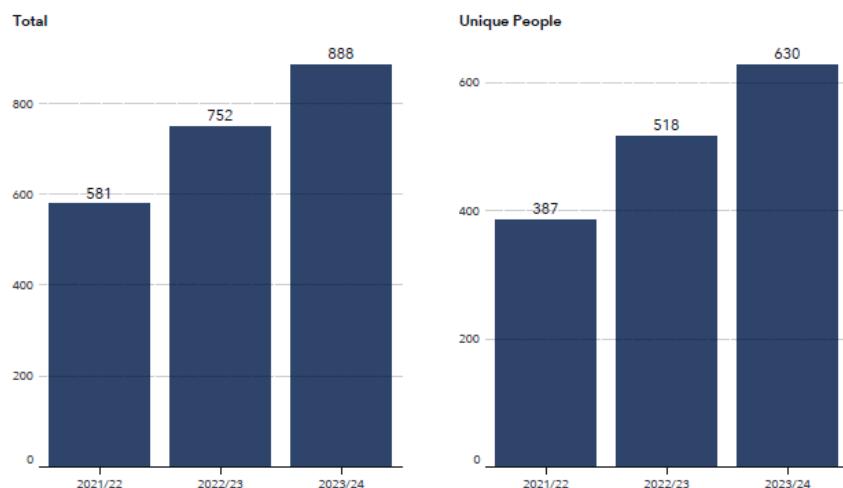
8.4. Perpetrators in Gloucestershire

8.4.1. Police recorded offenders

The below data reflects domestic abuse offenders identified by police against domestic abuse tagged crimes for years 2021/22, 2022/23 and 2023/24, showing an increase over time in the number of tagged offenders. The number of tagged domestic abuse offenders is significantly lower than the number of tagged domestic abuse victims; with 888 tagged offenders in 2023/24 compared with 9,840 tagged victims during the same time period. This is due to the way in which data is collected on offenders compared with victims, with offender data only relating to those who have received a criminal justice outcome, whereas victim data relates to victims connected to incidents which have been recorded as a crime.

The number of unique offenders represents the number of unique individuals who have received a criminal justice outcome at the point of data collection. Across this time period, the number of unique offenders who have received a criminal justice outcome has increased year on year. This is positive to see and demonstrates an improvement in the response to domestic abuse through the criminal justice system. The difference between total number of offenders and total number of unique offenders is indicative of some offenders receiving a criminal justice outcome for multiple offences.

Graph 8.1.: Total number of DA offenders, compared with total number of unique DA offenders recorded across years 2021/22-2023/24.

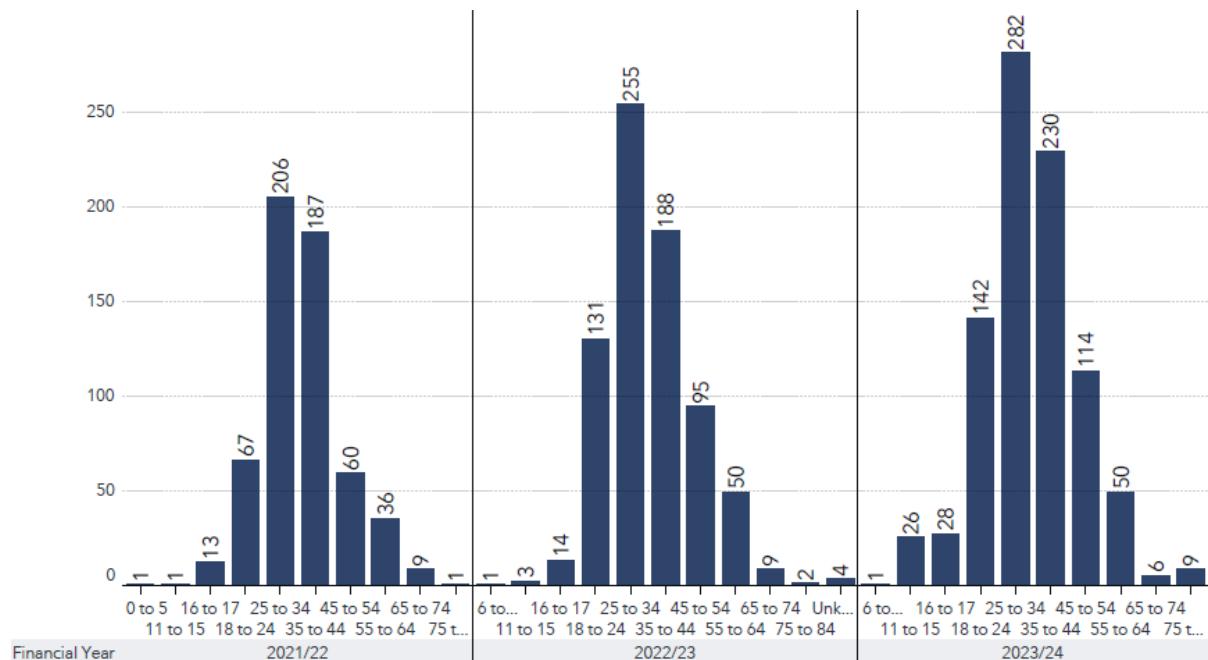


The below data reflect the total number of domestic abuse offenders, rather than the unique offenders.

Across all 3 years, between 86-89% 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 kinds of offences. It is clear however, that females can also be offenders of domestic abuse, accounting for 13% of offenders in 2023/24.

The majority of offenders are aged 25-34 followed by 35-44 as detailed in graph 8.2. This finding remains consistent from the 2021 needs assessment.

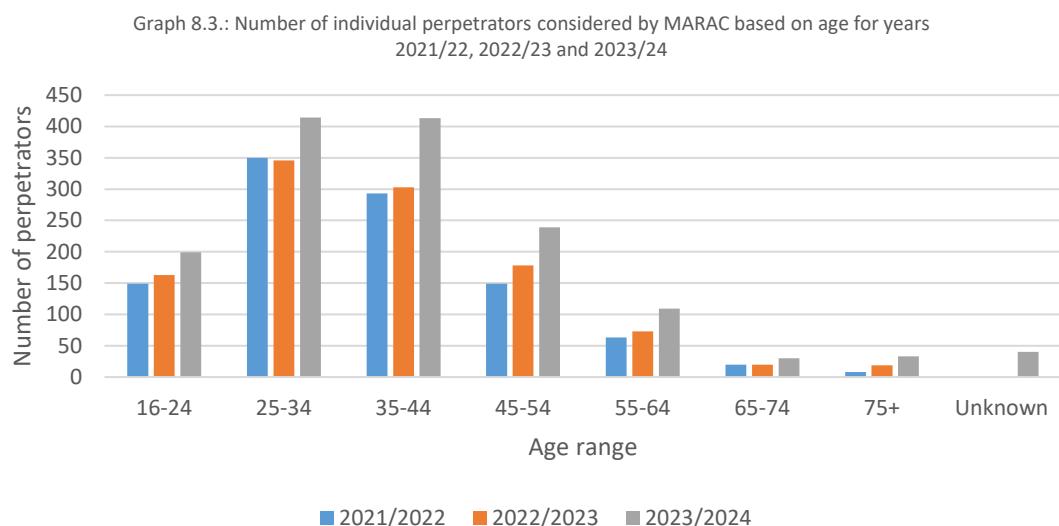
Graph 8.2.: Age range of DA offenders recorded across years 2021/22-2023/24.



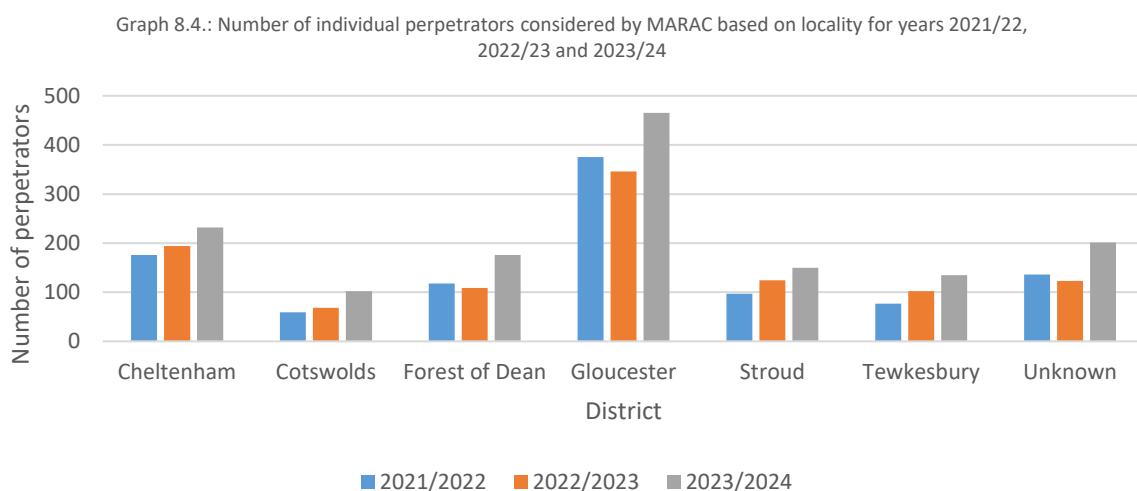
Across all three years, there were more 'individual victims' referred into MARAC than there were 'individual perpetrators', indicating that perpetrators are likely to have multiple victims during the same time period.

Across all 3 years, between 91-93% of individual perpetrators discussed at MARAC were male, with 7-9% of perpetrators recorded as female. There is no comparative data available within the Safe Lives MARAC dataset in relation to perpetrators to understand if this is reflective of the national picture.

When looking at the age range of individual MARAC perpetrators, the majority are aged 25-34, as detailed in Graph 8.3. 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 'unknown' 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 9-13% are recorded as being from Black, Asian and Minority Ethnic groups. This is a larger proportion than seen for victims at 6-7% and an overrepresentation when compared to the Gloucestershire population (6.9%). This is a further overrepresentation than seen in the wider perpetrator police data covering all risk levels, indicating that those identified as 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 or medium. This may be a genuine representation of high risk domestic abuse in the county, but may indicate a bias, where ethnicity is an influencing factor on the assessment of risk.

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

Data on disability for perpetrators is limited with between 15-26% of perpetrators noted as having a disability, but further breakdown of disability type is not available. In addition, between 89-93% of perpetrators are noted as having a mental health related condition, with, again, no further detail provided. It is therefore not possible to understand from the data if the majority of perpetrators have a diagnosed mental health condition, or if this is a representation of what a victim may tell a professional when making their disclosure of abuse.

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 55-66%.

8.4.3. Probation Service

Data from the probation service in Gloucestershire indicates that in 2023/24, 15% of their total caseload related to domestic abuse offenders, an increase from 13% in 2021/22.

The vast majority of domestic abuse offenders open to probation received a community sentence, accounting for 73% in 2023/24 (63% 21/22 and 75% in 22/23). Those who received a custodial sentence for their offence accounted for 27% of probation cases in 2023/24 (37% 21/22 and 25% 22/23).

As part of any sentence for a domestic abuse related offence, a requirement to complete the probation perpetrator programme, Building Better Relationships (BBR), can be applied by the court. For the year 2023/24, 52% of offenders on the probation caseload were given a requirement to complete BBR (46% 21/22 and 49% 22/23). Of those who received a requirement for BBR, 44% were recorded as having successfully completed the programme in 2023/24 (59% 21/22 and 33% 22/23).

The probation data systems also records additional needs of offenders open to probation for domestic abuse related convictions. The below table provides detail on the additional needs recorded.

Table 8.1.: Percentage of DA perpetrator needs recorded on Probation OASys system for years 2021/22, 2022/23 and 2023/24.

Perpetrators need	% of perpetrators in 2021/2022	% of perpetrators in 2022/2023	% of perpetrators in 2023/2024
Accommodation	38%	44%	54%
Education, training and employment	50%	48%	45%
Relationships	88%	89%	93%
Lifestyle	62%	64%	67%

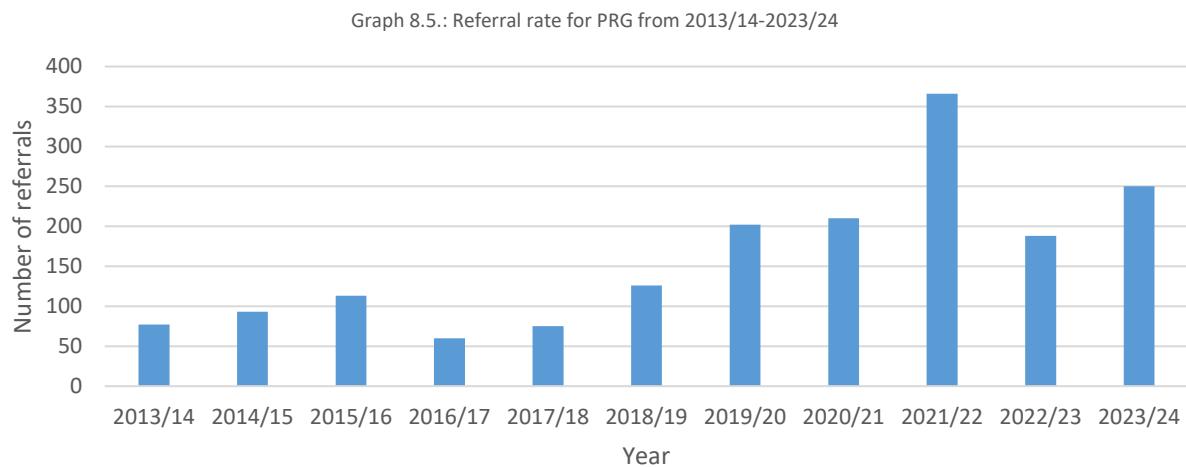
Drugs	45%	46%	46%
Alcohol	33%	36%	39%
Thinking and Behaviour	83%	79%	82%
Attitude	71%	75%	79%

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+ (previously available to those aged 25+). The current service is provided by FearFree (previously known as FearLess).

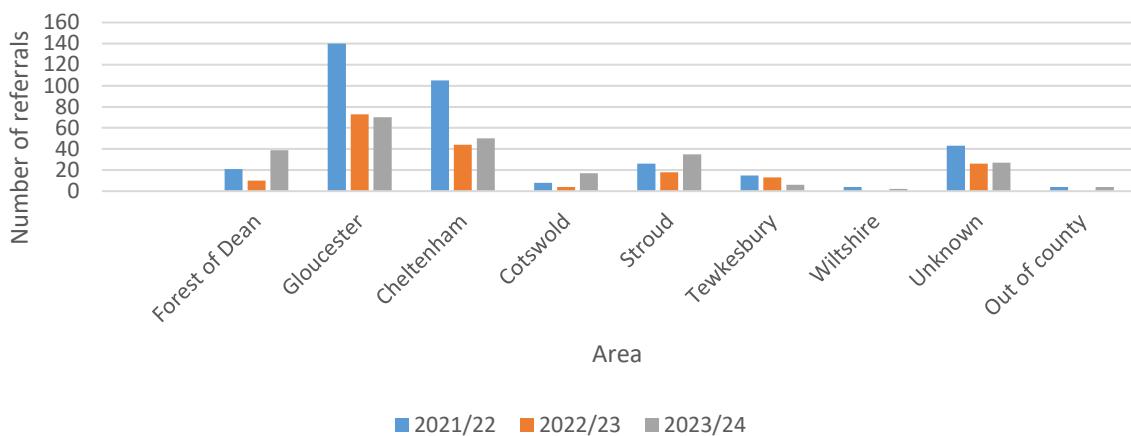
The data presented for this service relates to all referrals received by the service across years 2021/22, 2022/23 and 2023/24. Due to the nature of the service, not all individuals referred into the service will go on to engage, so the data may contain some 'unknown' elements as a result of non-engagement.

Overall, referrals into the service have shown an upward trend since the service began, but there is some variation in recent years, as detailed in graph 8.5.



The majority of referrals into PRG are for perpetrators who reside in the Gloucester and Cheltenham districts of the county. This is to be expected, as access to the service is predominantly supported within the urban areas of the county. Referral levels in the more rural areas are, however, showing an increase in the year 2023/24, demonstrating the commitment of the service in broadening its reach; something which would be positive to continue, particularly in the Forest of Dean, where police reported domestic abuse is the second highest in the county.

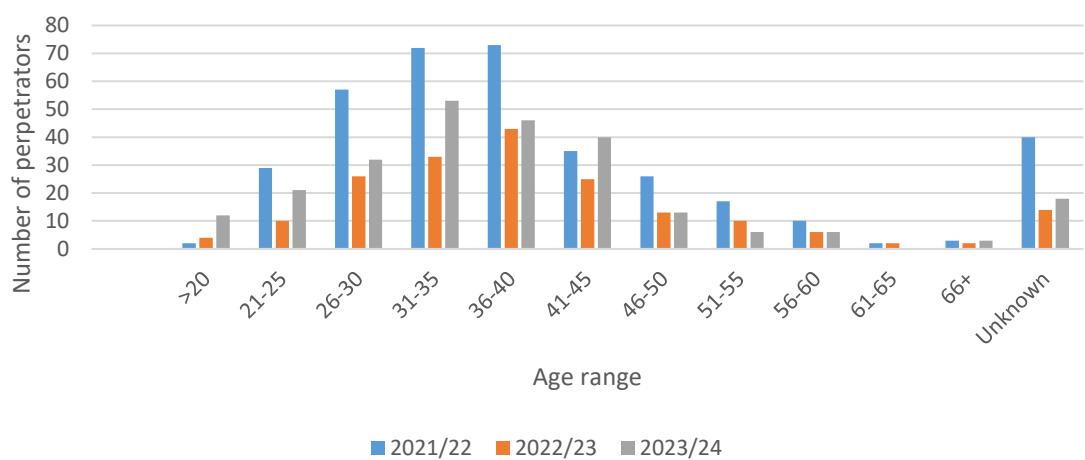
Graph 8.6.: Referral rate for PRG based on district from 2021/22-2023/24



Across 3 financial years (2021/22-2023/24), the majority of referrals into PRG are for male perpetrators, accounting for between 53-66%, with 24-33% of perpetrators recorded as female (some referrals did not have the gender recorded).

The average age of those referred into PRG is aged between 36 and 38 across 3 financial years. This is higher than the most common age range of offender identified by police and within MARAC referrals. This may indicate a need for the service to reach the slightly younger age range given the higher prevalence of offending amongst those aged under 35 but may also indicate a greater likelihood of those who are slightly older being willing to engage in a voluntary behavioural change programme.

Graph 8.7.: Referral rate for PRG based on age from 2021/22-2023/24



Data collection on the sexual orientation of perpetrators referred into PRG has improved over the last 3 financial years, with 87% of perpetrators recorded as 'unknown' sexual orientation in 2021/22, compared with 29% in 2023/24. Whilst improvements have been seen, in 2023/24, the majority of perpetrators (69%) were recorded as heterosexual, with only 1% recorded as LGBTQ+. This indicates a need for the service to not only continue to improve its data collection, but to also reach out to perpetrators who are LGBTQ+.

As with sexual orientation, data collection on the ethnicity of perpetrators referred into the service has also improved, with 86% recorded as unknown in 2021/22 compared with 25% in 2023/24. The

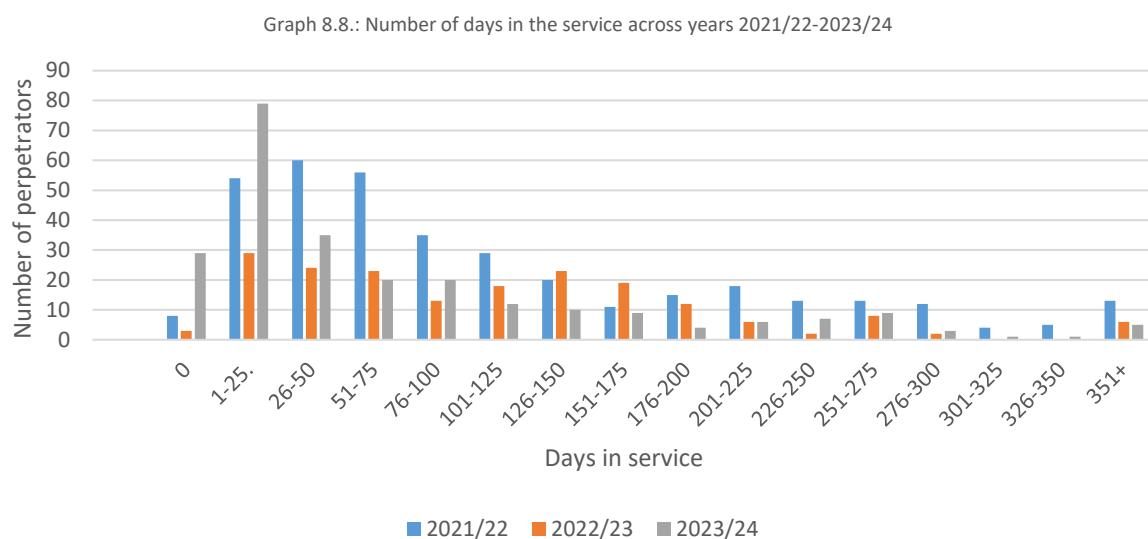
majority of referrals into the service are for perpetrators from white ethnicities, accounting for 62% in 2023/24. Perpetrators who were recorded as Black, Asian and Ethnic Minority accounted for 13% of referrals in 2023/24, an overrepresentation when compared to the population of the county.

When considering the disability status of perpetrators referred into PRG, the vast majority are recorded as unknown, accounting for 37% of referrals in 2023/24. Where a disability was identified, concerns for the perpetrator's mental health was most common, accounting for 8% of all referrals in 23/24. In the same financial year, 4% were recorded as having a physical disability, 2% a learning difficulty and 1% as autistic/ADHD¹⁰⁴.

A number of additional concerns are recorded in relation to perpetrators referred into the service, the most common of which is recorded as concerns related to drug and alcohol use, accounting for 26% of referrals in 2023/24 (17% in 22/23 and 0.5% in 21/22). This increase may be due to improvements in data collection, or may indicate a greater likelihood of referral into the service for perpetrators who present with substance misuse issues.

As detailed below in graph 8.4.4d, the number of days perpetrators remain in the service follows a downward trend, with the average number of days in service being 75.8 in 2023/24 (compared with 113.1 in 2022/23 and 116.9 in 2021/22). This is to be expected for a programme that relies on successful assessment to join the programme and an ongoing commitment to remain in the programme on a voluntary basis. The decrease seen in 2023/24 is something to be explored further however, to understand the factors that may have prevented longer term engagement, or if longer term engagement was not needed in order to meet the needs of those engaged.

Some perpetrators do, however, remain in the programme for a significant period of time, with highest number of days in service in 2023/24 being 489.



When considering the closure reason for referrals into PRG, a large proportion of referrals are closed due to lack of engagement, services being declined, or the perpetrator not being assessed as eligible for the service. This is to be expected from a voluntary service that requires perpetrators to acknowledge their abusive behaviour and have a willingness to change.

¹⁰⁴ Autism and ADHD have been merged due to the low numbers in the data

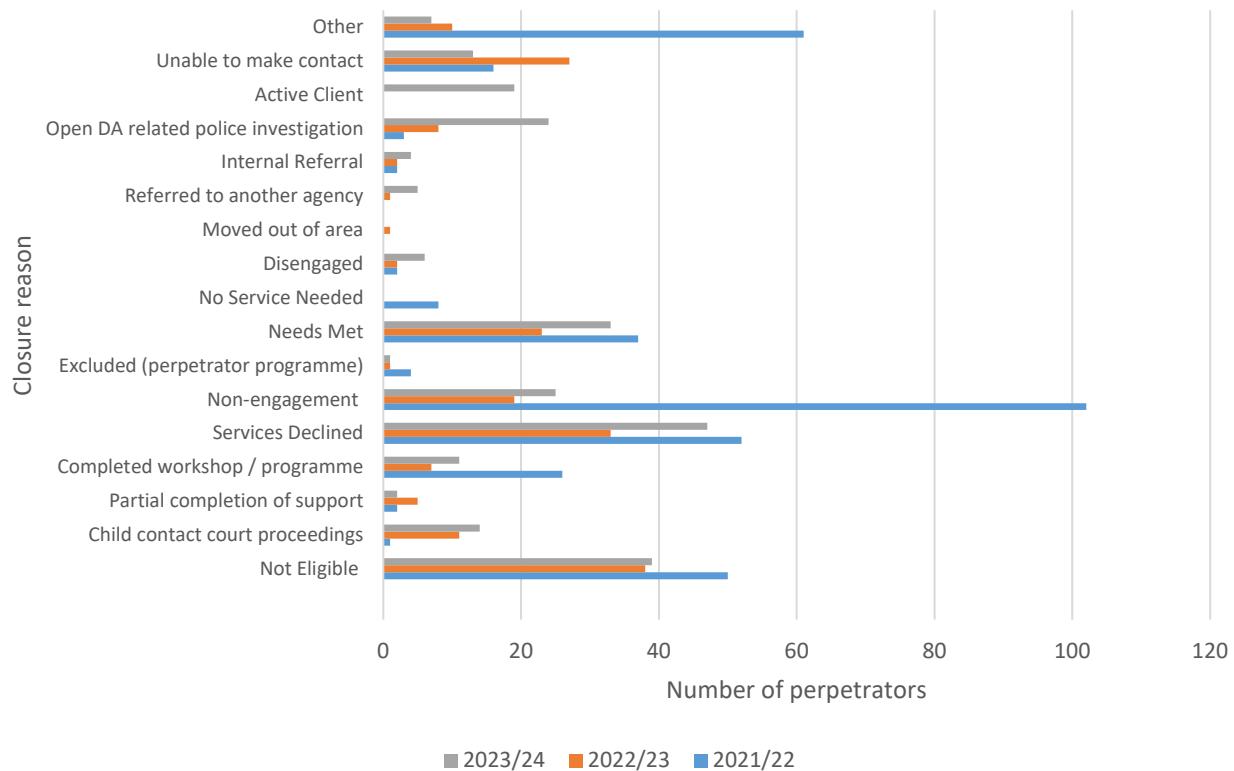
As detailed below in table 8.4.4a, the volume of referrals closed due to non-engagement has improved over time, but the volume of referrals where the service was declined or where the perpetrator was not deemed eligible has either increased or fluctuated. This may be an indication that unsuitable referrals are made into the service, or that referrals are made for perpetrators who have not truly consented to the referral.

Table 8.2.: Negative closure for referrals as a percentage of all referrals for years 2021/22-2023/24.

Year	Non-engagement (as a % of referrals)	Services Declined (as a % of referrals)	Not eligible (as a % of referrals)
2021/22	28%	14%	14%
2022/23	10%	18%	20%
2023/24	10%	19%	16%

Across 3 financial years, between 10-13% of referrals are recorded as having met the needs of the perpetrators referred into the service. In addition, between 4-7% of referrals are closed with the perpetrator having completed the programme. Whilst these figures are comparatively low against those who do not engage, it is positive that some perpetrators have potentially benefitted from the programme. In addition, at the point of data collection, 8% of referrals in 2023/24 were still active clients.

Graph 8.9.: Closure reason for referrals into PRG for year 2021/22-2023/24



Despite some evidence of positive engagement in the service, the majority of perpetrators are recorded as remaining at the same risk level at the end of their engagement as they were at the start. This may, however, account for the large volume who leave the service before any intervention has been provided. Further breakdown of the data may therefore be needed to understand any change in risk levels for those who completed the programme and had their needs

met. A significant volume are also recorded as 'unknown', indicating a need to improve data collection in this area.

[8.6. Gaps in provision and future developments](#)

Ongoing awareness of perpetrator interventions

During 2024, the county has rolled out the DARE training programme to professionals, supporting in the earlier identification of perpetrator behaviour and signposting into support. Further work is needed to understand the impact of the roll out of DARE and if this increases access into perpetrator interventions as well as engagement in those interventions.

Ongoing roll out of the MATAC model

The constabulary launched its MATAC model in 2024 to focus on management of the highest risk and most prolific domestic abuse offenders. At present, this process is in its infancy, so the continued roll out is required to understand its impact and consider data from this process in the next needs assessment.

Development of an out of course disposal model

Consideration has been given to the development and roll out of project CARA in Gloucestershire. With statutory requirements coming into place with regards to out of court disposals, the funding and potential roll out of project CARA needs to remain a priority for the county.

Continued development of PRG

The commitment to perpetrator interventions is an important element of the county response to tackling domestic abuse. As such, the offer from PRG needs to continue to develop, with consideration given to extending the reach of the service.

In addition, further work is required to ensure appropriate referrals into the service, and to better understand how the service can maintain voluntary engagement from perpetrators and how the impact of the service can be measured to ensure increased needs being met and reduction in risk.

9. Children and Young People impacted by Domestic Abuse in Gloucestershire 2023 Executive Summary¹⁰⁵

In 2023 a separate needs assessment was conducted to understand the local needs connected to children and young people impacted by domestic abuse. The below provides an executive summary to this needs assessment, so it can be considered alongside the findings from this wider DA needs assessment.

The full CYP needs assessment can be found: [children and young people](#).

9.1. Introduction and Research Summary

The Domestic Abuse Act 2021 identifies, for the first time, children who witness domestic abuse as victims in their own right. It also adds further statutory duties that 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 protection for families affected by domestic abuse;
- The statutory definition of domestic abuse recognises primary victims and those aged 16+, acknowledging abuse in teenage relationships. As such, all other provisions in the DA Act extend to those aged 16+.

Alongside statutory duties, education of children and young people is considered a key area of prevention (made compulsory by the Relationships and Sex Education (RSE) and Health Education curriculum that came into force on September 2020) which covers education from primary through to secondary ages.

Research clearly shows that children are active participants when they observe domestic abuse and that witnessing such behaviour negatively impacts them socially, emotionally, psychologically and physically – this is intensified by the amount of time they have been exposed to the abuse. The impacts might be so subtle that even the parents are not aware of them, and this can be exacerbated where the abuse is culturally accepted. Impacts of witnessing domestic abuse on children across all ages include (but are not limited to):

Developmental delay (including psychological; regression)	Educational difficulties (disruption in schooling including non-attendance)	Fear (of going home; in the presence of the abusing parent)
Sleep or eating problems (including developing an eating disorder)	Internalised (such as anxiety or depression) or externalised (such as violence or antisocial behaviour) displays of behaviour	Perpetrating abusive behaviours (including bullying) or becoming the victim of such behaviours within their own peer group
Ill health (including mental health difficulties (such as self-harm or suicidal ideation))	Emotional difficulties (self-blame)	Social difficulties

¹⁰⁵ Children and Young People impacted by Domestic Abuse in Gloucestershire 2023 produced by Sophie Jarrett, County Domestic Abuse and Sexual Violence Strategic Coordinator. Exec summary produced by Hannah Ouston, Domestic Abuse and Sexual Violence Programme Assistant.

Behavioural changes	Attachment disorders	Desensitization to noise
Withdrawal	Running away	Substance abuse
Increased aggression	Post Traumatic Stress Disorder	

Children must be treated as individuals as even children from the same family group experience the abuse differently, and therefore siblings should not be placed in the same programmes aimed at supporting them, together. In fact, domestic abuse is unlikely to be the only element impacting them and an intersectional approach to the child is vital to fully understand their experience and provide support that meets all of their needs in the right way. Behaviours can also be gendered or specific to age groups.

Just as children and young people as victims should be viewed through an intersectional lens, support for those children and young people should treat all of those elements of them, however, it is most effective when it is delivered by domestic abuse specialists. Interventions to be considered include:

- Recovery and therapeutic services
- Prevention and early intervention
- Multi-Agency Risk Assessment Conference (MARAC)
- Support during statutory processes, including in the criminal justice system.

Multiple examples of best practice were identified through the research, including: Op Encompass; Domestic Abuse, Recovering Together (DART); Rock Pool Domestic Abuse Recovery Toolkit; The Mix; Safer Futures Cornwall and Julian House Bristol.

Within Gloucestershire, many children and young people who witness domestic abuse are looked after by Children's Social Care, however, many other children will not come to their attention or meet thresholds for support. Specific support streams for young people include: Youth Support Team; Young Gloucestershire; Kingfisher Treasure-seekers and TIC+, however, these are not dedicated domestic abuse support systems. Whilst GDASS can offer support to victims 16+ and extends this support to the families of victims, their work is more specifically with the victims themselves. They do, however, have domestic abuse workers embedded in the multi-agency response to domestic abuse. Similarly, Stroud Beresford Refuge supports children who witness domestic abuse as an extension of supporting their parents, including using art therapy. Safe Teenage Relationship Education and Empowerment Team (STREET) provide support to children aged 13+, with a part of their service focussed on those who witness domestic abuse or are experiencing or perpetrating it in their own relationships.

For under 13s, Children and Family Centres (C&FCs), which are in the process of becoming Family Hubs, provide primary support within the context of supporting the non-abusive parent, including programmes such as:

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

Work is also currently being undertaken to commission a pilot therapeutic intervention for children living within domestic abuse safe accommodation.

9.2. Services Data

Due to the way in which data is collected, it is hard to establish accurately the total number of children and young people in the county who have been, or are currently experiencing the impact of domestic abuse. The below provides a summary of what is known from a range of processes and services in Gloucestershire.

Op Encompass: Identifies (for the year 2021-22) 1,974 children within Gloucestershire who were referred (a drop from 2,399 in 2021). 2% of those children were reported as being injured during the incident. Children were primarily from Gloucester and in the 6-10 age range category.

MARAC: April 2021-October 2023 3,283 were responded to as children connected to victims of domestic abuse referred as high risk. This is an average of 113 children considered per month. The children were primarily from Gloucester and aged 10 and under.

Children's Social Care: 28% of all referrals over a four year period exhibited concerns around domestic abuse. Primarily in Gloucester, referrals have also seen an increase in rural areas. Links can also be made between: the rate of referrals and the overall quintile of deprivation; other complex factors (such as drug abuse) and the rate of referrals.

Children and Family Centres: Whilst data was not available for the numbers of children specifically, across the county in 21/22 378 families were identified and 245 families in 22/23. The majority of the families were from Gloucester and no data was available for the Cotswolds. In 21/22, 22% and in 22/23 15% of families who attended undertook a domestic abuse programme of 1-2-1 support.

Pupil Survey – domestic abuse: The survey places a focus on those in secondary or further education and does not represent the experience of younger children. Approximately 10% of respondents did not feel safe at home, but this does not necessarily mean that they are witnessing domestic abuse. 13-22% of young people reported their own experiences as a victim within their own relationships. Females were more likely to report being victims than males every year since 2016. LGBTQ+ pupils were more likely to report, as were those from minority ethnic groups. The proportion of pupils reporting regularly witnessing domestic abuse decreases as deprivation levels decrease. 6-11% of pupils identified that they felt they required more support than was currently available.

Stroud Beresford Refuge: Primarily supports children aged 10 and under, in particular those aged 5 and under living within the refuge, but it is a small, specific service and numbers would reflect capacity rather than need. Total number of children supported ranged from 24-29 from 2020-2023. The service also provides outreach support, supporting 94 children in 2020/21, however, this reduced to 76 in 2022/23. The majority of those children were aged 6-10 years.

GDASS: GDASS is the countywide domestic abuse support service, supporting victims 16+, and taking into consideration whole family needs. In the year 2022/23 GDASS identified 8,584 as being connected to victims of domestic abuse accessing their services. The majority were aged 10 or under. GDASS also supports victims aged 16 – 17 who are experiencing abuse within their own relationships. GDASS also provides support to victims who are pregnant at the time of accessing the service – this number was 225 in 2022/23, indicating that some children will be born into the abusive relationship and require safeguarding from the start of their life.

STREET: STREET is commissioned to provide support to young people aged 13-19 who are witnessing domestic abuse in the home, experiencing abuse within their own relationships and those young people who are starting to demonstrate their own harmful behaviours within relationships. Data for

this needs assessment was limited due to a change in reporting template, and more detailed data will be available for the next refresh. The majority of referrals came from Gloucester and the Forest of Dean for young people aged 14-15.

Young Gloucestershire: 20 safeguarding events per month relating to concerns for sexual assault or domestic abuse

TIC+: 25% of service users in 2022 disclosed having experienced or witnessed violence/abuse at home, relating to 567 young people.

Youth Support Service: from 6th-7th February 2023 the service supported 63 young people who disclosed domestic abuse in their home.

Places of Safety: Provides safe accommodation for families fleeing domestic abuse and accommodates children who might be excluded from traditional refuge, such as teenage boys or larger families.

9.3. Consultation Work Summary

A bespoke piece of consultation was undertaken in order to understand the countywide needs with regards to children under 11 affected by domestic abuse in two age grouping – 5 and under and 5-11 year olds. The aim of the consultation was to understand what children want and need from DA services. Quantitative data was complimented with lived experience of parents, children and professionals who work with children to ensure there is authentic voice from those living and working in our local communities. The consultation used surveys and focus group to engage with parents and professionals and thematic analysis was undertaken to draw out key themes. Work is ongoing to explore how the voice of children themselves can be included in consultation to ensure their experiences can directly influence recommendations.

9.3.1. Findings from the parents

Parents identified the following key themes:

- Right support at the right time
- Accessibility, including accessing support at home
- Support for parents in having adult or difficult conversations with their children
- Tailored support for children

Schools were the most commonly approached for support, but their responses varied broadly.

Areas for development identified by parents were:

- Risk management and safety
- Waiting lists
- Accessibility
- Approach

9.3.2. Findings from Professionals

85 professionals took the time to respond to the survey, from a variety of specialisms. Education respondents were the most common, making up 45% of responses. Early intervention was stressed as key to, therefor the ability to access services quickly was necessary for impactful support. The key issues identified were:

- Not knowing where to access support for children

- Lack of specialist domestic abuse support for children locally and limited availability in those that do exist
- Lack of capacity

Multiple professionals specified that a domestic abuse specific and specialist service for children and young people was something Gloucestershire needed and included the following recommendations as to how this could be delivered:

- Trauma informed
- Therapeutic interventions
- Not a generic service, aimed specifically for children who have experienced domestic abuse
- Age appropriate
- Holistic, family approach
- Skilled workers with extensive domestic abuse knowledge and understanding
- Include support from prenatal onwards

Areas that needed improvement were identified as:

- Multi-agency working
- Training
- Communication
- Waiting times
- Capacity
- Staffing

The broadness of services, without the necessary specialisms to provide adequate support, was also raised as an area that needed improvement, ensuring that the needs of the child are central to any treatment that they receive. A holistic, whole family approach, whilst still valuable, should not be the central provision for the child.

Overall the consultation echoed the 2021 Domestic Abuse Needs Assessment and recognised that there is not currently appropriate provision in place for children and young people who experience domestic abuse in Gloucestershire.

[9.4. Recommendations](#)

The below recommendations have been accepted by the Domestic Abuse Local Partnership Board and will be addressed through the delivery plan being established to implement the strategy for 2025-2028.

Commissioning Recommendations

- Commissioners to look into options for addressing the gap locally in therapeutic support to children and young people witnessing domestic abuse at home (in line with national best practice).
- Commissioners to consider options for providing a dedicated specialist domestic abuse support service for children and young people in the county. Consideration should be given to provision specifically for those under the age of 13; recognising the needs of those living with high risk domestic abuse and experiencing domestic abuse in context of additional complex needs (such as mental health and substance misuse of a parent).

- Commissioners to ensure providers of support for children operate with a trauma informed, child-led approach that provides holistic support to children; recognising that a one size fits all approach is not suitable for effective responses to children impacted by DA.
- Commissioners to consider how existing support for disabled children can also consider their support needs relating to experiencing the effects of domestic abuse.
- Commissioners to explore if there is sufficient capacity in the service offer for children aged 13+ and ensure that this age group is fully considered during any developments for those aged under 13 so new gaps in provision are not created in addressing current gaps in service (considering options for YPVA support within schools where appropriate).
- Commissioners to ensure robust data is available from the STREET service to support future needs assessments.
- Commissioners to explore the engagement rate and positive outcomes in domestic abuse programmes within C&FCs to ensure they meet the needs of families experiencing domestic abuse; for this to include a review of capacity to deliver these programmes at the level needed across the county.
- Commissioners to explore if there is sufficient capacity in the service offer for children's mental health needs and explore possible developments in this area to increase support.
- Commissioners to consider how services may be able to operate an approach that allows for non-specialist DA professionals to seek advice and guidance on their response to individual cases.
- Commissioners to consider the accessibility of service provision; considering a range of locations, transport, childcare, different days and times, and availability when child is ready.
- Commissioners to consider what support is available for pregnant mothers experiencing domestic abuse and ensure appropriate provision is in place that can recognise the trauma DA can have on an unborn child.

Recommendations for Operation Encompass

- For education leads to consider if schools feel equipped to respond to the notifications and if any resources or support are required to enable them to support students fully alongside a robust multi-agency response.
- For police to ensure accurate VIST completion and the recording of children's details to ensure schools are updated on all incidents of domestic abuse involving children as swiftly as possible.
- For police to explore data recording in light of children being seen as victim in their own right; acknowledging that children who witness the abuse do not necessarily need to be recorded as a victim of a specific crime, but may need to be recorded under a separate category in order to improve data capture and quality.

Recommendations for the Domestic Abuse Partnership Board

- To ensure the plans for the implementation of the DA training pathway provide professionals with knowledge and understanding surrounding the impact of DA on children and effective responses; including processes for making referrals, managing disclosures, risk management/safety planning.
- To provide training that ensures all professionals are aware of their role and responsibility in responding to children impacted by DA; including awareness of the role of multi-agency working and pathways for support/signposting.

- To ensure the DA communications plan provides detail on the promotion of local services that support children.
- To explore the development of a countywide website for the DA LPB that contains a directory of DA services, advice and guidance and a clear understanding of referral pathways.
- For children's social care to ensure that where support is outlined in CIN plans that this is carried out before closure of cases.
- For children's social care to consider public awareness regarding the role of social care – ensuring a clarification of support offered and that removing child is a last resort and not a desired outcome
- For research to be conducted into tools for professionals that could be rolled out across the county that enables appropriate support whilst specialist services are being explored.

10. Vulnerable Adults and Domestic Abuse¹⁰⁶

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 2014¹⁰⁷ 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

In 2017, Safe Lives conducted a range of 'spotlight' research projects that provide evidence (Insights data) 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 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 isolation¹⁰⁸.
- For older victims, their experiences are often exacerbated by social, cultural and physical factors that require a tailored response. The Insights data 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 under¹⁰⁹.
- Mental health problems are a common consequence of experiencing domestic abuse, for both 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

¹⁰⁶ Section completed by Hannah Ouston, Domestic Abuse and Sexual Violence Programme Assistant

¹⁰⁷ [Care Act 2014 \(legislation.gov.uk\)](https://www.legislation.gov.uk)

¹⁰⁸ [Disabled Survivors Too CORRECTED.pdf \(safelives.org.uk\)](https://safelives.org.uk/assets/Disability%20Survivors%20Too%20CORRECTED.pdf)

¹⁰⁹ [Spotlight #1: Older people and domestic abuse | Safelives](https://safelives.org.uk/assets/Spotlight%20%231%20Older%20people%20and%20domestic%20abuse.pdf)

abuse. Insights data (IDVA 2017-18 dataset showed that 42% of people accessing 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 LGBTQ+ and those who have a disability being more likely to have mental health needs at the point of accessing domestic abuse services¹¹⁰.

10.2. Local Approach

Gloucestershire's Domestic Abuse Strategy and Local Partnership Board remain committed to tackling domestic abuse and ensuring victims can access support; including those who may have care and support needs.

Whilst there is not a specific domestic abuse service offer for those with care and support needs, Adult Social Care continue to respond to referrals where domestic abuse is identified, and the Gloucestershire Adult Safeguarding Board have long recognised domestic abuse as a priority area.

10.3. Service Provision

In the main, concerns for vulnerable adults experiencing domestic abuse are responded to by Adult Safeguarding and Adult Social Care (ASC). Both of these services regularly engage with GDASS where required.

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.

10.4. Vulnerable Adults and Domestic Abuse in Gloucestershire

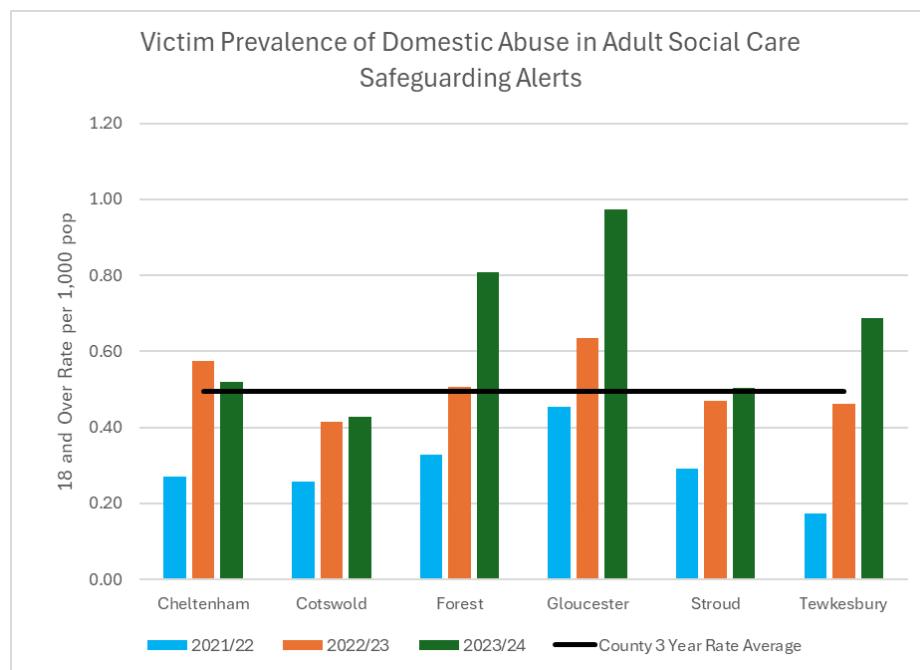
From 1 April 2021 to 31 March 2024 Gloucestershire received 770 safeguarding alerts relating to individuals identified as experiencing domestic abuse. The majority of these alerts were for individuals living within Gloucester (28%) and Cheltenham (17%), in line with wider domestic abuse data within the county.

In the last year (2023/24) three of the six districts have experienced rates higher than the county 3 year average rate (Forest of Dean, Gloucester and Tewkesbury). Two districts (Cheltenham and Stroud) have a similar rate to the county 3 year average during the latest year 2023/24.

Gloucester has had the highest district rate over the last 3 years when compared to the other 5 districts and has been higher than the 3 year county rate for the last 2 years.

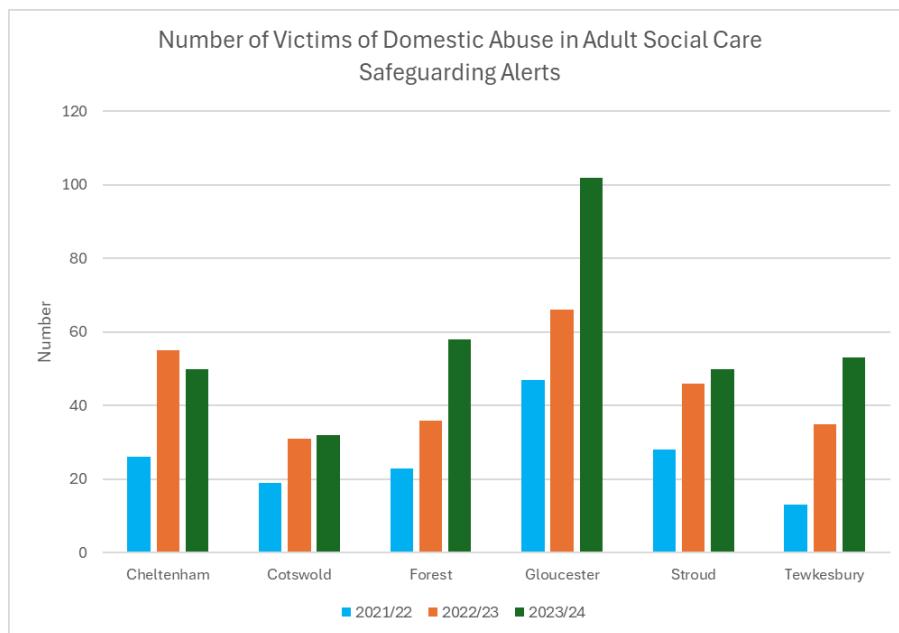
¹¹⁰ [Safe and Well | Domestic abuse and mental health - SafeLives](#)

Graph 10.1.: Victim prevalence of domestic abuse in adult social care safeguarding alerts



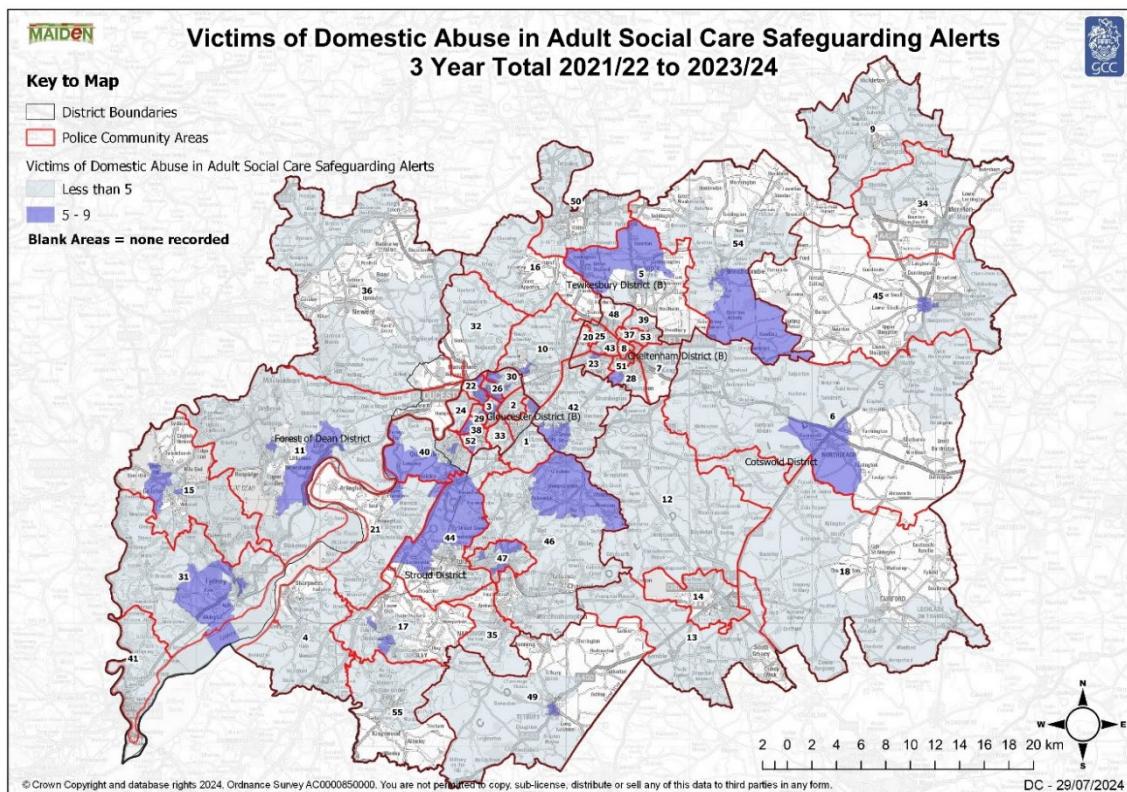
The number of domestic abuse victims connected to safeguarding alerts have continually increased, with a 42% increase from 2021/22 to 2022/23 and a 22% increase from 2022/23 to 2023/24 across the whole of Gloucestershire. There are some variations between the districts however, with the most notable increases seen in the Forest of Dean and Gloucester.

Graph 10.2.: Number of victims of DA in adult social care safeguarding alerts



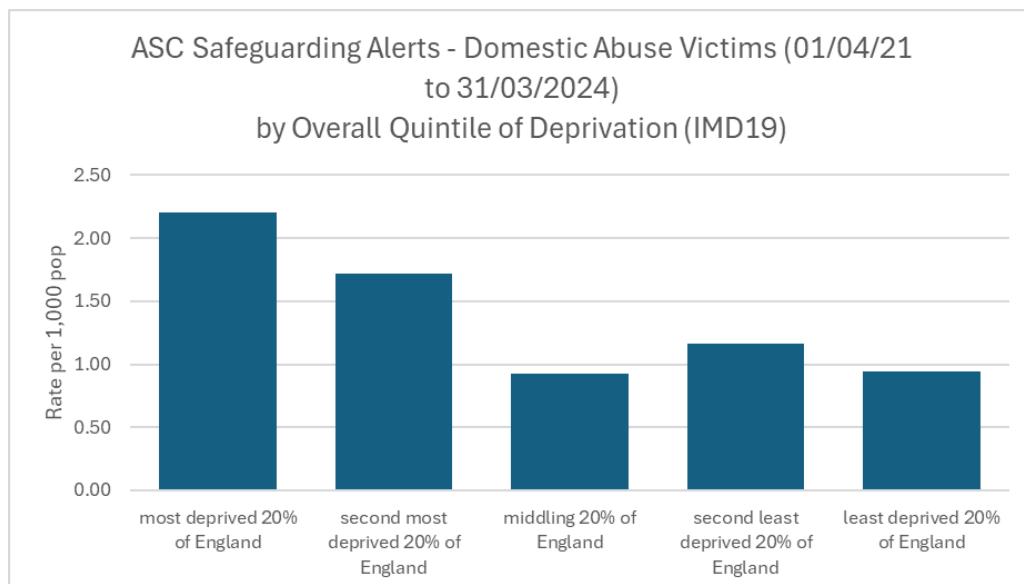
Map 10.1 below provides detail on the smaller community areas where victims of domestic abuse are identified through safeguarding alerts.

Map 10.1: Adult safeguarding alerts 3 year total number across Gloucestershire from 2021-22 to 2023/24



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% and second most deprived 20% of England.

Graph 10.3.: ASC safeguarding alerts compared with the indices of deprivation



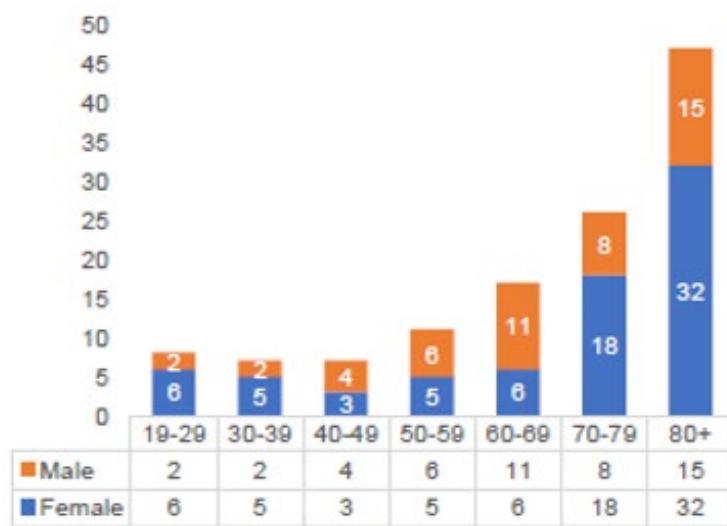
10.5. Vulnerable Adults experiencing abuse in their own home¹¹¹

Safeguarding Adults in Gloucestershire identified that in the Quarter 3 Quality Assurance Board Report (for the time period 1 January 2024 – 31 March 2024) there were a high proportion of

¹¹¹ Audit of enquiries where Location of Abuse is Own Home as identified at Quarter 3 Quality Assurance Board, 2024

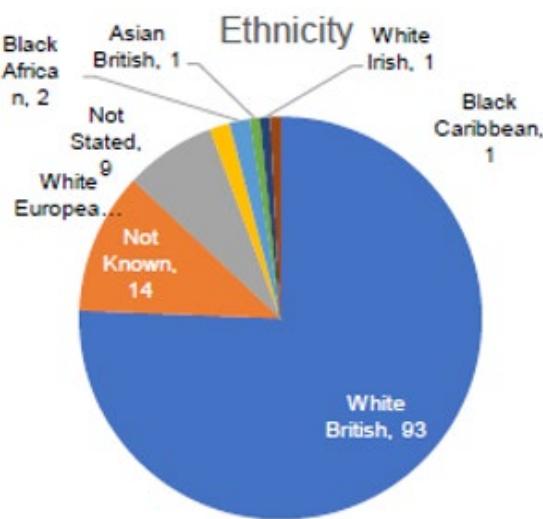
enquiries where abuse took place in the person's own home. There were 187 enquiries. Of these, 66% were categorised as taking place in the individual's 'Own Home'. 61% of those identified as experiencing abuse in their own home were female (this is 8% higher than the representation of females shown in the full ASC cohort), highlighting that females are more at risk of experiencing abuse in their own home. 38% of those experiencing abuse in their own home were aged over 80 – this is in line with the ASC cohort of 38%. A full breakdown of age and gender is shown in graph 10.4. Whilst high numbers do mean that abuse is being properly identified and reported, the prevalence of abuse in people's own homes is concerning.

Graph 10.4.: Age and gender breakdown of those identified by ASC as experiencing abuse in their own home for 1 January 2024 – 31 March 2024



76% of those experiencing abuse in their own home identified was White British – this was slightly lower than the wider cohort where 81% identified as White British. Those identifying as a different identified ethnicity (where ethnicity was not recorded as 'not known' or 'not stated' or 'White British') made up 6% of the total, double their representation in the full ASC cohort. A full breakdown of ethnicity is shown below in graph 10.5.

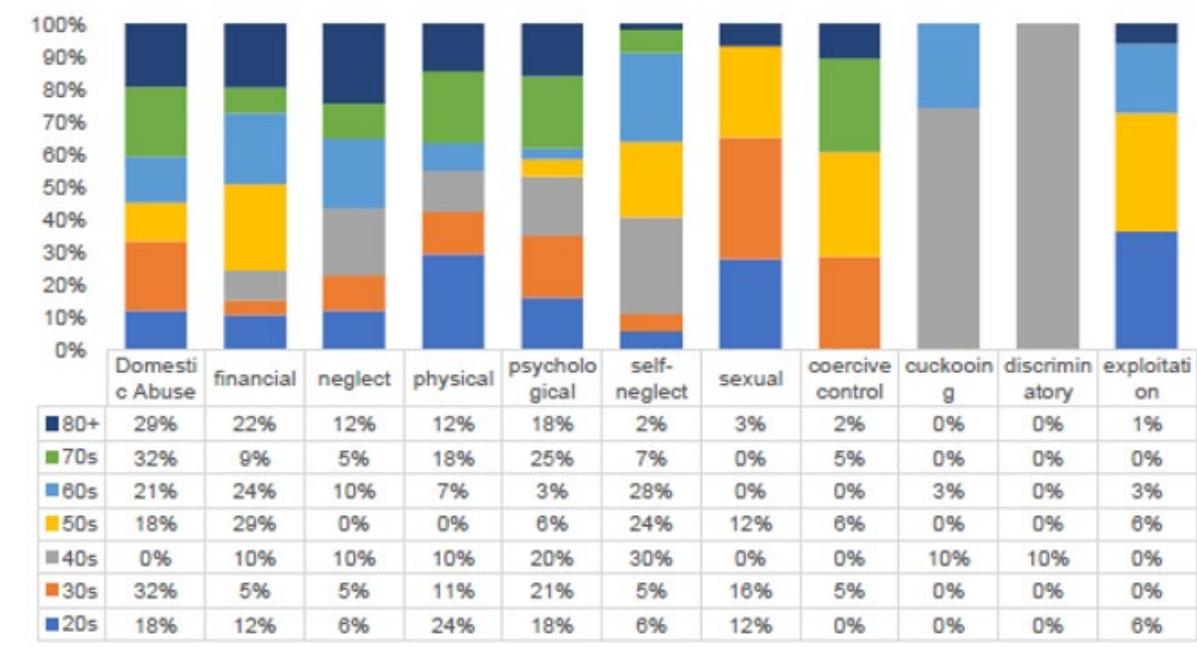
Graph 10.5.: Percentage breakdown of ethnicity for those identified by ASC as experiencing abuse in their own home for 1 January 2024 – 31 March 2024



Domestic abuse made up the largest category of abuse experienced in the person's own home, at 27% of 123 reviewed cases. This was followed by financial abuse (18%) and neglect (9%), however, it is notable that these can also form a part of domestic abuse. 72% of those experiencing domestic abuse were female.

For the age group 70+ domestic abuse was the most likely abuse to be experienced in their own home. The same was true for those aged 30-39. A full breakdown of the types of abuse experienced by age is shown below.

Graph 10.6: Breakdown of abuse types¹¹² by age for those identified by ASC as experiencing abuse in their own home for 1 January 2024 – 31 March 2024

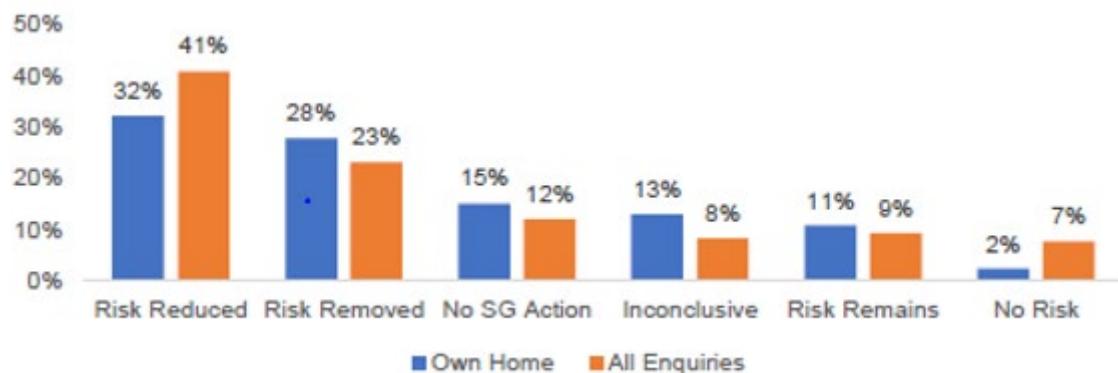


A spouse or partner made up 38% of the total 'sources of risk', highlighting the well documented risk that people experience at the hands of their intimate partners. Overwhelmingly the abuse was committed by a family member (60% of the total), with the highest non familial source of risk being a paid carer (10%).

The percentage of cases where the risk was removed from the location of own home was 28%, which considering the abuse was likely committed by a family member or intimate partner, could be complex to achieve. The risk was reduced in 32% of cases. Concurringly, 13% were inconclusive (where the person involved does not want to take part in the enquiry any further. There is a potential for further training for ASC staff in engaging victims of domestic abuse to ensure that they are aware of their full options. A full graph of outcomes, against the full cohort, is shown in graph 10.7.

¹¹² Cuckooing: an unlawful practice where people take over a person's home and use the property for some form of exploitation

Graph 10.7.: Enquiry outcome for those identified by ASC as experiencing abuse in their own home for 1 January 2024 – 31 March 2024



At the time of the report, of the 123 enquiries that were audited with the location of abuse in the person's own home, 47 had been concluded, of which 22 were receiving a service from ASC.

10.6. Gaps in provision and future developments

Understanding of the links between adult safeguarding and domestic abuse remain under-explored. The data relates only to those vulnerable adults where the safeguarding alert identifies domestic abuse as part of the initial concern. Perpetrators of such abuse also retain the ability to hide the abuse or mislead social workers. It can therefore be assumed that the figures discussed in this section are a minimum, and that a greater connection between domestic abuse and vulnerability exists.

Whilst the data from Safeguarding Adults in Gloucestershire identifies outcomes such as 'risk reduced' or 'risk removed', further detail as to how this is ascertained is not provided. Due to the vulnerability of the individuals at risk, ongoing safeguarding is necessary, and the data is not currently provided in a longitudinal manner.

There is therefore a need to ensure ongoing links between the Adult Safeguarding Board and Domestic Abuse Local Partnership Board to ensure a robust response locally to victims of domestic abuse with care and support needs. This will be enhanced by providing further training for ASC staff in engaging victims of DA.

11. Stalking¹¹³

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 Paladin:

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 prosecuted¹¹⁴.

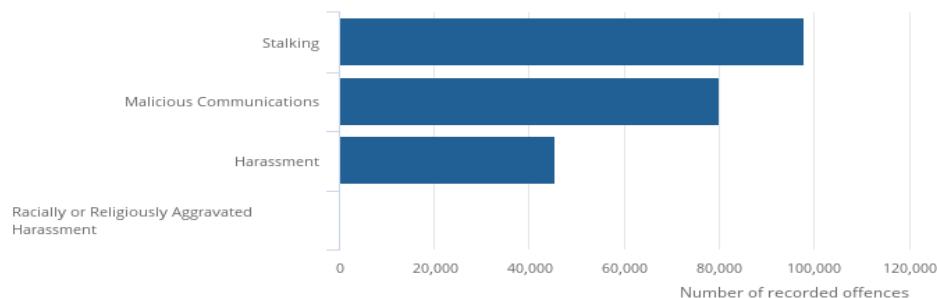
Stalking has a significant impact on society. The CSEW for the year ending 2023 estimates that 2.4% of men (n=2.5% for year ending 2020) and 4.4% of women (n=4.6% for year ending 2020) have experienced stalking, equating to a total of 17,230 people aged over 16. This figure is notably lower than the CSEW 2020 (n=25,254). In addition, 8.7% of men (n=9.6% for year ending 2020) and 20.6% of women (n=19.9% for year ending 2020) indicated that they had experienced stalking at some point in their life since the age of 16, equating to 17,234 adults. Whilst the percentage of men reporting stalking since the age of 16 has dropped, the percentage of women has increased, highlighting the potential gendered nature of the crime – although this significant difference is not reflected to such an extent in the annual figures. The Suzy Lamplugh Trust estimates that 1 in 5 women and girls and 1 in 10 men experience stalking in their lifetime¹¹⁵.

Stalking has a significant link to domestic abuse, with 0.4% (n=0.7% for year ending 2020) of men and 0.9% (n=1.3% for year ending 2020) of women reporting domestic abuse related stalking to the CSEW 2023, in which the perpetrator was either a partner or family member. These figures reflect the slight downwards trend seen in the overall stalking figures. Additionally, 'the police recorded 223,704 domestic abuse-related stalking and harassment offences in the year ending March 2023, accounting for a quarter of all domestic abuse-related crimes'¹¹⁶. Graph 11.1. below, taken from the ONS, shows the breakdown of those domestic abuse-related stalking behaviours into subgroup categories, showing the highest form of offence was stalking.

Graph 11.1.: Number of domestic abuse related stalking and harassment recorded by police

Figure 8: Stalking and malicious communications were the sub-group categories with the highest number of domestic abuse-related stalking and harassment offences

Number of domestic abuse-related stalking and harassment offences recorded by the police, by offence, England and Wales (excluding Devon and Cornwall), year ending March 2023



¹¹³ [Stalking](#): findings from the Crime Survey for England and Wales Year ending March 2023. ONS

¹¹⁴ [Paladin - Vision and Mission \(paladinservice.co.uk\)](#)

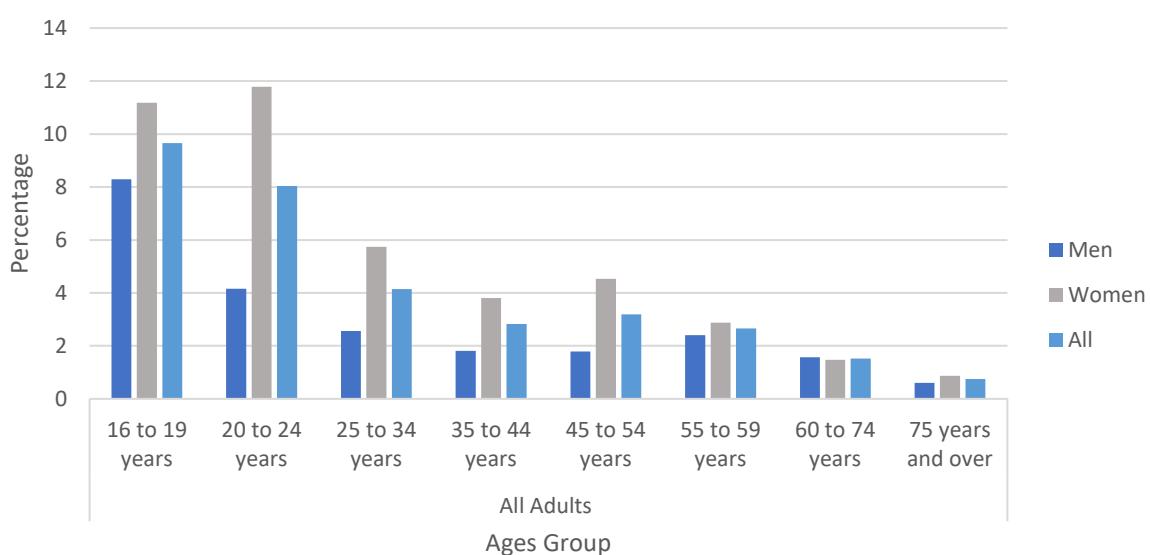
¹¹⁵ Suzy Lamplugh Trust, 2024, Join Forces Against Stalking: From Disclosure to Conviction, p. 2

¹¹⁶ [Domestic abuse prevalence and trends, England and Wales - Office for National Statistics \(ons.gov.uk\)](#)

Data from the Suzy Lamplugh Trust indicates that 45% of people who contact the Helpline are being talked by ex-intimates (i.e. ex-partners) and a further 33% have some sort of prior acquaintance with the perpetrator, resulting in 78% of victims of stalking being stalked by someone they know¹¹⁷. The remaining victims would have been perpetrated by someone the victim did not know well, or at all, such as acquaintances, colleagues or strangers.

The majority of those who report having experienced stalking to the CSEW in the year ended 2023 are aged 16-19, accounting for 8.3% of men and 11.2% of women. Graph 11.2. below provides more detail on the age breakdown.

Graph 11.2.: Percentage of adults aged 16 plus who were victims of stalking in the last year, by age, year ending March 2023 CSEW



When looking at the ethnicity of those who report having experienced stalking in the last year, the majority were categorised under 'mixed' (12%) followed by 'white' and 'black or black British' (both 3%).

The majority are noted as 'single' (7%) followed by 'divorced/legally dissolved partnership' (5%). This suggests, given that the vast majority of stalking is perpetrated in the context of domestic abuse, that stalking is most common post-separation; a significant risk factor considered within domestic abuse risk assessments.

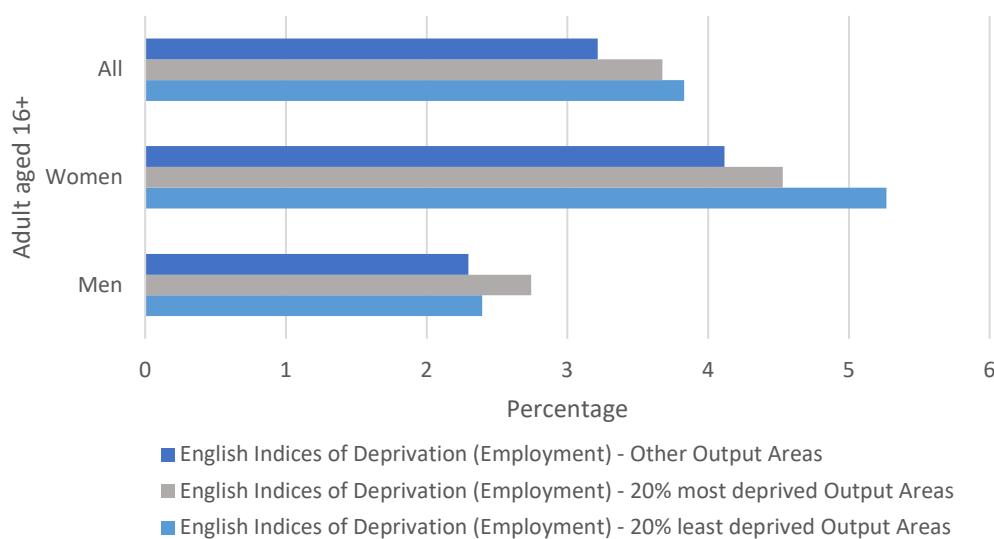
The CSEW for year ending March 2023 indicates that those identifying as LGBTQ+ are significantly more likely to report an experience of stalking in the last year, with 17% of bisexual (an increase of 4% from the CSEW 2020) and 8% of gay/lesbian adults noting an experience of stalking, compared with 3% of heterosexual adults. Some of this will be linked to domestic abuse with stalking as a common feature and risk factor.

5.9% of respondents reported as disabled against 2.9% who identified as non-disabled, demonstrating the link between stalking and other vulnerabilities.

¹¹⁷ [What is stalking? | Suzy Lamplugh Trust](#)

As detailed below in graph 11.3., female victims of stalking are significantly more likely to come from the 20% least deprived output areas based on the English indices of deprivation. Men, however, were more likely to come from the 20% most deprived output areas. This is consistent with the finding that the majority of the women were likely to earn between £20,800 - £52,000 (14% of women compared with 6% of men) but is a significant difference from the CSEW 2020 where women were more likely to come from the most deprived output areas and earn less than £10,400. However, women were still more likely to be social or private renters than homeowners but were more likely than men to be homeowners (4% of females compared with 1.8% of males).

Graph 11.3.: Percentage of adults who were victims of stalking in the last year among adults aged 16 plus, by English Indices of Deprivation (Employment), year ending March 2023 CSEW



The percentage of adults 16+ who were victims of stalking in the last year by employment status shows that the majority were recorded as either 'unemployed' (11%) or 'student' (5%). The rate of unemployed victims of stalking has increased by 5% since the CSEW 2020, highlighting a possible shift in typology. The fact that students are the second highest employment status highlights that stalking impacts younger victims and is likely to have a long-term impact on the individual.

11.2. Local approach

Since 2016, Gloucestershire Constabulary has had a stalking hub process in place.

The stalking hub is an approach to coordinate the response to high risk stalking reported to police and provide advice and guidance on other risk levels when requested. Its main functions are to:

- Provide advice and guidance on stalking cases to investigating officers and partner agencies when requested.
- Provide links to the force stalking tactical lead for investigative guidance and support.
- Check crime logs for stalking tagged crimes, review risk and provide feedback and advice when required to ensure robust management of stalking.
- Assess risk using the Stalking Risk Profile.
- Facilitate referrals to the Independent Stalking Advocacy Caseworker (ISAC) and partner agencies for high risk stalking to ensure victim support and safeguarding.

- Facilitate case discussions with ISACs, Crown Prosecution Service (CPS) and force stalking tactical lead to ensure the robust investigation of stalking and appropriate victim safeguarding.
- Convene full multi-agency stalking clinic meetings for high risk cases that require a multi-agency approach to appropriately manage the risk.
- To support the application of Stalking Protection Orders (SPOs) and advocate for their use.
- To coordinate the response to any cross-border stalking cases as required.

The stalking hub has its own dedicated coordinator who works alongside the force stalking tactical lead and the county ISAC service.

The stalking hub was recognised by the College of Policing as promising practice in 2024 and was listed in their practice bank¹¹⁸.

Strategically, within the partnership landscape, stalking has been considered under the Domestic Abuse Local Partnership Board and Gloucestershire's Domestic Abuse Strategy 2021-2024. This includes stalking both within the context of domestic abuse and more broadly. This approach will continue into the 2025-2028 strategy.

In addition to the partnership approach, stalking is also considered within both the domestic abuse and VAWG portfolios in the force.

[11.3. Service Provision](#)

The Office of the Police and Crime Commissioner (OPCC) commissions the Independent Stalking Advocacy Caseworker (ISAC) service for the county. This service is provided by FearFree and includes the provision of two FTE ISACs.

The ISACs are specially trained roles to provide support to high risk victims of stalking, outside of the context of domestic abuse. 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:

- Provides advice to victims of stalking and specialist advocacy to high risk victims
- Raises awareness of the dangers and risks associated with stalking amongst professionals and the public
- Provides advice and raises awareness with professionals
- Campaigns on behalf of victim and represents their voice in multi-agency meetings/risk management processes

The ISAC service was recommissioned in 2024 and now includes the provision of training on stalking for frontline professionals in Gloucestershire.

In addition to the dedicated ISAC service, GDASS also have 2 qualified ISACs within their IDVA service to provide support to victims of stalking within the context of domestic abuse.

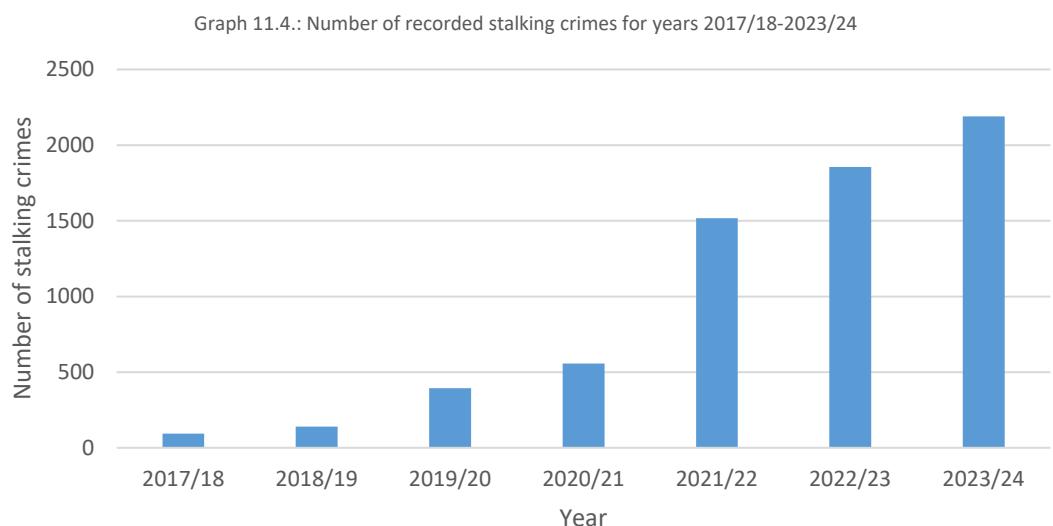
Alongside this, Victim Support are currently commissioned to provide support to stalking victims assessed at standard and medium risk where the stalking occurs outside of the context of domestic abuse. Within the new ISAC contract however, future provision is built into the service for them to

¹¹⁸ [Practice bank | College of Policing](#)

support all risk levels once the current victim support contract is open for recommissioning. This change will simplify the pathway to support for stalking victims in Gloucestershire.

11.4. Stalking crimes in Gloucestershire

Stalking Crimes in Gloucestershire have increased considerably since 2017/18, with 93 crimes recorded in 2017/18 compared with 2,189 recorded in 2023/24. This increase is likely due to significant improvements in crime recording within Gloucestershire Constabulary, but will have also been supported by recent public campaigns to increase reporting, as well as stalking training rolled out across the force to support identification of stalking crimes.



As with the national prevalence data, the majority of stalking crimes recorded are linked to domestic abuse, accounting for 88% of all stalking crimes in 2023/24 (an increase from 78% in 2021/22).

The rate of stalking crimes per 1,000 of the population has increased, as would be expected with the significant increase in reported crimes. For 2023/24, the rate of stalking accounts for 3.39 crimes per 1000 of the population (an increase from a rate of 2.35 in 2021/22, and 0.87 in 2020/21).

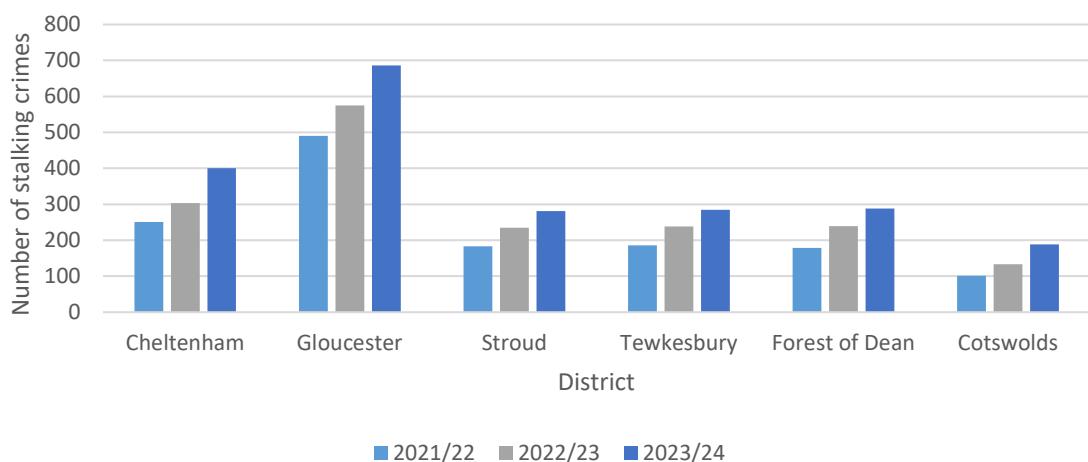
As detailed in Graph 11.5., the majority of stalking crimes are recorded in Gloucester, something to be expected given the higher prevalence of domestic abuse recorded in Gloucester. In contrast to the domestic abuse data however, Cheltenham has the second highest levels of recorded stalking crimes, with rural districts Stroud, Tewkesbury, the Cotswolds and Forest of Dean having very similar levels.

As to be expected, the highest rate of stalking crimes is found in the Gloucester district at 5.18 crimes per 1,000 of the population, higher than the rate of 3.39 for the county as a whole.

Table 11.1.: The rate of stalking crime per 1,000 of the population per district for 2023/24

District	Cheltenham	Cotswolds	Forest of Dean	Gloucester	Stroud	Tewkesbury
Rate of stalking crimes per 1,000 of the population	3.37	2.08	3.31	5.18	2.32	3.00

Graph 11.5: Number of stalking crimes recorded by district location for years 2021/22-2023/24



When considering the rate of stalking crimes at community level, the below table outlines those communities where the rate is higher than the countywide rate, with the highest rate in Gloucester City Centre. This reflects comparably to the data on domestic abuse and is to be expected given the proportion of stalking that is tagged as domestic abuse.

Table 11.2.: Rate of stalking crimes at community level where the rate is higher than the countywide rate 2023/24.

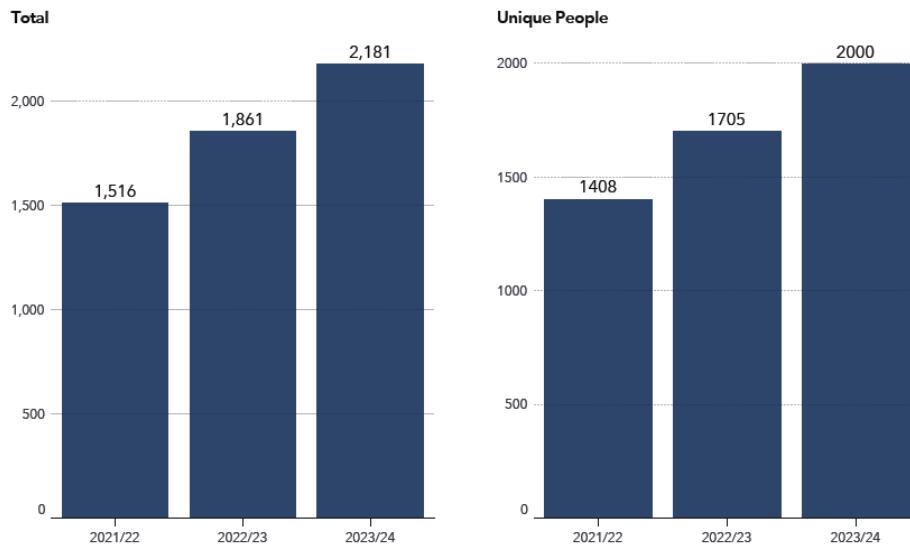
District	Community Area	Rate of stalking crimes per 1,000 of the population
Cheltenham	Cheltenham Town Centre	6.64
Cheltenham	Hesters Way	7.40
Cheltenham	St Marks	5.53
Cheltenham	St Pauls and Pitville	5.60
Cheltenham	Whaddon Lynworth and Oakley	5.40
Gloucester	Barnwood	3.82
Gloucester	Barton and Tredworth	6.42
Gloucester	Gloucester City Centre	11.24
Gloucester	Hempsted	8.60
Gloucester	Kingsholm and Wotton	8.09
Gloucester	Linden	5.61
Gloucester	Matson and Robinswood	7.86
Gloucester	Podsmead	7.51
Gloucester	Quedgeley	4.13
Gloucester	Tuffley and Grange	4.07
Stroud	Stonehouse	3.46
Tewkesbury	Glevum West	4.32
Tewkesbury	Severn Banks	4.52
Forest of Dean	Cinderford	3.74
Forest of Dean	Lydney	4.13

11.5. Police recorded victims

The below data reflects stalking victims recorded by police against domestic abuse tagged crimes for years 2021/22, 2022/23 and 2023/24.

Graph 11.6. details the total number of recorded victims and the number of unique individuals recorded within those crimes. As detailed, the number of unique individuals has increased slightly over time with 2,000 unique victims recorded in 2023/24.

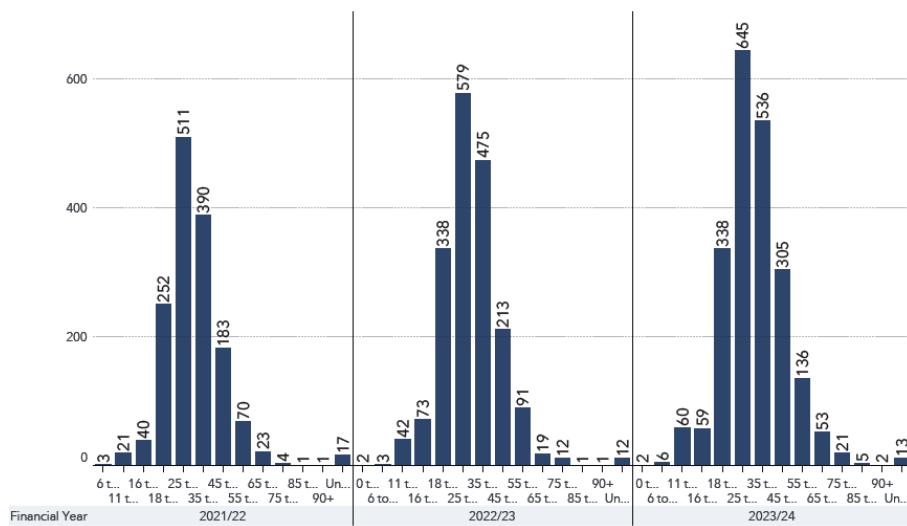
Graph 11.6.: The number of victims recorded within stalking crimes compared with the number of unique victims for years 2021/22, 2022/23 and 2023/24.



Across all 3 years between 76.3-78.3% of stalking victims were recorded as female, indicating that since the 2021 needs assessment, there has been an increase in male victims of stalking (2021 needs assessment recorded 83-94% of stalking victims as female).

The majority of stalking victims are recorded as aged 25-34, in line with the stalking offender data for 2021/22 and 2022/23, but shows a slightly younger demographic of victim compared with offenders in 2023/24.

Graph 11.7.: Age range of domestic abuse victims recorded by police for years 2021/22, 2022/23 and 2023/24.



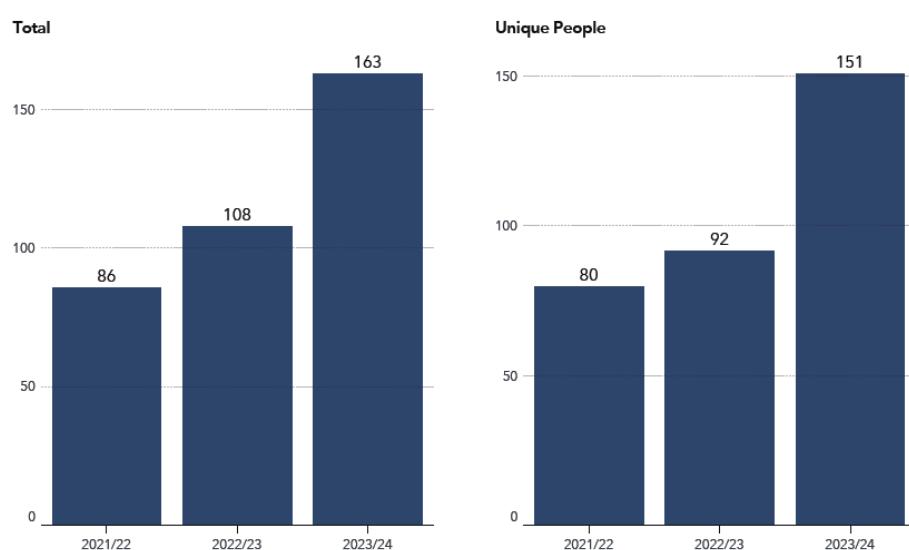
When considering the ethnicity of stalking victims, the majority are recorded as being from 'white ethnicities' (between 82-83%). The number of stalking victims recorded as Black, Asian and Ethnic Minority is between 4-5%, an underrepresentation of the county population at 6%.

11.6. Police recorded offenders

The below data reflects stalking offenders recorded by police against domestic abuse tagged crimes for years 2021/22, 2022/23 and 2023/24. Data on offenders relates to those who have received a criminal justice outcome only.

Graph 11.8. details the total number of recorded offenders and the number of unique offenders recorded. As detailed, the number of unique individuals has increased slightly over time with 151 unique offenders recorded in 2023/24, indicating a positive increase in the volume of offenders going through the criminal justice system.

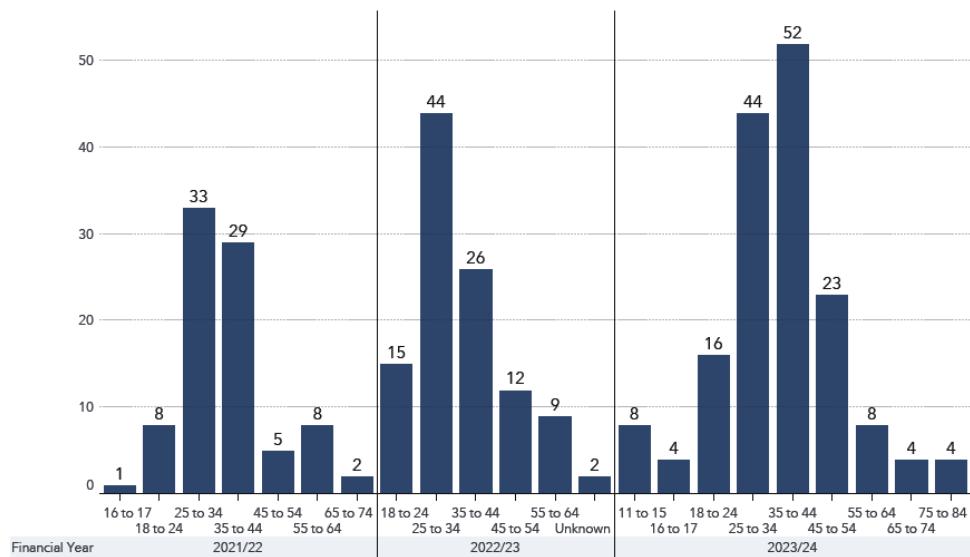
Graph 11.8.: The number of offenders recorded within stalking crimes compared with the number of unique offenders for years 2021/22, 2022/23 and 2023/24.



Across all 3 years between 83-94% of offenders are recorded as male, a decrease from that seen in the 2021 needs assessment where male offenders accounted for 90-97%.

Offenders of stalking recorded in Gloucestershire are most likely to be aged 25-34, similarly reflected in stalking victim data. This does, however, change in the 2023/24 data, where offenders are most likely to be aged 35-44. This may indicate that victims of stalking are more likely to be stalked by someone in an older age profile; this is difficult to ascertain with certainty, however, as offender data only relates to those who received a criminal justice outcome and are not necessarily directly linked to the victims of the year in which their conviction occurred.

Graph 11.9.: Age range of domestic abuse offenders recorded by police for years 2021/22, 2022/23 and 2023/24.

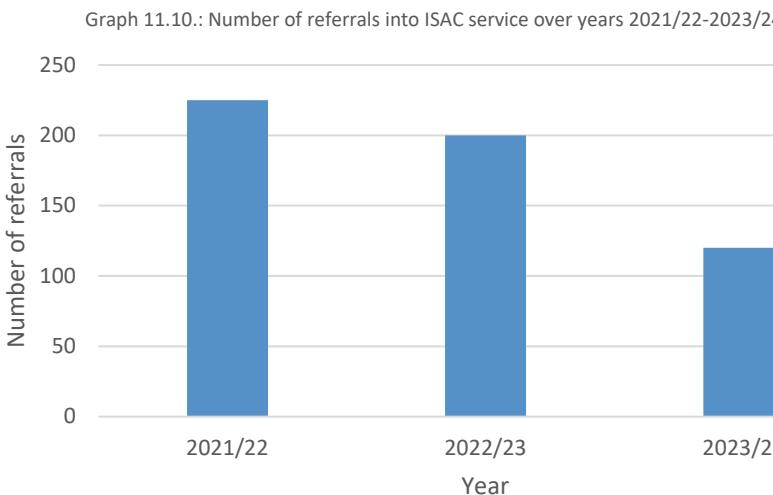


Across all 3 years, stalking offenders from 'white ethnicities' account for between 81-85% of offenders. Offenders recorded as Black, Asian and Ethnic Minority are slightly overrepresented when compared with the population of the county, accounting for between 7-8% of offenders and 6% of the population.

11.7. Independent Stalking Advocacy Caseworker (ISAC) service

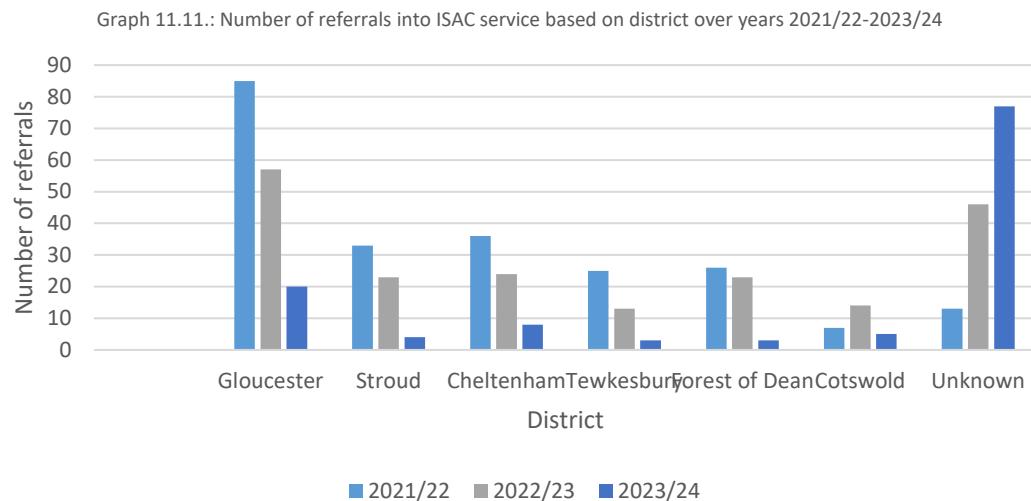
Data from the ISAC service only considers high risk stalking that is primarily non-domestic abuse related.

The number of referrals into the ISAC service has dropped over the last years. This is likely due to the small scale nature of the service and its primary reliance on referrals from processes such as the stalking clinic, rather than the general public being aware of the service and self-referring.



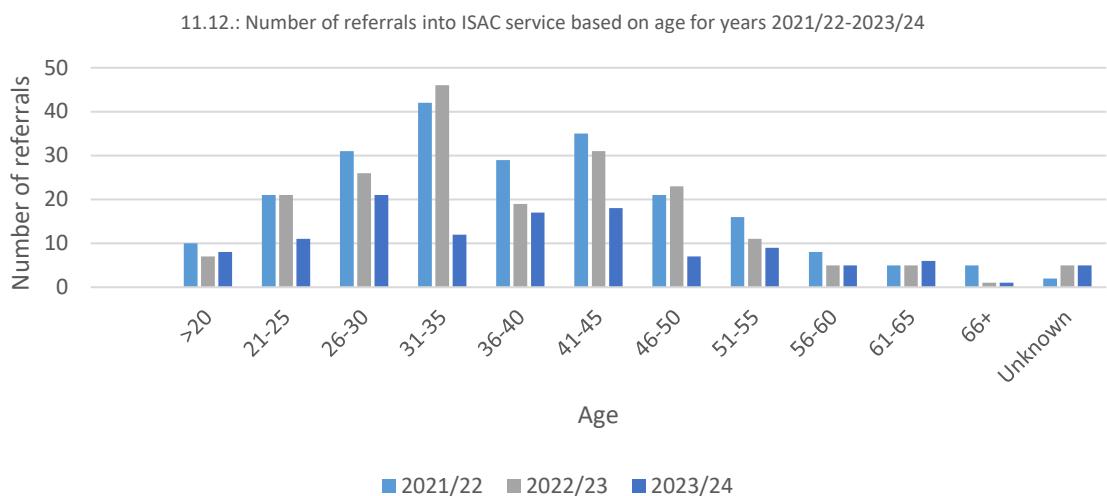
The majority of referrals into the service come from the Gloucester district, which is to be expected given wider data on stalking in the county. For 2023/24 there is, however, an increase in the number

of referrals where the district is recorded as 'unknown', indicating a need to improve data collection in the service



The majority of referrals across 3 years are for female victims of high risk stalking. This has decreased over the years, however, with 96% of referrals for female victims in 2021/22 compared with 75% in 2023/24. Alongside this, there has been an increase in male victims referred into the service, accounting for 1.7% of referrals in 2021/22 compared with 11% in 2023/24. There has also been an increase in the number of referrals recorded as 'unknown', indicating a need to improve data collection.

As detailed in graph 11.12., overall, the majority of referrals into the ISAC service are for victims at a slightly higher age profile than seen for stalking crimes as a whole, with the average age of those referred into the service being 38. This may be an indication of high risk within certain age groups, whether that is perceived or actual risk.,



When considering the sexual orientation of victims referred into the ISAC service, the majority are recorded as heterosexual, accounting for 64% of referrals in 2023/24 (a reduction from 84% in 21/22). The reduction in referrals for those who identify as heterosexual is not counteracted by an increased in referrals for those who identify as LGBTQ+, but instead an increase in referrals where

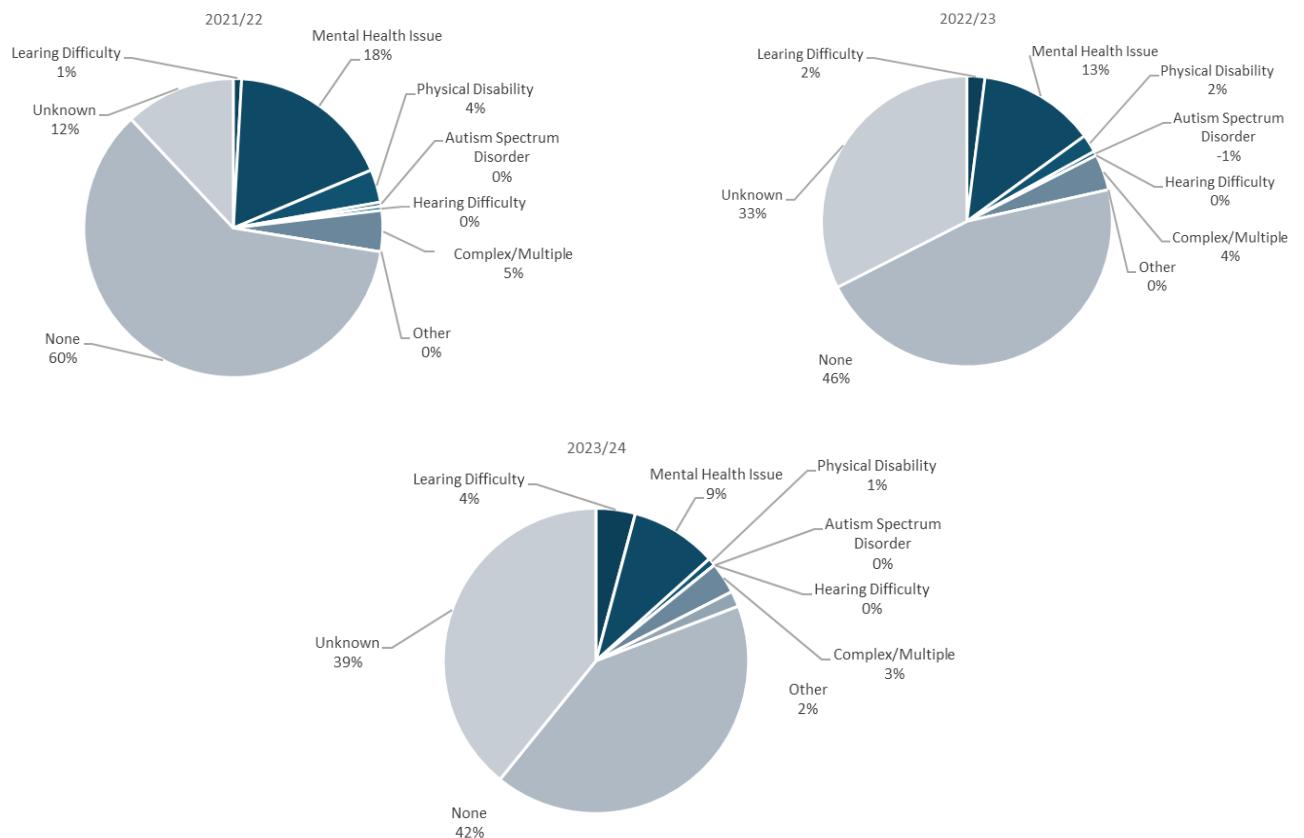
sexual orientation is recorded as 'unknown'. Referrals where the victims identify as LGBTQ+ account for 1.6% of referrals in 2023/24, compared with 34% recorded as 'unknown'.

When looking at the recorded ethnicity of referrals into the ISAC service, the majority are recorded as 'white ethnicities', accounting for 64% of referrals in 2023/24 (74%: 2022/23 and 81%: 2021/22). The majority of those recorded under 'white ethnicities' are 'white British'. Those recorded as Black, Asian and Ethnic Minority account for between 6-8% of referrals, so in line with the county population (although slightly higher in 2023/23).

As with other demographic data, the number of referrals where ethnicity is recorded as 'unknown' has increased over the last 3 years, with 12% recorded as 'unknown' in 2021/22 compared with 27.5% in 2023/24. This again demonstrates a need to improve demographic data collection within the service.

Data from the ISAC service also includes information on disabilities disclosed by victims. As detailed below, where a disability is identified, mental health is the most common across all 3 years. This is likely a demonstration of the impact that stalking has on its victims.

Graph 11.13.: Percentage of referrals based on disability status for years 2021/22-2023/24.



As is often the case in support services, support is provided in relation to other presenting issues outside of the main concern, in this case stalking. The ISAC service records a range of other concerns that present alongside the stalking risk. The most common additional concerns related to:

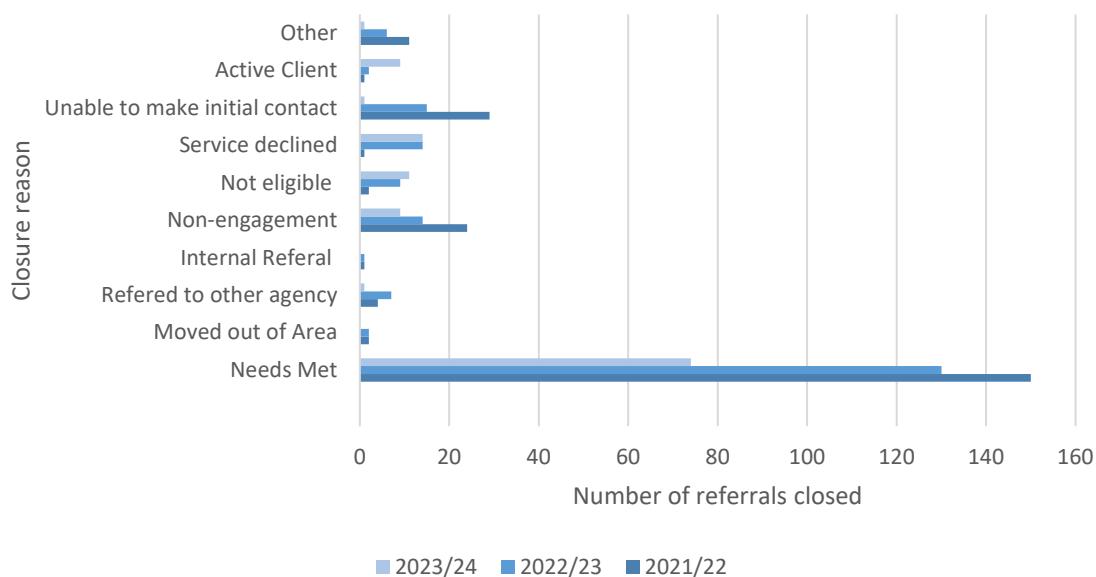
- Coercive control and domestic abuse
- Sexual violence
- Mental health

- Legal issues
- Child issues
- Housing

This demonstrates the complexity of stalking cases and the range of support needs that victims of stalking present with.

When considering outcomes of the ISAC service, the vast majority of referrals are closed with the client's needs having been met by the service, demonstrating the positive impact of the service and the high levels of engagement.

Graph 11.14.: Closure reason from ISAC service across years 2021/22- 2023/24



In addition, in 2023/24, 28% of referrals were recorded as having had their risk decreased as a result of the ISAC service support. Improvements in data collection are needed in this space however, as 33% were recorded as 'unknown' in terms of any risk changes within the service.

11.8. Stalking clinic

The stalking clinic is well placed to identify themes in the stalking behaviour identified. Over the last 3 years, the stalking clinic had identified an increase in the below themes presenting in the cases they are overseeing:

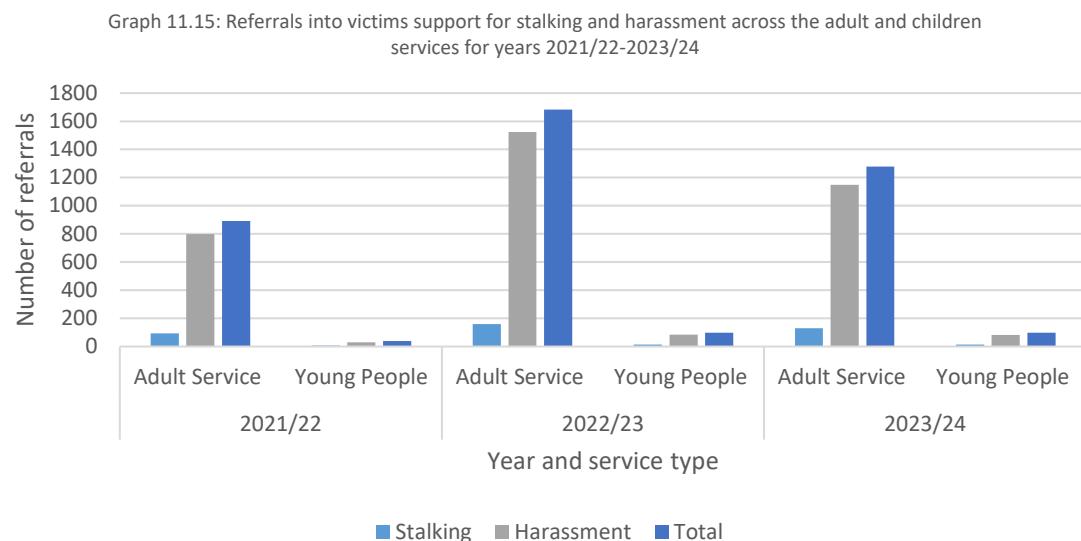
- Mental health concerns: this relates primarily to the offender but is a presenting issue for victims also.
- Digital stalking: the use of social media and other digital methods (such as the internet or tracking) have increased.
- Domestic abuse related stalking: specifically stalking that occurs after a short-term relationship.

11.9. Victim Support

Victim Support are commissioned to provide support to victims of stalking assessed at standard and medium risk, outside of the context of domestic abuse.

The number of referrals into Victim Support for stalking victims has increased year on year until a drop in referrals for the most recent financial year: 101 referrals in 2021/22, 173 in 2022/23 and 145 in 2023/24. It is unclear as to why there was a drop given the increase in police recorded crime, and this may therefore indicate a need to review referral processes from police.

The majority of referrals into the service are for offences classified as harassment rather than stalking, with most of these sitting within the adult service, as detailed in graph 11.15. It is not clear from the data if the classification is based on referrals from the police, or if this relates to how Victim Support classify the cases they are supporting; there may therefore be some cases detailed as harassment when they are examples of stalking behaviour.



11.10. Gaps in provision and future developments

Perpetrator services

As with the previous needs assessment, there remains a gap locally in perpetrator interventions for stalkers. Commissioning such interventions has not been possible due to a lack of local funding and fully evaluated programmes for local consideration.

The Multi-Agency Stalking Intervention Programme (MASIP), being led by the Suzy Lamplugh Trust¹¹⁹, model appears to be a promising approach in this space and would align well with the existing stalking hub model and ISAC service in Gloucestershire, but funding sources would need to be sought in order to consider implementation.

Clear pathways of support

At present, victim services for stalking are provided by a range of different providers based on risk level. This can be confusing for victims who wish to access support. There is a need to ensure awareness raising about local service provision is clear and that services work well together to ensure victims receive the correct support.

Training and awareness

There have been significant awareness campaigns for stalking rolled out across the county in the last few years. These campaigns have, however, focused primarily on domestic abuse related stalking.

¹¹⁹ [Multi Agency Stalking Intervention Programme \(MASIP\) | Suzy Lamplugh Trust](#)

Whilst this aligns to national prevalence data that tells us stalking is most likely to be perpetrated within a domestic abuse context, it is important to ensure awareness raising goes beyond this so all victims of stalking can identify this behaviour and know the reporting and support routes available.

In addition to this, training on stalking across the county has primarily focused on policing and there is therefore a need to ensure a broader range of professionals can identify and respond to stalking effectively.

The gaps in training should be fulfilled via the new ISAC contract.

Data collection within support services

There are a range of gaps currently in the data collection from the ISAC service, primarily relating to demographic information and risk level changes within the service. To understand need and the impact of the service, it would be useful for data collection processes to be improved for future needs assessments.

12. So-called Honour Based Abuse (HBA) and Forced Marriage (FM)

12.1. Prevalence of HBA/FM

So-called Honour Based Abuse (HBA) 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 (FM), defined as:

'A forced marriage is where one or both people do not or cannot consent to the marriage and pressure or abuse is used to force them into the marriage. It is also when anything is done to make someone marry before they turn 18, even if there is no pressure or abuse.'

Forced marriage is illegal in the UK. It is a form of domestic abuse 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*
- *Financial abuse: for example taking someone's wages, may also be a factor.'*¹²¹

The prevalence of HBA and FM is thought to be extensive in both the UK and worldwide, however, data is limited when compared with that available for domestic abuse and stalking. Whilst research is clear that domestic abuse is an underreported crime, HBA and FM are thought to be further underreported, with a number of barriers preventing victims from coming forward, including the risk of reporting further triggering the HBA and the conflict a victim may feel with regards to reporting their family and community to the police¹²². In a 2017 Safe Lives' Spotlight Report¹²³ 47% of victims were in a current relationship with the perpetrator, compared with 29% of those not identified as at risk of HBA, and 15% of victims seen by the FM Unit were below 16, highlighting the fear the victim might feel in leaving their family units¹²⁴. A more up to date report has not yet been produced.

Data from Police Forces in England and Wales (excluding Devon and Cornwall)¹²⁵ shows in the year ending March 2024 there were 2,755 offences involving so-called HBA recorded. This was a decrease of 8% compared to the previous year and ends an ongoing upward trend that has been in place since 2020. Of these offences, the majority (20%) were recorded as 'controlling and coercive behaviour' with a further 14% recorded as 'assault with injury'. This is a notable change from the year ending March 2020 where the highest recorded offence was 'assault without injury' (28%), indicating a possible escalation in the seriousness of these offences. A full summary of the offences is shown in graph 12.1. below.

¹²⁰ [Statistics on so called 'honour-based' abuse offences, England and Wales, 2022 to 2023 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/statistics/statistics-on-so-called-honour-based-abuse-offences-england-and-wales-2022-to-2023)

¹²¹ [Forced marriage - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/statistics/forced-marriage)

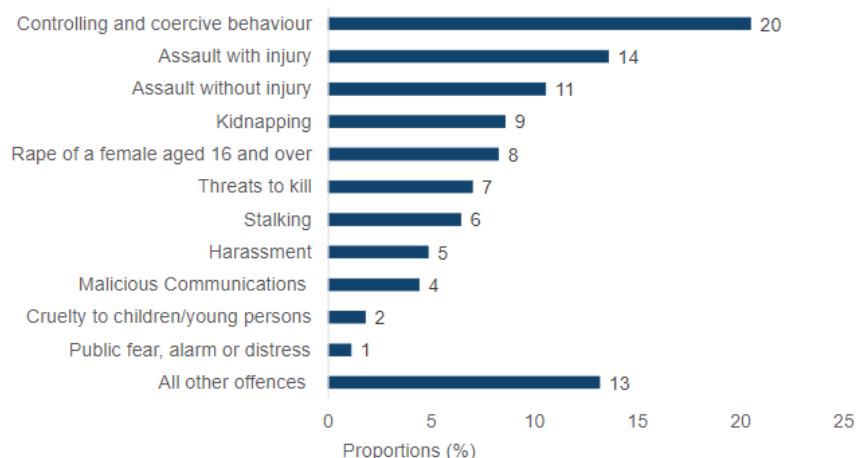
¹²² ['Honour'-based violence and forced marriage spotlight - SafeLives](https://www.safelives.org.uk/reports-and-publications/honour-based-violence-and-forced-marriage-spotlight)

¹²³ [Your-choice-Spotlight-on-HBV-and-forced-marriage.pdf \(safelives.org.uk\)](https://www.safelives.org.uk/reports-and-publications/your-choice-spotlight-on-hbv-and-forced-marriage)

¹²⁴ [Your choice | HBV and forced marriage - SafeLives](https://www.safelives.org.uk/reports-and-publications/your-choice-hbv-and-forced-marriage)

¹²⁵ [Statistics on so called 'honour-based' abuse offences, England and Wales, 2022 to 2023 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/statistics/statistics-on-so-called-honour-based-abuse-offences-england-and-wales-2022-to-2023)

Graph 12.1. Proportion of offences involving so called 'honour-based' abuse recorded by the police, by offence category, England and Wales, excluding Devon and Cornwall, year ending March 2023



There was a decrease of 2% of so-called HBA incidents recorded by the police.

It is important to note that police data is reliant on individual officers and staff identifying the offence as so-called honour based abuse 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. It is also important to bear in mind that many incidents will not be reported to the police due to the possible community stigma victims could come under.

With prevalence data so limited, specialist charities such as Karma Nirvana¹²⁶ provide vital information and data to aid in the understanding of these crime types and their impact¹²⁷:

- In the year ending March 2023, Karma Nirvana supported 2,346 victims, 50% of whom were experiencing HBA
- 536 victims (23%) experienced and were threatened FM
- 328 victims (14%) were facing immediate risk of FM
- 914 victims (39%) had already fled from HBA
- 441 of victims did not have English as their first language
- 64% of victims felt that fear of repercussions from perpetrators prevented them from disclosing the abuse
- 1,883 callers reported who their perpetrators are and 49% of those were identified as their partner
- 83 cases were subjected to HBA due to their sexuality and/or gender identity

In addition, due to the criminalisation of Child Marriage, March 2023 saw a surge of 392 incoming calls, the highest in any month¹²⁸ in the year ending March 2023.

12.2. Local Approach

HBA and FM have both been areas of Violence against Women and Girls (VAWG) that have strategically been considered under the Domestic Abuse Local Partnership Board and Strategy for 2021-2024. This has resulted in HBA and FM being embedded into the revised training pathway for

¹²⁶ Karma Nirvana are a national specialist charity that provides support to victims of 'honour' based abuse, forced marriage and other harmful traditional practices. They also provide training to professionals.

¹²⁷ [National Helpline – Karma Nirvana](#)

¹²⁸ [KN DoM23 DataSheet.pdf \(pcdn.co\)](#)

the county, with the aim of upskilling professionals to identify and respond effectively to these crime types, as well assuring awareness raising plans have been embedded into the partnership communications strategy.

HBA and FM will remain a part of the 2025-2028 strategy.

12.3. Service Provision

Honour Based Abuse and Forced Marriage are areas where the victim can receive support from GDASS as a form of domestic abuse. In order to support victims of HBA/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 HBA/FM by allowing vulnerable high risk victims to be housed safely. The Stroud Beresford Refuge has also supported those seeking a safe space and support as a result of HBA/FM.

12.4. HBA/FM crimes in Gloucestershire

Data on HBA/FM is currently limited and has only recently been tagged separately on police systems (outside of the general domestic abuse tag). As such, the use of the tag is still relatively new, and it is therefore unclear if the limited data represents underreporting or under recording.

Over a 3 year period, 2021/22-2023/24, less than 5 crimes of forced marriage have been tagged. Over the same time period, 31 crimes have been tagged as HBA, all of which were in 2023/24, most likely indicating when the tag was being utilised more fully. Of those crimes tagged as HBA, 13 were crimes under the coercive and controlling legislation. Other crimes included stalking, threats to kill, actual bodily harm, grievous bodily harm, strangulation and rape (due to low numbers, data has not been included to avoid identification of victims).

The below data will therefore only consider the 31 crimes tagged as HBA related in 2023/24.

- The majority were recorded in Cheltenham (45%) and Gloucester (52%), but offences were also recorded in Stroud and Tewksbury.
- 57% of victims were recorded as Asian, with a further 32% not having their ethnicity recorded.
- 27% of victims were recorded as aged 25-34, followed by 22% aged 16-24. The youngest victims are recorded as aged 10 or under, accounting for 11% of victims.
- 81% of victims were recorded as female and 5% male (with remaining victims not having their gender recorded).
- 53% of perpetrators were recorded as Asian, with 30% not having their ethnicity recorded.
- 26% of perpetrators were recorded as aged 25-34, a further 26% aged 35-44.
- 81% of perpetrators were recorded as male, with 16% female (with remaining perpetrators not having their gender recorded).

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 HBA/FM. The low levels of reporting may be an indication of a need to raise awareness of HBA/FM locally and look to improve community engagement to encourage reporting into existing services. Ongoing community engagement and service user consultation will also support the development of existing services to ensure they can appropriately respond to HBA/FM.

13. Child to Parent Abuse (CPA)¹²⁹

13.1. Prevalence of CPA

Child to parent abuse continues to be an emerging type of domestic abuse, gaining greater national recognition, as confirmed in the 2023/24 national consultation around its definitions, the results of which are still awaited¹³⁰. It is hoped that the consultation will lead to a legal definition (which currently does not exist) of this type of abuse as well as provide universal language and expectations around its existence. As these results are still awaited, a consistent and informative picture of CPA nationally and locally is hard to obtain.

Parents who report being abused by their children indicate that they experience many of the same types of behaviours as detailed in domestic abuse, such as: physical abuse; emotional abuse; psychological abuse; financial abuse and; sexual abuse. Notably though, there are elements of CPA that are more impactful due to the nature of the parent-child relationship. These include: verbal abuse; abuse towards pets; neglect; technology enabled abuse and; damage to property or causing financial harm to parents (such as deliberately obtaining fines the parents would have to pay).¹³¹ CPA aims to shift the parent-child power dynamic, taking power from the parent not just in the relationship with the child but socially, economically and legally¹³².

Estimates continue to suggest that up to 10% of families in the UK are experiencing CPA today¹³³, however, due to the parental reluctance to report (and therefore possibly criminalise their child)¹³⁴, this is likely to be an underestimate and as there is 'currently no population-level data on CAPVA (*Child and Adolescence to Parent Violence and Abuse, also known as CPA*)... there is little understanding of how prevalent is it in the general population of the UK'¹³⁵.

CPA charity Parental Education Growth Support (PEGS), which supports the parent victims of CPA nationally, provides the following information on CPA¹³⁶:

- 25% of parents supported indicate that the behaviour starts before the age of 6.
- 10% of parents supported continue to be the victim of abuse after the child has turned 18.
- Almost 20% of parents are physically attacked by their child every day, and a further 33.33% at least once a week.
- Violent behaviour is not limited to the parents and can be directed towards other children living in the home.
- Almost all parents supported have had to change their regular routine due to the abuse.
- 70% of parents supported had to reduce their working hours or leave work altogether.
- 40% of parents didn't feel able to keep their family safe.
- At least 55% of parents supported reported no previous experience of abuse.

Due to the number of referrals PEGS are receiving from Gloucestershire, they have requested additional funding to support their work. A separate piece of research that explores approaches to CPA has been developed for the Domestic Abuse Local Partnership Board. The partnership will

¹²⁹ Section produced by Hannah Ouston, Domestic Abuse and Sexual Violence Programme Assistant

¹³⁰ Consultation details can be found here: [Defining child to parent abuse - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/consultations/defining-child-to-parent-abuse)

¹³¹ DAC, (2024), p. 14

¹³² Holt, A., (2013), p. 87

¹³³ Baker, V., and Bonnick, H., (2021), p. 1

¹³⁴ Holt, A., (2013), p. 31

¹³⁵ Baker, V., and Bonnick, H., (2021), p. 5

¹³⁶ [Identifying & Understanding Child to Parent Abuse | PEGS Support \(pegsupport.co.uk\)](https://www.pegssupport.co.uk)

consider the findings and the local approach to CPA will be incorporated into the county Domestic Abuse Strategy 2025-2028 and its delivery plan.

13.2. Local Approach

CPA was taken into consideration in the Gloucestershire Domestic Abuse Strategy 2021-2024 and received attention in the delivery plan: *(176) Research best practice approaches for addressing CPA*. This report is in the process of being reviewed by the DA Local Partnership Board (LPB) prior to publication, and contains recommendations for improving and consolidating the county understanding and support of CPA. These are listed in section 13.5.

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.

Restorative Justice Gloucestershire (RJ) work with families experiencing CPA, and receive most of their referrals from the Child First Panel. Restorative Justice attempts to:

- Involve all parties in a dispute (including victims/survivors, perpetrators and witnesses)
- Provide an agreed resolution to the harm caused to the victim
- Encourage offenders to take responsibility for their actions
- Encourage reconciliation and discourage further harm

In Gloucestershire, cases of CPA are discussed in a panel including GDASS before being referred to Restorative Justice to ensure that they are suitable for referral and not at risk of causing further harm. CPA is not specifically recorded as such, therefore data around this is uncertain. Cases are reviewed by a panel with FearFree (the local perpetrator programme providers) and GDASS (Gloucestershire Domestic Abuse Support Service) to ensure they are suitable and safe for restorative practice.

FearFree provides the current perpetrator programme in Gloucestershire, and anecdotally CPA does not occur commonly within their service, partly due to the fact that they do not work with under 18s.

The Safe Teenage Relationship Education and Empowerment Team (STREET) provides support to young people aged 13-19 who are experiencing or demonstrating harmful relationship behaviours/domestic abuse. Support for young people in relation to their harmful relationship behaviours includes when those behaviours are displayed in their familial relationships. STREET can support young people aged 13-19 who have been assessed as a standard-medium risk as well as young people aged 13-15 who have been assessed as high risk. Support to parents experiencing harm from their child is outside of the scope of the current STREET contract.

PEGS supports victims of CPA with services that include: virtual drop-ins; peer support groups; Empowering Parents in Crisis (EPIC) sessions; 1-2-1 support and; bespoke workshops. They have received local funding to provide training to professionals in Gloucestershire on identifying CPA and support available.

Young Gloucestershire do not currently log CPA explicitly. They have provided support to parents in the form of therapeutic parenting skills, and to young people displaying harmful behaviours by referring them to The Haven Centre where they attend the 'Three steps to Connect in Gloucestershire' programme which is based around RESPECT. Young Gloucestershire also run a programme entitled 'Hidden Victims', where the family of an incarcerated individual receive both

practical support and therapeutic interventions. This programme could be utilised as an early intervention for high risk young people who might turn to harmful behaviours. Anecdotally, Young Gloucestershire would benefit from internal training around CPA identification in order to upskill their workforce.

13.4. CPA crimes in Gloucestershire

The police do not record CPA with a specific tag and at this time it is not possible to identify the specific relationship between the perpetrator and the victim.

In 2023 there were 10,617 domestic abuse crimes. Using the percentage of CPA crimes confirmed by GDASS, it would be reasonable to assume that 10% of these (n = 1062) could be CPA. This would however only cover cases that meet the statutory definition of domestic abuse, and as such, only consider cases where individuals were aged 16+; likely missing a significant proportion of CPA that would not be tagged as DA domestic abuse

More specifically, 2608 domestic abuse crimes were identified where the link between the offender and the injured party was 'familial', but this relationship cannot be broken down further, so it is uncertain whether this relates to a parent or siblings or child.

In 2023, there were 450 crimes with a domestic abuse tag where the suspect/offender was under 16. At this time, cases where offenders are under 16 should not be recorded as domestic abuse, therefore a review of these crimes to see whether they are genuinely CPA or whether they have misreported perpetrators would be valuable. The concern around the accuracy of the data is due to the fact that in 2023 there are 709 victims of domestic abuse identified as being under 16, but children as witnesses of domestic abuse are not currently being recorded as victims in the police system, and any child being abused by their parent should have their crime recorded as child abuse, not domestic abuse. Until these discrepancies are resolved, it is not possible to conduct further analysis on the police figures.

PEGS have previously provided awareness training around CPA in Gloucestershire, and as a result have received 150 referrals into their service in 2023. Due to the training they have provided in Gloucestershire, PEGS have indicated that the level of referrals they are currently receiving is unsustainable without receiving additional funding. Further funding for the training they provide has recently been approved through the Serious Violence Duty funding, indicating that the problem will continue to grow and therefore ensuring appropriate local support structures remains vital.

In the year 2023, GDASS had 597 referrals where the relationship to the perpetrator was identified as 'family – child'. This made up 10% of their total referrals. An additional 162 (3%) of referrals were for 'family – extended' and could include abuse perpetrated by grandchildren, but more specific data would be difficult to extrapolate. All alleged perpetrator types are for children over the age of 16. The majority of these cases sit within the IDVA teams or the helpdesk.

From September 2023, Restorative Gloucestershire had 3 cases of CPA, two of which were adult child to parent abuse. They have already had two cases in 2024, one of which is adult child to parent abuse. As the sample is small and the time period limited, it is difficult to make any assumptions as to the prevalence of CPA within Restorative Gloucestershire.

13.5. Gaps in provision and future developments

Following on from the report on CPA produced for the DA LPB, the following recommendations have been made, but are currently awaiting approval:

DA LPB

- DA LPB to agree where ownership for the CPA agenda best sits in terms of agency ownership to drive forwards this work (giving consideration to Children's Social Care and Early Help as lead agencies due to their likely involvement in the delivering of any interventions).
- DA LPB to form a working group, led by the CPA owner and to include commissioners, to consider options in addressing CPA moving forward, including local response, referral pathways and clear guidance creation.

CPA Working Group

- Members of working group to read full CPA report and consider its recommendations.
- Commissioners to explore options for funding of a CPA intervention, and consider funding opportunities for evaluation of any intervention.
- Commissioners to consider possible interventions and a tendering process for introducing one into Gloucestershire being mindful of limited evaluations of existing programmes. Consideration should be given to the possible value a Junior MARAC may add to the county response.
- Consider the production of guidance similar to that here in order to provide all agencies with a supportive framework on how to respond to CPA.
- Should the introduction of a specific CPA intervention not be possible, CPA working group to consider existing local options to ensure clear guidance for practitioners on where to refer into, taking into account the financial issues PEGS have come across as a national service, and therefore not recommending that all referrals go to PEGS (unless local funding is provided).
- Adopt a standardised CPA risk assessment tool to be used across Gloucestershire agencies
- Develop a local pathway for CPA for both victims and children displaying harmful behaviours
- Once pathways for support have been agreed, run a public media campaign raising awareness of CPA and the options for support, both local and national

Commissioning

- GCC commissioning to co-ordinate a multi-agency commissioning meeting to discuss the potential funding of support services for child to parent abuse and give consideration to the current position of PEGS providing support to local families without a local funding offer.
- Consider further funding of PEGS' awareness training in order to support Young Gloucestershire,
- Consider whether Young Gloucestershire could utilise their Hidden Victims programme to provide early intervention for young people at risk of displaying harmful behaviours

Early Intervention

- GHLL¹³⁷ to consider how to embed early intervention into domestic abuse education in schools.

¹³⁷ <https://www.ghll.org.uk/>

- GHLL to give consideration to a specialist CPA worker in schools to help provide support to the professionals supporting children exhibiting harmful behaviours.

Restorative Gloucestershire

- Continue the good practice demonstrated by Restorative Gloucestershire as the specialist Restorative Justice provider.

14. Consultation

A key aim of the Gloucestershire Domestic Abuse Local Partnership is to ensure that the work of the partnership is informed by those with lived experience. Ensuring both the partnership strategy and delivery plan tackles the issues raised by those who have experienced domestic abuse.

In order to support this, the partnership has appointed a Domestic Abuse and Sexual Violence Consultation Officer, whose role ensures the voice of survivors is regularly represented at all partnership meetings and within individual projects, as well as building a consultation network to engage across the whole of Gloucestershire's communities.

As part of the 2024 needs assessment, a request was made to conduct a bespoke piece of consultation that would ensure the new county Domestic Abuse Strategy 2025-2028 is informed not only by local need, but by what survivors and the community tell us need to be the partnerships priorities over the next 4 years.

The below provides a summary of this consultation conducted by Dani Kilkenny, the Gloucestershire Domestic Abuse and Sexual Violence Consultation Officer. A full report on the consultation will be provided to the Domestic Abuse Local Partnership Board.

The aim of the consultation was to gain a picture of the lived experience of domestic abuse within Gloucestershire to:

- Understand more about the impact of domestic abuse locally;
- Understand people's experience of trying to access, receive or offer support;
- Learn about the barriers and challenges to getting the support that is needed.

The consultation invited victims/survivors, perpetrators, professionals working with those impacted by domestic abuse and communities (impacted by domestic abuse for example via a family member, friend, colleague, neighbour, faith group) to complete an online survey.

The consultation was heavily survey based due to the wanting to a reach a large number of people, with a broad range of experiences, living across the county and to understand the complexities of domestic abuse and the impact for people living in the county. Focus groups were also held to allow a more detailed exploration of both victim/survivors experiences and professionals' roles and involvement in offering support.

The surveys were shared through the Local Domestic Abuse Partnership Board, via local specialist support services, on social media, with the Domestic Abuse and Sexual Consultation Network, along with a number of local partnerships and networks. The survey was completed by 272 victims/survivors, 95 professionals, 50 members of the community and 1 perpetrator. Having only 1 perpetrator survey completed made it difficult to gain an insight into the broad experiences of those who have used harmful behaviours so they have not been included in this survey. This will be revisited at a later date to consider how perpetrator voice can be gathered and used to influence the response to perpetrator interventions in the county.

Throughout this report victims/survivors refer to those with lived experience of domestic abuse. The term perpetrators refers to those who have used harmful, physical and/or emotional behaviours towards a partner or family member.

The below provides a summary of the consultation findings, key points and themes about the current response to domestic abuse in Gloucestershire and the considered needs for future work in the county. The themes are interrelated and there are overarching themes across them all; effective

risk assessment was a key trend through several themes and demonstrates the need for an informed and supportive response to domestic abuse.

Theme 1: Victim Focused Support

The below findings from the consultation identified a need to consider support locally that is victim focused. Recognising the needs of individual victims and ensuring support is able to respond effectively to those needs'.

“something that says ‘you are seen’”

- **Longer term support** – What happens next following initial support offer? Step down support, support that is not timed limited, ongoing support and where clients can be signposted when this comes to an end.
- **Validation** of abuse, feelings and experiences – understanding emotions and recognising abuse traits and behaviours
- More recognition for **economic abuse** and the significant financial implications for victim/survivors when leaving an abusive relationship, your home and belongings
- **Practical help** including financial support – for example, money to rebuild lives, food vouchers, clothes, furniture, benefits advice
- Victim/survivors need to be **listened to and believed**
- Victims/survivors to have an **assigned worker** rather than be passed between workers
- **Personalised support** – reflective of an individual's own recovery, received when a person needs the support and have their needs prioritised.

Theme 2: Specialist domestic abuse support

The below findings from the consultation identified the demand on specialist services; the need for support to be tailored to the client's needs, consideration for the factors impacting engagement and ensuring specialist domestic abuse support is accessible.

- **Broader, more accessible service offer** to more groups – men, ethnic groups, complex needs, those with disabilities, LGBTQ+, children. Consideration for support in all districts
- Access to support to **not always be determined by risk** – support at standard and medium risk, help to understand domestic abuse and earlier intervention
- Trauma informed and **therapeutic recovery support** – The current offer has referral restrictions due to funding. Professionals would like to see more Eye Movement Desensitisation and Reprocessing (EMDR) offered in Gloucestershire. Victims and survivors wanted domestic abuse trained counsellors and local counsellors that understood cultural issues in relationships

- **Gaps in programmes** available - Survivor led groups, child to parent abuse, stalking, familial abuse
- **Engagement policy** – more time given to clients to engage, more **flexible approaches** to engagement needed
- **Reduced waiting times** – for services, court processes and quicker police response times
- **More staff** – IDVAs and Specialist IDVAs. Many specialist teams are being impacted by high demand and the need to support clients for longer periods of time due to delays in the criminal justice system. Current co-located teams should also be available across the whole county.
- **Single point of contact** for all agencies – One hub dealing with all aspects of domestic abuse support. In-house resources to support with social care involvement, mental health and health support. Clear pathway to support and understanding of what **services can offer**

Theme 3: Professional response

The below findings from the consultation identified the merit of multi-agency working and the need for it when supporting the complexities of domestic abuse. Professional response can lead to identification, disclosure and/or engagement with support.

'Challenges arise when a worker does not understand the complexity and impact of domestic abuse'

- Informed, **well-trained** professionals
- Robust **risk management** - Support around safety planning, improved management and response to breach of bail
- **Safer environments** - To speak with victims/survivors but also so they are inviting and allow private requests and disclosures. For example, consideration for reception areas
- Considered **contact methods** – not using withheld number
- Improve the **MARAC** process to ensure effective risk assessment
- Better joined up working between services - **Effective partnerships** were considered a real strength with co-location enhancing this further
- A **consistent approach** to the support received
- Consideration of **language** used – **Avoid victim-blaming**
- **Improved social care processes** to support families experiencing domestic abuse – identification, response and responsibility

- **Changes in law** to better protect victims/survivors and their families including improvements to existing laws to ensure police are better supported in protecting victims/survivors, for example, easier processes for securing protective orders
- Professionals recognised amongst their peers that there was a reluctance to ask questions or challenge behaviours with people from a different ethnic background due to concerns of being **culturally insensitive**
- Key challenges to multi-agency working that were documented were agencies **working in silos** and not having the **knowledge** needed around domestic abuse, and agencies having **differing objectives**

'Support to enable them to inform someone and to be able to keep safe'

'For some they need immediate advocacy to enable and empower them when they report'

Theme 4: Housing

The below findings from the consultation identified the demand on housing services, the complex nature of domestic abuse and fleeing your home and the impact it can have on multiple areas of your life. The importance of the response and support available from housing services was apparent and housing services need to be fully supported to achieve this.

- Access to **more housing** and safe accommodation options
- Less focus on victim/survivors having to '**evidence**' their abuse
- **Specialist emergency housing and support**, such as specialist refuges for people with multiple and complex needs, for example, mental health conditions, drug or alcohol dependency, and disability
- Better support for people with **No Recourse to Public Funds (NRPF)** - Limited knowledge and information available for immigration support. Difficultly with frequent changes in information. Somewhere to answer questions and seek advice
- **Support** once in temporary or new accommodation for victim/survivors so they can be supported to navigate their recovery in a new environment
- **Improved processes** - Ensure more suitable temporary accommodation options are offered, providing adequate facilities, that support victims/survivors to feel safe
- More awareness that often victims/survivors have little or **no money** when they flee and may have their **children** with them, their **pets** might need to stay with them or be rehomed
- More **consistency between districts** – evidence required and availability of support.

Theme 5: Awareness raising and training

The below findings from the consultation identified a need for an improved knowledge and understanding of domestic abuse to support early identification and intervention, and therefore improve the response to domestic abuse. There was a call for learning opportunities to be easily accessible, consistent and offered widely across all districts, ages and sectors.

- Improved **knowledge and understanding** around domestic abuse – better education, working with schools, colleges and universities
- Challenging **societal views** and awareness raising
- Enhanced training offer – A **clear training pathway**, mandatory training, reaching a broad range of professionals. This to include navigating the Criminal Justice System, a better understanding of the law and an awareness of victims/survivors rights

It was also noted that awareness raising and training supports identification and challenge regarding domestic abuse, whilst this is positive, in turn it also means more people are trying to access support from services that are already in demand.

Theme 6: Religion and culture

The below findings from the consultation demonstrated the importance of understanding domestic abuse within different cultures and religions to improve the identification of and response to abuse, to safely manage risk and ensure accessibility to services and support.

‘Recovery and trauma support from a cultural and religious lens’

‘I have never seen anything in my language anywhere. I feel that victims like myself who face multiple barriers are not seen or heard.’

From a cultural perspective, victims/survivors shared that they did not feel this was understood by professionals and that there was a lack of ‘cultural competence’. There was a call for better understanding around religion and culture, in relation to the abuse itself but also the impact of the abuse. Honour Based Abuse is **‘layered’**:

- women will **stay** in abusive relationships to protect the name/**honour** of their wider family from the **‘stigma’** and **‘shame’** of separation and divorce
- **multiple** perpetrators
- **family members** who are abusers - an attitude that ‘we went through it’ (**normalising** and accepting the abuse), financial abuse from **in-laws**
- **male and female** abusers
- male abusers seeing the behaviours **as their right**

- **colourism** towards individual family members, often female, and mothers with regards to the colour and darkness of their children's skin
- Victims/survivors are **conditioned**, can blame **themselves** and receive pressures from their community to not disclose or following disclosure
- It can be difficult to know who to confidentially speak to within your own community
- Men from minority ethnic groups need to be reached too – for those experiencing domestic abuse but also to offer an education input about domestic abuse.
- Religious abuse support is needed and it needs to be nurturing.
- Cultural education was considered to be a priority both in schools and within the police force, 'we need to start educating at the top'.

Theme 7: Increased support for perpetrators

The below findings from the consultation identified a need for a robust offer of support for perpetrators that meets demand, meets the needs of perpetrators and carefully assesses risk.

Professionals reported that the county's support provision for perpetrators of domestic abuse was not sufficient for the level of need and shared views of what was needed to improve support but also further safeguard victims/survivors.

- Consideration of **language** used, for example, when labelling individuals as perpetrators and whether this impacts on their behaviour change
- **Accessibility of services** – not accessible when in 'private proceedings' (likely to be civil and family court) or when there are bail conditions in place
- Potential **escalation** of abuse post-support
- Insufficient **risk management** as a result of the above two points
- The need for perpetrators to first **recognise their behaviours** as abusive
- **Insufficient services** for perpetrators – A lack of funding and resources for perpetrator support and a need for therapeutic support and counselling for perpetrators. Additionally many professionals stated they did not know what support was available for perpetrators

Overall Summary

These findings give real insight into people's experiences of domestic abuse in Gloucestershire. They allow the partnership to understand in more detail where it can develop support and services, where some of the gaps in provision are and to learn what it can do to improve the response to domestic abuse across the county.

The findings from the consultation will be considered in more detail by the Domestic Abuse Local Partnership Board and will help shape the Domestic Abuse Strategy 2024-2028 and define activity in the delivery plan to implement the strategy.

15. Conclusion and areas for 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 that adhere to 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
- Clear pathways to support and partnership working
- Perpetrator responses

Whilst the county response to domestic abuse is well coordinated, with clear positive provision in place, there are key areas for development that have been identified in this needs assessment that provide a focus for the Domestic Abuse Local Partnership Board in its development of the countywide strategy for 2025-2028 and the delivery plan to implement the strategy.

15.1. Overarching areas for development

Ongoing improvement of police response to domestic abuse

Consistent training for all professionals

Awareness raising that improves knowledge and understanding but also challenges societal attitudes

Consider the response to victims of domestic abuse who present with experiences of multiple disadvantage

Domestic abuse and wider deprivation and societal inequalities

Response to victims from underrepresented and protected characteristic groups

Early identification and intervention

Place based approach to addressing domestic abuse, recognising the diverse communities across the county

Domestic abuse and suicide risk

15.2. Thematic areas of development

Accommodation Based Support	<p>Exploring opportunities to increase the Target Hardening and Sanctuary Scheme during recommissioning</p> <p>DAHA Accreditation¹³⁸</p> <p>Improve consistency in responses from homeless services across the county</p> <p>Whole Housing Approach¹³⁹</p> <p>Increase capacity of DA safe accommodation</p> <p>Development of services that overcome barriers related to:</p> <ul style="list-style-type: none"> - no recourse to public funds (NRPF) - experiences of multiple disadvantage - specialist support for protected characteristic groups <p>Provision of move on accommodation</p> <p>Furthering collaborative work with neighbouring authorities on the Managed Reciprocal Scheme</p>
Community Based Support	<p>Capacity within services: broadening the range of support offered e.g. more group work programmes, system focus to consider ways to improve overall response to victims accessing services and support, e.g. quicker police response times.</p> <p>Exploration of options for longer term/step-down support that is victim focused, with increases in practical support</p> <p>Increased focus on economic abuse</p> <p>Considerations for the development of a community-based therapeutic support offer</p> <p>Increasing referrals from multi-agency partners across the system</p> <p>Engagement with protected characteristics and a focus on cultural sensitivity of services</p> <p>Consideration of 'By and For' Services</p>
Perpetrators	<p>Ongoing awareness raising of available perpetrator interventions</p> <p>Ongoing roll out of the MATAC model (and future funding to support this)</p> <p>Development of an out of court disposal model</p> <p>Continued development of PRG and ensuring accessibility of services</p>
Children and Young People	<p>Therapeutic support to children and young people witnessing domestic abuse at home</p> <p>Trauma informed, child-led approach that provides holistic support to children</p> <p>Increase capacity for specialist domestic abuse support for children and young people, including considerations for broadening the scope when recommissioning the existing 13-19 offer (currently STREET), and exploring the needs of children witnessing DA in the home.</p> <p>Development and oversight of Operation Encompass</p> <p>Training for professionals on domestic abuse and the impact on children and young people</p> <p>Increased public awareness of domestic abuse and impact on children and young people</p>
Vulnerable Adults	<p>Improved understanding of links between domestic abuse and adult safeguarding</p>
Stalking	<p>Development of stalking perpetrator services</p>

¹³⁸ <https://www.dahalliance.org.uk/membership-accreditation/what-is-daha-accreditation/>

¹³⁹ <https://www.dahalliance.org.uk/innovations-in-practice/whole-housing-approach/what-is-the-whole-housing-approach/>

	Clear pathways of support reflecting the change in service provision from 2027
	Increased training and awareness of stalking
Honour based abuse/forced marriage	A need to improve local understanding
	Increase community engagement that aims to reduce stigma of reporting
Child to parent abuse (CPA)	Agree ownership of CPA agenda strategically
	Review local provision and consider options to address gaps
	Consideration around full pathway for CPA including risk assessment, support services and training

Appendices

Appendix 1: In Search of Excellence CCR Local Assessment

In Search of Excellence: The Coordinated Community Response

Gloucestershire Assessment

Review November 2024

(This assessment will be reviewed annually)

Component	Gloucestershire's Position
Survivor engagement and experience -Are a diverse range of survivors' voices heard within the partnership? -Is survivor engagement safe and trauma-informed? -Is there a system and process for embedding the experience of survivors into the CCR?	A DASV Consultation Officer has been in post since June 2022 and the sole purpose of this role is to ensure survivor voice is represented at all levels of the partnership response to domestic abuse. A consultation plan has been developed and a Consultation Network has been established (and continues to evolve and grow) which reflects a diverse range of service user voices as well as community groups in the county. This approach ensures that all activity from the multi-agency DA LPB is driven and informed by the service user experience and addresses a number of actions identified in the DA delivery plan. This activity aims 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. Specific consultation activity (using a variety of consultation methods) has also been undertaken to support commissioning decisions and to inform the development of the new county DA strategy for 2025-2028. The consultation work takes a trauma informed approach that ensures the safety of survivors that engage with the work and there are clear processes and procedures governing this work.
Intersectionality -Do all members of the partnership have an understanding of intersectionality and how it relates to the experiences of survivors? -Is intersectionality a genuine strategic priority? - Does your CCR include a wide range of communities?	The local needs assessment and DA strategy considers intersectionality and local needs and the consultation network will ensure a wide range of communities and service users are able to feed into our local approach on a regular basis. There is a need highlighted locally however to improve engagement across a wide range of communities and improve the approach to intersectionality. Commissioning approaches in the county take an intersectional approach.
Shared vision and objectives -Is there a shared vision?	The DA LPB developed and approved the Gloucestershire DA Strategy 2021-24 which outlines a shared vision, priorities and objectives to address

<ul style="list-style-type: none"> -Can partners name the objectives? -Do they recognise the need to collaborate on equal terms? 	<p>domestic abuse in Gloucestershire. The strategy is currently being developed to cover years 2025-2028. This strategy will be taken to the various partners' governing bodies e.g., local authority cabinets, strategic boards, to ensure they are informed of the content, endorse its priorities and objectives, and share the vision of this document.</p> <p>A local delivery plan is developed following this to ensure all partners are aware of the collective objectives and how the strategy will be jointly delivered. The DA LPB will prioritise shared ownership of the delivery plan and will look to take a thematic approach for the new strategy to ensure clear collaboration and shared delivery.</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>Structure and governance</p> <ul style="list-style-type: none"> -Do all partners understand the governance structure? -Does the governance structure allow for challenge from smaller agencies? -How do you know that the structure is effective? 	<p>The DA LPB provides a clear governance structure and is made up of 3 groups/tiers: Strategic, Operational and Consultation network. 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 DA LPB also reports up into Safer Gloucestershire as part of its governance arrangements.</p>
<p>Strategy and leadership</p> <ul style="list-style-type: none"> -Do the strategic objectives of the partnership and the action plan include prevention and early intervention alongside high risk responses? -Are all statutory agencies aware of their responsibility to deliver multi-agency responses effectively as well as the specialist sector? -Does your strategy incorporate an intersectional, gendered, survivor-led and trauma informed approach in its strategic aims and delivery? -Do you have a VAWG / DA Strategic Lead / Coordinator to support the effective delivery of the strategy? 	<p>The previous County DASV strategy was in place from 2014-2018. The strategic objectives within that strategy were all met. This included work on prevention and early intervention.</p> <p>The Gloucestershire DA Strategy 2021-24 was developed collaboratively with the DA LPB membership and reflected on both national priorities, local need and service user engagement. Local priorities were identified as:</p> <ul style="list-style-type: none"> - Prevention and Early Intervention - Multi-Agency Working and Pathway Development - Workforce Development - High Quality Service Provision - Working to Break the Cycle of Perpetrator Behaviour

<p>-How is the learning from your local Domestic Homicide Reviews (DHR) embedded in your local strategy?</p>	<p>The strategy is currently being refreshed for 2025-2028 and the priorities will remain unchanged, but with refreshed outcomes and actions to support the implementation of the strategy.</p> <p>Our local strategy ensures we are able to meet the requirements as set out in the Domestic Abuse Act 2021, the DA statutory guidance, National DA strategy as well as the national VAWG strategy.</p> <p>The local needs assessment has highlighted local areas for development which include; 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 have local DA dedicated commissioning leads that are also fully involved in the delivery of the strategy.</p> <p>Learning from Domestic Abuse Related Death Reviews (formerly 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>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>There was a domestic abuse joint commissioning framework 2018-2023 in place which ensured the provision of specialist domestic abuse services for the county. The framework covered 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>This framework has now come to an end, the LPB have decided not to re-establish a framework as good partnership arrangements for the commissioning of DA services has been established. The continuation of the joint commissioning arrangements will be continually reviewed by the LPB.</p> <p>As a county we have funded commissioning activity across the DA agenda for a number of years and are committed to sustaining this, 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 DA Strategy has identified current gaps in provision and outlines plans for addressing these in the future.</p>

	<p>Our local strategy clearly outlines the role of statutory organisations in supporting survivors of DA and their role in working alongside our commissioned services.</p>
<p>Representation</p> <ul style="list-style-type: none"> -Are key agencies represented at the relevant level? -Is strategic leadership supported by resources? -Are 'by and for' agencies able to engage meaningfully? 	<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. This is kept under constant review.</p> <p>The tier 1 local authority takes the strategic leadership around the DA agenda for Gloucestershire. The DLUHC funding and statutory duty 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 Network, 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>Resources</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>The local DA needs assessment supports our understanding of the scale of the issue within the county. There are however some gaps in our knowledge which are being 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 LPB will monitor the engagement of organisations in fully understanding the scale of DA and addressing this locally.</p> <p>The joint commissioning approach 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>Coordination</p> <ul style="list-style-type: none"> -Are partners aligned with the principle of a coordinated approach? -Are partners committed to collaboration? 	<p>Agencies in Gloucestershire are working in a coordinated way to address DA but without formally recognising the CCR terminology.</p> <p>The new DA strategy, via the delivery plan, will ensure the CCR approach is fully acknowledged and outline</p>

<ul style="list-style-type: none"> -Is the significance of the coordinator's role acknowledged and supported? 	<p>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>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 re-developed. It is acknowledged that investment is required locally to provide a clear, consistent and sustainable training offer. This has been identified as a priority within the DA strategy and delivery plan and funding and options for commissioning will be considered by the LPB. 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>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? -Does the partnership have an agreed method of defining and measuring success? 	<p>The DA needs assessment has provided a good understanding of local need. A local DA data set was also agreed in 2023.</p>
<p>Policies and processes</p> <ul style="list-style-type: none"> -Does the partnership have policies and protocols to work with other strategic boards effectively? (for example, Safeguarding Boards) -Are policies and procedures evidence based and survivor informed? -Do all partners have a clear understanding of information sharing and is this cascaded to all staff? 	<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

Domestic Abuse Governance Structure for Gloucestershire

