



# **Rochdale Borough Domestic Abuse Needs Assessment- Executive Summary**

## **November 2022**

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## 1 List of Abbreviations (Acronyms)

BAME	Black, Asian, and Minority Ethnic
CAMHS	Child and Adolescent Mental Health Services
CPA	Care Programme Approach
CPA+	Care Programme Approach Plus
CRC	Community Rehabilitation Company
CSEW	Crime Survey for England and Wales
DA	Domestic Abuse
DAHA	Domestic Abuse Housing Alliance
DASH	Domestic Abuse Stalking and Honour-based (risk assessment)
DHR	Domestic Homicide Data
DVDS	Domestic Violence Disclosure Scheme
DVPN	Domestic Violence Protection Notice
DVPO	Domestic Violence Protection Order
E-HASH	Early-Help and Safeguarding Hub
FGM	Female Genital Mutilation
GM	Greater Manchester
GMCA	Greater Manchester Combined Authority
GMHSCP	Greater Manchester Health and Social Care Partnership
GMP	Greater Manchester Police
HBA	Honour Based Abuse
IDVA	Independent Domestic Violence Advisor
IMD	Index of Multiple Deprivation
LGBT	Lesbian, Gay, Bisexual, and Transgender
LSOA	Lower Super Output Area
MAAST	Multi-Agency Adult Safeguarding Team
MAPPA	Multi-Agency Public Protection Arrangement
MARAC	Multi Agency Risk Assessment Conference
MHCLG	Ministry of Housing, Communities and Local Government
MRM	Multi-agency Risk Management (Meeting)
NESTAC	New step for African Community
NPS	National Probation Service
NCA	Northern Care Alliance



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NHS HMR CCG	NHS, Heywood, Middleton and Rochdale Clinical Commissioning Group
OMIC	Offender Management in Custody
ONS	Office for National Statistics
PCFT	Pennine Care Foundation Trust
RBH	Rochdale Borough wide Housing
RCT	Rochdale Connections Trust
RSCP	Rochdale Safer Communities Partnership
WHAG	Women's Housing Action Group



## 2 Executive Summary

The Domestic Abuse Act 2021, introduces a new cross-government statutory definition to ensure that domestic abuse is properly understood, considered unacceptable and actively challenged across statutory agencies and in public attitudes. The new definition builds on and expands on the previous cross-government definition of domestic abuse and violence, which had been in place since 2012, but operated on a non-statutory basis.

The new definition emphasises that domestic abuse is not just physical violence, but can also take other forms. The Domestic Abuse Act 2021<sup>1</sup> states the following:

### Definition of “domestic abuse”

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;
- (e) Psychological, emotional or other abuse;

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

“Economic abuse” means 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.

For the purposes of this Act A’s behaviour may be behaviour “towards” B despite the fact that it consists of conduct directed at another person (for example, B’s child).

For the definition to apply, both parties must be aged 16 or over and ‘personally connected’.

### Definition of “personally connected”

For the purposes of the Domestic Abuse Act 2021, two people are “personally connected” to each other if any of the following applies;

- (a) they are, or have been, married to each other;

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<sup>1</sup> Domestic Abuse Act 2021. UK Public General Acts, 2021:  
<https://www.legislation.gov.uk/ukpga/2021/17/part/1/enacted>



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

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

According to the Crime Survey for England and Wales<sup>2</sup>, an estimated 2.3 million adults aged 16 to 74 years had experienced domestic abuse in the year ending March 2020. There was no significant change in the prevalence of domestic abuse in the year ending March 2020 compared with the year ending March 2019. Many victims of domestic abuse do not come to the attention of the police, which is why the estimated number of victims is much higher than the number of police recorded incidents and crimes.

Domestic abuse can have a serious and lasting impact on a victim's health and wellbeing and has wider societal costs to the police, health services and services offered to victims and their families. It is estimated that the economic and social costs of domestic abuse to society were £66 billion for victims for the year ending March 2017<sup>3</sup>. Therefore, understanding how domestic abuse impacts on individuals, families and communities is crucial to ensuring that high quality and effective services are delivered.

## 2.1 The aim of this needs assessment

The aim of this needs assessment is to analyse the current scale of domestic abuse in Rochdale Borough using available national and local data, and also looking at current services provided by both our commissioned and support services in the borough. This document will outline the profile and analysis of our initial multi-agency working, services provided to our DA victims, and our current profiles of DA. It will also help support Rochdale's Safer Community Partnership, senior leaders, and commissioners to:

- Understand local trends in prevalence and need; in particular understanding the level of demand placed on the domestic abuse system
- Understand local service provision
- Identify local strengths and those areas where improvements need to be made to prevent and reduce trauma and demand in the local system

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<sup>2</sup> ONS: Domestic abuse prevalence and trends, England and Wales: year ending March 2020.

<sup>3</sup> Home Office. Domestic Abuse Bill 2020: Overarching Factsheet, updated 17 August 2020 - <https://www.gov.uk/government/publications/domestic-abuse-bill-2020-factsheets/domestic-abuse-bill-2020-overarching-factsheet>



- Prioritise the allocation of resources and funding to ensure a balanced focus is provided
- Ensure the right local interventions, including safer accommodation, are commissioned and that these are effective in making and sustaining improved outcomes for our DA victims, families, and support for the perpetrators.

## 2.2 What the available data tells us about domestic abuse in Rochdale

(Please note inferences throughout the report are based on the data and reports that have been made available to us)

1. Domestic abuse is a gender biased crime; the data continues to show disproportionate impact on females. From 1<sup>st</sup> April 2019 to 31<sup>st</sup> March 2020, 91% of the high risk cases referred into the IDVA service (Victim Support) were female, and 59% of these were under the age of 35.
2. There is under-reporting by older people; locally and nationally around 3% of victims of domestic abuse are reported as being aged 65 and over. Whilst Rochdale has a relatively young population, the age group of 65 and over accounts for approx. 16.5% of the population<sup>4</sup>.
3. Reporting of domestic abuse is highest amongst the White ethnic group; in December 2020, 84% of victims were recorded as being White, compared with 79% of the population overall. In the same period, 11% of victims were recorded as being of Asian ethnicity, compared to 17% Asian population across the Rochdale population as a whole.
4. Offender ethnicity; in December 2020 the Greater Manchester Health and Social Care Partnership (GMHSCP) Tableau data shows that 79% of offenders were classified as White, with 17% of offenders classified as Asian.
5. Repeat offenders remain low in Rochdale compared with Greater Manchester as a whole; In December 2020 the data showed that 20% of offenders were repeat suspects in Rochdale, which has remained fairly steady over the year. This compares to 23% in GM, which has been rising slowly in the year the data was recorded, 2020.
6. Multi Agency Risk Assessment Conference (MARAC) Referrals; In December 2020, 247 cases were discussed at MARAC in Rochdale; 31% (77) were repeat cases, compared to 43% at GM level. In Rochdale, both the numbers of cases and the numbers of repeat cases has been increasing slowly, but steadily over the past few years. Whereas in Greater Manchester as a whole, we saw a sharp rise in the number of cases and repeat cases in 2020. This could be a reflection of the national trends, where we saw a rise in domestic abuse crimes during the first lockdown due to the Covid-19 pandemic.

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<sup>4</sup> ONS 2019 Mid-Year Population Estimates



7. MARAC Referrals by Source; Data up until the end of Dec 2020, shows that the source of most referrals to the Rochdale MARAC was the Police (64.4%), with most others from the voluntary sector (17.6%). Comparable figures for GM show police referrals into the MARAC at 74.3% and only 3.9% for the voluntary sector.
8. Domestic Abuse by ward and links to deprivation; the rates per 1,000 population for domestic abuse incidents in electoral wards in Rochdale for 2019/20 showed that West Middleton had the highest rate, followed by North Heywood, Smallbridge and Firgrove, and Balderstone and Kirkholt. The lowest rates are found in Norden, Wardle, West Littleborough, and Hopwood Hall. These rates appear to be related to levels of deprivation, with the more deprived areas having the highest domestic abuse incident rates.
9. Victim Support; In 2018-2019 the IDVA service received 947 high risk referrals, this number increased to 988 high risk referrals in 2019-2020, this equates to almost 206 cases per IDVA, with an average case duration of 15.5 weeks. However in 2020-2021 the annual high-risk referrals increased to 1847, this is a significant rise, almost double from the previous year. In 2019-2020, 485 out of the 988 high risk referral victims had children. Furthermore in 2019-2020, 85% of clients reported multiple types of abuse at intake, this reduced to 7% at exit; 63% of clients reported increasing frequency or severity of domestic abuse at intake, this reduced to 0% at exit (IDVA Service).
10. Service provision; there is a comprehensive understanding of commissioned services in Rochdale, as well as a good oversight of local third sector services and the provision that is available for domestic abuse related support.
11. Data collection and the data available on domestic abuse victims varied massively across all services (both commissioned and non-commissioned), making it difficult to analyse and collate the data in a set format. Data collected presents true and current known need, but we are aware that there will be underlying and hidden needs that may not have been captured in this report.
12. Views of service users – this data has not been captured in this report due to time and resource, however this can be made available through our service providers for future updates.
13. The impact of the Covid-19 Coronavirus – Following the Covid-19 outbreak in March 2020, domestic abuse (DA) has emerged as a priority area, with victims deemed to be at increased risk due to the lockdown and their greater likelihood of forced cohabitation with their perpetrator. As a result, efforts were made to increase service provision with our IDVA service in Rochdale where Public Health funded two additional posts to work with high risk and medium risk cases.

The Community Safety Team and Public Health Team agree that the whole impact of Covid-19 on victims, as well as the national and local domestic abuse response systems, is yet to be fully determined. Concerns have been expressed by services about the unpredictability of how the long-term impact on victims and their dependants will manifest itself, for example in their mental health/behaviour at school; and about the resources they have available to cope with any further increase in





demand for services, e.g. a potential further increase in referrals from schools causing further pressure on available sources of support.

### **2.3 Emerging themes from services providers of domestic abuse**

1. Funding; secure funding to maintain current service provision and also fund service gaps.
2. Partnership working; closer partnership working with health care professionals and the third sector.
3. Improved data collection; avoid duplication of data, capture the victim's voice and perpetrator voice to understand the needs and where the service gaps are.
4. Improved information/data sharing between Police, local authority, health sector, probation, and all third sector agencies.
5. Provision of specialist support to children and young people affected by domestic abuse.
6. Specialised programmes for high risk perpetrators of domestic abuse.
7. Clear and accessible referral pathways for both victims of domestic abuse and agencies whom support them.
8. Specific understanding of needs and specialist service provision for our minority groups, i.e. victims and perpetrators from BAME communities and the LGBT community. Including awareness raising within these specialist communities and how to disclose information safely.
9. Workforce and service provider training package on domestic abuse; recognising the signs, providing the right support, partnership working, consistent recording of domestic abuse data and information, sharing data confidently and confidentially, risk assessment, using the right recording tools/systems, making decisions etc.
10. Increased safe accommodation for victims and children (both male and female), including the provision of self-contained emergency/short term accommodation.
11. Covid-19 recovery for both workforce (staff) and the victims, families, and perpetrators of domestic abuse – meeting increased demand and working with delays, dealing with increased mental health issues, safety planning for victims and their families etc.

## 2.4 Recommendations for consideration

The recommendations from this needs assessment, in line with the RSCP 'Tackling Domestic Violence and Abuse Strategy 2021-2023' will inform a new Domestic Abuse Action Plan and Delivery Plan.

**What do we want to achieve?** To clearly demonstrate that domestic violence and abuse is unacceptable, and to reduce both the prevalence and impact of domestic violence and abuse upon victims, children, families and communities throughout the Borough.

The following recommendations have been collated from the data reviewed and also the gaps and priorities recognised by our services providing domestic abuse support across the borough. The recommendations for consideration have been themed under four categories; **Recognising, Responding, Rehabilitation, and Reviewing.**

The recommendations have also been **RAG rated** taking into consideration the limited funding and resources available and what is an urgent ask in line with government guidance and local needs (**R = red** being most urgent, followed by **A = amber**, and **G = green** as less urgent; dependent on funding and resources).

### RECOGNISING: Raising awareness and enabling challenge

1	Support and promote campaigns to promote healthy relationships, gender equality and raise awareness of domestic abuse in both adults and children	G
2	Work with schools to develop and implement early intervention and prevention programmes for children and young people and those at risk of being abusive; building on the mandatory Relationships and Sex Education (RSE) curriculum	G
3	Training should be consistently rolled out to school staff to help them identify signs of exposure to domestic abuse in children's behaviour and appearance. RBC to ensure this training achieves sufficient coverage and school staff are trained to deal with the matter sensitively and refer appropriately	G
4	Using the data we have, develop more targeted interventions (such as behaviour change programmes, recognising DA, and promoting self-esteem) to support young victims at risk and young people that harm	G
5	Raise awareness amongst communities, professionals, and employers to better understand domestic abuse, coercive controlling behaviour, the heightened risk when trying to end an abusive relationship, and how to contact local support services. This can be achieved via workforce training and community campaigns	A
6	Third Party reporting is key to identifying people requiring support; it is recognised that this needs assessment is based mainly on reported and identified need. It is crucial that the partnership working is collective, to improve reporting rates by creating the conditions so that people (whether directly affected or aware of issues with loved ones etc.) feel able, and are able, to report it. (Develop local targeted awareness raising exercises/campaigns to equip the general population how to recognise and report incidents of DA on behalf of victims as necessary)	A

7	Front line practitioners to understand the difference between family conflict and domestic abuse so they are able to better understand the associated risk and respond more effectively by offering the most appropriate intervention	A
8	Improve identification of domestic abuse across our health providers by commissioning specialist workers that are based in health settings providing support, training, and advice for patients and the workforce	A

**RESPONDING: Safeguarding vulnerable people and providing support for victims**

9	All agencies to develop and promote policy and procedures for work with survivors, children, and families; including workforce training and employee domestic abuse policies	G
10	Ensure our domestic abuse offer is reflective and accessible by people with protected characteristics (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation) to raise awareness of DA and the services available within these groups	A
11	Consideration should be given to include support for victims of harassment and stalking within victim focussed provision in Rochdale (covered in the new statutory definition of domestic abuse)	R
12	Consideration should be given within victim focussed provision to include specialist support for victims/survivors with complex needs such as drugs, alcohol, mental health, and anti-social behaviour	R
13	Commission/implement a specialist children's provision, long term, both for children from abusive families and also children whom are victims of domestic abuse and violence. Provision to include specialisms in attachment difficulties, developmental trauma and cared for children	A
14	Specialist outreach provision to be more dynamic by offering a service that enables victims to be supported by the same team/practitioner regardless of risk level (High, Medium, and Standard risk).	A
15	To develop therapeutic services for victims, children, and perpetrators; supporting people to recover, understand behaviours, move on and avoid repeat behaviours	A
16	Opportunities for silent/digital reporting should be increased, with awareness raising, so that victims can call on services to help even when opportunities to talk are limited. This might require the addition of new services or the expansion of currently available services	A
17	Provide specialist support for victims with no recourse to public funds, including accommodation, living costs, and immigration advice	A
18	Strategic Housing to carry out a thorough needs assessment on the accommodation needs for victims and their families, including the assessment of current safe accommodation provision in the borough, and for this to be reviewed every 12 months (in line with Government recommendations)	R
19	Increase our safe accommodation offer in line with the demand, to include a menu of options such as target hardening, sanctuary schemes, and dispersed accommodation	A
20	Carry out a full impact assessment of the Coronavirus pandemic on victims and their families, as well as the national and local domestic abuse response systems, which is yet to be fully determined.	A

### REHABILITATION: Dealing with offenders and reoffenders to change behaviours

21	All agencies to develop and promote a policy for perpetrators and families of perpetrators; including workforce training and employee domestic abuse policies. This could include amendments to existing workplace domestic abuse policies	G
22	Identify and embed effective and evidence based ways of working with perpetrators, ensuring commissioned programmes are RESPECT accredited and run in parallel with specialist services for women. The programme must also include cultural differences and how this may effect perpetrator behaviour (Perpetrator programme must provide bilingual resource to work with those who speak minimum English)	R
23	Review and evaluate the new "Turning the Spotlight" programme delivered by Victim Support, and the "DRIVE" model for perpetrators delivered by Talk Listen Change; to inform future commissioning intentions in relation to perpetrator provision.	R

### REVIEWING: Creating an improved multi-agency response to tackling domestic abuse

24	Ensure all services providing support to victims, perpetrators and children (including how to work effectively and manage risk with families that want to stay together) embed a whole family approach	R
25	Maintain the Rochdale Domestic Abuse Steering Group ensuring broad representation, including the voluntary sector, to ensure partners are working to the Tackling Domestic Violence and Abuse Strategy (2021-2023) and a Strategic Domestic Abuse Action Plan ensuring the focus remains on victims, families, children, and perpetrators	R
26	Work should continue at pace to ensure resilience in the Rochdale Borough domestic abuse response system. The work will need to take into account the responsibilities detailed in the new Domestic Abuse Bill (April 2021)	R
27	Embed a co-ordinated commissioning approach to domestic violence and abuse across the whole partnership. This includes ensuring that all commissioning decisions relating to domestic abuse are channelled through the Domestic Abuse Steering Group.	R
28	Victims Voice – The need for on-going engagement work with survivors and families to continually inform practice is valuable, therefore it is suggested that a Domestic Abuse Engagement Group, with adequate resourcing, is formed alongside the development of a Domestic Abuse Engagement Strategy	A
29	Decision making and processes of undertaking Domestic Homicide Reviews (DHR), including the learning from DHR's to be shared across all partners	A
30	Commissioners to work with agencies including the voluntary sector to improve data recording and data collection, with an emphasis on consistency where possible	A
31	Work with neighbouring boroughs i.e. Bury and Oldham to offer a safe accommodation programme in line with the new domestic abuse statutory responsibilities	A
32	The Joint Leadership Team to commit additional recurrent funding for domestic abuse services in the Borough so they are able to meet the demand highlighted in this document.	R



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33	Rochdale Council's Joint Leadership Team to identify a RBC Strategic Lead and specialist team for domestic abuse to ensure a coordinated approach to commissioning domestic abuse services and interventions in the borough.	R
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