

Publication of a Domestic Homicide Review in Sandwell (the case of L).

Independent Chair and Author – Ken Wynne

June 2015



Safer Sandwell
Partnership

Introduction

Community Safety Partnerships are required to undertake Domestic Homicide Reviews (DHRs) when the death occurs of a person over 16 as a result of violence, abuse or neglect from a family member, a partner or a member of the same household.

The purpose of DHRs is to establish any lessons that can be learned about the way that local professionals and their organisations work together to safeguard victims and to prevent domestic homicides in future. The findings of Reviews are published to maintain public confidence, make the processes in place more transparent and to share learning widely across agencies to improve protection for victims.

The Safer Sandwell Partnership has completed the case of L. The Review's comprehensive Overview Report has been approved by the Home Office Quality Assurance Panel who said:

"The QA Panel would like to commend you on producing a thorough and balanced report and for your approach in this case, including your work with the community, given the absence of agency contact in this case".

The Partnership has chosen to publish the Review's findings in this summary form to focus attention on the key learning points which may be of benefit to agencies working with local communities and particularly with victims of domestic abuse who are newly arrived in the UK.

Background

The victim (L) was a Polish national aged 26 who died in May 2012 following an assault by her brother-in-law (B). She had been in the UK for only 3 weeks while visiting her sister (S) and helping her with her 4 year old child. L was aware that her sister was experiencing domestic violence from B and hoped to offer her support with that situation. On the night of her death a violent argument took place and L suffered a severe head injury from which she died shortly after.

B was convicted at his trial in 2013 and sentenced to 9 years imprisonment for the manslaughter of L and 1 year for occasioning actual bodily harm to S. The Senior Crown Prosecutor said:

"Despite the fact that (S) could not remember the attack or describe the assaults, a jury unanimously convicted (B) of all matters.....This conviction and subsequent sentence should stand as a strong deterrent to those who perpetrate domestic violence, that abusers can still face prosecution even if the victim makes no complaint".

L had not been a victim of domestic violence previously, but her death was a result of the domestic abuse suffered by her sister. This violence was not known to any agency in Sandwell and no previous reports of domestic abuse had been made to Police, NHS staff or any other local services. Even so, the Review Panel considered carefully each agency's involvement with S's family since their arrival in the UK in 2008. Reports were received from NHS services, their child's children's centre and school and Sandwell Council's Neighbourhood Services (previously Sandwell Homes)."

The involvement of local agencies

The School and Children's Centre showed good practice by following the recommended guidance for new arrivals and establishing clear communication with the family using a Polish interpreter. Each showed a robust approach to safeguarding and provided information in community languages (including Polish) about the range of support available to them.

Midwives, Health Visitors, GPs and Accident and Emergency staff in Sandwell have received training in the use of Domestic Abuse Care Pathways and been advised of the action they should take when domestic abuse is brought to their attention. In this case there was no occasion when it was necessary to initiate domestic abuse procedures. There were times when administrative and professional practices fell short of the required NHS standards and improvements were required in these areas:

- New patient information obtained by one GP Practice at registration was inadequate.
- The Practice did not notify the Health Visiting Service that the family were new registrants and so the '*new to area visit*' from a health visitor was delayed for a year.
- The record of a Health Visitor's assessment in 2009 was missing and it seemed no interpreter was present. It was therefore unlikely that S was asked a routine question about domestic abuse, which is recommended by NHS guidance.
- S attended hospital on 3 occasions in 2010 for general healthcare needs but opportunities to ask her routinely about domestic abuse were not taken.
- Records noted 20 face-to-face contacts between NHS staff and B or S but interpreters were used on only four occasions.

The Review found no evidence that these shortcomings contributed in any way to the tragedy or that earlier improvements would have prevented it.

At the time of the domestic homicide Sandwell MBC's housing services were provided through Sandwell Homes. The Service had no contact with L and the only contact with B and S was the receipt of a housing application form which was returned to B to ask for further information. No response was received and no further action was taken. The Housing Options Service had procedures in place to identify if the customer needed housing due to domestic abuse and to provide appropriate support to victims.

Summary and responsibilities

The homicide could not have been predicted or prevented by local agencies, who had no knowledge of the domestic abuse suffered by S and did not miss any clear opportunities to intervene. Responsibility for the homicide lies entirely with the perpetrator. Services provided were low-level, sensitive and appropriate to the needs of the family and at times demonstrated good practice. All agencies had policies and procedures in place that equipped them to respond effectively when alerted to domestic violence.

Cultural issues

Domestic Homicides occur in communities around the world but the Review considered if the situation of B, S and L as migrants and a visitor to the UK were relevant factors in this death. Sandwell is an ethnically diverse and cohesive community with a significant BME population. Since 2001 the Borough has seen a large increase in non-UK born migrants, including people born in EU Accession Countries. The number of Polish people living in Sandwell increased from 208 in 2001 to 5673 in 2011. The Review found no evidence that local services discriminated against the victim or her sister because of their sex, nationality, marital status, or any other protected characteristic.

The Review took a cautious approach, trying to avoid conclusions based on national stereotypes or generalisations which did not reflect the experience of individuals in this case. The Panel invited representatives of the Polish community to give their views about Polish migrants in the UK and about Polish women experiencing domestic violence.

The Panel also used a small number of academic papers whose authors consistently reported that domestic violence is a concern for many Polish women of all social backgrounds. They reported that when abuse occurs the responses of legal, social and medical agencies are less well-developed in Poland than in many European societies and are less effective in protecting women from violence by partners. Low level sanctions for abusers can leave victims at further risk and act as a deterrent to disclosure and reporting.

The papers drew attention to the high value placed in Polish society on family privacy, self-sufficiency and individual independence which has led to a view of domestic violence as a family matter to be resolved by informal means. Polish society is highly religious and mainly Catholic. The Church's stance on the family, gender roles and the stigma of divorce exerts pressure on women to remain with their husbands, even in abusive situations. The research indicates that as a result of these and economic factors it remains difficult for Polish women to disclose abuse, to leave an abusive relationship or to initiate divorce proceedings.

The Polish community in the UK

The Panel was told that many characteristics of Polish society have transferred with Polish communities to the UK. They are self-sufficient, independent and hard-working but language barriers, lack of information and lack of knowledge of services create barriers when support is needed. This leads many to pay for assistance privately rather than use formal services.

The consultation heard from Polish community representatives who said that the experience of living in the UK can be very isolating for Polish women, living at a distance from family, friends and familiar support networks. They may not know anyone in the local area and lack of English is a barrier to employment, social opportunities and using services. As a result friendships and social circles are often formed only with other Polish people, leading to a sense of a closed and marginalised community.

When domestic abuse occurs the situation is additionally challenging. Polish women are unlikely to expect a supportive response from the police, to understand the role of statutory agencies or to have knowledge of the assistance and support available. They may be afraid that their confidentiality will be lost in a small ex-pat community and do not understand the benefits system. Abusive partners may coerce women into compliance with threats of children being taken into care or families being made to return to Poland.

Representatives recommended that more should be done to tell Polish women about the support available, but for this to be used effectively a foundation of knowledge, trust and confidence must be established first. This can be developed by working in partnership with organisations of Polish people and by creating opportunities for face-to-face information sharing by Polish speaking staff, through services such as schools, nurseries, women's groups and language classes.

The Review found no evidence that domestic abuse occurs more often in Polish communities than in the population as a whole, or that the needs of Polish women who experience violence and abuse are different from those of women in other ethnic and national groups. Women in all communities face serious challenges in disclosing domestic abuse. The challenge for services is to overcome the additional obstacles that are faced by abused women in marginalised communities, so that they too can access the support they need.

Lessons from this review

- The central challenge the Review presents is for services to ensure that women in all communities are enabled to disclose abuse and access services to secure their safety and that of their children.
- Provision of services in itself does not mean that everyone in need can access them.
- An ongoing strategy is required to promote awareness and build confidence in domestic abuse services among all marginalised communities, particularly those newly arrived in the UK.
- Local agencies must provide information in ways that can be accessed by women from all communities to overcome the obstacles caused by culture, language and lifestyle.
- Staff of all agencies must remain alert to the continuing risk of domestic violence. One way this can be achieved is through good practice and by asking routine questions about domestic abuse in appropriate circumstances.
- For service users with little English it is essential that staff use independent interpreters whenever possible, especially for pre-planned interviews such as initial assessments.

Recommendations of the Review

1. The Safer Sandwell Partnership should review its provision of information about domestic violence services to ensure it can be accessed by all sectors of the community.
2. West Midlands Police should review access to domestic abuse advice in foreign languages on its internet site and signposted from it to partner agency sites in Sandwell.
3. The quality of patient information should be improved at the point of initial GP registration
4. GP Practices should send notifications to the Health Visiting Service within 7 working days for every new pre-school child registered.
5. NHS services should make better use of opportunities to draw patients' attention to the support available for women of all communities suffering domestic abuse.
6. Sandwell MBC and its partners should make formal links with the Polish community in the Borough, to build trust, confidence and develop resources to meet the community's needs.
7. The Home Office should be made aware of the additional resources needed to raise awareness of domestic abuse issues with newly-arrived communities.

Implementation of the DHR's recommendations is overseen by the Borough's DHR Standing Panel. A Domestic Violence Campaign has been implemented to raise awareness of domestic abuse and improve knowledge in local communities of the support services available. The Home Office has noted the resources recommendation and has undertaken to work with UK Visas and Immigration to consider how best to communicate messages on domestic violence to reach those who are newly arrived in the UK.

Further information is available from:

The Domestic Abuse Team

Sandwell Council House, PO Box 2374, Oldbury, West Midlands, B69 3DE

Telephone: 0121 569 3030 E-mail: maryrose.lappin@sandwell.gov.uk