



# **Evaluation of Early Intervention Models for Change in Domestic Violence: Northern Rock Foundation Domestic Abuse Intervention Project, 2004-2009**

## **Executive Summary for the Cumbria Project**

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## Executive Summary for the Cumbria Project

### 1. Introduction

In 2004 the Northern Rock Foundation (NRF) Domestic Abuse Intervention Project (DAIP) provided £3.5 million to two Multi-Agency (MA) partnerships to address domestic violence in innovative ways. The aims were to provide holistic, early intervention, specialist services to victim/survivors of domestic violence, their children and perpetrators. New services were created to act as a hub to liaise with and coordinate MA working with the eleven partner agencies that together with the new service constituted each Project. In Cumbria the Project was set up as a pilot in rural Carlisle and Eden with Letgo as the new service. The objectives were to improve the health and wellbeing of victim/survivors and their children, increase perpetrator accountability and promote MA working by focusing on early intervention at crisis. In the Cumbria Project this meant that the police were the primary but not the only referral source.

Letgo provided tailored, one-to-one support to victim/survivors, both one-to-one and group work for children and voluntary perpetrator programmes. Independent Domestic Violence Advisors (IDVAs) undertook a risk assessment (RA), offered safety planning and undertook an assessment of need, the outcome of which resulted in referrals to, and acting as an advocate with, appropriate partner agencies. Contact with victim/survivors varied in frequency and type depending on need. IDVAs also provided emotional and practical support and undertook regular reviews of victim/survivors' risk.

### 2. The Early Intervention Model and Outcomes for Victim/survivors and their Children

Letgo received 751 referrals from multiple sources. Of these, 303 victim/survivors (40%) engaged (the vast majority of whom were women with an average age of 36 years), giving an engagement rate of 61 per 10,000 population in the Letgo area. Letgo worked with victim/survivors of adult couples and other familial relationships.<sup>1</sup> For adult couple relationships the engagement rate was 43%. Police in Cumbria operated an opt-out system of referral which assumed every victim/survivor would be referred unless they stated otherwise. Two thirds (66%) of the recorded referral sources to Letgo were from the police. The engagement rate of all police referrals was 34% and for adult couples it was 40%.

#### *Outcomes for victim/survivors*

Eight indicators of effectiveness of the early intervention model suggested that the Project had a positive impact on victim/survivors of domestic violence. The first two focus on engagement and indicate that the early intervention model had some success engaging victim/survivors at an early point in their help-seeking. The following six indicators focus on the outcomes for those victim/survivors who engaged with the Project.

1. In the majority of incidents of domestic violence reported to the police (57%), for which records exist, victim/survivors reported only one police incident. Letgo had a policy of encouraging victim/survivors to report incidents to the police so this suggests that the early intervention model had some measure of success in preventing further reported incidents. In addition, nearly half of the 118 victim/survivors for whom there were

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<sup>1</sup> Sibling relationships and, usually, mother/son relationships. These are not in the analysis unless stated.

records registered with Letgo within seven days of the first reported police incident. This suggests that the early intervention of Letgo resulted in early engagement by victim/survivors.

2. Recognising domestic violence. There was also evidence that engagement with the Project enabled some victim/survivors to recognise their experience as domestic violence.
3. Risk reduction. Risk reduction occurred in the majority of cases where there were records (using one measure, 86% (N=107), experienced risk reduction; and with another the largest group (N=61, 49%) experienced risk reduction.<sup>2</sup>). Victim/survivors were engaged, on average for 8 months which suggests that risk reduction was sustained in the medium term. IDVAs also recorded their perception of victim/survivors' risk at four monthly reviews and 78% of the victim/survivors for whom there was a record were perceived to be at significantly or moderately less risk at review than at their first RA. The majority of victim/survivors interviewed (N=25) also felt at less risk (N=13, 57%) since their engagement with the Project.

*I don't feel like I'm putting people out, they've encouraged me to keep in touch and got me a flat. They've made me feel safe. There was no phone box nearby and I couldn't run so now I've got a phone. They mentioned an alarm but I don't need one. Tanya, April 2009*

4. Factors affecting risk reduction. Analysis of victim/survivor characteristics identified four groups of intimate partner relationships for whom outcomes were different:
  - Typical (45%, N=137): heterosexual women who experienced domestic violence from their male partners. These required least Project effort, were most likely to experience risk reduction and were engaged with the Project for the least amount of time.
  - Complex-Typical (35%, N=106): heterosexual women who experienced domestic violence from their male partners and had complex needs: drug/alcohol use (also correlated with drug/alcohol use of the perpetrator); a child 'at risk'; disability; housing need (who tended to also be younger); a history of previous abusive relationships; unemployment; a perpetrator with a previous criminal record. This group required more Project effort, remained engaged for longer, and were less likely to experience risk reduction.
  - Complex-Atypical (11%, N=33): those in same sex relationships; heterosexual relationships where the male partner was identified as a victim/survivor; heterosexual relationships where the victim/survivor was also identified as a perpetrator. The majority in this group had complex needs. Effects experienced by the Complex-Typical group were increased for those in Complex-Atypical relationships and these victim/survivors were most likely to experience an increase in risk. The length of time victim/survivors stayed engaged was significantly correlated to the changes they made suggesting that Complex-Typical and Complex Atypical groups required more time to address their needs and make changes.

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<sup>2</sup> These data, along with the perceptions about risk reduction and increased safety of IDVAs and victim/survivors respectively, support level and changes made were all kindly shared with this evaluation by the Henry Smith/SigHestia IDVA evaluation: Howarth, E.; Stimpson, L.; Barran, D.; Robinson, A. (2009) *Safety in Numbers A Multi-site Evaluation of Independent Domestic Violence Advisor Services*, London: The Henry Smith Charity.

- Non-Intimate partner relationships: (9%, N=27) these typically involved parents (usually mothers) being abused by their child(ren) (usually their son[s]); and some sibling relationships.
5. Multi-agency working. Most victim/survivors had between four and seven sources of support from partner agencies. MA working increasingly focused on CJS, housing and children's services. Other agencies' involvement (e.g. health, benefits) decreased.<sup>3</sup> Referrals to the MARAC were also low (27 over the 18 months since the MARAC had started) and fewer than the numbers being assessed as high/very high risk. This may reflect an issue of capacity for the MARAC process. There was no correlation between the support given and risk reduction. This may have been because only a small proportion of victim/survivors who engaged with the Project were assessed at high or very high risk (15%, N=41 over the three year sample period), which meant that there were fewer with demonstrable risk reduction that could be statistically linked to the support given.
  6. Improved health and well-being. At review, victim/survivors were asked whether they felt safer and of those whose perception of safety had been recorded, 93% (N=73 out of 79) said they felt much or a bit safer. The majority (80%, N=20) of interviewed victim/survivors felt their health and well-being had improved and 80% (N=20) felt safer as a result of engagement with the Project. At review, IDVAs assessed victim/survivors' use of alcohol/drugs, housing, their networks, their coping and their use of pattern-changing course. The most common changes made by victim/survivors were in coping, housing and networking which again indicates the impact of the Project on victim/survivors health and wellbeing. Emotional support was the most cited form of support received.

*if it wasn't for them being there I wouldn't be here today. I can't fault them, they're brilliant.*  
Sharon, July 2008

7. Confidence in the Project. Confidence in the Project was expressed by the majority of victim/survivors (N=24, 96%) who said Letgo provided a good or excellent service.

*Excellent. Just for the back up and support as and when you need them. They've been so helpful to me from what they've given.* Vera, April 2009

8. Confidence for future help-seeking. The majority of those interviewed (63%, N=15 out of 25) said they felt more confident contacting sources of support subsequent to engaging with Letgo. This suggests that engagement with the Project made it more likely that victim/survivors would seek help in the future.<sup>4</sup>

### *Outcomes for Children*

The Project provided a service to 177 children/young people, 40% of whom were referred by statutory agencies in health, education or children's services. This suggests that these children/young people may not have received a service if the Project had not been

<sup>3</sup> This may be the result of inconsistencies in recording.

<sup>4</sup> The low response rate to this question may be explained by the fact that Letgo accepted referrals other than the police and these victim/survivors may not have sought formal help before engaging with the Project.

available. Twenty-four of the women interviewed were mothers of 56 children who had an average age of 10 years (10 [12%] were under five years, 36 [68%] were 5-16 years, and seven [13%] were over 17 years). Of the 11 who said that their children had received a service from Letgo, 10 rated the service as good or excellent. The majority of those who answered the question (eight out of ten) said their children's health and wellbeing had improved as a result of engagement with the Project.

*The eldest had [a skin condition] and after six months it cleared up. She's so confident and open now and before she was so clingy. I took them to [martial arts] and the coach was shouting so loud that they all burst into tears, but now they're all fine . . . It [Letgo children's work] gives the kids someone else to talk to outside of the situation. If they're getting things said to them by their dad it gives them someone else to make sense of things. Liz, April 2009.*

### **3. Impact on Perpetrator Accountability**

Another way of understanding the significance of repeat referrals is to focus on perpetrators. In Cumbria, 39% of perpetrators were responsible for 67% of reported police incidents. This impact is substantial and provides evidence for the need to sustain work promoting perpetrator accountability.

The success of the Project can be evidenced by the substantially increased workloads of the police and Crown Prosecution Service (CPS) during the evaluation period as indicated by processing of charges and court appearances. For Letgo the number of cases finalised increased from 29 in April 2006 to 111 in 2008.

Whilst discontinuances as a whole decreased in both Cumbria as a whole and the Letgo area, those identified as the result of reasons identified as victim/survivor related increased in Cumbria but decreased in the Letgo area. This may be the result of the combined impact of the IDVA service and Specialist Domestic Violence Court (SDVC) in Cumbria and reflects the findings of other research.<sup>5</sup>

### **4. Including Perpetrators**

The Project found engaging perpetrators into voluntary perpetrator programmes the most difficult aspect of the work to promote and referrals to the programme were very low. Reasons for this were: the belief of many partner agencies that work with perpetrators is the remit of CJS agencies; the belief of CJS agencies that perpetrators should be criminalised; the remit of some partner agencies which was to work with victims and not perpetrators of crime; those partner agencies whose remit could include men as perpetrators because their focus was on work with families, in reality understood this to mean work with mothers and children; a reluctance, by predominantly female practitioners, to engage with potentially violent men, especially when their work was conducted in the homes of their clients. Two exceptions to these were some social workers and police officers who promoted awareness of the voluntary perpetrator programme. A further barrier to work with perpetrators was the fact that the voluntary perpetrator programme was perceived as somewhat separate to the work of Letgo.

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<sup>5</sup> Home Office (2008) *National Domestic Violence Delivery Plan*. Crown: London.

## **5. Multi-Agency (MA) Working**

Setting up new MA working initiatives can be understood as two-phased. In the development phase, which occurs in the pre-launch period, developmental factors can be assessed for their robustness. The importance of this phase cannot be underestimated as the degree of partnership resource an initiative has may dictate its ability to be effective in the operational phase. The Cumbria Project was able to establish effective MA working because the following developmental factors were present giving them a positive partnership working resource to draw on when the Project was launched:

- Strong existing MA working relationships across partner agencies
- Strong domestic violence infrastructure in the Strategic Management Board and Domestic Violence Project Manager
- Processes for the development of the new Project which promoted shared ownership of the Project, particularly at senior management and strategic levels.
- Processes for management of (including accountability within) the new Project
- Processes for monitoring the new Project

The scope/size of the new initiative facilitated the attainment of most of these factors. The Cumbria Project was able to achieve success in developing monitoring systems within Letgo but not in partner agencies and this remained the case in the operational phase of the Project.

In the operational phase, when a new initiative is launched, operational factors concerning issues of communication, power and resources can arise that prevent or assist MA working. The Project faced only a few problems with communication, which underpinned challenges related to power and resources, and was able to respond more effectively and strategically to them because of the existing partnership ethos at both senior management and frontline practitioner levels.

- Power: Practitioners in Letgo faced some challenges to their credibility in the early years of the Project and were seen as a threat to other, voluntary sector, agencies. The Project also faced challenges securing senior enough management representatives of health and children's services at the strategic boards. These concerns were addressed at SMB level and by the growing, positive, reputation of Letgo.
- Resources: The Project also faced recruiting and staffing challenges which were monitored by the Project.

## **6. Recommendations**

### *The Early Intervention Model*

1. There was evidence that the early intervention, specialist model was effective in terms of its impact on victim/survivors and, through the CJS, perpetrator accountability. The Project should be funded to continue the work they do with victim/survivors.
2. Early identification of Complex and Atypical victim/survivors using a needs assessment checklist could benefit strategic, funding and operational agendas to more purposefully:
  - a. plan equitable workloads of IDVAs recognising the extra effort and time needed with Complex-Typical and Complex-Atypical victim/survivors;
  - b. target partnership working and identify gaps in provision;
  - c. develop funding strategies.

3. The numbers of children provided a service by the Project, and the profile in the of both the referral sources and referrals indicated that:
  - a. The children's services were filling an important gap in provision and should be maintained.
  - b. The impact of working with children and young people identified as abusers of their (typically) mothers should be monitored for their impact on the work with children/young people; and to pursue relevant funding strategies.
4. Training should be developed to build confidence in practitioners to motivate and undertake preparatory work with perpetrators so that they engage with voluntary perpetrator programmes. The question of which practitioners might have the remit to undertake this work is a moot one but social workers, health visitors, probation workers, practitioners in youth offending teams and GPs might all be considered.
5. New MA initiatives require a development phase in which to test the robustness of developmental factors. This would also include a lead-in period, the length of which depends on the scope and size of the initiative, which would allow an incremental increase in staff teams and drawing down of funding. Having clear structures of management and accountability are crucial to the effectiveness of MA working so that operational factors can be more effectively addressed.

#### *Monitoring and Evaluation*

6. Monitoring and evaluation systems should be agreed and embedded in new initiatives as early as possible, and management and practitioners should be encouraged to recognise the usefulness of monitoring for operational as well as strategic, evaluation and funding agendas.
7. MA initiatives wishing to monitor and evidence the impact of complex issues such as domestic violence should explore ways of 'stitching together' and tracking cases across as well as within agencies to facilitate monitoring the trajectory of cases both individually and globally.
8. The numbers processed through the CJS are small, making conclusions tentative. However, further monitoring of sentencing in both areas could confirm a need for focused work on sentencing.