

Advocacy After Fatal Domestic Abuse



2021

RESOURCE FOR PROFESSIONALS

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About AVA

Advocacy After Fatal Domestic Abuse (AAFDA)'s specialist team of advocates offer emotional support and practical advice after a death. They are experts at navigating the systems and processes after a death and can intervene to ensure that your family gets the right support. Every family bereaved by domestic abuse will have a unique set of challenges facing them as they begin to understand their loss and the situation that lead up to it. AAFDA can provide specialist and expert advocates to help children and young people be involved in a Domestic Homicide Review.

AVA (Against Violence and Abuse) is a feminist charity committed to a world without gender based violence and abuse. Their mission is to work with survivors to end genderbased violence by championing evidence-based change. They are an expert, independent and groundbreaking national charity particularly recognized for their specialist expertise in multiple disadvantage and children and young people's work. Their core work includes training, policy, research and consultancy.

WHO IS THIS RESOURCE FOR?

Professionals working with children and young people who could be involved in a Domestic Homicide Review.

WELCOME

This booklet has been created by AAFDA, a specialist charity for families who have been affected by a death involving domestic abuse and centre for excellence on Domestic Homicide Reviews in partnership with AVA, a training and consultancy charity working to end violence against women and girls. Together we want to encourage you to think about how children and young people you are working with can have a voice in a Domestic Homicide Review (DHR) in the wake of losing a parent.

"When one parent kills the other, children are confronted with multiple losses, involving their attachment figures and their direct living environment. In these complex situations, potentially drastic decisions are made, for example, regarding new living arrangements and contact with the perpetrating parent."

- Children's Mental Health and Well-Being After Parental Intimate Partner Homicide: A Systematic Review (researchgate.net)

WHAT IS A DHR?

A DHR is an essential learning opportunity for professionals. It provides an analysis of what led up to a domestic homicide or an unexplained death connected to domestic abuse. An insightful review can create real changes in a locality by improving systems and processes designed to support victim-survivors and disrupt perpetrators.

In this resource we will explain more about the power of DHRs and the role that children and young people can have in shaping the learning and recommendations. We hope to make the case that with the right support DHRs can be a place for integrating understanding, and play a role in healing the complex grief and trauma that arise from domestic homicides.



"When children lose a parent to domestic homicide, committed overwhelmingly by a male perpetrator, the system treats them as just collateral damage. That needs to, and can, change"

- Associate Professor Eva Alisic and Professor Cathy Humphreys, University of Melbourne

WHY SHOULD CHILDREN AND YOUNG PEOPLE BE INVOLVED IN A DHR?

Although it takes a lot of support from professionals, children and young people have a lot to contribute to reviews. Children and young people can help to determine the facts, and help professionals see through the victim's eyes, which helps them to produce a review that is accurate and meaningful.

A compassionate review can be a testimonial for children and young people of the events that led up to the death, and dispel myths and victim blaming.

Under the Domestic Abuse Act children are seen as victim-survivors in their own right, and DHRs can be a useful way to honor this.

"Framing only the adult as the only victim, fails to consider that domestic violence affects all members of the family, and the harms children and young people experience. This adult focused definition also means that children and young people's own accounts of their experiences are often overlooked in services for domestic violence victims."

- Callaghan et al. 2016b, c; Katz 2016

There has been little research regarding the circumstances and outcomes of children bereaved by parental intimate partner homicide – most of the research is American and pre-2000. These studies highlight children's mental health difficulties and a range of negative outcomes across social, psychological, academic, and physical domains. They also showed a striking absence of children's own voices on their circumstances and needs post-homicide. (Alisic et al, 2018)

Working alongside child survivors to understand the events that lead to intimate partner violence can provide learning, memorial and understanding for family members and professionals.

THE DOMESTIC HOMICIDE REVIEW PROCESS

As trauma impacts on the ability to store information and memories, children and young people often have a fragmented understanding of events. In the gaps that are created in traumatic memories children and young people can blame themselves for events, and question their behaviour and involvement. The need to ask questions, have them answered and piece together the different moments that led up to a death, and to integrate them into a 'whole picture' is an essential part of recovery.

This is where we feel that a DHR can offer children and young people a real chance for understanding and restoring power and control over their narratives and their part in it.

The DHR process is long and complicated and too many children and young people aren't yet routinely asked if they want to be part of it or how they might contribute. Many professionals believe that it might be too distressing a process, but your support can help children and young people make an



informed decision about being involved and demonstrate what they could get out of the process.

We're going to provide a visual overview of the process on the next page to help you answer any questions about the process. AAFDA and AVA provide specialist training and professional networks to support you to develop your knowledge and skills.



A death occurs linked to domestic abuse or violence

The local council
are informed and
decide whether a
Domestic
Homicide Review
should be
commissioned

Once a review has been commissioned a Chair is appointed

The Review Panel
gather their
evidence through
IMRs, interviews
and conversations
with friends,
families, employers

The panel, in discussion with the council and the family, sets out the terms of reference for the review

The Panel will be appointed – this should include specialist and expert knowledge but be independent of the case

The Panel will look at all the data they have collected, they will check that essential procedures were followed, identify areas of good practice and be curious about solutions that had they been in place might have made a difference to the family

From this analysis

- a draft report
and action plan
will be provided to
the family who
have the chance
to make changes
and correct
inaccuracies

Once finalised
the report
gets sent to
the Home
Office for
Quality
Assurance

The first responders who attend the scene of death will decide if the death is suspicious and will let the local authority know that a domestic homicide has happened.

Normally the local authority responsible for deciding if a domestic homicide review will take place is the Community Safety Partnership. They should make this decision within a month of being informed about the death.

The decision to commission a DHR isn't always straight forward. We aren't aware how many families don't have one commissioned for them. AAFDA will work with families to advocate for a DHR to help them get one if they want to.

THE REVIEW PANEL

Once the decision has been made to commission a review the panel is formed. The panel should be led by independent experts who can decide what timeframe they are going to review, who they want to talk to, and where and how they are going to look for learning. AAFDA think it's best practice for families to help to establish these terms of reference and timeframe for collecting input from other agencies.

The Chair of the panel is one of your most important links, they are responsible for determining the scope of the review – from what date services are going to be asked to collect evidence, they will decide who they want to talk to and conduct interviews. They may well be your main point of call and you can negotiate with them about how you think your young person might want to be involved.

The Author is the person who is responsible for working with the Chair to write up the learning and produce the review and action plans.

Sometimes the Chair and the Author are the same person.

Individual Management Reviews

Agencies are asked to provide Individual Management Reviews, these contain the information that different agencies present to the DHR Panel. Agencies are asked to provide a chronology of how they have interacted with the lost loved one, they are asked to think about best practice and where there is room for improvement. Individual Management Reviews are presented to the DHR panel and chair in both written and verbal form.

Producing the Review

Once the Chair has collected evidence, spoken to friends, families and employers, anyone else connected with the family who they think has evidence or insight to contribute, it is their job to produce a review and recommendations for actions. You should be given a chance to look at an early draft of the review, check that it's accurate and that you're happy with the information the family has given. The Review should produce a report, an executive summary and an action plan. The documents get submitted to the Home Office for Quality Assurance.



Child and Young Person Engagement

Whenever a child says anything significant to us we need to show that we take the communication seriously and not be dismissive. This is empowering for the child who may begin to believe that they can make a difference by communicating. If we believe communication is important we need to show children the positive benefits. Feeling listened to, understood and taken seriously is a vital part of building self-esteem and overcoming complex grief.

Engagement of children and young people in the process can happen in many ways in line with AAFDA's normal best practice model for engaging families.

At their core AAFDA and AVA believe that children need to be given specialist and expert advocacy to engage with the process, they need support to understand what the purpose of the process is and how their views can shape it. They need support to understand the meaning of the DHR and its unique aim of learning, rather than punishing those involved. AAFDA encourage chairs and DHR professionals to think about how children can contribute and assist with the scope of the DHR. Find a way to think with them about how long the DHR period should cover, the sources of IMRs and people – important family members and friends to talk to:

- Children should be given a choice about the medium that they engage with the DHR Author, Chair, panel members. DHR professionals are encouraged to think creatively and with care of age appropriateness on the best way to communicate with children: think about using art, film or play etc. Professionals need to work with care givers to ensure that children's engagement doesn't escalate any existing risk to the children from the perpetrator, especially in cases of suicide related DHRs/Safeguarding Adult Reviews. Children could contribute via email, pictures, questions, or other form of communication to the panel. They can share their views directly or through another family member or their specialist advocate.
- Children should be given the opportunity to meet the panel in whatever form feels most appropriate to them.
- In line with best practice we encourage open communication between the panel and family and children, in particular children should be kept up to date with timeframes, and delays and children should be consulted on and given choice about when there might be important dates and anniversaries when they wouldn't want to hear from the panel or chair.
- When the draft report is ready children should be given a choice about how they want to review it, they should be asked if they want the whole report or whether they just want their section/s. Decisions should include the support necessary to make sense of the information, where they want to read it, who they want with them and what will help them feel safe enough to take in the report.
- Lastly, we ask that children are kept in the loop about dissemination, learning events and action plans. We want to involve children as much as possible in the making of meaning as a result of the tragedy.

WORKING WITH CHILDREN: AAFDA'S SESSION MAP

Session 1
Introduction of CYP advocate to child alongside family advocate

Session 2
CYP advocate
& child introduction to
the DHR and
the
opportunity to
contribute

Session 3
CYP advocate &
DHR Chair understanding
the TOR & what
the chair is
seeking

Session 6

CYP advocate &

DHR Chair
feeding back

information

from the child

Session 4 & 5

CYP advocate & child - key session

for the children to tell their story and
 for the advocate to draw out
information for the review: this must
be child led and at their pace.

Session 7
CYP advocate & child - share draft
of their input and give them the
opportunity to make comments and
changes

Session 8
CYP advocate &
child - support
around
publication

FAQS

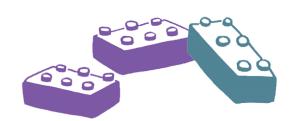
How do I let a family know about AAFDA and the service they offer to families?

On the AAFDA website there are leaflets and information about their service offer: aafda.org.uk. Leaflets can be downloaded in five languages including Urdu, Portuguese and Punjabi. AAFDA provide free, independent advocacy – that is specialist, expert and peer lead. AAFDA was founded following the deaths of Julia and Will Pemberton the sister and nephew of our founder. All of the advocate team have direct experience of serious domestic abuse, domestic homicide or suicide linked to domestic abuse. The AAFDA service is unique in the connection and empathy that this lived experience brings.

The advocacy service work across a range of reviews – domestic homicide reviews, inquests, serious case reviews and mental health reviews. The advocate has an educative role to play - answering questions and explain the nature and purpose of these reviews. They will explain what the review will do and how you can contribute and influence the report it will produce. Direct support from AAFDA means that they will accompany families to meet those conducting the review or they can represent the views and wishes of families to the review team if families don't want direct contact. AAFDA provide long lasting support and they area available for families throughout the review period, they can analyse and discuss the contents of reviews with families and support once the review is over. They provide opportunities to meet other families through structured peer support sessions and break the isolation many families face.

Their holistic service can give guidance and help on issues other families have struggled with such as dealing with the media, managing finances, and using their networks can put families in touch with other organisations that may be able to offer additional help – such as mental health support or counselling.

We also recommend: winstonswish.org



Is there training I can get to attend to get better a understanding on how I should talk to children and young people about a DHR?

AAFDA and AVA have worked together to provide e-learning packages on children and Domestic Homicide Reviews. Development of these resources was funded by MOPAC and are available to access on the AVA e-learning platform: avaproject.org.uk

What happens if the child or young person doesn't want to get involved?

There is no pressure for children or young people to be involved in a DHR, your support though can help them explore the possibilities and to sense check what their fears might be. You can help them review the consequences of being involved, support with safety advice and give reassurance. If you need to, a specialist and independent advocate can meet with you and the child to help explore the process. Together you can discuss ambiguous feelings or conflicting thoughts that the child/young person is having about the process.

What happens if children and young people don't know what they want to talk to the DHR about?

Your support and encouragement can help children and young people decide what information they want to share with the chair and the wider review. An advocate or our e-learning training can provide guidance about the questions that might be asked and the areas that the Review is interested in. It can be helpful for children and young people to think through with you what they want to talk about, it's important to reinforce that they have the choice to share what they want to share.





Will children and young people have to attend court or give evidence under oath?

A Review is different from any family court or criminal justice proceedings and it should feel distinct and separate. Involvement should be a chance for children and young people to share their story in a way that is comfortable and age appropriate. Their engagement isn't evidence, and it can be as informal as the child is comfortable with. They can have a conversation at school or in another safe place that they identify.

There is no set formula for engagement between DHR professionals and children and young people, it can be via telephone, email or video call. Pets, family members and favourite toys can all support children and young people to talk to you as a professional.

Will children and young people be traumatised by DHR related questions?

Professionals, friends and family often take pains to avoid re-traumatising children and young people, but this needs to be balanced with silencing and gatekeeping. Realistically in the moment they might find it hard to answer questions about difficult memories, and they might need your professional expertise to help manage strong emotions. Do warn them and their carers that they might have more dreams, nightmares or flashbacks as a result of your conversations and that they can be managed, as part of the healing process. Remind them people that they can always ask to stop, take a break or finish on another day. It's worth reminding them that although the professional's purpose is to establish a timeline and learning, professionals understand that because of trauma memories aren't stored in a linear way. Do give reassurance that there is no pressure to answer questions if they have gaps in their memory. Information information might come back later, that's normal and to be expected. As the professional you will have questions, but your engagement with them is to facilitate their voice and hear what they want to tell you. There is no 'right' information from children and young people – insight should be led by their needs and priorities.

It might be a good idea to ask them if they have questions that they want the review to cover, what gaps do they have and are there areas that they want to know more about.