

Lessons Learned Briefing

Domestic Homicide Review - Victim B

This brief is based on the findings from a Domestic Homicide Review (DHR) undertaken by Safer Leeds. The purpose of a DHR is to learn lessons and improve future responses to domestic violence. We aim to demonstrate respect and compassion to victims and their families and to represent the victim's voice wherever possible.

What happened?

Victim B was a 21 year old British woman of Asian heritage who was in a relationship with a 24 year old British man of Asian heritage. They had separated and reconciled several times over a period of years and were separated at the time of the murder. The perpetrator had a history of drug misuse and violence. Victim B's family did not approve of the relationship and she was subjected to a forced marriage abroad. She fled this marriage and, on her return to Britain, reported that her husband had been abusive. Victim B resumed her relationship with the perpetrator and became pregnant. Her family's disapproval intensified and she was forced to leave the family home and live in a hostel. She told the police that she and her partner received threats from her family. She was in contact with many agencies and would engage and disengage over the years.

Following a serious assault on victim B and her daughter, the perpetrator was arrested. There was an interim care order and a MARAC referral at this time. The perpetrator was released on bail and Victim B retracted her statement.

Criminal charges were then dropped but the child was placed for adoption. A Year later, Victim B died after sustaining a knife wound inflicted by the perpetrator. He called 999 immediately after inflicting the wound. He later received a Life sentence after being convicted for Murder.

What did the review tell us?

This young woman was extremely vulnerable and had experienced multiple forms of abuse throughout her life. She found it hard to trust services and was perceived by agency staff as aggressive and able to take care of herself. She was at risk of multiple forms of abuse, sometimes from her own family and other times from her partner/ex-partner.

The victim's complex needs and presentation meant that no one service alone was able to offer her the support she needed. At times, referrals were made without her understanding or consent. This young woman made repeated presentations to multiple services but also disengaged regularly. Agencies did not always explore this with her or appear to understand the reasons for disengagement. They did not regularly assess risk, critically question or persist in offering suitable help.

For further information you can contact the DV team at Leeds City Council on 0113 3789682.

What can we do now?

Risk Assessment: This should take account of family members who are supportive and those who pose a risk. Family networks can be a protective factor however they can also be a source of risk in some cases. If we use presentation solely to assess vulnerability, we may miss risk factors and it is critical to include service users in assessing risk and needs. Consider the impact of experiencing multiple forms of abuse over years as well as recent incidents. Long term abuse may have a significant effect on self-esteem, coping strategies and trust in services. Assess risk regularly, take advice from safeguarding leads and follow safeguarding procedures. If you are concerned about the level of risk, check whether a risk assessment has been undertaken by another service involved and if not, ensure that you or someone else addresses this.

Restorative Practice: Working *with* someone who is vulnerable rather than doing things *to* or *for* them should mean gaining consent for referrals wherever possible. If risk is high, this is not always possible. In cases where action is taken without consent, we should explain our reasons to the service user. It is particularly important to work in this way when someone has multiple and complex needs.

Asking the Question: If you are concerned about someone and think they may be experiencing abuse, ask direct questions without showing discomfort or judgement. If you are part of a universal service such as health services or housing, this is particularly important as many victims will not attend specialist domestic violence services.

Needs & Experiences of BME Communities: Be mindful of and responsive to the many diverse communities in Leeds and educate yourself and your staff about the issues that may affect them. Consider the barriers to seeking help such as the impact of Honour Based Violence and how this might increase the risk and isolation for the victim. Try to communicate this understanding without making assumptions when speaking to an individual. Ask respectful questions about someone's culture and / or religion to help

Engagement: Keep the door open, consider why someone may resist or disengage. This does not necessarily reflect their needs or risk levels and could depend on many things e.g. how safe they feel to be in touch with services and whether risk has increased or reduced. Agencies need to develop disengagement procedures to ensure those most at risk do not fall through the net and that staff do not have to make decisions to accept service user disengagement based solely on availability of time or resources