The Enemy Within
4 million reasons to tackle family conflict and family violence

Up to 75% of children on child protection orders in some areas are on the registers at least in part because of concerns over domestic violence in the family.
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Introduction and executive summary

All too often the violence depicted within families focuses on intimate partner violence, or what is usually called domestic violence. However, 4Children's research shows a wider picture of conflict and violence that encompasses the whole family – where both children and parents can be both victims and perpetrators.

The evidence suggests that violence is more widespread within the family than was previously thought: for example, adolescent on parent violence is a growing problem. Whilst acts of physical violence are not the ‘norm’, the various forms of general conflict that can lead to that violence are worrying prevalent and becoming of greater concern to professionals who deal every day with the impact and repercussions on children and on families.

Family violence is born out of family conflict. Verbal abuse, arguments over family finances and disputes between parents and their children are all part of a disturbing portrait of family life in many homes in Britain. Our research shows that around 4 million parents with dependent children in this country experience regular conflict. This is of huge concern because studies show that conflict even without violence has a similar impact on children as physical abuse. A survey carried out by YouGov on behalf of 4Children reveals that as many as close to 53% of parents with dependent children experience serious or frequent conflict.

The increasing stresses faced by families are clearly taking their toll, with the same survey showing that 21% of parents with children under 18 report conflict over serious financial worries and debt. Even more worrying than the prevalence of family conflict is the lack of early support and intervention for families.

Children are overwhelmingly the victims: 950,000 children are affected by domestic violence, either directly as victims of violence, or indirectly in terms of witnessing violence. Not only does it have a psychological and emotional impact on children, but new research shows that it also has an impact on children's brain development.

Like many problems that can lead to family breakdown, family conflict and violence can often remain hidden within families for years because of a reluctance to openly admit to the problem and seek help. This report is the third Give Me Strength report to be published and joins the Crash Barriers report into preventing family crisis, and the Suffering in Silence report into postnatal depression, maternal health and family crisis. These reports link together to argue for a new approach to strengthening support for the most vulnerable families to prevent crisis developing.

What is family violence?

Family violence is any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between people who are or have been family members or intimate partners, regardless of age, gender or sexuality.

The victims of family violence

The impact of family violence falls heavily on women – with 10% of all women experiencing domestic violence every year and two women killed each week as a result in England and Wales. It is estimated that around half of these women have children living with them.

Its impact on children is also profoundly troubling in its scale. Not only are children most likely to be made homeless as a result of family violence (almost 18,000 children stayed in a domestic violence refuge in 2009/10),
the largest single group of people who stayed there), they are also at risk of serious injury and murder – every ten days in England and Wales a child is killed at the hands of their parent8, while hundreds of thousands of children grow up suffering from the emotional and psychological damage of experiencing, or witnessing, family violence. The latest scientific research shows clearly that children exposed to a family atmosphere of domestic violence are just as adversely affected in terms of their brain development as children who are directly subjected to physical violence.

Family violence does not affect all women and children equally. Particular groups of women (the young, pregnant women, women who have recently separated from their partners) are especially at risk, as are those who have experienced domestic violence in the past.

Domestic violence against men is also significant in its scale – men make up around one third of all domestic violence victims9, a significance which is very likely to be carried over into the scale of family violence once sibling on-sibling, parent-on-child and child-on-parent cases are considered together.

Cost

The terrible cost of family violence to children, families and wider society means that it is right to be addressed by 4Children’s Give Me Strength campaign – which aims to prevent family crisis.

Violence within the family threatens lives, breaks up families and has severe ongoing psychological and physical effects on hundreds of thousands of parents and children every year. It is one of the biggest causes of family crisis in the UK, one which puts lives at risk, isolates people, undermines good mental health and costs the taxpayer in excess of £3.1bn per year10 in costs to the NHS, the courts and social services. The prevalence of domestic violence and its negative impact on children is well documented.

Of the 120,000 ‘troubled families’ which the Prime Minister has committed to turning around before the next election11, an estimated 80% have been in contact with the police or the NHS in relation to domestic violence. Even more worryingly, children who face or witness family violence in the home are significantly more likely to commit other crimes in later life – including a dramatic increase in their likelihood to commit sexual assault. 12 Unless urgent action is taken, it is clear that this cycle of violence will continue to plague families for generations to come.

Reducing family violence must become a key measure of any ‘payment by results’ scheme for the programme, alongside re-entering employment, reducing run-ins with the law and reducing serious health problems. Up to 75% of children on child protection orders in some areas are on the registers13 at least in part because of concerns over domestic violence in the family.

Current approaches to family violence

Though the impact of domestic violence is widely recognised by public authorities and charities, and is highlighted by organisations such as Women’s Aid and Refuge, the awareness of family violence – including child on parent abuse, sibling abuse and in the wider extended family – remains low.

In our research for this report, family violence survivors told us that they often lived with violence for some years before they sought help, and waited even longer before they received that help. Survivors appear to be suffering needlessly for years, causing increasingly serious and dangerous long-term impacts, both psychologically and physically.

However, despite a large proportion of local authorities, police forces, NHS Trusts and children’s centres having domestic violence strategies or policies in place; despite specific NICE guidelines recommending that healthcare professionals be “alert to the symptoms of domestic violence”14, and despite cross-party commitment to investing in early intervention, opportunities for intervention are routinely being missed. It is clear that the impact of family violence does not receive the attention it desperately needs on a nationwide basis.

This report highlights the importance of reducing family violence in preventing family crisis and allowing children to flourish. Effectively tackling family violence will also be essential if a number of the Government’s domestic priorities are to be successful:

- Of the 120,000 ‘troubled families’ which the Prime Minister has committed to turning around before the next election15, an estimated 80% have been in contact with the police or the NHS in relation to domestic violence. Reducing family violence must become a key measure of any ‘payment by results’ scheme for the programme, alongside re-entering employment, reducing run-ins with the law and reducing serious health problems.

- The Government’s commitment to reducing the number of children exposed to harm16 must recognise that around 950,000 children are exposed to violence in the home every year.17 No real progress can be made in guaranteeing children’s safety without addressing family violence.

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10 Walby (2004)
11 England riots: Broken society is top priority – Cameron (2011) BBC News Politics (Online) Available at: http://www.bbc.co.uk/news/uk-politics-14524834
12 Drininger (1996)
13 Hester and Pearson (1996)
14 NICE Clinical Guideline (2003): 1.5.5. p.14
15 England riots: Broken society is top priority – Cameron (2011) BBC News Politics (Online) Available at: http://www.bbc.co.uk/news/uk-politics-14524834
16 Stop sexualising children, says David Cameron (2010) BBC News (Online) Available at: http://news.bbc.co.uk/1/hi/8521403.stm
17 This figure was extrapolated by 4Children using British Crime Survey figures 2004, 2009
• The Government’s renewed focus on ‘life chances’\textsuperscript{18} for the poorest children must take account of family violence – life chances cannot be effectively improved without addressing the destabilising and damaging influence of violence at the heart of family life.

• The emerging cross-party commitment to early intervention and delivering better value to the taxpayer, highlighted by the work of Graham Allen MP\textsuperscript{19}, Frank Field MP\textsuperscript{20} and Louise Casey\textsuperscript{21}, the Head of the Troubled Families Team in the Department for Communities and Local Government, is joined by the push for early intervention from the general public – including campaigns like Give Me Strength. Commitments to deliver real change, invest more efficiently and intervene early to prevent crisis form the very core of this report into domestic violence. Given the overwhelming cost of domestic violence to the country, families and the children involved, any shift to early intervention that does not include reducing family violence would be unable to deliver the intended benefits.

Why do we need to act on family violence?

To further identify the extent of family violence, 4Children made a number of Freedom of Information requests to police forces and local authorities across the UK. The information they returned reveals how widespread the experience of family violence is across the country.

25% of all domestic violence recorded nationwide over the last two years\textsuperscript{22} was committed by family members who were not intimate partners.

These figures are also likely to hide the true extent of family violence. Of the forces we questioned, 76% were unable to tell us how many of the incidences of domestic violence they recorded were committed by family members and how many were committed by intimate partners. Only 20% of forces could identify any differences between their approach to dealing with incidences of domestic violence based on the relationship of the perpetrator to the victim.

While it is clear that there has been a long commitment to tackling domestic violence across the community – including from the police, the health service, local authorities and children’s centres – there remain some alarming gaps in the services currently being provided, particularly with regard to family violence:

• Nearly half of all local authorities use a definition of domestic violence that includes reference to violence committed by family members who are not intimate partners.

• 85% of police forces were unable to provide any breakdown of the number of incidences of domestic violence that were committed by family members.

• Only 14% of police forces offered family focused domestic violence support.

• A minority of local authorities lack the basic building blocks for ensuring that families have the support they need when dealing with domestic violence:
  » 11% lack a domestic violence strategy entirely
  » 16% have a strategy that has either expired or is still in draft form
  » 18% do not have a functioning domestic violence partnership of any kind in place
  » Around a quarter have a partnership that lacks key partners – including schools, hospitals and the voluntary sector

Approximately 4m parents with dependent children are currently having ‘serious and frequent conflicts’ in their family.

• Even where excellent family violence support services exist, parents often do not know how to access it.

• The provision of domestic violence services appears to be coming under threat – a recent study assessing the impact of national budget cuts on local domestic violent services\textsuperscript{23} found that there was a 31% cut in local authority funding of domestic violence and sexual services between 2011 and 2012, a reduction of £2.4m (from £7.8 million to £5.4 million).

• The scale of family violence shows no sign of abating – 4Children’s Family Violence survey highlights that approximately 4m parents with dependent children are currently having ‘serious and frequent conflicts’ in their family.

\textsuperscript{18} Iain Duncan Smith: Child poverty approach ‘set to fail’ (2011) BBC News Politics (Online) Available at: http://www.bbc.co.uk/news/uk-politics-15996253
\textsuperscript{19} Allen (2011)
\textsuperscript{20} Field (2010)
\textsuperscript{21} Troubleshooters scheme to tackle ‘troubled families’ (2011) BBC News Politics (Online) Available at: http://www.bbc.co.uk/news/uk-politics-16187500
\textsuperscript{22} From those police forces who were able to provide a breakdown of domestic violence incidence
\textsuperscript{23} Walby and Towers (2012)
What should be done?

In order to truly make an impact on family violence in the UK, to reduce the ongoing harm done to children, parents and families, and to limit the cost of family violence to society as a whole, it is clear that a new approach – one focused on prevention and early intervention and covering the breadth of family violence – is necessary.

Intervening early to protect victims from the effects of family violence is central to both reducing harm and breaking the long-term cycle of violence. Existing research shows us that people who live with domestic violence are at increased risk of emotional trauma, mental health difficulties and behavioural problems in adult life, even if they are not targeted themselves.24

There is also evidence to suggest that children who are exposed to violence and maltreatment at an early age are more likely to become perpetrators of crime, including domestic violence, in the future.25

Only by intervening early – and decisively – can we break the cycle of family violence, and lift the shadow of family violence from relationships across the country.

In order to embed prevention at the heart of the response to family violence provision, and ensure that all perpetrators and victims of family violence can be identified:

- Local authorities, police forces, health professionals and children’s centres must embrace a definition of violence that specifically refers to violence committed by family members – and ensure that that definition influences the delivery of all their domestic violence services.

- A whole-family approach to dealing with family violence must be embraced to ensure that people are given the relationship and parenting skills that they need to deal effectively with family conflict and recognise the signs of an abusive relationship, and respond appropriately.

- Sufficient funding should be made available to services which deal with the sharp end of family violence, such as refuges, shelters, and violence prevention programmes.

- Family violence provision must be mainstreamed into current government policy, to ensure that those who really need help get access to it, early and often.

Government, both local and national, voluntary organisations and statutory professionals must also come together to provide specific early intervention support, including:

- Bespoke programmes addressing adult or adolescent violence.

- Programmes designed to develop relationship and parenting skills, to enable parents to resolve conflicts with each other and with their children.

- Awareness raising programmes, to equip young people and adults to recognise unhealthy and abusive relationships, and identify the route to improve or leave them.

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24 Morley and Mullender (1994); Hester et al (2000); DCSF (2009)
The impact of family violence

According to the 2009/10 British crime survey\textsuperscript{26}, nearly 1 million women experience at least one incident of family violence each year.

Family violence is the major cause of injury for women under the age of 60\textsuperscript{27}.

According to the British crime survey 2004/05\textsuperscript{28}, at least half of the women who experienced family violence had children living with them – equating to around 950,000 children a year\textsuperscript{29} who experience, or are exposed to, family violence.

According to the Munro report, 69\% of high-risk adult victims of domestic abuse have children\textsuperscript{30}.

Family intervention services have found that in almost a third of families (30\%) on Family Intervention Projects, the presence of family violence was seen as a major risk to their family functioning\textsuperscript{31}.

In some areas nearly three quarters of all children on child protection plans come from households where domestic violence occurs\textsuperscript{32}.

An estimated 79\% of the 120,000 troubled families that the Prime Minister has pledged to turn around experience family violence in some areas\textsuperscript{33}.

As many as one in three divorces brought forward in the UK include reference to domestic violence\textsuperscript{34}. And of 2,500 families entering mediation around divorce, approximately 75\% of parents indicated that domestic violence had occurred during the relationship\textsuperscript{35}.

4Children’s Family Violence survey\textsuperscript{36} revealed that:

- 54\% of people thought that verbal insults happen in typical families from time to time
- 18\% agreed that destroying possessions was typical in families from time to time
- 17\% thought ‘threatening and intimidating’ behaviour was typical in families from time to time
- 8\% agreed that physical fighting with injuries happens in typical families from time to time

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\textsuperscript{26} Crime in England and Wales 2009/10: Findings from the British Crime Survey and police recorded crime, Home Office
\textsuperscript{27} DoH (2010)
\textsuperscript{28} Walby and Allen (2004)
\textsuperscript{29} By 2009, women had an average of 1.9 children (ONS, 2010)
\textsuperscript{30} Munro (2010)
\textsuperscript{31} DfE (2011)
\textsuperscript{32} Taskforce on the Health Aspect of Violence Against Women and Children (2010)
\textsuperscript{33} Lecture on Troubled Families, Louise Casey, 28 February 2012 - figure refers to the London Borough of Croydon
\textsuperscript{34} Borowski, Murch and Walker (1983)
\textsuperscript{35} Hirst (2002)
\textsuperscript{36} n=1018, Yougov survey undertaken for 4Children February 2012 (See Annex C)
### 4Children’s Family Violence survey: the findings

YouGov carried out a poll with 1,018 parents with teenage children on behalf of 4Children in February 2012. The full tables of responses are attached at Annex C.

**The survey found that:**

- **53%** of all families with children experience serious or frequent conflict
- **21%** of all parents with children have serious or frequent conflicts over financial worries or debt
- **20%** of all families with children have frequent or serious arguments with teenage children

#### Conflict expectations

- **40%** of respondents felt that making another person feel stupid happened occasionally in typical family conflicts
- **18%** felt that physical fighting without injuries happened occasionally in typical family conflicts
- **17%** felt that threatening or intimidating behaviour happened occasionally in typical family conflicts
- **8%** felt that physical fighting with injuries happened occasionally in typical family conflicts
- **3%** felt that unwanted sexual acts happened occasionally in typical family conflicts

#### Conflict experiences

- **29%** of respondents said verbally insults ever happened during family conflicts
- **21%** said someone had been made to feel stupid during family conflict
- **9%** said possessions had been destroyed during family conflict
- **10%** said physical fights ever happened during family conflict, almost one third of which said involved injury (3%)
- **2%** said unwanted sexual acts had happened during family conflict

#### Help and support

- **23%** would have liked to receive at least one form of additional help over what they received
- **23%** would have liked information about parenting teenage children and children with behaviour problems
- **20%** wanted someone safe to talk to about what was happening in their family (conflicts/arguments/violence) without fear of losing their children
- **17%** wanted more relationship counselling advice for both themselves and their partner

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37 n=1018 base 38 n=943 who had ever had conflicts in their family 39 n=157 who seeked help for conflict
## Recommendations from 4Children

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<th><strong>Widen the definition:</strong></th>
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<td>1</td>
<td>Definitions of domestic violence should be expanded in all statutory services to fully encapsulate family violence. The definition should stretch beyond intimate partners to include parent-on-child violence, adolescent-on-parent violence, extended family violence and domestic violence carried out by perpetrators under the age of 18.</td>
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<th><strong>Make family violence a high priority locally and nationally:</strong></th>
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<td>Make family violence a key interdepartmental priority for national government and for local authorities’ new health and wellbeing boards, to ensure that families receive the joined up support they need.</td>
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<th><strong>Introduce a ‘whole family approach’ to responding to family violence:</strong></th>
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<td>3</td>
<td>From contact with the police to support from family workers, to ensure that the whole family is strengthened and has the support they need to overcome their problems.</td>
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<th><strong>Raise awareness among professionals about the extent of family violence:</strong></th>
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<td>4</td>
<td>To ensure that victims of family violence can receive the support they need at the earliest opportunity, and that opportunities for intervention are not missed.</td>
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<th><strong>Recognise the impact of family violence in national initiatives to strengthen families and turn around crisis:</strong></th>
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<td>5</td>
<td>Make family violence a national or local measurement in the payment by results criteria for turning around 120,000 troubled families.</td>
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Move to an early intervention approach to prevent family violence and crisis:

a. **A Government lead to fund new approaches:** Government should sponsor new approaches to identify and respond to early signs of conflict and violence – including relationship classes, parenting classes, perpetrator programmes, family support and mental health support.

b. **Local public bodies to fund joined-up early intervention:** Children’s centres and schools should work with local authorities, health professionals and the police to provide local joined up networks of parenting and relationship support programmes.

c. **Up-skill professionals to respond early:** Government should train professionals including GPs, health visitors and midwives, school staff, early years workers and family workers to ensure that more professionals are sufficiently confident and skilled to identify and respond to family violence early when problems emerge.

d. **Set up a national network of family violence projects:** Share best practice and evidence of outcomes for programmes on family violence nationwide – possibly linking to the new Early Intervention Foundation.

e. **Stronger therapeutic support services for children and families in crisis:** To increase the specialist support for families already experiencing family violence, funded either through the Government’s Improving Access to Psychological Therapies programme or through the Child and Adolescent Mental Health Services programme.
A substantial body of evidence documents the prevalence and impact of family violence, and its long-term negative effects, as well as the associated risk factors.\(^40\)

The 2010/11 British Crime Survey estimates that there were almost 400,000 incidents of domestic violence in 2011.\(^41\) Crime survey data collected for the Home Office shows that 26% of women (1 in 4 women) and 17% of men (1 in 6 men) aged between 16 and 59 have experienced one or more forms of non-sexual domestic abuse during their adult lives\(^42\), equivalent to an estimated 4.5m female victims of family violence and 2.6m male victims.\(^43\) However, with less than 40% of incidences of domestic violence reported to the police\(^44\), the true scale of the problem may be significantly greater.

**Close to 53% indicated they experienced frequent or serious episodes of family violence, equating to approximately 4m families**

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**Relationship troubles?**

According to the Office of National Statistics, there are around 7.6 million families with dependent children in the UK.\(^45\) Children’s Family Violence survey reveals that a significant minority of the British population have profoundly unhealthy perceptions of acceptable relationship behaviour.

Of all those who responded:

- 53% indicated they experienced frequent or serious episodes of family violence, equating to approximately 4m families
- 18% agreed that destroying possessions happened from time to time in typical family conflicts, equating to 1.4m families
- 17% thought the same of ‘threatening and intimidating’ behaviour, equating to 1.3m families
- 8% and 3% respectively agreed that physical fighting with injuries and unwanted sexual acts happen in typical families from time to time, equating to 600,000 and 225,000 families respectively\(^46\)

These findings suggest that many people may be experiencing family violence, or extreme levels of family conflict, on a daily basis, but are not able to identify these behaviours as unhealthy. People with low expectations of respectful behaviour in relationships are also at higher risk of experiencing family violence.

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\(^40\) DCSF (2008); Hague (2009); NSPCC (2009); Taskforce on the Health Aspects of Violence Against Women and Children (2010)
\(^41\) Flatley (2011)
\(^42\) Walby and Allen (2004); Taskforce on the Health Aspect of Violence Against Children (2010)
\(^43\) British Crime Survey 2008/09
\(^44\) Walby and Allen (2004); Walker et al (2009)
\(^45\) The Office for National Statistics, (2012)
\(^46\) 1,018 UK parents responded to this question
There is also strong evidence of repeat victimisation. A review of crime in England and Wales between 2007 and 2008 showed that 45% of the victims of domestic violence were likely to experience repeat victimisation\(^{47}\), and that one in four victims of domestic violence are likely to experience domestic violence three or four times in less than one year.\(^{48}\)

It is clear that domestic violence rarely exists without other complex family problems – our surveys and case studies highlight a range of other problems (such as depression, alcohol and drug abuse) which significantly impair the ability of parents to meet the needs of their children, and to maintain positive, healthy relationships with each other.

We believe that a number of key changes to the way that government, professionals and society deal with family violence will reduce the harm done to victims of family violence, give vulnerable people the skills and resources they need to avoid being trapped in violent circumstances, and ensure that all services respond appropriately when people approach them for help.

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CASE STUDY

**Children caught up in family violence**

Michelle is 30 years old. She has three children, two boys and a girl, all under the age of 10.

“It’s hard to say when it started. I would say after six months. I was at a party and he started to get jealous. Very jealous indeed. You know, alcohol did things to him and he lashed out.

“But when the effects of alcohol had worn off the next day, I never heard him say sorry. He would try to explain it away by telling me his ex-girlfriend used to act like that – she would go too close to people. He might use the word sorry, but it wasn’t an apology: he would twist it so that by the end I was thinking that it was all my fault. I would know logically that it wasn’t my fault, but at the time I would feel as if it was. And in the end I would be the one running to him to apologise to make the situation better.

“My breaking point was when my partner started hitting the children. He didn’t hit them at first, although they were always getting affected by the violence – he would always have ways of affecting them through me.

“He was angry, he was always really angry. But then it developed, he would be shouting at me and I would take one of the children and go through a door and he would slam the door on me and my son who would get caught.

“One day, he was really angry. My son was about 5 and was asking all these questions the way children do: ‘What’s this?’, and ‘What’s that?’ My husband would just say to my son, ‘Get out of here, get out of the way’ and he cut his toe, because his toe got jammed in the door as my husband pushed him away angrily.

“The police did nothing, they just gave promises, but they did nothing.”

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\(^{48}\) Ibid.
Chapter 2
Identifying the risks of family violence

Understanding the risk factors that enhance the vulnerability of individuals to family violence may help us to recognise key intervention points, including who needs protecting the most and what the appropriate support and help would be for those groups.

Particular individuals are significantly more at risk of experiencing domestic violence than others. Domestic violence is the only category of violence for which the risk for women is significantly higher than for men. Metropolitan Police domestic violence data shows that between the financial years of 2003/04 to 2008/09, 71% of the total victim count were women, 29% men.49

Strong evidence highlights that women are particularly at risk at key points in their lives: when they are younger (aged 16-2450), when they have recently separated (post-separation abuse is prevalent across both heterosexual and same-sex relationships51), and when they are pregnant.52

Repeat victims of violence, particularly where the violence had taken place more than three or four times, are overwhelmingly women (89%).53 Pregnant women are also particularly at risk as 30% of cases of domestic violence start during pregnancy.54

Women are also more likely to experience violence after they have separated from a violent partner than women in any other relationship group (including those still in relationships). An NSPCC study (from police and children social services records between 2007 and 2009) showed that just over half the couples involved in domestic violence incidents were already separated, and that access to children and questions about the care of children post-separation were significant contributory factors in the incidents.55

As outlined above, children are also at high risk in family violence situations. Perpetrators who are violent towards their partners are also frequently violent towards their children. The link between child physical abuse and intimate partner violence is high, with estimates of child physical abuse taking place in between 30% and 66% of all households where domestic violence occurs.56 Further, the Munro report highlights that 69% of high-risk adult victims of domestic abuse have children.57

New immigrant children and highly mobile families can also be particularly vulnerable. An analysis of serious case reviews (SCR) in London58 found that 40% of the SCR families were highly mobile and 15% of the families were new immigrants from Africa, Asia and Eastern Europe, whose plight was worsened by not being sufficiently in touch with support services, and because of a lack of stable support mechanisms within their communities.

Particular groups of children and young adults are also at greater risk of domestic violence – including lesbian, gay and bisexual young people. There is growing evidence that young people who reveal their sexuality while living at home can be subjected to significant physical, emotional and sexual abuse – making them more at risk of suicide attempts, more likely to end up homeless and more likely to suffer long-term emotional issues.

Domestic abuse and violence is also a sizeable problem in same-sex relationships. It is reported that gay and bisexual communities experience domestic violence in a similar proportion to heterosexual women.59 Findings show that one in four of all lesbian and bisexual women have experienced domestic violence in their relationship, and two-thirds of these women say the perpetrator was a woman.60 Just over a third of men (35.2%) reported that they had experienced domestic violence in gay or bisexual relationships.61

50 Walby and Allen (2004)
52 Lewis and Drife (2006)
53 Taskforce on the Health Aspect of Violence Against Women and Children (2010)
54 Lewis, Gwyneth and Drife, James (2005)
55 NSPCC (2009)
56 Taskforce on the Health Aspects of Violence Against Women and Children (2010)
57 Munro (2010)
58 Background paper on London Serious Case Reviews Completed April 2006 – September 2009
59 Broken Rainbow (2005)
60 Donovan et al (2006)
61 Ibid.
Homophobic Family Violence

Godwin is a 20 year old gay man from an African background.

A year ago, Godwin’s family life dramatically worsened when his family, whom he lived with, discovered that he was gay. Godwin was subject to a cycle of abuse, ranging from not being allowed to eat with the rest of his family nor share kitchen utensils, to theft and financial abuse, with family members taking money from his bank account, to daily verbal assaults from family members, including his mother.

Six months ago, Godwin’s older brother and brother-in-law seriously physically assaulted him, and Godwin had to go to hospital for treatment. Despite this assault, he was then forced to return home as he had no access to other housing. Upon returning home, he continued to be abused and physically attacked by his family.

As a result of the situation he was living in, Godwin developed mental health problems and started to withdraw from the struggle of daily life.

Eventually, Godwin was referred to Galop after a violent intra-familial incident, and has been receiving support from Galop since that period. They have helped him move out of his family home and provided access to mental health support, but it is clear that it will be a long road to recovery for Godwin.

There is evidence to suggest that those who experience high levels of family conflict may also be at risk of family violence. 4Children’s recent Family Violence survey highlights high levels of conflict in many families, as set out in Figure 1 below. Only 7% of respondents said there was never any conflict in their family, and over half (52%) identified serious and/or frequent conflict.

Figure 1: The causes of frequent and/or serious family violence

- Redundancy / long term unemployment / serious financial worries
- One or more members of the family with alcohol or drug problems
- The poor mental health (e.g. depression) of one or more members of the family
- Long absences by one parent (e.g. because of working away from home) and re-adjusting
- Sibling rivalry between children
- Arguments with teenage children
- Disagreements over child discipline
- An affair / jealousy / lying by one or both parents

62 YouGov survey (February 2012) for 4Children (N=1,018 GB parents with children aged under 18)
Figure 2: Which, if any, of the following do you think happens in typical families from time to time?63

- Unwanted sexual acts
- One person making another person feel stupid
- Destroying possessions
- Physical fighting (with injuries)
- Physical fighting (without injuries)
- Threatening and intimidating behaviour
- Verbal insults
- Shouting
- Arguments

63 YouGov survey (February 2012) for 4Children (N=1,018 GB parents with children aged under 18)
Chapter 3

Family violence

We are using the term ‘family violence’ to include all incidents of domestic violence carried out by intimate partners or other family members, regardless of their age, gender or sexuality. Perpetrators of family violence can be children assaulting their parents, siblings assaulting each other, husbands beating their wives, or any combination or inversion of the above.

Though the effects and nature of violent relationships will vary between different groups of perpetrators and victims, each is likely to contain all or most of the most damaging elements of intimate partner violence – including cohabitation, financial and emotional dependency and other vulnerability issues.

CASE STUDY

Living with violent adolescents

Sandra, 42, has been living with her violent sons for over 14 years in the North of England. As far as she can remember they have always been violent.

At the age of 4, William was already hitting and kicking teachers. Sandra felt her boys were out of control so she turned to social services for help. Their response was to send Sandra to a parenting programme which, while it helped, was not well equipped to deal with the scale of Sandra’s challenges. Both her sons were subsequently diagnosed with ADHD (at the ages of 6 and 11).

By the time William was 9, Sandra’s parents had to call the police because he was choking his mother and they were afraid he would harm her further. Sandra had to attend A&E for her injuries. Once again, Sandra sought help from social services and this time she was sent to a Strengthening Families programme. But the problem was too serious.

She became absolutely terrified of her children as they entered their teenage years:

“I was totally frustrated that I couldn’t change things. They would trash the house, light fires in the house, punch holes in the walls, steal things... pin me against the door and put a knife to my throat. I just couldn’t take it anymore. I was so scared.”

Sandra lost count of the times that she called the police for help when the boys became physically violent:

“but they always returned them home after the incidents. I was absolutely terrified.”

As a result of these incidences, Sandra developed major depression.

Eventually, Sandra was referred to a specific programme through her social worker in her authority working with teenage perpetrators. The programme has worked with Sandra and her two sons over the last year, and Sandra finally feels that she has some control over her life, and is more able to manage her sons’ behaviours.
Increasingly, evidence is available that demonstrates the serious impact of child violence and highlights the need for urgent action. As outlined already, figures from the Metropolitan Police reveal that 20% of all incidences of domestic violence over the past two years were committed by family members. This adds to a growing body of evidence from organisations like national charity Family Lives (formerly named Parentline Plus), which received almost 7,000 calls from parents concerned about their child’s verbal and physical aggression between 2008 and 2010.64 This is an area which requires further research.

The increase in child violence is recognised as a growing problem in other countries. US data estimates the incidence of adolescent violence towards parents in couple families to be between 7% and 18%,65 while they reach almost 30% in one parent families.

Sibling and child violence is experienced by 44% of families with the most complex problems in Croydon. The new Family Violence Programme is working closely with these families through therapeutic support to reduce violence and conflict.66

While estimates of adolescent violence on parents are lower in Canada and Europe67, the numbers are still significant – with an estimated 10% of Canadian parents assaulted by their children.68 More locally, Condry and Miles found 1,914 reported cases of adolescent-to-parent violence in the Metropolitan Police area, most of which involved violence against the person (usually the mother) or criminal damage in the home.69

As with all types of family violence, the research and our case studies, suggests that women are at greater risk of domestic violence – overwhelmingly, it is mothers and female carers who are at risk of violence from their children.70

A 2005 US study also found that 35% of children had been hit or attacked by a sibling in the previous year; 40% of whom were attacked repeatedly, 13% injured and 6% attacked with a weapon.71

This explosion in family violence is also matched by a similar surge in child abuse cases. Child Help, a US based voluntary organisation helping victims of child abuse and neglect, has revealed a growing crisis in child abuse over the past ten years, as set out in Figure 3.

Figure 3: Child abuse in America72

Number of child deaths per day due to child abuse and neglect

It is clear that urgent action needs to be taken to reduce family violence, both in the UK and internationally, in order to give vulnerable family members the help they need to escape assault, abuse and even murder.

64 Parentline Plus (2010)
66 Figure from Croydon’s Family Resilience Service
67 Kennair and Mellor (2007)
68 DeKeseredy (1993)
69 Condry and Miles (2011)
70 Patterson et al (2002); Parentline Plus (2010)
71 Strauss et al, 1990; Finkelhor et al, 2005
Chapter 4

Violence as part of wider family conflict

Our survey showed that 23% of parents with dependent children (approx. 1.7m parents in the UK) reported ‘serious and/or frequent conflict’ over financial worries and 20% reported serious and/or frequent conflict over the behaviour of their teenage children.

Though family violence can be difficult to predict, we know that it rarely occurs in isolation from conflict. As such, family conflict can be the clearest, and earliest, indicator of who may be vulnerable to family violence. Consequently, if our goal is to intervene early to prevent the most negative consequences of family violence – then family conflict can be a key indicator of where attention should be focused.

While all families will at some point experience some form of conflict, the nature of that conflict differs wildly – in some cases it will be trivial, in others serious. Research has shown what helps families to be more resilient with their internal problems is having the appropriate support and knowledge – be they relationship or parenting skills – to address particular problems.

4Children’s Family Violence survey undertaken by YouGov highlights the nature and extent of major family conflict in the UK. Our survey showed that 23% of parents with dependent children (approx. 1.7m parents in the UK) reported ‘serious and frequent conflict’ over financial worries and 20% reported serious conflict over the behaviour of their children.

At the same time, we can see clearly the fine line that some families are treading between conflict and family violence. As part of the 4Children survey, we asked what sort of behaviour happens in typical families from time to time in the context of conflict.

The survey revealed that 54% of respondents agreed that verbal insults happen in typical families from time to time, 18% believed that destroying possessions happened and 17% thought ‘threatening and intimidating’ behaviour happened from time to time.

Though those who thought that unwanted sexual acts and physical fights (with injuries) may sound like small proportions of respondents, they would correspond to approximately 600,000 parents with dependent children, respectively. However, a much larger group thought destroying possessions happened from time to time during conflict in typical families (1.3m).

54% of respondents agreed that verbal insults happen in typical families from time to time, 18% believed that destroying possessions happened and 17% thought ‘threatening and intimidating’ behaviour happened from time to time.
Table 1: Thoughts on what might be typical in families

<table>
<thead>
<tr>
<th>Conflict Type</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arguments</td>
<td>86%</td>
</tr>
<tr>
<td>Shouting</td>
<td>77%</td>
</tr>
<tr>
<td>Verbal insults</td>
<td>54%</td>
</tr>
<tr>
<td>Threatening and intimidating behaviour</td>
<td>17%</td>
</tr>
<tr>
<td>Physical fighting (without injuries)</td>
<td>18%</td>
</tr>
<tr>
<td>Physical fighting (with injuries)</td>
<td>8%</td>
</tr>
<tr>
<td>Destroying possessions</td>
<td>18%</td>
</tr>
<tr>
<td>One person making another person feel stupid</td>
<td>40%</td>
</tr>
<tr>
<td>Unwanted sexual acts</td>
<td>3%</td>
</tr>
<tr>
<td>All Great Britain parents of children aged under 18 who were willing to take part in the survey</td>
<td>1,018</td>
</tr>
</tbody>
</table>

Though the number of parents who said that the types of conflict listed above had happened to them was smaller, the results it produced are of concern. Around 10% of families ever experience family conflicts in which physical fighting takes place, 3% said injuries happen during conflicts as a result of that fighting, 2% said unwanted sexual acts happen and around one quarter said insults happen (29%) or someone is made to feel stupid (21%). See Table 2 for further details.

It is clear from these results that a large number of families are currently experiencing family violence, or are perilously close to it.

Table 2: Respondents’ own family experiences

<table>
<thead>
<tr>
<th>Conflict Type</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arguments</td>
<td>64%</td>
</tr>
<tr>
<td>Shouting</td>
<td>57%</td>
</tr>
<tr>
<td>Verbal insults</td>
<td>29%</td>
</tr>
<tr>
<td>Threatening and intimidating behaviour</td>
<td>8%</td>
</tr>
<tr>
<td>Physical fighting (without injuries)</td>
<td>9%</td>
</tr>
<tr>
<td>Physical fighting (with injuries)</td>
<td>3%</td>
</tr>
<tr>
<td>Destroying possessions</td>
<td>9%</td>
</tr>
<tr>
<td>One person making another person feel stupid</td>
<td>21%</td>
</tr>
<tr>
<td>Unwanted sexual acts</td>
<td>2%</td>
</tr>
<tr>
<td>All Great Britain parents of children aged under 18 who were willing to take part in the survey</td>
<td>943</td>
</tr>
</tbody>
</table>

YouGov survey (February 2012) for 4Children

Family conflict is also damaging to family relationships, whether or not it spirals into family violence. Threatening and intimidating behaviour was a common theme in many of 4Children’s interviews and questionnaires with victims of family conflict. Many spoke about the impact that it would have on their children as well.
Family conflict on the edge of family violence

Michelle, 44, mother of two children, recalls:

“The bad thing was how it affected the lives of the children. He would usually go to the pub after work, and he would get home irate saying, ‘Watch those f****** little brats!’ So I would have to make sure that the children were already in their rooms whenever he came home – and make sure they didn’t come out.

“I constantly had to think: ‘They need to be in bed; it’s 8 o’clock. The children need to be up in their room before he gets home.’ It was a huge pressure on the children because they learnt that as soon as the front door goes, they need to stay in their room. Because it’s when they are out of their room that it kicks off and they then don’t get to bed on time because of the trouble and they have nightmares and get emotional.”

Michelle has been separated for two years now. She goes on:

“My eldest child says she is so much more relaxed now: when she goes to bed, there is no panic at the sound of a key going in the door; there is no fear if she needs to go to the toilet in the night.”
Chapter 5
The impact of family violence on children

950,000 children are affected by domestic violence, either directly as victims of violence, or indirectly in terms of witnessing violence.

The impact of domestic and family violence, and of family conflict, on children is increasingly recognised. A number of studies have highlighted the impact on children whether they are direct victims of violence, or whether they witness it in the home.81

We know that around 950,000 children are affected by domestic violence, either directly as victims of violence, or indirectly in terms of witnessing violence. An NSPCC study found that 8.4% of 18–24 year olds had experienced some form of physical violence by their parents or guardians during their childhood82, while the 2010 Taskforce on the Health Aspects of Violence against Women and Children found that in over half of domestic violence cases, children themselves are directly abused.83

Children can become involved in violence at home in a number of ways. They can become involved when trying to intervene during attacks between their parents; the abuse can be directed at them; or they may witness the abuse and violence directed at their parent by proxy of being either in the same room, or in a room next door.84

We also know that there are more children than women who become homeless as a result of domestic abuse and seek accommodation in refuges (there were 17,615 women in refuge compared to 17,785 children in refuges in 2009/10).85

The impact of violence on children’s physical, mental, cognitive and emotional health is widely noted. On average, every week in England and Wales at least one child is killed at the hands of another person.86 Those who experience physical abuse at the hands of family members face “hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating”87 and other forms of harm, sometimes on a daily basis – with all the negative health consequences that brings.

Children who live with family violence are at an increased risk of emotional trauma, mental health difficulties and behavioural problems in adult life, even if they are not targeted themselves.88

81 Mullender (2004); Mooney et al (2009)
82 NSPCC (2011a)
83 Figures supplied from Women’s Aid in relation to their refuges & other services covering 2009/2010
84 Mullender (2004)
85 Taskforce on the Health Aspects of Violence Against Women and Children (2010)
87 Department for Education and Skills (2006)
88 Morley and Mullender (1994); Hester et al (2006); DCSF (2010)
Research shows that even in non-violent environments, children still show considerable signs of anxiety and distress if they are regularly exposed to parental conflict. Indeed, research shows that children fare less well in intact families with high conflict than in lone parent families.

There is also evidence to suggest that family violence leads to an intergenerational cycle of violence. Children who are exposed to violence and maltreatment at an early age are more likely to become perpetrators of crime in the future. A study sponsored by the US National Institute of Justice (NIJ) found that those children who were physically abused were more likely to be arrested later in life for violent crimes themselves. The study found that those who were abused or neglected were more likely to be arrested both as juveniles (27% versus 17%), and as adults (42% versus 33%).

Children who were abused or neglected as children were also younger at first arrest, committed nearly twice as many offences and were arrested more frequently than those who were not officially abused or neglected.

Further, children who experience violence in the home are up to 24 times more likely to commit sexual assault than their counterparts from non-violent homes, and the research suggests that without help, one-third of those abused in childhood may abuse or neglect their own children, perpetuating an intergenerational cycle of abuse.

Without strong, early intervention to give families the skills and support they need to overcome violence and to give professionals the skills to see when family violence is happening and take action to stop it, the cycle of family violence will continue.

The strong link between intimate partner violence and child physical abuse has already been mentioned in this report, and there is some evidence to suggest that children may be victims of ‘cumulative disadvantages’ where the violence within the home is also linked to parental drug, alcohol or mental health problems. In cases of cumulative disadvantage particularly, professionals must be ready to identify the signs of family difficulties, ask probing questions to find out what support is needed, and work together to ensure that safeguarding protection is made readily available – it is clear that too often in current circumstances, family violence is missed.

But the evidence that children are also indirectly affected by violence in the home is also strong. International research both within the UK and Australia has shown that

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The impact of violence on children’s brains

The latest research has also found that family violence – whether experienced directly or witnessed – is associated with “altered brain functioning”, leading to children becoming ‘hyper-aware’ of danger in their environment.

In the first fMRI (functional magnetic resonance imaging) brain scan study to investigate the impact of physical abuse and domestic violence on children, scientists at UCL in collaboration with the Anna Freud Centre found that exposure to family violence was associated with increased brain activity in two specific brain areas (the anterior insula and the amygdala) when children viewed pictures of angry faces.

Previous fMRI studies that scanned the brains of soldiers exposed to violent combat situations have shown the same pattern of heightened activation in these two areas of the brain, which are associated with threat detection. The authors suggest that both maltreated children and soldiers may have adapted to be ‘hyper-aware’ of danger in their environment. These neural adaptations may help explain why children exposed to family violence are at greater risk of developing anxiety problems later in life.

This means that children in a home where there is domestic abuse – whether they witness the violence or who have themselves been physically abused – are more likely to be predisposed to either rage and conflict disorders on the one hand or to anxiety and depression on the other.

“The next step for us is to try and understand how stable these changes are. Not every child exposed to family violence will go on to develop a mental health problem; many bounce back and lead successful lives. We want to know much more about those mechanisms that help some children become resilient.”

Dr Eamon McCrory, Senior Lecturer in Developmental Neuroscience at University College London, Head of Postgraduate Studies at the Anna Freud Centre and Consultant Clinical Psychologist

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89 McCrory et al (2011)
91 Dinzinger (1996)
92 Kaufman (1987)
93 Taskforce on the Health Aspects of Violence Against Women and Children (2010)
children witnessing domestic violence have significantly poorer outcomes across a range of developmental, behavioural and emotional outcomes compared to children living without violence in the home.

More importantly, research shows that the outcomes of children witnessing violence are very close to those who were directly physically abused themselves.95

**CASE STUDY**

**Children living with violence**

“Well it was with my father. It was mostly verbal but I believe that the police also said it was mental abuse as well. When we (me, my brother and mum), entered the refuge I was given this booklet called ‘Living with a dominator’. It described him to the dot."

As remembered by a teenage boy on the Survivors of Domestic Abuse (SODA) Choices Project, Redcar and Cleveland.

There is also significant evidence to suggest that parental conflict in itself – without violence – can also severely impact on children’s mental and emotional well-being.96 Moreover, the impact of parental conflict can be long term and linked to future anti-social and offending behaviour.97

**Supporting children to recover from family violence**

The picture is clear – children who experience violence, and even those who are not directly abused themselves but witness it, often experience ongoing disruption to their lives, mental health issues and problems with the law throughout their lives.

Despite this, we understand from professionals (child psychiatrists, clinical psychologists, psychotherapists, refuge managers) that unless children immediately display mental health problems (e.g. rage disorders, anxiety or depression), they are unlikely to receive any therapeutic services, despite clear evidence setting out that intervening early with children at risk of developing psychological and conduct disorder issues reduces long-term health costs, poor educational outcomes, crime and unemployment later on in life.98

It must be said that many children display remarkable resilience, and appear to cope well with the stresses of family violence and conflict.99 However, resilience can become ‘bottling up’ and many of those children will go on to develop or show problems associated with family violence later in life.

A ‘whole family approach’ is essential in this regard – looking at the needs of parents and children together to strengthen and rebuild the family. 4Children believes that universal early intervention is crucial if we are to ensure that no child falls through the gaps of support services. Though initial costs may be high, and though concerns have been raised about the effectiveness of ‘whole family approaches’ in some circumstances, it is clear that this approach will provide a cost-effective and family focused mechanism of support in the long run. Further, though the whole family approach does address the family together, safety is paramount, and ensuring that violence stops is the central premise of the programme.

**CASE STUDY**

**Supporting Young Men: The Choices Project**

The Choices Project, located in the North West of England, is one of the few male support groups for young males (13-25) in the UK who have been subjected to all types of family violence – physical, sexual, emotional, psychological or financial.

The group is a confidential and safe environment which offers a chance for young males to share their experiences with others who have been through events similar to themselves and to learn that they are not alone.

The group also runs activities where participants can enjoy themselves away from their usual environment such as rock climbing and bowling, as well as more focused support courses such as personal safety training, throughout a 12 week rolling programme.

95 Mullender (2004) and Humphreys (2006)
96 Mooney et al (2009)
97 Farrington and Loebler (1999); DCSF (2009b)
98 Farrington and Welsh (2007)
99 DCSF (2010)
100 Think Family: a literature review of whole family approaches (2008)
101 Survivors of Domestic Abuse (SODA) Redcar and Cleveland
Providing support for children who have been exposed to domestic violence

Experts from the Tavistock and Portman NHS Foundation Trust suggest that a whole family approach, dealing with all family members who may have been affected by family violence, could be a highly cost-effective way of supporting children (as well as parents) who have grown up in violent households. But they stress that although intervention helps, it can be a difficult process that requires special training for the professionals involved:

“As Family Therapists, we draw on the latest research and social context to understand and support families. We suggest that counselling interventions for mothers and children together where there has been violence as individual families or in multi family groups – and the inclusion of fathers carefully where it is safe to do so – could be a highly cost effective solution for the future health of children who have and continue to grow up in households where there is intimate violence. However, it has to be emphasised that careful training about intimate violence for those providing support is essential.”

Ellie Kavner, Consultant Systemic Psychotherapist at Tavistock and Portman NHS Foundation Trust

Early psychological therapy interventions can be used as a way of assessing if there are any developing problems and as a way of building up resilience (by getting to the child to focus on which of his or her strengths have helped them through the period of domestic abuse).

Early Intervention Programmes, such as Parent-Child Interaction Therapy should also be considered to reduce the amount of family violence that children experience. In the same way that bespoke programmes, such as Do It Different or Break for Change can help parents deal with aggressive and difficult children and teenagers, Parent-Child Interaction Therapy programmes show that they can help reduce the risks of child physical abuse and help parents build positive and nurturing relationships with their children.

CASE STUDY

Reducing the risks of child violence: Parent-Child Interaction Therapy

Parent-Child Interaction Therapy (PCIT) has been shown to have benefits in preventing recurrence of child physical abuse. It is a treatment for conduct-disordered young children that places emphasis on improving the quality of the parent-child relationship and changing parent-child interaction patterns.

PCIT, teaches parents specific skills to help establish a nurturing and secure relationship with their child while increasing their child’s pro-social behaviour and decreasing negative behaviour.

This treatment focuses on two basic interactions: Child Directed Interaction (CDI), which is similar to play therapy, in which parents engage their child in a play situation with the goal of strengthening the parent-child relationship; and Parent Directed Interaction (PDI) which resembles clinical behaviour therapy in which parents learn to use specific behaviour management techniques as they play with their child.

Parents show increases in reflective listening, physical proximity, and positive communication, and decreases in sarcasm and criticism of the child after completion of PCIT.

An evaluation of the programme showed parents who went through PCIT are less likely in engage into abusive behaviours, have slightly lower levels of depression than the control group, and engage less frequently in negative parenting techniques.

Chapter 6
Conflict and violence: Undermining parents’ ability to parent

There is widespread agreement that parents are the major influence on children’s lives, and a key determinant of their future life chances. In fact, what parents say and do (particularly at home) has such a huge impact that it can mitigate some of the effects of disadvantage that can appear intractable.

Violence, or serious and frequent conflict, in the home undermines the ability of parents to care for their children, for obvious reasons. When parents are recovering from injury, ‘treading on eggshells’ to delay the next bout of abuse, or doing what they can to deal with the mental and emotional implications of stress, their parenting skills will suffer – and that is only the parent experiencing violence. Needless to say, when a parent is violent, assaulting their partner or child or both, they are causing physical and emotional damage that will take years or decades to recover from.

In this context, we need to consider how parents’ capacity to facilitate the well-being of their children can be influenced by their own experience of family conflict and family violence. It is clear that belittling a parent in front of their children can not only affect the parent’s self-esteem but also impact on the authority they have over their children – several survivors of family violence who we interviewed raised issues in this regard.

CASE STUDY
The impact of violence
Sarah, 40, has separated from her violent partner, but his influence remains a destructive pattern in her children’s lives.

“Even with all of that time that went by, my two boys, they are still affected by what was happening.

“My oldest, who is 14, doesn’t want to see his dad, doesn’t want to have anything to do with his dad: he really, really hates his dad. My youngest hasn’t see his dad for nearly two years and he has just started seeing him in the contact centre. So because the elder one doesn’t see his dad, what I have to do after the younger boy sees his dad in the contact centre, they basically have separate times to talk to me about his things, so that the older one doesn’t hear about his dad. And that’s really never going to be normal.

“Since the younger one started seeing his dad in the contact centre he went backwards. He has a lot of violence problems, then he got better because he had a lot of counselling, but now he has started to go downhill again. Because of his behaviour indoors, which is quite angry, it involves his brother. And it may sound awful, but yesterday he was behaving like his dad used to behave.

“I can now deal with this, because I’m stronger. But even though I have managed to free myself from domestic violence, I still have it in my children.”
When abuse is more serious or more sustained, the impact on parents’ self-esteem can be significant – parents who have experienced abuse “are more likely to have physical symptoms and higher levels of depression, anxiety and low self-esteem”\textsuperscript{105} than those who have not been victims of family violence. While there are significant impacts of low self-esteem on battered parents themselves, there is also a sustained impact on their parenting skills.

Numerous studies have found that parents with high self-esteem are more capable and confident\textsuperscript{106}, that they are more aware and sensitive to the behavioural ‘cues’ of others\textsuperscript{107}, including their children, and that self-esteem affects the levels of affection\textsuperscript{108}, the confidence and frequency of interaction with children\textsuperscript{109}, and the strength of the parental bond.\textsuperscript{110} In short, parents with low self-esteem are likely to experience greater difficulty in raising their children.

When this information is considered alongside the increased likelihood for children who have experienced family violence to go on to commit more crimes\textsuperscript{111}, including family violence, it becomes clear that family violence can have significant negative impacts on the ability to parent – and that additional support needs to be provided to parents in these circumstances at the earliest opportunity.

\textbf{Strengthening parenting: Triple P parenting programme}\textsuperscript{112}

The Triple P – Positive Parenting Programme – has also been shown to have positive effects on reducing child maltreatment and injuries.\textsuperscript{113}

Triple P is a multi-level, preventative-focused parenting programme aimed to prevent severe behavioural, emotional and developmental problems in children by enhancing the knowledge, skills and confidence of parents. It incorporates five levels of intervention on a tiered continuum of increasing strength for parents of children and adolescents from birth to age 16.

There is clear evidence that the Triple P parenting programme can benefit children with disruptive behaviour disorders, particularly children with oppositional defiant disorders and their parents. It also helps with other disorders including attention-deficit/hyperactivity disorder, persistent feeding difficulties, pain syndromes, anxiety disorders, autism and developmental disabilities, achievement problems, habit disorders as well as everyday problems of normal children.\textsuperscript{114}

The Triple P programme also recognises that parents differ in their needs for intervention and tailors the programme accordingly: recognising other family problems including relationship conflicts and domestic violence.

Chapter 7

Is Britain doing enough to respond to family violence and prevent crisis?

The need to recognise family violence

Despite the substantial body of evidence setting out the breadth and depth of intimate partner violence, there remains a disturbing absence of analysis of other forms of violence within the home.

Mainstream definitions of domestic violence often address domestic violence primarily as a crime committed by intimate partners, and not by other family members.

Some progress has been made in this area in recent years. In 2005, the Home Office produced a nationally applicable definition of domestic violence (see box below), which makes specific reference to family members as potential perpetrators. However, there are a number of problems with the use of this definition.

Those who perpetrate sibling violence and child-on-parent violence fall outside the Home Office’s definition of domestic violence.

It is clear that support services and police forces will not be able to accurately get to grips with the issues raised in family violence cases, if all cases involving those under 18 (or those under 16 in Scotland) are not included.

Home Office definition of Domestic Violence (2005) 115

“Any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are or have been intimate partners or family members, regardless of gender or sexuality. This includes issues of concern to black and minority ethnic (BME) communities such as so-called ‘honour killings’.”

The definition’s focus on adults alone means that some perpetrators will remain undetected, while their victims may be denied access to the services they need to escape danger and build healthy relationships in the future. For example, those who perpetrate sibling violence and child-on-parent violence fall outside the Home Office’s definition of domestic violence. It is clear that support services and police forces will not be able to accurately get to grips with the issues raised in family violence cases, if all cases involving those under 18 (or those under 16 in Scotland) are not included.

Though the Home Office is currently consulting on extending the definition 116 above to include those aged 16 and 17, there does not appear to be a clear justification for excluding some perpetrators of domestic violence based solely on their age. While it would be necessary to deal with different perpetrators in different ways, we should not allow

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this to prevent incidences of family violence being recorded and reported. Practically, it is clear from the services provided by local authorities (gathered via Freedom of Information requests – see Annex A) to deal with domestic violence generally, and family violence more specifically, that the current definition makes little progress in ensuring councils and support services are able to engage effectively with family violence. In order to ensure that appropriate action is taken, family violence must be placed, alongside intimate partner violence, at the heart of domestic violence reduction strategies and tackled with the same vigour, rather than included as an afterthought.

Almost half (46%) of local authorities do not have a current domestic violence strategy which mentions violence committed by family members.

The current ongoing lack of recognition of family violence has clear implications for those who are seeking support as a result of family violence. Research by 4Children found that no authorities provide services aimed at either victims or perpetrators of domestic violence which are tailored to meet the needs of those who face abuse from family members. Similarly, when asked to discuss the difficulties local authorities had in providing services to victims of domestic violence, only 11% of local authorities made any reference at all to those who had experienced family violence.

However, the most significant practical issue when ensuring that family violence is tackled locally is that almost half (46%) of local authorities do not have a current domestic violence strategy which mentions violence committed by family members. With almost half of all local authorities failing to acknowledge that family violence is a form of domestic violence, thousands of cases of family violence must escape attention each year – and tens of thousands of opportunities for early intervention are missed.

In order to ensure that all possible forms of family violence are recognised, 4Children believes that the current Home Office definition should be replaced by the definition of family violence we are using for this report, outlined on page 3.

Some progress has also been made in recognising the harm that family violence can do to children, whether they are abused directly or indirectly. The Adoption and Children’s Act (2002) amended the definition of ‘harm’ to children to include ‘impairment suffered from seeing or hearing the ill-treatment of another’, effectively seeking to limit the placement of children in high-conflict homes.

Further, in her final report into child protection (2011) Professor Eileen Munro argued that practitioners should have a thorough understanding of child development and the impact of abuse and neglect on children’s life chances:

“It is known from research that certain features of family life are associated with adverse outcomes for children and young people. These include having parents with mental health needs or substance misuse issues, living in a home where domestic violence occurs, and living in poverty.”

Practitioners should also be aware of the impacts of delay (on the child’s physical, cognitive, emotional and psychological development) and the need for early intervention:

“Preventative services will do more to reduce abuse and neglect rather than reactive services.”

Finally, the Government’s consultation document, ‘Working Together to Safeguard Children’ (December 2009) is clear that safeguarding and promoting the welfare of children and young people is everyone’s responsibility, and that agencies should work together to analyse information so that the child’s needs and circumstances are prioritised. Section 11 of the Children Act 2004 places the same duty on the police, although it is not clear what actions the police ought to be taking when they attend domestic violence incidents where there are children present. In some instances, the police notify children’s social care in the area, but there is some evidence that this may overwhelm social care services and fail to identify particularly vulnerable children.
However, there is still considerable work to be undertaken to ensure that children receive the support they need when confronted with domestic violence or conflict. Although the research overwhelmingly states that children want and need to be able to talk about the domestic violence that they have experienced within their home, there is nothing in the system that refers children automatically to preventative and therapeutic services, once their parents or family have been identified as experiencing domestic violence.

“Grown-ups think they should hide it and shouldn’t tell us, but we want to know. We want to be involved and we want our mums to talk with us about what they are going to do – we could help make decisions.”

Do statutory bodies have the frameworks they need in place?

According to Freedom of Information requests sent by 4Children to every local authority in the UK (see Annex A) a large majority of local authorities had made positive steps in responding to domestic violence. Sixty five per cent had a current domestic violence strategy in place, 82% had a series of domestic violence partnerships including key players such as health care workers, children’s centres and schools, and many authorities had mainstreamed their domestic violence approach into all council business, by ensuring that the policies and staff of every team in the local authority had some regard to domestic violence.

Unfortunately, it appears from 4Children research that a minority of councils still lack the basic building blocks for ensuring that families have the support they need when dealing with family violence. Eleven per cent lacked a strategy entirely, 16% had a strategy that had either expired or was still in draft form, 18% did not have a functioning partnership of any kind in place and around a quarter had a partnership that lacked key members – including schools, hospitals and the voluntary sector.

Freedom of Information requests sent to all police forces in the United Kingdom (see Annex B) revealed the gaps in family violence support available. Of those police forces who responded (45 out of 52), 16% (7) still did not have a domestic violence strategy in place, and a further 4% (2) had a strategy that was under review or in draft.

Although the definition of domestic violence and/or abuse provided to police forces by the Association of Chief Police Officers and used by 72% of police forces does include reference to ‘other family members’ as perpetrators of domestic violence, this commitment is not carried through into the analysis or treatment of those crimes. Only around 20% of forces sought to identify the family relationship between the perpetrator and victim of family violence, while almost two thirds (60%) did not have a clear referral route for victims of family violence.

**Family violence questionnaire**

**Q:** “Were you happy with the help that you received?”

**A:** “The police were sometimes really nice and sometimes horribly unresponsive”

It is clear that in some places excellent models of dealing with family violence are in place (including Family-Nurse partnerships, Doing it Different and Family Foundations) risk-assessment tools and partnerships are used successfully and referrals to support services are carried out on a regular basis. However, in other places there are significant gaps in services. In three forces, for example, no family violence partnerships at all were in place, while interviews with survivors of domestic or family violence have highlighted the clear contrast between the proactive, positive approach of some police teams and the inaction of others.

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121 Mullender et al (2002)
122 ACPO (2008)
123 10 questionnaires completed by women in Yorkshire and the Humber
Coordinated community response

In 2011, Standing Together, a Hammersmith and Fulham based group which aims to overcome domestic violence, produced a report\(^{124}\) setting out the benefits of the Coordinated Community Response (CCR).

This approach, which was founded in Duluth, Minnesota, brings together a “system of networks, agreements, processes and applied principles created by the local shelter movement, criminal justice agencies, and human service programs”\(^{125}\) in order to ensure that in families where violence is prevalent that all family members receive the support they need.

The programme focuses on providing strong safeguarding action alongside perpetrator programmes and broad community involvement to ensure that perpetrators are held to account for their actions and are required to change their ways, while survivors are given the safety and space they need to deal with the violence they have experienced.

While the Hammersmith and Fulham report notes that this approach “is threatened by the current financial climate”, it is clear that CCR is an excellent model for early intervention, leads to the creation of strong and enduring partnerships, and can deliver long-term savings to the taxpayer while ensuring that victims of violence receive the support they need and perpetrators face up to their actions.

Budgets were also a key concern for some councils. In almost 30% of councils that were able to identify their domestic violence spend, resources committed to dealing with domestic violence made up less than 1% of the council budget.\(^{126}\) In a quarter (26%) of councils, domestic violence funding has declined over the past two years.

Further, a recent study assessing the impact of national budget cuts on local domestic violence services\(^{127}\) found there were significant cuts in local services that were preventing and protecting gender-based violence against women and girls. The study found that there was a 31% cut in local authority funding of domestic violence and sexual services between 2011 and 2012, a reduction of £2.4m (from £7.8m to £5.4m).

There is clearly a shortage of many support services, including those dealing with families in the direst need. A recent survey\(^{128}\) revealed that almost one in ten women were being turned away by Women’s Aid refuge centres on a daily basis due to lack of space. In addition, the study highlighted the impact of national cuts on other aspects of domestic violence services – RESPECT services, working predominantly with male perpetrators of domestic violence, had to reduce clients in 78% of the services that they provide.\(^{129}\)

Given the magnitude of the overall cost of domestic violence to society, cutting funding for prevention services does not make pecuniary sense. If local authorities are committed to handling domestic violence effectively, they must make the real strategic and financial commitments needed to tackle a problem of this size.

In a quarter (26%) of councils, domestic violence funding has declined over the past two years.

In the current austere times it is unlikely that local authorities will be willing to commit additional resources to support family violence programmes in isolation. It is therefore essential that broader, strategic links are made between family violence and wider health and well-being with a clear focus on early intervention to prevent family crisis.

Though the inclusion of ‘domestic abuse’ in the latest Health Outcomes Framework\(^{130}\) as a determinant of health

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124 Standing Together (2011)
125 Pence and McMahon (1999)
126 4Children Freedom of Information requests, see Annex A
127 Walby and Towers (2012)
129 Walby and Towers (2012)
has been a positive step, as with most other services it risks missing incidences of family violence and their impact on health. The inclusion of family violence within the framework would have the added benefit of raising awareness among health visitors and GPs to the possibility of abuse from family members – and of incentivising health services to tackle the issue head on.

This will mean ensuring that family violence becomes a key priority for the forthcoming Health and Wellbeing Boards, and that working to reduce family violence should be recognised in the new Payment by Results framework, alongside recognition for turning around the lives of troubled families.

Strengthening families to prevent violence: Family Nurse Partnerships

A comprehensive review of the interventions that prevent child maltreatment identified the Family Nurse Partnership ability to prevent child maltreatment and other domestic injuries.132

Family Nurse Partnerships (FNP) are a preventive programme for young first-time mothers. It offers intensive and structured home visiting, delivered by specially trained nurses (Family Nurses), from early pregnancy until the child is age 2.

FNP has been available in England since April 2007, and is being evaluated through a formative evaluation of the first ten sites, which completed early in 2011, and a Randomised Control Trial in 18 sites which will report in 2013.

The outcomes that are being measured include smoking during pregnancy, breastfeeding, admissions to hospital for injuries and ingestions, further pregnancies, and child development at age 2.

Integrating services and working together to help families to flourish

Even when local authorities, police forces and other services have the required frameworks in place – they need to be effectively led and managed. Evidence shows that this means that they need to be family focused, expertise led, linked into a range of key agencies and based on outcomes, not processes, in order to be successful. This is particularly true when family violence leads to the introduction of child protection measures.

As Professor Munro set out in her report133, vital revisions must be made to the statutory safeguarding guidance, ‘Working Together to Safeguard Children’ and ‘The Framework for the Assessment of Children in Need and their Families’, and their associated policies in order to ensure that all barriers to partnership working are broken down.

Further, Professor Munro recommended that the Government place a duty on local authorities and their statutory partners to secure the sufficient provision of local early help services for children, young and people and families. Also, that inspection frameworks should be reviewed to analyse the journey from a child seeking help, to the centrality of the child to the help that is made available, and the effectiveness of the services that are delivered.

4Children strongly backs these recommendations, and recommends the implementation of a similar approach, across the entire family violence spectrum, to ensure essential services are provided to any families experiencing trauma or conflict.

To succeed in tackling this major problem for so many families today, we need to see a family focused approach to violence, backed up by a statutory responsibility on local authorities to provide early intervention services – and a focus on outcomes rather than outputs.
CASE STUDY

Working in partnership: Wakefield

Wakefield provides an excellent example of a local authority which is working together to deliver the support that people experiencing family violence need. Via a simple online resource (Safe@Home134), the council sets out the range of services available, and details the partnerships which are working behind the scenes.

In one place, the following services can be accessed:

- Independent Domestic Violence advisors – to assess risks, intervene safely into family violence situations, and support those experiencing abuse
- Housing advice and options – to help materially support people to leave violent homes
- The Sanctuary Scheme – to support people to remain in their own homes, and heighten their safety while they are there
- Police advice – for those who need intervention from police officers, or information around bringing charges against perpetrators
- Family support – to provide support from a Senior Social Worker specialising in family conflict and violence
- Emotional support – to help deal with the emotional fallout of family violence
- Perpetrator programmes – in order to help people stop offending and bring their violent behaviour under control

Children’s centres and family violence

A 4Children survey of 118 children’s centres revealed that:

- In 88% of children’s centres with domestic violence policies, their definition of domestic violence included family members who were not intimate partners
- In 85% of children’s centres, some or all staff were trained to deal with family violence
- 98% of children’s centres had active family violence partnerships
- 62% of children’s centres carried out outreach work with families living in refuges
- 80% of children’s centres had witnessed an increase in family violence over the past two years

However, according to 4Children’s YouGov Family Violence survey with parents, less than 1% of parents had sought help from a children’s centre in regard to family conflict.
That strategic focus would also play a crucial role in bringing together the key services that families interact with every day, from schools to children’s centres to GPs. Though many have well developed safeguarding practices, and strong networks of professionals, a clear focus on family violence – including from siblings or extended family members – would give professionals the best possible chance of spotting abuse, and give victims the support they need to escape family violence.

Joined-up partnership working is crucial to those dealing with family violence, and the evidenced successes of joined-up approaches should provide strong motivation for those who are not responding to family violence in a joined-up way to develop that critical capacity.

A new whole family approach to early intervention to prevent family violence

As we have outlined, – the cost of family violence to individuals, families and the country as a whole is enormous. Estimates for costs to the taxpayer alone run from £2.3bn to £16bn per year135, while three victims of domestic violence die every week and thousands more suffer psychological and physical harm on a daily basis. When a wider consideration of family violence is taken, this cost will be even greater.

Our research shows that victims and perpetrators of family violence have multiple points of contact with both local and national bodies but too often important opportunities are missed, and help is offered too late – after significant and lasting damage has been done to individuals and families, and after extremely high costs have been incurred by society. Our 4Children Family Violence survey of parents with dependent children revealed that a staggering 72% of parents who sought help did not receive all the help they needed.136

It is clear from our conversations that when victims and survivors of family violence approach statutory services for support, they are often overlooked. Survivors of family violence who we spoke to revealed stories of chances missed and expectations dashed following contact with the police, and suggestions from trusted professionals (including solicitors) that they move back into their place of residence to increase their likelihood of being awarded custody of their children, we have also heard how GPs and other professionals have often seemed paralysed by indecision.

It is also clear from our analysis of local authority and police services approach to tackling family violence that the primary focus is combating violence once it has reached crisis stage, rather than helping families to build healthy, functional relationships.

Around 40% of all local authorities offer no specific early intervention support to either victims or perpetrators of domestic violence. Of those who do offer early intervention support for families, around half are not specifically aimed at reducing family violence, and engage with the issue only as part of a separate agenda – e.g. reducing reoffending, reducing teenage pregnancy or reducing drug and alcohol abuse. While strong examples of early intervention exist, it is clear that these best practice models are not being implemented by all local authorities. Opportunities to reduce harm, and limit family violence are being routinely missed.

For these reasons 4Children is calling for a new focus on early intervention to prevent family violence and conflict, based on the needs of the whole family – working with parents and children to strengthen and rebuild the family.

Working with the whole family - Domestic Violence Intervention Project

The Domestic Violence Intervention Project in west London provides a violence prevention programme for men and a woman’s support service for their partners and ex-partners, and they also offer therapeutic work with children who have witnessed violence.

All men are eligible for this programme, regardless of whether they have been convicted for domestic violence or not. Those men who are already known and involved with social services or have been through the family courts must be referred to the programme by their case worker.

There are approximately 32 sessions, which focus on participants’ anger management, skills to build better relationships and being a better parent.

The fee for the sessions is dependent on income, however if participants have been referred from another agency then there is no fee to pay.

The Domestic Violence Intervention Project, runs in three London boroughs and states that “outcome evaluations show that 70% of men who complete the programme stop using physical violence.”

135 Taskforce on the Health Aspects of Violence Against Women and Children (2010)
136 N=157
137 Select Committee on Home Affairs Sixth Report: Perpetrators (2008); Domestic Violence Intervention Project Factsheet
4Children’s Family Violence survey also revealed that 72% of those who sought help\textsuperscript{138} did not get all the support they would have liked to receive. Of those, 23% wanted more help dealing with their children’s behaviour, 20% wanted someone they could speak to confidentially, without risk of losing their children, and 11% wanted more counselling or therapy for their children.

Similarly, an NSPCC study evaluating domestic violence incidents (from police and children social services records between 2007 and 2009) found that just over half the couples involved in the incidents were already separated, and that access to children and questions about the care of children post-separation were significant contributory factors in the domestic violence incidents.\textsuperscript{143}

There is significant research to suggest that children post-separation continue to be at risk from the violent partner in the family.\textsuperscript{144} A recent study by the Family Rights Group\textsuperscript{145} found that, in 88% of cases, male perpetrators with a long history of domestic violence continued to have unmonitored contact with their children, despite the child safety risk they posed.

In addition, in a survey of domestic violence providers, Women’s Aid found that only a little over a half of the women (51%) felt that adequate safety measures were being taken to ensure the safety of their children and themselves before, during and after contact.\textsuperscript{146}

There is clearly a need to mainstream the treatment of family violence within local and national government agencies to ensure that when parents seek help, their needs are understood and they receive it promptly and effectively. There is also a role for additional training to up-skill professionals across a number of key agencies (health services, the police, legal teams, schools).

\begin{itemize}
\item 23% were subjected to physical violence
\item 6% were subjected to sexual violence
\end{itemize}

**Family Violence Questionnaire\textsuperscript{139}**

\textbf{Q}: “If another member of the family did not seek help for many years, what prevented you or another member of the family from seeking help?”

\textbf{A}: “I was ashamed; I thought I was doing something wrong. I was afraid he would take my children. He said I was imagining it and that he was looking after me.”

Working closely with families and understanding indicators and risk factors in abuse will be essential if family violence is to be prevented. One of the critical periods of potential vulnerability is the point at which a parent leaves an abusive relationship. Evidence shows that this is the most vulnerable and risky time for a victim\textsuperscript{140} and that perpetrators remaining in contact with children is often a sign of continued controlling, manipulative and violent behaviour.\textsuperscript{141}

At this stage many domestic violence survivors are in contact with the state in a number of areas – including the courts, housing services and the police. However, there is no indication that this contact has significant impact in limiting violence. A study of 200 women’s experiences of domestic violence commissioned by Women’s Aid\textsuperscript{142} found that 76% of women suffered from additional post-separation domestic abuse.

Of these women:
\begin{itemize}
\item 76% were subjected to continued verbal and emotional abuse
\item 41% were subjected to serious threats towards themselves or their children
\end{itemize}

\textsuperscript{138} N=157

\textsuperscript{139} 10 questionnaires completed by women in Yorkshire and the Humber

\textsuperscript{139} British Crime Survey (2009)

\textsuperscript{141} DCSF (2010)

\textsuperscript{142} Humphreys and Thiara (2003)

\textsuperscript{143} NSPCC (2009)

\textsuperscript{144} Richards, (2003); NSPCC (2009)

\textsuperscript{145} Family Rights Group (2011)

\textsuperscript{146} Saunders and Barron (2003)
Family Violence Questionnaire

Q: “If another member of the family did not seek help for many years, what prevented you or another member of the family from seeking help?”

A: “I grew up in an abusive home and thought it was normal.”

There is also a strong argument for a more proactive approach to ensure people have the relationship support they need to recognise unhealthy patterns of behaviour and escape potential violence. There has been a positive start in this regard, with the provision of £30m from government in relationship programmes until 2015/16. A further £20m has also been committed to providing family support when parents separate, helping families develop healthier relationships, and giving people the strength to question and resolve family conflict before it spirals out of control.

A decision to extend relationship courses, firstly to all those in need of support, whenever they need that support, but also pre-emptively via schools, children’s centres and through the community, would demonstrate a pro-active commitment to early intervention, and would help head off conflict and unhealthy relationships before they developed. It would also give family violence survivors – such as Michelle, see case study opposite – the skills they need to recognise family violence from the moment it occurs.

85% of children’s centres have some or all staffed trained in handling family violence

There are also a range of services which are well placed to identify potential victims of family violence early, and provide the support they need to deal with it, which are currently underused. As outlined, children’s centres tend to have a highly trained workforce (85% of children’s centres have some or all staffed trained in handling family violence), a strategic commitment to dealing with domestic violence (98% of children’s centres have active family violence partnerships and 62% carry out outreach work with families living in refuges) and a broad definition of domestic violence that includes most or all forms of family violence (88% of children’s centres with domestic violence policies, defined domestic violence as including families members who are not intimate partners).

It is hoped that these services, and their focus on family welfare, are set to develop further following the publication of the Munro Review of Child Protection, and the Government’s implementation of a more child-centred safe-guarding system driven by professional expertise rather than process. The report draws attention to the excellent work carried out by children’s centres in relation to early intervention – and praises their unique combination of health workers, (midwives, health visitors, nurses), family workers and early years professionals who can work together to provide the specific support that people may need when faced with family violence and act decisively to safeguard children.

CASE STUDY

Being aware it’s happening in your relationship

Michelle, 30 years old, and mother of three children says:

“I began to realise one day when I was at work, and I was on my break at work sipping coffee. There was a newspaper and it was domestic violence week. This paper had a test, and if you could tick more than 3 boxes then it meant that you were a victim of domestic violence.

“And I sat there and... yes, that’s down, that’s down too, that’s a tick, that’s in, that’s in that’s in. And then the penny dropped and I realised that it was happening to me.”

There are also 10 questionnaires completed by women in Yorkshire and the Humber.
From our Family Violence survey it was apparent that children’s centres are currently not viewed as a place of support for those who experience frequent conflict and or violence despite services being available.

However, this excellent service is not being fully taken advantage of by those at risk of family violence. Less than 1% of people in our Family Violence survey identified having sought support from children’s centres as a result of their family conflict/family violence issues. As a result, we recommend that government, both local and national, as well as children’s centres themselves, take proactive steps to raise awareness of the services they offer – and ensure that families know where to go when they need support.

Responding to child-on-parent violence

While cases of child on parent violence are a minority of family violence cases, there are some specific issues that make this form of abuse particularly difficult to deal with – requiring specialist attention from health, social services and the police.

Parents often find dealing with violence from their children particularly challenging – feelings of guilt are common, as are extended periods of denial. Further, many victims do not feel comfortable approaching the police around these issues for fear of losing their children. Often the causes of child-on-parent violence are complex and multi-layered – child perpetrators may have been abused themselves in the past, or experience frustration and anger which they find difficult to control due to emotional development difficulties, while others may have been exposed to violence outside the home.

Whatever the causes of child-on-parent violence, we know from our case studies, interviews and questionnaires that families often need urgent and repeated help to deal with the violence, and can be faced with professionals with little expertise in the matter and few options for providing help.

Building positive family relationships: Family Foundations

Family Foundations is a series of fun, participatory classes for first time expectant parents that aims to enhance parent and child wellbeing. Classes are held before and after birth, and aim to help couples develop the attitudes and skills related to positive family relationships.

The programme’s goals are to:
- Decrease postnatal depression
- Improve parenting sensitivity/warmth
- Decrease harsh parenting
- Foster positive couple relations
- Foster positive child self-regulation
- Decrease child behaviour problems

Research has shown that Family Foundations produces positive outcomes for family relationships, parenting quality and parent physical aggression to children, and child and parent emotional behaviour problems.

It also results in: higher social competence in children aged 3 and above, lower depression in mothers, lower parenting stress and lower aggression in boys.

4Children’s interviews with child psychiatrists and child psychologists reveal that in situations where parents lack strong parenting skills or have a reduced parenting capacity (possibly because of their own abuse), and live with children with high levels of frustration and aggression (e.g. because of Attention Deficit Hyperactivity Disorder or Tourette Syndrome or other impulse issues), these families are particularly prone to child-on-parent violence. The National Autistic Society also highlights the possibility of child-on-parent aggression or violence, providing helpful advice on managing aggressive behaviour from children with autism.

The justification for early intervention support is strong. Parents raising children with autism, ADHD and other behavioural disorders may benefit from specific parenting classes to address issues around impulsivity, aggressiveness, low frustration thresholds and de-escalation tactics. But it is also clear that parents who are living with violent children and teenagers (with or without behavioural disorders) also require bespoke programmes.

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151 Dr Samuel Stein, Consultant in Child, Adolescent and Family Psychiatry, and Dr Uttom Chowdhury, Child and Adolescent Psychiatry. Bedfordshire and Luton Child and Adolescent Mental Health Service.
that not only address and acknowledge the violence against the parent, but also recognise the importance of the relationship between parent and child. Our research suggests that there are just a handful of such programmes in the country — the Do It Different Programme (based on a successful American model addressing family violence called 'Step Up'), Break for Change, and Alternative Restoratives — to name a few.

If services are to properly respond to the threat of child-on-parent violence, an everyday reality in some families, increased focus on and support for services like *Do it Different* will be necessary.

As with relationship classes, there is a strong case for intervention to support parents to manage and prevent violence from their children. Again, the Government is taking promising initial steps by offering parenting courses to 50,000 parents in four pilot locations across the country. 4Children strongly supports a national extension of these programmes, but also recommends that Government invest further in early intervention by extending the length and coverage of these programmes, to ensure parents are well placed to give their children the support they need — from birth and as they grow up.

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**CASE STUDY**

**Reducing child-on-parent violence**

The Do It Different programme, established in Wakefield, arose after a snapshot audit of young people on Young Offender Teams and Court orders revealed that almost half had issues of domestic violence in the past or were still living with family violence. The Do It Different model is based on a successful American programme that addresses family violence, known as the Step Up Program.

*Do it Different* is:

- A 10 week group-work programme
- A parallel group-work programme working with young people and their parents/carers around issues of domestic abuse
- A programme specifically targeting adolescent young men perpetrating domestic abuse towards their mother/female carer or girlfriend
- A multi-agency programme working in partnership with Safe at Home and the Rosalie Ryrie Foundation
- A programme designed for young people and their parents/carers to identify there is an issue and work for change

The aim of the programme is to:

- Reduce child-on-parent violence
- Reduce violent offending and domestic abuse
- Create positive interpersonal relationships
Experts from the Tavistock & Portman NHS Foundation Trust suggest a whole family approach, dealing with all family members who may have been affected by family violence, could be a highly cost-effective way of supporting children (as well as parents) who have grown up in violent households.

“Counselling interventions for mothers and children together where there has been violence, and inclusion of fathers carefully where it is safe to do so, as individual families or in multi family groups, could be highly cost effective for the future health of children who have and continue to grow up in households where there is intimate violence.”

Early psychological therapy interventions can be used as a way of assessing if there are any developing problems and as a way of building up resilience (by getting to the child to focus on which of their strengths have helped them through the period of domestic abuse).

Early intervention programmes such as Parent-Child Interaction Therapy (see case study below) should also be considered to reduce the amount of family violence that children experience. In the same way that bespoke programmes, such as Do It Different or Break for Change, can help parents deal with aggressive and difficult children and teenagers, Parent-Child Interaction Therapy programmes show that they can help reduce the risks of child physical abuse and help parents build positive and nurturing relationships with their children.

**CASE STUDY**

Reducing the risks of child violence: Parent-Child Interaction Therapy

Parent-Child Interaction Therapy (PCIT) has been shown to have benefits in preventing recurrence of child physical abuse. It is a treatment for conduct-disordered young children that places emphasis on improving the quality of the parent-child relationship and changing parent-child interaction patterns.

PCIT teaches parents specific skills to help establish a nurturing and secure relationship with their child while increasing their child’s pro-social behaviour and decreasing negative behaviour.

This treatment focuses on two basic interactions: Child Directed Interaction, which is similar to play therapy, in which parents engage their child in a play situation with the goal of strengthening the parent-child relationship; and Parent Directed Interaction which resembles clinical behaviour therapy in which parents learn to use specific behaviour management techniques as they play with their child.

Parents show increases in reflective listening, physical proximity and positive communication, and decreases in sarcasm and criticism of the child after completion of PCIT.

An evaluation of the programme showed that parents who went through PCIT are less likely in engage into abusive behaviours, have slightly lower levels of depression than the control group and engage less frequently in negative parenting techniques.

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153 Quote supplied by Ellie Kavner and Charlotte Burck, family therapists in the Children and Families Department of The Tavistock & Portman NHS Foundation Trust


155 Lancet (2009)

Defeating the enemy within: Perpetrator programmes

We have heard from families that a very positive step would be offering more help for those who are concerned by their own behaviour, and would like to take positive steps to address issues of violence or conflict in their lives.

Currently there is little information available about perpetrator programmes, and access to them is largely confined to those who are mandated to attend by the courts. The programmes have a mixed record of success. This is particularly true for those who are forced to attend (with problems relating to high drop-out rates and re-offending against different partners157), but there is strong evidence to suggest that those programmes which are open to self-referral boast an impressive success rate.158 If access to these programmes was made more known and available, they could prevent thousands of incidents of domestic violence each year.

Family Violence Questionnaire

Q: What more would you have liked from the help that you received?

A: “Support for my partner to change his behaviour – I loved him, just not some of his behaviour.”

There are currently two types of perpetrator programmes in operation: those run by the Probation Service, for convicted offenders, and community-based programmes run by the voluntary sector. The former tend to operate through referrals from a court or the Probation Service, and make up a majority of the services on offer. In contrast, the latter are self-referral programmes (as well as referrals from other agencies including social services, Relate, and health professionals160) which often lack stable sources of funding.

While these programmes can be very successful they face a number of serious challenges – primarily in regard to availability. Self-referral mechanisms are often insufficient161 and limited in number162 and in the case of voluntary sector programmes also only available at a cost – either to the individual or the agency referring them. The limiting of funding in this way means that low-income perpetrators are often excluded from addressing their challenging behaviour, even when they ask for the opportunity to do so.

These services also tend to be thinly spread and unevenly distributed – an extensive review of domestic violence services across the country highlighted the lack of self-referral programmes in the East of England, East and West Midlands, South East and Scotland163.

If access to perpetrator programmes was made available alongside innovative campaigns such as the Lambeth ‘Know the Difference’ campaign164 (against sexual harassment and rape, in which men are challenged to examine their own behaviour, and ensure they do not cross the line) or the recent BBC campaign against teenage domestic violence165 (which aims to raise awareness among young people about the threat of domestic abuse), authorities would be in a strong position to challenge and bring down domestic violence in their area. Consequently, we recommend that local authorities take a proactive role in substantially boosting the availability of self-referral perpetrator programmes.

158 Mullender and Barton, (2000)
159 10 questionnaires completed by women in Yorkshire and the Humber
160 NSPCC Domestic Violence Campaign Briefing 6 (2009)
161 Select Committee on Home Affairs Sixth Report, (2008)
162 See also National Audit Office, (2008)
163 Coy et al, (2011)
164 Know the Difference (2012) Lambeth (Online) Available at: http://www.lambeth.gov.uk/knowthedifference
165 Teenage domestic violence tackled by advert campaign (2010) BBC News (Online) Available at: http://news.bbc.co.uk/1/hi/uk/8515601.stm
Focus on the family

Think Family\textsuperscript{166}, a policy developed by the Social Exclusion Taskforce in 2007 to bring services together to meet families’ needs, aimed to build the family dimension into all services for families experiencing multiple and intergenerational disadvantage and at risk of achieving poor outcomes.

The approach offers two crucial ways of tackling family violence:

- Improving the identification and support of adults experiencing violence who are parents or carers; and
- Co-ordinating the support that is provided by different agencies to all members of each family, especially those experiencing significant problems.

It also recognises the complex and intergenerational nature of the problems some families face, with a framework for identifying adults’ and children’s needs and ensuring they are met. The whole family approach where local agencies make sure that the support provided by children’s, adults’ and family services is co-ordinated and focused on problems affecting the whole family is important for everyone, and is the only effective way of working with families experiencing the most significant problems.

Many of the most effective interventions around family violence continue to follow a Think Family approach to securing better outcomes for children, young people and families with additional needs. The policy remains a powerful impetus to partnership and whole family working. 4Children believes that a whole family approach is critical to reducing violence and ensuring that a cycle of violence is not continued.

Conclusion

The Enemy Within has identified major gaps in the current approach to violence within the family which is putting children and families at risk of crisis.

The report has shown how violence in the family threatens lives, breaks up families and has severe ongoing psychological and physical effects on hundreds of thousands of parents and children every year. It is one of the biggest causes of family crisis in the UK, one which puts lives at risk, isolates people, undermines good mental health, and costs the taxpayer in excess of £3.1bn per year in costs to the NHS, the courts and social services.

The report has shown that while most analyses of violence in the family focus on intimate partner violence, there is also a growing and deeply disturbing trend towards wider violence within the family – including child-on-parent violence and sibling-on-sibling violence – which often passes unnoticed in mainstream analyses of domestic violence.

4Children believes that family violence is so prevalent that it may pose the greatest single threat to children and families across the country. This report highlights the prevalence of domestic violence in the lives of up to 75% of the children who are in the child protection system and up to 80% of those families who are the most troubled. It demonstrates the impact of family violence on outcomes for children and shows the worrying cycle of intergenerational violence which many experience.

We also unveil a concerning level of family conflict in the UK which if left unaddressed runs the risk of developing into family violence. 53% of families report experiencing serious or frequent conflict in the home, equating to around 4m families, while 72% of those who sought help to resolve that crisis did not receive all the help they needed.

Our research shows that urgent action is needed to address the gaps in the system to support families experiencing violence in the UK. It highlights the current limitation of a system where:

- The definition of domestic violence used by a large proportion of local authorities, and even some police forces, applies only to partner violence and fails to recognise the prevalence of child violence in the family;
- The response to violence in the family is often delivered in isolation – either focusing on the experience of the parents or children but rarely on the whole family; and
- The response to family violence is almost always at crisis point with few families being able to find help when problems first occur.

The terrible cost of family violence to children, families, and wider society means that it must be addressed by 4Children’s Give Me Strength campaign – which aims to prevent family crisis. This report adds to a series of existing research and reports to argue for a new approach to strengthen and support the most vulnerable families to prevent crisis developing.

168 4Children’s Family Violence survey, see Annex C
169 4Children’s Family Violence survey, see Annex C, n=157
4Children believes that a number of high profile Government policy priorities are at risk of failure if family violence is not reduced:

- The Prime Minister’s commitment to turning around the lives of 120,000 troubled families will only succeed if the family violence experienced by up to 80% of families is significantly reduced and overcome.

- The Government’s commitment to reducing the number of children exposed to harm\(^{170}\) must recognise that around 950,000\(^{171}\) children are exposed to violence in the home every year. No real progress can be made in guaranteeing children’s safety without addressing family violence;

- The Government’s renewed focus on ‘life chances’\(^{172}\) for the poorest children must take account of family violence – life chances cannot be effectively improved without addressing the destabilising and damaging influence of violence at the heart of family life\(^{173}\); and

- The emerging cross-party commitment to early intervention and delivering better value to the tax-payer can only be delivered if any shift to early intervention included a focus on family violence

In order to truly make an impact on family violence in the UK, and its ongoing threat to children, parents and families, it is clear a new approach is needed — one focussed on early intervention that recognises the breadth of family violence, its impact on the whole family, and the support needed for families to overcome it.

4Children is therefore setting out a set of recommendations to transform this country’s approach to violence and subsequent crisis in the family. Our recommendations demand that:

- Specialist and wider services embrace a definition of domestic violence that includes violence committed by family members – and ensure that that definition influences the delivery of all their responses

- A whole-family approach to dealing with domestic violence is embraced to ensure that parents, children and family members experiencing family violence get the support they need to avoid and overcome violence.

- That Family violence (and conflict) is recognised as a key factor in family crisis and that a wide range of professionals and agencies extend their own practices to identify signs of violence early and respond in partnership with others at the earliest opportunity

- Sufficient resources and investment is made available in services who deal with the sharp end of family violence including bespoke programmes addressing adult or adolescent violence.

These approaches form the basis of all our detailed recommendations, below.

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170 Stop sexualising children, says David Cameron (2010) BBC News (Online) Available at: http://news.bbc.co.uk/1/hi/8521403.stm
172 Iain Duncan Smith: Child poverty approach ‘set to fail’ (2011) BBC News Politics (Online) Available at: http://www.bbc.co.uk/news/uk-politics-15996253
173 Colton and Allard (1997)
Annex A

Local Authority Freedom of Information Requests

1. Do you have a domestic violence strategy?
   - If so, who holds responsibility for the strategy?
   - Please include a copy of the strategy, or a web link, if you have one.

2. Do you have a functioning domestic violence partnership within the authority?
   - If so, who is included in that partnership?
   - Do you work with the local police force to seek referrals about domestic conflict or violent incidents to which police are called – even if this does not result in the bringing of charges or arrest?

3. Do you use a nationally recognised domestic violence risk assessment scale (such as Barnados, Respect, Family Matters) when establishing which services should be provided to families at risk of, or suffering from, domestic violence?
   - If not, do you use an in-house risk-assessment scale?

4. Do you use a standard definition of domestic violence? If so, please provide us with that definition.
   - Does this definition include:
     i. Intimate partner violence?
     ii. Parent-child violence?
     iii. Broader family violence (e.g. involving uncles/grandparents/cousins)?
     iv. Sibling violence?
     v. Child-parent violence?
     vi. Any other forms of violence? (Please specify)

5. Do you offer any early intervention family support services designed to prevent or reduce domestic conflict or violence?

6. What early intervention family support services designed to prevent or reduce domestic conflict or violence do you offer (please indicate all that apply)?
   - Parenting support
   - Support for families with violent or potentially violent teenagers/youths
   - Strengthening mother-child or parent-child relationships e.g. through creative play sessions
   - Counselling and family therapy sessions
   - Outreach
   - Perpetrator focused programmes
   - Other – please state what these are

7. What was the annual budget for your domestic violence/family conflict services for each of the past three years, and for the coming year? What percentage of your overall budget did that equate to?

8. How do you contact families who you think would benefit from access to early intervention services designed to prevent or reduce domestic violence or family conflict?
   - What is the uptake rate of these services by families you contact?
   - Are there any specific difficulties in encouraging families to take up these services?
Annex B

Police Force Freedom of Information Requests

1. Do you have a domestic violence strategy?
   - If so, who holds responsibility for the strategy?
   - Please include a copy of the strategy, or a web link, if you have one.

2. Do you use a standard definition of domestic violence? If so, please provide us with that definition.
   - Does this definition include:
     i. Intimate partner violence?
     ii. Parent-child violence?
     iii. Broader family violence (e.g. involving uncles/grandparents/cousins)?
     iv. Sibling violence?
     v. Child-parent violence?
     vi. Any other forms of violence? (Please specify)
   - Does the definition include situations in which:
     vii. Both perpetrators and victims are under 18?
     viii. Either the perpetrator or the victim is under 18?

3. Do you have any active domestic violence/family conflict partnerships in place? If so, do these partnerships include working with:
   - Local health practitioners?
   - Local authorities?
   - Voluntary Groups?
   - Children’s Centres?
   - Other? (Please specify)

4. What procedures do you follow if you suspect an individual or family is vulnerable to experiencing domestic violence?
   - Do you make any referrals as a result of these procedures?
   - If so, which organisations do you make referrals to?

5. How many violent crimes have been committed by the following in each of the last three years? How many of those involved children under the age of 18? What percentage of overall violent crimes does this constitute in each of the last three years?
   - Intimate partners
   - Parent on child assaults
   - Child on parent assaults
   - Sibling assaults
   - Extended family on child
The next few questions are about family conflicts, and some of the answer options refer to potentially upsetting types of conflict. There are ‘prefer not to say’ options at every sensitive question, but if you would prefer not to see any of the questions at all please choose the appropriate option below. Also, please remember that your answers to all YouGov surveys are entirely confidential. They will only ever be analysed in combination with other respondents’ answers.

Are you willing to proceed to these questions?

<table>
<thead>
<tr>
<th>Unweighted Base</th>
<th>1036</th>
</tr>
</thead>
<tbody>
<tr>
<td>All GB parents of children aged under 18</td>
<td>1100</td>
</tr>
<tr>
<td>Yes, I am</td>
<td>93%</td>
</tr>
<tr>
<td>No, I am not</td>
<td>7%</td>
</tr>
</tbody>
</table>

For the next few questions please think specifically about your children who live at home. Thinking about frequent or serious conflicts in your family... Which, if any, of the following do you think are the causes of them? (Please tick all that apply. If there are no frequent or serious conflicts in your family, please tick the relevant ‘Not applicable’ option)

<table>
<thead>
<tr>
<th>Unweighted Base</th>
<th>970</th>
</tr>
</thead>
<tbody>
<tr>
<td>All GB parents of children aged under 18 who are willing to take part</td>
<td>1018</td>
</tr>
<tr>
<td>Redundancy/ long term unemployment of one or both parents</td>
<td>7%</td>
</tr>
<tr>
<td>Serious financial worries or debt</td>
<td>21%</td>
</tr>
<tr>
<td>An affair/ jealousy/ lying by one or both parents</td>
<td>7%</td>
</tr>
<tr>
<td>Disagreements over child discipline</td>
<td>17%</td>
</tr>
<tr>
<td>Arguments with teenage children</td>
<td>20%</td>
</tr>
<tr>
<td>Sibling rivalry between children</td>
<td>17%</td>
</tr>
<tr>
<td>Long absences by one parent (e.g. because of working away from home) and re-adjusting to partner and family when they return</td>
<td>5%</td>
</tr>
<tr>
<td>The poor mental health (e.g. depression) of one or more members of the family</td>
<td>11%</td>
</tr>
<tr>
<td>One or more members of the family with alcohol or drug problems</td>
<td>4%</td>
</tr>
<tr>
<td>Other</td>
<td>3%</td>
</tr>
<tr>
<td>Don’t know</td>
<td>1%</td>
</tr>
<tr>
<td>Prevalence</td>
<td>Percentage</td>
</tr>
<tr>
<td>------------</td>
<td>------------</td>
</tr>
<tr>
<td>Prefer not to say</td>
<td>1%</td>
</tr>
<tr>
<td>Not applicable – we only have occasional and/or non-serious conflicts in our family</td>
<td>40%</td>
</tr>
<tr>
<td>Not applicable – we never have conflicts in our family</td>
<td>7%</td>
</tr>
<tr>
<td>Arguments</td>
<td>64%</td>
</tr>
<tr>
<td>Shouting</td>
<td>57%</td>
</tr>
<tr>
<td>Verbal insults</td>
<td>29%</td>
</tr>
<tr>
<td>Threatening and intimidating behaviour</td>
<td>8%</td>
</tr>
<tr>
<td>Physical fighting (without injuries)</td>
<td>9%</td>
</tr>
<tr>
<td>Physical fighting (with injuries)</td>
<td>3%</td>
</tr>
<tr>
<td>Destroying possessions</td>
<td>9%</td>
</tr>
<tr>
<td>One person making another person feel stupid</td>
<td>21%</td>
</tr>
<tr>
<td>Unwanted sexual acts</td>
<td>2%</td>
</tr>
<tr>
<td>None of these</td>
<td>18%</td>
</tr>
<tr>
<td>Don't know</td>
<td>1%</td>
</tr>
<tr>
<td>Prefer not to say</td>
<td>1%</td>
</tr>
<tr>
<td>Arguments</td>
<td>86%</td>
</tr>
<tr>
<td>Shouting</td>
<td>77%</td>
</tr>
<tr>
<td>Verbal insults</td>
<td>54%</td>
</tr>
<tr>
<td>Threatening and intimidating behaviour</td>
<td>17%</td>
</tr>
<tr>
<td>Physical fighting (without injuries)</td>
<td>18%</td>
</tr>
<tr>
<td>Physical fighting (with injuries)</td>
<td>8%</td>
</tr>
<tr>
<td>Issue</td>
<td>Percentage</td>
</tr>
<tr>
<td>----------------------------------------------</td>
<td>------------</td>
</tr>
<tr>
<td>Destroying possessions</td>
<td>18%</td>
</tr>
<tr>
<td>One person making another person feel stupid</td>
<td>40%</td>
</tr>
<tr>
<td>Unwanted sexual acts</td>
<td>3%</td>
</tr>
<tr>
<td>None of these</td>
<td>3%</td>
</tr>
<tr>
<td>Don't know</td>
<td>4%</td>
</tr>
</tbody>
</table>

Have you, or any other member of your family sought help for the conflicts within your family from any of the following sources? (Please tick all that apply)

<table>
<thead>
<tr>
<th>Source</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unweighted Base</td>
<td>899</td>
</tr>
<tr>
<td>All GB parents of children aged under 18 who are willing to take part and have conflicts in their family</td>
<td>943</td>
</tr>
<tr>
<td>Someone else within my family or extended family</td>
<td>6%</td>
</tr>
<tr>
<td>A friend</td>
<td>8%</td>
</tr>
<tr>
<td>The police</td>
<td>3%</td>
</tr>
<tr>
<td>GP</td>
<td>4%</td>
</tr>
<tr>
<td>Health visitor/ midwife</td>
<td>1%</td>
</tr>
<tr>
<td>Someone from the local children’s centre</td>
<td>0%</td>
</tr>
<tr>
<td>Local authority unit (e.g. an early intervention unit for family support)</td>
<td>1%</td>
</tr>
<tr>
<td>Social Services</td>
<td>1%</td>
</tr>
<tr>
<td>Voluntary or charitable organization</td>
<td>1%</td>
</tr>
<tr>
<td>Women’s Aid/ Refuge organization</td>
<td>0%</td>
</tr>
<tr>
<td>School/ teacher</td>
<td>1%</td>
</tr>
<tr>
<td>Other</td>
<td>1%</td>
</tr>
<tr>
<td>Don’t know</td>
<td>2%</td>
</tr>
<tr>
<td>Prefer not to say</td>
<td>1%</td>
</tr>
<tr>
<td>Not applicable - we haven’t sought help for the conflicts within our family</td>
<td>80%</td>
</tr>
</tbody>
</table>

You said you have not sought help for the conflicts within your family… Which, if any, of the following are reasons for this? (Please tick all that apply)

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unweighted Base</td>
<td>714</td>
</tr>
<tr>
<td>All GB parents of children aged under 18 who are willing to take part, have conflicts in their family and haven't sought help</td>
<td>757</td>
</tr>
<tr>
<td>Because I/we didn’t know what to do or where to turn to</td>
<td>1%</td>
</tr>
<tr>
<td>Reason</td>
<td>Percentage</td>
</tr>
<tr>
<td>-----------------------------------------------------------------------</td>
<td>------------</td>
</tr>
<tr>
<td>Because there was the threat of violence if I/we sought help</td>
<td>0%</td>
</tr>
<tr>
<td>Because I/we wanted to keep the family together</td>
<td>4%</td>
</tr>
<tr>
<td>Because I/we feared our children would be taken away if we admitted to problems</td>
<td>0%</td>
</tr>
<tr>
<td>Because I felt ashamed and felt it was somehow my fault</td>
<td>2%</td>
</tr>
<tr>
<td>Because the conflicts were not serious enough to warrant help</td>
<td>76%</td>
</tr>
<tr>
<td>Because I was worried I would get into trouble if I sought help</td>
<td>0%</td>
</tr>
<tr>
<td>Because I was worried another family member would get into trouble if I sought help</td>
<td>0%</td>
</tr>
<tr>
<td>Other</td>
<td>11%</td>
</tr>
<tr>
<td>Don’t know</td>
<td>7%</td>
</tr>
<tr>
<td>Prefer not to say</td>
<td>2%</td>
</tr>
</tbody>
</table>

In addition to the help you received, which, if any, of the following would you have liked from it? (Please tick all that apply)

<table>
<thead>
<tr>
<th>Unweighted Base</th>
<th>157</th>
</tr>
</thead>
<tbody>
<tr>
<td>All GB parents of children aged under 18 who are willing to take part, have conflicts in their family and sought help</td>
<td>157</td>
</tr>
<tr>
<td>Someone safe to talk to about what was happening in my family (conflicts/arguments/violence) without fear of losing my children</td>
<td>20%</td>
</tr>
<tr>
<td>More relationship counseling advice for both me and my partner</td>
<td>17%</td>
</tr>
<tr>
<td>More support and guarantee of safety if I ended the relationship</td>
<td>14%</td>
</tr>
<tr>
<td>More information about parenting teenage children and children with behaviour problems</td>
<td>23%</td>
</tr>
<tr>
<td>More counselling and therapy for my children who have witnessed many of the conflicts</td>
<td>11%</td>
</tr>
<tr>
<td>Medication (e.g. anti-depressants or sleeping pills etc.) for me to cope</td>
<td>12%</td>
</tr>
<tr>
<td>Other</td>
<td>2%</td>
</tr>
<tr>
<td>Don’t know</td>
<td>7%</td>
</tr>
<tr>
<td>Not applicable - I wouldn’t have wanted anything more than the help I/we received</td>
<td>28%</td>
</tr>
</tbody>
</table>

Do you and/or your partner have any serious concerns about your children’s behaviour? (Please tick all that apply)

<table>
<thead>
<tr>
<th>Unweighted Base</th>
<th>970</th>
</tr>
</thead>
<tbody>
<tr>
<td>All GB parents of children aged under 18 who are willing to take part</td>
<td>1018</td>
</tr>
<tr>
<td>Yes, they engage in underage risky behaviour (e.g. drinking, underage sexual relationships, criminal activity etc.)</td>
<td>1%</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Yes, they are verbally abusive and behave aggressively towards their siblings</td>
<td>2%</td>
</tr>
<tr>
<td>Yes, they are physically abusive and behave aggressively towards their siblings</td>
<td>2%</td>
</tr>
<tr>
<td>Yes, they are verbally abusive and behave aggressively towards me/my partner</td>
<td>2%</td>
</tr>
<tr>
<td>Yes, they are physically abusive and behave aggressively towards me/my partner</td>
<td>1%</td>
</tr>
<tr>
<td>Yes, I/we are concerned about our child/children’s levels of aggression in another way</td>
<td>4%</td>
</tr>
<tr>
<td>Yes, I/we are concerned about our child/children’s behaviour for another reason</td>
<td>7%</td>
</tr>
<tr>
<td>No, I/we do not have any serious concerns about their behaviour</td>
<td>85%</td>
</tr>
<tr>
<td>Prefer not to say</td>
<td>2%</td>
</tr>
</tbody>
</table>
Bibliography


Department for Education, (2010) ‘Children In Need in England, including their characteristics and further information on children who were the subject of a child protection plan (2009-10 Children in Need census, Final).’ London: Department for Education.


Violence Homicide Reviews for Financial Year, 2008/09. London: Metropolitan Police Service


