

Possible indicators of Domestic Violence

Taken from Department of Health (2005). *Responding to domestic abuse: A handbook for health professionals*. London: HMSO

Appointments

- The survivor makes frequent appointments, but does not present with one particular issue
- Appointments or group sessions are often missed
- Survivor always accompanied by a partner or other family member when attending your agency
- Only presents at a time of crisis
- Non-compliance with treatment or an inability to follow through with plans

Injuries

- Injuries which seem inconsistent with the explanations of accidental causation (such as falls, or walking into doors etc); injuries to the face, head and neck, chest, breast and abdomen

- Evidence of multiple injuries (e.g. burns, bruises) at different stages of healing
- Minimisation of the extent of injuries, and concealment by clothing
- History of repeated miscarriages, termination of pregnancies/still births or pre-term labour
- Recurrent sexually transmitted infections

Mental distress

- Presentations as frightened, excessively anxious, depressed or distressed
- History of mental health problems especially depression, PTSD, self-harm and suicide attempts

Their partner

- Passive or afraid of the partner
- Partner appears aggressive and overly-dominant
- Survivor appears evasive or reluctant to speak or disagree in front of partner

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Assessment questions

The following questions are some example of possible questions you might want to ask survivors of domestic and sexual violence who are also affected by substance use and/or mental health problems to ascertain:

- 1) *whether your services are suitable for them (i.e. can you offer the right level of support and safety?)*
- 2) *whether the survivor may benefit from support from specialist drug, alcohol and/or mental health services*
- 3) *any high risks issues.*

At the end of each section, there are links to relevant standardised assessment and risk assessment.

Manchester Women's Aid

Manchester Women's Aid has created a Complex Needs team in order to support survivors of domestic violence who have substance use and/or mental health problems in their refuges or in the community. You can download their assessment form here: <http://tinyurl.com/czwt5on>.

Section 1 –Domestic violence

- Do you feel safe right now?
Do you feel safe leaving this meeting/office/going home?
- What do you fear might happen in future? I.e. what types of violence or abuse might happen?
- What threats has the perpetrator made to/about you and/or your children?

There are well known risk factors associated with a high risk of serious harm or death in the future. Some of these risks are:

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Recent separation	Threats to kill	Use of objects/ weapons
Escalation of abuse (frequency or severity)	Threats by the perpetrator to commit suicide	Strangulation, choking, suffocating, drowning
Stalking and harassment	Sexual violence	Excessive jealousy
Isolation from friends/ family	Perpetrator tries to control everything victim does	

If, when answering the previous questions, the survivor mentions any of these risk factors, practitioners are encouraged to complete the DASH RIC (see below) and/or speak to their manager, safeguarding lead, local domestic violence service to complete the DASH RIC or advice on what to do next.

- Have you been in touch with any services? Do you have an outreach worker or an IDVA (Independent Domestic Violence Adviser)? Do you know if you have been referred to the MARAC (Multi-Agency Risk Assessment Conference)? Would you like any support around this issue?

Standard tools

DASH RIC (Domestic Abuse, Stalking and Harassment Risk Identification Checklist). Standard risk assessment used by the police, health, children's services and domestic violence agencies in England and Wales. Used to identify very high risk victims of domestic violence who may be referred to the MARAC. <http://tinyurl.com/c456th6>

Barnardo's Domestic Violence Risk Identification Flow Chart.

This primarily designed to assess risk for children and teenagers witnessing domestic violence. <http://tinyurl.com/cmlkpjo>

Section 2 – Sexual violence

- When did the incident/most recent incident happen?
- Do you need any medical attention? Have you seen a medical professional?
- Would you like to report the incident(s)? It is possible in most areas to have forensic exams completed to collect any evidence a Sexual Assault Referral Centre (SARC) without reporting the assault to the police. Evidence will be kept in case the survivor wishes to report to the police at a later time.
- Do you feel safe at home/work/college/in public?
- Is the perpetrator known to them? He may be a partner, family member, neighbour, colleague, friend or acquaintance.
- Have you spoken to anyone else about what has happened? What would you like to happen now?

Standard tools

SERA model for assessing risk of child sexual exploitation. The SERA model can be found on p.26 of the Derby City Children Abused Through Sexual Exploitation Risk Assessment Tool. <http://tinyurl.com/clqplt9>

Section 3 – Substance use

- What substance(s) are you using right now? This includes prescribed and over the counter medication, alcohol and other drugs.
- How much do you use?
- Is this usage: occasional/weekly/daily/payday use?
- For prescription and over the counter medication, do you ever use more than instructed to on the package/by GP or pharmacist?
- Do you often drink or use other drugs more than you plan to?
- How much time during the week do you spend obtaining, using, or recovering from the effects of alcohol, other drugs or medication?

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- (In cases of domestic violence)
How involved is your partner (the perpetrator) in your drug/alcohol use? Did you/do you use or drink together?
 - Sometimes women's partners can control her money or access to substances. Has this happened to you? If a woman answers 'yes', this could mean she is unable to use/drink without him which could make it difficult for some women to leave. For some women leaving may mean going into withdrawal.
 - Since you began using or drinking, have you stopped spending time with family and friends and begun spending more time using alcohol and other drugs or spending more time with people who do?
 - On a scale of 0-10 (0=no problem; 10=significant problems) where
- would you place yourself in relation to whether your drug use/drinking has affected /is affecting your health?
- Has your use of medication or drugs/drinking caused any other problems in the past, or are causing problems now? Do you think your drug use/drinking is causing you a problem? Has anyone else said that your drug use/drinking is problematic?
 - Have you had any arguments or been violent with people other than your partner when affected by alcohol or drugs?
 - Do you have any involvement with the police or the courts in relation to your substance use?
 - Do any of following risk factors apply:

Regular injector	Injecting related virus infection
Chaotic injector (neck or groin)	Serious physical health problems
Unable to inject self ((If a survivor is unable to inject herself, it may be more difficult for her to leave an abusive partner who injects for her)	High risk sexual behaviour – involved in prostitution, other sexual exploitation, unprotected sex
Shared equipment - bongs, pips, spoons	Unintentional overdose
Alcohol dependent/long-term use of benzodiazepines (can include physical dependence which requires close monitoring when reducing use or stopping)	History of accidents or injuries when under influence
History of seizures or DT's (in relation to withdrawing from alcohol)	Needed hospital treatment for accident or injuries

- Have you ever tried to cut down or stop using alcohol, medication or other drugs? Do you do it by yourself or with the help of a service? If you used a service, what was it? When did you last try to change your substance use? If you stopped using/drinking, how long did you manage to stop for?
- Are you currently on a methadone script? What is your dosage? Is it daily pickup/supervised/unsupervised/weekly pickup? (For survivors in supported housing including refuge, methadone

should be collected daily)

- Are you currently in contact with any services or agencies in relation to your substance use? If yes, can you give the name and contact details of current worker(s)? If not, would you like information about local services?

Standard tools

AUDIT (Alcohol Use Disorders Identification Test) - is a brief self-report questionnaire developed by the World Health Organisation

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to identify people whose alcohol consumption has become hazardous or harmful to their health. <http://tinyurl.com/cfbqsmst>

APQ (Alcohol Problem Questionnaire) <http://tinyurl.com/cdqtb6>

DUST (Drug Use Screening Tool) can be used to identify young people and adults who might benefit from being referred to a substance use agency. <http://tinyurl.com/buuaxux>

SADQ (Severe Alcohol Dependence Questionnaire) <http://tinyurl.com/d6ua5wf>

Section 4 – Mental health

- How are you feeling emotionally right now?
- Do you have any concerns about your health, including how you think or feel inside?
- Do you think your suffering with a particular emotional problem?
- Have you ever been diagnosed or treated for a mental health problem?
- Did you have these feelings or difficulties before you experienced domestic violence/were assaulted or raped? Or did they start then?
- Have you had any help from your doctor, a psychologist, a counselor, or anyone else because of problems with your mental health? Is anyone or any agency supporting you around your mental health now? Do you have a psychiatrist?
- Have you ever been prescribed medication for mental health problems? Are you taking anything now? If yes, what and who has prescribed them? If a survivor has recently moved areas, check how much of their medication they have left and how quickly they need to see a doctor for a new prescription.
- If taking medication, when was your last medication review?
- Do you ever use alcohol or drugs to help manage how you feel or your thoughts? Be aware the using alcohol and drugs is associated with an increased risk of causing serious injury when self-harming and committing suicide.

- Have you ever harmed yourself, e.g. cutting, burning, poisoning, not eating, not caring for yourself? Do you find that it helps you cope? Are you able to care for yourself when you hurt yourself?
- Have you ever felt so bad that you have thought about suicide? What happened?
- Have you ever thought about or been violent towards others?

Levels of risk

	Self-harm	Suicide	Violence to others
HIGH	Doing it now	Current thoughts with plans and preparation	Now
MEDIUM	Done in the past	Frequent thoughts but no plans or intent	In the past
LOW	Never	No current/ infrequent thoughts	Never

- Have you ever been hospitalised due to mental ill-health? If so what was the date of your last admission?
- How does the way you feel impact on how you function? For example, are you able to go out, buy essential items, cook for yourself, go to work, socialise with others?
- What would help you now with how you are feeling? What would you like to happen now?

Standard tools

CORE. A short assessment form that is commonly used within mental health and counselling services to measure improvements in service users' mental wellbeing. Can be used to help service users' explain how they are feeling and identify

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risks such as self-harming and suicidal thoughts. <http://tinyurl.com/br4bauz>

Centre for Mental Health Clinical Risk Management. A useful guide to risk management in mental health services. Provides clear information about the common types of risk related to mental ill-health. <http://tinyurl.com/c98mn7u>

Section 5 – Children

- How many children do you have? How many are dependent? How many live with you? How old are they?
- What effect does drinking or using drugs, your mental health problems or living with domestic violence on your ability to be a parent?
- How do you think your alcohol/drug use or the perpetrator's behaviour has affected your children?
- Do you have regular routines at home, for example getting to school on time, bed times? Is that something you would like help with?
- How do you manage money? Does your drinking or drug use lead to financial problems? Do the children ever have to go without the basics?
- Do the children ever witness you using drugs/drinking or when there is domestic violence?
- In relation to domestic violence, do the children ever try to intervene?
- When you are unwell (mentally), do you ever have thoughts about harming the children?
- When you are drinking or using, are unwell or when there is domestic violence, are the children ever left unsupervised or with unsuitable carers? Who looks after the children when you are not able to?
- What other support do the children have? Do the children have regular contact with a adult/carer who does not use or drink?

- In relation to alcohol or drug use, are children ever taken to places they might be at risk? Or do people come to your home as a place to use drugs or drink problematically?
- Are drugs, drugs works/ paraphernalia, alcohol, medication stored safely and away from children?

Standard tools

CAF (Common Assessment Framework). Used in a range of services to identify children and families who may need additional support. <http://tinyurl.com/cl7fpxv>

This document can be downloaded from <http://tinyurl.com/bu5f2xg>.

Appendix C

Personal crisis plan template

Adapted from: Personal Crisis Plan (Advance Directive), created by Mary Ellen Copeland, PO Box 301, W. Dummerston, VT 05357 Phone: (802) 254-2092 e-mail: info@mentalhealthrecovery.com Website: <http://www.mentalhealthrecovery.com>.

People who experience periods of mental ill-health should be encouraged to plan for times of illness. If the person is in contact with a mental health service, they may already have a personal crisis plan or advance directive. If not, it might be useful for services supporting the person (particularly accommodation-based services) to talk through the following points.

Section 1 – What I am unlike when I am unwell

This could include signs that I am starting to feel unwell and also what I want or don't want other people to do when I feel this way.

Section 2 – Signs I need my supporters to take over

If I have several of the following signs and/or symptoms, my supporters, named in the next section, need to take over responsibility for my care and make decisions in my behalf based on the information in this plan.

Section 3 – My supporters

- If this plan needs to be activated, I want the following people to take over for me: include name, relationship/connection/contact details and the role or specific tasks for this person.
- I do not want the following people involved in any way in my care or treatment: include name and reason for not wanting involved (optional)
- If my supporters disagree on a course of action to be followed, I would like the dispute to be settled in the following way:

Section 4- Medication and health care

- Details of GP surgery and named GP, psychiatrist, Community Psychiatric Nurse (CPN), mental health social worker, other mental health professionals, other health professionals, pharmacy and pharmacist
- Details of any medication currently taken, including doses, purpose, when to take medication, and known side effects for individual
- Details of any allergies
- Details of any medications to avoid and reason why

Section 5 – Treatments and complementary therapy

- If this plan is activated, I would like to use the following treatment and/or complementary therapies: include details of when and how to use the treatment/therapy
- I don't not want the following treatments/complementary therapies wherever possible:

Section 6 – Home or community care

If possible, follow the following care plan:

Section 7 – Hospitalisation

- If I need hospitalisation or treatment in a treatment facility, I would prefer the following facilities: include details of facilities, any known contact person, contact details, reasons why this facility is preferred.
- Avoid using the following hospitals or treatment facilities: name and reason why

Section 8 – Help from others

Please do the following things that would help reduce my uncomfortable feelings, make me more comfortable, and keep me safe.

- I need (name of person) to (task)
- I need (name of person) to (task)
- I need (name of person) to (task)

Appendix C

Do not do the following. It won't help and it may even make things worse.

Section 9 – Inactivating the plan

The following signs or actions indicate that my supporters no longer need to use this plan.

I developed this plan on (date) with the help of (named individuals). Any plan with a more recent date supersedes this one.

This document can be downloaded from <http://tinyurl.com/cvdav95>

Appendix D

Safeguarding adults procedures

Full details of safeguarding adults procedures can be found in the Social Care Institute for Excellence (SCIE) resource, *Protecting adults at risk in London: Good practice resource*, accessible from the SCIE website:
<http://www.scie.org.uk/publications/adultsafeguardinglondon/index.asp>

Where someone is experiencing domestic violence and **has capacity**:

- Take any emergency action necessary.
- Discuss with the person the various options available for addressing the situation.
- Ask the person if they would like to report the matter to the police, and explain the different ways the police may be able to help.
- If the person wants it, report the incident to the police: an investigation will be carried out if a crime has been or may have been committed.
- Consider reporting the incident to the police even if the person does not want to report it, if the risk is seen to be high, if there are public interest or vital interest considerations, or if other people could be at risk from the same person.
- If this, or any other action, is taken against the wishes of the person, consider if the action taken meets the key principle of proportionality, and if the reasons should be fully explained to the person.
- Make a referral to the local authority contact point.
- Instigate an investigation and risk assessment under the procedures if this is what the person wants.
- Agree a protection plan with the adult at risk, if this is what they want.
- Discuss with the adult at risk how they want the person alleged to have caused the harm to change their behaviour.

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- Conduct an additional risk assessment and assessment of need with the adult at risk, and review existing care plans.
- Review any personal budget arrangements that are in place.
- Provide the adult at risk with an advocacy service.
- Conduct a carer's assessment.
- Investigate possible breaches of tenancy agreement or environmental health regulations.
- Make contact with the local community safety team.
- Contact a solicitor regarding possible civil action.
- The relevant organisation should make a referral to the multi-agency risk assessment conference (MARAC) if there is domestic violence and the risk of harm is high.
- If the person says they do not want any action taken and there are no public interest or vital interest considerations, give them

information about where they can get help if they change their mind.

Where someone is experiencing domestic violence and has **NO capacity**:

- Take any emergency action necessary.
- Make a referral to the local authority contact point.
- Bear in mind that even where the person lacks capacity they should be involved as much as possible in discussions, and that the least restrictive options in any situation should be sought.
- Identify who can assist with the person's best interest decisions including the instruction of an independent mental capacity advocate (IMCA).
- Report the incident to the police if a crime has been or may have been committed and it is in the person's best interests.
- Instigate an investigation under safeguarding adults procedures.

- Conduct a risk assessment and assessment of need, and review existing care plans under the care management or care programme approach (CPA).
- Conduct a carer's assessment.
- The relevant organisation should make a referral to MARAC if there is domestic violence and the risk of harm is high.
- Report the incident to the Office of the Public Guardian (OPG) if there is a misuse of power of attorney.
- Report the incident to the Department for Work and Pensions (DWP) if applicable.
- Agree a protection plan with those representing the person's best interests.
- Review the protection plan.

This document can be downloaded from <http://tinyurl.com/c439oah>.

Safety planning guidance

For survivors of domestic violence who are affected by substance use and/or mental ill-health.

Section 1 – Key principles

- Risk is dynamic (always changing) and so safety planning needs to be an on-going discussion as situations change
 - Never assume you know what is best for victims; they know their situation and the risks better than you do
 - Recognise that victims will already be employing safety strategies, though they may not name them; recognise, validate and build on what they are already doing. Explore which strategies are effective and helpful, and which may not be so helpful and could be adapted.
 - Keep the responsibility for the abuse explicitly with the perpetrator
 - Do not suggest or support anything that colludes with the abuse
- Provide consistency and continuity

Section 2 – What you can do

- Take her identification of danger and risk seriously
- Help her identify areas of increased risk
- Help her identify safer times and locations
- Identify what is working in practice to protect her and her children
- Take time to validate what she is already doing
- Help to develop as wide a range of options as possible, ones that she feels she can use and achieve
- Focus on the options that work best, review and adapt with changing circumstances
- Be willing to suspend safety planning in order to support the survivor and return to it at a later session

- Work within her identified limits, for example, make appointments that she can attend, ensure she is seen alone etc
- Act as advocate with other support services
- Recognise it will take time for her situation to change
- If you left, where could you go?
- Do you ever know in advance when your partner is going to be violent? e.g. after drinking, when they get paid, after relatives visit?
- When you suspect he is going to be violent can you go elsewhere?

Section 3- General questions to ask

- Can you keep a bag of spare clothes at a friend's or family member's house?
- Are you able to keep copies of any important papers with anyone else? e.g. passport, birth certificates, benefit book?
- Which part of your home do you feel safest in?
- Is there somewhere for your children to go when your partner is being violent and abusive?
- What is the most dangerous part of your house to be in when he is violent?
- Can you begin to save any money independently of your partner?
- When was the most recent incidence of violence or abuse? Frequency, severity, where/when etc.?
- What do you currently do to keep you and your children safe? What works best?
- Do the children know how to contact services or friends/family?
- Who can you tell about the violence – someone who will tell your partner/ex-partner?
- Do you have important phone numbers available e.g. family, friends, refuges, police?

Appendix E

It is also important to help the survivor to focus on the more positive things going on in her life and/or identify ways she could access activities which would help improve confidence, self esteem, emotional well-being, etc.

Section 4 – Additional considerations and questions about substance use and mental health

Issues to consider for safety planning with survivors using substances or who experiences mental ill-health:

- Some survivors' drug or alcohol use could make it difficult for them to assess the severity of the violence they are experiencing. Their substance use may be 'dulling' both the physical and mental pain they are in.
- Survivors who are using substances or mental health may be too ashamed or embarrassed about their substance use to access services.
- Some women may feel they cannot disclose their substance

use problem or mental health problems for fear of not being given access to refuge accommodation.

- Trust is paramount. Problem drug-using women and those who experience mental ill-health caring for their children fear automatic referral to social services departments, if they disclose.
- Some survivors may have had previous bad experiences with substance misuse/mental health services which may hinder their choice to engage with new services.

For survivors who use drugs or alcohol or have mental health problems, the safety plan should cover the additional risks associated with these needs.

- Is the plan realistic? Can the service user implement the safety plan when they're intoxicated or unwell?
- Consideration of how a survivor's drinking/using may impact on their ability to protect themselves - they are more likely to fight back and receive worse injuries, etc.

- Discussion of harm minimization, e.g. learning to self inject safely, smoking rather than injecting or managing self-harm and suicidal thoughts (local drugs or mental health service, respectively, will be able to provide further details)
 - What provisions are made for children when violence happens, when using/drinking or if the victim becomes mentally unwell?
 - What response might survivors receive from services/police, etc. when they make contact under the influence of alcohol/drugs or when unwell? Survivors may have a history with services, e.g. the police, relating to their substance use and mental health problems.
 - Staying safe when services arrive? Some women see this as a safe opportunity to challenge their partner/become more aggressive themselves when the police are there - this then impacts on them being seen as the aggressor and taken less seriously
 - Does the plan incorporate strategies to promote access to drug/alcohol treatment or mental health services? It can be empowering for a survivor to realise the abuser wants them to remain substance dependent/mentally unwell and to plan for interference with their treatment.
 - If considering leaving partner and needs to relocate, where will they get supply of drugs? Do they need emergency prescribing? Do they have sufficient prescriptions of psychiatric medication? Do they have depot injections? Will they be able to have quick access to necessary medication in new location?
 - Consider vulnerability/safety when entering new relationships if survivor has problems with drugs, alcohol and/or their mental health
- Substance use specific questions:**
- Can you include changes to patterns of substance use that may increase safety? For example, using at times of day that their partner is unlikely to be around.
 - The location of where a survivor goes to use/drink – how does this impact on safety?

- Anticipating partner's substance use – how to keep safer when they have been using/drinking?
- Detox/withdrawal/relapse on the part of the perpetrator can be dangerous times in terms of safety.

Mental health specific questions:

- Awareness of signs of relapse – does the survivor know when they are starting to feel unwell? Do they become more vulnerable to abuse when unwell? In what way?
- If in contact with mental health services, do they have a relapse prevention plan? Can any actions be incorporated into the safety plan?
- Is the abuser their main carer? Is there another (trusted person) who can be contacted by mental health services when survivor is unwell?

When both partners use the same service:

- If a survivor decides to access substance treatment or mental health services, it is advisable that they use a different service

from their partner, especially if the relationship ends.

- Consider altering routes/times if their partner is aware of their attendance at a particular service; use a panic alarms; make sure phone is charged.

Section 5 – Types of actions to include

What should a safety plan cover?

Safety in the relationship

- Places to avoid when abuse starts (such as the kitchen, where there are many potential weapons).
- People a woman can turn to for help or let know that they are in danger.
- Asking neighbours or friends to call 999 if they hear anything to suggest a woman or her children are in danger.
- Places to hide important phone numbers, such as helpline numbers.
- How to keep the children safe when abuse starts.

- Teaching the children to find safety or get help, perhaps by dialling 999.
- Keeping important personal documents in one place so that they can be taken if a woman needs to leave suddenly.
- Letting someone know about the abuse so that it can be recorded (important for cases that go to court or immigration applications, for example).
- Access to money or credit/debit cards that a woman has perhaps put aside.
- Plans for transport.
- Plans for taking clothes, toiletries and toys for the children.
- Taking any proof of the abuse, such as photos, notes or details of people who know about it.

Safety when a relationship is over

Leaving in an emergency

- Packing an emergency bag and hiding it in a safe place in case a woman needs to leave in an emergency.
- Plans for who to call and where to go (such as a domestic violence refuge).
- Things to remember to take: documents, medication, keys or a photo of the abuser (useful for serving court documents).
- Access to a phone.
- Contact details for professionals who can advise or give vital support.
- Changing landline and mobile phone numbers.
- How to keep her location secret from her partner if she has left home (by not telling mutual friends where she is, for example).
- Getting a non-molestation or exclusion or a restraining order.
- Plans for talking to any children about the importance of staying safe.
- Asking an employer for help with safety while at work.

Appendix E

Section 6 – Items to take in an emergency

If a service user needs to flee their home, it is useful to take as many of the following items. Survivors should NOT, however, be advised to stay in the home to collect these items if they are at immediate risk of harm.

- Medication
- Identification – birth certificate, passport, driver's license
- Birth certificates for all children
- Marriage certificate
- Divorce papers
- Tenancy agreement, deeds for any property, rental agreement
- Paperwork relating to benefits
- Money, bank books/cards, credit cards, mortgage papers
- Insurance papers
- Passport(s), Home Office papers, work permits
- Any proof of abuse, notes, tapes, diary, crime reference numbers, names and numbers of professionals who know about the abuse
- Copies of any treatment or care plans
- Phone card, mobile telephone (+ charger) or change for a pay phone
- Medical Cards
- Keys - house/car/office
- Keys to a friend or relative's house
- Children's favourite toys and/or blankets
- Change of clothes for all family members leaving
- Pictures, jewellery, items of sentimental value
- Address book

This document can be downloaded from <http://tinyurl.com/c7w5x3k>.

Appendix F

Why do people self-harm

In the absence of fully functioning problem-solving skills and the ability to self-soothe, some survivors may self-harm to manage their emotional responses.

Self-harm can help someone to cope as a means of:

- **expressing anger or other feelings** that can be difficult or are not allowed to be verbalized. Way of communicating that something is wrong.
- **regulating distress and anxiety.** Self-harming can reduce tension when it becomes unbearable.
- **regaining control,** having power to make things happen and overcoming terrifying feelings of powerlessness.
- **managing intrusive thoughts.** Survivors may become continually hyperaroused (anxious) and experience flashbacks. Self-harming can help to override intrusive thoughts possibly as a means of focussing on the present.
- **grounding.** Survivors may dissociate to distance themselves from the source of trauma and stress. They may harm themselves during dissociative states, and may hurt as a way to stop dissociation, to regain feelings of being alive and present.
- **distraction.** To escape emotional pain or focus away to make pain more manageable.
- **triggering endorphin production** in the brain. Endorphins are a natural painkiller and reduce anxiety. The natural production of endorphins may be impaired so system may need stimulation.
- **self-punishment** - Self-loathing, negative self image and feelings about themselves; shame, blame, guilt, low self-esteem, self-hatred, feelings of being bad/evil, dirty.
- **self-nurture.** After the physical pain can receive comfort and feel that they deserve to be cared for.
- **Acting out:** a re-enactment of the original trauma and replaces the feelings associated with it.

Traumatic memories leave imprints and cutting may be a way to express those memories.

- **experiences have been denied, minimised, ignored.**

Self-harm provides validation of experiences it can be a form of evidence, a testimony. Testifies to the enormity of their experience and a way of remembering events that others may have forgotten or denied. It demonstrates courage, endurance, and pride against the self loathing and shame.

- **deliberate self-harm as a means of influencing others:**

In some circumstances harming the self can be a way of communicating distress that is not heeded when communicated in words. At other times self-harm can be a means to influence others, either to care for the person who has harmed or to keep others at a distance.

Often, more than one function may be relevant. For example, cutting the self may serve both to regulate anxiety and to validate the severity of current emotional pain. It is very

important not to make assumptions about the function of a particular episode of self-harm without understanding both the behaviour itself and the person who has harmed.

Often professionals and family members make the mistake of assuming that all episodes of self-harm are about influencing them or other key people in the environment, because the other aspects (reduction of emotional pain, self-validation) are hidden to the outside observer. Because they are experiencing a response to the self-harm, they make the (often mistaken) assumption that the person who has self-harmed intended to make them feel this way. This is not always the case.

This document can be downloaded from <http://tinyurl.com/c3ulnvn>.

Appendix G

Power and control wheel-perpetrator behaviours

The Power and Control Wheel depicts the ways in which perpetrators behave to gain power and control over a

partner. Additional actions that perpetrators that specifically relate to the survivor's mental health or substance use are listed below the Power and Control Wheel.



Domestic Abuse Intervention Project, 202 East Superior Street, Duluth, Minnesota 55802, tel: 218-722-2781, website: www.duluth-model.org

Appendix G

Physical and sexual violence

- Encouraging substance use: introducing substance use, buying substances, administering drugs
- Using physical violence if victim does/doesn't drink/use drugs
- Withholding psychiatric medication or giving overdose of medication
- Refusing to let victim go anywhere alone, say it's for their own safety (e.g. mentally unable to cope, threats of violence from dealers)
- Restraining victim, say it's for own safety (e.g. when mentally unwell)
- Sexual violence when intoxicated or mentally unwell (unable to consent)
- Forcing into prostitution for drugs or drugs money

Emotional and psychological abuse

- Making victim feel incompetent because of mental health or substance
- Damaging self-esteem with verbal insults, e.g. you're useless, can't do anything, unfit mother, crazy, mad, junkie

- Telling victim s/he is 'crazy' or 'mad'
- Humiliation – telling others s/he is crazy, mad, a user, an addict
- Encouraging dependence - telling victim s/he could not cope on their own
- Lying about times/information then saying s/he appears to get things wrong (proving to self and others that s/he can't manage)
- Moving or taking property to cause confusion

Minimising, denying and blaming

- "You're overreacting/hysterical/all women are crazy"
- "It didn't happen – you're imagining things/crazy/high"
- "You're hearing/seeing things"
- Destroying property/harming others but saying victim did/imagined it
- "You hit me"
- Blaming injuries on self-harm

- “You drive me to this” – saying the victim caused the abuse with substance use/mental health problems

Isolation

- Preventing victim from social activity including friends, job, socialising because she is mad, an addict, an embarrassment
- Preventing access to medical services/medication which exacerbates mental health issues
- Preventing attendance at alcohol/drug treatment service or support groups
- Telling victim that family/friends no longer want contact because of substance use/mental health
- Telling other people that victim no longer wants to have contact

Children

- Telling her she is an incapable mother because of mental health/substance use problems
- Threatening to use mental health/substance use to justify the children being ‘taken away’
- Making the children question mental health

- Encouraging children to insult and degrade victim because of mental health/substance use

Economic abuse

- Telling her that she has lost money, money is missing, taking money etc to make her think she is ‘crazy’
- Suggesting her account of money is incorrect to take control of finances
- Restricting access to money “to stop victim using for drinking/drugs”
- Taking money for own alcohol/drugs
- Forcing victim to sell drugs

Coercion and threats

- Threats of violence if she doesn’t stop being ‘crazy’/drinking/using
- Threaten to contact social care
- Threaten to have her sectioned
- Threaten to tell family/friends/ employer about mental health or substance use problems if not already disclosed

This document can be downloaded from <http://tinyurl.com/bvmchwz>.

Useful contacts and resources

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Wales who are affected by domestic and sexual violence.

Broken Rainbow Helpline

<http://www.brokenrainbow.org.uk>, 0300 999 5428 (Mon/Thurs, 10am-8pm, Tues/Wed 10am-5pm). Support for lesbian, gay, bisexual and trans people experiencing domestic violence

Men's Advice Line

0808 801 0327 (Monday-Friday 10am-1pm, 2pm-5pm). Support, information and practical advice to men experiencing domestic violence.

A. Helplines and national organisations

Domestic and sexual violence

Key helplines

Action on Elder Abuse

0808 808 8141, www.elderabuse.org.uk (Monday-Friday, 9am-5pm).

All Wales Domestic Abuse and Sexual Violence Helpline

0808 801 0800, www.allwaleshelpline.org.uk (24 hours). For men and women in

National Domestic Violence Freephone

0808 2000 247 (24 hours). Support and information for women experiencing domestic violence, their family, friends, colleagues and others calling on their behalf (including professionals).

National Stalking Helpline

0808 802 0300, www.stalkinghelpline.org, (Monday, Tuesday, Thursday and Friday from 9.30am to 4.00pm; Wednesday from 1.00pm to 4.00pm). Practical advice and information to anybody who is currently or has previously

been affected by harassment or stalking.

Rape Crisis

0808 802 9999,
www.rapecrisis.org.uk (midday-2.30pm, 7-9.30pm every day).
Emotional support and information about local services for women affected by sexual violence.

Respect Phonenumber

0808 802 4040,
www.respectphonenumber.org.uk
(Monday-Friday, 9am-5pm). Offers information and advice to people who are abusive towards their partners and want help to stop.

Survivors UK

0845 122 1201,
www.survivorsuk.org
(Monday and Tuesday from 7.00 pm to 9.30 pm; Thursday from 12.00 pm to 2.30 pm). The helpline is for adult men (18 and over) who have experienced childhood sexual abuse or adult sexual assault / rape, as well as their partners and carers.

National organisations

1) Domestic and sexual violence

Rape Crisis, www.rapecrisis.org.uk
National charity supporting the work of rape crisis centres in England and Wales. Can provide information about local services for women survivors of sexual violence.

Refuge

www.refuge.org.uk
National charity providing accommodation, advocacy and outreach service for survivors of domestic violence.

Survivors UK

www.survivorsuk.org
Survivors UK runs a national helpline and provides individual and group support for adult men who have been victims of rape and other sexual violence. Survivors UK is not a helpline for men who have experienced non-sexual violence. The helpline may be able to arrange counselling or a support group if the client lives in the London area. If the client lives outside London, Survivors UK may be able to provide details of an appropriate service outside the London area.

The Dyn Project

www.dynwales.org/default.asp?contentID=1,

The Dyn Wales website has general information about domestic abuse and a directory of available services for each local authority in Wales.

The project also offers face-to-face advice, information and support to men who experience domestic abuse within Cardiff. The Dyn Project runs a helpline to support men in Wales experiencing domestic abuse. The helpline is open Monday and Tuesday from 10.00am to 4.00pm; Wednesday from 10.00am to 1.00pm and can be contacted on 0808 801 0321.

Women & Girls Network

www.wagn.org.uk

A pan-London service offering a holistic healing centre, including counselling and body therapies, for women and girls overcoming the experience of violence whether physical, sexual or emotional. They also run a helpline (0207 610 4345) which is open Mon/Fri/Sat (10am-1pm), Tues/Weds (6.30-9.30pm),

Women's Aid

www.womensaid.org.uk

National charity working to end domestic violence, supporting

over 500 services across the UK. Professionals can call the National Domestic Violence Helpline (0808 2000 247), run jointly with Refuge, for advice and information on supporting clients experiencing domestic violence.

2) Other forms of violence against women and girls

Forced Marriage Unit

www.fco.gov.uk, 0207 008 0151

(Monday-Friday, 9am-5.30pm)

Unit run by the UK Foreign Office, providing confidential advice and assistance to people who are at risk of, or have been, forced into marriage. The Unit can also advise professionals.

FORWARD

www.forwarduk.org.uk,

0208 960 4000 (Monday-Friday,

9am-6pm). London-based national

charity, providing specialist advice

on African women's sexual and

reproductive health and rights, and

with expertise on female genital

mutilation.

Kalayaan

www.kalayaan.org.uk, 01304 203

977 (Monday to Thursday from

9.00am to 5.00pm; Friday from

9.00am to 4.30pm). Kalayaan provides advice, advocacy and support services to migrant domestic workers in the UK. Migrant domestic workers are people who have entered the UK legally with an employer on a domestic worker visa to work in a private household.

Karma Nirvana

www.karmanirvana.org.uk, 0800 5999 247 (Honour helpline open 9:30am-9pm). Leeds-based national charity, providing support to survivors of forced marriage and so-called 'honour' based violence.

Migrant Helpline

www.migranthepline.org.uk, 0207 243 2942 (Monday to Friday from 10.00am to 5.00pm). Migrant Helpline provides support for the victims of human trafficking throughout the UK.

NSPCC National Child Trafficking Advice Centre (CTAC)

0808 800 5000 (Monday-Friday, 9.30am-4.30pm). The NSPCC National Child Trafficking Advice Centre (CTAC) provides support to professionals working with children or young people who may have been trafficked or are at risk of trafficking.

Poppy Project, Eaves

www.eaves4women.org.uk, 0207 735 2062

Eaves is a London-based charity, but its Poppy Project provides a national accommodation, support and outreach service to victims of trafficking for sexual exploitation and domestic servitude. The Poppy Project has 14 bed spaces for women who need accommodation as part of their support.

UK Human Trafficking Centre (UKHTC)

www.soca.gov.uk/about-soca/about-the-ukhtc, 0844 778 2406. The UK Human Trafficking Centre (UKHTC) is a multi-agency organisation led by the Serious Organised Crime Agency (SOCA). It works to combat the trafficking of human beings and provide support to victims including taking referrals to the National Referral Mechanism. Further information about trafficking and the National Referral Mechanism can be found on the UKHTC website.

3) Women and men involved in prostitution

CLASH (Central London Action on Street Health) 020 7734 1794
HIV and Sexual Health Outreach service in London for male and female sex workers, drug users, homeless, gay and bi-sexual men, groups often marginalised and at risk of HIV and STI.

Dorset Working Women's Project

07973 235 438
A HIV and sexual health project targeting women who sell sex in particular those using drugs and alcohol. Twice weekly outreach providing condoms and clean injecting equipment. Information and advice on safer sex and drug use. Home visits to indoor workers. Transport to GUM clinic.

MASH (Manchester Action On Street Health) <http://www.mash.org.uk>, 0161 202 2022

A sexual health promotion/HIV prevention organisation which provides a service for both street based and sauna based female sex workers and drug users in Greater Manchester. Provides targeted night time service. Harm reduction by supplying users with condoms and

clean injecting equipment.

Streetreach

www.streetreach.org.uk,
01302 328396

A confidential service in Doncaster for adults involved in prostitution and for children and young people who are being sexually exploited.

4) Black, Asian, minority ethnic and refugee (BAMER) survivors

Al-Aman

0208 748 2577 / 0208 563 2250
Arabic speaking service for men and women affected by domestic violence in the London Boroughs of Hammersmith & Fulham, Kensington & Chelsea and Westminster

Ashiana Project

www.ashiana.org.uk,
0208 539 0427
London-based charity, taking referrals nationally. Advice, support and housing for women from the Asian, Turkish & Iranian community experiencing domestic violence.

Chinese Information & Advice Centre

www.ciac.co.uk, 08453 131 868
London-based national charity,

with a women's support project for Chinese women and families in distress, including domestic violence.

Iranian and Kurdish Women's Rights Organisation

www.ikwro.org.uk, 0207 920 6460
Provides advice and support to Middle Eastern women and girls living in the UK who are facing honour-based violence, domestic abuse, forced marriage or female genital mutilation

Imkaan

www.imkaan.org.uk,
0207 250 3933
Imkaan is a national research and policy project, initiated by Asian women's projects. Imkaan profiles and advocates on behalf of the specialist refuge sector nationally, through accredited training programmes, publications and strategic liaison with government, statutory and community organisations. Information about local violence against women services for BAMER survivors.

Jewish Women's Aid

www.jwa.org.uk, 0208 445 8060
Helpline: 0800 801 0500 (Monday-Thursday, 9:30am-9:30pm).

London-based national charity providing refuge and outreach services for Jewish women and their children affected by domestic violence.

Latin American Women's Aid

www.lawadv.org.uk, 0207 275 0321
London-based national charity, providing advice, support and temporary accommodation to Latin American women fleeing domestic violence. Staff speak Portuguese and Spanish.

Solace Women's Aid (Irish Travellers)

www.solacewomensaid.org,
07903 806 161
London-based charity, which runs a refuge and outreach service for Irish Traveller women.

Southall Black Sisters

www.southallblacksisters.org.uk,
0208 571 9595
Specialist campaigning, advice, information, advocacy, practical help and counselling to women experiencing domestic violence, forced marriages, honour crimes and immigration issues. Takes referrals primarily from the London Borough of Ealing but may consider referrals from other boroughs.

5) Lesbian, gay, bisexual and transgender survivors

Broken Rainbow Helpline

<http://www.brokenrainbow.org.uk>, 0300 999 5428 (Mon/Thurs, 10am-8pm, Tues/Wed 10am-5pm). Support for lesbian, gay, bisexual and trans people experiencing domestic violence.

Galop

www.galop.org.uk, 0207 704 2040 (Helpline)
Charity providing advice and support to lesbians, gay men, bisexual and transgender people who have experienced homophobic or transphobic hate crime or violence in the greater London area. They provide support around domestic and sexual violence.

SOLA (Survivors of Lesbian Abuse)

solalondon@hotmail.com, 0207 328 7389
Support for any woman that has experienced abuse (past or present) from a female partner. Email support is available, and evening phone appointments are available by arrangement. Also has a weekly support group for survivors of rape (women only).

6) Older survivors

Action on Elder Abuse

www.elderabuse.org.uk, 0808 808 8141 (Helpline). National charity providing advice and information to victims and others who are concerned about or have witnessed abuse of older people.

7) Survivors who are disabled

Respond

www.respond.org.uk, 0808 808 0700 (Helpline)
London-based national charity providing psychotherapy and advocacy for people with learning disabilities who have experienced trauma. Independent Sexual Violence Advisor service for people with learning disabilities in inner London who have experienced sexual violence.

UK Disability Forum

www.edfwomen.org.uk/abuse.htm
This section of the UK Disability Forum website gives information for disabled women about getting help to tackle violence and abuse.

Voice UK

www.voiceuk.org.uk,
0845 122 8695 (Helpline)
Supports people with learning disabilities who are victims of crime or abuse, their families, carers and professional workers.

8) Specialist services for survivors with mental health and/or substance use problems

Emma Project (Nia)

www.niaendingviolence.org.uk,
0207 683 1270
The Emma Project is London's only refuge for women who are escaping gender violence and who use substances problematically; more than a third of the women who have lived in the refuge have also been exploited through prostitution.

Chrysalis Project (St Mungo's)

www.mungos.org, 0208 762 5500
Women-only hostel for women with a recent or current experience of trauma, abuse and sexual exploitation and a strong connection to Lambeth (31 beds).

DV Plus, Safer Places (Harlow & Broxbourne WA)

www.saferplaces.co.uk,
0845 0177 668
Specialist refuge in Essex for women with complex needs (6 beds).

Northampton Women's Aid

www.northamptonwomensaid.org.uk, 0845 123 2311
Specialist substance misuse refuge in Northampton (5 units)

RISE

www.riseuk.org.uk, 01273 622 822
Refuge and community based services in Brighton that can support women with more complex substance use and mental health problems

Manchester Women's Aid

<http://www.manchesterwomensaid.org>, 0161 660 7999
Employs specialist mental health and substance use workers within a complex families team to support survivors who use substances and/or have mental health problems.

Solace Women's Aid

www.solacewomensaid.org,
08453 131 868
Problematic substance use worker provides support and key working for women fleeing domestic violence who use substances.

9) Perpetrators

Respect

www.respect.uk.net,
0207 549 0578
UK membership association for domestic violence perpetrator programmes and associated support services. The Respect Phonenumber (0808 802 4040) offers information and advice to people who are abusive towards their partners and want help to stop. Respect also run the Men's Advice Line (0808 801 0327), for male survivors of domestic violence.

Domestic Violence Intervention Project

www.dvip.org,
0207 633 9181
Provides perpetrator programmes and partner support services in London to Respect standards.

Substance use

Key helplines

FRANK

www.talktofrank.com, 0800 77 66 00 (24hr Helpline), Text 82111.
Phonenumber run by the Department of Health, providing advice and information on drug and alcohol use to users, their families and friends.

DRINKLINE

0800 917 8282 (Mon-Fri, 9am-8pm; weekends, 11am-4pm)
The national alcohol helpline. If you're worried about your own or someone else's drinking, you can call this free helpline, in complete confidence.

National organisations

Addaction

www.addaction.org.uk,
0207 251 5860
A leading UK charity working in the field of drug and alcohol treatment. They have over 120 within communities and prisons across England and Wales, including support for young people and families affected by drug and alcohol use.

Adfam

www.adfam.org.uk, 0207 553 7640
National charity working to improve the quality of life for families affected by drug and alcohol use. Adfam run a network of local support groups across the UK.

Alcohol Concern

www.alcoholconcern.org.uk,
0207 928 7377
National charity working on problematic alcohol use. They work to reduce the incidence and costs of alcohol-related harm and to increase the range and quality of services available to people with alcohol-related problems.

Black Poppy

www.blackpoppy.org.uk
A user-run organisation, producing the drug user's health and lifestyle magazine, Black Poppy. BP's website includes a range of drugs information, including information on user groups in the UK.

DrugScope and LDAN

www.drugscope.org.uk and
www.ldan.org.uk, 0207 234 9730
National charity working to inform policy development and reduce drug-related risk. They provide quality drug information, promote

effective responses to drug taking, undertake research and provide policy-making advice. DrugScope's London Drug & Alcohol Network (LDAN) provides advice and support to member drug and alcohol agencies in London

FRANK

www.talktofrank.com,
0800 77 66 00 (24hr Helpline),
Text 82111
Website and phoneline run by the Department of Health, providing advice and information on drug and alcohol use to users, their families and friends. FRANK can provide information on specific treatment services available in your area. Information is particularly aimed at young people, but can be used by people of all ages.

Phoenix Futures

www.phoenix-futures.org.uk,
0207 234 9740
A national provider of care and rehabilitation services for people with drug and alcohol problems in the UK in community, prison and residential settings. Also provide residential services where children can stay with their parent(s).

RehabOnline

<http://www.rehab-online.org.uk/>
Online directory of residential rehabilitation services for adult drug and/or alcohol misusers in England and Wales, run by the NTA. It will give you information about these services, whether you are a member of the public, a professional or a service user.

Release

www.release.org.uk,
0845 4500 215 (Helpline)
National charity providing legal services to drug users, including support around housing, debt and welfare problems.

Turning Point

www.turning-point.co.uk,
0207 481 7600
020 7481 7600
A social care organisation working with individuals and their communities across England and Wales in the areas of drug and alcohol misuse, mental health and learning disability.

1) Black, Asian, minority ethnic and refugee people

Bro-Sis

www.freshwinds.org.uk,
0121 4156670
Advice and information, harm reduction information and structured treatment services for people from ethnic minority communities in Birmingham.

Ethnic Alcohol Counselling in Hounslow (EACH)

www.eachcounselling.org.uk,
020 8577 6059
EACH provides a culturally appropriate counselling and support service to individuals and their families who have been affected by alcohol, drugs and mental health problems in West London.

Drug and Alcohol Action Programme

www.daap.org.uk
A London-based charity, DAAP works with BME communities against addiction and promotes education, community cohesion and service provision. They provide information about alcohol in Polish, Somali, Punjabi, Hindi and Urdu, and information about khat in Somali.

Project 8 – Sanctuary Family Support

toxtethproject@hotmail.com,
0151 709 8100

An assessment and referral project that supports services in working with BME clients. Acts as a conduit for this group and support them into treatment.

2) Lesbian, gay, bisexual and transgender people

Antidote

www.thehungerford.org/antidote.asp, 020 7437 3523

Drugs and alcohol information and support service for LGBT people, based in Soho. Antidote also offers support to organisations working with LGBT clients.

Mental health

Key helplines

beat (beat eating disorders)

| 0845 634 1414 (for adults)and
0845 634 7650 (for young people)
(both helplines open Mon/Weds,
10.30am-7.30pm; Tues/Thurs/Fri,
10.30am-6.30pm), www.b-eat.co.uk

Carers Direct

0808 802 0202 (Monday-Friday,
9am-8pm; weekends, 11am-4pm)
Free, confidential information and
advice for carers.

Mind Infoline

0300 123 3393,
(Monday-Friday, 9am-6pm),
info@mind.org.uk
Information and advice about mental
health problems, medication and
treatment and where to get help

No Panic

0800 138 8889
(10am-10pm every day),
www.nopanic.org.uk
For people who suffer from panic
attacks, phobias, obsessive
compulsive disorders and other
related anxiety disorders including
those people who are trying to give
up tranquillisers

Rethink Mental Illness

Advice Line

0845 456 0455 (Monday-Friday,
10am-1pm), info@rethink.org
Provides expert advice and
information to people with mental
health problems and those who care
for them, as well as giving help to
health professionals, employers and
staff

Appendix H

Samaritans

08457 90 90 90 (24-hour helpline),
jo@samaritans.org
A listening service for anyone who
needs to talk or be heard

Saneline

0845 767 8000 (6pm-11pm),
www.sane.org.uk/what_we_do/
support/helpline
A national mental health helpline
providing information and support to
people with mental health problems
and those who support them.

National organisations

beat (beat eating disorders)

www.b-eat.co.uk, 0300 123 3355
UK's only nationwide organisation
supporting people affected by eating
disorders, their family members and
friends, and campaigning on their
behalf.

Bipolar UK

www.bipolaruk.org.uk,
0207 931 6480
Support and advice for people
with bipolar disorder (including
hypomania) and their families and
friends in England and Wales

Carers Trust

www.carers.org, 0844 800 4361
Works to improve support, services
and recognition for anyone living in
the UK with the challenges of caring,
unpaid, for a family member or
friend who is ill, frail, disabled or has
mental health or addiction problems

Emergence

www.emergenceplus.org.uk,
admin@emergenceplus.org.uk
A service user-led organisation
supporting all people affected
by personality disorder including
service users, carers, family and
friends and professionals.

Hafal

www.hafal.org, 01792 816 600
The leading organisation in Wales
working with individuals recovering
from severe mental health problems
and their families

MIND

www.mind.org.uk, 020 8519 2122
A leading organisation working
in England and Wales providing
advice and support to empower
anyone experiencing a mental
health problem. Also campaigns to
improve services, raise awareness
and promote understanding.

National Self Harm network

<http://www.nshn.co.uk/>,
0800 622 6000

Lead UK charity offering support, advice and advocacy services to people affected by self-harm directly or in a care role

No Panic

www.nopanic.org.uk,
0800 138 8889

A voluntary charity which helps people who suffer from anxiety-related problems including running a telephone recovery group.

Rethink

www.rethink.org, 0300 5000 927

Provide information, advice and support to people affected by mental ill-health. Run mental health services and support groups across England.

Samaritans

www.samaritans.org,
0208 394 8300

A national charity and the co-ordinating body for the 201 Samaritans branches in the UK, the Republic of Ireland, the Channel Islands and the Isle of Man that provide support to people experiencing emotional distress.

Saneline

www.sane.org.uk, 0207 375 1002

Practical information, crisis care and emotional support to anybody affected by mental health problems.

Together UK

www.together-uk.org,
020 7780 7300

Offers a wide variety of support to help people deal with the personal and practical impacts of mental health issues. Services include one-to-one support in the community, supported accommodation, information, advice and advocacy.

WISH

www.womenatwish.org.uk,
020 7017 2828

The only national, user-led charity working with women with mental health needs in prison, hospital and the community. It provides independent advocacy, emotional support and practical guidance at all stages of a woman's journey through the Mental Health and Criminal Justice Systems.

Appendix H

Children and young people's services

Childline

www.childline.org.uk, 0800 1111:
Free 24 hour confidential helpline for children and young people

The Hideout

www.thehideout.org.uk
The Hideout is the first national domestic violence website for children and young people. The website has been designed to inform children and young people about domestic violence, help them identify whether it is happening in their home and signpost them to additional support and information.

NSPCC

www.nspcc.org.uk
A national charity that works to end cruelty to children. If you're worried about a child's safety or welfare or if you need help or advice, ring the free and confidential helpline (24 hours).

Child Protection Helpline:
0808 800 5000
Bengali/Sylheti: 0800 096 7714
Gujurati: 0800 096 7715
Hindi: 0800 096 7716
Punjabi: 0800 096 7717

Urdu: 0800 096 7718
Asian Helpline Service in English:
0800 096 7719
Textphone: 0800 056 0566

Reunite

www.reunite.org,
0116 255 6234 (advice line)
A national organisation that provides advice, support and information to anyone that has had a child abducted or is in fear of a child being abducted. Assists with international contact issues and legal matters.

Runaway Helpline

www.runawayhelpline.org,
0808 800 7070
A freephone helpline for anyone aged 17 or under that has run away or been forced to leave home. Gives confidential advice, makes referrals as appropriate and can help a child or young person to a place of safety. Can also pass a message to family/carers.

Other

Action on Hearing Loss

0808 808 0123 (Mon-Fri, 9am-5pm), www.actiononhearingloss.org.uk
Information service for deaf and

hard of hearing people, their carers, families and professionals.

Citizen's Advice Bureau

www.citizensadvice.org.uk
Almost 400 Citizen's Advice Bureaux across England and Wales provide free advice to the general public on a range of issues including welfare benefits, debt, housing and consumer rights.

Crisis

www.crisis.org.uk, 0870 011 3335
Crisis is a national charity that provides services and programmes to empower homeless people. Works with single homeless people.

Deaf Blind UK

0800 132 320 (Mon-Thurs, 9am-5pm; Fri, 9am-4pm),
www.deafblind.org.uk
Information and support, including a befriending service, for people affected by sight and hearing loss.

Disability Rights UK

www.disabilityrightsuk.org
The leading authority on social security benefits for disabled people, and the website contains regularly updated information about benefits, tax credits and community care.

Gingerbread for Lone Parents

www.gingerbread.org.uk,
0800 018 4318 (advice line)
A national membership organisation providing advice and information for lone parents.

Homelessness Link

www.homeless.org.uk,
0207 960 3010
Homeless Link is the national membership organisation for frontline homelessness agencies in England.

NHS Direct

www.nhsdirect.nhs.uk, 0845 46 47
A 24-hour information and advice over the telephone on any health problem or service. The website has a Mental health section providing advice about what to do if you or someone close to you has a mental health problem

NHS Choices

www.nhs.uk
Comprehensive information about NHS services and medical advice

Appendix H

NICE

www.nice.org.uk

NICE, the National Institute for Clinical Excellence, writes guidance for health professionals on a range of issues including PTSD, depression, drug and alcohol treatment and dual diagnosis. Their recommendations are based on careful research to find what works, but they exclude methods that have not been rigorously studied within the health sector. Guidance can be accessed from their website.

Relate

www.relate.org.uk

Relate is the largest provider of relationship counselling in England. They have 70 centres across the country. Relate have a clear policy for working with couples affected by domestic violence and will not work with the couple together.

RNIB

0303 123 9999 (Mon-Fri, 8.45am-5.30pm), www.rnib.org.uk

Information and support for anyone with visual impairment and sight problems.

Shelter

www.shelter.org.uk, 0808 800 4444

A national organisation providing telephone housing advice and information. Issues include finding accommodation, hostel referrals, housing benefit/rights, illegal eviction, domestic violence and emergency accommodation.

National Treatment Agency for Substance Misuse (NTA)

www.nta.nhs.uk

An NHS special health authority, working to improve the availability, capacity and effectiveness of drug treatment in England. The NTA provides information and advice about drug treatment to professionals and service users and their families.

St Mungos

www.mungos.org.uk

St Mungos provides accommodation and support to homeless people, mainly in London and across the South of England.

Stonewall Housing

www.stonewallhousing.org,
0207 359 5767

Provides supported housing, advice and advocacy for the lesbian, gay, bisexual and transgender communities in London.

Victim Support

www.victimsupport.org,
0845 30 30 900

Offers information and support to victims of crime, whether or not they have reported the crime to the police.

B. Local services

Many of the national organisations listed in section A have local branches or services (for example, Crisis, Mind, Relate, Rethink, St Mungo's, Together UK, Turning Point) or can provide information about services in your area (Rape Crisis, Respect, Women's Aid).

There are also two key online search facilities:

Helpfinder | <http://helpfinder.drugscope.org.uk/>
Helpfinder is DrugScope's database of drug treatment services. It provides contact information and basic service provision details for drug treatment and care services in England, Wales, the Channel Islands and the Isle of Man.

HomelessUK

www.homelessuk.org
An online search facility with information on over 9,000 services - hostels, day centres and other advice and support services for homeless people and those at risk of homelessness.

Alternatively you can find out about local services and initiatives from various sections of your local authority:

Domestic Violence or Violence Against Women

Co-ordinator
Most local authority areas have a strategic lead who co-ordinates activities around domestic violence or, more recently violence against women. This may include running the Domestic Violence or Violence Against Women Forum, which is usually attended by a variety of interested parties such as the police, refuge staff and health professionals.

MARAC Co-ordinator

Most areas now have a MARAC (Multi-agency risk assessment conference) that is co-ordinated by someone in the local authority (often in the Community Safety Team) or in the police. The MARAC Co-ordinator can explain how you MARAC works and which agencies are involved.

Drug & Alcohol Action Teams (DAATs)

DAATs are located within councils, and coordinate drug and alcohol service provision in each area. Your local team can provide information on available treatment services, including referral criteria.

Safeguarding Boards

Each local authority has a Local Safeguarding Children's Board and a Safeguarding Adults Board. These Boards oversee activity within the local area to protect, respectively, children and vulnerable adults from harm. You may be able to find out information about local statutory mental health services from the Safeguarding Adults Team with the local authority.

Healthwatch

Local Involvement Networks (LINKs) are gradually being replaced by local Healthwatch organisations to act as an independent consumer champion, gathering and representing the views of the public. You should be able to find out information about local health services from your local Healthwatch. Healthwatch England (www.healthwatch.co.uk) holds details for all local groups.

Community Voluntary Action Councils

Usually funded by the local authority and other local statutory agencies, there is a Voluntary Action Council (or a similar body) working in many areas of the country. These groups are run by local groups to support, promote and develop local voluntary and community action. They often hold databases of local voluntary and community groups of all sizes.

C. Useful Resources

A literature review on multiple and complex needs

A comprehensive overview from the Scottish Executive of the available literature on supporting individuals and families affected by multiple

difficulties. <http://tinyurl.com/bpm8463>

Bridging To Change, Building Safe Relationships

Relate guidance on working safely with domestic violence within relationship counselling. <http://tinyurl.com/cwcsu3q>

Drug Misuse and Dependence: UK Guidance on Clinical Management

The Department of Health's guidance on how to assess and manage problematic drug use. <http://tinyurl.com/ccwv2mw>

Dual Diagnosis Toolkit: Mental Health and Substance Misuse

Written by Turning Point, this guidance gives an overview of commonly used substances and mental health problems, along with practical guidance for assessing and managing co-morbid substance use and mental ill-health. <http://tinyurl.com/bwgjgwh>

Embracing alcohol, domestic abuse and families – a new approach

Embrace, a project from Alcohol Concern, worked with alcohol services to improve responses to

domestic violence and encourage workers to 'Think Family'. A range of publications and guidance stemming from the project is available here: <http://tinyurl.com/chlex2d>.

Information Sharing: Guidance for Practitioners and Managers

Full information about how to share information in accordance with relevant legislative frameworks. <http://tinyurl.com/d4nxd5l>

Making decisions: A guide for people who work in health and social care

Guidance from the Office of the Public Guardian on the Mental Capacity Act on how to assess capacity and make decisions in the best interests of individual who lack capacity at a certain time. <http://tinyurl.com/cx43fuf>

NICE Guidance on Alcohol Use Disorders

How to diagnose, assess and manage harmful drinking and alcohol Dependence. <http://tinyurl.com/bwjhvs5>

No Secrets: Guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse

Department of Health guidance on safeguarding adults.
<http://tinyurl.com/cn5mj5p>

Protecting adults at risk in London: Good practice resource

Clear guidance from the Social Care Institute for Excellence on safeguarding adults procedures.
<http://tinyurl.com/9xvmkle>

Relational Safety Handbook

Written originally for staff in psychiatric wards and secure units, this guidance from the Royal College of Psychiatrists may be of interest to workers in any residential setting with adults who may have experienced trauma. <http://tinyurl.com/cydk8g9>

Responding to domestic abuse: a handbook for health professionals

The Department of Health's guidance for health professionals on screening for and responding to domestic abuse in clinical practice.
<http://tinyurl.com/crvyem6>

Sane Responses: good practice guidance for domestic violence and mental health services

AVA's toolkit for working with survivors and perpetrators of domestic violence who have mental health problems. <http://tinyurl.com/c6ac52x>

Stella Project Toolkit: good practice guidance for working with domestic violence, drugs and alcohol

Produced by AVA (previously the Greater London Domestic Violence Project), this toolkit offers detailed guidance on addressing the overlapping issues of domestic violence and substance use.
<http://tinyurl.com/bvesbsk>

“Striking the Balance”

Practical Guidance on the application of Caldicott Guardian Principles to information sharing in cases of domestic Violence and MARAC referrals. <http://tinyurl.com/cjfyev>

The Mind Guide to Crisis Services

Comprehensive information about statutory services that can be accessed by people experiencing a mental health crisis. <http://tinyurl.com/bm8nn9f>

Working together to safeguard children

Statutory guidance for public services on procedures for protecting children at risk of harm. <http://tinyurl.com/cx7lcz9>

Women with complex needs: good practice guidelines and pathways for working with women affected by domestic violence, substance misuse and mental health issues

Produced by Birmingham Domestic Violence Forum in partnership with local domestic violence, mental health and substance use services. This guidance seeks to support staff in their management of the impact and risks associated with domestic violence, together with their navigation of the specialist provision needed to meet the range and complexity of needs that abuse creates. <http://tinyurl.com/bm3u4ub>

Working with Troubled Families: a guide to the evidence and good practice

Published by the Department for Communities and Local Government, this guide has some clear practical guidance for practitioners supporting families who are multiply disadvantaged. <http://tinyurl.com/d6uskvj>