

Domestic abuse: learning from case reviews

Summary of key issues and learning for improved practice around domestic abuse

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Introduction

Published case reviews suggest professionals sometimes struggle to keep their focus on children when they are working with families where there is domestic abuse. The parents' relationship can end up overshadowing those of their children.

The learning from these case reviews highlights that professionals need to understand the dynamics of domestic abuse and the effect it can have on children, and not make assumptions about gender roles within relationships where there is domestic abuse. Professionals must prioritise the impact that living with domestic abuse has on children.

Reasons case reviews were commissioned

This briefing is based on case reviews published since 2019 where children experienced domestic abuse. It summarises and highlights the learning contained in the published reports.

Domestic abuse is any type of controlling, coercive or threatening behaviour, violence or abuse between people who are, or who have been in a relationship. It can include physical, sexual, psychological, emotional or financial abuse. Exposure to domestic abuse in childhood is child abuse. Physical violence was a key aspect in all the case reviews we analysed.

In these case reviews, children died or suffered serious harm in a number of different ways:

- physical injuries at the hands of the father, mother's partner or mother
- murder of the child following issues around post-separation contact
- serious and ongoing neglect linked to domestic abuse.

Key issues

Perceptions of gender

People of any gender can perpetrate domestic abuse and it can happen in different- and same-sex couples. In the case reviews analysed, both men and women perpetrated domestic abuse - but the majority of cases involved male perpetrators.

In some cases, practitioners were unclear whether a mother was the victim or perpetrator of abuse. They did not always view physical abuse by a woman against a man as a crime. Some men also held this view and therefore did not see themselves as victims of domestic abuse. This means practitioners were not always alert to children living in a family where domestic abuse was being perpetrated by a woman and underestimated the risk a mother may pose to her own children.

A perception that mothers are responsible for the care and protection of their children led some practitioners to rely too heavily on a mother's ability to keep her children safe from abuse. This was particularly the case if a father was absent or not engaged with services.

If practitioners do not engage fully with the men in a child's life, a man's role in the family can be overlooked. This means practitioners are unaware of the man's potential to protect or harm the child.

Understanding the complex nature of domestic abuse

Practitioners in these case reviews did not always understand the dynamics of domestic abuse and the effect that it can have on children. Domestic abuse was not always recognised as a child protection issue, which meant assessments focussed on the needs of the parents, rather than the safety of the child.

In one of the reports we looked at, an adult victim of domestic abuse needed to leave her home and was unable to take her children with her. Whilst it was important to keep the victim safe, professionals did not consider the risks for the children who were left being cared for by the perpetrator of the abuse.

Professionals may underestimate the risk to children during relationship breakdown and disputes about post-separation contact. Domestic abuse can continue after parents have separated and sometimes the stress of separation can be a trigger for a violent event. In one of the reports we looked at, a perpetrator of domestic abuse killed their child and themselves during a contact visit after separating from their partner due to physical violence.

Domestic abuse relationships may also be characterised by separations and reconciliations. Practitioners sometimes relied on out-of-date information about a parent's relationship status and were not always aware of separated couples getting back together.

Domestic abuse causes adult victims to live in fear for their own safety and the safety of their children. They may also be afraid of the consequences of seeking help. This can make it difficult for them to speak out and result in victims minimising abusive incidents and/or retracting disclosures they have made to a professional.

If professionals neglect to act on disclosures, particularly from children, those children may be less likely to make further disclosures. This can mean that the risk to children may not be fully understood.

Engagement with services

Families who have experienced domestic abuse do not always engage with services, such as domestic abuse support programmes or mental health services. They may participate in a service and gradually stop, suddenly stop attending support sessions or not engage with support at all. If practitioners are not aware of this, they may believe children and families are being supported when they are not.

In one of the reports we looked at, the lack of engagement between support services and a family in which domestic abuse was being perpetrated meant that professionals were unaware of the mother's pregnancy, and the birth and death of a child. Professionals were therefore unable to protect the child and support the family.

Parents who are not engaging with support services might not understand that they need support. Other parents may appear to comply with support services in order to allay concerns and reduce engagement with organisations such as children's social care. This can pose a risk to children's safety as professionals may be unaware of the full risk to the child.

A history of violence

Anyone with a history of violent offending, against adults or children, may present a high risk to partners or children. Those who have experienced abuse may have difficulty forming healthy relationships with new partners and family members.

Professionals weren't always aware that a partner had a violent history, and this limited their view of the risk to the child.

People who experienced domestic abuse were not always offered support and those who had a history of perpetrating domestic abuse were not always regularly assessed.

Triggers for violent incidents

Traumatic, distressing or unexpected events can elevate risk and trigger a violent incident that seriously harms or results in the death of a child. Drug and alcohol misuse can also fuel violent behaviour. In these case reviews, the main triggers were:

- relationship breakdown and issues surrounding post-separation contact with the child
- loss of employment
- injury
- physical and/or mental ill health.

Parental mental health problems

Experiencing domestic abuse can lead victims to have mental health issues, such as depression and suicidal thoughts. This can affect how they are able to care for and protect their children.

If a perpetrator of domestic abuse has mental health issues, this can be a contributing factor to violent incidents.

The case reviews we looked at listed some factors that could lead to abusive incidents. These included a perpetrator:

- having suicidal thoughts
- self-harming
- ceasing to take medication
- stopping engaging with services.

Learning for improved practice

Understanding the impact of domestic abuse on children

Professionals working with families where there is domestic abuse should be trained to understand the impact it has on children. Anyone working or volunteering with an adult who is experiencing or perpetrating domestic abuse should find out whether there are children in their family and, if so, make a referral to children's services.

Understanding relationships within the family

Any assessment should include information about all members of a child's household and all adults with significance in the child and their parents' lives. This should include birth parents, new partners and relevant ex-partners. Professionals should verify information about the composition of a household, understand who has contact with a child and regularly check that this information is up-to-date.

Practitioners should engage in a full and meaningful way with separated parents and other partners to understand their role in the child's life. This includes accessing records about partners' history and background where appropriate.

It's important to consider partners of the child's parents and carers, whether they are living in the family home or not. A parent's own relationships can affect how they care for their child. All the adults in a child's life should be included in child protection planning.

Professionals should always investigate whether domestic abuse could be a factor in a family, including speaking with parents, parents' partners and children individually to provide opportunities for people to disclose abuse.

Practitioners should investigate the reasons why a child and their parents or carers may not have contact with their wider family. For example, the members of a child's wider family may be aware of and concerned about domestic abuse. They may find it difficult to speak to the victim and perpetrator about it and therefore choose to distance themselves. Practitioners should be aware that isolation from extended family may indicate domestic abuse is taking place and take into account that the family may have less support as a result.

Assessing risk

Instances of domestic abuse should always be viewed as increasing the risk to children's safety. If parents who are experiencing or at risk of domestic abuse request support, the whole family should be assessed and appropriate support should be provided quickly for children and adults.

Assessments should consider all the factors that may contribute to a parent's ability to care for and protect their child.

Assessments should happen regularly in families where domestic abuse is taking place to enable practitioners to identify and respond to any changes. Practitioners should not be too reliant on information from parents and should exercise professional curiosity.

Professionals should remain focused on the emotional and physical wellbeing of the child. Asking parents questions should be one part of a wider assessment which

includes children's explanations of events. Seeking the voice of the child will help practitioners understand how the child has been affected and put in place the right measures and support.

During disputes about contact after parental separation, it is particularly important that agencies maintain a focus on the needs and safety of the children involved.

Rather than making assumptions about gender roles, practitioners should consider that, in some cases, a father may be more able to protect a child than a mother, for example if the mother is perpetrating domestic abuse, or where the mother's partner is abusive, and the child's father may be able to provide safe care.

Seeing the bigger picture

Incidents of domestic abuse or physical injury need to be seen within the context of what else is known about a family. Professional agencies should keep up-to-date, good quality, relevant records about children and families to help gain a fuller understanding of the family environment.

Information about domestic abuse should be shared quickly and regularly with all agencies involved with a family. This includes historic information and information about each new domestic abuse incident, regardless of whether it is classed as low risk. This can help agencies take domestic abuse seriously and enable them to identify patterns of behaviour that may pose a high level of risk to a child.

Practitioners should be curious about claims that domestic abuse is not taking place – particularly when there is a history of violence or a previous disclosure of abuse is retracted. Practitioners need to be aware that victims and perpetrators may not recognise that the relationship is abusive.

References

A list of the case reviews analysed for this briefing is available on the [NSPCC Library Catalogue](#).

The national case review repository makes it easier to access and share learning from published case reviews at local, regional and national level. You can access the repository via the [NSPCC Library](#).

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