

**Committee for Justice** 

## OFFICIAL REPORT (Hansard)

Domestic and Sexual Violence and Abuse Strategy: Department of Justice and Department of Health, Social Services and Public Safety

15 October 2014

## NORTHERN IRELAND ASSEMBLY

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Domestic and Sexual Violence and Abuse Strategy: Department of Justice and Department of Health, Social Services and Public Safety

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Members present for all or part of the proceedings: Mr Paul Givan (Chairperson) Mr Paul Frew Mr Seán Lynch Mr Alban Maginness Mr Edwin Poots

Witnesses: Mr Gary Gregg Ms Moira Doherty Ms Martine McKillop

Department of Health, Social Services and Public Safety Department of Justice Department of Justice

**The Chairperson (Mr Givan):** I welcome, from the Department of Justice, Moira Doherty, deputy director of the strategy, innovation and research division, and Martine McKillop, head of the crime reduction branch in the community safety unit, and, from the Department of Health, Social Services and Public Safety, Gary Gregg, policy lead of the domestic and sexual violence integrated projects unit. You are all very welcome to the meeting. It will be recorded by Hansard, and a report will then be published. I will hand over to you, and then members will have questions.

**Ms Moira Doherty (Department of Justice):** Thank you, Mr Chairman. We are grateful for the opportunity to brief Committee members on the response to the consultation on the new domestic and sexual violence and abuse strategy and our proposed next steps.

I will begin by introducing myself. I am Moira Doherty. I am actually the deputy director of the community safety unit. I moved very recently, so apologies that you have the wrong details there. I am accompanied by Martine McKillop, who is the head of our crime reduction branch and the policy lead on domestic and sexual violence and abuse. I am also very grateful to our colleague Gary Gregg from the Department of Health, who has kindly agreed to join us today as this strategy has a joint Justice and Health lead.

To set the context for the discussion this afternoon, I would like to explain why there is a need for a strategy on domestic and sexual violence and abuse in Northern Ireland. Domestic and sexual violence and abuse across the community in Northern Ireland remain largely a hidden problem that happens often behind closed doors and is considered by many to be a personal or private matter. We want to bring these issues out into the open.

We know that there are significant levels of under-reporting of these crimes. Research tells us that, in the context of domestic violence, a person can be assaulted an average of 30 times before they

contact the police. We also know that domestic violence increases when a woman is pregnant. In the majority of cases of abuse, children are in the room or the next room when the abuse occurs.

In 2013-14, the PSNI recorded over 27,000 domestic abuse incidents, over 12,000 domestic abuse crimes, 550 rapes and almost 2,000 other sexual offences. These are some of the highest levels recorded, but we know that the crimes are under-reported. We need to understand better whether this means that these crimes are on the rise or whether it is due to victims feeling more confident coming forward.

Much work has already been done to encourage victims to come forward and feel confident to come forward and report. We want to build on what has already been achieved under the current strategies, which are Tackling Violence at Home and Tackling Sexual Violence and Abuse. These will remain live until our new strategy is published. Our ultimate aspiration is to stop domestic and sexual violence and abuse in Northern Ireland. This has to be done through strong leadership, partnership working at both the strategic and operational level and listening very carefully to practitioner and victim survivor feedback.

Committee members will note that the draft strategy covers both domestic and sexual violence and abuse. This is due to the view of our stakeholders that a comprehensive joint strategy on these issues would be more effective. We also recognise that taking a more cohesive and joined-up approach would result in sharing of learning and best practice across the two fields and potentially reduce any unnecessary overlap or duplication.

The draft strategy was prepared through our regional strategy group on domestic and sexual violence and abuse, which I co-chair with my opposite number in Health. That takes on board the perspectives of front line professionals in both the justice and health communities and a wide range of voluntary and community sector groups that represent those directly affected by these issues. In addition to that strategy group, we engaged extensively with stakeholders in developing the draft strategy. Initially, three events were run in Belfast and the north-west involving 108 stakeholders from the statutory and voluntary and community sectors. The key themes of the draft strategy were driving change, prevention and early intervention, delivering change and support, and protection in justice.

With the help of the strategy group, we ensured that this public consultation was as inclusive and participative as possible. Members of my team and colleagues from health, including Gary, presented on the content of the strategy to 15 groups across Northern Ireland, including individuals who had been victims of domestic violence and abuse and sexual violence and abuse, as well as professionals and individuals with an interest in the topic. This was a key part of the public consultation that was launched in January. The consultation included publication of an easy access version of the draft strategy, which was intended to be accessible to younger people and those with a learning disability.

Due to a request from a number of respondents, we extended the consultation period until the end of May. Given the sensitive nature of this strategy, we were delighted to receive 68 responses to the consultation. Some of the responses were very detailed, and we welcome that level of engagement. Each of those responses was considered by the strategy group in two workshops over the summer. The response to the strategy was, on the whole, very positive and supportive. Respondents welcomed the two revised definitions of domestic violence and abuse and sexual violence and abuse and, in particular, the inclusion of threatening, controlling or coercive behaviour and the recognition of wider forms of domestic and sexual violence and abuse. Respondents also welcomed the fact that the document is very victim-focused, recognises the need for support and equality of access for victims, and focuses on prevention and early intervention.

With our DHSSPS colleagues, we have begun to redraft the document to take account of the issues raised during the consultation. For example, we need to make more reference to the civil justice system in recognition of the fact that that is a route that many victims take. We got some feedback on some of the models that we had used and the language and terminology that people felt were inappropriate or did not properly reflect the experience of people coming through the system. There was also a desire for us to reflect more comprehensively some of the services that are already available and to locate our strategy more within the overarching human rights context. Some of the issues that were raised will require us to have further engagement, particularly with other Departments, on health, housing and other issues.

Where we go from here is to have those meetings with the other Departments to see if we can further enhance what we have in the strategy. We will then have the final document reviewed by the strategy group before going to our respective Ministers. We anticipate coming back to the Committee with that

more final draft in the spring. Our intention, following Executive approval, is to publish before March 2015.

The strategy aims to build on existing good practice to focus on tailored and responsive services and support, early intervention and prevention, and a strong response from the justice system. I have provided members with an overview of the consultation and our proposed next steps. My colleagues and I are very happy to take any questions.

**The Chairperson (Mr Givan):** Thank you very much, Moira. I certainly welcome the progress that has been made. I appreciate, though, that it is a 2013-2020 strategy and, obviously, it has not been published yet, so the Committee will be keen to see it finally published. Given the current financial environment that the Departments find themselves in, are there any concerns that the strategy will not actually be resourced?

**Ms Doherty:** That was certainly one of the issues raised with us during the consultation. Obviously, we are in the same position as all of our colleagues across the Department and other Departments, in that we are operating within a climate of some financial uncertainty, but we certainly hope to see a number of the key commitments that we already have in the area continuing to be funded. We are also going to look carefully — this is a necessary consequence of the change in financial climate — at where we can work differently or more innovatively with the resources we have. In particular, one of the benefits of having taken a very strong partnership approach is that it allows you, having built up those very good relationships with stakeholders, to have very open conversations about how we could do things differently with the existing resources.

**The Chairperson (Mr Givan):** Obviously, you have had people making submissions, but where have you looked at best practice outside of the jurisdiction to inform the strategy that you want to implement?

**Ms Doherty:** The evidence base that was used to inform the strategy drew on some international best practice as well as what is happening in other parts of the UK. Martine, perhaps you could talk a wee bit about that.

**Ms Martine McKillop (Department of Justice):** Certainly. A desk-based research pack was developed and considered by officials. As Moira said, we have also linked with colleagues across the UK and in the South of Ireland to try to consider best practice across the development of a strategy. But probably even more important is the research base from our regional strategy group and the victims that have been fed in through both the regional strategy group and the consultation process, which helps shape that best practice to best delivery here in Northern Ireland for our own needs.

**The Chairperson (Mr Givan):** Why is it that domestic violence seems to increase when the woman is pregnant? What are the underlying causal factors for that? It seems pretty alarming that violence increases when the woman gets pregnant.

**Ms McKillop:** I think it is possibly because the victim is perceived as more vulnerable. I am not sure of the actual detail of individual circumstances, but I think it is because the woman is seen as more vulnerable. I am not sure if you have any comment from a health perspective, Gary.

Mr Gary Gregg (Department of Health, Social Services and Public Safety): That seems to be the evidence, yes.

The Chairperson (Mr Givan): It is pretty shocking. It is shocking at any point, but to exploit someone in an even more vulnerable position speaks volumes about the individual who would do that.

**Mr A Maginness:** Thank you very much for your submission to the Committee. I think one of the real problems is how you encourage victims of sexual or domestic violence to participate in the justice system. I think there is a real problem there. I am not sure how one can successfully encourage that. Have you any response to that in terms of the consultation?

**Ms Doherty:** Martine, do you want to pick up on some of the consultation points? When we move into the delivery and implementation phase, we absolutely have to consider how we can ensure, first of all, that victims have the confidence to speak up and come forward and that, when they do, the process that we put them through is as supportive as possible. We are very conscious that it is not always the

most accessible or easy of processes. That is absolutely fundamental to where we are taking it in the delivery. Is there anything specific to the consultation, Martine?

**Ms McKillop:** I think that the consultation responses certainly endorse that. It is around supporting the victims and encouraging them as they go through the process. I think that, within the justice system, work has started on trying to address that for the wider victims issues under the victims and witnesses strategy. Also, in the area of domestic violence, we are currently piloting not so much a specialist domestic violence court as a specialist listing arrangement in the north-west, which aims to hold cases that involve domestic violence on particular days in the month and to ensure that all of the support services are there, right from police to victim support and Women's Aid, to try to support the victim. That pilot is to be evaluated. I think that it is currently being evaluated, and we will take the learning from that and see how we can build on it.

**Mr A Maginness:** I do think that that is a key element in the overall delivery. Of course, it is reflective of the work that we did here as a Committee. I know that you have acknowledged that in the consultation document. Just one small point, you mentioned participation of young people and children. Was your version of the consultation document child-friendly?

**Ms Doherty:** There are maybe two elements to it. First, we did produce an easy-access version, which we had intended to be accessible for younger people and people with learning difficulties. We do not think that we got that right. The feedback that we got was not positive. It was something that we did in good faith and with a positive intention, and it is fair to say that it did not work out. We need to reflect on that to make sure that, when we do this the next time, we respond. We will probably go back and engage with the people who gave us the feedback to get something more appropriate and more effective for next time. Alongside the accessible version, we also had the events that were held with some young people. Gary, do you want to pick up on that?

**Mr Gregg:** We used the easy-access version as a sort of halfway house between an easy-read version, which is normally pitched at individuals with a learning disability, and a children's version. As Moira said, we got that wrong, and we accept that we got that wrong. Looking to the future, we certainly will look to the possibility of a full easy-read version and a children's version.

We had two engagement events particularly for children and young people, one organised by NSPCC in Craigavon. NSPCC facilitated us presenting to a children's forum, a children's community group, in the Brownlow area of Craigavon. The age group was between 14 and 18 or so, and Women's Aid facilitated another group in Ballymena of around the same age group. We got some very positive feedback from those groups and very encouraging feedback on the strategy. Also, we got some robust feedback on where we should be engaging with education.

Mr A Maginness: Thank you very much. That is extremely helpful.

**Mr Poots:** One of the positive things about this is the cooperation between the Department of Health and the Department of Justice, because there is that cross-cutting that takes place. More recently, we had the opening of the new facility at the Antrim Area Hospital that deals with abuse. Have you seen the benefits of that coming through in that you are getting more cases reported to you? I am of the view that we are only scratching the surface on the numbers of domestic violence cases and cases of sexual abuse in the home and are not really getting to the true extent of it. Are you seeing greater numbers reporting this type of violence?

**Ms McKillop:** I think that the figures show that there is certainly an increase in reporting, but, as, I think, Moira mentioned, we are not clear whether that is because victims feel more confident to come forward or whether it is because of a rise in incidents. We are maybe seeing some of the hidden issues. As Moira said, in many cases, there can be up to 30 incidents of domestic violence before a victim feels safe and comfortable enough to report it. Perhaps some of the work that we have already done around raising awareness and the establishment of the Rowan sexual assault referral centre and the multi-agency risk assessment conferences (MARACs) is possibly encouraging victims to feel that they can report it.

**Mr Poots:** One of the key drivers behind the strategy is to increase reporting. Having low numbers reported is not a sign of things being good; it is actually a sign of people who are too afraid to come forward.

**Ms McKillop:** Absolutely. Raising awareness is a key element of the new strategy through an integrated information plan, where we seek to raise awareness with the general public and with the key professions and organisations that may encounter victims. That is work that we are keen to take forward.

Mr Poots: It is a good piece of work.

**The Chairperson (Mr Givan):** Thank you very much for coming. Obviously, we look forward to seeing the final product in the new year.