



Domestic violence/abuse prevention in Bristol

...a communication strategy
2008-2011

Bristol's vision is that domestic violence and abuse will be prevented and where this is not possible, people at risk from its effects will be identified and empowered to live without fear. Those most vulnerable will be protected through effective services which are accessible to all.

This strategy has been developed by Safer Bristol Domestic Violence/Abuse Prevention Group.

Contact for more information:

Lesley Welch, Domestic Abuse Strategy Co-ordinator

Tel: 0117 014 2225

Email: lesley.welch@bristol.gov.uk

February 2009

Contents

Introduction	4
What is this document?.....	4
What is it for?	4
Section 1: Domestic violence and abuse in Bristol	5
Background.....	5
Key facts	5
Bristol DVA Action Plan 2008-2011	6
Section 2: What do we need to consider?	8
Who is the audience? Are there key target groups? ..	8
What does the evidence say is most effective?	9
Which communication channels?	9
Do we need tailored messages for priority groups?..	9
What resources do we have?	9
What are the roles and responsibilities?	10
Using a tiered model	10
Section 3: Communication Action Plan 2009-2010	12
DVA prevention calendar	15
Appendix A: DVA Action Plan Communication Objectives.....	16
Appendix B: Tailored messages for priority groups.....	20

Introduction

What is this document?

This is a working document which outlines a communication strategy for the Safer Bristol Domestic Violence/Abuse (DVA) Prevention Group. The strategy covers the period 2008-2011 and has a one-year action plan for 2009-2010. The action plan will be updated each year.

This strategy contributes towards the aims of the Bristol Domestic Violence/Abuse Strategy 2008-2011 and the Bristol DVA Action Plan 2008-2011. It sits alongside the Bristol DVA training strategy. It covers external communication with the public - with women, men and children and with other professionals.

What is it for?

This strategy aims to set a context for citywide and local actions to prevent DVA and to coordinate publicity campaigns. The aims of communication in this context are to raise awareness by delivering clear and effective messages to the general public, to targeted groups of the public and to professionals and agencies about:

- the extent, harm and unacceptability of domestic violence/abuse
- services available to support and protect survivors, including children and young people
- services available to change and prevent abusive behaviour
- the commitment of the city of Bristol to change the culture of tolerance of domestic violence/abuse.

Safer Bristol Partnership's definition of domestic abuse

- Domestic abuse is the misuse of physical, emotional, psychological, sexual or financial control by one person over another who is or has been in a relationship. This includes family members.
- It can include being threatened with abuse.
- It is usually by men against women, but not exclusively.
- It happens in all groups and sections of society. Race, sexuality, disability, age, religion, culture, class or mental health may have an additional impact on the way domestic abuse is experienced, dealt with and responded to.

Section 1: Domestic violence and abuse in Bristol

Background

The Bristol DVA strategy was developed by Safer Bristol Partnership DVA Strategy Group to ensure that the response to domestic violence and abuse is proportionate to the significant effect that it has on the lives of communities in Bristol. This strategic group is responsible for delivering the overall DVA strategy. The group is accountable to the Safer Bristol Executive.

This communication strategy has been developed by the DVA Prevention Group and relates only to communication in relation to the prevention elements of the overall strategy.

Key facts

- Over 7,000 domestic incidents were reported to the police in Bristol in 2006-2007, and almost half of these were violent crimes. Taking the British Crime Survey's calculation of under-reporting into consideration, the true frequency of domestic abuse in Bristol is estimated to be over 26,000 a year. This equates to 70 incidents per day, or nearly three every hour.
- The impact on survivors is wide ranging, and can ultimately culminate in domestic homicide.
- There is a high prevalence of child abuse in families where there is domestic abuse. The impact of such abuse can have long lasting effects. Forty per cent of children on Bristol's Child Protection Register are living in households where there is domestic violence.
- Most police reports relate to male perpetrators against female victims, although there are male and female perpetrators of domestic abuse in same sex relationships and sometimes women abusing men.
- Less than one in twenty incidents reported to the police result in a conviction.
- Victims/survivors stay, or return to, perpetrators because of issues of power, fear, practical difficulties, children, emotional dependency and for financial reasons.
- Domestic violence and abuse has the highest rate of repeat victimisation of all crimes. Tackling prolific domestic violence perpetrators can have a large impact on crime reduction targets.
- The cost of domestic violence and abuse in Bristol is

estimated to be nearly £49 million per annum. This includes the cost of state responses and the loss of economic output.

Bristol DVA Action Plan 2008-2011

The DVA Action Plan identifies ten key objectives in relation to four themes:

- performance
- prevention
- provision
- protection & justice.

There are three objectives relating to prevention.

Objective 3

Adults and children and professionals at all levels in agencies will be informed that domestic violence/abuse is widespread, damaging and not to be excused in any circumstances.

Objective 4

All children and young people and their carers are informed about healthy relationships and the impact of domestic violence/abuse.

Objective 10.1

Victims are aware of and have faith in multi-agency reporting/response systems. They report the incidents to police, social care and other relevant agencies.

These three objectives are split into more detailed objectives - see Appendix A.

Add in Objectives newly moved into Prevention (see DVASG meeting 28Jan09)...Are there more? SB.

What are the key messages?

Domestic violence/abuse is widespread, damaging and not to be excused in any circumstances.

Survivors have the right to get support to become physically and emotionally safe.

Children are often directly involved in DVA against a parent and are always affected in some way. Non-abusing parents can be supported to protect their children. Children can be supported to strengthen their resilience.

Perpetrators will be held to account for their abusive behaviour.

Perpetrators can change their behaviour if they are motivated to do so.

The city of Bristol does not tolerate DVA.

Section 2: What do we need to consider?

For each communication objective we need to consider some key issues. This strategy identifies overall objectives. The planning group for each action will consider the following questions as a part of the detailed planning process.

Who is the audience? Are there key target groups?
--

The audience will depend on what it is we are trying to achieve. For each campaign it may be:

- organisations and agencies in Bristol
- people in particular communities such as:
 - residents in target areas
 - residents in target groups e.g. young people, people experiencing DVA
 - local workers e.g. Bristol City Council, Bristol PCT, police, voluntary sector, health services
 - schools, local groups, community organisations, churches
 - local businesses
- a Bristol wide audience:
 - all residents
 - councillors and MPs
 - forums and partnerships
 - statutory bodies such as the police, NHS, schools
- a national audience:
 - MPs, government offices/regional offices
 - national bodies, national voluntary sector.

Key target groups are women in general and especially all equalities groups, in particular Black and minority ethnic and/or refugee women (BMER), Disabled women, lesbians, gay men, bisexual and transgender people (LGBT) and women living in deprived communities. Male victims of female perpetrators will be acknowledged and signposted to support services.

Some initiatives will target some of these groups directly and all initiatives will need to ensure that the needs of these groups are considered.

What does the evidence say is most effective?

A key objective is to investigate further the effectiveness of different media in raising awareness with different groups. Local actions will be based on evidence of effectiveness, if possible, or piloted and evaluated if not. *Note: where can we get evidence of effectiveness?*

Which communication channels?

Communication channels will include a whole range and mix of mass media, community-based and one-to-one communication.

Mass media will include:

- national television, radio, websites, DVDs as well as print in terms of newspapers, magazines, newsletters etc
- local radio, newspapers, newsletters, buses and bus shelters
- e-communications.

Community-based activities may include drama, films and video shows, meetings, events, support groups, visits to local organisations and groups, training courses, local radio, leaflets, newsletters, posters etc.

Personal or one-to-one communication could include personalised advice, information giving and counselling in different settings, through face to face contact, or through telephone helplines etc.

Do we need tailored messages for priority groups?

DVA messages will include those for women, for men, children and young people and professionals.

It may be useful to identify different sections of the audience and develop customised messages. We will need to do this for key target groups and for different objectives (see Appendix B).

We will identify appropriate and specific delivery mechanisms for different groups and different messages.

What resources do we have?

Resources will be available from a range of agencies and will vary with each objective. Resources are identified where possible in the action plan. New resources may be needed.

What are the roles and responsibilities?

The Safer Bristol DVA Prevention Group will oversee the performance management of the Communications Strategy.

Using a tiered model

In Bristol a tiered model is used to plan services for survivors, children and perpetrators. Prevention objectives, including communication objectives, fit primarily in Tier 1, although providing information about available services and support will contribute to work in all tiers.

Tier 1: Universal services - all adults, children and young people are informed about healthy relationships and the extent and impact of domestic violence/abuse and zero tolerance policies and support. Interventions of information and support by all agencies.

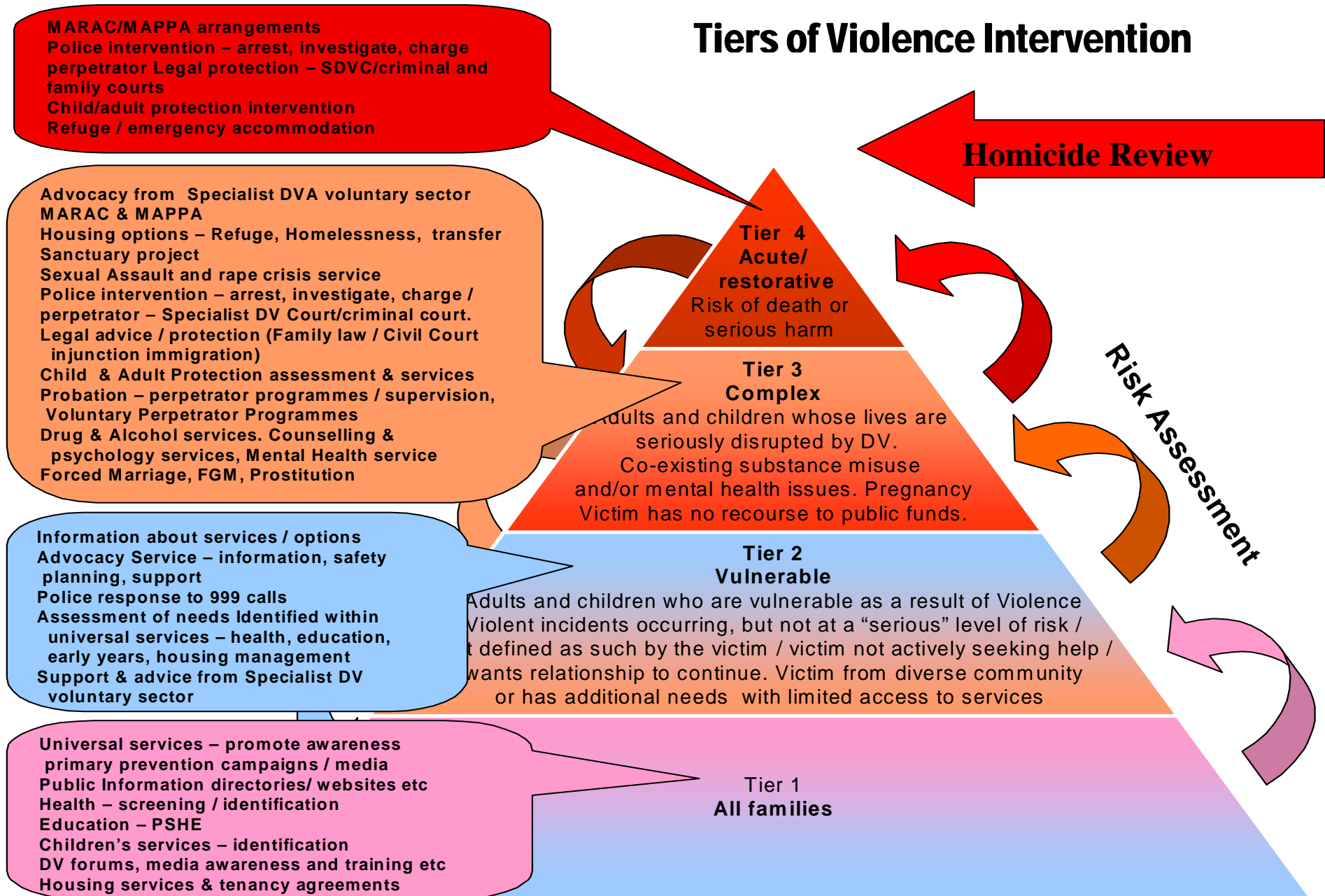
Tier 2: Adults, children and young people who are vulnerable as a result of domestic violence/abuse are identified and offered support and safety planning, to minimise the impact on them. Specific and low-level interventions by non-specialist agencies.

Adults and young people who are committing low levels of domestic violence/abuse are informed of agency policies of zero tolerance, the impact of their behaviour and warned of the consequences, including prosecution wherever possible, and encouraged to seek help to change their behaviour.

Tier 3: Adults, children and young people who are severely affected (for example, forced to leave their homes and/or suffering severe long-term impact on mental/physical health) by domestic violence/abuse are offered a coordinated response that prioritises their safety. Perpetrators of domestic violence/abuse are subjected to prosecution wherever possible, with rigorous sentencing and including mandatory behaviour-change programmes where suitable.

Tier 4: People who are at risk of significant harm (for example, death or severe mental/physical injury) as a result of domestic violence/abuse – as tier 3. Children and young people will be protected primarily by protecting the non-abusing parent and if necessary through child protection procedures. Adults and young people who are perpetrators of domestic violence/abuse – as tier 3.

Tiers of Violence Intervention



Section 3: Communication Action Plan 2009-2010

These communication objectives relate to the prevention objectives outlined in Appendix A.

Ref	Communication objective	Target group	Res's	Prev. objs	Outcome measures
1	Campaigns: coordinate support and publicity for a minimum of three awareness-raising campaigns throughout the year in February/March, June/July and in November (see calendar). Use as a focus for the launch of new services, new resources etc. May include conferences, community television, student magazines, bus shelter messages, e-messages, for example.	All depending on activity	£4,000.	Tier 1: Obj 3.1	Communication strategy adopted and calendar used as basis for planning
2	Targeting initiatives: ensure that all initiatives address the needs of equalities groups, in particular Black and minority ethnic and/or refugee women (BMER), Disabled women, lesbians, gay men, bisexual and transgender people (LGBT) and women living in geographically deprived communities. Link with health trainers and community health development workers.	Equalities groups		Tier 1; Tier 2 - 4 information on services Obj 3.1	No. of campaigns targeted at equalities groups

Ref	Communication objective	Target group	Res's	Prev. objs	Outcome measures
3	Data collection: collect, collate and disseminate local data on DVA each year. To include facts and figures and data on attitudes from the Quality of Life Survey (BCC).	Local decision makers/ professionals		Tier 1 Obj 3.1	Annual leaflet produced and disseminated
4	Research: investigate the effectiveness of different media in raising awareness within different groups. Contract a specialist consultant to do this work.	All			Summary produced and disseminated
5	Resources: Work with KRIS (NHS central point that has agreed to manage and distribute Bristol-wide DVA resources) to ensure resources are distributed regularly and appropriately. Ensure all resources are regularly reviewed. Coordinate and update information on websites. Information to include awareness-raising and about local services.	All plus equalities groups particularly		Tier 1; plus Tiers 2-4 re info on services Obj 3.1	No of new resources developed. Resources distributed.
6	Local sports club initiatives: link with local sports clubs and use the white ribbon campaign to spread the 'men saying no to violence' message.	Men		Tier 1 Obj 3.1	No of clubs involved
7	Workplace: encourage, support and offer	Employers		Tier 1 and	No of organisations

Ref	Communication objective	Target group	Res's	Prev. objs	Outcome measures
	guidance on DVA policies in the workplace. Work with human resources departments and link with the DVA training strategy initiatives to implement good practice.	and employees		Tier 2 Obj 3.1	with new DVA policies
8	Children and young people: link with the training strategy and Healthy Schools in disseminating the Spiralling Prevention Toolkit and delivering other initiatives.	Teachers, children and young people		Tier 1 Obj 4.1	No of schools received training
9	Parenting: Following the end of the pilot parenting strategy, seek resources to produce materials to enable the implementation of good practice.	Parents		Tier 1 Obj 3.1	Amount of resources acquired. Materials produced
10	To increase reporting of DVA to the police	General public and professionals		Tier 2 and above Obj 10.1	Reporting data
11	Political activism: lobby local and national government as appropriate.	National and local politicians and decision makers		Tier 1 Obj 3.1	Increased resources for DVA

DVA prevention calendar	
--------------------------------	--

January	
February	14th Valentines Day: Spring DVA campaign Quarterly website update, including Feb campaign
March	8th: International Women's Day
April	
May	Quarterly website update, including summer campaign
June	Summer DVA campaign
July	
August	Review DVA resources Quarterly website update
September	
October	
November	25th: International campaign: Violence Against Women Quarterly website update, including November campaign
December	

We can use this as basis for planning our work – ie. need to add in when we should be planning campaigns, booking ads, producing/reviewing materials etc.

Appendix A: DVA Action Plan Communication Objectives

The DVA Bristol Action Plan objectives relating to communication are shown in more detail below.

Note: The DVA Action Plan is a working document, reviewed quarterly, and therefore subject to change.

Objective 3.1: Prevention

The message that domestic violence/abuse is widespread, damaging and not to be excused in any circumstances is seen by members of the public in a variety of ways. By April 2011, we aim to show an increase in a qualitative measure of awareness.

Ref	Action	Time-scale	Lead responsibility	Resources	Performance / outcome measures	1. Confidence level 2. Risks
3.1.1	Develop communications strategy	1 Jul 2008	Asst. Director of Public Health (PCT)	Campaigns & materials £2K pa. Cost of Quality of Life surveys. Conferences seminars - £2K pa Officer time - £5K (in-kind)	Communication strategy in place Quality of Life survey analysed	1 – Medium/high – pattern of campaigning in place; many materials designed 2 – Low/medium – PCT experience available

Objective 3.2

Development of a city-wide workforce competent in working with and sign-posting on survivors/ perpetrators/ children.

By April 2011 we aim to have DVA training integrated into induction and ongoing training programmes for all relevant professionals in statutory and voluntary sector agencies.

Ref	Action	Time-scale	Lead responsibility	Resources	Performance / outcome measures	1. Confidence level 2. Risks
3.2.1	Develop training strategy, ensuring quality standards and developing resources for professionals.	1 Oct 2008	DA Strategy Co-ordinator	BDAF Training Coordinator £18K pa Contracted trainers £17K pa Training costs £8K pa Multi-agency officer time	Training strategy agreed. Evaluation by training participants will show increased awareness and skills. Number of agencies that access training, have adopted a DVA policy and appointed a lead professional. Number of courses delivered	1 – Medium/high – strategy drafted, to be agreed. Training in place, quality standards to be developed. 2 – Low/medium - lack of officer time across agencies (re core competencies); lack of financial resources to pay professional trainers

Objective 4

All children and young people and their carers are informed about healthy relationships and the impact of domestic violence/abuse.

Objective 4.1

Children and young people are informed about and supported in safer healthier relationships. By April 2011 we aim to show zero tolerance of DVA amongst children and young people.

Ref	Action	Time-scale	Lead responsibility	Resources	Performance / outcome measures	1. Confidence level 2. Risks
4.1.1	Disseminate Spiralling prevention toolkit systematically to schools, youth workers and out-of-school support, with training/advice on use.	1 Apr 2008 on-going	DA Strategy Co-ordinator/ new post DVA CYP co-ordinator (0.6 FTE)	Officer time New post £21K pa	Number of schools trained & using Spiralling toolkit Quality of Life survey shows reduced tolerance of DVA amongst CYP. CYP living with DVA and/or in abusive relationships seek support.	1 – Medium/high – dissemination/training already underway. 2 – Lack of officer time/resources for new post.
4.1.2	Complete detailed prevention action plan for all children.	???	New CYP & Parenting DVA working group?	As above	Action plan in place, signed up to by strategic partnerships	1 - Medium/high 2 – medium/high – lack of officer time

Objective 10.1

Victims are aware of, and have faith in, multi-agency reporting/response systems. They report the incidents to police, social care and other relevant agencies.

Ref	Action	Time-scale	Lead responsibility	Resources	Performance / outcome measures	1. Confidence level 2. Risks
10.1.1	Services need to be appropriately publicised & delivered professionally and sensitively so that the experiences of those accessing them will be predominantly positive.	Mar 2009	Chair, Safer Bristol DVA Strategy Group	Within Prevention budget	<p>Effective performance management systems that develop processes so that individual experience of service delivery is positive.</p> <p>Credible and transparent complaint processes exist that deal with complaints sensitively and effectively so that service-users have faith in them.</p>	<p>1 – Medium/high 2 – Medium</p>

Appendix B: Tailored messages for priority groups

Priority groups are as identified by Equalities Impact Assessment of main DVA Strategy 2008-2011)

Note: This is work in progress - to be completed

Group	Main messages	Delivery mechanism
Young women		
Elderly people		
Disabled people		
Pregnant women		
LGBT people		
Survivors with a history of DVA against them		
Black and minority ethnic people		
Refugees		
Women and men subject to so-called 'honour' violence		
Women subject to female genital mutilation		