

DUNDEE AND ANGUS

MULTI-AGENCY PROTOCOL

FOR

HONOUR BASED VIOLENCE

Dundee and Angus Multi-Agency Protocol for Honour Based Violence

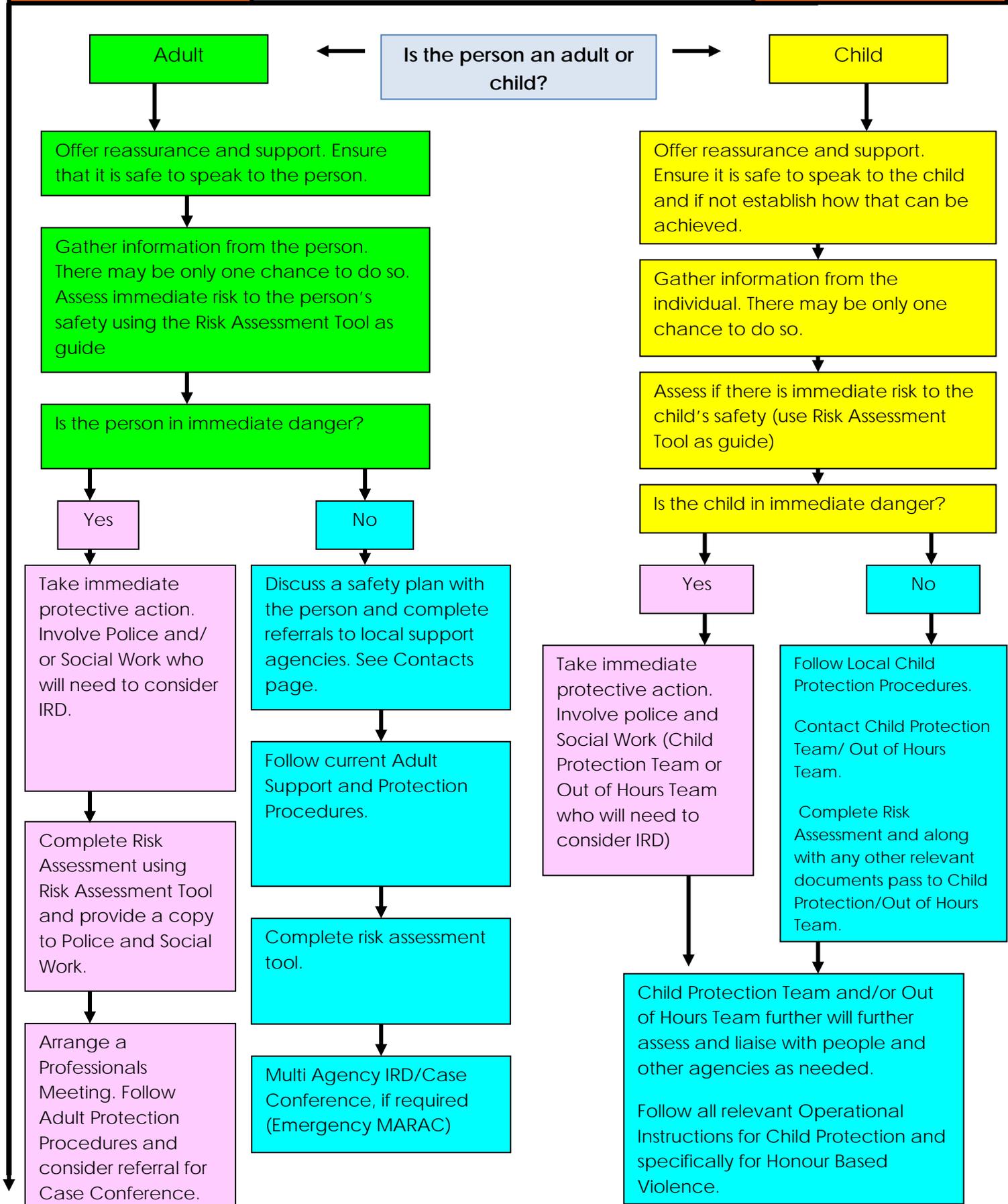
Table of Contents

Responding to Honour Based Violence (HBV) flowchart	2
Protocol on Honour Based Violence (HBV) – context	3
Operational Instructions	3
Honour Based Violence (HBV)	4
Responding to Honour Based Violence (HBV)	6
Guidance	10
Useful Contacts	13
Appendix A – One Chance Checklist	18
Appendix B – Risk Assessment Tools & Guidance	19

YOU CAN CONTACT
THIRD SECTOR
SUPPORT AGENCIES
AT ANYTIME
THROUGHOUT ANY OF
THE PROCESS

Responding to Honour Based Violence (HBV)

YOU CAN CONTACT
THE POLICE AT ANYTIME
THROUGHOUT ANY OF
THE PROCESS



DUNDEE AND ANGUS MULTI-AGENCY PROTOCOL ON HONOUR BASED VIOLENCE.

CONTEXT

Three protocols, on Female Genital Mutilation, Honour Based Violence and Forced Marriage, have been developed by the Tayside Harmful Practices Multi-agency working group. Each protocol contains a section of Operational Instructions followed by broader Guidance for staff.

OPERATIONAL INSTRUCTIONS

PURPOSE

The implementation of this Dundee and Angus Protocol is intended to assist professionals, police, social care teams, voluntary sector partners, health and education (hereinafter referred to as practitioners) to effectively, consistently and safely deal with cases of Honour Based Violence towards any person by:

- The early identification of such cases
- Reducing the risk once these cases are identified
- Initiating proportionate and effective joint short and longer term plans, in order to support the victim and deal effectively with perpetrators of crime
- Maintaining and enhancing public confidence in the partner agencies, to respond safely and proportionately to allegations of honour based violence
- Facilitating the effective use of powers, national guidance and best practice, in order to protect those living in Dundee and Angus from harm

There is no specific offence of "honour based crime"; rather this is an umbrella term to encompass various offences already covered by existing legislation. However it should be noted that there is no honour in the commission of murder, rape, kidnap and the many other acts, behaviour and conduct which make up "violence in the name of so-called honour".

The purposes of this protocol are to:

- Provide a partnership approach to the identification and provision of services to individuals who have been affected or are in danger of being affected by violence in the name of honour.
- Outline the processes involved in identifying and supporting victims, and how the agencies involved at each stage can best co-ordinate their actions
- Provide a framework for sharing of information to assist the disruption of violence in the name of honour
- Balance the rights of the victim with the wider public interest in cases where criminal proceedings are being considered

SCOPE

This protocol refers to the geographical area covered by Angus, Dundee, Perth and Kinross Councils. This geographical area is also the concern of Police Scotland, D Division and NHS Tayside.

This protocol applies to all victims or potential victims of honour based violence. Any victims of honour based violence aged less than 16 years of age must be dealt with under multi-agency child protection procedures. Where the age of a victim is uncertain and there are reasons to believe they may be a child it must be presumed they are a child and be dealt with under child protection arrangements pending verification of their age.

Where a child is thought to be at risk of significant harm, the primary concern will be for their safety and the planning process must reflect this.

RELEVANT LEGISLATION

Domestic Abuse (Scotland) Act 2011

Family Law (Scotland) Act 2006

Forced Marriage (Protection and Jurisdiction) (Scotland) Act 2011

Mental Health (Care and Treatment) (Scotland) Act 2003

Adults with Incapacity (Scotland) Act 2000

The Sexual Offences (Scotland) Act 2009

The Prohibition of Female Genital Mutilation (Scotland) Act 2005

The Children (Scotland) Act 1995

Protection of Children (Scotland) Act 2003

Protection of Children and Prevention of Sexual Offences (Scotland) Act 2005

Adult Support and Protection (Scotland) Act 2007

Equality Act (2010)

Human Rights Act 1998

UN Convention on the Rights of the Child (UN CRC)

UN Convention on the Elimination of all Forms of Discrimination against Women (CEDAW)

POLICIES

Equally Safe: Scotland's Strategy for preventing and eradicating violence against women and girls (June 2014)

HONOUR BASED VIOLENCE

Honour based violence is a collection of practices, which are used to control behaviour and exert power within families or communities to protect perceived cultural and religious beliefs and/or honour. Such violence can occur when perpetrators perceive that a relative has shamed the family and/or community by breaking their honour code.

Women are predominantly, but not exclusively, the victims of 'so-called honour based violence' which is often used to assert male power in order to control female autonomy and sexuality.

However, it should be noted that men and boys can also be victims of violence in the name of honour, in particular, where there may be homosexuality or a partner deemed inappropriate, therefore breaching family honour.

Honour based violence usually includes some level of violence including domestic abuse, psychological, physical, sexual, financial and emotional abuse. Other examples may include murder, unexplained death (suicide), fear of or actual forced marriage, controlling sexual activity, female genital mutilation, child abuse, rape, kidnapping, false imprisonment, threats to kill, assault, harassment and forced abortion although this list is not exhaustive.

It should be stressed that such crimes cut across all cultures, nationalities, faith groups, communities and transcend national and international boundaries. **Honour based violence is a fundamental abuse of Human Rights.**

This protocol seeks to address the concern for, and promotion of, the safety, human rights and best interests of potential victims of honour based violence within the Scottish legal framework, by setting out the roles and responsibilities of the agencies involved in combating honour based violence and supporting victims.

For further information on Female Genital Mutilation (FGM) and/or Forced Marriage, please see relevant Dundee and Angus protocols.

THE ONE CHANCE RULE – ([See Appendix A for the One Chance Checklist](#))

All practitioners working with victims of honour-based abuse need to be aware of the “one chance rule”. This means that they may only get one chance to speak to a potential victim and thus they may only have once chance to save a life. Therefore all practitioners working within all agencies need to be aware of their responsibilities and obligations when they come across anyone suspected of being a potential victim of Honour Based Violence. If the victim is allowed to walk out of the door without support being offered, that one chance might be wasted.

BASIC DOS AND DON'TS

Under UK law ‘honour’ based violence, domestic violence and FGM are all crimes, and from September 2014, forcing someone into marriage is also a criminal offence. You should not feel worried about appearing culturally insensitive. Remember, you may be the victim’s only chance to get help.

What you should do:

- Believe what the victim is saying. It may seem unbelievable to you that families would force their family members into marriage or would kill them for what seem like trivial transgressions, but it happens
- Listen to the victim’s wishes
- Seek advice from the Community Safety Unit, Forced Marriage Unit or from a specialist organisation like the Iranian and Kurdish Women’s Rights Organisation (IKWRO) or Saheliya (see Useful Contacts)
- If dealing with a victim under the age of 18 refer to child protection procedures

- Reassure the victim about confidentiality
- Arrange a way for you to contact the victim discreetly.

What you should NOT do:

- Do not contact the family or attempt mediation
- Do not send the victim back to their family
- Don't assume the women in the family will protect the victim
- Do not use a family or community member as an interpreter – always use an independent and impartial interpreter
- Do not turn the victim away as you may be their only chance to get help.

RECORD KEEPING

Accurate record keeping in all cases of violence or abuse in the name of honour is essential. Records should:

- Be accurate, detailed, clear and include the date
- Use the child or adult's own words in quotation marks
- Document any injuries – include photographs, body maps or pictures of their injuries
- Only be available to those directly involved in the person's case

CHILD/ADULT PROTECTION

A victim or someone at risk of honour based violence is "a child or adult at risk" under the terms of the relevant legislation.

All staff employed by a local authority, the police or the NHS are legally obliged to make a referral to the local authority if they know or suspect someone is "a child or adult at risk". Anyone in any doubt as to whether a case involving honour based violence is a child or adult at risk should contact their appropriate team manager.

RESPONDING TO HONOUR BASED VIOLENCE

Any suspicion or disclosure of violence or abuse against a child or adult in the name of honour should be treated equally as seriously as any other suspicion or disclosure of significant harm against a child or adult. However, there are significant differences in the immediate response required.

It is essential to consider other siblings in the family that may be experiencing, or at risk of, the same abuse.

The minimum response from all agencies should involve, wherever possible, the following first steps:

- See the child or adult immediately, in a secure and private place where conversation cannot be overheard
- See them on their own – even if they attend with others
- Recognise and respect their wishes

- Undertake a risk assessment
- Reassure them about confidentiality i.e. practitioners will not inform their family
- Establish a way of contacting them discreetly in the future
- Obtain full details for immediate protection and placement away from their family
- Consider the need to shield the vulnerable child or adult's records, perhaps even from other workers, and to have details such as National Insurance number changed
- Professionals should be aware that their involvement may be seen as threatening and lead to an unexpected or sudden increase in the risk of violence and a contingency plan should be in place in case of this

The practitioner should NEVER:

- Send the potential victim away
- Underestimate or minimise what the victim is telling them
- Approach members of the victim's family or community unless they expressly ask you to do so, however even then, extreme caution should be taken that the result of this will not further endanger the victim
- Share information with anyone without the victim's express consent outwith current partnership ISP's
- Breach confidentiality
- Assume it is a 'cultural' issue: **it is an abuse of human rights**
- Attempt to be a mediator

Presentation to agencies may initially be reported as a case of domestic abuse or self-harm however as detailed above there may be only one chance to help the victim so professionals should recognise the seriousness/immediacy of the risk of harm. Any suspicion of honour based violence should be dealt with as follows:

The practitioner will: ([see Appendix B](#))

- Gather relevant information
- Ascertain the wishes of the victim
- Inform them of the options available and the potential consequences
- Report immediately to their line manager
- Complete Risk Assessment form

The Line Manager will:

- Decide what further information, if any, needs to be collected
- Decide what immediate action needs to be taken
- Consider whether access to records needs to be restricted (consider if a family or community member works for the Local Authority/NHS/Police etc)
- Decide which other agencies need to be contacted
- Decide which organisation is most appropriate should an interpreter be required
- Consider whether there is a need for a place of safety if the person does not want to, or cannot, return home
- Consider whether to call a case conference

- Ensure that a safety plan is in place if the person does not want or cannot leave home
- Ensure that there is a facility for future contacts
- Discuss whether the person would like support from an agency with specialist experience such as Women's Aid
- Retain full and detailed records of all contact with the victim
- Consider whether to report to the police

Note: at anytime during an enquiry Police Scotland can be contacted and involved by either the victim or practitioner.

When an enquiry is handed over to the Police, they will respond using their own Standard Operating Procedures (SOP)

ASSESSING RISK – ([See Appendix B for Risk Assessment Tool and Guidance](#))

It is important to have a risk assessment framework which can help you to identify HBV and HBV-related risks. Many of the existing frameworks are very useful but not always adequate. They are useful to identify level of risks to inform you if you need to refer your client to MARAC (Multi Agency Risk Assessment Conference) or inform you about which agencies you need to involve in providing protection.

- Be open minded and flexible in your approach, free flow interview will uncover hidden issues
- Assess both the personal risks that a victim faces as well as the social/cultural practices that reinforce these. Try to establish what roles other family members may play in the abuse and their potential risks. Remember that your client may not recognise risks as such, but through sensitive inquiry, you should endeavour to assess accordingly, recognising that they may minimise their experiences.
- The presence of children increases the wider risk of Domestic Violence. If risk towards children is highlighted you should consider referral to Social Work to obtain a full assessment of the children's situation
- Do not underestimate that perpetrators of HBV really do kill their closest relatives and/or others for what might seem a trivial transgression. Just the perception of rumour of immoral behaviour may be sufficient to kill
- It might be the victim's first attempt to seek help therefore it might be difficult to evidence a history of violence. This is the nature of honour based violence. Determine their experience of violence in a wider context to assess risk
- Victims often have no experience of using support services and by seeking help they could also be deemed to have brought further shame on the household/community

- Ensure you are discreet in your approach to support. Agree with them how they can be contacted and when. Ensure this is made very clear to anyone who may become involved in the case at a later date.
- Shame, and therefore the risk, to a victim may persist long after the incident that brought about dishonour occurred. Consider whether the victim's partner, children, associates or siblings are at risk. They may also suffer community/family pressures not to assist you
- Authorities in countries from which some victims originate may support this practice and the victim may be concerned that you share this view, or that you may return them to their family
- Their immigration status may be dependent on their spouse and it may be used to dissuade them from seeking assistance
- In honour based violence it may be difficult to identify a potential murderer (which can be a contract killer). Therefore assessing risks and developing safety routes become more complicated. When dealing with such victims it is important to recognise the seriousness/immediacy of the risk
- Victims are sometimes persuaded to return to their country of origin under false pretences, when in fact the intention could be to kill them (Resources: Metropolitan Police, Honour Based Violence Leaflet, CAADA Block 1)
- Duty of care to report danger to the victim even though consent has not been given

GUIDANCE

INDICATORS OF HONOUR BASED VIOLENCE

As Honour Based Violence normally starts with some level of violence including domestic abuse or violence from a family/community group, the indicators may be very similar.

Possible Workplace indicators:

- Absenteeism, lateness, leaving early
- Changes in job performance - difficulty concentrating, repeating errors, slower work pace
- Unusual or excessive number of phone calls from partner, spouse or family members; with varied reactions to these calls
- Disruptive personal visits to the workplace from employee's present or former partner, spouse or other family member
- Dress in clothing designed to hide bruises or scars e.g. wearing long sleeves in the summer
- Jumpy, irritable
- Withdrawn
- Lack of personal grooming which is a total change from past habits
- Low self-esteem
- Accompanied to and from work – by partner/spouse/family member

Possible Education indicators:

- Eating disorders
- Aggression
- Unusually quiet
- Disruptive behaviour
- Absenteeism – lateness – leaving early
- Surveillance at school/college by family members
- Accompanied to and from school – by partner/spouse/family member
- Holiday abroad during term time
- Anxiety/fear around holiday periods

Possible Health indicators:

- Frequent injuries, with the excuse of "accidents"
- Major personality changes
- Depressed, anxious or suicidal
- Accompanied to health practitioners by partner, spouse or family member
- Cancelling appointments
- Drug and/or alcohol issues

RISK FACTORS

- Loss of virginity
- Inappropriate make-up or dress
- Running away, coming home late
- The existence of a boyfriend
- Westernisation
- Rejecting a forced marriage
- Homosexuality
- Leaving a spouse or seeking divorce
- Interfaith relationships
- Kissing or intimacy in a public place
- Pregnancy outside marriage
- Girls who "allow themselves to be raped"
- Causing gossip

FAMILY MEMBERS AS PERPETRATORS OF HBV

Evidence shows that honour killings are planned well ahead by family council. There tends to be a degree of premeditation, family conspiracy and a belief that the victim deserved to die.

Relatives, including females, may conspire, aid or participate in the killing. Younger relatives may be selected to undertake the killing to avoid senior family members being arrested. Sometimes contract killers are employed. Father and mother, siblings, grandparents, uncles, aunts, cousins, community members and hired contract killers can all take part in killing. Sometimes the contract killer is contracted from abroad.

On many occasions community plays an active role by encouraging this crime, protecting perpetrators and making false statements to manipulate the police investigations.

IMPACT OF HONOUR BASED VIOLENCE

The victim of HBV is extremely isolated and distressed. The victim may not feel that they can trust anyone to talk about what their family is doing to them. The victim may have limited English skills to seek support from agencies which are external to the victims own community.

The victim may be:

- Living in fear of family and community
- Feeling controlled, watched and monitored by the family
- Mistrustful of everyone
- Feeling isolated, lonely and powerless
- Losing her sense of self
- Feeling ashamed and guilty
- Providing false reports of assault (cover for family)
- In need of medical help
- Experiencing a wide range of physical and psychological/emotional symptoms.

BARRIERS TO SEEKING HELP

- Fear of being disowned by the family and ostracised from the community
- Loyalty to own community/faith/family
- No recourse to public funds
- Not aware of services, and lack of information and access to services
- Mistrusting authorities due to cultural knowledge and experience
- Fear of racism and distrust of criminal justice system
- Fear of being found out
- Lack of appropriate service
- Insecure immigration status
- Hope the situation will improve
- Lack of awareness
- Fear of starting an independent life
- Language skills
- Fear of losing custody of children
- Social isolation
- Self-blame
- Living in fear of, or actual threat of being killed if they seek help or try to get away.

ADDRESSING SOME BARRIERS

- NEVER use family members or children to interpret as any member of the family could be involved in HBV, including the mother.
- Allow sufficient time
- Some forms of abuse do not have words to express them in certain cultures i.e. rape is defined as 'honour being taken'. Try to deconstruct terms for better understanding

For Victims Whose First Language Is Not English

- Check the dialect spoken before arranging an interpreter
- Arrange a gender appropriate interpreter, or check the preference of the victim. Have a brief meeting with the interpreter before introducing them to the victim. In your brief, discuss confidentiality and check if the interpreter knows the family
- If the victim wants to be accompanied during the interview, check that the victim understands the full extent of the interview and the impact of having someone with them. If the victim insists, have a brief meeting with the accompanying person and establish a line of rules including confidentiality
- At the beginning explain the role of the interpreter
- An interpreter should not add their own information or opinion
- Use the telephone interpretation service of the National Domestic Violence Helpline. You can contact the 24/7 helpline on 0808 2000 247
- Communication is not just through language. Try to comfort your victim until the interpreter arrives
- Do not send the victim back to their family
- Avoid seeking advice from community leaders.

USEFUL CONTACTS

Perthshire Women's Aid	49 York Place, Perth PH2 8EH Telephone: 01738 639043 Available 9.30am – 4pm Monday to Friday
Dundee Women's Aid	Top Floor, Enterprise House 45 North Lindsay Street Dundee DD1 1DW Telephone: 01382 207099 Mon to Fri 9.30 -12.30 & 1.30 - 4.30pm except Thurs 9.30 - 12.30 Fax: 01382 646520
Angus Women's Aid	Lindsay Street Arbroath DD11 1RP Telephone: 01241 439437 info@anguswomensaid.co.uk
Barnardo's	<u>Angus</u> Domestic Abuse Officer Tel: 01241 435747 Mon – Fri 08.45- 5.00 <u>Dundee</u> Domestic Abuse Officer Tel: 01382 596686 Mon – Fri 08.45- 5.00 <u>Perth</u> Domestic Abuse Officer Tel: 01738 892516 Mon – Fri 08.45- 5.00
Domestic Abuse Liaison Unit	TaysideDAIU@scotland.pnn.police.uk . The on duty DS can be contacted on 01382 591891 or 96
Foreign & Commonwealth Office Forced Marriage Unit	The Forced Marriage Unit is a single point of confidential advice and assistance for those at risk of being forced into marriage overseas. Telephone: 020 7008 0151 From overseas: +44 (0)20 7008 0151 Monday to Friday, 9am to 5pm Out of hours: 020 7008 1500 (ask for the Global Response Centre) Email: fmfco@fco.gov.uk Website: www.fco.gov.uk/forcedmarriage

National Domestic Abuse Help Line	Tel 0800 0271234 Support is available 24/7
Stonewall Scotland	Campaign for equality and justice for gay, lesbian, bisexual and transgender (LGBT) people living in Scotland. Telephone 0131 474 8019 Email: info@stonewallscotland.org.uk
LGBT centre for Health and Wellbeing	The LGBT centre provides a varied programme of services, events, courses and groups for LGBT people. 9 Howe Street Edinburgh EH3 6TE Telephone: 0131 523 1100 9 and 5, Monday to Friday Email: admin@lgbthealth.org.uk LGBT Helpline Scotland Tel: 0300 123 2523 Tuesdays and Wednesdays 12-9pm.
Shakti Women's Aid	Shakti offers support and information to all black minority ethnic women, children and young people who are experiencing or fleeing domestic abuse, forced marriage and other honour based violence issues. They also have refuge accommodation. Tel: 0131 475 2399 Open 10am-5pm Mon - Fri Website: www.shaktiedinburgh.co.uk
Saheliya	Saheliya is an organisation, which provides a safe and confidential service that supports the mental health and well being of Black and Minority Ethnic women in Edinburgh. Services include counselling, support, befriending and advocacy. Address: 125 McDonald Road, Edinburgh, City of Edinburgh EH7 Telephone: 0131 556 9302 Monday to Friday 9:00am to 5:00pm Website: www.saheliya.org.uk
ROSHNI	Roshni is a registered charitable organisation with offices in Glasgow and Dundee. The aim of the charity is primarily to ensure the safety of children, young people and adults within the minority ethnic communities. Address: Baltic Chambers. Suite 339. 50 Wellington Street, Glasgow G2 6HJ Tel: 0141 202 0608 Email: info@roshni.org.uk Website: www.roshni.org.uk

Amina Muslim Women's Resource Centre	<p>Amina works with mainstream agencies to establish the barriers that prevent Muslim women from accessing services and participating in society. They provide direct helping services and community development to Muslim women.</p> <p>Free phone helpline number: 0808 801 0301 Dundee: 01382 224 687 opening hours 9.30am to 5pm Glasgow: 0141 585 8026 Email: www.mwrc.org.uk</p>
Beyond the Veil	<p>Beyond the Veil educate and inform the public to clear misconceptions and myths surrounding Islam.</p> <p>Address: c/o 1 House O'Hill Road, Edinburgh, EH4 2AJ Email: nasim.azad69@yahoo.co.uk</p>
Iranian & Kurdish Women's Rights Organisation	<p>The Iranian and Kurdish Women's Rights Organisation provide advice, support, advocacy and referral in Arabic, Kurdish and Farsi to help women, girls and men escape the dangers of "honour" killing, forced marriage and domestic abuse.</p> <p>Tel: 0207 920 6460 09:30 and 17:30 Monday to Friday Email: ikwro@yahoo.co.uk</p>
Scottish Women's Aid	<p>Scottish Women's Aid does not offer direct services for Women. Services for women and children are provided by Angus Women's Aid, Dundee Women's Aid and Perth and Kinross Women's Aid.</p> <p>Scottish Women's Aid is a good resource for workers.</p> <p>Scottish Women's Aid, 2nd Floor, 132 Rose Street, Edinburgh, EH2 3JD Tel: 0131 226 6609 Fax: 0131 226 2996 Email: contact@scottishwomensaid.org.uk</p>
Hemat Gryffe Women's Aid (Glasgow based)	<p>Hemat Gryffe provides support, advice and temporary accommodation to women and children from the BME community who experience domestic abuse or forced marriage.</p> <p>Tel: 0141 353 0859 9-5 Mon - Fri Email: hemat.gryffe@ntlbusiness.com</p>

Rape Crisis (Scotland)	<p>Rape Crisis Scotland (RCS) is the national office for the rape crisis movement in Scotland. 46 Bath Street, Glasgow, G2 1hG Tel: 0141 331 4180</p> <p>Fax and Minicom: 0141 332 2168 Email: info@rapecrisisscotland.org.uk</p> <p>The Rape Crisis Scotland National Helpline provides crisis support for anyone in Scotland affected by sexual violence at any time in their lives. Rape Crisis Scotland Helpline: 08088 01 03 02 (free number) everyday, 6pm to midnight.</p>
Archway	<p>Archway Glasgow is Scotland's first Sexual Assault Referral Centre, providing forensic and medical assistance, as well as support and counselling for anyone who has recently been raped or sexually assaulted. Telephone: 0141 211 8175 Open 24 hours a day, 7 days a week.</p>
UK Human Trafficking Centre	<p>PO Box 4107 Sheffield South Yorkshire, S1 9DQ Tel: 01142 523 891 Email: info@ukhtc.org</p>
Victim Support Scotland	<p>Angus 82 High Street Arbroath DD11 1HL Tel 01241870096</p> <p>Dundee 10 Constitution Road Dundee DD1 1LL 01382 305707</p> <p>Perth The Gateway Centre, N Methven St, Perth PH1 5PP 01738 567171 Helpline – 0845 603 9213</p> <p>Practical and emotional support for Victims of Crime. Also support at court for victims and witnesses</p>

Women's Rape and Sexual Abuse Centre (WRASAC)	WRASAC – Dundee & Angus 2 Dudhope Street, Dundee, DD1 1JU. Phone 01382 205556 email support@wrasac.org.uk
Rape and Sexual Abuse Centre (RASAC) Perth and Kinross	18 King Street Perth PH2 8JA Business line – 01738 626290 Helpline – 01738 630965 Or email rasacpk@gmail.com
Dundee International Women's Centre	Dundee International Women's Centre (DIWC) works to address the needs of women, with an emphasis on those from Black and Minority Ethnic communities. We have 45 years of experience in providing a safe, friendly, culturally sensitive support service for women from diverse communities facing a wide range of issues; services include advice and support, a listening- ear, advocacy, language support, adult learning, training and sign-posting. Tel: 01382 462068 Email: mail@diwc.co.uk

ONE CHANCE CHECKLIST

You may only have one chance to speak to a potential victim of Honour Based Violence and, therefore, only one chance to save a life.

- See the victim on his/her own – even if they are accompanied by others;
- See the victim immediately in a secure and private place where you will not be overheard;
- Reassure the victim about confidentiality and explain that you will not give information to family, friends or the community.
- Accept what is said;
- Explain all the options to the victim and possible outcomes;
- Recognise and respect his/her wishes;
- Assess the risk faced by conducting an appropriate and thorough risk assessment.
- Contact, as soon as possible, the lead worker responsible for honour based violence (if the potential victim is under 16, refer to child protection inter-agency guidance; if an adult at risk, discuss with your adult support and protection lead and refer to inter-agency guidance);
- Agree a way to make contact safely (for example agree a code word);
- Obtain full details to pass on to the lead worker and record these safely;
- Provide contact details or help the victim to memorise your contact details and/or those of a support agency such as Women's Aid.
- Consider the need for immediate police involvement, protection and placement away from the family and arrange this if necessary; this includes any action to stop the victim from being removed from the UK;
- Do everything possible you can to keep the victim safe; and
- Get immediate advice if you are not sure what to do.

Victims can be male or female, but are most likely to be the latter.

Risk Assessment Tool & Guidance

VICTIM DETAILS		
Photograph Date/Time Taken		
First Name		
Surname / Last Name		
Date of Birth and Age		
Place of birth		
Self defined ethnicity		
Religion		
Gender		
School or Occupation		
Address		
Safe Contact Number		
Dependent Children	Yes	No
Current Whereabouts		
Relationship to Perpetrator(s)		

PERPETRATOR(S) DETAILS

Person 1

First Name	
Surname / Last Name	
Date of Birth and Age	
Place of birth	
Self defined ethnicity	
Religion	
Gender	
School or occupation	
Address	
Relationship to Victim	

Person 2

First Name	
Surname / Last Name	
Date of Birth and Age	
Place of birth	
Self defined ethnicity	
Religion	
Gender	
School or occupation	
Address	
Relationship to Victim	

OTHER FAMILY MEMBERS (WHO MAY BE AT RISK)

Person 1

First Name	
Surname / Last Name	
Date of Birth and Age	
Gender	
Address	
Relationship to Victim	

Person 2

OTHER FAMILY MEMBERS	
First Name	
Surname / Last Name	
Date of Birth and Age	
Gender	
Address	
Relationship to Victim	

INCIDENT DETAILS

Description of incident: (include details of previous incidents, reported or unreported)

RISK FACTORS – DOMESTIC ABUSE, STALKING AND HARRASSMENT & HONOUR BASED VIOLENCE (DAQ)

All practitioners, as a matter of routine, should complete the Domestic Abuse, Stalking and Harassment and Honour Based Violence (DAQ) checklist and consider the existence of the established 15 high risk factors when dealing with potential incidents to inform their judgement and form an accurate risk assessment

Q1. Has the current incident resulted in injury?	
Q2. Are you very frightened?	
Q3. What are you afraid of? Is it further injury or violence?	
Q4. Do you feel isolated from family/friends i.e. does (name of abuser(s)) try to stop you seeing friends/family/doctor or others?	
Q5. Are you feeling depressed or having suicidal thoughts?	
Q6. Have you separated or tried to separate from (name of abuser...) within the past year?	
Q7. Is there conflict over child contact?	
Q8. Does (...) constantly text, call, contact, follow, stalk or harass you?	
Q9. Are you pregnant or have you recently had a baby (in the past 18 months)?	
Q10. Are there any children, stepchildren, that aren't (...)’s in the household? Or are there other dependents in the household (i.e. older relatives)?	
Q11. Has (...) ever hurt the child(ren)?	
Q12. Has (...) ever threatened to hurt or kill the child(ren)?	
Q13. Is the abuse happening more often?	
Q14. is the abuse getting worse?	
Q15. Does (...) try to control everything you do and/or are they excessively jealous?	
Q16. Has (...) ever used weapons or objects to hurt you?	

Q17. Has (...) ever threatened to kill you or someone else and do you believe them?	
Q18. Has (...) ever attempted to strangle / choke / suffocate /drown you?	
Q19. Does (...) do or say things of a sexual nature that make you feel bad or that physically hurt you or someone else?	
Q20. Is there any other person who has threatened you or who you are afraid of?	
Q21. Do you know if (...) has hurt anyone else?	
Q22. Has (...) ever mistreated an animal or the family pet?	
Q23. Are there any financial duties? For example, are you dependent on (...) for money/ have they recently lost their job/ other financial issues?	
Q24. Has (...) had problems in the past year with drugs (prescription or other) alcohol or mental health leading to problems in leading a normal life?	
Q25. Has (...) ever threatened or attempted suicide?	
Q26. Has (...) ever breached bail/an Order and/or agreement for when they can see you and/or the children?	
Q27. Do you know if (...) has ever been in trouble with the police or has a criminal history?	
Risk Factors for HBV	
Truancing – Is the victim truancing from school or are they being prevented from attending school?	
Self-Harm – Has the victim been self-harmed in any way? Does the victim feel suicidal?	
House arrest and being “Policed” at home	

– Has the victim been subject to house arrest or the threat of house arrest?	
Fear of being forced into an engagement/marriage – Does the victim fear a forced marriage?	
Pressure to go abroad – Has the victim been pressured to go abroad/ to visit country of origin?	
Isolation – Do you feel isolated and live in fear of being tracked down by family who may solicit the help of others?	
Attempts to separate or divorce (child contact issues)	
Threats that they will never see the children again	
A Pre-marital relationship or extra marital affairs – Does the victim have a boyfriend/girlfriend?	
Threats to Kill – Has the victim been subject of threats to kill or inflict serious harm?	
How does the victims perceive the risk to themselves? Has the victim or any other member of their family been subjected to Female Genital Mutilation?	
Does the victim know or suspect the trigger for the reported incident? E.g. rumours, sexuality, westernisation	
Are there any other agencies involved in the family? E.g. Social services, health workers, education. Are there any children on CPR?	
Have any other agencies been notified of current incident?	
Is the victim part of a close extended family/community network?	
Has the victim been subject of any abuse from the extended family/community?	

15 HIGH RISK FACTORS OF SERIOUS HARM AND HOMICIDE IN DOMESTIC ABUSE CASES

1	Victim's perception of risk of harm. Victims of domestic abuse often tend to underestimate their risk of harm from perpetrators of domestic violence. However, if they say they fear further harm to themselves, their child(ren) or someone else this should be taken seriously when assessing future risk of harm
2	Separation (Child contact): Victims who attempt to end a violent relationship are strongly linked to intimate partner homicide. Many incidents happen as a result of child contact or disputes over custody.
3	Pregnancy/new birth (Under 18 months old): Domestic abuse can start or get worse in pregnancy. Victims who are assaulted whilst pregnant, when they have recently given birth or who have young children should be considered as high risk. This is in terms of future harm to them and to the unborn/young child.
4	Escalation: Repeat victimisation and escalation must be identified. DA victims are more likely to become repeat victims than any other type of crime; as violence is repeated it gets more serious.
5	Community Issues/Isolation: needs may differ amongst ethnic minority victims, newly arrived communities, asylum seekers, older people, people with disabilities, as well as travelling or gay, lesbian, bisexual or transgender people. This might be in terms of perceived racism, language, culture, insecure immigrations status and/or accessing relevant support services. Be aware of forced marriage and honour based violence whereby family/community tries to restore their mistaken sense of honour and respect. Victims may be particularly isolated and/or vulnerable. Take their concerns seriously.
6	Stalking: Persistent and consistent calling, texting, sending letters, following. DA stalkers are the <u>most</u> dangerous. Stalking and physical assault, are significantly associated with murder and attempted murder. This is not just about physical violence but coercive control and jealous surveillance. Consider the perpetrator's behaviour and whether victim believes it is being done to deliberately intimidate.
7	Sexual Assault: Those who are sexually assaulted are subjected to more serious injury. Those who report a domestic sexual assault tend to have a history of domestic abuse whether or not it has been reported previously. Many domestic sexual offenders are high risk and potentially dangerous offenders. Be aware of the link between domestic and stranger rape.
8	Strangulation (choking/suffocating/drowning): Escalating violence, including the use of weapons and attempts at strangulation must be recorded when identifying and assessing risk. This includes all attempts at blocking someone's airway.
9	Credible Threats to kill: A credible threat of violent death can very effectively control people and some may carry out this threat.
10	Use of weapons: Abusers who have used a weapon, or have threatened to use a weapon, are at increased risk of violent recidivism.
11	Controlling and/or Excessive Jealous Behaviour: Complete control of the victim's activities and extreme jealousy are associated with serious violence and homicide. Consider honour based violence – the victim may not have the freedom of choice. Examples may include fear of or actual forced marriage, controlling sexual activity, DA, child abuse, rape, kidnapping, false imprisonment, threats to kill, assault, harassment, forced abortion The perpetrator may well try and control professionals as well.

12	Child Abuse: Evidence shows that both DA and child abuse can occur in the same family. Child abuse can act as an indicator of DA in the family and vice versa – please note if the child(ren) witness or hear the abuse.
13	Animal/Pets Abuse: There is a link between cruelty to animals, child abuse and DA. The use or threat of abuse against pets is often used to control others in the family. Abuse of animals may also indicate a risk of future harm.
14	Alcohol/Drugs/Mental Health: The abuser's use of drugs and alcohol are not the cause of the abuse, as with all violent crime they might be a risk of further harm. Physical and mental ill health does appear to increase the risk of DA.
15	Suicide-Homicide: Threats from an offender to commit suicide have been highlighted as a Factor in domestic homicide. A person who is suicidal should also be considered homicidal.

RISK MANAGEMENT ACTIONS	
Establish Regular Safe Contact	<p>Provision of mobile phone to maintain 24/7 contact in early stage, using covert methods to establish regular contact with the victim, non-police e-mail and/or provide victim with a 'pay as you go' mobile phone.</p> <p>Establish a code word for use by the victim during telephone calls. Be conscious when using the telephone that individuals may not be who they purport to be or may be being threatened by their family as they speak.</p> <p>Ask victim to contact practitioner at least two/three days in advance if they decide to make any significant changes or decisions or decide to leave or return home.</p>
Accommodation	<p>If considering refuge accommodation it may be appropriate to approach a Women's Aid Organisation out with your area. Put contingency in place for relocation to another area if current location is found (work is ongoing to establish local arrangements for persons with no recourse to public funds)</p>
Personal Safety Plan	<p>Nominated safe contact, access to funds, passport, identification transport (spare car keys), change of clothes. Open a bank/savings account in their name, leave copies of important documents such as passport, national insurance number and birth certificate with police, social services or a trusted friend. Set up local agreements with housing, local government. Children need to be included in safety plan & alternative escape plan for them may be found necessary. General safety advice for victims can be found at www.crimereduction.gov.uk/personalsafety</p>
Victim Log	<p>Advise victim to record details of all interactions that take place between themselves and the offender</p>
Travel/Abduction precautions	<p>At an early stage seek specialist advice from other units such as the Foreign and Commonwealth Office Forced Marriage Unit.</p> <p>Consider application for a Forced Marriage Protection order under Forced Marriage etc. (Protection and Jurisdiction) (Scotland) Act 2011. A FMPO may, among other things, require a person to refrain from taking a protected person from, or to, such a place as the court may specify and submit to the court documents which the court may specify including passports and travel documents.</p> <p>If a FMPO is not granted or appropriate consider removal and retention of Passport. Check whether victim is on parent(s) passport or has dual nationality as may have two passports. Could flag their passports at Passport Office in case applications are made for new ones. Advise them to travel on their British passport if going abroad as easier to repatriate. Alert airports of possible travel and safety planning advice should be given to victim if they believe they will be taken overseas.</p> <p>Where travel is inevitable, obtain details of the itinerary and details of</p>

NOT PROTECTIVELY MARKED

	<p>when they are going to return. Arrange for contact to be made on return. Obtain a statement saying the victim would like the authorities to take action to ensure his/her safety should they not return as arranged.</p> <p>If they are going overseas victim should be advised to take:</p> <ul style="list-style-type: none">• Contact details of Embassy/High Commission/trusted third party or Forced Marriage Unit at the FCO;• Secret stash of money, mobile telephone;• Copies of passport and tickets for themselves.
Referral to other Agencies	Inform victim of services available from Women's Aid, Barnardo's and local authorities and other relevant agencies.
Child Protection	Where children are involved refer to local child protection procedures/guidelines.
Vulnerable Adult	Where the victim is identified as a vulnerable adult refer to local procedures.
Move to another Local Authority area	Where a victim moves to another Local Authority area ensure that the new force is notified of the circumstances.
Vehicles	Record full details of all vehicles belonging to perpetrators

DRAFT