

## **Barnardos' submission to COSC- National Strategy on Domestic, Sexual and Gender based Violence**

**27th June 2008**

### **Introduction**

Barnardos welcomes the opportunity to input into the development of a national strategy on domestic, sexual and gender based violence. Barnardos believes that the key to the success of any national strategy focusing on violence within the household is for a whole family approach to be adopted from the outset. This is the best way towards ensuring that the voices and needs of all those affected by the violence are heard and addressed. Linked to this is the necessity of including children within the remit of COSC being complimentary to the work and policies of the HSE that focus on children experiencing sexual abuse.

This submission will focus on domestic violence and sexual violence. Domestic violence can take different forms involving not only physical abuse but also emotional and sexual abuse and neglect. While all forms of violence and abuse varies according to its severity and frequency its consequences within each family is always significant.

### **Barnardos experience**

Many families and children we work with experience domestic violence, abuse and neglect in some form. Barnardos offers a range of supports including parenting programmes, family and child support through anger management, problem solving and social skills and providing for access visits. We also run a specific programme in Thurles running one to one sessions and group work with mothers and children who have experienced domestic violence. Work with perpetrators is also being developed as part of this project. This programme is an interagency collaboration involving the HSE and other organisations.

In addition for children who are at the centre of a custody and / or access dispute, the Barnardos Guardian ad Litem service ensures that the voice of the child and their best interests were taken into account when deciding the outcomes of these cases. Unfortunately, as the engagement of Guardians is currently only at the discretion of the Court not all children in this situation have the opportunity to have their voice heard.

Barnardos also works with children who have experienced bereavement of a parent / sibling as a result of tragic circumstances including domestic violence. Intensive one to one counselling support is provided for children and their carers. In our experience the needs of this group of children who have witnessed the death of their parent or sibling are often lost in the midst of criminal proceedings and custody matters.

### **Number of children affected by domestic violence**

Assessing the extent of domestic and sexual violence will always be underestimated given the low levels of reporting to Gardai and the lack of interagency co-operation to identify those families living with violence. Specifically the number of children affected

by domestic violence is unknown as no national study has been undertaken. To date only a few studies involving small samples of children have been conducted<sup>1</sup>.

Likewise the full extent of sexual abuse among children is unknown. However, from the sources currently available the following picture emerges:

- The National Crime Council found that 28% of adults experience domestic violence. However, in 60% of the cases children are in the same room or the next room when the violence is occurring<sup>2</sup>.
- In 2006, of the callers to the Women's Aid helpline, in 4,800 cases a child was being abused or there were children affected by violence in the home<sup>3</sup>.
- In 2006, the total number of applications for barring orders was 3,132, applications for safety orders rose to 3,050 while applications for protection orders increased by 10% to 3,137. Applications against spouses accounted for more than 50% of all applications made to the District Court under the Domestic Violence Act, 1996. Applications against 'common law' or cohabiting partners accounted for 2,916 or almost 33% of all applications<sup>4</sup>.
- One in three women and one in four men reported some level of sexual abuse in childhood, attempted or actual penetrative sex was experienced by 7.6% of girls and 4.2% of boys. In 40% of cases the child sexual abuse was an ongoing occurrence<sup>5</sup>.
- The perpetrator of sexual abuse was another child or adolescent (17 years old or younger) in one out of every four cases. Where a child has been abused, they are at risk of repeating the abuse to younger siblings. Over 80% of children were abused by those known to them<sup>6</sup>.

The correlation between domestic violence within the home and sexual abuse of children can be significant, with one study finding that in 69% of cases of sexual abuse of children by fathers or father figures the same perpetrators engaged in domestic violence<sup>7</sup>. Some high profile child abuse cases in Ireland have also borne this out including the McColgan case and the Kilkenny incest case. Indeed the domestic violence can serve both as a compliance measure and as a very effective way of keeping helping agencies out of the home and thus allowing the sexual abuse to continue.

### **Impact of domestic and sexual violence on children**

For children living with violence, they can witness and experience different forms ranging from verbal abuse to homicide and each child responds differently to their situation. Some children die as a direct consequence of domestic violence in the home. However, children who experience domestic violence and sexual abuse can display some or many of the following characteristics:

- Live in constant fear
- Feelings of anger
- Experience constant anxiety
- Are confused with regards to concept of love v violence.
- Lack trust in adults

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1 Waterford Institute of Technology (2007) Listening to Children and Mayo Women's Support Service (2006) Listen to Me.

2 National Crime Council (2005) Domestic Abuse of Women and Men in Ireland

3 Women's Aid [www.womensaid.ie](http://www.womensaid.ie)

4 Courts Service (2006) Annual Report

5 McGee et al (2002) The SAVI Report – Sexual Abuse and Violence in Ireland, Royal College of Surgeons, Dublin

6 Ibid

7 Hester and Pearson, (1998)

- Feel ashamed and powerless
- Blame themselves for the situation
- Feel sadness and loneliness if the family unit separates
- Have difficulty sleeping / have nightmares
- Experience developmental delays including speech difficulties
- Become violent themselves by acting out in later years
- Poor school attendance and achievement
- Experience erratic parenting styles

Failure to address the needs of children living with domestic violence can result in girls learning that being abused is acceptable and therefore allow this behaviour from future partners. Boys may learn that beating the woman they love is acceptable behaviour, thereby perpetuating the cycle of intergenerational violence.

Additional long term consequences of failing to address the needs of children living with violence and abuse include early school leaving, anti-social behaviour, homelessness and addiction issues.

Barnardos believes that all children have a right to be brought up in a family where they are safe. The affects of domestic and sexual violence on children are numerous and life altering, therefore it is the responsibility of the Government, community and the individual to ensure that the needs of these children are met. However, under the current system there are many gaps in the provision of services and supports leaving these children at risk of danger and deprivation. The development and implementation of a national strategy will hopefully address these deficiencies.

### **Current issues**

#### Domestic Violence not seen as child abuse

At present different forms of abuse including physical, sexual, emotional abuse and neglect are identified as forms of child abuse however; domestic violence is not widely recognised as a form of child abuse by policy makers and practitioners. It is often stigmatised with the result that it is not discussed outside the home, cases remain underreported and it continues to be a hidden crime in our society. The absence of recognising its negative impacts on children means that children's psychological and physical development can be adversely affected.

#### **Recommendation:**

- Include domestic violence as a form of child abuse under the Children's First guidelines

#### Differential Response Model

As domestic violence is not always seen as a form of child abuse it is not regarded as part of the child welfare / child protection continuum. This continuum builds on the premise that some family situations are lower risk thereby family supports should be available and where there is a higher risk a child protection investigation may be needed. However, given the current staff and resource shortage within the HSE this continuum is tipped towards the child protection stage as intervention frequently only occurs when the violence and abuse escalates to a critical level.

This crisis management approach is in contravention of much legislation and policies around child protection in that supporting families is essential to supporting children. Most recently, the Agenda for Children's Services 2007 emphasises a partnership approach of working with children, their families and communities. It places supporting families as the central concern underlying all children's protection and

welfare services and places strong emphasis on assessment and evaluation to ensure the appropriate supports are in place.

Barnardos welcomes this development as it builds on the rationale that families can solve many of their own problems if the appropriate and adequate supports are given in time. Early intervention to support families should operate along this conceptual continuum of child welfare, child protection, juvenile justice and mental health. This continuum is reflected in the Differential Response Model as a method of engaging with families at risk at an early stage thereby hopefully preventing escalating violence and abuse of children. This type of preventative family support contributes in supporting parents and promoting their confidence and competence in parenting. The Differential Response Model was developed in the USA in the late 1990's and has been adopted in Canada, Australia and New Zealand. It focuses on assessment of needs and follow-up family support provision whilst retaining traditional investigation to more serious cases of child abuse including sexual abuse. Interventions need to be flexible and available and delivered through a co-ordinated response from statutory and non-statutory agencies working together with families.

#### **Recommendations:**

- Fulfil the commitments in Towards 2016 to ensure appropriate level of services and supports are in place so that cases identified as child welfare or child protection receive the necessary level of intervention. These include the development of :
  - 24 hour social work services
  - Development of primary health care teams
  - Establish multi-disciplinary child and adolescent community mental health teams

#### **Barring Orders**

Frequently lengthy delays are experienced in granting a Barring Order, the average waiting time being between 8 – 12 weeks. This delay places the children in further danger as the abuser can remain in the house until the Barring Order has been secured.

Also the impact of the residency requirement on individual victims can be problematical as an unmarried person who is living with an abusive partner cannot be granted a barring order until they have been living together for at least six months. They can pursue the assault under criminal law through the Non Fatal Offences against the Persons Act 1997.

#### **Recommendations:**

- Eliminate the waiting times for granting barring order
- Remove the residency requirement in the interests of safety within all relationships

#### **Access to Legal Aid**

At present access to legal aid services can be restricted due to waiting times and lack of availability across the country. For instance, there is no service in the Carlow region so clients have to travel to either Kilkenny or Waterford. This can act as a deterrent for partners seeking to leave the abusive relationship as they may not have transport to access the service or finance to hire a private solicitor.

### **Recommendation:**

- Extend the provision of the legal aid services

### Access to refuges

Younger children have more experience of living in a refuge than teenage children. This is because many refuges refuse entry for teenage boys arriving with their mothers, some not admitting boys as young as 13 years. Barnardos believes that failure to meet the needs of these teenagers and to recognise that their mother is one of the best sources of support to them puts this group at risk of homelessness and intergenerational violence continuing. It is important for children residing at the refuge to experience stability and routine in their lives by continuing at school and seeing their friends and continuing in their local activities.

For children and young people, their stay at a refuge is enhanced when staff members have an age appropriate appreciation of their needs and lifestyle and when the facility of a playroom / games room was available<sup>8</sup>. However, suitably qualified staff and adequate provision of facilities is not always available.

### **Recommendations:**

- Allow teenage boys arriving with their mothers to stay in the refuge.
- Ensure qualified child care workers are employed in refuges.

### Vulnerability of Certain groups

While domestic violence can occur in relationships regardless of social class or location some groups are further stigmatised in accessing services and supports. For girls aged 15 -17years who are in abusive relationships they can slip through the cracks of the system as they are too young to claim financial support through social welfare and too young to seek support in a refuge.

### **Recommendation:**

- Ensure availability of supports to all victims of domestic violence regardless of age.

### Accessing therapeutic services

At present the availability of therapeutic services for children in either the community or hospital setting is very limited. Accessing such services including counselling can be hugely beneficial for children who have experienced domestic and sexual violence as it provides a safe non judgemental listening space for the child to disclose their feelings. A therapist can also provide support to them as they experience their family going through separation and custody / access issues.

It is envisaged under 'Towards 2016' to increase the number of community mental health teams, however, this has been slow to progress as nearly half of the €51m that was allocated to the HSE in 2007 and 2008 to this development was redirected to other areas in the health service.

### **Recommendation:**

- Ensure commitments under Towards 2016 are met and that the availability of counselling services for children is increased.

### Post separation contact

When parents separate it is not automatically the end of the domestic violence. A UK study of 200 women who had experienced domestic violence found that 76% suffered post separation violence. This took different forms including:

- abusive phone calls and text messages,
- threats of violence
- stalking
- being abusive to the mother through the children by undermining her parenting skills
- not returning the children or threatening to abduct children.
- In some cases children have been murdered.

Access to the children is nearly always granted in the courts despite the presence of violence in the home, however, the existence of safety orders or barring orders is often unknown to the judge. There is an urgent need to reintroduce a role for the probation service in the family courts, producing safety reports and risk assessments to guide the decision-making of judges. This need has been recognised by the National Crime Council, the Law Reform Commission and the Law Society.

Linked to this is the necessity that the voice of the child be heard during the proceedings. Currently the child's views and needs are only formally considered if a Guardian ad Litem has been appointed, which is at the discretion of the judge. Likewise for children who have experienced sexual abuse within the home supports such as a Guardian ad litem, counsellor or video link up when giving evidence must be available to that child to ease the trauma of the court proceedings. The current delays experienced before a case is heard have a negative effect on a child's recovery.

Undertaking access visits between children and their non-custodial parents can be very difficult for the children given the level of fear and confusion they feel having witnessed their parent being injured or killed. Barnardos supports access visits being supervised by a qualified childcare worker to ensure that the children benefit the most from the access visit with their non-custodial parent. This recommendation echoes the both the Law Society and the Government Task Force on Violence against Women (1997). At present some of the Barnardos projects host such access visits.

### **Recommendations:**

- Judges should have access to all relevant information prior to deciding custody / access arrangements.
- Guardian ad Litem should be assigned in all cases dealing with custody / access arrangements and child sexual abuse cases.
- Supervised access visits where violence is known.

### Further professional training and information sharing

Some professionals working directly and indirectly with children may not be informed / trained in how to identify those children who could be experiencing violence in order to ensure these children are identified and supports offered. Such professionals include teachers, childcare staff, judges and Gardai. Improved interagency training around the issues of domestic violence and sexual abuse would help to foster a shared understanding and improved co-ordinated response by all the agencies that have a role to play. This would encourage improved information sharing between agencies which could help identify and support specific families and children at risk. The Multi-Agency Risk Assessment Conferences model operating in Wales for very high risk cases has been a successful tool in implementing safety packages around

the victim, child and perpetrator and has ultimately led to reduced repeat incidences of abuse.

**Recommendations:**

- Ensure all professionals working directly / indirectly with children are trained to identify those children experiencing domestic violence and / or sexual abuse.
- Improve interagency information sharing to identify those families particularly at risk.

Public Awareness

There is a need to improve awareness about domestic and sexual violence amongst adults and children and young people in a how to identify incidences of violence and where to report it. Barnardos developed brochures on different themes including domestic violence within our 'Positive Parenting'<sup>9</sup> range in association with the Family Support Agency and this is now in its third reprint. It is available in many locations including all the family resource centres giving it a more targeted approach which has proved to be more successful than universal public awareness campaigns.

In secondary schools the Social Personal Health Education (SPHE) programme is taught, a component of which focuses on Relationship and Sexuality Education (RSE). An evaluation of the RSE<sup>10</sup> found that not all schools had incorporated RSE within the SPHE subject. In 2004, while 95% of schools had timetabled SPHE in the first year, 79% of them had RSE as a component of it. Another study criticised the amount of sexual health education given and that its timing was too late<sup>11</sup>. Both parents and schools have a duty to ensure children and young people have access to information on sexual health and what constitutes a healthy relationship and that it be delivered in a child friendly way to ensure that it can have a positive impact on their lives. Such information should also be available in Youthreach centres, youth cafes and at all venues, offices and sports centres where young people congregate.

For younger children, the 'Stay Safe Programme' conducted in most primary schools helps children be aware of how to identify incidences of abuse and how to report it. Unfortunately it is not available in all schools, with up to 20% of schools not teaching the programme.

**Recommendations:**

- Ensure continued education of RSE throughout secondary school.
- Ensure all primary schools conduct the Stay Safe Programme.
- Forge stronger links with the youth sector to ensure vulnerable teenagers are reached.

Treatment of sex offenders

The national strategy on domestic, sexual and gender based violence should also include elements dealing with the perpetrators. Only through effective engagement with perpetrators and those identified as being potentially violent persons will the incidences of abuse reduce. All sex offenders should have the opportunity to participate in a sex offender treatment programme either in prison or in the community once released. This should include young offenders who have sexually abused or who have demonstrated sexually inappropriate behaviour. At present there

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<sup>9</sup> [http://www.barnardos.ie/shop/publication\\_free.php?publication=29&content=34](http://www.barnardos.ie/shop/publication_free.php?publication=29&content=34)

<sup>10</sup> Morgan, Mark (2000) Evaluation of Relationship and Sexuality Education Implementation,

<sup>11</sup> Hyde, A and Howlett, E (2004) Understanding Teenage Sexuality in Ireland, Dublin

are too few places allocated under the NIAP and SIAT programmes to such young offenders. Research has shown that participation in treatment programmes leads to reduced recidivism rates<sup>12</sup>.

At present of the 269 prisoners serving sentences for a range of sexual offences, 128 of them have completed the voluntary treatment course<sup>13</sup>. Furthermore upon release there is inadequate monitoring of sexual offenders despite being a subject of a sex offenders order. Additional involvement of the Garda and probation service is required. At a community level there is very few treatment courses for people demonstrating abusive sexual or violent behaviour. There are waiting lists to attend the MOVE treatment programmes.

In Northern Ireland, a sexual violence strategy is being drafted targeting sex offenders, violent offenders and potentially dangerous persons. This proposed strategy will have the following components:

1. Leadership and Direction
2. Prevention
3. Protection and Justice
4. Support.

Within these components there will be a variety of elements including:

- Enforcement of post release orders,
- Public Protection Arrangements Northern Ireland which involves sharing information between statutory and non statutory agencies to identify and assess the risk of sexual and violent offenders, and certain potentially dangerous persons in order to reduce serious offending, minimise serious harm to the public and assist in the early detection of repeat offenders.
- Encouraging offenders and those contemplating offences to use supports such as the Stop It Now. This innovative model operating in many areas across the UK comprises of producing and distributing accurate information and awareness raising materials, developing local projects which engage the local communities and offering a Helpline service for any adults who may have concerns about their own or someone else's sexual thoughts and behaviours towards children. Barnardos is actively involved with other key voluntary and statutory organisation in trying to develop this model in Ireland.

### **Recommendations:**

- Ensure all perpetrators undergo some treatment either while in custody or in the community
- Increase the availability of spaces at community treatment programmes such as MOVE
- Support the work of key agencies who are trying to establish the Stop It Now project in Ireland.

### **Conclusions**

Barnardos believes that a national strategy on domestic, sexual and gender based violence can have a positive impact on the lives of those families living with violence. However, to achieve this the strategy has to be holistic in outlook identifying the needs of all those affected and the corresponding supports and services required being available and accessible.

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<sup>12</sup> Travers, Olive (2001) 'Understanding and Treating Adult Perpetrators of Child Sexual Abuse, in The End of Innocence - Child Sexual Abuse in Ireland, (ed) Lalor, Kevin, Cork

<sup>13</sup> Irish Times 21st April 2008