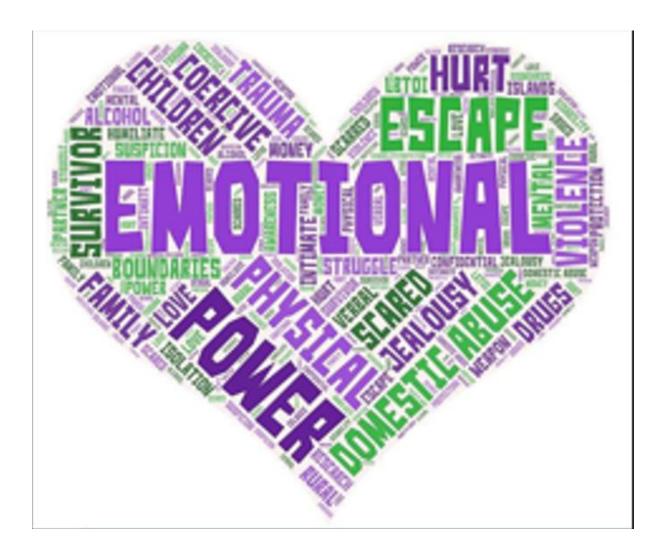
TRANSFORMING RESPONSES TO VIOLENCE AGAINST WOMEN AND GIRLS DOMESTIC ABUSE IN ARGYLL AND BUTE

RESEARCH REPORT



by Anni Donaldson

Acknowledgements

My sincere thanks go to the women, workers and managers who generously gave me their time and took part in this research. I am particularly grateful to the women who entrusted me with their stories, many of them previously untold. They regarded participation as an opportunity to help other women in Argyll and Bute living with domestic abuse and to help improve local services for them and their children. Taking part in research of this kind is a huge step for women. I hope they are satisfied with how I have told and interpreted their experiences.

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Executive Summary

Context

- Argyll and Bute's Violence against Women Partnership (A&BVAWP) aims to prevent the harms and eliminate the risks to women and children from domestic abuse caused by the abusive, coercive and violent behaviour of (mainly) male perpetrators.
- Argyll and Bute Community Justice Partnership aims to reduce and prevent
 offending/reoffending and requires the input of those who have experienced crime
 and those who have committed crimes in order to improve outcomes.
- The Transforming Responses to Violence against Women and Girls Project
 (TRVAWGP) is implementing the Safe and Together (S&T) practice model in Argyll
 and Bute's for the services and agencies responding to domestic abuse. The model
 places particular focus on the impact of the abusive parent's behaviour and its
 impact on the non-abusing partner, children and family life.

Research design

- TRVAWGP includes a qualitative research study undertaken during 2022-2023.
- This report presents the research findings from that study.
- The aims of the research were:
 - o to explore women's experiences of domestic abuse;
 - o to examine victims-survivors', workers' and managers' views of local practice responses to domestic abuse victims-survivors and to perpetrators;
 - o to gather workers' and managers' views on the implementation of S&T.
 - o To seek women's, workers' and managers' recommendations for improving local responses to domestic abuse.
- 24 participants were interviewed: 11 women; 5 workers; and 8 managers.

Research Findings

Men's use of violence and abuse in intimate relationships

- The abusive men referred to in the study were aged from men aged in their 20s to men in their 60s.
- The men's behaviour used a number of different forms of domestic abuse: physical, emotional, psychological, sexual, economic and financial.
- The men's violence and abuse often started or escalated during pregnancy.
- Coercive and controlling behaviour isolated women and restricted their choices, decisions and movements in private, social and community life.
- Particular features of rural and island life distance, proximity, familiarity and isolation were exploited by abusive men in their abuse of their partners.
- Many communities retain traditional attitudes to roles and responsibilities in marriage and intimate relationships; family privacy and non-interference in family life.
- These created conducive community contexts of impunity for abusive men.

- These factors were exploited by abusive men in ways which continued to isolate and stigmatise women post-separation.
- Post-separation, men's coercive and controlling behaviour took more public forms focussed on their ex-partners and, where there were children, on disrupting the women's relationships and contact with their children.
- Many of the men stalked and harassed their ex-partners post-separation.
- Men used and often manipulated police and the criminal justice system, child protection systems and processes, family and civil court proceedings to further control and harass their ex-partners.
- Disputes over children, property and finance were instigated and prolonged in ways which further distressed and harassed their ex-partners.

Women's experiences of domestic abuse

- Women aged from those in their twenties to those in their 50s experienced two or more forms of domestic abuse.
- Women experienced domestic abuse during all stages of their relationships, up to and after separation.
- The abuse occurred in relationships with children and in those without; and in second relationships where the children were older and had left home.
- The majority of the women were mothers whose children also experienced the men's abuse of their mothers.
- The abuse lasted between five and twenty years.
- All of the women were separated from their abusive partners.

The impact of the abuse on the women

- The abuse resulted in women experiencing a range of physical, emotional and psychological impacts which were detrimental to their health and wellbeing.
- The abuse negatively affected women's ability to work, to maintain family relationships, social and community networks.
- Many women were involved in protracted legal and/or family court disputes with their ex-partners over child contact and residence, divorce, property and land.
- Factors arising from life on tight-knit and dispersed rural communities proximity, distance, familiarity, and isolation served to entrench women's experiences of domestic abuse and their personal isolation.
- Covid restrictions entrenched women's existing isolation with abusive partners.
- Factors related to rurality compounded by Covid restrictions created additional barriers for women in relation to disclosure, seeking support or to separation.
- While some separated women welcomed Covid restrictions, for the majority, it further exacerbated their existing isolation.

Disclosing or reporting domestic abuse

- Women's understandings of the abusive nature of their relationships, their disclosure and separation decisions followed a 'stages of change' model.
- Women welcomed internet and telephone-based access to specialist domestic abuse information, online for aand group chats, support services and other resources.
- Most women told no one about the abuse fearing repercussions from their partner, blaming themselves for the abuse and wishing to preserve the family unit or relationship.
- Women disclosed in the first instance, to family and friends.
- Professionals living and working in local communities often lack objectivity and a clear understanding of the nature and impact of domestic abuse in their responses to and interventions with abusive men and the risks they pose to women and children.
- Some women lost trust in local responses as a result.
- Women welcomed the specialist support of professionals who believed and supported them and understood the physical and traumatic impact of domestic abuse on themselves and their children.
- Many women preferred the anonymity of contacting helplines, services and resources outwith their area when initially seeking information and support.
- Women appreciated the availability of ongoing telephone-based support services from local specialist services.

Workers' and managers' views on agency responses to domestic abuse

- Traditional child protection practices which focus on a failure of women's parenting
 to protect their children where there is domestic abuse remain embedded in social
 work practice interventions with mothers.
- A mother's 'failure to protect' remains a foundational principle in child protection practice while the behaviour of violent and abusive fathers often fails to be the focus of child protection systems and processes.
- The continued focus on women's shortcomings as mothers, rather on fathers' abuse creates service-generated risks to the long-term safety, health and wellbeing of women and children.
- Some women welcome social work involvement in their lives to help monitor the behaviour of their ex-partner.
- Women are often disappointed by the lack of social work support available to their children; the onus placed on them to keep their children safe; the lack of consistent monitoring of their ex-partner and the paucity of information they receive about the progress of their case on an ongoing basis.
- Women feel they are held responsible for their abusive partner/ex-partner's abuse and penalised if they fail to keep their children safe 'double jeopardy'.
- Women continue to fear and have a deep mistrust of social work or child protection system involvement in their children's lives.

- This is based on long-standing 'failure to protect' approaches to child protection and women's fear their children will be removed.
- Switching the focus away from a mother's apparent failings toward the source of the risk and harm demands the disruption of attitudes, behaviours and practices with deep roots.

Domestic abuse-informed (DA-I) practice

- Domestic abuse informed (DA-I) and trauma-informed approaches are emerging in Argyll and Bute.
- These are introducing new perspectives and challenging existing practice in multiagency settings; specifically, in interventions with perpetrators, in risk assessment and in safety and support interventions for women and children.
- In their work with violent and abusive men, some social workers and other child protection professionals lack the confidence and competence to directly address the men's violent and abusive behaviour and their parenting choices.
- Expertise currently exists in Justice Services which could support staff to develop professionals' confidence in intervening with violent men.
- Safe and Together training addresses this lack of confidence and is welcomed.
- New DA-I approaches are being introduced via MARAC; by ASSIST; Independent Domestic Abuse Advocacy (IDAA); Argyll and Bute Women's Aid; Argyll and Bute Rape Crisis; expertise in Justice Services and the increased use of DASH Risk Assessment.
- These are creating ideal opportunities to introduce and embed new DA-I
 perspectives and practices, to challenge existing attitudes and beliefs about
 domestic abuse and demonstrate best practice in risk assessment, safety planning
 for women and children.
- The dissemination of DA-I approaches is highly dependent on the knowledge and expertise of individual practitioners being shared with team colleagues, in inhouse training and via multi-agency working practices. However, existing caseloads severely limit the opportunity for this knowledge exchange.
- There is a need in the area for more formal individual programmed work with associated staff development and training for addressing the behaviour of convicted domestic abuse perpetrators on Community Payback Orders.

COVID-19 restrictions

- Covid-19 restrictions dramatically changed existing working practices. Delivering services remotely via telephone and online, expanded in some services areas and was introduced for the first time in others by necessity in 2020. These have proved successful in improving the accessibility of services for women victims-survivors and for Justice Services' work with convicted perpetrators.
- The period of Covid-19 restrictions moved all domestic abuse training online, increased attendance and reduced travelling time for local trainers.

- The move to homeworking took its toll on workers and on managers moving to desk-based telephone support and the increased demand that was created at the time
- New ways of supporting, supervising and managing staff were introduced to compensate for the absence of face-to-face support sessions and for the lack of personal contact with colleagues in offices.

Safe and Together

- All workers and managers fully support the implementation of S&T in Argyll and Bute
- A widespread failure to directly address violent men about their behaviour was acknowledged.
- Interventions and targeted interventions which reduce the risks violent and abusive men create were regarded as essential.
- Implementing S&T will ensure that workers build trust and develop positive partnerships with women who have a long-standing mistrust of social work involvement in their lives.
- S&T will improve the safety of women and children and mitigate the adverse impact of male violence and reduce service-generated risks.
- A number of challenges for implementation were noted:
 - current time and workload pressures could have a negative impact on training uptake;
 - long-standing social work practice responses and interventions in cases involving domestic abuse -women's 'failure to protect' - may create resistance to implementation;
 - S&T training, the practice and system change they demand from professionals require clear and consistent senior management support;
 - S&T training and the practice and systemic changes must be implemented consistently across all relevant services.

Recommendations

Women's recommendations

- Strengthen the social work, police and court responses to violent and abusive men in the child protection, criminal and family court systems; improve risk assessment, safety planning in order to achieve safer outcomes for women and children.
- 2. Ensure A&B has consistent DA-I and trauma-informed multi-agency responses by trained practitioners who believe women, and whose understanding of the nature, dynamics and impact of domestic abuse fully informs their responses to victimssurvivors and perpetrators.
- 3. Ensure responses are *area-informed* and that professionals recognise the impact of distance, proximity and familiarity on women's experiences; on their decisions to report/disclose the abuse; and on their ongoing engagement with services.
- 4. Ensure that women have the additional option of accessing telephone or online services from outwith their local area due to concerns about proximity, familiarity and confidentiality.
- 5. Increase accessibility, visibility and more varied messaging by local domestic abuse services.
- 6. Train other support services, including counselling, therapeutic and other A&B council and local third sector professionals in domestic abuse; ensure all relevant agencies become fully engaged in the local coordinated responses and actively promote their services to victims-survivors.
- 7. All police, social work and other services to have a leaflet containing information about local services which should be given to or made available to women when they present at or contact services for support where there is domestic abuse.
- 8. Specialist support services such as, for example, Women's Aid to maximise access to support services via telephone, email, text and online means and to receive a call back as quickly as possible.
- 9. All agencies to communicate regularly and effectively with women and their advocates to keep them informed about the progress of ongoing interventions, safety planning, the dates (including cancellations) and the outcomes of meetings.

Workers' and Managers' Recommendations

DA-I practice: Staff development and training

- To introduce training which builds the confidence and competence of all social workers in a DA-I approach to working with violent and abusive men through the development of formalised programmed work to:
 - directly address their abusive behaviour;
 - highlight its impact on their partners and children;
 - hold them accountable for their behaviour.
 - create opportunities to share the existing skills of JS staff in working with violent and abusive men with colleagues in SWCF, adult social care services and other relevant agencies.
- 2. Ensure all relevant staff responding to domestic abuse victims-survivors and perpetrators are trained in the use of the DASH risk assessment checklist.
- 3. Ensure all new and existing staff in A&B VAWP agencies receive regular updated training in the nature, dynamics and impact of domestic abuse on victims-survivors.
- 4. Ensure all staff are aware of the need for an *areα-informed* approach in domestic abuse responses; to be aware of any service-generated risks to victims-survivors' safety, privacy and confidentiality.
- 5. To ensure the quality of responses is not compromised by professionals' proximity to and familiarity with local community networks and residents.

Sharing learning, information and practice

- 6. Create, opportunities for joint multi-agency training, learning, practice and knowledge exchange in DA-I approaches using existing expertise and resources.
- 7. To ensure this knowledge exchange is adequately resourced.
- 8. Ensure an up-to-date list of local support agencies and services is available to all domestic abuse first responders.

Interventions with domestic abuse perpetrators

9. Ensure all domestic abuse perpetrators who come to the attention of Social Work Children and Families (SWCF), Adult Social Work Services or JS receive a

robust response which challenges and holds them accountable for their behaviour, parenting choices and their impact on their partners and any children.

- 10. Implement and adequately resource individual domestic abuse programmed interventions within JS for convicted domestic abuse perpetrators on CPOs.
- 11. Explore the local capacity available for introducing a groupwork programme for convicted domestic abuse perpetrators
- 12. Establish a parallel partner support service for convicted perpetrators on CPOs within JS to ensure women's safety and wellbeing during the term of the Order.
- 13. Establish information sharing arrangements between agencies engaging with violent men and their partners to ensure risks can be accurately and consistently assessed and victims-survivors' safety assured.
- 14. Ensure all new and existing agency representatives attending MARAC are fully informed and kept updated about their roles and responsibilities in its function and processes.
- 15. Explore non-court ordered interventions for violent and abusive men who are involved in other adult service areas.
- 16. Implement the Safe and Together Model. (See below)

Women survivors: support and advocacy

- 17. Increase the number of IDAAs in A&B to ensure a service is available for all women who need support. This should include women deemed high risk at MARAC, who have no children, have had no contact with WA/specialist services and where there is no court case or ASSIST involvement.
- 18. Ensure that all staff in services responding directly or indirectly to women victimssurvivors take a trauma-informed, DA-I approach in order to build trust in local multi-agency responses.

Funding and sustainability

19. Ensure there is sustainable, long-term investment in specialist VAW organisations and domestic abuse services in A&B.

Safe and Together Implementation

- 10. Safe and Together training should be made mandatory for all senior leaders, management, new and existing staff in Children and Families and Adult Social Work Teams; Child and Adult Health; Education; Police and Criminal Justice System; third sector agencies.
- 11. Safe and Together refresher courses should take place regularly.
- 12. Management should ensure staff are given the time to undertake Safe and Together training to ensure maximum uptake.
- 13. To raise awareness among women and mothers currently involved in statutory or third sector domestic abuse services of the new Safe and Together approach being introduced in A&B.
- 14. To raise awareness among abusive men/fathers of the new Safe and Together approach being introduced in A&B.
- 15. To raise awareness among the general public of the new Safe and Together approach being introduced in A&B.

Part 1

1.1 Introduction

This is a report on findings from the A&B, Violence against Women Partnership's (A&BVAWP) Transforming Responses to Women and Girls (TRVAWGRP) Research Project. Part One of the report will define the terms used in the report; contextualise and summarise the rationale and remit of the Research Project, outline the research design and analytical and theoretical approach to the data. Part Two analyses women's experiences of domestic abuse and its impact and offers their recommendations for future service development; Part Three provides a detailed exploration of A&B workers' and managers' perspectives on and recommendations for the area's agency responses to domestic abuse; Part Four outlines their views on and recommendations for the proposed implementation of Safe and Together in the area.

1.2 Definitions and a note on language

Terminology describing domestic abuse has evolved since the 1980s. The term *domestic* abuse is one of a number of operational terms used to describe a range of different forms of violence and abuse including physical, emotional, psychological, sexual and financial enacted by one partner in an intimate relationship against the other. The accounts of women's personal experiences of male violence, its impact and consequences as recorded by researchers and practitioners have been central to the way we understand and define male violence against women in intimate relationships. Domestic abuse has been problematized and conceptualised by feminist researchers, activists and others in improvements which have informed policy, practice and legal developments in Scotland and elsewhere.

Other terms used in different jurisdictions and settings can include *wife battering, domestic violence, coercive control, domestic violence and abuse, woman abuse, intimate partner violence.* In Scotland, *domestic abuse* consists of a number of forms of violence and abuse. Women often experience one or more forms. The term *domestic abuse* is often used interchangeably with *coercive control.* Both describe a pattern of abusive, coercive and controlling behaviour by one partner towards another (Stark, 2007). They describe behaviour where one partner reduces the other's freedom of movement and decision-making by

instituting a regime dominated by the abusive partner's wishes and needs. This process may be gradual or can happen quickly in the early stages of a new relationship during the 'honeymoon' period and can include a rapid development from dating to cohabiting or marriage and having children. As domestic abuse becomes part of the dynamics of the relationship, the woman's personal agency, autonomy and choices are gradually diminished. The abuse can begin any time in a relationship and continue throughout. It may vary in frequency and severity over time, sometimes with long periods elapsing without violence or abuse. Research has shown that this follows a pattern common within many abusive relationships known as the 'cycle of violence': an outburst of violence or abuse is followed by contrition and a honeymoon period of relative calm prior to a subsequent build up to another event. This continues to recycle and may involve long periods between stages in the cycle (Carrington, 2014). (Figure 4)

The terms *domestic abuse* and *coercive control* are often used interchangeably. The term most frequently used in national and local policy and in practice settings by public and third sector bodies in Scotland at the moment is 'domestic abuse'. The Scottish Government defines domestic abuse as 'perpetrated by partners or ex-partners [which] can include physical abuse (assault and physical attack involving a range of behaviour), sexual abuse (acts which degrade and humiliate women and are perpetrated against their will, including rape) and mental and emotional abuse (such as threats, verbal abuse, racial abuse, withholding money and other types of controlling behaviour such as isolation from family and friends)'; stalking and harassment; abuse using digital or online technology.¹ The term *domestic abuse* is used in this report.

The terms women/woman and girl/girls will be used throughout to reflect the gendered nature of the majority of those who experience domestic abuse and the target group of participants upon whose experiences this research is focused. However, it is important to highlight that it is not only natal women who will experience domestic abuse. Men, boys, those identifying as trans-gender and non-binary also experience these forms of violence and abuse in their relationships. Given the national prevalence and likely hidden prevalence of

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www.healthscotland.scot/media/2099/gbv-domestic-abuse-march2019.pdf

domestic abuse, this research was focussed specifically on women's experiences of domestic abuse in A&B and on local professional and service responses to women in their situation.

In different contexts and documents, two terms, *victim* and *survivor*, may be used to describe those, usually women, who have experienced domestic abuse. The term *victim* tends to be used in criminal justice contexts. However, anti-VAW and GBV campaigners argue that using it in other contexts implies women are passive victims and denies their individual agency and capacity for resistance. Many prefer the term *survivor* which signals recovery. However, there may be situations when one or other term is the most appropriate. I will use the term *victim-survivor* or *victims-survivors* where these more closely reflect that continuum of individual personal experiences.

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1.3 Domestic abuse in Scotland - overview

Domestic abuse, as a form of violence against women and girls (VAW&G) or gender-based violence (GBV), is acknowledged as a public health as well as a criminal justice issue in Scotland (Improvement Service 2019). Further, Public Health Scotland acknowledges that VAW&G is a major public health, equality and human rights issue which is experienced unequally, with 17% of women and 7% of men having experienced the use of force from a partner or ex-partner at some point in their lives (Scottish Government, 2021b). The United Nations has declared that domestic abuse, is a form of VAW&G or GBV. Both terms refer to behaviours and acts which result in 'physical, sexual or mental harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private' (United Nations 1993). While it is acknowledged that domestic abuse and VAW&G mostly affect women and that men are the main perpetrators, it may impact individuals of any age, gender, sexual orientation, faith or ethnicity. Forms of VAW&G include:

- Domestic abuse;
- Rape & sexual assault;
- Child and childhood sexual abuse;
- Stalking, sexual harassment and intimidation at work and in the public sphere;
- Commercial sexual exploitation, including prostitution, pornography and trafficking;
- Honour-based violence;
- Female genital mutilation (FGM) and other harmful traditional practices.

Domestic abuse can happen at any age or stage in married, cohabiting or non-cohabiting relationships or while dating. Young people can experience this form of abuse too and it also happens in same-sex relationships, to disabled women, and to women of all classes, cultures and ethnic groups. Because domestic abuse is overwhelmingly experienced by women and perpetrated by men and driven by norms and expectations of males and females it can be defined as gendered abuse.

It is estimated that between one in three and one in five Scottish women will experience domestic abuse during their lives. Leaving an abusive partner is often extremely dangerous and can be lethal. Two women a week are killed by a partner/ex-partner in the UK (Smith 2022) and by the time they are 18, one in 5 children across the UK will have lived in a home where there is domestic abuse (Safe Lives 2014). According to the Scottish Crime and Justice Survey, in 2019/20, 16.5% of adults said they had experienced at least one incident of partner abuse since the age of 16; 31% who experienced partner abuse within the 12 months prior to interview had experienced more than on incident. Experiences of partner abuse were more common for women than men (Scottish Government, 2021a). The survey also found that domestic abuse remains largely under-reported with the number of incidents likely to greatly exceed the number of reports made to the police. The most common reasons for not reporting were that those involved dealt with the incident themselves; that the abuse was considered too trivial/not worth reporting, or that it was a private, personal or family matter (Scottish Government, 2022:22). In Scotland, domestic abuse is one of the primary reasons for children being placed on the child protection register and is also one of the most common grounds of referral to the Children's Hearing System.

In 2020 across the UK during the Covid-19 pandemic, the levels of domestic abuse reported to police and support agencies increased dramatically. The UK Government has described violence against women as an epidemic which should be treated by police forces as seriously as terrorism (Guardian 2021).

The latest annual police data for Scotland shows that 81% of reported domestic abuse had a female victim and male perpetrator (Scottish Government, 2022). According to the Crown Office Procurator Fiscal Service (COPFS), in 2021-22, 32,776 charges were reported to COPFS which were linked to domestic abuse. The majority of those accused of domestic abuse are male. In 2021-22, 28,591 (87%) of the charges reported with a domestic abuse identifier were in cases where the accused was male. The majority of those reported with a charge with a domestic offence identifier in 2021- 22 were aged 31-40 years (36%) or 21-30 years (31%) (Crown Office Procurator Fiscal Service, 2022).

In Scotland, behaviour by partners which is controlling and coercive was criminalised by the Domestic abuse (Scotland) Act 2018).² The legislation came into force on 1 April 2019. Domestic abuse is understood to be a *course of conduct* offence. This means that there is ongoing controlling and abusive actions by one partner towards another in a relationship. In isolation, these behaviours may not seem serious, but when viewed together they amount to an intentional course of conduct, and over time, can become gradually more controlling and can restrict someone's freedom. It may make the person being abused afraid to do things which might risk disapproval or other, more serious consequences from their partner. This legislation is also the first to include children, now identified as potential victims, in the form of an additional aggravation that will allow the judiciary to impose harsher sentences when children are involved.

In 2021-22, 1,790 charges were reported under the Domestic abuse (Scotland) Act 2018, accounting for 5.5% of all domestic abuse charges, an increase of 13% from the previous year. Court proceedings were commenced in 94% of the domestic abuse charges reported; in 96% of cases, the accused was male. Domestic abuse cases involve criminality which can carry sentencing levels at that of Sheriff Summary courts where 95% of domestic abuse court cases are heard.³ On average in 2022/23, domestic abuse cases constituted 24% of the total Summary complaints registered in the Sheriff Court (Scottish Courts and Tribunal Service, 2023).

1.4 Argyll and Bute

Argyll and Bute (A&B) has a population of 86,260 and A&B Council (ABC) is the second largest local authority in Scotland after Highland, covering a land area of at 690,899 hectares with 13 people per square kilometre or 0.13 per hectare (ABC 2020). 4According to the Scottish Government's Urban Rural Classification (6-fold), 34.8% of AB's population live in small towns, 47.2% live in rural areas with the majority of those (43%) living in what is classed

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² https://www.legislation.gov.uk/asp/2018/5/contents/enacted

³ Cases heard at summary courts are heard by a sheriff alone. The maximum sentences for cases heard at sheriff summary courts are a fine of £10,000 or 12 months in prison. https://www.judiciary.scot/home/judiciary/judicial-office-holders/sheriffs/summary-sheriffs

⁴ https://www.argyll-bute.gov.uk/info/statistics/quick-facts-and-figures-about-argyll-and-bute

as 'remote rural' (Scottish Government, 2018b). A&B has 23 inhabited islands, more than any other local authority in Scotland; 17.1% of the area's population living on islands and 80% of the A&B population live within 1km of the coast. ⁵ One in five of the population is aged between zero and 19 years.

1.5 Responding to Domestic abuse in Argyll and Bute

In A&B in 2021-2022, a total of 362 incidents of domestic abuse domestic abuse were recorded by the police. This equates to 90 per 10,000 population; lower than the national average of 118 incidents per 10,000 population (Scottish Government, 2022). During this period in A&B, 46% of incidents of domestic abuse recorded by the police included the recording of at least one crime or offence. This is higher than the national average of 39% (Scottish Government, 2022:11). During 2021-2022, in the Crown Office Procurator Fiscal Service (COPFS) North Strathclyde area, its offices in A&B recorded the following charges with a domestic abuse identifier:

COPFS Office	Number of cases with domestic abuse
	identifier
Campbeltown	51
Cumpsellowii	54
Dunoon	159
Oban	118
Obali	110
Rothesay	34
Total	362

Table 1. North Strathclyde COPFS offices: charges with domestic abuse identifier in A&B (Crown Office Procurator Fiscal Service, 2022)

Each local authority area in Scotland has a Violence against Women & Girls Partnership which coordinates local work and to deliver the Equally Safe Quality Standards via the development of a local Equally Safe Plan. The Equally Safe Quality Standards are agreed at a national level and partnerships are required to send an annual return to the national body.

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⁵ https://www.argyll-bute.gov.uk/info/population-where-we-live

A&B Violence against Women and Girls Partnership (A&BVAWP), is committed to the local implementation of the Scottish Government's Equally Safe Delivery Plan for addressing violence against women and girls. The Argyll and Bute Community Justice Partnership (A&BCJP) aims to reduce and prevent offending/reoffending and requires the input of those who have experienced crime and those who have offended to provide evidence which will inform their forward planning and improve outcomes. The geography of A&B presents challenges for addressing VAW&G as partners seek to ensure they fulfil their local commitment to the Scottish Government's National Plan for Scottish Islands which aims to,

Ensure equality of access to services and support for survivors of gender-based violence in all areas of the country, and...to listen to the experience of victims and their families and consider further improvements that can be made (Scottish Government, 2019).

Membership of A&B VAWP includes representatives from A&B Health and Social Care Partnership (A&BHSCP); Argyll and Bute Community Justice Partnership; A&B Justice Social Work Services; A&B Women's Aid; A&B Rape Crisis; A&B Alcohol and Drug Partnership; A&B Council Education Services; Child and Adult Protection; Colleges and Universities; Multi-agency Risk Assessment Conference (MARAC); NHS Highland; Police Scotland; Third Sector agencies.

The findings from this research project aim to illuminate some of those challenges, particularly in a post-COVID world, and help inform the Partnership's forward strategic and service planning. The most recent funding allocation managed through the Delivering Equally Safe Fund (DESF) stresses that local approaches should involve *collaborative working* and building on existing good practice, and the development of evidence. Two of the Fund's priorities are directly addressed in the TVAWGRP. Specifically,

Priority 2: Women and girls thrive as equal citizens: socially, culturally, economically.

Priority 3: Interventions are early and effective, preventing violence and maximising the safety and wellbeing of women, children and young people.

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⁶ https://communityjustice.scot/community_support_service/argyll-and-bute/

1.6 Domestic abuse during the Covid-19 pandemic

During the COVID-19 emergency 2020-22, the UK and Scottish Government lockdown measures of home-isolation, social distancing, and travel restrictions, it became apparent that the risks faced by women and children already living with domestic abuse were magnified (Scottish Government 2020).⁷ The lockdown measures created additional opportunities for perpetrators to threaten, coerce and isolate their partners and children thus creating more challenges for victim-survivors to seek help.

As we understand more about the impact of lockdown on victim-survivors, evidence indicates that demand for domestic abuse support services increased (Scottish Women's Aid 2020). With the physical location of domestic abuse agencies closed and professionals working from home, services relied heavily on digital and mobile phone technology. This posed particular challenges to Scotland's domestic abuse sector providing services to areas with restricted digital/internet access and to island communities. Furthermore, domestic abuse professionals face challenges working without face-to-face support from colleagues, teams and managers teams.

Domestic abuse agencies provide a flexible range of face-to-face and remote ways that victims-survivors can access services safely and confidentially. In Scotland's more rural or island areas, transport, geography and uneven internet or mobile phone coverage present particular challenges to victim-survivors and service providers compared to their urban counterparts with additional funding made available to victims-survivors during the COVID emergency.⁸ During lockdown, with centres closed and domestic abuse professionals working from home, agencies relied heavily on digital and mobile phone technology to contact clients and deliver essential services.

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⁷ https://www.gov.scot/publications/domestic-abuse-forms-violence-against-women-girls-vawg-during-covid-19-lockdown-period-30-3-20-22-05-20/pages/3/

⁸ https://www.gov.scot/news/support-for-victims-of-domestic-violence-during-covid-19-outbreak/

Argyll and Bute Women's Aid and Women's Aid groups in other areas of Scotland reported that during the period of lockdown restrictions, many women they supported were feeling more traumatised and more likely to have mental health issues. Consequently they needed more intensive support for longer. With courts closed during lockdown a significant backlog in cases has prolonged women's wait for justice with some losing faith in the system. The findings in this report includes the experiences of women and workers during the period of COVID restrictions.

1.7 Transforming Responses to Violence against Women and Girls Project (TRVAWGP)

In 2021, A&BVAWP obtained funding from the Scottish Government's Delivering Equally Safe Fund for their Transforming Services to Women and Girls Project (TRVAWGP).⁹ The overall purpose of this initiative is to prevent the harms and eliminate the risks to women and children from domestic abuse caused by the abusive, coercive and violent behaviour of (mainly) male perpetrators. In its area plan for children's services ABC and partners are committed to

Promoting children and young people's wellbeing by adopting preventative approaches dedicated to the needs of children and young people at the earliest possible time. Recognising the importance of children and young people achieving and maintaining good physical and mental health and wellbeing is also paramount.

The long-term negative and traumatic impact on children and young people living with domestic abuse has long been recognised (Levendosky & Graham-Bermann 2001). Developments in the fields of psychiatry, psychology and therapy, in particular, have deepened our understanding of the impact of trauma on those subjected to domestic abuse (See Herman 2015). Since the 1990s, trauma-informed approaches have become best practice in therapeutic, counselling and other support work with child and adult trauma survivors in the UK (Scottish Government 2021b; Humphreys, Houghton et al. 2008). Trauma-informed approaches recognise the needs of the survivor for safety, providing an opportunity to process traumatic memories and for the gradual rebuilding of trust and

⁹ https://www.inspiringscotland.org.uk/delivering-equally-safe-fund/

healthy attachments in their personal and social relationships. Focussing on and reducing the risk from the perpetrator of violence and abuse in the family and working on safety, recovery and improved outcomes for all concerned in domestic-abuse and trauma- informed approaches are central to the Safe and Together model and to the TRVAWGP. A&B is one of the 80% of Scottish local authorities who are now implementing the S&T model with the support of the Improvement Service, the Convention of Scottish Local Authorities (COSLA) and the Scottish Government (Safe and Together Institute 2021).

Specifically, TRVAWGP centres on the implementation of the Safe and Together (S&T) Model across the area. 10 A key principle of the Safe and Together model is working in partnership with women/non-abusing parents/carers in a strengths-based approach designed to keep them and their children Safe and Together and to achieve their desired outcomes. The model places particular focus on the impact of the abusive parent's behaviour and its impact on the non-abusing partner, their children and family life as a whole. The main TRVAWGP includes the provision of four full days of Core Training in the model for 50 staff, the creation of a network of S&T Champions within their respective localities and organisations and for training two S&T Trainers to build capacity and allow for the delivery of future training across the area. Overall, this initiative will increase the skills and confidence of staff providing services to women and children experiencing domestic abuse and in responding effectively to perpetrators. It will also ensure that all agencies develop a shared language and reduce the risk of misinterpretation and mixed messages which can occur in inter-agency engagement on domestic abuse. In addition to training in the Safe and Together approach and practices, the project will also provide a range of linked Violence against Women (VAW) training including, NHS Routine Enquiry for GBV; Harmful Traditional Practices; The impact of domestic abuse on children; and Working with abusive men. The TRVAWGP also includes a research project.

1.8 TRVAWG Research Project

A two-stage qualitative research study funded by the Argyll and Bute Community Justice Partnership (A&BCJP) with a contribution from DES was planned: during Year One

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¹⁰ https://safeandtogetherinstitute.com/the-sti-model/model-overview/

2022-2023, and at the end of Year Three 2023-24. The research funding from A&BCJP supports their commitment to improving understanding of local victims' experiences of crime by the development of a local evidence base. This is in accordance with their statutory duty to develop effective interventions for perpetrators and will to contribute to the achievement of the area's Community Justice Outcomes. The first stage, to which this report refers, explores women's experiences of domestic abuse and also examines local service provision from the perspectives of women victims-survivors, workers and managers in local services.

The overall aim of the research is to explore agency current awareness and understanding of women's experiences, the support they need and the extent to which their needs are being met across the A&B area; and to examine current practice and also the confidence of staff working with those affected by or perpetrating domestic abuse prior to the implementation of the Safe and Together practice model. The Partnership recognised the importance of hearing directly from local women victim-survivors and A&B service providers. This would inform forward planning and the allocation of resources; improve the visibility of and access to services and continue the development and coordination of AB's community responses to domestic abuse and VAW.

1.9 Research Project Steering Group (SG)

A collaborative approach was taken to research design from the outset. A Steering Group was created from key members of the VAWP to oversee the research project and a key contact for the researcher was identified. The SG were also consulted and provided me with information and support in a number of areas, specifically in relation to the following:

Equality Impact Assessment 11

An Equality Impact Assessment was undertaken for the research project by MS.

Interview schedule/aide memoire.

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¹¹ https://www.healthcareimprovementscotland.org/about_us/what_we_do/equality_and_diversity/eqia.aspx

The SG were consulted in the development of an interview schedule of questions linked to the project's research aims. The group also helped in reviewing, redrafting and finalising the interview schedules/aide memoires which were used.

Publicising the study

A communication plan was created by MS for disseminating and publicising the study online, via social media using both printed and digital posters across the A&B area to maximise its visibility and reach. Information was disseminated through the websites and social media accounts of the HSCP, A&B Council (ABC), Highland Health Board and other VAWP member organisations, and via press releases. Paper posters and flyers were also visible in a variety of settings including GP surgeries, businesses, Council offices and waiting rooms, Police stations and ferry terminals.

Two posters were designed in collaboration with the SG and aimed at those in the target groups. One was aimed at women victims-survivors and the other at workers and managers. In line with World Health Organization Guide on conducting domestic abuse research, multiple behaviour-specific questions were used in the poster aimed at women (Garcia-Moreno, Jansen et al. 2006). The questions about individual acts allowed potential participants to interpret or define their subjective experience in their own way using terms of their choosing and to decide whether or not to participate on that basis. It also removed any negative associations they may attach to identification with stigmatised groups such as 'domestic abuse victims', 'battered women' (Garcia-Moreno, Jansen et al. 2006; Ellsberg, Jansen et al. 2008) which participants might perceive. This approach has been used successfully in a number of studies carried out in primary care and community settings (Richardson, Coid et al. 2002; Donaldson and Marshall, 2005; McCarry et al 2018; Donaldson, 2019). (See Appendix 1.)

Feature articles about the project with contact information appeared in the *Oban Times* (23 June 2022) and the *North Argyllshire Advertiser* (1 July 2022). Recruitment benefited from snowball sampling where word of mouth and publicity undertaken in community settings widened access to potential participants.

Ethics and consent

An ethics proposal was created and provided the basis for discussions with SG and with AB's Data Manager to assure the privacy and safety of participants, the management of their data in compliance Data Protection legislation and in accordance with the principles of international good practice in VAW research. A Data Processing Agreement (DPA) was drawn up between the author and ABC.

Audio transcription services

Individual interviews lasted between one and one and a half hours with some interviews carried out over two sessions. Interview audio- recordings were transcribed by a professional external transcription service. Access to this service was via a password protected access to an online portal. Access was restricted to the author. This was done in accordance with the project's Data Processing Agreement.

1.10 Research Design

A qualitative research study was designed. Primary data was collected from one-to-one audio-recorded interviews with participants recruited from across the A&B area and those employed by partner agencies of the A&B VAWP.

Research Aims

Stage one of the research study - 2021-2023 - targeted three groups: women survivors, service providers/practitioners and service managers. The aim was to explore and capture their views on the effectiveness and safety of current service provision, interventions and practice responses to domestic abuse victims/survivors and to known perpetrators. Specifically,

- To ensure the experiences of women survivors inform domestic abuse service planning in A&B.
- To identify the particular barriers to service for women living with domestic abuse in the A&B area.
- To explore current policy, interventions and practice responses to known or suspected domestic abuse perpetrators.

- To make recommendations for the direction of future specialist domestic abuse service development and practice responses in the area.
- To generate research findings and an evidence baseline from which to assess the impact of the wider TRVAWG project.

Data Collection

It was understood from the outset that the majority of those who experience domestic abuse in A&B as elsewhere are women. The A&B VAWP is concerned specifically with improving local responses to domestic abuse and VAW experienced by women, children and young people. TRVAWGP, by definition, is focussed on services for these groups. The target group for this study was adult women. This study adopted an inclusive approach to purposive sampling by recruiting participants who fulfilled the following inclusion criteria:

- Women who self-identified as experiencing or having experienced domestic abuse/intimate partner violence/coercive control involving an intimate partner/s or ex-partner/s.
- 2. Professionals including paid and unpaid workers in agencies providing services to victims and perpetrators of domestic abuse including for example police, social work, third sector such as Women's Aid, criminal justice system, court and criminal justice services.
- 3. Participants willing to participate in research on the topic of domestic abuse by being interviewed and having the interview audio-recorded and/or their responses written down.
- 4. Adult participants with the capacity (as defined in Adults with Incapacity (Scotland)

 Act 2000) to give informed consent to participation in the study who were able

 communicate with the researcher verbally or in writing, remotely by telephone, via

 Zoom online platform or by email.
- 5. Participants willing to give their informed consent to participate anonymously in an audio-recorded interview as outlined in the Information Sheet, Consent Form and Privacy Notice provided to them.

Participant recruitment

A dedicated and confidential email address and telephone number were included on all publicity for the sole use of the project. All enquiries were logged and a response sent within 24 hours of receipt. The majority of enquiries came via email. Prospective participants were then emailed a copy of the Participant Information Sheet (Appendix 2), A Privacy Notice (Appendix 3) and a Consent Form (Appendix 4) to sign if they wished to proceed with an interview. All participants were fully informed of its aims and purpose. Victims-survivors who agreed to be interviewed were sent an *Interview Self-care Guide* for remote participants' (Appendix 5). The numbers of enquiries, interviews and participants are summarised in Table 1.

Recruitment period May 2022 — October 2022				
Number of enquiries	41			
Number of participants	25*			
Women victims-survivors	11			
Workers	5			
Managers	8			
Number of interviews	28**			
*One participant was interviewed but later				
withdrew their consent to participate.				
**some participants undertook more than				
one interview				

Table 2. Participant recruitment and participation

Participants

Women victims-survivors

The eleven women who took part in the study lived across Argyll and Bute in the area's larger towns, in villages, on islands and in some more remote, rural communities. The majority of the women grew up in Argyll and Bute with the rest having moved to the area from elsewhere

in Scotland and the UK. They were born between 1954 and 1991, and had been in heterosexual relationships which lasted from between three and over twenty years. All had separated from their abusive husband/partner within the last two years or more; for some, the process of separation had not finally ended contact with their former husband/partner due to ongoing legal, child contact and custody issues. The women in the younger age group had met their future partners/husbands in their late teens or early twenties and had gone on to settle down with them and have children; some of the women in the upper age range experienced abuse in relationships embarked on in later life. All references to any ongoing disputes related to their experiences of violence and abuse have been removed to protect the anonymity of the participants and any family members.

All of the women were or had been in employment apart from periods when they took a break to have and look after their children. The women were or had been employed in professional, local government, transport, hospitality, the media, care and third sectors. In addition to the emotional and physical impact of the abuse itself, for a number of the participants, separation brought new concerns and challenges. Post-separation, and particularly for those living in more rural areas or island areas, travelling to work, access to shops, schools, childcare, and local social and community resources and networks became more challenging. Post-separation harassment by ex-partners, ongoing property, divorce, child custody and/or contact disputes with their ex-partners aggravated and in many cases, inhibited the processes of recovery, resettlement and being able to rebuild their own and their children's lives and homes. In some cases, women lost custody of their children in the context of domestic abuse. The narratives provide many examples of women having to change or leave jobs, move house – sometimes more than once, or move to another area altogether. This affected their children's schooling, relationships with family and friendship groups, disconnected them from social support networks and reduced access to childcare. In most cases, separation proved costly and in most cases substantially reduced women's disposable income through having to give up work and rely on benefits.

From the women survivors' perspective, A&BVAWP's priority of recording women's experiences and views for improving VAW services in the area were acknowledged as vital to the study. All of the women who participated in this research greatly welcomed the opportunity to share their stories to show solidarity with other women and children in similar

situations to their own. Despite it being distressing at times, they were determined to contribute to the research, to show others what it is like living with domestic abuse in Argyll and Bute in the hope that it will help make things better for other women.

Workers and Managers

The workers and managers are employed in public and third sector agencies in A&B and the majority live in the area. All either work directly or indirectly with those experiencing domestic abuse, with their children or with those responsible and/or manage those who do.

I am immensely grateful to all the participants for their honesty and for entrusting me with their narratives.

Safety and privacy

Domestic abuse can evoke strong and often unexpected emotions. I have a duty of care to the participants and take my responsibilities seriously. When a date and time for interview was agreed, participants were sent a copy of a specially prepared 'Interview self-care guide'. The Guide outlined what to expect during the interview, acknowledged the potential for feeling upset or distressed during the interview, offered tips on self-care before, during and afterwards and provided a list of local support organisations. The contents of the Guide were reiterated at the beginning of each interview and it was stressed that participants could pause for a break or conclude the interview at any time. Interviews were conducted either by telephone and recorded using a Zoom H4N Professional recorder or via Zoom which provides an audio- recording facility. Participants were free to choose how they wished to be interviewed and those who chose Zoom had the option to keep their cameras switched off.

Data Management

Audio recordings are saved on my password protected laptop and sent to the chosen professional transcription service using a password protected online portal. When the

transcribed interviews are returned to me they are each anonymised by being assigned a reference number using the following reference codes:

FS = Woman Survivor

FW= Worker

FM= Female Manager

MM=Male Manager

These will be used with a number to identify their words in the final report. With participants drawn from small rural and island communities, and in order to preserve participants' privacy and anonymity, extra care will be taken to ensure that no identifying information disclosed during the interview will be used in the final report. In accordance with the DPA, all participants' anonymised personal data will be stored for the duration of the research project on the researcher's laptop and will be used in reports and other outputs from the research project in accordance with the consents given. Data is backed up on an external hard drive and stored in a locked box. Five years after the conclusion of the Second stage of the project, all data will be destroyed.

Data analysis

Theoretical framework

Since the 1970s, and strongly influenced by the principles of feminist research, a substantial evidence base has demonstrated that the issue of domestic abuse and all forms of VAW&G are not related solely to individual pathology, criminality or family dysfunction but has deeper historical and structural roots in women's social inequality. This contextualisation has become more widely accepted in national and international policy addressing VAW&G. In 1994, The United Nations' Declaration on the Elimination of Violence against Women acknowledged that violence against women is primarily perpetrated by men against women and girls and is contextualised in women's historically subordinate status in law.

Research on VAW&G prevention worldwide has shown that the most effective strategies are those which adopt an ecological perspective to implement action across

society at macro and micro levels and which interact with levels of power in society both vertically and horizontally and across public and private space (Heise, 1998; Samarasekera & Horton, 2015; Stockdale & Nadler, 2012). Hearn and McKie suggest a three-point approach to VAW&G prevention, policy and practice development which includes: a gendered definition and analysis of violence and abuse in all its forms; a recognition of the community settings, social norms and material conditions which facilitate the exercise of male power and privilege; acknowledgement of the varied locations and context where such violence occurs (Hearn & McKie, 2008). This approach was used in this research: a gendered analysis of domestic abuse; an ecological approach to analysis; an examination of the location and context of domestic abuse.

A gendered analysis of domestic abuse

This report uses a gendered definition and analysis of domestic abuse which is aligned with the approach taken by the Scottish Government. Anyone can be affected by this kind of violence, and anyone can be a perpetrator of violence. However, because domestic abuse affects women more than men, it is defined as gender-based. By referring to violence as gender-based this definition highlights the need to understand violence within the context of women's and girls' subordinate status in society. A gendered analysis firmly places the different forms of violence against women within the gendered reality of men's and women's lives, what it means to be a man and a woman in our society, compliance with gendered norms and the status and privileges which are afforded to us depending on whether we are born a man or a woman. Such violence cannot be understood, therefore, in isolation from the norms, social structure and gender roles within the community, which greatly influence women's vulnerability to violence. Women and girls are at an increased risk of violence and abuse precisely because they are female and the explicit inclusion of girls aligns with the UN definition of violence against women that includes the girl child, reflecting that this risk is present throughout life. The Scottish Government's Equally Safe is informed by a gendered analysis (Scottish Government, 2018a).

Ecological approach

A conceptual model for examining domestic abuse was devised for this research which benefits from ecological approaches developed in the social sciences for studying violence against women in modern society. Ecological systems theory offers a means of reconciling often competing theories explaining the complex interaction of individual, family, community, social and cultural factors which influence individual behaviour. The importance of environmental factors to human behaviour throughout the life course is highlighted. The model illustrates the interactions between the individual, psychological (ontogenetic) level within the family (microsystem), with other microsystems (mesosystem), community (exosystem), cultural and political (macrosystem) contexts (Bronfenbrenner, Heise adapted the ecological framework for exploring the aetiology of violence against women and argued for its value in synthesising a range of multi-disciplinary research activity and learning focussed on violence against women. Heise and others argued for the validity of integrated approaches to multi-disciplinary research on violence against women. Examining domestic abuse in A&B within this holistic frame, helps contextualise both individual experiences, social, professional and service responses in ways which will can assist in identifying areas of risk, help to target resources and develop prevention strategies (Bronfenbrenner, 1992; Dutton, 1995; Edleson, 1992; Heise, 1998). (Figure 1.)

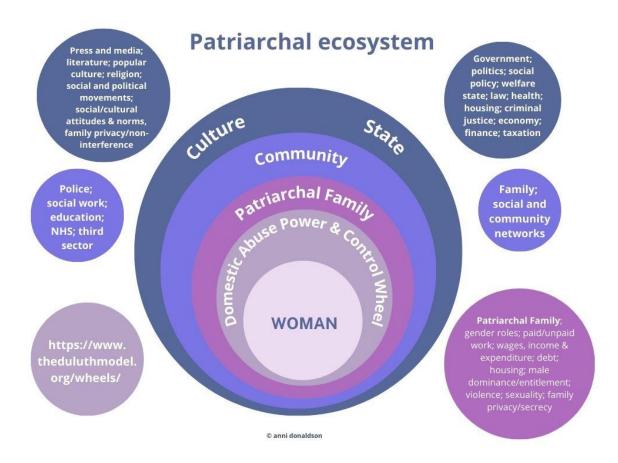


Figure 1: Nested Ecological Model: Risk Factors related to violence against women at different levels of social ecology (Heise 1998; Donaldson 2020)

Feminist approaches to research and practice in the field of domestic abuse and VAW&G prevention also recommend a holistic approach which includes the following:

- The inclusion of the views and participation of victims-survivors and their advocates,
 in policy and practice development;
- Taking a trauma-informed support and wellbeing approach;
- Partnership working with internal and external partners in public and third sectors (Donaldson, McCarry, & McGoldrick, 2018).

Domestic abuse: locations and context

This research focusses on the local authority area of A&B specifically. As noted above, the area is geographically extensive, includes towns, villages, small rural and coastal settlements and islands. The area is connected by road, ferry and rail networks. It has been acknowledged that while many features of men's use of violence and abuse in intimate

relationships are common to many women's experiences, there are some which can be aggravated or mitigated dependent on where the couple live. Recent research into women's experiences of domestic abuse in rural settings suggest that the locations themselves provide additional means whereby men can abuse their partners. Women may be doubly isolated in their homes by the abuse and by living in more isolated or island communities. Some studies show that factors within communities can compound women's experiences of domestic abuse and limit their 'space for action' and prevent them seeking safety and justice (Pugh, 2009; Sharp-Jeffs, Kelly, & Klein, 2018): limited access to transport; the use of social media and digital technology for surveillance; the shame of disclosure or reporting in close-knit communities; housing shortages and limited access to employment and childcare; where the man holds a prominent position or job (Farhall, Harris, & Woodlock, 2020; Harris & Woodlock, 2022). There are calls for area-specific responses to rural women experiencing domestic abuse to identify and address the additional constraints and risks they face (Pruitt, 2008; The Rural Crime Network, 2019).

Social norms theory shows how individual and community attitudes and values can influence individual and group behaviour and determine what behaviours are considered acceptable or unacceptable in relation to domestic abuse and VAW&G. The Pyramid of Discrimination illustrates how attitudes, social norms and behaviours can create, influence and maintain cultural contexts which are conducive to the perpetration of domestic abuse and other forms of violence against women (see also Kelly 2016). (Figure 2.)

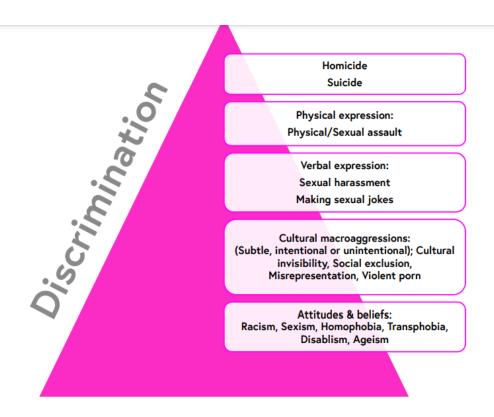


Figure 2. Pyramid of discrimination

Source: https://vawnet.org/material/pyramid-discrimination-and-violence

Analysing the data

A thematic coding framework was developed using Nvivo software based on the study's research questions and themes. The importance of taking a 'context specific' approach has been recognised as valuable to research on domestic abuse (Dobash & Dobash, 1983; Leneman, 1997). The narratives were analysed in contextual relationship to each other and to relevant policy, practice and research literature. Ecological systems theory provided a basis for the thematic analysis (Braun & Clarke, 2006; Bronfenbrenner, 1992; Donaldson, 2019; Heise, 1998) to highlight common themes and areas of similarity and difference. Findings are presented in a way which both reflects the original research questions and emergent themes from the data itself.

Part Two

2.1 Introduction

Part 2 of this report begins by clarifying the definitions and concepts used to frame and analyse the narratives within an *ecology of risk*. Secondly, it addresses the nature of the violence and abuse men used in the intimate relationships being described, its impact and consequences for the women and any children. Finally, it examines women's experiences in the particular context of Argyll and Bute's geography and community cultures.

2.2 Analysing the women's narratives

The women's narratives about their lives were analysed using an *ecology of risk* framework. (Figure 1). This allowed an examination of the nature of men's violence and abuse; the risks men pose to wives/partners and any children in the private space of the home; the influence of their local environment, community and culture on men's use of violence; and the impact of public and professional services and responses to male violence.

The women's accounts of their experiences are presented in detail to highlight the realities of their lives in the area. The close-knit nature of A&B communities is apparent in these findings and created challenges in ensuring they are presented sensitively. Extreme care has therefore been taken to balance women's privacy, confidentiality and safety with their wishes that their experiences be included.

2.3 The ecology of risk

Living with domestic abuse is fraught with risks for women and children in the home and in public and social space and has been described as a 'liberty crime' (Stark, 2007). The range of static and dynamic risk factors are now recognised and codified in risk assessment tools such as the Domestic Abuse Stalking and Honour-based Violence Check List (DASH) and the Risk Identification Checklist (RIC) (Almond et al., 2017; Robinson, 2016). DASH is increasingly used to inform domestic abuse case management in policing, domestic abuse advocacy,

MARACs (Multi-agency Risk Assessment Conferences), ¹² social work, health care, justice and child protection and settings in Scotland. ¹³

Domestic abuse also presents considerable risks to women's physical and emotional health and wellbeing (Garcia-Moreno, Heise, Jansen, Ellsberg, & Watts, 2005) including during pregnancy and post-partum (Bailey, 2010). Living with the short or long-term effects of domestic abuse can also result in women feeling isolated, it can affect their ability to work, study or their freedom to function day to day. Women have to assess the risk of violence from their partner and navigate the wider *ecology of risk* if they decide to separate. It is recognised that considering separation or separation itself are the most dangerous times for women living with violent and abusive men. Monckton-Smith has identified an 8-stage homicide timeline: a history of control and stalking; the commitment whirlwind; living with control; trigger; escalation; a change in thinking; planning; and finally, homicide and/or suicide (Monkston-Smith 2021). Many women are murdered in this highly dangerous period and the risks women face on leaving or contemplating leaving cannot be underestimated (Ingala-Smith, 2022). This clear and present danger to women is the main reason why many do not leave violent and/or abusive partners or disclose or report to others.

Fear of disclosure

Many women do not tell others about their experiences or report them to the police or other services. This is usually a result of fear of repercussions from the perpetrator, of not being believed by others, from feelings of shame about what happened, having their experiences minimised or feeling that what happened was their own fault. Women may also be afraid of the consequences of reporting to the police or other services, for example as this may result in legal of formal proceedings over which they fear they will have no control. These fears converge with the perpetrator's threats and can reinforce women's silence.

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https://www.gov.scot/publications/improving-multi-agency-risk-assessment-interventions-victims-domestic-abuse/pages/3/

¹³ https://safelives.org.uk/sites/default/files/resources/Dash%20for%20IDVAs%20FINAL_0.pdf

Social consequences of disclosure

Perpetrators may use threats of action against the woman's family members, friends or children. For black and minority ethnic women, those with insecure status such as migrant, asylum seeking or refugee women, disabled women and members of the Lesbian, Gay, Bisexual and Trans (LGBT+) community, their reluctance to disclose may also include additional fears of exposure to deportation, social stigma or further discrimination from those to whom they disclose. The shock or distress of hearing or reading disclosures of experiences of sexual violence or domestic abuse can create a reaction which oscillates between genuine shock, rejection or denial that the account can be true followed by a deep and enveloping silence. Known as the *dialectic of trauma* (Herman, 1997) this can compound victims-survivors' fear and feelings of isolation. Those who contemplate disclosing their experiences of domestic abuse and sexual violence, whether to a friend or family member, to a local service or to the police, regard it as a potentially dangerous step. The decision to disclose may involve emotional, physical, social and practical risks which have to be weighed up and the outcome of responses to that disclosure cannot always be predicted. The risks involved will vary in different community contexts.

Service-generated risks

The organisations to whom women may disclose or report can also, themselves, pose a risk. Women often have to repeat their story many times before receiving the help they need. Making disclosures can be particularly difficult in communities where attitudes to violence against women are such that the issue is either not overtly discussed, or is implicitly accepted as private business. The key risks which survivors face from agencies and others to whom they disclose or report within their own communities are those of disbelief, minimisation, denial and blame – these service or institutional risks can compound an already difficult situation. Many professionals and workers also live in the areas and communities they serve making it difficult for women to disclose to those known to them or their families. Women may also be faced with professionals who make assumptions based on their attitudes to, for example, social and gender norms, abused women, disability, sexual orientation, class, ethnicity and religion.

2.4 Men's violence and abuse in their intimate relationships

The women's descriptions of the violence and abuse they experienced during all stages of their relationships, up to and after separation followed patterns which are all too familiar to those working in violence against women research and practice settings across Scotland, in the UK and worldwide (Cerulli, Poleshuck, Raimondi, Veale, & Chin, 2012). It often increased in frequency and severity over time and in addition to physical, sexual, emotional and financial abuse, it extended to include control of women's movements, appearance monitoring, surveillance, stalking and harassment. A thematic analysis of the narratives reveals patterns of violence and abuse used on the women which reflect long-standing, patriarchal values of male dominance enforced with the tactics and forms outlined in the Power and Control Wheel, often aggravated by factors in the wider community. (Figures 1. and 3.)

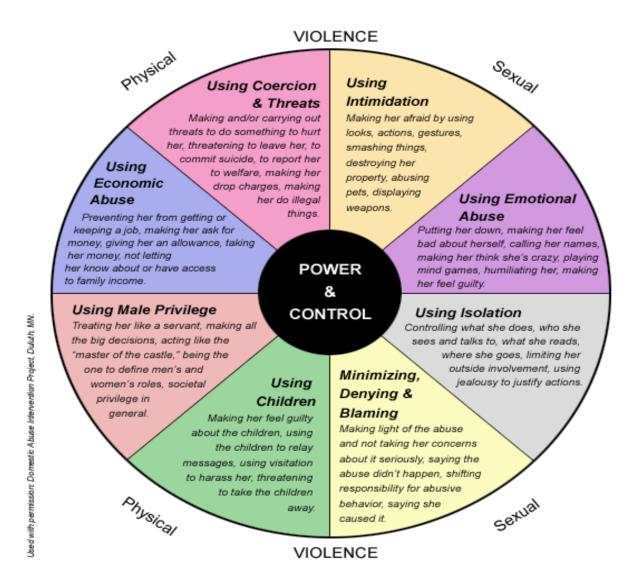


Figure 3. Power and control wheel

The early stages of some of the women's relationships were largely unproblematic as they began dating the men and they got to know each other. Although as one woman said, *He painted himself out to be a really nice guy*, and on reflection in the interviews she and others, especially those in the older age group and in second relationships, described what was actually going on as *love bombing*,

An attempt to influence a person by grand demonstrations of attention and affection. It is often used by abusers to gain their partners' attachment and/or dependency. 14

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¹⁴ https://www.solacewomensaid.org/love-bombing-affection-today-abuse-tomorrow

Other women found that the demands and restrictions on their time and their lives began to grow quite rapidly as their partners' criticism and control increased.

He was pretty abusive probably right from the start. Little things like, he didn't like my friends, or he used to call me thick because I didn't agree with his opinion on something. (FS11)

We both had our own house but he was here a lot, like suffocating me to start with. At first it was kind of nice having him around. But then, it got to the stage where he was watching what he wanted on my telly and it just got a bit too much for me. (FS₃)

The men increasingly placed barriers between the women and their friends and family.

Basically the result was to alienate you from [others]. I lost my friend and didn't see any of my family because this person just wanted and needed to be with me all the time and 'why would you go out and see anybody else whether it's your pal or your sister or whoever'. It was slow and subtle. (FS11)

The women's descriptions follow a common pattern in abusive relationships. Walker's 'cycle of violence' (Carrington, 2014; Walker 2016) illustrates how violence and abuse is often followed by a 'honeymoon period' of remorse and apology before re-cycling into a build-up of tension followed by a further violent or abusive episode. (Figure 4)

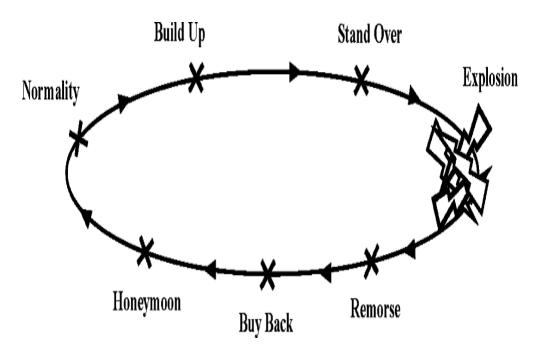


Figure 4. The Cycle of Violence (Carrington, 2014; Walker 2016)

In this way, the men asserted their dominance and control over the women incrementally and cyclically and in ways which established traditional, patriarchal features of male privilege. Recent developments in patriarchal theory have allowed us to identify domains within the ecological model encompassing private and public life which was outlined in Part One (Figure 1.). Six domains have been shown to provide opportunities for the assertion of an unequal gender power imbalance within and outwith the home and to increase women's vulnerability to and risk of domestic abuse and sexual violence: housework, paid work, sex, violence, community cultures, law, the combination of culture and state (Donaldson, 2022). In the household context specifically, these were aimed at asserting the man's dominant role and function in the relationship, in the home and in the family economy, to sex and the use of violence. Examples of these featured prominently in the women's narratives. Specific examples included, an assertion of men's freedom of movement, priority, choices and decision-making in relation to family finances and money management, time-keeping, social life, relationships and infidelity, care, contact and responsibility for children, domestic chores, paid work reinforced by sexual, physical and emotional violence and abuse. Although not all of the men were physically violent, the gradual establishment of an atmosphere of coercive control became almost total for all of the women, some now with young children.

It wasn't physical, it was emotional, it was sexual, it was coercive, it was manipulative. It was more to do with what he said and how he said it, and – yeah, like to start with he was Mr Wonderful, he was everything that anybody would want to be with. He promised me the earth and he was there, he was supportive. He was just fantastic. (FS₃)

As the relationships developed there were a number of common experiences among the women who gave examples of being choked, punched, attacked with objects, two were threatened with a knife and a gun respectively and one was severely injured after being pushed downstairs. Some women had been raped and sexually assaulted. The men also broke down doors, smashed household items, furniture and cars and abused family pets; there were also examples of men assaulting the women's family members and destroying their property. Women's experiences of male violence and abuse in their relationships correspond to the tactics and pressures highlighted in the Power and Control Wheel. The wheel accurately illustrates the interconnecting imbalances of gendered power, intimidation and threats as well as the use of physical and sexual violence which permeated the lives of the women in this study (See Figure 1). The consequences of living under these regimes for the women and their children were profound.

2.5 The impact and consequences of male violence and abuse for women

Constant, severe assaults, threats and intimidation cannot be endured without emotional effects. Chronic emotional distress is a normal, not an abnormal, reaction to this kind of treatment. Women may also experience the impact of living with stress cumulatively over many years. Living with domestic abuse can have a negative impact on women's sense of self and self-worth alongside a range of different impacts, all of which can be long-lasting. The narratives show that living with domestic abuse negatively affected the women's physical and mental health, their wellbeing, confidence and self-esteem; it also undermined women's ability to undertake daily tasks, to care for their children and to sustain paid employment.

I'm a very, very strong person and I've never experienced anybody in my life have the impact that he has on me. It's something I can't control and that angers me to a

certain extent, because I can't stop the way I feel when he does these things, you know. (FS₅)

It has affected my mental health and oh, he went on and on... I was off work. I signed myself off work. (FS₃)

I'd find myself doing my work with tears just streaming down my eyes. Thank God no one was in. But I was safe, and I was out of the way. (FS4)

Prolonged exposure to domestic abuse can result in depression, anxiety and panic attacks. The risk of developing trauma and other complex difficulties increases with experiences of repeated and severe abuse, and may be compounded by sexual abuse or rape. The women's accounts provide vivid detail about how domestic abuse affected every aspect of their lives. Their very personal accounts clearly demonstrate the atmosphere of fear and threat they were living in. A number described experiencing extreme stress, depression, anxiety, sleepwalking, nightmares, panic, being hyper-vigilant and feelings of extreme fear and shame.

I'm very jumpy. Very jumpy. I get days when I wake up and I'm just completely anxious. (FS11)

I can't sit at peace in my own home because I've had years of totally being alert, totally trying to read situations. Totally being on the go, because sitting down in the same space with him was so uncomfortable that I just distracted myself with everything else. (FS4)

I remember thinking, 'I don't know what's wrong with me, I'm so depressed.' I'd never been depressed like that in my life. I'm a very bubbly person, if that makes any sense. (FS8)

Panic attacks as well. The panic attacks are still there every now and then but I can control them. (FS8)

I did get frightened, I started becoming a mess. (FS9)

I had a mental breakdown. (FS6)

One woman contemplated suicide,

I didn't want to be here at all. My whole world had crashed, I'd lost everything. (FS8)

Others talked about the gradual erosion of their confidence and identity and how they eventually internalised all the blame for what was happening to them.

It seems when they say it you actually believe that it is your fault and you think, I should have done it better. (FS6)

I remember saying 'how dare you, I'm funny and you've taken that away from me.' I thought, 'you've taken part of my personality and dissolved it by being controlling and narcissistic towards me and making me doubt myself.' (FS₅)

It affected me terribly, my self-esteem, my... everything. (FS6)

But when you're not confident, you think, oh god, I shouldn't have questioned him. It's a funny dynamic that when you're in it, you don't realise you're in it, but when you're out of it, you think you're stupid. (FS₅)

The range of health impacts of domestic abuse on the women in this study resulted in some of them attending a wide range of health services, including G.P.s, maternity, mental health services and Accident and Emergency. However, although the women presented with injuries or symptoms related to the violence and abuse, they did not necessarily disclose the context or causes, nor were they asked for background information. In the main, the women were seeking ways to relieve the physical symptoms or those of emotional distress and fear, depression and anxiety caused by the violence and abuse. Known as emotion-focussed coping, this is different from problem-focussed coping aimed at solving the problem of the abuse itself (Folkman, Lazarus, Gruen, & DeLongis, 1986; Mitchell & Hodson, 1983). Some women described receiving medication, counselling and other therapeutic support for what became severe symptoms, others became dependent on alcohol and prescription medication.

I ended up going to my doctor last October because I couldn't think straight. I was frightened I was going to crash my bloody car, and I've never ever had an accident (FS6)

My nerves were that bad that the doctor had to put me on diazepam and I did not like getting put on diazepam because of that. (FS8)

I went to the doctors; the doctors gave me diazepam and I ended up addicted to them. (FS9)

While there were women participants with no children, the majority of the women participants had children and lived in a variety of different family circumstances. These included: separated/divorced women with babies and young children in their care; separated/divorced women whose children were resident with their fathers. There were women in the upper age range of this study whose older children either lived with them or whose children had left home. All of the women who had children described their experiences of pregnancy, childbirth and parenting in the context of domestic abuse and the impact it had on themselves, their children and family life.

2.6 Consequences of men's violence for pregnancy and parenting

Pregnancy can also be a very dangerous time when domestic abuse begins or escalates. It is estimated that up to 30% of domestic abuse occurs during pregnancy (SPCHN, 2012). There were a number of examples of this in the women's narratives.

When I'd found out I was pregnant, he sort of changed then. As our oldest got older, a few months old, he then started to become violent. (FS10)

Some of the women were assaulted, punched or kicked in the stomach, experienced excessive stress, were concerned about their health and that of their babies and about how they were going to cope when the baby arrived.

During my pregnancy he pushed me down the stairs once in his flat, I was about three months pregnant and, yeah, he pushed me from the top of the stairs right down – yeah. (FS9)

He was physically violent and then sexually violent after my daughter was born. (FS7)

During the pregnancy we weren't together the latter half because the behaviours towards me escalated. So there was a lot of pressure. I was working full time, but I thought I can't have this, it's not right [and we separated]. (FS₂)

For one woman, the abuse continued in hospital during the birth. Her partner lied to the nursing staff and told them that she didn't want anyone other than himself and a female member of his family to be present. As she recalled, 'I wanted so badly see my mum when I was in labour' (FS9). She was not consulted and her partner prevented her Mum from being

with her, 'They took his word; he was my partner and it's his baby as well - do you know what I mean?' (FS9).

After their babies were born, there were examples of men refusing to look after their own children.

[partner] wasn't helping me. Like when the baby started crying he would get mad and he didn't like the sound of her crying, things like that. One night I was lying in bed, and I said to him, the bottle is on the microwave downstairs, it's prepared, all you need to do is bring it up to me, I'll go and get the baby out of the crib. He leaped onto me, and he put his hands around my neck, and I thought he was going to kill me. He strangled me for probably... it felt like a good minute. (FS9)

He's never helped with the children at all. Like he's not changed nappies. He's not got up in the middle of the night with me. I breast fed them all. So his replies were always well I can't ***** feed them, can I? He's never got up with them for a nightmare or he doesn't – he didn't bath them. (Fs11)

As their children grew, it became more difficult for the women to nurture and care for their children in the abusive regimes that the fathers had now established.

2.7 Children and young people living with domestic abuse

The impact of living with violent and abusive fathers on children and young people can be profound. As with their mothers it can affect children's health and emotional wellbeing and affect their development and attainment (Humphreys, 2008; Mullender, 2002).

My child did get assaulted. He wasn't given any support or anything, so his behaviour started to - he went from a bubbly loving little boy to being very withdrawn - staying in his bedroom, wouldn't speak to me, didn't want to go to school, was terrified to leave the house in case his dad came after him. We've just been staying in for safety reasons. I don't leave my house. My son doesn't want to leave the house. (FS10)

I believe [child] is afraid of him, yeah, because she's not honest with him, she's got to hide things from him. He upsets her about things that she cares about. He doesn't do anything with her, he makes false promises to her. He takes her to nothing. (FS9)

[Son] never had a bond with [father] at all because his bond has always been with me. He's always needed me. (FS11)

2.8 Women's strengths and protective capacities

Contact with abusive and coercively controlling fathers after their parents have separated can also present problems and new risks for the children and for their mothers (Morrison, 2015; Ingala-Smith, 2022; Katz, 2020). However, research evidence and practice developments over the last ten years show that mothers are often the most fierce and astute protectors of their children (Safe and Together Institute, 2017). Despite the profound impact the domestic abuse can have on their own health and wellbeing, the mothers in this study developed highly effective strategies and tactics to anticipate and prevent the abuse, divert the children's attention from it, minimise its impact on their children or, in an emergency, to take them out of harm's way.

He broke in, smashed the door, smashed my phone, grabbed – wouldn't give me my phone back, my mobile as well. So I had to get all the children into my bedroom and barricade us in. My daughter had her phone and we rang the police from her phone. (FS11)

The narratives provided many examples of the way the women made every effort to give their children stable home-lives, maintain routines and ensure the children did not miss out on school, playdates with friends, contact with extended family and social activities.

I've always kind of protected them from it. I know when there's a trigger. I know when to walk away or to try and get away so that anything doesn't happen. (FS1)

In some cases, women coordinated their own safety plans often working alongside local agencies to keep them informed as and when required.

[Social workers] know the security measures I've put in and they know the schools are aware that...(FS1)

Women's resilience

For many women who had separated, although the abuse continued to influence their perceptions of themselves as mothers, their relationships with their children were a source of considerable strength.

I was so low, and just years of it takes its toll. I was gobsmacked when I spoke to my daughter and I said, look, obviously, we're splitting up and stuff like that, and she just looked at me with this panic in her eye and said, 'I want to stay with you'. Wherever you go, that's where I want to go. It was just perfectly natural, but I remember being gobsmacked because I honestly thought the kids would go, 'Oh, we're with dad, you're shit'. The amount of strength that I took from my daughter at that time. Both of them were just absolutely brilliant, and I just didn't see that they saw. I just didn't get it. (FS4)

If I didn't have them and have to keep strong for them, I would be an absolute wreck. So I just like to keep busy and do things with them. I'll go and make their beds and make their snack ready for when they come back from school. That always makes me happy. I just like seeing their little faces when they come home and they've got a really nice snack waiting for them. (FS11)

It is often believed, mistakenly, that women and children's safety and wellbeing will always be assured when the couple separate. Evidence from the narratives confirm that this is not the case. The narratives show that the abuse did not stop but rather changed in its form and the women and children faced different risks and challenges as a result. Leaving an abusive relationship is not an event but a process and women had to identify and negotiate a broader ecology of risk prior to and in the process of separation. The women provided many examples of the risks they faced, the weight of responsibility they carried, their resilience in coping with ongoing abuse and where they found the strength and support to carry on.

He's used the police on a numerous occasions for a variety of horrendous scenarios, accusations of a horrendous nature, and I have to deal with all of that alongside a civil court case running, alongside holding down a job, alongside dealing with every other professional that's involved. It's been horrendous. There was a period of two and a half to three years where I was just doing everything, maybe two years, doing it all on my own. (FS2)

The only reason that I'm in this situation where I'm still able to function, if you like, is because of the support that I've had from Women's Aid and the support that I've had

from my own family. But I feel bad about it, because I feel as though they've had to live what I've had to live. (FS₂)

Just the immense pressures that women face of trying to hold the family together, and I knew as time was going on, you keep justifying, you keep looking to yourself, you keep – or I did, what can I do? (FS4)

Women's Aid held me together, otherwise I don't know what I would've done. Honestly, I don't know what I would've done without them. So, they helped me manage my fear, anxiety, all my self-doubt. I couldn't have got through it without them. (FS4)

It is evident from the narratives, that women would often reach out to others to support their children before they would do so on their own account.

Supporting their children

The women recognised the potential impact of domestic abuse on their children and more often put their children's needs before their own. They described instances of how they supported their children themselves and created supportive networks around them which could include extended family, friends and local services, often with very positive results. Women's Aid children's services and local schools were particular sources of support for children which were mentioned very positively in the women's narratives.

[Child] basically has support from myself and my parents. But we've got him out the other end. He's in a really good place just now. He's going to go back to school next week. (FS1)

The school have been great with him. They put him into Nurture. He has expressed to them that he's terrified of his dad, but again that was just school, that was nothing else. (FS10)

My youngest is speaking to somebody at school. I've got that in place for her because I'm, yeah, keeping an eye on her. (FS₃)

The wee one, she engaged with a [Women's Aid] worker as well, which was really helpful for me, because it felt that yes, this is about me, but it's about her as well. (FS₂)

However, there were examples of professional responses in health, court and social work settings where the impact of their father's domestic abuse was not taken into account in a holistic way in assessing, treating or protecting children. In some cases, the assessment of the situation and the decisions being made by different agencies were not reflective of the abusive context of the child's situation, were not based on a shared understanding of domestic abuse and seemed to prioritise the father's views and entitlement to contact in spite of his abuse. These contradictory approaches provide evidence of the 'three planets' model of the different and often opposing agency practices and responses to child protection in the context of domestic abuse: statutory child protection processes; family courts focussing on equitable contact between child and both parents; domestic abuse-informed service taking a gendered analysis of male violence, risk and safety. (Hester, 2011)

I had a social worker who gave a full report to state that he should not be having contact with his child unless it's supervised. The [family] court overlooked it and gave him the contact and extended it. I've tried to be so fair about it all. Looking back I feel as though my rights as a mum, her rights as a child to be protected, I feel as though all of it was totally ignored over his parental rights. (FS₂)

[Social workers] are really just dealing with [child] and his issues, but they're not really dealing with the domestic abuse. (FS1)

No, [child]'s getting no support. I tried to get her support at one point - and it took a long time for the [psychologist] appointment to come through and her dad didn't let her go. He doesn't let her do interviews with folk, a lawyer had to get [child's] opinion, but basically that was in her dad's environment where she's scared. (FS9)

Managing their children's relationships with their abusive partner proved challenging. In the main, women were attempting to keep their children safe, minimise the impact of their fathers' abuse, while striving to support the development of regular contact and good relationships between the children and their fathers.

Talking about Dad

Women's ability to separate their own feelings for their ex-partner in order to support their children's ongoing relationship with their father post-separation was evident from the narratives. The women's ability to prioritise their children in this way, and their sense of fairness despite the risks and their own frustrations, was common to all of the women with children who participated and evidenced remarkable strength.

I don't ever speak badly of him or say anything bad or anything at all like that. I'm really against parents that do that actually. (FS1)

I'm trying to be fair because at the end of the day, it's me he's got the problem with. I get frustrated because my children still make him out to be this really nice person or ask 'when can we see him?'. Sometimes I just feel like I'm doing all this work and he's doing nothing and yet he's still – it's hard to say. (FS10)

One woman described how the support she and her children received from Argyll and Bute Women's Aid helped her with this. They gave her tools and strategies to help her talk to her children in ways which helped them articulate their often conflicted feelings about their dads in an age appropriate and safe way. Her experiences illustrate the value of this type of support.

[Women's Aid] send me anything that I feel that the children need. They mentioned a colour monster to help them talk about their feelings and they coach me on how to speak to the children about their father.

So when they ask 'why isn't daddy here?', how I can tell them the truth without making their dad seem a monster? Obviously I have to speak to them about their father. He can't just disappear. But I also don't want to lie to them and say that he's this fantastic guy. So I find it really helpful to know what to say to them and then how to approach the subject. It's something that you wouldn't really think of. You would try and get a child to speak about what they want and what they feel and sometimes children can't, especially if they're nervous or frightened. They don't always have the words there. (FS11)

Managing post-separation contact with abusive fathers

Despite the men's abuse, there were examples of men who continued their abuse of the women post-separation by over-asserting their parental rights, by involving and often manipulating the police, legal systems and statutory child protection processes and services. Women gave powerful examples of post-separation harassment.

[He tells me] that he's going to court and he's going to take the kids off me and he's going to do this and he's going to do that. He'll phone the school and if I've not passed on a bit of information – it could be nothing. It could literally be nothing - if I've not passed that onto him, he will phone the school and he will kick up hell. Or he'll just not bother with the kids. It's like one extreme to the other. I feel if I don't [let them see their father], then my kids are going to be the ones to suffer because he will cut them off and they're the ones that suffer. I would rather take the suffering than them. (FS₂)

He wouldn't think twice about cutting them off though. If I don't do as he says, he will cut the kids off. He will punish them. That's why I try to avoid that, but the kids are getting older now so they're seeing things for themselves, his behaviour for themselves. I don't say anything, I don't encourage anything. I just let them get on with it. (FS1)

He didn't make any effort to see the children himself. I used to invite him for tea every Sunday just so that he would see the kids. He never took them out or had them round to his flat or anything like that. I wanted them to have the contact if you see what I mean. (FS6)

[Daughter] didn't want to do it, I was bribing her, actually bribing her, just go on and talk to your dad and then I'll give you a bar of chocolate, it was disgusting, honestly. Absolutely horrendous. (FS2)

The good links and relationships with A&BWA and the multi-agency working they carry out described by the women was confirmed by a local worker, who was able to offer face-to-face as well as online support to children where access or distance were issues.

We will go into school and support them in school obviously to build up to - if they're going to be giving evidence. [Our children's services] are more face to face than the adult services. If they need to go on a visit or if they need to familiarise them. It was getting done through photographs. It was getting done all kinds of ways tech-wise. Yeah, there's all different ways...using the initiatives to do different ways of supporting children to go through that process. (FW5)

Women's support for their children included preparing them in advance for engagement with agencies, navigating and coordinating their own inter-agency safety and protection plans as the following examples demonstrate.

When she was younger it was hell on earth, but she's actually a very strong wee girl and she's very astute, she's very aware – the sheriff asked to speak to her, so we went into the court, she went into court to speak direct to the sheriff, because we've had reports done. Every single thing that you can imagine has been done. (FS₂)

I've made sure the schools are aware. If I know [father] is in a frame of mind that's worrying, then I phone the schools and he is not allowed to go. He's not allowed to pick them up. If he appears at the schools, then they have to phone the police straight away. I've put all of that in place. I don't think he would harm them but I think he would maybe take them away for a bit. Take them away for the day and treat them but to punish me. To have me thinking, 'what the hell, what has he done with my kids?'. (FS1)

Women also had to create and communicate their own safety assessments in the face of potential service-generated risks. In one case by refusing to attend the same child protection planning meeting as her abusive ex-partner as required by the agencies concerned. In the absence of an alternative arrangement being made by the agencies, her child was denied the support her mother thought would benefit her.

[Professional] came back on the phone, and I thought, initially at this point I must be losing my mind, maybe I'm being unreasonable or maybe – she came back on the phone and said to me, 'Just to let you know, if we go ahead with the children's planning meeting, we have to invite [father]'. This man, he's done all these things and I have to then go and sit in the same room and talk about [child], when all the

problems are all related to him. I said, 'well you obviously understand that that would really not be an appropriate thing to do. In those circumstances then, there's no way to move forward'. So that again, the only person that's going to lose out here is [child], because then she's not going to get access to this support. (FS₂)

None of the social workers advised me to [contact Women's Aid]. I went out of my way and looked at help and I went to Women's Aid. Basically until she was five, I visited Women's Aid every week and [worker] came with me to [Children's] Panels, she sat by my side, she helped fight my corner. (FS9)

2.9 Community barriers to disclosing abuse and seeking help

Even in the twenty-first century, long standing patriarchal traditions about the roles for men and women in intimate relationships and the privacy of what goes on in those relationships remain common in Scotland. The social norms and pressure still exist that women have 'made their bed', should stay in the relationship for the sake of the children and keep the family together.

For many women, making their partners' abuse public by disclosing to family, friends or public agencies is often out of the question, and remaining silent seems the only (and safest) option. Living with the fear and reality of violence and the unknown consequences of public disclosure creates a tight physical and psychological web around women. This is held firmly in place by the debilitating physical and psychological impact of the abuse itself. In the words of Evan Stark, 'the abuser plants in the mind of his victim the price of her resistance' (Stark 2017).

As the men described in the narratives increasingly isolated the women physically and emotionally from their families, from social networks and community resources, their control tightened. The situation was further aggravated by contextual factors within the often tight-knit towns, villages, island and rural communities of Argyll and Bute. These created barriers to disclosing abuse and seeking external help and related to, firstly, proximity and familiarity; secondly, local culture and attitudes to relationships, to family privacy and, thirdly, to isolation.

Proximity and familiarity

As noted previously, A&B covers a large geographical area, with its population spread across large towns like Dunoon, Helensburgh, Oban and Campbeltown, smaller towns, villages, islands, and more remote island and mainland areas. The women and professionals who participated, live in areas which represent a cross-section of all of these types of communities. In all cases they painted a picture of tight-knit communities bound by long-standing family bonds, marriages and friendships, strengthened by work, sport, leisure, social and community activities.

What, that people know people? Oh yeah, absolutely, especially in these small places. They know them, they went to school with them. It's just small island living yeah. (FM₃)

I know most of the people in the village as well. (FS5)

I love this area. I cannot walk down the street without people stopping me and saying hello. Everybody knows your business here. (FS6)

Family loyalties, community loyalties complicate things. Having said that, the islands are probably some of the safest places to live, there's no doubt about that, until it goes wrong. (MM1)

The familiarity people enjoy in local communities can be a source of strength and protection but it can also create a climate of risk and vulnerability for women and children living with domestic abuse. There are a number of community factors specific to close knit communities which can work to keep women in abusive relationships and inhibit their ability to seek support.

Local culture and attitudes to relationships and family privacy.

A number of factors were identified in the narratives: traditional patriarchal attitudes to marriage, domestic abuse, relationships, class, male privilege and authority.

Its attitudes are still very sort of, you know, these young women that get themselves into trouble, you know. It's a bit like, sometimes I hear people, you know, because if you are speaking to people in the supermarket or whatever, at some point it comes round to what you do for a living. Shock, horror, there's a place like that [refuge] in

Dunoon? 'Oh, there's surely no need for that here. Really, that kind of thing goes on here'? One woman said to me, 'I thought that sort of thing happened in places like Port Glasgow' as if somehow by you being over this side of the Clyde... and it's not just elderly people that are like that. It's people around here younger than me even. (FM₂)

The traditional view that it is important to preserve the family's public image of, 'the dream team'. (FS4) as one woman described it, and family privacy were still prevalent.

The further out you go from the bigger towns, I think the more rural you get, the more prevalent that actually becomes because it's a sort of well, that's just - no, this is just how it is and you don't get involved in other people's business. (M₂)

In some communities there's work to be done in getting people in more traditional communities to recognise and accept that domestic abuse shouldn't be hidden, people should speak up. It's a community responsibility to support victims and to be saying to perpetrators, 'that's not on'. The easy thing is to pretend it's not happening. (FM6)

There's a lot of people who've been sexually abused, maybe by the boyfriend, maybe by the husband, maybe in the small community, where it's a bit - not frowned on, but you don't want to upset the whole place and people to know. So I think that's where it's a hard starting point especially in rural villages. (FS₅)

In this context, research findings from a rural study in England found two further factors which were often exploited by abusive men and which, the findings suggest, confirm findings of an earlier study in Argyll and Bute (English Rural Network, 2019; Sheridan, 2019). Firstly, they exploited their position and popular image in the community:

He's one of these guys who will paint himself out to be amazing and he isn't. He was the nicest guy you could ever meet - one of these guys who will do things outside for people to see. But inside is a different story. If that makes sense. (S8)

This strengthened the men's ability to get people on their side and further alienate their partner from her community.

He had been to all my friends, he'd been to my dad, he'd been to my colleagues. He'd literally been round everybody trying to gather some sympathy. (FS₃)

People are like, poor guy, because he's a good talker. Poor guy, what a bitch. Everyone who doesn't know me believes what he says of course. (FS₅)

It's dead embarrassing because I'm a very private person, he knows that, and he gets gratification from blowing my whole life open to everybody here in a small town. That's what he wants, because he likes it, he sees that causes me extreme distress. (FS6)

When you're sitting trying to explain to somebody, he did this and he did that, it literally, it does, it makes you sound crazy, and I was very conscious of not wanting to sound crazy because that was then backing up what he was telling everybody. Do you know what I mean? (FS₃)

Isolation

These tactics help to socially isolate the women by minimising or denying their experiences and by exploiting community networks which limited and monitored their movements.

I've lost a lot of friends. Living in a small town, that's what happens. People don't want involved and they'd invite him to things because it saves them getting any grief. So I get isolated from everybody [and everything]. (FS1)

If I was to go out he will know within minutes. Somebody would have told him. Then I get ignored and then my kids get ignored. It's just a nightmare. It's a total nightmare. (FS1)

We were getting on the ferry and one of his friends was at the ferry terminal and saw me and got straight on his phone and was messaging somebody. So I'm assuming it was my ex. So now he knows 100 per cent where we are. (FS11)

Secondly, men were able to act with impunity among people in the community who believed their version of the situation and reinforced traditional patriarchal values which privileged male dominance. Factors in the communities referred to here can be described

as creating 'conducive contexts' where domestic abuse goes on largely unchallenged (Kelly 2016).

They're very much community issues in terms of you could be in a situation where you're a small community, possibly a lot of that community either doesn't want to know or supports the perpetrator. If you report then you may lose that community. Your children may lose friends and school and you might have to leave the island to find a safe place. (MM1)

Women described having to isolate themselves at home in towns and villages to protect themselves from the risk of seeing their ex-partner.

At one point I was getting to a stage of not feeling that I wanted to go for a walk in case he was around, getting that kind of trauma-type response. It was sickening. (FS₂)

I live in one little part of the village, and my ex-boyfriend lives just up the road. (FS₅)

I don't go out for the same reason because it's a small town and I don't want to bump into. When I do see him, I get a smirk. So, I don't want to see him. (FS8)

In this context, the Duluth Power and Control Wheel provides a useful template for understanding the way abusive men exerted power and control in their relationships: all of the tactics in the Wheel were described in the narratives (Figure 2.). These were further deployed in the way men adapted their tactics and methodology in their wider local social and public contexts to the further detriment and isolation of their partners These were evident in descriptions of personal experiences, in community responses to domestic abuse and in workplace and professional practices (Figure 1). There was evidence too that the combination of close social or family ties and traditional attitudes also affected police responses to domestic abuse. One woman consequently lost trust in the police which increased her risk as she would be unlikely to report in future if she was in danger.

People just don't want to get involved. They really don't. It's hard, I suppose, for them. One of the policeman knew [partner]. When you've got a police officer standing there saying 'he's a good guy' or 'this isn't real'. They make you really question yourself. I think that's a problem with living in a small town, where everybody knows you. So the

police don't really want to get involved with that. I've told them I don't trust them. (FS1)

The familiarity within a close-knit community could thus create significant barriers for women seeking support or safety. By sharing, disclosing or reporting their situation, or seeking support from a service with workers who themselves live in the community, women fear making themselves visible, or risk an unintentional confidentiality breach which could make their situation public.

I was worried that because everybody knows everybody, that they would say something that I'd been there or, I don't know, that my kids would find out – I don't know. It was just – it was a big step. Huge step. Best thing I'd done [approaching Women's Aid]. Absolutely the best thing I'd done. (FS1)

They're small communities, workers know everybody. They know all the heritage and background and everything of certain families and stuff like that. (FM1)

As you get more rural, people know each other, you can't go into offices, without being seen. So, people know why you're there. It's really hard for our clients to overcome going into various services, because someone will see them. (FM1)

Women were also concerned about being stigmatised by making their situation public.

I think if you're maybe in a bigger place where not everybody knows you, if you were phoning the police I think you'd be less judged. I do. I think you're probably more judged in a smaller community. (FS1)

Is that dilemma not indicative of the whole problem in remote island communities? No matter how you wrap this up, they're identifiable. If I was abusing you and you had fled, and even if you'd managed to hide yourself on the island, I'd know exactly where to go to find out where you are. (MM1)

Many communities in Argyll and Bute are quite isolated and remote, and this was well summed up by one participant,

It's like the land that time forgot sometimes. There's trees and hills and water yeah but where better to hide that kind of thing because a lot of people live in pretty rural remote places and there's lots of wee farm houses dotted about the place. (FM2)

Another participant noted how normal features of remote area or island life can become risk factors when there is domestic abuse,

[Travel is] easily disrupted. Even if you've no plan to go off island and there's disruption, if it's a storm you won't cross your threshold. Particularly if you're in the more rural areas or the islands. You won't see another soul, you'll only see your family if you're staying with them and if that happens to be an abuser... So, all the factors people were panicking about in lockdown are normal here. I don't mean the violence part, I mean the factors which could worsen it if there was violence. If you look at Colonsay, if you look at the length of Jura, there are families living miles, and miles, and miles from anybody. (MM1)

Two women described how the isolation they felt when they first moved to the area was exacerbated by their partners' control over their finances, their freedom to travel and to see family and friends.

When we first moved here until he left, I had no friends because any friend I had, he didn't like. So I wasn't allowed to mix with them. (FS11)

I didn't see any of my family because with this person they just wanted and needed to be with you all the time and why would you go out and see anybody else, whether it's your pal or your sister, or whoever. But it was slow and subtle. Then there were other things about them, well, we can't go and do that because that's expensive and everything is expensive when you're far away, it would mean a trip and staying overnight or all these sorts of things. Then it became violent. (FS7)

Escaping a dangerous partner, calling for help in an emergency has added difficulties in more rural and island areas

The drivers are always known, and there are only two ways off the island. [On] islands you're completely and utterly reliant on public transport, no matter whether you've got a car or anything, you're absolutely reliant on public transport, the ferries and the plane. (MM1)

I wouldn't know what to do, because police - I do live in a remote village, police wouldn't get here in a hurry. I don't know what I'd do. I suppose I'd shout and hope somebody would come and help. (FS₅)

I think the trouble here where I live here is, it is a long way from [nearest town]. You can't drive quickly at night, or you'd hit about five deer and half a dozen rabbits on your way in. (FS6)

From a purely police point of view, if you rang the police saying you're being murdered, you'd be dead by the time they got here. (FS6)

Accessing support and safety for women in abusive relationships can also be problematic in rural areas, as one worker described,

She shouldn't have to move. He's the one that's perpetrating the abuse. It's trying to manage that. Sometimes it's quite tricky because you then have somebody who feels isolated within their local community and who isn't going out. Because we're telephone based, all of us, all our supports, they're over the phone. (FW₅)

Impact of COVID lockdown restrictions on women

The impact of COVID restrictions on women's lives had positive and negative aspects linked to enforced isolation. The narratives provide insights into women's lives during that challenging period. For women still in relationships with their abusers, the enforced isolation at home brought little change to their existing isolation, 'I was in lockdown before it was a thing'. (FS₃)

Some men incorporated resistance to lockdown restrictions in their control tactics, 'He broke lockdown to come and stay with me which horrified my children and me but by the time he was here I was stuck with him' (FS6). Another man with negative views about the pandemic insisted on, and was granted, continued contact with his daughter, despite the risks.

I was still forced to send the wee one to [contact], into a situation of a man who was categorically open about the fact that he thought Coronavirus was a pile of nonsense. Then I had to allow [child] to come back into the family home, with a high risk [sibling]. (FS₂)

Some couples, including those who had been in the process of separating, were confined together. With either or both partners furloughed or working from home, the abuse cycle intensified.

It was really intense because he was working from home, I was working from home, and we'd separated. It was just a nightmare the build-up, and the accusations, and the pressures. (FS₄)

Women developed coping strategies. The nature of one women's job meant she could still go out to work, 'I could actually get out to the office a couple of days a week'. (FS₄) Another woman, whose partner was drinking heavily reverted to the role of a traditional 'housewife' to manage the situation.

I made things work if that makes any sense. I made his dinner. I cleaned the house. Things like that. I did the laundry. I did the ironing. So it kept things sweet. It was [mostly] his remarks, his smart aleck. Some days it was calm, some days it wasn't. (FS8)

However, lockdown restrictions had more positive aspects for some. There were examples of separated women feeling safe in the knowledge that their ex-partner was unable to travel to continue harassing them and their children. Some women's long-standing feelings of isolation eased because social isolation was now formally enforced on everyone.

Lockdown created a false thing where you didn't meet people, didn't it? (FS6)

Actually COVID, I would have said, helped me because I can't go out. I can't go, I can't socialise. COVID helped me because nobody was doing those things so I didn't have that feeling of well I know everybody is out tonight or doing something and I'm sitting in the house with three kids on my own. (FS1)

Women also appreciated access from home to support services and processes over the telephone and via online resources.

I thought COVID's been really good for that. Because it allows access – you're suddenly like, I can just get a counsellor from London if I want. It really does not matter. All of these resources are suddenly available to potentially anybody. (FS4)

I would make sure I had a really nice dinner while I was watching the Zoom [support] call, because I'm thinking again, you have to reward yourself when you have a negative [experience]. (FS₅)

Although home-based telephone support had its advantages, the benefits of personal contact in a support context were lost and potentially problematic for one woman.

I spoke to [support worker] once a week. She made an appointment too - you know, I'll speak to you once a week, if you need me before that this is my number, because my head was all over the place. I wasn't in a good place at all. I was working from home. I didn't want to leave the house anyway. I really wasn't [going out], and I think speaking about it, and bringing up everything and realising everything really made me worse I think as well. (FS₃)

Finally, for one woman, the lifting of restrictions brought new challenges,

I'm finding it hard again because things are starting to open up and things are happening. (FS1)

2.10 Women's understanding of their experiences of domestic abuse

An important theme to emerge from the women's narratives was the way their perception of what was going in their relationships changed over time. As has been shown, during the early stages of their new relationships, their partners were, in the main, romantic, loving and attentive. The early conflation by the men of romantic gestures of intimacy and devotion with dominance and control is evident in these narratives and have been shown to represent the building blocks of entrapment common in abusive relationships (Stark 2007; Donaldson 2020). This involves the woman gradually seeing the world through her partner's eyes and in time subsequently prioritising his views, needs and decisions. This gradual switch to seeing the world through his eyes takes place almost with the women either unaware, ignoring the signs or denying that anything untoward was going on.

I did not know. I was completely oblivious as to what was happening, completely oblivious. (FS1)

I was still trying not to say he's abusive... to be fair I still didn't see that he was abusive...(FS11)

Women then go on to normalise and rationalise their situation until something happens to bring about insight and recognition of what is really going on.

It just makes your personality change. It makes that spark in your life change because you're so preoccupied thinking what they're thinking, and what are they going to say, almost like a pet that's trying to please. (FS₅)

In time as the relationship became established and/or children came along, the women began to normalise the men's behaviour. 'I just ended up kind of stuck with him' (FS9), or found compensation in other areas of life,

I feel, we were very cushioned by the fact that we had money, we were living in a nice area, we had options available to us that wouldn't be available to somebody else. Do you know what I mean? (FS4)

Women looked for explanations and ways to rationalise the men's behaviour. They did this in three main ways. Firstly, by blaming themselves,

I always took the blame, like I must have done something. I never really realised. (FS1)

I think, particularly, when women are so frequently told that this is their fault, and they feel it's their fault. I spent years in and out of that, and it was easier to take the blame, because otherwise, what was I going to do? (FS4)

Secondly, the women explained the situation by blaming the abuse on the men's use of alcohol, drugs, or their mental health problems and that if those issues were addressed, all would be well,

At the time I was convinced that I couldn't do it without him. I always stupidly put it down to, oh he's taking drugs and then it was he's drinking and then it was his mental health was the problem and that was why he was doing it all. (FS11)

Thirdly, some women felt men's suicidal ideation were the cause as these examples demonstrate,

His biggest one was suicide threat. So it took a long time for me to kind of realise that he was using it as a control. (FS11)

Threatening suicide directly to their children was the trigger for one woman to decide to end the relationship,

I remember he got all the kids down into the living room, put a tie around his neck and told the kids that I was telling him to kill himself. He phoned the kids and told them that I was making him set himself on fire outside the house. I think at that time I'd realised I can't win anymore. He had lost control of me so with doing that, he escalated his behaviour very fast and very frightening. It was really scary. (FS1)

Finally, women's commitment to their relationships and their love for their partner invariably meant that they put up with the abuse hoping that the men would change.

It ended up where I slept with him and in my mind at the time I thought, right, I've slept with this guy, I'm going to try and make the relationship work because I wanted to be with one person. (FS9)

I don't know. I was - it was always that, oh, it would work, he would change, sort of thing. I believed it and I helped him. (FS10)

Their period of ignoring or rationalising the abuse corresponds to the *pre-contemplation* stage of change in the 'stages of change' model developed by Prochaska and DiClementi. This model emerged from their work examining the impact of therapeutic interventions on individuals seeking to bring about change in their lives or their behaviour. Originally developed in the context of research on what can encourage people to stop smoking, the model has since been applied to other areas of personal behaviour or situations which people might be motivated to change. The model identifies five key stages of change: precontemplation, contemplation, determination, action and maintenance (Prochaska and DiClementi 1982). These processes are not necessarily linear and people might proceed through stages only to revert to old patterns of behaviour or earlier stages until they feel motivated to begin again or to cease the change process altogether. Escalating violence and abuse towards themselves and their children and threats of suicide led women to recognise the reality of their situation, begin to see the patterns in the abuse and to seek explanations. Their priority at this stage therefore was for domestic abuse-specific information and

knowledge about the issue from reputable sources, experts and specialist service providers. At this stage, many of the women began to contemplate taking action to solve and understand the problem, and for some, to consider solutions, including separation.

2.11 Seeking information and support

For some of the women in this group, their information needs were firstly, to find out what defined sexual and physical violence and abuse in relationships and to do so online using key word searches to find relevant websites, and national helplines. Secondly, once they were able to define their own situation they were then looking for information on support services which could offer a combination of emotion and problem-focussed coping support. For women who did not consider themselves in immediate need of emergency services or help, online resources proved to be the most popular by providing safe and anonymous online spaces for women to find useful information about domestic abuse, helped them realise that their experiences were not unique and allowed them to name what had happened.

I was still trying to put together what was going on in my head I think. Yeah, I think I was still trying to figure that bit out and I think, yeah – yeah, I Googled it and then I was kind of probably reading different things and thinking, right, that sounds like me. I think that's how it came about and then obviously I started Googling what was available in Argyll and Bute. (FS₃)

One woman located an online domestic abuse forum where women shared their stories and explained concepts like coercive control and gas-lighting which brought further insight into her experiences.

I found that there was Scottish Women's Aid forum, I joined that and went on, and just was reading other people's posts and relating to lots of things. (FS₃)

Other women looked for books on the subject and found texts about violent men including one woman who was recommended Lundy Bancroft's book about angry and controlling men (Bancroft 2004) and another who found researching narcissism particularly useful for comparison with their own situation. For individual support for themselves and their children the main services this group of women accessed were counselling and therapeutic support, Women's Aid and the family contact centre.

At the point where women were recognising that their situation was abusive, becoming untenable or unsafe, they described the ways which best suited them to contact support services. When looking specifically for domestic or sexual abuse support, although daunting at first, some wanted to be able to telephone and speak to someone as quickly as possible.

I just gave [Women's Aid] a ring, and there's that kind of – it's not paranoia... I kind of overcame it much quicker than I thought I could. (FS₄)

Your fear is if you're in the domestic or the sexual side of things, you're worried about being found out. It's difficult to expect a call and how do you approach it, isn't it? (FS₅)

Some women described having to pluck up the courage to phone for the first time and without a response would be unlikely to call again, sometimes because they were still living with the abuser and it was unsafe to do so.

Other women preferred being able to email Women's Aid for example as it felt safe and gave them time to carefully think and write about their situation. For the women who went on to use A&BWA on an ongoing basis, having one key worker meant a great deal as it helped them develop a relationship with the worker and they valued knowing they could contact them via text if they needed additional support outwith arranged times.

Women appreciated services which helped them to both make sense of the domestic abuse itself, by giving them a conceptual framework for the behaviours, and also supporting them as they faced a range of emotional and practical issues for themselves and their children preand post-separation.

Issues of proximity and anonymity discussed above were also very important to the women and some preferred contacting Women's Aid, counselling and other services at this early stage outwith their own area, with some using services in West Dunbartonshire, Renfrewshire, Inverclyde and Glasgow as well as national helplines.

It is notable however that some women's views of Women's Aid services and the women who use them are quite out of date. There is still the perception that Women's Aid is largely aimed at women who are on the point of escaping extremely physically violent relationships and who require immediate rehousing in a refuge. This perception is rooted in older definitions and understandings of women as 'battered wives' which persist in women's and society's conceptualisation of domestic abuse and of Women's Aid. Women's recognition of the

coercive and controlling nature of the men's behaviour backed up by the threat of and not always the use of violence was gradual as they and others normalised the behaviours. This lack of awareness of what constitutes domestic abuse and coercive control in a relationship delays recognition and insight, keeps women at risk and prevents them seeking support and safety from others.

This outdated understanding of what domestic abuse is, stopped women from believing they needed support and, consequently, remained unaware of the full range of services that were available to them.

My biggest issue with phoning Women's Aid is that I wasn't being chained to the balcony like a dog. Do you know what I mean? It's like I just thought [it was for] extreme cases – don't be phoning them, it's fine, you can manage this by yourself. (FS₄)

This outdated view of WA services remains a barrier to women who don't consider themselves 'vulnerable' enough to use their services or who are still living with an abusive partner.

People think that Women's Aid is for women who are really, really vulnerable and it's a woman's own decision about how vulnerable she thinks she is. (FS9)

There was also evidence, however, that despite the challenges of community cultures described above, familiarity and proximity can be an advantage in promoting messages about local VAW services. There were a number of examples of women's friends and family telling them about WA and encouraging them to contact them and of the improved visibility of information about local services.

Some narrators indicated that self-referrals to Argyll and Bute's Rape Crisis and Women's Aid services were increasing at the time of their interviews (spring/summer 2022) and that their local visibility has improved using a combination of poster placement in local centres and promotion on social media,

We don't advertise. We have posters and things dotted about in GP surgeries, places that people are likely to go. I think getting the message out that we're here, that we're not, for us anyway, we're not just about rape in a crisis. So, this is visible getting places like GP surgeries, anywhere women go, you know, playgroups, nurseries, the

NHS generally, schools, anywhere people go so that they see it and I think by seeing it everywhere...(FM2)

I really do think that Women's Aid now have upped their game so I follow them. They're on Facebook a lot. They're on social media a lot so they're actually out there a lot more now, possibly because of COVID. (FS1)

Some final thoughts on surviving domestic abuse:

I look out over there and there's nobody about and I just remind myself to be very thankful for everything that I do have in my life. That's what I do, and it gets you through. I've accepted it, because I can't do nothing about it, that is just my life now. I just need to live it the best I possibly can, in the happiest way that I can and I do. I've got a lot of joy in my life. I've got my family and my children. (FS₂)

2.12 Women's recommendations

All participants were asked for their recommendations for improving agency responses to domestic abuse in A&B. The women's recommendations closely reflect their personal experiences of involvement with local agencies and services and includes suggestions which arise from both positive and negative experiences. All of the women were motivated to participate in the research by their wishes to tell their stories, to help improve local responses and greatly appreciated that A&B VAWP were listening to them and willing to receive their suggestions.

Thank you for trying to change things for other women. (FS8)

The recommendations are summarised under nine headings. A rationale is provided for each recommendation using examples from the women's narratives.

16. To strengthen the social work, police and court responses to violent and abusive men in the child protection, criminal and family court systems; improve risk assessment, safety planning in order to achieve safer outcomes for women and children.

Women felt overall that agency responses to violent and abusive men were ineffective in preventing the men's violence and abuse, reducing repeated incidents and patterns, or removing the risks they and their children faced.

These guys are still doing the same shit, and it's explained in exactly the same way, and no one has come up with anything new, any magic wand that's going to change them into being... (FS₄)

As far as I'm aware they weren't really addressing his behaviour with him – he told me. They monitored me for three months. I think there was only two weeks that he was monitored. I felt like I had been punished for his behaviour yet again. But everyone keeps talking about his rights and they've forgotten about my rights to feel safe. (FS11)

I think these men need to be exposed; they just get brushed under the carpet. I mean look at [ex-partner] - he's an abusive man, he's still abusing me today because he's keeping my child from me. So, it's ongoing, that's years and years. The way they write the reports and present them to the court I think needs looked at majorly. Because there's so many families and they're not looking into the abuse properly from the men. They're giving custody - I just can't get over it that they gave custody to a violent and abusive man like [my ex partner]. (FS9)

17. Ensure A&B has consistent DA-I and trauma-informed multi-agency responses by trained practitioners who believe women, and whose understanding of the nature, dynamics and impact of domestic abuse fully informs their responses to victims-survivors and perpetrators.

It was complete and utter comfort, being understood, being listened to, that's all I wanted. I wanted to be believed because I've been trying to tell various people, 'This is horrendous'. (FS9)

Because the police really put me off. They really, really did [because of their] lack of support and empathy and the lack of understanding. If anybody's needing support, they need to have specialised police officers. I don't go to [local station] anymore. I would not use them. If I do have a problem, I will go to Dumbarton specialist unit. (FS1)

a. That all agencies involved in multi-agency working on domestic abuse recognise the value of ensuring their agencies, responses and practitioners are DA-I.

One woman recognised how disempowering multi-agency systems could be for herself and her advocate.

(Woman's Aid advocates] are putting their professional findings forward. These are professional people, when they are doing that and they are taking their time and they are working intensely with women that are going through what they're going through, for that amount of effort and support to be put into a court setting to be disregarded the way they are, it's as if they don't even want them there, there's something far, far wrong.

It's like let's all invest in supporting women in the community that are going through all this and let's do that, that's what's being done and the services are actually fantastic. But what is the point in then putting that woman into a legal setting where her support mechanism over a period of time is disregarded, absolutely disregarded. What is the point? I don't know how they felt, I just think - because I put myself into their shoes and thought, if I was working with somebody the level that they had to work with me and they got that outcome as well as me, because it does impact on them too. I would be sitting feeling absolutely empty, if I was them. But at the same time the outcome that some women are getting is just - it's like saying, actually it's okay what you've been through. We're not actually going to listen to you or the professional that have been involved supporting you and we're going to carry on doing something that's going to continue to impact on you and your child. That's just disgusting. Honestly. (FS2)

b. The need for specialised training for all practitioners working with victimssurvivors and perpetrators in the nature, dynamics and impact of domestic abuse.

I would say train them up in domestic abuse. I didn't think they were very well trained. The two policeman that came to my house made me feel like it

was me that had done the things wrong and it wasn't me. I did everything right as a wife. I just got treated really, really cruelly, Like I said, proper policing, proper training for them. (FS8)

18. The need for area-informed responses where professionals recognise the impact of proximity and familiarity on women's experiences and on their decisions to report/disclose the abuse and on their ongoing engagement with services.

The police, especially when you're living in small towns and villages, where everybody knows everybody, the police really have to detach themselves from [the couple] and act as if they didn't know them or their backgrounds or anything and be a bit more objective. They have to realise that these things do happen and it doesn't make him innocent because he's your pal. (FS1)

19. To ensure that women have the additional option of accessing telephone or online services from outwith their local area due to concerns about proximity, familiarity and confidentiality.

I wouldn't want somebody in [my town] dealing with my case. That anonymity of services I think is really important for an area like Argyll & Bute. [Women] don't want to be identified because in small areas, it's kind of hard, it's more noticeable. Anonymity and that concern about professional boundaries is really important. (FS8)

I was kind of looking through other local area [services] and then thought, right, well I don't want to go to my own [Women's Aid], so I'm going to pick my next one. (FS₃)

I would just be really worried about going local – there's an anonymity about going to Glasgow for services. (FS4)

20. Increased accessibility, visibility and more varied messaging by local domestic abuse services.

Women were able to find information about local services online and through word of mouth when they felt they needed it. One issue which arose was that women were either ambivalent or in denial about the abusive nature of their relationship. Women were often not fully aware that services were available to them whilst they were still living with their

abuser, were not contemplating separation and nor were they in need of emergency accommodation. Further, women's outdated understanding of the nature of, for example, Women's Aid, services prevented them from seeking help thus prolonging and at times increasing the risks they faced.

a. Women's Aid and Rape Crisis and local VAW support services messaging to clearly reflect women's different levels of awareness about their situation and the stages of change they are at.

I didn't contact them until I'd decided 'I'm out'. I don't know if I would've sought support if I was deciding I'm staying in. When I was in the relationship and trying to work it, and all that kind of stuff, I don't think I would've – I wouldn't have called them, because I'm not leaving. So, and I still don't know. Do they offer support when you're staying? So, that message of, you don't need to be leaving, in order to [contact them]. I'm thinking, is there a message that could be sent out? 'Thinking of leaving?' (FS4)

b. Information on local services such as Women's Aid and Rape Crisis should be promoted in and through as many public sites, settings and media as regularly as possible via for example, poster displays, websites, local press and social media.

Women's Aid now have upped their game so I follow them. They're on Facebook a lot. They're on social media a lot so they're actually out there a lot more now, possibly because of COVID. (FS1)

Posters and website, publicly available stuff because I don't think that I would have done that [contacted Women's Aid] if it hadn't had been for [friend] suggesting that. (FS8)

21. Other support services, including counselling, therapeutic and other A&B council and local third sector professionals to be trained in domestic abuse; to become fully engaged in the local coordinated responses and to actively promote their services to victims-survivors.

I think if that message is going out to those [other] organisations, that they're recognising domestic abuse for what it is, and being able to spot it, and then tailor the service that they're putting in around that to take that into account, then I think, those are the services that are picking those women up, and Women's Aid can't be everything to everybody, can they? (FS4)

22. All police, social work and other services to have a leaflet containing information about local services which should be given to or made available to women when they present at or contact services for support where there is domestic abuse.

I think the police should carry some sort of leaflet with them. They're the first ones to respond, aren't they? The least they could do is have a file with the information of support on it, instead of just telling you verbally. When you're in that state of mind, you're not going to remember. But at least if they give you a leaflet and say, there's a leaflet, you can look through it when you've had time to calm down. (FS10)

23. Specialist support services such as, for example, Women's Aid to maximise access to support services via telephone, email, text and online means and to receive a call back as quickly as possible if it is safe to do so.

Women appreciated the ability to access support via telephone, SMS and email with no one recording problems with telephone access to services – even in the more rural or island areas. The anonymity of remote access, expanded during Covid restrictions, was particularly valued.

Well, I'm not computer literate. Phones are good. Phones are good. (FS1)

There's an anonymity to Women's Aid because it's a phone call. It wasn't like me – and plus, they've got such a great reputation of being secret. I knew, when it came to it, and I was like, bla, this is my story. (FS4)

24. All agencies to communicate regularly and effectively with women and their advocates to keep them informed about the progress of ongoing interventions, safety planning, the dates (including cancellations) and the outcomes of meetings.

Women wanted to be kept informed by services about the progress of their cases, what action was being taken if any, what support they were to receive and when, especially where children were involved.

Social work could be a little bit more upfront and making sure that everybody understands exactly what they're planning on doing. But also, I understand that they have to put these things through but when the children were [involved with SWCF] he wasn't even in the house. He only came back for the last two or three weeks. So they were [involved with SWCF] when he wasn't in the house. I felt like I was being punished even though they kept saying it was because of his behaviour. I know how it works but there's a meeting that you're supposed to have with agencies and with schools and things like that, anything that – so that it can picked up if [the abuse] is happening again or whatever. But that never happened. That meeting just did not happen at all. (FS11)

I think personally speaking Argyll and Bute social work needs an absolute shake up when it comes to child protection. I understand that there's a way of working, but I don't feel that they are working appropriately. I understand they are probably under a great amount of pressure and stress, but I don't feel their communication is good. I don't feel that their feedback is appropriate, and I don't feel that their response is as per the policies that are in place. (FS₂)

2.13 Conclusion

A key aim of this research was to hear directly from women living in Argyll and Bute about their experiences of domestic abuse, their views on services, on the visibility and accessibility of information about specialist services and their recommendations for service improvements. Part Two has given considerable space to an analysis of the women's experiences of domestic abuse, and its impact and consequences in the Argyll and Bute context. The women ranged in age from their late twenties to their early late 50s and some,

but not all, were mothers with children still at home; although all are now separated from their abusive partners, not all were safe from continued contact with their ex-partners or their continued harassment. This was an important factor in the way the findings have been presented and extreme care was taken to protect the privacy and anonymity of the women and their children while ensuring that their important testimony was included in the findings. Disclosing abuse in any context is a courageous act, doing so in a research context is no different. A study focussed on a large geographical area which nevertheless comprises many tight-knit communities in its towns, villages and islands is doubly so. The community context of Argyll and Bute emerged as an important factor in the women's experiences of men's violence and abuse, influenced how they made sense of it, reached out to others for support and finally separated.

The patterns of male violence and abuse the women experienced is common to women across Scotland, the UK and across the globe. Women experienced one or more of the following: physical, emotional, psychological, sexual and financial violence and abuse. It is also clear that the women experienced coercive control during their relationships (Stark 2007; Stark and Hester 2019). Individually, their experiences conform exactly to the definition of domestic abuse as a form of violence against women outlined in Equally Safe (Scottish Government 2016); to the legal definition of domestic abuse in the Domestic Abuse (Scotland) Act 2018; and to the specific tactics of gendered power and control illustrated in the Duluth Power and Control Wheel. (Figure 3)

Women's recognition of the reality of their situation was often delayed due to a lack of understanding about what defines domestic abuse and specifically coercive control. Many people, including women themselves, still consider domestic abuse to be about violence alone, that it is a private matter between couples, that women are to blame and that support is only there for women needing rehoused in an emergency. Internalising the blame, not recognising the non-violent aspects of abuse as coercive control places women and children at risk of abuse escalating in frequency and severity to highly dangerous levels. Community cultures of silence about abuse in intimate relationships and impunity for violent men compound the problem, keep women isolated and increase their risk.

As has been shown, the men's use of violence and coercive control in their relationships, when the couple were still together was sustained by male dominance, women's fear of their partner and of breaking up the family or the relationship, by isolation and containment and by a range of community contextual factors inhibiting disclosure and separation. These included the persistence of traditional patriarchal norms of family privacy and noninterference in private matters; the minimisation and denial of male abuse and women's internalisation of blame for it. These reinforced women's own explanations and rationalisations for their experiences, limited their understanding of their experiences, and prevented them from disclosing or seeking external support. This delayed their recognition of the reality of their situation and obscured the risks they faced. What is evident from the narratives is that men's abusive and violent behaviour had a three-fold purpose: to control the women, and in some cases their children; to hide it from others and to maintain an acceptable public image of themselves as men, as husbands/partners, fathers and respectable members of the local community. The narratives reveal a significant disconnect between the men's private and public behaviour when the women reached out to others, declared their intention to separate or did separate or when the issues in their relationship became public. The men then fully deployed specific tactics to manage public perceptions in the community, in public agencies, and in statutory and legal processes in their attempts to retain control over the women and to publicly demean and blame them. Their actions aimed to re-assert their own public image, viewpoint and dominance in the community, their legal rights as fathers and to shared resources such as animals, property, houses, land, vehicles and household items.

What is significant from the women's narratives then is that their ex-partners continued to exercise coercive control *after* they had separated, but did so in more public ways to continue asserting their control over the women and their children. The narratives show the many ways men continued to coerce and manipulate the women to retain contact with them often through their children. When these failed, the women experienced stalking and harassment, surveillance and monitoring of their movements. As men attempted to disrupt the women's plans to move house and resettle elsewhere, they prolonged, and at times manipulated, law enforcement, legal and statutory systems, processes and professionals in child custody and

contact disputes, child protection procedures, divorce and post-separation property proceedings.

These findings show that coercive control adapts to separation by changing in form, going public and by using public authorities, systems and services to assert traditional, patriarchal male property rights over their former partners and children. By engaging and manipulating police, legal, statutory agencies, services, systems and processes, abusive men effectively recruit the public sphere into their intimidation of women and create additional service-generated risks and pressures for them. Part Two has provided some insights into how women navigate these situations and the outcomes for themselves and their children. Part Three will provide more detail on professional and service responses to domestic abuse and their effectiveness in reducing risk and increasing women and children's safety.

Part 3

3.1 Introduction

Another aim of this research is to survey current domestic abuse service responses in A&B ahead of the implementation of the Safe and Together Model (S&TM). Part Three will identify areas of strengths and those requiring development as A&BVAWP moves forward with its plans. The data were analysed using a framework based on the key features of domestic abuse- informed (DA-I) systems and practices defined in the S&TM. Every care has been taken to protect the identities of participants or others involved in or providing critiques of current cases, practices and proceedings.

Our understanding of the causes, nature, dynamics and impact of domestic abuse have developed since the 1970s when the term 'battered wife', for example, was in common use. As a largely gendered issue affecting mainly women, legal, policy and professional responses to those affected and those responsible have also evolved. As observed in Part Two and elsewhere, traditional attitudes to male and female roles, to their responsibilities in the home, persist in society and in professional practice (see also Watson 2017). These continue to influence women's decisions about seeking support, engagement with external agencies, and separation, including where there are children involved.

There is now widespread acknowledgement of the potentially negative impact of living with domestic abuse on children (Holt et al 2008); that they are not 'witnesses' to abuse but are directly affected by their mothers' experiences (Callaghan et al 2018); and that approaches which focus on their mothers protective characteristics provide an effective means of recovery (Katz 2015; Sharp 2011). Section 5 of the Domestic abuse (Scotland) Act 2018, in addition to criminalising all forms of domestic abuse in Scotland for the first time, including coercive control, also provides for an 'aggravation in relation to a child'. Prior to this legislation, Scottish criminal proceedings in relation to domestic abuse focussed mainly on men's physical and sexual violence against their partners and children. Findings in Part Two support research evidence from elsewhere that children are also adversely affected by domestic abuse, including after separation (Katz 2016; Katz et al 2020). Social work and child protection responses to domestic abuse have focussed on preventing harm and reducing

risks to children from physical violence in the family and have been framed as a failure of parenting (Robbins et al 2016).

In practice, women are held responsible for protecting their children in the context of the violence and abuse they themselves were experiencing. Past, often punitive professional practices, which blamed women for the abuse they experienced, for their 'failure to protect' their children, and which put women at risk of having their children removed from their care persist in the twenty-first century (Humphreys and Absler 2011). Practice developments in child protection which are not solely focussed on incidents of physical violence are emerging. In Scotland, these are beginning to reflect recent legal and policy changes highlighting the nature and risks of coercive control and their impact on women and children, including after separation (Scott 2019; Bocioaga 2019). These developments now include: the national implementation of the Safe and Together Model; the introduction of trauma-informed practice; multi-agency working and the coordination of local VAW services; the extensive use of the DASH Risk assessment tool; court advocacy services; the introduction of Multiagency risk assessment conferences across Scotland (MARAC) (Safe Lives 2019)) including in A&B since 2019; The Caledonian System - a court-ordered prevention programme for convicted domestic abuse offenders. Taken together, these comprise the key elements of a domestic abuse-informed (DA-I) practice.

Part Three will present findings on a snapshot of current domestic abuse practice and service responses in A&B. Responses were analysed using a specially created practice assessment framework informed by the study's research questions, by the S&T DA-I framework, and area-specific factors. (Table.3.) Part Three will begin with a summary of the area's DA-I and area-informed practice and processes. It will go on to report, firstly, on current interventions with perpetrators in criminal justice and child protection processes and, secondly, on agency responses to women experiencing domestic abuse and their children.

Area-informed	Address intersectionality	Confident staff - Training
		and development
Domestic abuse advocacy	Domestic abuse	Information sharing
	perpetration as a parenting	
	choice	
Intervening with the	Joint/multi-agency working	Keep child safe and
perpetrator to reduce risk and		together with the non-
harm to the child		offending parent;
Knowledge, understanding	Multi-agency risk	Partnering with the non-
and practice	assessment conference	offending parent as the
	(MARAC)	default position;
Recognising the impact of the	Risk and safety assessment	Shared gendered analysis,
perpetrator's	and management; DASH	understanding and
behaviour/coercive control on		approach to DA
partner and children		
Trauma-informed practice		

Table 3. Domestic abuse -informed (DA-I) framework

3.2 DA-I practices and processes

There are a number of strengths in A&B's current single- and multi- agency responses to domestic abuse: in the DA-I organisational practices of ASSIST, A&B Women's Aid (A&BWA) and Independent Domestic Abuse Advocacy, A&B Rape Crisis, Health and Social Care Partnership (HSCP) Justice Services (JS); in local multi-agency processes such as MARAC; joint working between and within organisations including A&BWA, Justice Services, Rape Crisis, ASSIST services, Police Scotland 'L' Division Domestic Abuse Unit, and Social Work Children and Families (SWCF) Teams. It is also evident in the expertise, knowledge and skills of teams and of individual professionals in all of these organisations. The specialised nature of DA-I training and working practices are characterised by a number of features. Firstly, their engagement in multi-agency approaches is facilitating the sharing of DA-I knowledge,

expertise and practice with other teams and organisations. Secondly, a shared, gendered understanding of the nature and impact of domestic abuse and coercive control on women and children is being operationalised in approaches to domestic abuse advocacy, in direct trauma-informed work with victims-survivors and in one-to-one interventions with convicted perpetrators. Finally, the domestic abuse, sexual harassment and honour-based violence (DASH) Checklist, routinely used by ASSIST, supports victim-survivor safety planning and, in high risk cases, creates grounds for referral to the area's monthly MARAC. DASH allows direct DA-I advocacy with the victim-survivor and ensures her voice is heard in any decisions being made about her.

Advocacy workers obviously speak to the clients. The clients give them the overview. They then get the client's input for the MARAC so their voice is heard as part of that process. We would always ask for input and then I'm the one that actually attends the meeting and puts that forward. (FW₅)

Training in the DASH risk assessment tool is also being carried out within JS and is being shared by them with other agencies through joint working,

I'm trained in the DASH, so I'm taking the Children and Families social worker out with me to do the DASH questionnaire with mum, which mum has agreed to, and I've been able to do a bit of victim safety planning with mum, that the Children and Families worker hasn't been able to do. (FW₃)

Finally, the introduction of MARAC and the appointment of a dedicated MARAC Coordinator in A&B ensures a range of agencies are involved in the assessment of risk from perpetrators; and in decision-making, safety and action planning focussed on the victim-survivor and her children.

Criminal justice have somebody there. Police, Children and Families have somebody there. Health has somebody there, adult health and adult social work. You have child health there so for health visitors and perinatal, all that kind of stuff. We've got somebody there for that. There's community mental health. They're there. And addiction services, (FW5)

Although, there were suggestions that the involvement of an even wider range of key agencies would strengthen the process.

I suggested to Safe Lives that somebody from the courts should be in attendance at MARAC, because they need – courts don't know what MARAC is. Some do, and I don't know how many times I've heard sheriffs saying, what's a MARAC? I would absolutely recommend that anybody that's involved in the court system, fiscals, children's court appointed solicitors, anybody, should be involved in MARAC. (FM4)

There were challenges in implementing a DA-I approach in MARAC.

I feel that other agencies that are attending the meeting maybe don't understand the gravity of the risk or the importance of MARAC and the fact that we're all sitting round a table because there is significant risk of death. I'm able to highlight things and give comments of, well, 'this is the second or third time this case has been heard here and what we don't want is for a result where we're sitting round the table again seeing what we missed'. Sometimes the person that wrote the paperwork will use language such as 'tit for tat'. I have, when that phrase was used, said, 'that's not appropriate language for what we're discussing. We're discussing that there has been identified significant risk to this woman's life and it's based on that alone'. The people that are writing these reports need to be aware that we're not doing it for the fun of it, we're doing it because it's been identified. (FM4)

As the process has become more established, there is evidence that the MARAC process is settling in well.

I've had really, really positive feedback – we've had people coming in and viewing the meeting from other MARACs and have said at the end of it, that was absolutely spot on, the way it was run and what was discussed. So, in some regards, yeah, it is running well, but in other ways I think there's more work that could be done. (FM4)

MARAC, by creating opportunities to focus on the risks to women from violent men, is also facilitating the implementation of DA-I perspectives and the sharing of learning, practices and networking.

In some cases the focus isn't on the perpetrator, the focus is on the woman and how, well, she's got an alcohol problem. I find myself [saying] in MARAC, 'but we need to look at why she's got an alcohol problem, what we can do. It's like, or 'she's addicted, she takes prescription drugs, her mental health is really poor'. Having to say, 'Yeah, but why is her mental health poor? Because she's been dragged through the courts, or she's had to deal with this. (FM4)

Obviously people pick up from the IDAA (Independent domestic abuse advocacy) services within the MARAC what you're advocating for and on behalf of your client and also what they're going through, so to speak, that the issues that are ongoing so if there's constant breaches of bail, the police are aware of that. What can we do about that? Is there anything else to do? If there's criminal justice, social work, reports are going to be getting written. They're also hearing that information - it is a really good approach to have. Networking as well, because it puts a name to a face. Also you can gently challenge to say, well, we would like to take that further or we would like to support our client with that. (FW5)

3.3 Area-informed services

All public and third sector services in A&B are delivered across the area from a network of offices, centres and hubs. All health services, adult and child social work, justice and social care services are brought together as the Argyll and Bute Health and Social Care Partnership (ABHSCP). ¹⁵ ABHSCP Social Work and Justice Services work from centres and offices in Dunoon, Oban, Helensburgh, Rothesay and Campbeltown and also on the larger islands of Mull, Tiree, and Islay. Specialist domestic abuse and rape crisis services are similarly distributed and provide services across mainland Argyll and the islands. A&B WA have refuge accommodation and their main office in Dunoon, an office in Campbeltown and outreach workers located across A&B. They provide face-to-face support to women across the area and also via telephone, SMS, email and online platforms. A&B Rape Crisis covers the area from their main office in Dunoon, and other offices in Oban, Helensburgh, Lochgilphead and in Rothesay, Isle of Bute. Services are delivered remotely by Zoom or telephone and the

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¹⁵ https://www.argyll-bute.gov.uk/health-and-social-care-partnership

network of offices offer face-to-face support to adult and child victims-survivors of rape and sexual violence.

The research project was undertaken in the spring and summer of 2022 at the end of the prolonged period of COVID restrictions 2020-2022. The following section describes how domestic abuse-informed services were delivered across A&B and how these changed during the pandemic.

Delivering services in A&B during the COVID-19 pandemic

Some of the factors relating to remote, rural and island living which could aggravate women's experiences of domestic abuse and limit their ability to seek support were outlined in Part Two. The impact of lockdown restrictions were also outlined. Although the legally enforced restrictions brought relief to some separated women, women's experiences were largely negative. Prior to the 2020-2022 COVID-lockdown restrictions, A&B's domestic abuse and rape crisis services for victims-survivors, perpetrators, and multi-agency processes were carried out by workers working in satellite offices, hubs and from home working remotely via telephone and digital technology. According to the End Violence Against Women Coalition Covid-19 report, the pandemic created a 'conducive context for domestic abuse'. ¹⁶ Lockdown restrictions exacerbated existing issues of isolation and perpetrator impunity in community contexts and challenged services to respond by introducing more agile working practices.

The period of lockdown therefore created the need quickly to reconfigure service delivery and working practices to ensure a continuation of access to information and support for women living with domestic abuse under lockdown conditions. The challenges of distance, remote working and service delivery were not new to the area's service planners and workforce, with remote working common. However, the narratives suggest that new working practices introduced during the COVID emergency further improved accessibility and visibility of services, reduced travelling times for workers and service users, with fewer missed appointments and no-shows. This was particularly evident in Women's Aid, Rape Crisis and ASSIST's work with victims-survivors, in MARAC meetings and with Justice

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¹⁶ EVAW coalition briefing on COVID-19 pandemic and duty to prevent VAWG - April 2020

Services undertaking court-mandated work with convicted domestic abuse perpetrators – all of which moved to telephone contact or online.

Q: So how do you cover the islands, how do you provide the services?

A: At the moment it's all by phone, or where our service user is wanting more face to face, we can do Zoom, or where appropriate we're putting in place the return to face-to-face support. Before lockdown there was quite considerable commuting to meet up with service users. (FM4)

There were examples of remote support being more accessible for women who were struggling to attend appointments.

If you were meeting up with a woman, taking into consideration her mental health, so she might not phone you to say she's cancelling her appointment because she's not in good form or childcare issues, or the perpetrator being home, or having to actually physically put clothes on and come out into the world. These all, I think, hindered in a lot of ways, for a lot of women, receiving support. So, I personally felt that phone support has been a good source of availability for women. (FM4)

During the lockdown period I think it was a good way of showing that the support we provide by phone is really valuable. Because we did find whenever we were going and working in Helensburgh, you could have maybe booked in five appointments. So, you were leaving first thing in the morning, you were going and three of those appointments wouldn't turn up. With the travelling as well, it was a very, very long day, if you're putting five hours support in the middle of it. I feel with the phone support the level of engagement I think is really positive, because a woman knows she doesn't have to wait until her next appointment with you. It's like, I'm having a crisis, I can phone you, I need to speak to you. Yeah, no bother. So, we're far more available. (FM5)

One of the aims of this research was to investigate how accessible domestic abuse support services were to women in more rural areas where mobile phone or Wifi connections were less stable, or, where digital poverty might prove a barrier for women seeking telephone or online access. No evidence was found in any of the narratives that these created barriers to the increased use of telephone-based support services during the COVID lockdown. Further,

the research interviews were all carried out remotely either via Zoom, landlines or mobile phones. There was only one example of an interview having to switch from a mobile to a landline due to an unstable connection.

Changing working practices during COVID-19 pandemic

The rapid shift to new remote working practices had a mixed impact on staff, managers and on in-service training provision.

It changed for most of us. I say most knocked on to the phone. Maybe half of our workers went on the phone. Initially we were all on phone I think for the first maybe three months but then, I mean, I got fed up with it and my colleagues got fed up. You need to see people face to face for this job. You cannot do it over the phone predominantly. (FM4)

Post-COVID, remote service delivery, especially the continuation and expansion of telephone-based support, reduced office capacity and funding limitations have led to more permanent changes to working practices. This includes the need for introducing home visits where these are necessary or requested.

So, quite a lot of us would just be working part-time during the pandemic and we've continued to do that, you know, two days in the office, two days at home and that works well. But yeah, for during the lockdown period I think it was a good way of showing that the support we provide by phone, I feel, is really valuable. We are currently putting together staff risk assessments for workers who are talking about going to women's houses and things. So, we want to make sure if that is the way we're moving forward, that everything is covered in relation to their and service users' safety. (FM4)

As the nature and location of face-to-face support changes, and telephone-based support increases, workers are now largely desk-based.

We had service users...we had a space, a support base, but because the number of staff we've got and for sort of safety measures, we've now split it into three offices and that space is used. But where possible the staff are working from laptops. They'll switch about if space is needed. But primarily most of the contact we have and the support we have is by phone. (FM3)

For JS work with perpetrators, the COVID restrictions had a silver lining.

I would never have thought before, but it had to happen to show me. There are plenty of people who are willing to work with you, but they have restrictions on their life, like them working themselves. Before, we were saying, you need to come in for an appointment. You need to come in in your lunch break if you don't have any other time, if that was possible. But what we actually did when we were in the lockdown was, we can phone you at any time. We can phone you - if you've got to work, we can phone you after your work. And so we did. It was really - it made the whole relationship start off much smoother. Sometimes it can be quite tricky getting in there with people, especially when you don't have that face-to-face thing. However, I have to say it was remarkably successful, and much more than I had anticipated. (FW2)

Staff support and training during COVID restrictions

As with services, training moved online and was both in-house and externally delivered. This had advantages. Firstly, agencies capitalised on the existing knowledge and skills of their own staff, many of whom delivered sessions to colleagues; secondly the amount of external training which moved online maximised the opportunities for workers in A&B to attend sessions delivered outwith the area; finally moving multi-agency domestic abuse training online increased training uptake and reduced travelling time for local agencies, such as A&B WA delivering training within A&B itself.

We worked differently in Argyll and Bute then and I have to say spent quite a lot of money just with people travelling all the time to meetings. So face to face, one in each of the areas, usually we would focus and try to have training in each area so that people could physically come to it. That's changed now. Whilst we're starting to see an occasional move back to meetings that are face to face, training is really still very much online, nearly every occasion. So it's Teams meetings facilitated beforehand by you know the right documentation, perhaps a pre-course questionnaire to gain experiences. Then a Teams day or half a day and with planned follow up to see the effectiveness after that. I don't think that will change particularly. It just seems to be working. (FM6)

We continued with team meetings, any training that we did we did online. I think a lot of that has kind of transferred, that that has become the norm with training and with meetings and things. So that's become standard practice which I find very, very useful as well, because time is so precious with how busy we are. (FM4)

Alongside concerns about contracting COVID itself, the move to online, part-time and home working with the loss of home/work boundaries had a significant impact on attendance, staffing levels, staff wellbeing, on delivering services with reduced numbers and restricted resources.

Argyll and Bute is - in terms of personnel - quite a small area. Geographically it's huge. A good percentage of it is remote, rural and island, recruitment and retention are very real issues and have - since the pandemic - become more so. So it's perfectly possible for us to advertise for a social worker or health visitor or whatever, three or four times and not get anyone we can interview. (FM6)

I had a terrible COVID fear, me personally. For a good while I was delighted because I felt safe [working from home]. It took me a while to get – because I found it very, very intense, the initial support of call after call after call. Feeling that I couldn't step away and take five minutes out, even though I would have done that in the office. So, by the end of the day, I was very drained, but I think that a lot of that was to do with how I was feeling about COVID as well. I know that you have a level of responsibility to look after yourself, but I think I found it too much. (FM4)

These have placed new demands on managers also working at a distance.

The additional demands of the pandemic and all of that has put pressure on staff. You know it's been physically and emotionally challenging for people. That's been difficult. So we've had staff off. Changes in the way work is viewed and the way pensions - various things have led to a lot of people retiring early. For all those kinds of reasons we've had gaps that have been covered and it's not caused huge issues. But it causes pressure on staff. (FM6)

However there were examples of innovative support and supervision practices to support workers during what was a very challenging time.

There was a lot of support available to the whole staff team. Wellbeing calls and buddies and there was a lot of support provided for us throughout that. I found that whenever I returned to the office, because there was one colleague working who based herself in the refuge purely because we had a family in. When I returned to refuge it was a massive relief, I didn't realise how intense I had found working from home. (FM4)

3.4 Perpetrator-focussed interventions

Part Two gave an account of how women's experiences of coercive control often continued after they had separated from their abusive partners. The women experienced stalking, harassment, threats and intimidation. There was also evidence that men continued their coercive control by manipulating legal and statutory processes in relation to divorce, joint finances and property, child protection, contact and custody. These more public articulations of coercive control often involved the police, social work and child protection systems, health services, schools and family mediation services.

The response of public agencies to violent and abusive men occurred in two main contexts. Firstly, within the criminal justice system, where men are prosecuted for and convicted of domestic abuse or domestic abuse-related crimes and offences. Secondly, abusive and violent fathers can come to the attention of the agencies with statutory responsibility for protecting children. These include, Social Work Children and Families (SWCF) teams, the local Children's Reporter¹⁷ and the Children's Hearing system. ¹⁸ Cases where children are at risk due to their father/carer's domestic abuse of their mother/carer may come to the attention of one or more of these agencies/systems. Decisions made can include placing the child on the child protection register, the removal of the child from their parental home, compulsory supervision measures, decisions about where the child will live and the contact they may or may not have with the non-resident parent. Disputes between separated parents/carers over child residence and contact may be involved in Child Welfare hearings ¹⁹ held in the Sheriff Courts.

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¹⁷ https://www.scra.gov.uk/

¹⁸ https://www.chscotland.gov.uk/about-us/the-children-s-hearings-system/

 $^{^{19}\} https://www.judiciary.scot/home/media-information/media-hub-news/2022/07/13/new-guidance-on-child-welfare-hearings-in-the-sheriff-$

Responses to convicted domestic abuse perpetrators

Police, the Crown Office Procurator Fiscal Service, the Scottish Courts and Tribunal Services and A&B Justice Services (JS) deal with perpetrators of domestic abuse within the criminal justice system. Currently, this group comprise around one third of the current cases held by JS, the majority of whom are men. JS involvement begins with the requirement to write background reports for the courts prior to sentencing. The disconnection between the public and private man revealed in Part Two is put under strain in this context. Using a DA-I approach requires a move away from the single incident-focus towards a pattern-based understanding of abuse, and can challenge the perpetrator's version of his crime, his tendency to minimise and deny what has happened and/or to blame the victim. There is evidence that DA-I approaches to JS practice are emerging.

So, they'll write the men's story, which is often very, very well-rehearsed. It can often be very, very plausible. I think particularly on that middle class branch of men that are really articulate. That belief of the story can be a really challenging barrier to overcome with workers. I'm kind of like, that's his story. That's not going to be true. Behind this is a woman who's made this phone call to the police and has gone to court.

I know that by the time it goes to court and they're found guilty, this is not the first time...[we have] to be sceptical of it, when we've got an abuser in front of us that we don't fully accept his rehearsed story.

It's a leap for workers to make. It's not what they're used to doing. Traditional justice social work is looking at that presenting [issue] and although there is that pattern of offending, it is just so different when it comes to domestic abuse - of looking at it within the context. This isn't a one-off event [it's] non-criminal behaviours within the home and that pattern and control. (FM1)

At the report writing stage, an opportunity arises to propose a Community Payback Order (CPO) which can include individual programmed work focussing on domestic abuse.

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courts#:~:text=Child%2oWelfare%2oHearings%2oare%2ousually,Hearings%2oare%2ogenerally%2oinformal %2oprocedures.

Because custody is considered at this point, that person is ready to, or willing to, maybe listen to what somebody has got to say. So, at that point we need to get them to sign an agreement that if the court decides to give them an order, that they would complete work focused around domestic abuse. (FW₃)

There is evidence too that new directions by a Sheriff in an A&B court is strengthening this approach,

The [new] female sheriff, is now saying on the actual legal order, 'will complete offence-focus work around domestic abuse', and she's making that a part of their order, and that never used to happen here. So, that is something – so if somebody gets a Community Payback Order with a requirement for supervision, it's been agreed that we were to focus on domestic abuse, but the sheriff is helping strengthen that now by making that in the order as well.

I don't know whether there's been training done at the local courts, I'm not sure. But because Argyll and Bute haven't had programmed work to offer, I would imagine it's never been put in reports before. Like in Glasgow and places where there's the Caledonian [System], people can put that, and that can become part of the Order. But as we've never had that before, so this is – we're able to now put in our reports, we have staff trained that can deliver programmed work around domestic abuse. So, I think that's made a change as well. (FW₃)

A great deal of JS work involves weekly monitoring of convicted perpetrators on CPOs lasting between one and three years. While the work involves dealing with personal and practical issues such as health, finance and housing, the team's one-to-one work addresses the underlying causes of the abusive behaviour.

We have regular contact and what we do is kind of cognitive behavioural-focused interventions with them to help challenge their thinking and their emotions and the impact on their actions and their behaviour. So, challenging attitudes and beliefs as well. (FM₃)

The majority of the time we try to put a fenced focus around making changes in behaviours, and stuff like that. But again, it's such a limited time, and I do feel, that

we're still at the beginning – the very beginning as a team of understanding – because a lot of it is psychology interventions. I definitely feel there's a need for more training for the workers to deliver this. Because right now we're basically going on the knowledge of our team leader, and going to her for everything, and so I do feel that it could be strengthened - the work that we're doing. (FW₃)

The training and supervision of staff undertaking this new DA-I approach to JS practice with domestic abuse perpetrators has evolved from two main sources: the spread of DA-I approaches into A&B through training, knowledge and skills exchange within the national domestic abuse sector and this being shared among the teams by individual, highly experienced members of staff.

Our knowledge of domestic abuse has increased massively over the last couple of years, because of the direction of the manager. But again, there's nothing structured, there's not any, it's not like the Caledonian System, that other local authorities have, it's just based on our manager's knowledge and what she's passed on to the workers. (FW₃)

The individual programmed work being carried out with domestic abuse perpetrators has been developed in-house using JS existing staff knowledge and internal resources and is being disseminated among staff. There is no group-work programme for convicted domestic abuse perpetrators in A&B. Some areas of Scotland have implemented The Caledonian System (CS) a court-ordered group-work programme for men convicted of domestic abuse aimed at behaviour change and to reduce recidivism (Scottish Government 2009).²⁰ A&B does not as yet have this programme. Participants felt that there was a gap in provision for areas like A&B without the resources to support the CS in full, despite the demand which exists within JS but also for programmes for men who do not fulfil the criteria for CS or community-based programmes aimed at other groups of violent men who are outwith the criminal justice system. The CS also provides separate services to work directly with the partners/ex-partners of men on the programme and with their children. This provides a valuable and confidential link between that service and the women and children to monitor

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²⁰ https://www.gov.scot/publications/caledonian-system-evaluation-analysis-programme-tackling-domestic-abuse-scotland/pages/3/

their safety and ensure they are not placed at any additional risk during the groupwork programme. While there was some evidence of a few informal links between JS and the partners of men on CPOs this was not standard practice and was regarded as a major gap in the work JS does with men.

We don't as a justice service have a lot of victim contact. I have piloted it, obviously really keen to deliver it within the team to open communication. I'm not trying to deliver something on a Caledonian scale, but I just feel it's really important for victims to be engaged when they're – we know that these men use programmes abusively. I know that they're going to go home and go, I'm the one that knows everything now. (FM1)

Although there was evidence of a funding bid, it was suggested that the resource –heavy Caledonian System could be beyond the capacity and demand in A&B, leaving a gap in provision of perpetrator-focussed interventions – both within JS and more widely across the HSCP.

Why is Caledonian so focused on working with the tip of the iceberg? It's the men who have been convicted and gone to court who don't have addiction problems, don't have mental health problems, don't have this, that, and the other. They're the only ones who can attain this pinnacle of intervention. You know, everyone else just goes by the wayside. (FM1)

The individual programmed work, developed inhouse which is being carried out by JS is therefore the only programme of DA-I work currently going on with domestic abuse perpetrators.

There are no recognised interventions at all because we have never been able to access Caledonian and there are no other programmes, no other training, nothing at all available from Community Justice. Where is the majority of domestic abuse work? It's in Children and Families. (FM1)

Joint work with Social Work Children and Families (SWCF) teams is a regular feature of JS work and provides opportunities for sharing DA-I practice but also for highlighting the differences in priorities and approach.

I feel that the lines of communication there could be better. So, Children and Families work with the children and mum, and Justice work with dad. I just feel that although there's communication between Children and Families and Justice, it's like there one role there, and there's one role there. I feel that that role should be together. If we're talking about managing risk, then if one part of social work is working with that and one part of social work is just working with that, it's not – it doesn't flow. I mean, like I say, I'm in a position that I'm quite confident to phone Children and Families and give my opinions, but not every worker is. (FW3)

A key difference between the two approaches relates to assessments, decisions about how best to protect children, current practice interventions and communicating with violent and abusive fathers about their parenting.

Protecting children from abusive and violent fathers

The protection of children in Scotland is a statutory responsibility placed on local authorities under a legislative framework which includes The Social Work (Scotland) Act 1968, The Children (Scotland) Act 1995 and subsequent legislation. Scotland's National Child Protection Guidance 2021 specifies the roles, collective leadership, responsibilities, processes, workforce training requirements and inspection of all agencies involved in protecting children in area Child Protection Committees (Scottish Government 2021). In practice, child protection processes involve police, social work, schools, early years, health and third sector organisations.

Concerns may come from the police, other agencies involved with children, from a parent, relative or from the general public. The responsibility for responding in the first instance to concerns for the safety and welfare of children lies with area SWCF teams. In 2020, there were 157 child protection investigations in A&B; 89 of these progressed to Child Protection Case Conferences and 68 to a Child's Plan meeting. 'The highest area of concern was domestic abuse, followed by poor parenting, mental health issues and substance misuse'.²²

 $^{^{\}tt 21}\,https://www.celcis.org/knowledge-bank/protecting-children/legislation-and-policy/current-legislation-and-policy/cu$

²² www.argyll-bute.gov.uk/sites/default/files/annual_report_31.3.21_003_0.pdf p.9

Prioritising fathers' contact

Where concerns about children arose in the context of the domestic abuse being experienced by their mothers, DA-I approaches differ from traditional SWCF practice. As previously discussed, DA-I approaches recognise that domestic abuse is a pattern of abusive and violent behaviour whose frequency, severity and impact on mothers and children can be severe and can continue post-separation. More than one participant shared a concern that many SWCF interventions aimed at maintaining the child's relationship with their father did not share this understanding.

The focus they have on the perpetrator is absolutely not about challenging his behaviour. There seems to be a focus on child contact and that they're not relevant to each other. Yeah, he used to beat her up. Yeah, she has got all these issues that she is addressing. He's got the child and she has supervised contact because of [her] previous issues. But the fact that she's the way she is because of him is irrelevant because that's about their relationship. That's not about the child. You just think, this is all crazy, absolutely crazy. (FM4)

These differing perspectives were also observed by one woman, in the way risk was assessed and on decisions about the best sources of support for a child.

I visited Women's Aid every week and [worker] came with me to panels, she sat by my side, she helped fight my corner. She raised at the Panels about [partner's] abuse, she gave [information] that he could potentially abuse a child, it was a very high percentage [risk] of that happening, if [child] was placed in his care. I'm not joking you, right, but the attitude of the panel was disgraceful. Because they didn't take her on board, they - honestly, they didn't. They said, where's your evidence [of...]? She had evidence but that was it, kind of thing. They honestly looked at her as if, 'what do you know?' That's the way the Panel... I swear to you... They were so disrespectful to her. (FS9)

Outcomes such as this also suggest a lack of awareness of the potential for service-generated risks in agency decisions, an understanding that the father's pattern of abuse and violence may vary, may or may not involve violent incidents and that its impact may not be visible to external eyes.

There can be a lot of different reasons why the Children's Reporter doesn't pick it up. First - if they say it's an isolated incident. I think the cases where there's obviously, we know, a pattern going on behind closed doors that agencies aren't aware of, we're well aware of that. But if this is the first time that Children and Families have been involved, it might not be picked up by the Children's Reporter, or there might be - if the family are saying - if everything is coming back from the school, the school don't have any concerns, there might not be [any obvious concerns]. (FW1)

However, where a father's abuse does take the form of a pattern of behaviour over time, the family's prolonged involvement in the Child Welfare Hearing process was effective in offering some protection to one woman and her child by holding the perpetrator accountable for his behaviour.

You could probably say [X number of] Child Welfare hearings. I respect the fact that they've kept it in court because it's kept an eye on the situation and it's kept him, if you like, feeling like he's got to behave, for the want of a better word. Although it's been horrendous, there has been a value to that. (FS₂)

Interventions with violent fathers

There were suggestions that there was a reluctance, among some SWCF teams, to address men directly about their violence and abuse and to challenge the standard of their parenting in that context.

Children and Families, in one team in my experience, are not there with domestic abuse at all. They don't have a good understanding of it, they don't have any training on it. I was not given any training when I worked in Children and Families around domestic abuse. So, there's a real fear I think with assessing risk, and it's very much focused on their role as the protector of the children. It's that very old school thinking of mum has to protect the children, and if she's not protecting the children, then we're going to do something about it, and mum's going to be held to account. Dad is never held to account by Children and Families. (FW3)

I feel that there's a barrier of fear of talking to men, yeah. But I still think that's something that's really lacking in Children and Families. I think there's a real concern

about talking to men, a fear of increasing risk, fear of colluding with him, fear of lots of things, therefore it doesn't happen. Fear of him, he's an aggressive, violent, manipulative guy. (FM1)

It was suggested that this reluctance had longer roots in more traditional social work training and practices,

I think that occasionally you saw an anxiety about working with men, with challenging men, from staff. I think it's not a local thing, it's a - well I've been a social worker for 37 years and I think it's an element of social work on a national level and has been for years. I think social workers struggle sometimes to deal with challenge, particularly sometimes from men and more so if it's a middle-class man, I have to say, in my experience. (FM6)

Despite these examples of interventions with perpetrators which are not DA-I, there are positive signs of change. A core group within JS, ASSIST, A&BWA services and members of SWCF teams; the MARAC process and the growing use of DASH are highlighting new approaches and providing opportunities to share these in work with violent men. Their reach and influence is however restricted by three factors. An over-reliance on individuals and small pockets of DA-I practitioners sharing their expertise; the limited reach and influence of these individual and groups; and the challenges of implementing change to well established systems, processes and to individual practice. The extent to which the other side of the equation, professional responses to women victims-survivors, are becoming DA-I will now be examined.

3.5 Agency responses to mothers experiencing domestic abuse

Part Two of this report gave examples of women's experiences of professional responses to the risks they faced, that were not DA-I. There were examples given where the measures taken were not reflective of the abusive context of the child's situation, were not based on a shared understanding of domestic abuse and its impact and seemed to prioritise the father's views and entitlement to contact in spite of his abuse. These contradictory approaches provide evidence of the 'three planets' model of the different agency responses to child protection in the context of domestic abuse (Hester, 2011). DA-I approaches to

protecting children involves building partnerships with the non-abusing parent; and working alongside women's/non-abusing parents' strengths and protective capacities. What follows offers firstly, women's and professionals' reflections on the extent to which some agency responses disempower women, lose their trust and have limited understanding of the impact the abuse has on them. Secondly, further evidence of women's resilience in overcoming the impact of domestic abuse and the challenges of complying with SWCF requirements is outlined. Finally, examples will be given of how new DA-I practices are working to build trust and partnerships between workers and mothers to maximise their strengths and protective capacities.

Women and Social Work Children and Families (SWCF) Teams

There was evidence of ambivalence in women's attitudes to social work involvement in their lives. One professional gave examples of women welcoming their involvement as an external source of protection for their children. 'There are women that really do appreciate social work support and want it' (FM4), others were afraid and did not trust their involvement.

Even if you're doing a GDPR, and the sharing of information and you talk about Child Protection and all that kind of thing. It's like [women ask], 'well who would you speak to?' 'Where it's relevant it would be social work if there was a child protection concern, because I have a duty of care'. Women are like, 'No!' People are terrified of Children and Families. (FM4)

Workers were acutely aware that a key concern for women was that involvement with SWCF in relation to domestic abuse could risk their child being removed from their mother's care.

Q: Do you think that's still in women's minds, and do you think it's a real threat? Is it a real possibility still that children will be removed?

A: Absolutely. 100 per cent. The women's fears around opening up and disclosing what exactly is going on and understanding that risk, without the constant threat of, well, your kids will get removed. It's not an easy task. Children and Families come very much from the child's perspective and very much about the risks to that child, and the risk of serious harm to that child, without fully understanding the protective things that mum already does. (FW3)

This fear and mistrust can be challenging for those undertaking DA-I advocacy and risk assessments for MARAC by making women reluctant to engage.

Well definitely that's still what women think, particularly if we're discussing with women about doing risk assessments— and we're kind of doing our own risk assessment as well. But we're saying to women, if this risk assessment is over 14, there will be an automatic MARAC referral and having them jump in saying, 'Who'll be at this?' — and you explain to them about the meeting. The minute you mention Children and Families, it's like, 'I'm not doing this, no, I'm not answering any questions'. (FM4)

Women's feelings of disempowerment

Women gave examples of feeling disempowered despite, in some cases, having the support of an IDAA, when they were involved with statutory agencies.

Everything was getting taken out of my hands and I felt like I had no power anymore. (FS9)

Nobody would listen to me. Women's Aid were like, 'Why not? Why are you not listening to her?' Nothing's changed. Nobody was listening, the courts, lawyers, the police, nobody. Having somebody else with power, I think would have been better (FS1)

Every time I told the social worker - every single time I told her [about partner's violence and abuse]- she just stared at me like I was an idiot. (FS9)

Much of women's disempowerment was a result of practices which took little account of the impact of domestic abuse on women. Having this articulated in MARAC by workers was offering an alternative basis for decision-making.

I find myself [saying] in MARAC, 'but we need to look at why she's got an alcohol problem, what we can do?' It's like, or 'she's addicted, she takes prescription drugs, her mental health is really poor'. Having to say, 'yeah but why is her mental health poor, because she's been dragged through the courts, or she's had to deal with this'. (FM₄)

Some women who welcomed agency involvement made every effort to comply with the demands placed on them for their children's safety but without the cause of the problem, their father's abuse, being addressed directly with him. Keeping her children safe was one woman's responsibility but when the man did come back there was no further protective action taken.

Yeah, they knew everything [about the abuse]. They were just - keep him away, keep him away. They would just come out, see that the kids were safe and say, keep him away, don't bring him back. If you bring him back, then we can do all this, protection plans and stuff. But then it was silly enough [of me], I did keep bringing him back, but they never stepped in to say, 'hold on a minute, we told you' - they just let it continue as well. (FS₂)

Another woman's ability to keep her children safe was, by SWCF criteria, sufficient to allow them to step away from further involvement.

I got everything in place. Once I had got all these interdicts in place, they basically left me. They said, you're obviously keeping your kids safe. There's nothing we can do. (FS10)

Partnering with women

Examples in Part Two showed how resilient women were and the strengths they had in creating safe and nurturing home-lives for their children despite the impact of the abuse. Workers also gave examples of the lengths women go to do address challenges in their own lives, in order to protect and nurture their children. They stressed how important and often difficult it was to advocate for mothers, and to point out their considerable strengths in multiagency settings, particularly when addressing issues which intersected with the abuse itself.

You're then having to say, where you can, but 'why...why is she [struggling]'? Or, 'yeah, but despite that, her children go to school every day and they're absolutely spotless and they're never hungry', because there's always – [and the response is] 'Yeah, you're right'.

Or, she's overcome alcohol, she's overcome drug addiction. Yet whether it's social work or whether it's the court, they are all saying, 'yeah but, previously she had those

issues'. Yet his criminal history of beating her, being in prison, doesn't matter because she's not good enough to bring up her children. It is so infuriating. (FM4)

Workers are promoting the DA-I approach by building trust, convincing women, colleagues and partners of the benefits of a cooperative and supportive approach.

It's being able to turn it round... 'but they're not focusing on you. What they are focusing on is you and your children's safety and focusing on the perpetrator'. Women will, there will be that level of trust, right, 'okay, I get that and that's fine'. We've got to kind of sell the risk assessment to the women because of who they think is going to hear what they're saying. (FM4)

Professional knowledge, expertise and understanding of domestic abuse and its impact is also being shared with women and with other agencies to support more DA-I, holistic decision-making and problem-solving.

I've got friends in social work in Children and Families, and they've had the spiel from me. To be able to say – for example, 'You've got a woman who's got this issue and you're saying she has this issue', and they're saying, 'Yeah, well she does'. It's like, 'Well, let's turn it round this way, why has she got this issue?' They're like, 'Yeah, but...'. It's like, 'There's no but, she's got that issue because she's got broken bones and she's not allowed to go to the doctors and she's self-medicating'. (FM4)

Working in partnership with women is a corner-stone of a DA-I approach. There is evidence that specialist agencies such as A&BWA, ASSIST, A&BRC, Police Scotland 'L; Division Domestic Abuse Unit, working directly with women and/or children, JS working indirectly with the female partners of their clients and the work they all do on women's behalf in multiagency settings is being appreciated by women themselves. There are some indications of safer outcomes for women and children.

[ASSIST] did exactly what they said they'd do. They kept me right up to date about what had happened, what would happen. They said, we have the power to say to the court that you want or don't want a non-harassment order. They also said, which was fantastically helpful, they could put my views forward to the courts. They said, would you like to say that you think that [partner] has [issues] that he needs help with? I

said, well, yeah, but it's not really my place to say that. They said, of course you can say that. So I did. (FS6)

If the [Police Scotland] domestic abuse team picks it up, they were the only people that have ever got me into Women's Aid or ASSIST. (FS10)

These examples show that despite the challenges faced by women and by those taking a DA-I approach, there are signs of progress. A number of the women who participated in this research had been isolated, disempowered and made unsafe by their partner's abuse and some also by their involvement with services and child protection systems. There are positive signs however, that women have begun to trust that workers are on their side. Workers, by partnering with women in DA-I approaches, are building that trust and also sharing their learning and expertise with colleagues and partners in multi-agency settings. The impact of these approaches are clear in the following statement:

The one thing that I would say to you is, if they can't listen to the person that has got the daily care of the child, if they can't listen to that woman's experience or concerns, then what are they all here for? That's what I felt was the case. (FS₂)

It was complete and utter comfort, being understood, being listened to, that's all I wanted. I wanted to be believed because I have been trying to tell various people, this is horrendous, my daughter could be in danger and nobody - nobody cared, but they did, they cared. Even to the point where they gave [daughter] a Christmas present and things, they were so - they've honestly been - that organisation is amazing, it really is. (FS9)

3.6 Workers' and Managers' Recommendations

DA-I practice: Staff development and training

- 20. To introduce training which builds the confidence and competence of all social workers in a DA-I approach to working with violent and abusive men through the development of programmed work to:
 - directly address their abusive behaviour;
 - highlight its impact on their partners and children;

- hold them accountable for their behaviour.
- create opportunities to share the existing skills of JS staff in working with violent and abusive men with colleagues in SWCF, adult social care services and other relevant agencies.
- 21. Ensure all relevant staff responding to domestic abuse victims-survivors and perpetrators are trained in the use of the DASH risk assessment checklist.
- 22. Ensure all new and existing staff in A&B VAWP agencies receive regular updated training in the nature, dynamics and impact of domestic abuse on victims-survivors.
- 23. Ensure all staff are aware of the need for an area-informed approach in domestic abuse responses; to be aware of any service-generated risks to victims-survivors' safety, privacy and confidentiality.
- 24. To ensure the quality of responses is not compromised by professionals' proximity to and familiarity with local community networks and residents.
 - Sharing learning, information and practice
- 25. Create, opportunities for joint multi-agency training, learning, practice and knowledge exchange in DA-I approaches using existing expertise and resources.
- 26. Ensure an up-to-date list of local support agencies and services is available to all domestic abuse first responders.

Interventions with domestic abuse perpetrators

- 27. Ensure all domestic abuse perpetrators who come to the attention of SWCF, Adult Social Work Services or JS receive a robust response which challenges and holds them accountable for their behaviour and its impact on their partners and any children.
- 28. Implement and fully resource individual domestic abuse programmed interventions within JS for convicted domestic abuse perpetrators on CPOs.
- 29. Explore the local capacity available for introducing a groupwork programme for convicted domestic abuse perpetrators
- 30. Establish a parallel partner support service for convicted perpetrators on CPOs within JS to ensure women's safety and wellbeing during the term of their partner/ex-partner's Order.

- 31. Establish information sharing arrangements between agencies engaging with violent men and their partners to ensure risks can be accurately assessed and victims-survivors' safety assured.
- 32. Ensure all new and existing agency representatives attending MARAC are fully informed and kept updated about their roles and responsibilities in its function and processes.
- 33. Explore non-court ordered interventions for violent and abusive men who are involved in other adult service areas.
- 34. Implement the Safe and Together Model. (See Part 4)

Women survivors: support and advocacy

- 35. Increase the number of IDAAs in A&B to ensure a service is available for all women who need support. This should include women deemed high risk at MARAC, who have no children, have had no contact with WA/specialist services and where there is no court case or ASSIST involvement.
- 36. Ensure that all staff in services responding directly or indirectly to women victimssurvivors take a trauma-informed, DA-I approach in order to build trust in local multi-agency responses.

Funding and sustainability

37. Ensure there is sustainable, long term investment in specialist VAW organisations and domestic abuse services in A&B.

3.7 Conclusion

The findings in Parts Two and Three provide evidence that traditional agency child protection practices which focus on a failure of (mostly) women's parenting to protect children where there is domestic abuse remain embedded in A&B social work practice. However there is also evidence that DA-I approaches are beginning to introduce new perspectives in multiagency settings; specifically, in interventions with perpetrators and with women and children. These are however proving challenging to existing traditions of practice.

There are positive signs that DA-I systems such as MARAC, new services such as ASSIST working alongside established specialist services like A&BWA and A&BRC and practice

developments in JS provide ideal opportunities to introduce and share new perspectives and practices, to focus on women's safety and challenge outmoded attitudes and beliefs about domestic abuse. However, a mother's 'failure to protect' remains a foundational principle in child protection practice while violent and abusive fathers can often avoid the sight-lines of child protection processes. With the impact of their abuse and their parenting not factored into decisions about keeping children safe, mothers continue to face 'double jeopardy' by being both abused and blamed for it.

Covid-19 restrictions have brought considerable changes to existing working practices. Delivering services remotely via telephone and online, expanded in some cases and introduced for the first time by necessity in 2020 have proved successful in improving the accessibility of services for women victims-survivors and for convicted perpetrators, in reduced travelling time, increased service uptake and leading to fewer no-shows. The period of Covid-19 restrictions also moved all training online and, again, increased attendance and reduced travelling time for local trainers. The move to homeworking took its toll on workers and their managers moving to desk-based telephone support and the increased demand that was created at the time. Maintaining home/work boundaries also proved particularly challenging for those working with victims-survivors and perpetrators and placed additional support responsibilities on managers and supervisors. New ways of supporting staff were introduced to compensate for the absence of face-to-face support sessions and for the lack of personal contact with colleagues in offices. Managers introduced wellbeing calls and buddy systems, alongside support and supervision sessions, team meetings and in-house training sessions which were moved online using Zoom or Teams platforms.

Part Four

Safe and Together

4.1 Introduction

Part Four will focus on workers' and managers' views of the benefits and challenges of implementing Safe and Together (S&T) in A&B. Key principles of the Safe and Together model include working in partnership with women/non-abusing parent/carers in a strengths-based approach designed to keep them and their children Safe and Together and to achieve safety and better long term outcomes. The model also emphasises the importance of focussing interventions on the perpetrator's pattern of domestic abuse and its impact on the non-abusing partner, children and family life as a whole; of holding perpetrators accountable and stressing that their abuse is a parenting choice. (Mandel 2013; Scott 2019; Bocioaga 2019). Part Four will begin by giving the participants' perspectives on the implementation of S&T and its benefits for women and children. It will go on to discuss their views on its likely impact on professional practice specifically on interventions with perpetrators; finally the implications for leadership of A&B's responses to domestic abuse will be addressed.

4.2 Views on implementation and benefits for women and children

One manager noted that preparation ahead of implementing the training benefitted from early promotion and information to create interest and stimulate discussions.

I don't think there is any resistance from staff. I mean one of the things managers have done, leading up to this process - was a lot of information sharing, a lot of discussion and sending out stuff from the Safe & Together Institute and information from other areas. You know discussion, that sort of thing. There's real enthusiasm, people really get why we need this. (FM6)

The professionals who participated were overwhelmingly positive about its value and implementation in A&B. A majority had already taken part in the S&T online training and those who had not were enthusiastic about doing so in the near future. Where their colleagues had participated, there were examples of the practice lessons and wider learning being shared around the teams where they worked. Many felt that the training should be

prioritised and made mandatory for all new staff and those currently working in adult, child, justice social work and health services, in education, police, court and criminal justice services. One participant explained why this was important.

Why is S&T not a staple in terms of the degree that we do? It's just absolute madness because you're [changing] so many attitudes, beliefs, you know, 'are they both as bad as each other?' or, calling the relationship toxic when it's actually really coercive and really abusive and folk are still struggling to kind of make sense of what's really happening, the dynamics at play. So, [without it] it's frustrating and yeah, [creates] difficult working relationships. (FM3)

Many were aware that A&B's plans were part of the national implementation of S&T and were greatly encouraged to be part of the wider initiative.

I'm glad that we've got it now and I'm glad that it's on 20 local authorities' books. I think it should be blanket across Scotland. I think everybody should just be doing it, and that's the end of it. (FW2)

One worker already with prior experience of its introduction commented,

I think it'll be highly useful, having worked in other areas where it's being brought into social work. It's quite visible when you can see a local authority area that's not using it. (FW₅)

There was recognition however of the demands new training placed on already stretched people and resources,

To say, 'we want you to do this training, that training, a big online core Safe & Together training element...', is a big ask. Sometimes it's not possible, particularly for Health who have been under a lot of pressure, to take that on whilst they're covering other contingencies. So you know it's more the practical - the time and the resources and the energies and availability of staff that have been the barriers and cause some delays time-wise in what we'd anticipated being able to do. Thankfully, nothing too drastic. (FM6)

The challenge of training in new working practices post-pandemic also risked having little impact on already busy and overstretched people.

I think one of the biggest challenges is going to be that we're too busy. We're too busy to go on the training. We're too busy to follow that line. People are very busy, and things are as tight as they've ever been. We're likely to see further cuts in core services, and people will be busier. There's a stat that if you're very, very busy and you've got your head down, you do revert to the way you've always worked rather than concentrating on the new ways we would want to work. (MM1)

The implications for changing practice were recognised as considerable. The S&T principle of working in partnership with women to protect their children was strongly highlighted as important. The need for a complete change in perspective from the tradition of 'failure to protect' was particularly valued as a timely and more positive approach to working with women.

It's just so long overdue and it's just absolute common sense, you know, because victims are just persecuted over time, held accountable. They're the ones that keep the weans safe and the ones that get spoken to like that by some agencies - because they're so under-confident and worried about speaking to perpetrators. (FM₃)

The approach to working with women's protective strengths was also recognised as valuable and supportive.

Mums do a million things to look after their kids to make sure they're safe. Mothers are the best safe guarders of their children the majority of the time but they are damned if they do, damned if they don't a lot of the time by authorities. They are blamed for his behaviour whereas this way of working, it would yeah, it's looking at well, what does she actually do? What does her day look like? What's the umpteen things she is doing to keep these kids safe? (FM3)

Participants are encouraged that training in the new approach will bring a deeper understanding of women's situation, the decisions they may make and why they make them.

I think this Safe and Together is going to be fantastic just to kind of actually make [training] participants take a step back and look at, well actually, there's huge difficulties for women there, making these decisions. There's lots of reasons why they can't do that. They really struggle to make those decisions; it's really complex. (FW1)

However it was also recognised that changing existing SWCF practices and perspectives demanded a dramatic shift in approach.

One Children and Families worker had given an example of where they tried to take that leap of faith and almost let the woman risk manage. It felt so risky for them. It felt so risky, because it's really safe I think for workers to say get him out and don't have anything – it's a really safe all-round solution, it's just cut him out, and then all the risk is gone and we're going to go home. (FM1)

By approaching work with women from the perspective of partnering with them, workers recognised that all relevant services would have to be consistent in adopting the S&T approach in order to gain women's trust, create safety and overcome their deep- seated fears of social work involvement in their lives.

[Women think] 'I'll lose my kids and I'll never get them back. My whole life will collapse'. We need to be moving away from that, and other people need to be able to back you. Confident, they need to be confident, to be able to say, 'That won't happen. This isn't what this is about. This is because your ex is ready to burn your house down and, I don't know, putting shit through your letterbox. This is because of him, and we need to sort this out. But nobody is going to take your children away from you'. (FW2)

The S&T also demands a different approach to working with abusive men and as with the new approach to women, this would have benefits but also create challenges.

4.3 Impact on practice and multi-agency interventions with perpetrators

Participants recognised that a key aspect of implementing S&T would be to create a common understanding of where the risks to children are located – in the behaviour of the

abusive parent – and of managing those risks. This was regarded as a significant challenge to existing practice.

The barriers are in terms of trying to advocate for and ensure that people understand who presents the risk and how that affects victims. I think when Safe & Together is rolled out we're all going to be singing from that same hymn sheet. It's going to take a massive cultural change. (FM1)

Identifying the risk through engagement and conversations with abusive men is routine in JS but less so in SWCF and other agencies. There was a general acknowledgement that multi-agency S&T training could offer a means of developing skills in talking to men about their violence and abuse; in developing common approaches to risk assessment, creating opportunities for sharing expertise across different services and improving multi-agency working.

I think a really simple thing like that will transform and progress things so much. Workers aren't comfortable having those meaningful discussions with men, engaging men, allowing men to talk about their abusive behaviours in a way that's productive and helpful. (FM1)

People are worried about speaking to perpetrators about it. People teeter around it because of that lack of training and lack of kind of confidence. So, the victim just ends up getting it all the time, so this way of working, it's just absolutely fabulous. I can't speak highly enough of it. (FM3)

Existing challenges of proximity and familiarity for workers and women in rural or island communities would also apply to the introduction of S&T practices: lack of privacy and safety, stigma and unintentional confidentiality breaches.

We all know the difficulties of social workers and third sector key partners working with domestic abuse in [rural and island] environments. Where even finding a safe place to meet with a women or where they can talk, is difficult. Where, as soon as you step off the ferry, you're recognised and people are watching where you're going. Where it's not possible really to have a safe place on an island. All the complexities of conducting investigations in those environments and, you know, the

problems and challenges of doing that kind of work if you're actually part of that community yourself. All of that does make implementing Safe & Together more difficult. It doesn't make it impossible though and the benefits are still there. (FM6)

4.4 Implications for leadership

As noted previously, the majority of participants felt that S&T training should be mandatory. They also felt that senior management's leadership and their support for workers implementing the model was vital for ensuring consistency and for bringing about the long term system change which S&T aims to achieve.

So, I think you've got to have it from both ends. You've got to have management on board, really, really, on board, and get everybody through that training. It just totally makes sense to me what a massive difference that's going to make to women and children's lives. It's just huge. I think for Justice in particular it'll make engagement with Children and Families far more meaningful. (FM1)

For it to go across the board it needs to be the people at the top. So that the language they use is – or how they are saying things is - going to be disseminated through the workforce, because ultimately that's where it needs to come from. It's all right having however many champions, but if the person at the top doesn't understand the Safe and Together concept or practice, then they're still going to ultimately be making decisions based on previous practice, which I feel is sometimes quite outdated. (FM4)

Cuts to local government are squeezing public service budgets. Further, national funding and short-term allocation policies risk having an impact on local and national priorities and for S&T implementation in particular, in the longer term.

The barriers are a lack of investment in core services. Not just by Argyll and Bute, a lack of investment in core services. So, our funding model comes from the Scottish Government where we get short term grants which result in us only being able to put in short term solutions because we don't know if we'll have the money the following year or the year after, or the year after. That's not the way to make fundamental systemic change and yet that is the model for some of the anti-poverty

work, it's the model for some of the violence against women and girls work. It's the model for The Promise.²³ It's short-term grants for specific purposes. (MM1)

4.5 Recommendations

- Safe and Together training to be made mandatory for all senior leaders,
 management, new and existing staff in Children and Families and Adult Social Work
 Teams; Child and Adult Health; Education; Police and Criminal Justice System; third
 sector agencies.
- 2. Safe and Together refresher courses should take place regularly.
- 3. Management should ensure staff are given the time to undertake Safe and Together training to ensure maximum uptake.
- 4. To raise awareness among women and mothers currently involved in statutory or third sector domestic abuse services of the new Safe and Together approach being introduced in A&B.
- 5. To raise awareness among abusive men/fathers of the new Safe and Together approach being introduced in A&B.
- 6. To raise awareness among the general public of the new Safe and Together approach being introduced in A&B.

4.6 Conclusion

There is much enthusiasm for the implementation of S&T in A&B and it is being welcomed by the workers and managers interviewed for this research. Their support for this alternative to traditional professional responses to domestic abuse is due to what they regard as a widespread failure to directly address violent men about their behaviour and to target interventions which reduce the risks they create. These traditional practice approaches centred on women's 'failure to protect' have been highlighted throughout this report, in women's and in professionals' narratives. While some women welcome social work and statutory involvement as a protective factor, for others, the detrimental impact and distress it can cause is clear. The challenge of bringing about change to established practices, centres on workers having the confidence to have more direct conversations with

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²³ https://thepromise.scot/

abusive men about their violence and abuse and the parenting choices they make. It also requires workers to build trust and develop positive partnerships with women who have a long-standing mistrust of social work involvement in their lives. Addressing these two aspects of traditional practices is a central feature of the S&T model and its training courses.

There is ample evidence in this report and in research evidence from elsewhere, that the continued focus on women's shortcomings as mothers, rather on fathers' abuse creates service-generated risks to the long-term safety, health and wellbeing of women and children. The consequences of these can be grave: they can compound the risks women already face from the abuser, create considerable distress for them and their children and delay their ability to create safer and more stable home lives. Switching the focus away from a mother's apparent failings toward the source of the risk and harm – looking at the world through her eyes - is a seemingly simple shift in perspective. But it is one which demands the disruption of attitudes, behaviours and practices with long roots. To achieve this, the long-term commitment and leadership of A&B's senior decision-makers to women and children and to their workers is essential. The patience and persistence of the workers keen to implement the model and of those facing the challenge of changing their existing practice will also be required. However, everyone who participated in this research is optimistic that change for the better is possible. For the safety and wellbeing of many women and children in Argyll and Bute, that optimism should be fully supported with action.

4.7 Author's final remarks

This report has offered insights into men's use of violence in their intimate relationships in the A&B context. It shows that some men aged from their teens into their sixties continue to believe they are entitled to assault, abuse and control women. The impact on the women they are in relationships with and on their children is stark, profound and can be longlasting. Domestic abuse has been a feature of intimate relationships for centuries but has changed in nature over time. The way we define these behaviours reflects our increased understanding of the ways in which men use interpersonal violence in relationships and in the way it shape-shifts in response to changing social and economic contexts – from

'battered women' to 'coercive control'. The full range of behaviours which constitute domestic abuse have now been criminalised in Scotland. However, much of the abusive behaviour which goes on behind closed doors goes un-reported until matters reach critical or dangerous levels. This often leaves women and children at the mercy of a tyrant in their own homes for long periods. Much work has gone on in Scotland over the last twenty years to improve professional responses to domestic abuse by the agencies charged with the responsibility of keeping people safe. This work has changed the legal, policy and practice landscape for domestic abuse in Scotland immeasurably and for the better. What is evident from these findings however is that despite these developments, men of all ages continue to abuse women and children as they have done for decades, and, outwith the criminal justice system, there remain few effective strategies aimed at prevention.

While court-ordered interventions are improving and expanding, and Safe and Together - an effective secondary prevention intervention – is being implemented in A&B and across Scotland, there remain gaps in the general public's awareness and response to those responsible for domestic abuse and in national and local investment in more robust primary and secondary prevention strategies. This report has taken an ecological approach to analysis. The domains outlined in Figure 1 illustrate the areas where prevention strategies should be targeted. While this report has explored the personal, family and community domains of domestic abuse in relation to experiences, impact, response, intervention and prevention, the wider domains of culture and state remain outwith its scope and remit. However, there is still an important role for local domestic abuse prevention initiatives and campaigns aimed at young people, adults of all ages, employers, schools, campuses and among the general public. These findings also reveal a gap in general public awareness of the Domestic Abuse (Scotland) Act 2018, of what domestic abuse is, and that it constitutes criminal behaviour. These gaps should be addressed in local and national campaigns.

There is also a need for public awareness campaigns targeted at young people and adults which convey strong and positive messages about consent and equality in intimate relationships; about the signs and red flags to look out for in new relationships; and to encourage positive bystander approaches for everyone witnessing sexism, discrimination of all kinds, sexual violence and harassment, coercive and controlling behaviour. Although A&B covers a large geographical area, these findings show that its many small and tight-

knit communities could provide ideal settings to change the cultural narrative about domestic abuse and to join with the A&BVAWP in making such a beautiful area of Scotland safe for all who live, work and visit there.

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Have you experienced threats, abuse or violence from a partner, boyfriend or ex in the last 3 years?

Does/did your partner, boyfriend or ex try to control what you do, where you go, or other choices you want to make in your daily life?

If you live in Argyll and Bute and can answer YES to one or more of these questions, it is possible that you are experiencing domestic abuse. If so, the Argyll and Bute Violence against Women Partnership would like to hear from you.

We need your help

We would like your help to improve our domestic abuse support services across all of Argyll's remote, island, rural and urban communities. We want your views on the help and support services you need. We also want to know how to make sure information about our services is easy to find and that we are easy and safe to contact wherever you live in Argyll and Bute.

What's involved?

Our new confidential domestic abuse research project will help us find answers to how we can meet the needs of all women experiencing domestic abuse, wherever they live in Argyll and Bute. We want to hear your views, and will be carrying out safe, confidential one-to-one interviews at a time and in a way that is safe for you.

For further information about our research and how to take part, please contact our researcher, Dr Anni Donaldson in confidence at adresearch52@gmail.com

Tel. 07946109839 10.00 - 4.00 Tuesdays, Wednesdays and Thursdays.

For immediate support or information please contact:

Argyll & Bute Women's Aid: 01369 706636 - Argyll & Bute Rape Crisis: 01369 700800 - Scotland's Domestic Abuse and Forced Marriage 24/7 hour helpline on: 0800 027 1234 - In an emergency call: 999

APPENDIX 2.

Transforming Services to Women and Girls Research Project Information Sheet

1. The Research

This research is part of the *Transforming Services to Women and Girls Project* being carried out by the Argyll and Bute Violence Against Women and the Argyll and Bute Community Justice Partnership during 2022 and 2023. The aim of the project is to train and equip staff across public and voluntary sector services in Argyll and Bute to respond in a domestic abuse-informed way by putting the safety and wellbeing of those affected at the heart of their work. We want to make sure that all staff feel confident that they can identify and respond to the harms caused to women and children by domestic abuse, to manage the risks they face and support them to live their lives free from violence and abuse.

The research will be carried out in the first and final years of the project. It aims to explore the visibility, accessibility and effectiveness of current service provision for those affected by domestic abuse. The Partnerships are keen to make sure that the voices of those currently living with or who have recently experienced domestic abuse and or who are receiving and delivering domestic abuse services are involved in the future development of local responses to domestic abuse. The project is funded by the Scottish Government as part of the local implementation of *Equally Safe*, Scotland's national policy for preventing violence against women and girls.

2. The Researcher

My name is Dr Anni Donaldson and I am a researcher working with Argyll and Bute Violence against Women and Argyll and Bute Community Justice Partnerships. I am a qualified and experienced researcher and Honorary Research Fellow at the University of Strathclyde in Glasgow. I have many years of experience working on research into domestic abuse and violence against women and of interviewing those affected and professionals working in the field. I will be working with one designated member of staff from Argyll and Bute VAW Partnership who will provide administrative support to the research project.

3. Who can take part in the research?

We would like to talk to:

- adults living in the Argyll and Bute Council area who are experiencing domestic abuse from a partner or ex-partner or who have done so in the past three years;
- professionals and workers (paid and unpaid) providing services to those experiencing or perpetrating domestic abuse in Argyll and Bute;
- managers of services or professionals working with those experiencing or perpetrating domestic abuse in Argyll and Bute.

4. What will happen?

We would like to interview you as if you fall into one of the three groups listed in Section 3 above. I can conduct the interview face-to-face, over the telephone or via zoom or other online platform, whatever you prefer. It will take no more than 60 mins face-to-face/online or 45 minutes on the telephone. Every care will be taken to ensure your safety during the interview and immediately afterwards.

5. Confidentiality?

No names, identifying details or personal information will ever be used, your identity will be anonymised and a reference number assigned to your interview recording and transcript. Apart from the researcher, no one else will know who has taken part. None of your personal information will be shared with local services or with staff whose employers are members of the Argyll and Bute VAW Partnership. Taking part will have no impact on your ability to receive local services or on your employment (whichever is applicable).

6. Do you have to take part?

No. It is entirely voluntary and it is up to you to decide. If you agree to take part, you will be asked to sign a Consent Form to ensure your rights are protected. You will have 7 days after the interview to let us know if you have changed your mind about taking part. We will then remove your interview from the study.

7. What will happen to the information I provide?

With your permission, we will record and transcribe the interview for use by the researcher only. Though we may use your words in the report, or other publications, your name and personal details will never be used, nor will you be identifiable or your words attributable to you.

8. How to take part

Please contact me in confidence to arrange an interview:

Dr Anni Donaldson

Email: adresearch52@gmail.com

Telephone: 07946109839

Thank you for your interest in our project.



PRIVACY NOTICE

Transforming Services to Women and Girls Project

Your Personal Data

Argyll and Bute Council will act as the 'Data Controller' for the personal data you provide to us. The Data Protection Officer, who is responsible for ensuring personal data is managed in accordance with data protection legislation, can be contacted as follows:

Address: Governance, Risk and Safety Manager, Argyll and Bute Council, Legal and Regulatory Support, Kilmory, Lochgilphead PA31 8RT.

Email: data.protection@argyll-bute.gov.uk Telephone: 01546 605522

Why do we need this information?

You have chosen to communicate with Argyll and Bute Council's Violence against Women Partnership through a research project being undertaken by Dr Anni Donaldson, University of Strathclyde.

We may need to contact you with regard to the information/comments you have provided and how this is being utilised to inform the consultation and research process.

The lawful basis for collecting your information in these circumstances is Consent in terms of Article 6(1)(a) and Article 9(1)(a) of the UK-GDPR

What we will do with your information?

Your information will be used for analytical purposes as part of this research project. We may also publish reports based on the information provided as part of the research but all personal identifying data will be anonymised.

Your data will be stored on servers located within the United Kingdom. We will take all reasonable steps to ensure that your data is kept secure, and more information on how we do this can be provided by contacting the Data Protection Officer (contact details can be found above).

How long will we keep your information?

Your personal information will only be kept for the period of the research and a further 3 year period to allow for completion of a final report.

Automated Decision Making

No automated decision making will take place.

Your Rights

When you provide information to the Council, you will have the following rights:

- to withdraw consent at any time, where the legal basis specified above is consent (not applicable)
- ➤ to lodge a complaint with the Information Commissioner's Office see below for details
- ➤ to request access to your personal data please contact the Data Protection Officer if you wish to submit a request.
- to data portability, where the Legal basis specified above is i) consent or ii) performance of a contract (not applicable)
- to request rectification or erasure of your personal data, as far as the legislation permits – please contact the Data Protection Officer and provide details of what data you wish to be rectified or erased.

You can find out more about your rights in relation to data protection here: www.argyll-bute.gov.uk/data-protection or from the Data Protection Officer by telephone or in writing, as detailed above.

Information Commissioner's Office

The ICO is the UK's independent body set up to uphold information rights.

Information Commissioner's Office

Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF

Telephone: 0303 123 1113 Email: casework@ico.org.uk

The Information Commissioner's Office - Scotland

45 Melville Street, Edinburgh, EH3 7HL

Telephone: 0303 123 1115 Email: Scotland@ico.org.uk

APPENDIX 4

Transforming Services to Women and Girls Research Project **Interview Consent Form**

Please stions.

9	e tick or type YES in answer if you agree to each of the following ques				
	I have read the Participant Information Sheet and have had the opportunity to ask questions.				
	I understand that all the information will be anonymised (no names will ever be used) and treated confidentially. However, information which suggests that there is a risk of serious harm cannot be kept confidential and a decision will be taken with me regarding who to tell.				
	I understand that my anonymised words may be used as part of a report to Argyll and Bute Violence against Women Partnership, and in other publications.				
	I agree to the session being audio recorded.				
	I understand that the anonymised transcript of the interview will be stored securely.				
	I am happy to participate in the research, and understand that I do not have to answer all the questions and can stop at any time and do not have to say why.				
	I understand that I can withdraw my contribution up to 7 days after the interview.				
	Additional comments/instructions:				

	Print Name	Signature	Date
		-	
PARTICIPANT			
_			
CONTACT			
DETAILS			
RESEARCHER			

APPENDIX 5.

Transforming Services to Women and Girls Research Project Self-care guide for remote research participants

Thank you for agreeing to be interviewed. I want you to feel relaxed and comfortable before, during and after our research interview. I have prepared this short guide which I hope will help you if you are participating via telephone or video link.

Before the interview

Wherever you are when the interview is due to take place, here are some things you might want to think about:

- allow yourself 10-15 minutes before the interview is due to start to read/re-read this guide;
- make sure you are not likely to be disturbed during the session;
- is the setting private where no one else can hear our conversation?
- remember that wearing headphones will help mute my voice but not your own;
- try to be sitting comfortably somewhere with a cup of tea or coffee; you might want water to hand too.

If it is safe and appropriate, you may want to tell a trusted friend or family member that you are participating in the interview.

During the interview

Domestic abuse is a topic which can evoke strong emotions. You may find that what we talk about during the interview is distressing and evocative of your own or others' experiences.

Please remember that these reactions are quite natural and that it is important to take care of yourself.

If you need to, please just let me know if you want to switch off your camera, mute your microphone or take a break and we can do that.

If you do want a break, you may find the following useful: stand up and stretch, walk around the room and open a window if you can and look outside. Take some slow, deep breaths. Stamp your feet.

If you don't want to answer any questions please le me know and we will move on.

If you want to end the interview at any time, please tell me. If you want to continue another day we can arrange to do that.

If you want to end your participation in the research you are free to do that. Your interview recording will be deleted.

After the interview

If possible, allow yourself 15-30 minutes (or longer if you need it) after the interview just to relax, process our conversation and prepare to carry on with your day.

Some suggestions: make yourself a cup of tea or coffee and take some time to enjoy it. Listen to your favourite uplifting music; go for a walk; do something you enjoy afterwards – something just for you. **Treat yourself!**

Sometimes it will be necessary to talk it over with someone or to seek support. This might come from trusted friends or family.

Overleaf is a list of local organisations and helplines who provide support and information for those affected by domestic abuse and all forms of violence against women.

Thank you.

Dr Anni Donaldson

Argyll and Bute Violence against Women Partnership

E: adresearch52@gmail.com

T: 07946109839

ARGYLL AND BUTE DOMESTIC ABUSE AND VIOLENCE AGAINST WOMEN SUPPORT SERVICES

In an emergency call 999

For immediate support or information please contact:

Argyll and Bute Women's Aid

Tel: 01389 706636

• Email: info@abwa.org.uk

Website: Argyll and Bute Women's Aid Website:

http://argyllwomensaid.org.uk/

Argyll and Bute Rape Crisis

Tel: 1389 700800

Email: support@ab-rc.org.uk u

Website: https://www.rapecrisiscentre-argyll-bute.org.uk/

NATIONAL HELPLINES

Scotland's Domestic Abuse and Forced Marriage helpline: 0800 027 1234

(Available 24/7) or visit: https://www.sdafmh.org.uk/en/

Scottish Women's Aid website: https://womensaid.scot/

Rape Crisis Scotland national helpline (Available: 5.00pm – Midnight 7

days): 08088 01 03 02

Rape Crisis Scotland website: https://www.rapecrisisscotland.org.uk/help-

helpline/