

Respect

Responding to the challenges of Covid-19

Guidance for domestic abuse
& safeguarding practitioners
working with domestic abuse
perpetrators

Updated January 2021

Responding to the challenges of COVID-19: Guidance for domestic abuse & safeguarding practitioners working with domestic abuse perpetrators.

Version date: 18th January, 2021. This document will be subject to regular review and updates.

Who is this guidance for?

This guidance is intended as an aid for professionals/practitioners who are working with those who are abusive and/or violent within intimate and familial relationships, in the light of the challenges created by the coronavirus (Covid-19) pandemic. In order to prevent and reduce the spread of Covid-19, the UK government has issued guidelines which include the widespread implementation of self-isolation, household isolation and social distancing. Currently we are in the third national lockdown and the current circumstances present challenges which had not been present previously.

In March 2020 when the UK initially moved into lockdown restrictions there was a significant hold on services delivered to perpetrators. Organisations paused the delivery of behaviour change interventions and undertook a significant period of risk management and safety planning with clients. Over the proceeding months the specialist domestic abuse sector in the UK and overseas saw the development of remote or online interventions. Primarily these were delivered via video conferencing platforms. This guidance seeks to incorporate these developments in practice, as well as current restrictions and dynamics which organisations are experiencing.

Families continue to be under significant emotional and/or financial pressure – which although doesn't cause domestic abuse does increase the likelihood of domestic abuse taking place – victims face additional barriers to accessing support, children are more likely to be present in the home when abuse takes place (due to school closures), and perpetrators may not be able to attend domestic abuse perpetrator programmes. Perpetrators may also use the current restrictions on movement and contact as a means of abuse.

All practitioners should follow their own organisation's Health and Safety Guidance, Safeguarding Procedures and Business and Contingency Guidance. Ongoing guidance and advice is available on the gov.uk website and Respect would advocate that services who wish to continue with in person service delivery check with their local police force as to the appropriateness of these decisions.

Respect is working with our accredited members and our colleagues in Europe and North America to share knowledge and experience on how to work safely with those who perpetrate domestic abuse during the Covid-19 crisis. The learning from this has fed into this document and to the separate guidance for perpetrator services. As the crisis progresses, we will update and revise this guidance as needed.

Respect operates two helplines the Men's Advice Line, a confidential helpline for male victims of domestic abuse and those supporting them 0808 8010327 (www.mensadvice.org.uk) and the Respect Phonenumber, a confidential helpline for men and women who are harming their partners and families and those supporting them, 0808 8024040 (www.respectphonenumber.org.uk)

Key Messages

The Respect Service Standard for organisation working¹ with those who perpetrate domestic abuse is underpinned by a set of principles. These remain of critical importance in responding to domestic abuse during this period.

Safety First

Keeping survivors and children central to the intervention is essential in the context of service delivery. The challenges and stresses placed on families as a result of the Covid-19 pandemic are well established and it has been recognised that the levels of coercion, control and abuse within households has in some instances increased. It is also recognised that through fatigue, trauma and the cumulative effect of the pandemic there may be emergent abuse in relationships where there previously has not been. The ability to respond to these risks requires an effective response for survivors. If you are working with someone who is perpetrating domestic abuse you must ensure that

¹ <http://respect.uk.net/what-we-do/accreditation/>

you are working with the Integrated Support Service (ISS) and/or in partnership with specialist victim/ support agencies.

We know during this time that victim/ survivors who are trapped in a home with the perpetrator are going to find it increasingly difficult to access specialist support, anyone working with a family should prioritise the facilitation of enabling support for the victim/ survivor, when that has not been possible then we need to be aware that engaging solely with the perpetrator could increase risk and this either needs to be carefully managed or a decision should be made not to progress. There are tools currently available for practitioner's to use in working with victim/ survivors to safety plan during Covid-19 created by Safelive's and Women's Aid which can be found on their websites;

<http://safelives.org.uk/news-views/domestic-abuse-and-covid-19>

<https://www.womensaid.org.uk/covid-19-coronavirus-safety-advice-for-survivors/>

Practice Note: Ensure that you know who your local specialist survivor services are and identify what level of support and service they are currently offering so that you know where you can signpost clients to, if necessary. Many services have been able to secure additional funding during the pandemic but it should be noted that this does not ensure that capacity within services exists at the same level as pre-pandemic.

Do no Harm

Individual organisations will need to establish the viability of continuing with in-person service delivery. The ability to offer such services may depend on government guidance, rolling lockdowns, the availability of venues which allow for social distancing, the impact of Covid-19 on staffing and the circumstances for their clients. The prevalence of the new Covid-19 strain and its behaviour has been a significant cause for concern and this may influence the decision to offer a face-to-face service. The sector has responded to restrictions during the pandemic and the availability for online provision is now present in many areas as an alternative. Again, this is where the need for a survivor led approach is essential.

Guidance on the delivery of online interventions is available in the 'Respect Guidance for Online Service Delivery' document.

Respect continues to advocate that risk assessment and the ongoing review of service to individuals based on risk and survivor feedback is essential. Where risk is seen to increase which cannot be managed appropriately the delivery of behaviour change intervention should stop and risk management/safety planning be delivered in its place.

The System Matters

Statutory and Non-Statutory organisations continue to deliver a revised service with many members of staff working from home or not at all. This does not mean that multiagency working on domestic abuse is on hold and the ability to attend multi-agency meetings remotely has had many positives. However, it is crucial that your service knows who is still operating, the level of service available and the referral pathways. Statutory services are likely to be unchanged in their work but extremely pressurised due to a lack of practitioners. This will affect the way you manage risk and ensure an effective response for survivors and children.

Practice Note: Catalogue key local services and contacts, distribute these amongst your staff team. Where there is an inappropriate or insufficient response to risk consider how your agency will raise concerns with heads of other services. Your normal escalation process may be compromised at this time.

Support for Staff

Practitioners will be working in isolation, predominantly from their own homes without their peers. Treatment Management/ supervision will be crucial for them to explore their practice in relation to managing risk and delivering the intervention through new methods (phone/ video calling), as well as using new material. Support for your delivery practitioners, both professionally and emotionally, will need to be maintained and the accumulative effect of almost a year of restriction on social contact recognised. Ensure that there is a business continuity plan in place that respond to possible increases in the levels of infection in your area.

Practice Note: Daily or weekly team meetings will help to maintain positive lines of communication within the organisation and the delivery of key messages. We know that keeping check on the concerns of our colleagues has been so valued as the pandemic continues to affect each of us as individuals and as a community.

Direct support work with Service Users during the Covid-19 pandemic

Where direct work and engagement with service users has been established, and a relationship has been built, consider with the survivor service how this work could be continued via WhatsApp video/phone, Facetime, Skype, or phone contact in this period. Whilst some service users may engage well with this type of interaction, this may not be every client's preferred means of communication and does not come without risk; particularly when the service user and victim/survivor live together. Therefore, consideration should be given to the following matters:

- Concerns regarding confidentiality and privacy.
- Difficulty in tracking and assessing shifting emotions, moods, body language, use of substances etc.
- Immediacy of potential for harm, especially where the client is residing with the partner and/or children.
- Technical glitches, inconsistency of internet connection and thus finding contingency plans for connection/communication.
- Practical considerations should also be made, does the individual have access to this technology and the means for example to add credit.
- Where the perpetrator and victim/survivor are living together and contact with the victim/survivor is not currently in place action should be taken to prioritise this (please refer to the safety first section) before endeavouring to work remotely with the perpetrator if it is not possible to speak with or put support in place for the victim/ survivor then it may not be safe to proceed with direct work with the perpetrator, if you are unsure then as a professional you can contact the Respect helpline on 0808 802 4040 for advice in how to proceed.

If perpetrators and victim/survivors are residing together and you have ensured that the victim/ survivor is safe then you can proceed with the exercises below, if they are not residing together but still having contact then then you can also use the exercises in the appendix. Where you believe based on survivor input and risk assessment that behaviour change intervention can continue Respect would recommend this is frequently reviewed by practitioners and managers.

Current UK government guidance permits service users travelling within their local areas to attend support and interventions provided by domestic abuse services. It is recommended as some organisations have done that letters are issued to clients. These

letters should outline where and when the intervention is being delivered and by whom with a letterhead included. Respect would recommend that contact is also made with the local police force to communicate the intentions of the service.

Online / Remote Delivery with Service Users during the Covid-19 pandemic

Where remote work is preferred or is considered suitable based on the local area challenges it is important to recognise that this may not be appropriate for all clients. It is known that changes in the method of delivery can lead to clients disengaging. Therefore, any decision to change the approach to the offer of service (remote vs in-person) should be undertaken for a designated period of time and then reviewed. This should be communicated in writing to clients. This will allow a clarity in communication and a degree of accountability to the client. It is not recommended by Respect that this is reviewed on a week to week basis but month by month based on the best information available and in the context of ongoing guidance.

Services seeking to deliver interventions online will need to be aware of some of the following challenges:

- No offer of service should be made without consultation with the survivor and referring agency. Safety for survivors and children must be the overarching priority.
- A lack of access to devices such as tablets or laptops as well as poor or insufficient access to Wi-Fi and data can be a barrier to engagement.
- Clients need to be present for the whole of a session and in an appropriate space. Respect recommends a bespoke online participant agreement be in use to this effect.
- Not all clients will find it easy to engage with programme content online and may require additional sessions to support their learning.
- Clients need to be alone and without interruption for the duration of the session. If this cannot be managed the decision to offer an online intervention should be reviewed.

Practice Note: Mobile phones are not considered appropriate for intervention online. The screen size is not sufficient to allow for the participant to engage with their peers in the intervention or the

facilitators. Where resources are shared on the screen the detail can be difficult to distinguish.

Child contact

We have seen clients use child contact as a means to further abuse ex-partners during lockdown restrictions for example by refusing to return children by claiming it is no longer allowed. The government have released full guidance on staying at home and away from others, which clarified that in scenarios where parents live in separate households, children under 18 years of age can be moved between their parent's home's. However, current government advice should a child display any Covid-19 symptoms listed on the government health advice pages, then the child should be self-isolating and not travelling between households. Should you have safeguarding concerns about a child, this should be raised with your local authorities' children services department, whom have the statutory responsibility to investigate safeguarding concerns.

Family Court Clients and Service Delivery

For Respect accredited members in England who are working with CAFCASS clients please continue to liaise with your local Family Court Advisors for the most up to date guidance.

Further information can also be found on the CAFCASS website:
<https://www.cafcass.gov.uk/covid-19/>

If further support is needed, please access the following links:

Guidance on child contact arrangements:

<https://www.gov.uk/looking-after-children-divorce/types-of-court-order>

Guidance on compliance with family court child arrangement orders: <https://www.judiciary.uk/announcements/coronavirus-crisis-guidance-on-compliance-with-family-court-child-arrangement-orders/>

Safeguarding and welfare concerns about a child:

<https://www.gov.uk/report-child-abuse>

Additional information on support services

If you, or someone you know, is in immediate danger, call 999 and ask for the police. If you are not in immediate danger, you can contact:

- Respect helpline (for anyone worried about their own behaviour): 0808 802 4040
- Freephone 24h National Domestic Abuse Helpline, run by Refuge on 0808 247 2000, or visit www.nationaldahelpline.org.uk
- In Scotland, contact Scotland's 24-hour Domestic Abuse and Forced Marriage Helpline: 0800 027 1234
- In Northern Ireland, contact the 24 hour Domestic & Sexual Violence Helpline: 0808 802 1414
- In Wales, contact the 24-hour Life Fear Free Helpline on 0808 80 10 800.
- National LGBT+ Domestic Abuse Helpline: 0800 999 5428
- Men's Advice Line: 0808 801 0327
- Women's Aid: Live Chat chat.womensaid.org.uk, email, Survivors forum or Survivors handbook <https://www.womensaid.org.uk/>
- Elder Abuse Helpline – <https://www.elderabuse.org.uk/> helpline: 08088088141
- NSPCC Helpline <https://www.nspcc.org.uk/what-you-can-do/get-advice-and-support/> or 0808 800 5000
- Local Government Association: resources to help others, includes a batch of multi-lingual hygiene posters – <https://adcs.org.uk/health/article/coronavirus>
- Private online support group run by Sam Billingham www.sodahq.uk or Abuse Talk run by Jennifer Gilmour #AbuseTalk – run via @AbuseTalkOnline (only if it is safe to do so).
- NCDV <https://www.ncdv.org.uk/> and Advice Now's resources at www.advicenow.org.uk for those requiring support for injunctions or Legal advice
- Stalking Guidance: <https://www.suzylamplugh.org/pages/category/national-stalking-helpline>
- For service users who are self-employed, HMRC have just set up a helpline specifically for the self-employed and businesses who will be struggling now. The Covid-19 helpline: 0300 456 3565. They will provide advice on tax and any benefits you can claim.

- [Interim guidance for first responders and others in close contact with symptomatic people with potential Covid-19.](#)

Apps and online content for victims–survivors

- Chayn have set up a Telegram channel which survivors can sign up to – they'll be sharing supportive notes and helpful information every day. Link here:
<https://twitter.com/ChaynHQ/status/1239235431469854723>
- There are also useful apps, for example, the Hollie Guard app, which can also offer reassurance. The details are here:
<https://hollieguard.com/>
- Bright Sky can be found here: <https://www.hestia.org/brightsky>. The Bright Sky app is currently available in English, Urdu, Punjabi or Polish and is free to download.
- Women's Aid: Live Chat [chat.womensaid.org.uk](https://www.womensaid.org.uk), email, Survivors forum or Survivors handbook [https://www.womensaid.org.uk/](https://www.womensaid.org.uk)

Appendix

Risk management and de-escalation techniques/exercises

Below are some exercises to help practitioners work with a service user to aid them in de-escalating their negative emotional states and subsequently manage risk. Should you require further support or guidance on how to implement these techniques with a service user, please contact the Respect phone line: 0808 802 4040.

Again, these techniques should only be used when it is safe to do so; the safety of victims and children is paramount.

Emotional regulation

Emotional regulation is the process by which an individual influences which emotions they have, when they have them and how they experience and express them. Every day we are confronted with a significant number of differing emotion provoking stimuli, most of which require some form of response. Emotional regulation techniques can help to modify and create space for non-harmful responses to these experienced emotions.

When should a client use these strategies?

Whenever they recognise that any of these cues to becoming violent or abusive are present:

- ➤ They want to have an argument.
- ➤ They notice physical signs that you want to escalate things (e.g. heart rate, energy levels, gesturing, speaking louder, can't sit down, tension, temperature changes, etc.)
- ➤ They feel angry, jealous, righteous, etc.
- ➤ Their head is racing and you're winding yourself up, going over why you're right and they are wrong, what you can't stand about your partner, etc.

4-7-8 breathing

This is a brief and very simple technique to interrupt unhelpful thinking and regulate emotions at times of stress.

Explain that the idea is that you don't just use this technique when you feel stressed but use it a few times a day whatever is going on for you. The advantage of it is that it only takes about a minute, but

if you do it regularly you should feel the benefits. It often doesn't seem to help much at first, but the benefits seem to build over time.

It may be worth pointing out possible pitfalls, for instance your partner might worry what is going on if you suddenly start doing a breathing exercise without explaining what is going on. So, it is perhaps best to do this when you are on your own.

Some possible explanations for why this can be helpful:

- It means you take a break and interrupt any escalation of your emotional state.
- Breathing out long and slow is thought to help reset the fight flight response.
- Concentrating on counting during the breaths helps to interrupt repetitive habits of thinking
- Also, it's hard to think clearly (much less be healthy) if you're not getting enough oxygen. And when you are faced with anxiety or anger, it's common to breathe very shallowly, hyperventilate, or even unconsciously hold your breath, which affects your thinking and your health even more.
- The 4-7-8 breathing technique basically takes the shallow, oxygen poor breathing you normally do when you are stressed out and turns it upside down. Over time this can have positive effects on your body and your mind.

Start practising '4-7-8' method with these steps:

- Exhale completely through your mouth.
- Close your mouth and inhale quietly through your nose to a mental count of four.
- Hold your breath for a count of seven.
- Quietly exhale completely through your mouth, to a count of eight.
- This is one breath. Now inhale again and repeat the cycle three more times for a total of four breaths.

Body Outline

Emotion, especially on the extreme end, is a vividly felt bodily experience. This exercise is inviting the client to think about where negative emotion is felt within their body. The aim is to facilitate the client's recognition of their early signs and signals for their problematic/abusive behaviours, playing out physiologically and/or

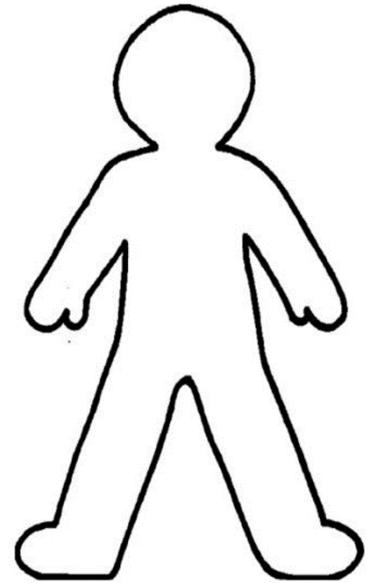
psychologically; further enhancing their opportunities to modify how they respond to stressful/emotive stimuli.

Exercise: Take a moment or two to think about where you feel anger/ frustration /rage in your body. Then write or colour it onto this body outline: (With this exercise you could ask clients to draw out a figure as shown below or ask as the likely hood is that these are being done remotely then ask them to describe where on the body)

Where do you feel anger and what does it feel like? Where do you feel rage and what does it feel like? Where do you feel distress and what does it feel like?

You can then talk through with them using some of the following techniques when they notice these feelings, they can try:

- Slowing your breath.
- Dropping your shoulders.
- Relaxing your face/ hands, etc.
- Feeling the weight of your body pressing on the floor or in the chair you are sitting in.
- Loosening your joints.
- Mindfulness.
- Breathing techniques e.g. 4-7-8.
- ➤ Positive self-talk.



Sources and signs of stress

In this exercise we invite the service user to engage with the areas/factors of their life that present stress and then identify non-harmful behaviours which can help them deal with the presenting stress non-abusively.

If a service user is finding the 'what helps' column challenging, you can help the service user by asking questions which aid the service user identifying past situations whereby stress has been encountered and they dealt with this by employing non-harmful behaviours. The service user could also be asked to reflect on how the first two exercises would be beneficial to employ when faced with their particular stressor. Therefore, as an extension of the prior exercises, this exercise invites the service user to both identify and list

perceived stresses, but places responsibility and agency on the service user for bringing about non-harmful responses to deescalate the stresses.

	Source of stress	Signs of stress	What helps?
Me			

Timeout

Time out is a tool that perpetrators can use to deescalate their hostility towards their partner, or others. It requires that put some physical distance between themselves and their partner. During a lockdown this becomes more difficult, so it requires preplanning.

What does a time out look like?

- Separate for one hour.
- That they calm yourself down, go for walk if possible, isolate in a separate room/the garden, whatever helps (stay safe and sober).
- There is focus on winding down, not up.
- Return home/to the same room only when you are both ready.

The way you can explain this to clients is below;

Time out is designed to help you manage yourself. It is not to be used to win arguments or to control your partner or to work yourself up into a worse state.

Time out should only be used as an emergency measure to achieve a non-abusive outcome to the situation. This tool not a way to avoid discussion of difficult issues over the longer term or to avoid hearing criticism.

You should always discuss the plan with your partner in advance so that they know its purpose and exactly what you will do.

Ideally you should initiate the time out every time it is used. If your partner prompts you to take a time out view this as helpful rather

than a punitive, patronising or derogatory remark, they maybe be more aware of how angry you are than you are.

You must decide (and your partner should know) how long you will leave/isolate for (usually one hour) and where you will go.

You shouldn't consume alcohol or drive during this time.

You must not use time out to rehearse and strengthen your own arguments in your head or wind yourself up (note what you are saying in your head – is it making you angrier? Also, what are you doing, for instance pacing up and down is generally a sign of increasing agitation).

If there are reasons why you cannot go out of the house, you should negotiate in advance with your partner a space in the home where you can go. If your partner follows you, you should be appropriately assertive in asking that they leave you alone and again explain why you need to have some time alone. If this does not happen, you should remove yourself from the house.

You should telephone at the end of the period to check if they feel safe and negotiate your return.

Steps to take

- Note the agitation or signs of increased anger.
- Tell your partner calmly that you are going to take a breather or time out.
- Reassure them that you will be willing to discuss the issue/point of conflict when you return and are calmer.
- Tell them where you will be and for how long.
- Leave/isolate.
- If your partner follows you ask them calmly to leave you alone for this amount of time.
- If this does not work leave to somewhere else.
- Discuss this when you return.

Informing your partner about time-out

- It's very important to talk about time-outs with your partner well ahead of when you will need to use one.
- A time-out is a tool for you, not for your partner – you don't need their support to use it.
- Your partner will only come to trust your use of time outs if you really stick to the rules.

For service users whom have experience with using timeout, the area of focus should be around inviting the service user to discuss how they may amend their successful strategy (going for a walk and listening to music playlist or meeting with a confidant etc.) in light of the COVID-19 restrictions they maybe facing. For a service user who might be self-isolating and thus not able go outside, could still engage with the listening to music element of their time out strategy or make a call to their confidant. Additionally, practitioners could discuss the wealth of mindfulness and relaxation resources online and smart phone applications that can aid with emotional regulation.

Practice point: People can and will misuse the idea of taking time outs to avoid arguments or to provide an excuse to leave a situation that they find uncomfortable. This can have the effect of further disempowering their partners. When clients feedback that they have used time out, check carefully the circumstances and the extent to which they kept to their rules. Where possible, it is important that you communicate well with the partner services to ensure that your client's partner understands the idea of time out. Do not introduce this activity in any case where you consider that it will increase the risk of abuse.