

22/06/2018

6th January, 2017

Birmingham Domestic Abuse Prevention Strategy 2017 - 2020

Healthwatch Birmingham Response

Dear Sir/Madam,

Healthwatch Birmingham welcomes the opportunity to respond to Birmingham City Council's consultation on 'Birmingham Domestic Abuse Prevention strategy 2017 - 2020'. As one of a national network of Local Healthwatch, Healthwatch Birmingham is mandated by Government through the Health and Social Care Act 2012 to give citizens and communities a stronger voice to influence and challenge how health and social care services are provided in their community.

As a consumer watchdog for health and social care services in Birmingham, we have listened to patients, the public and carer's experience of the services they access. These experiences have revealed a clear link between health, social services and domestic violence and abuse. Domestic abuse has serious health consequences that might be physical (bruises, burns, lacerations, and other injuries that can lead to disabilities etc); sexual and reproductive (sexually transmitted diseases including HIV, pregnancy complications); mental (depression, sleeping/eating disorder, suicide); and behavioural consequences (alcohol and substance abuse). As the strategy under discussion rightly observes, domestic violence and abuse not only impacts the individual to whom it is directed but also those around them such as children who are likely to exhibit behavioural and physical health problems (depression, anxiety, and violence towards others).

Below are some of the feedback we have received from the public that highlight issues of domestic violence and abuse:

"I got referred here by my GP because of abuse at home and me having disorders. The mental health team would promise me support but sadly I never achieved anything. One member of staff however, who was then made my main mental health doctor at the centre did contact services on my behalf and did everything to try and get me the support I need; however the services would not contact me and I didn't end up getting this support 'til the time the centre closed and I was referred to Longbridge Health Centre before being let down again - told they now only help people with schizophrenia"



Healthwatch Birmingham

Cobalt Square, 83 Hagley Road, Birmingham, B16 8QG

www.healthwatchbirmingham.co.uk | info@healthwatchbirmingham.co.uk | 0800 652 5278

Company Registration No: 08440757

“Called to say that she saw her psychologist yesterday and has been referred to The Rape and Sexual Violence project. The waiting list is 14 weeks for assessment and the therapy will be over 4 months. She is seeking alternative providers as the length of wait is too long and she is concerned that she is unable to pay for private consultations. Her GP wants her to get better from severe depression and abuse”

“Initial call was regarding the person's relationship with her husband and not being able to get good advice from the domestic violence helplines and organisations. Offered to find out details of other organisations to signpost to for support. Checked with caller for a safe time to call back. Called back with details of Birmingham Asian Resource Centre, Anawim, and Advocacy Matters”

This feedback highlights the key impact of domestic violence on mental and physical health. However, other important issues these experiences highlight is the interface between victims of domestic abuse and primary care services such as GPs and secondary care; issues around accessing these services as well as voluntary sector services (including waiting times); having a holistic, person centred, coordinated response to Domestic Abuse; non-responsiveness of services to victims; and training for staff on how to support victims of domestic violence and abuse.

At Healthwatch Birmingham we are passionate about putting patients, public, service users and carers (PPSuC) at the heart of service improvement in health and social care in the city of Birmingham. In line with our strategy, we are focused on helping drive continuous improvement in (PPI) and patient experience. We also seek to champion health equity so that PPSuC consistently receive care which meets their individual and collective needs. We have therefore focused our comments on aspects of the consultation which are relevant to these issues.

General Comments

- Whilst Healthwatch Birmingham acknowledges the progress made since the 2013 strategy, we are concerned that although the strategy observes the role of gender in abusive relationships, it does not address the different needs for men and women who are victims of domestic abuse and violence. A good equality analysis would help identify the needs of different groups such as BME, LGB & T, older women, disabled women and generally men and women who are victims of domestic abuse and violence. Identifying these needs will ensure that the proposals in the strategy effectively address these needs. We therefore urge you to consider these issues as



Healthwatch Birmingham

Cobalt Square, 83 Hagley Road, Birmingham, B16 8QG

www.healthwatchbirmingham.co.uk | info@healthwatchbirmingham.co.uk | 0800 652 5278

Company Registration No: 08440757

you undertake 'further assessment following full and meaningful consultation on the draft Strategy' as indicated in the Stage One Equality Assessment.

- The documents provided in support of this consultation including the draft strategy itself is not clear on what engagement activities took place prior to the consultation. As a result, it is unclear the extent to which the views of the public and other stakeholders were taken into consideration in adopting the three priority areas. However, we do note that the consultation stage does place some emphasis on citizens, practitioners and victims voice. Healthwatch Birmingham would like to urge you to not only listen to people's views but also demonstrate how these views have affected the final strategy. This will ensure that people feel part of the decision-making process not just rubber stamping decisions that have already been made.
- Healthwatch Birmingham would like to commend the Council for producing an easy read strategy document which makes it accessible for more people. However, the Council has not offered alternative methods for responding, especially access to printed copies (as not all people have access to printing facilities and might not be able to access email, twitter etc). In addition, the strategy document and questionnaire was not offered in any other format or language. Considering the diversity of Birmingham city which has 42% of its residents coming from ethnic groups other than white and where 91 different languages are spoken (2011 Census), failing to offer the strategy in different languages (at least upon request) excludes some groups from contributing.
- Healthwatch Birmingham commends the strategy for clearly outlining the expected outcomes, associated actions, and how these will be measured. However, the strategy does not clearly outline how and when the proposed commitments will be implemented.
- Furthermore, the strategy is not clear on the resources it requires to deliver the commitments outlined nor does it take into account the difficulties that might prevent effective implementation of the strategy. Most notable is the recent plans to reduce funding by £10m over two years to Supporting People and third sector commissioned services budget, which offers front-line services to domestic abuse victims, homeless people, young carers, offenders and ex-offenders and people with a disability. This has the potential to impact some of the actions outlined in the strategy, especially around community engagement where third sector organisations would play a key role. We believe that there should be a financial commitment attached to the delivery of the strategy.
- Whilst the strategy acknowledges the impact of domestic abuse in relation to health and social care there is no reference to any public health agenda to which the strategy could contribute to achieving. The Public Health Outcomes framework for England and the Adult Social Care Outcomes Framework are key frameworks to which the strategy can contribute. These frameworks have domestic abuse and violent crimes as indicators and people free from physical and emotional abuse as outcome measures. Linking the strategy to frameworks covering other services might lead to



22/06/2018

a more comprehensive strategy that addresses domestic abuse and violence at the individual, family and community level in order to promote change in attitudes.

- In the introduction to the strategy, the Council indicates that the long term ambition for Birmingham is a city free from domestic abuse. We believe that this might not materialise if other aspects of domestic abuse such as Female Genital Mutilation (FGM) are not addressed within this strategy. Birmingham has the highest number of FGM cases in England with a 120 new cases reported within three months in 2016 alone. The victims of FGM are predominantly children and nationally FGM forms part of the definition of domestic abuse and violence.
- Healthwatch Birmingham would like to see an emphasis on using service user insight, experience and involvement to drive service design and continuous improvement through the life of this strategy.

Generally, Healthwatch Birmingham agrees with the three priority areas outlined in the strategy. However, the Council needs to consider drawing up actions and outcomes that are measurable, are clear on who is responsible for carrying out particular actions, are realistic in regards to resources required and clearly state when they will be achieved.

Yours Sincerely,



Chipiliro Kalebe-Nyamongo

Policy Officer



Andy Cave

Chief Executive Office



Healthwatch Birmingham

Cobalt Square, 83 Hagley Road, Birmingham, B16 8QG

www.healthwatchbirmingham.co.uk | info@healthwatchbirmingham.co.uk | 0800 652 5278

Company Registration No: 08440757

