

We Matter Too - Executive summary

The work of several organisations including SafeLives and Women's Aid has highlighted that domestic abuse services are less effective in reaching some sections of the population. The SafeLives Spotlights report, 'Safe Young Lives' highlights that of all those experiencing domestic abuse, young people aged 16-20 and 21-24 years face the highest risks¹. Disabled people also face far higher risks of domestic abuse compared to non-disabled people^{2,3}. The Nottinghamshire Independent Domestic Abuse Service found that there were very high levels of family members with a disability within the families they supported⁴. In addition, Galop in their 2018 study, 'LGBT+ people's experiences of domestic abuse', found that 55% of participants self-identified as having a disability⁵.

This research project, 'We Matter Too', specifically explores the experiences and needs of those who are both young and disabled experiencing domestic abuse in order to address the gap in our understanding of the specific needs of this group.

Funded by Lloyds Bank Foundation for England and Wales, the 'We Matter Too' project has undertaken; in-depth interviews and discussion groups with disabled young people aged 17-30, and interviewed 37 practitioners, including managers and those in leadership roles in national organisations and from a range of statutory and voluntary services across children's and adult's social care, health, education and criminal justice. This includes services that address domestic abuse and those working with disabled children and young people.

¹ SafeLives (2017) *Safe Young Lives: Young People and Domestic Abuse*. SafeLives, Bristol.
<http://safelives.org.uk/sites/default/files/resources/Safe%20Young%20Lives%20web.pdf>

² Thiara. R., Hague. G., and Mullender. A (2011) Losing out on both counts: disabled women and domestic violence. *Disability and Society*, 26, 6, pp757-771.

³ Public Health England (2015) *Disability and Domestic Abuse: Risks, Impacts and Response*. Public Health England. London.
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/480942/Disability_and_domestic_abuse_topic_overview_FINAL.pdf

⁴ Nottingham Independent Domestic Abuse Services (2017) *Together: Research into the Awareness and Experiences of Domestic Violence and Abuse amongst Young People with Special Educational Needs and Disabilities*. NIDAS, Mansfield.

⁵ Magić, J. & Kelley, P. (2018). LGBT+ people's experiences of domestic abuse: a report on Galop's domestic abuse advocacy service. Galop, London. http://www.galop.org.uk/wp-content/uploads/Galop_domestic-abuse-03a-low-res-1.pdf

The project aimed to:

- Understand more about disabled young people's experience of support and intervention
- Explore what disabled young people want from domestic abuse services and support agencies
- Understand from professionals what works to support disabled children, young people and their families and what the barriers to delivering this support are.

The overall objective of the project was to develop the evidence base and shine a light on the needs of a group of young people less likely to be noticed, asked, heard or able to tell about abuse that goes on often behind closed doors. It aims to support practice development, inform service design and delivery at management levels and seek the development of policy and guidance at strategic levels. An additional outcome of the project was to develop and pilot training materials in order to directly improve understanding and practice responses by professionals.

Key findings

What disabled young people said they need:

- To be asked.
- To be treated like they matter.
- To have professionals who check if they have understood.
- For professionals to understand that 'asking for help is hard; it is scary'.
- For professionals to understand that it is difficult to make sense of what happens – we may not have understood that what we are witnessing and experiencing is abuse.
- For professionals, and especially the police, to understand that we are scared.
- To have people who try to understand our behaviour – we don't always use words, we don't always have the words.
- To have help to understand healthy relationships and choices.

Hidden population and hidden needs

1. Despite evidence that both young people and disabled people face greater risks, the effects of domestic abuse on disabled young people and their needs are not high on the agenda for policy and practice and often remain hidden.
2. Many young disabled people are living in harmful relationships often without knowing where to go. They face long delays in getting help which often does not appear until they are in crisis.

3. Many disabled young people do not meet the criteria for receipt of care in children's, young people/transitions or adult disability services, and are not able to access mainstream services. They therefore remain invisible.
4. A significant group who remain hidden are those young people who do not have a diagnosis or their disability recognised, but who have learning needs and who have already experienced other losses, trauma or neglect and/or who may have been excluded from education.
5. The lack of service provision meant that few practitioners could give examples where disabled children and young people had received appropriate interventions. Some had not had help for years. This may lead to a potential for unresolved traumas, and in some cases for normalised abusive behaviours to manifest in disabled young adults own relationships.
6. Concerns were raised about the high levels of violence disabled young adults faced within their own intimate relationships. Issues of isolation, low self-esteem, lack of education about healthy relationships and invisibility to services heightened vulnerability.
7. The specific targeting of disabled young people for sexual, financial and criminal exploitation was highlighted, and the links between experiencing domestic abuse and being targeting by criminal gangs was raised as an increasing, unmet issue.
8. Disabled young people are less likely to have a voice, be recognised, heard and seek or receive help than some other groups of young people. When they are distressed or unsafe they are not always understood; this has parallels to other forms of relationship harm and to exploitation.
9. While there are some pockets of good practice in a small number of services, it is patchy and the needs of young disabled people too often fall through the gaps between services, particularly between children and adults' services.
10. The research highlights how difficult it is for disabled young people to recognise domestic abuse, talk about it and seek help. Service provision is not readily available.
11. Practitioners highlighted that often it is not until placed away from home for other reasons that some young disabled people get a first opportunity to let anyone know what they have experienced.

Lack of data and awareness



12. Despite the Care Act (2014) introducing domestic abuse as a form of harm, many organisations do not collect data regarding disabled young women or men who have contacted them, been referred or supported.
13. Some services do not yet recognise the need to actively promote and explicitly provide support for disabled young people; meaning there is little visible help available to tackle increased risks and isolation.
14. The research has highlighted that there is a significant lack of recognition and awareness of the issues, or of multi-agency practice, from some key areas across social care, education, health, police and disability organisations to meet the needs of this group.
15. Awareness by frontline practitioners of unmet need was evident in many cases but the majority had not had appropriate training and lacked knowledge and awareness of the needs of this group.
16. Lack of previous contact or working relationships between domestic abuse and disability services in local areas was evident in many areas.
17. Staff in some services are often unaware of the impact of disabilities, particularly learning and sensory needs on young people and the risks they might face.
18. Staff in supported living environments, day centres and day care need to be included in training about domestic abuse and be encouraged to consider the safety of relationships and power dynamics wherever disabled young people spend their time.
19. Many services do not have the resources, nor have they adapted existing resources, to reach or deliver their support in ways that would work for disabled young people.
20. Many services, both statutory and in the voluntary sector, reported lacking the skills and experience to work with disabled young people.

Gendered and sexuality needs of disabled young people

21. Disabled young mothers fear losing their children and are therefore reluctant to ask for help when they face domestic abuse.
22. Additional challenges were noted for young mothers with disabled children meaning families were forced to stay in abusive situations. These included a lack of mobility for

families who need to be close to specialist provision, who lived in adapted homes, whose children needed specialist equipment, or who needed support from wider family/friendship networks. Ties to a geographical area reduce the chances of finding safe alternative housing given the limited provision available. Few refuges also accommodate teenage boys making it difficult in terms of accessing help.

23. Disabled young men are far less visible in any services, with the exception of some special colleges and residential settings who reported the need to offer help and support with domestic violence. However, these education settings include only very small numbers of disabled young men in relation to the national population of disabled men who are estimated to be experiencing domestic abuse.
24. A particular gap was identified in meeting the needs of LGBT+ disabled young people experiencing violence in their relationships. The limited safe spaces, places and services available increases the isolation of this group.

Normalisation of violence against disabled young people

25. Concern was raised regarding the use of restraint and force against some disabled young people in some residential, secure, educational and other settings which was felt to be leading some disabled young people to internalise messages that physical aggression is normal.

Misconceptions concerning trauma and abuse of disabled young people

26. Concerns were raised by professionals that a lack of understanding led to assumptions being made that signs of abuse, trauma or distress were related to a child's impairment, leading to less identification of domestic abuse.
27. Recognition comes hand in hand with training and whilst many services in all agencies demonstrated deep commitment to young people, working often in very difficult conditions, they lacked knowledge and training concerning trauma and abuse of disabled children.

Importance of careful consideration of violence by young people towards family and carers

28. Violence towards parents/carers and siblings by disabled young people is a concern and requires careful consideration. Blaming and criminalising young people in this context is not a lasting solution. Support and listening to parents/carers is crucial, as well as understanding a young person's behaviour and its context.

29. The focus has often been upon young people's behaviour (seen as challenging) rather than understanding it and what is driving it. This needs to be linked to reflection on earlier provision of key support, communication and therapeutic work and the need for a coordinated, holistic and a whole life multi-agency approach in the planning of support for families with disabled children and young people as they grow.

Involving and listening to disabled young people

30. Disabled young people want to be heard about domestic abuse, they have many suggestions about how to improve both prevention and provision to meet their needs. Having someone to talk to/communicate with and who listened to them was seen as vital to their protection and recovery.

31. Disabled young people want help to learn about healthy relationships and for professionals to recognise that they have a right to this information as they will have their own relationships.

32. Creating the right conditions for staff to notice and for disabled young people to feel safe to ask and communicate is key.

Need to develop and evaluate practice in working with disabled young people


33. The pockets of growing, emerging positive practice need to be evaluated, further developed and learning shared.

34. There is a general appetite to understand the complex picture of domestic abuse and the particular circumstances of disabled young people. This should be further encouraged.

35. Practitioners are honest about what they know and do not know and are looking for better solutions. Workers, however, sometimes do not ask because they feel they should know.

How to improve practice

36. Good practice with disabled young people was identified as understanding the social and emotional consequences of unhealthy friendships and relationships where disabled young people can be isolated and vulnerable.

37. Creating trusting relationships through taking time, providing practical help and showing kindness and consideration was identified as of importance in supporting disabled young people.
 38. Some young disabled adult care is dated culturally and is entirely about protection and containment, rather than opening up conversations and proactively meeting needs. A refocus of practice was seen as vital.
 39. Some parents, carers and workers are over protective, with the result that they may avoid helping disabled young people understand healthy relationships, believing that they may not wish to enter relationships. Parents/carers and workers need support to reframe these messages.
 40. Transitional planning is an opportunity to embrace these areas if addressed in a context of multi-agency and partnership working.
 41. The transition of disabled young people into adult social care is a key time where domestic abuse and other forms of violence and exploitation including sexual and financial exploitation, and modern slavery should be firmly on the agenda.
 42. Greater awareness and recognition is needed of it being part of the responsibilities for practitioners to help disabled young people make sense of relationships, of consent, safety and healthy relationships and how to recognise these; some young people do not receive help to make sense of their rights to be safe, rights to choose and the rights and choices of others.
 43. Sex and relationships education needs to be part of training agendas and planning at case level to help disabled young people move forward in their lives and to help staff identify young people who have not had this help. This needs to be considered in safe ways in multi-agency practice and partnership with the young person. These issues need to be seen as being as important as other aspects of preparation for choices ahead and transitions to adulthood. They need to be included in reviews and care planning.
 44. Training needs to include working with complex emotions, fear and anxiety. Domestic abuse challenges practitioners to make sense of complex dynamics, to learn to be able to positively challenge and to have management support to do so. Staff need the right support and guidance to work effectively and to teamwork across agencies to help disabled young people to be safer.
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45. Work to explore values and ensure reflection to create open safe non-discriminating cultures amongst professionals is important and needs leadership.
46. Disabled young people need staff to be able to understand how their capacity for choice and ability to exercise capacity may be limited by pressure, coercion, threats, or limited options due to structural barriers. And that this may not be expressed verbally, may take different forms and that young people need support to be able to learn to trust and understand difficult options. They may need advocacy and multi-agency responses.
47. Work to tackle those who harm and abuse needs to be on the map; it is not enough to support victims alone. It is also vitally important to address victim-blaming practice. Training for staff needs to include the need to work in partnership to ensure the effective sharing of information, analysis and teamwork to address and investigate abuse.

All young people face challenges growing up, forming relationships and being safe; this project hopes to contribute to increasing safety by improving how we understand and respond to the needs of disabled young people who have the same rights to be safe as all young people. The following presents recommendations for change.

Recommendations

National and Local Policy Level

1. The 2014 Care Act's recognition of domestic abuse was very much welcomed and now needs to be translated into national multi-agency practice guidance informed by research and by the Equalities Act to address the specific additional risks of invisibility and difficulties accessing support faced by disabled young people.
2. Safeguarding Adults Boards and Local Safeguarding Children's Partnerships should work together for this group and in discussing the practice and recommendations made by ADASS and the LGA in 'Adult Safeguarding and Domestic Abuse; a Guide to

Support Practitioners and Managers'(2015)⁶ and in 'Prevent, Protect and Repair' the joint targeted area inspection programme⁷, and the NICE guidelines⁸.

3. The challenges faced need to be analysed and good practice disseminated to support Safeguarding Adults Boards and Local Safeguarding Children Partnerships with implementing positive practice and recommendations.
4. A sustainable funding model needs to be developed for specialist domestic abuse services to ensure the needs of the whole community can be met including disabled young people, BAME disabled young people and LGBT+ disabled young people.
5. For Safeguarding Adult Boards and Local Safeguarding Partnerships to work together with local domestic abuse leads to gather data about need, referrals and responses related to domestic abuse and the needs of young disabled men and women locally. This should also include outcome data.
6. For Safeguarding Adult Boards and Local Safeguarding Partnerships to ensure there is a lead person able to work to ascertain the level of services, therapeutic help and support available for disabled young women and men who experience domestic abuse and other forms of violence in their areas.
7. This lead person needs to be able to support networking between and across services to enable appropriate help to be found and accessed at case level with a recognition that one size does not fit all. This should be in line with the Equalities Act.
8. This lead person needs to develop links with disabled young people in their area to inform the development, commissioning and evaluation of services, and for disabled young women and men to be able to act in an advisory capacity to support the development of appropriate, accessible services.

⁶ LGA and ADASS (2015) *Adult Safeguarding and Domestic Abuse: A Guide to Support Practitioners and Managers*. Local Government Association, London.

<https://www.local.gov.uk/sites/default/files/documents/adult-safeguarding-and-do-cfe.pdf>

⁷ HM Inspectorate of Probation, HMICFRS, CQC, Ofsted (2017) *The Multi-Agency Response to Children Living with Domestic Abuse. Prevent, Protect and Repair*. HM Inspectorate of Probation, HMICFRS, CQC, Ofsted. Manchester.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/680671/JTAI_domestic_abuse_18_Sept_2017.pdf

⁸ National Institute for Health and Care Excellence (2016) Domestic Violence and Abuse Quality Standard. NICE, London. <https://www.nice.org.uk/guidance/qs116>


9. The lead person needs to ensure consideration of the needs of all disabled young people including those with sensory, learning and physical disabilities and across differing aspects of need, including:
 - young disabled women and men in transition from children's to adult services who are at risk of, or who have experienced harm.
 - young women and men with learning needs not open to social care services who are at risk of, or who have experienced harm.
 - young disabled women or men who are also parents who are at risk of, or experiencing domestic abuse.
 - young LGBT+ disabled people at risk of, or experiencing domestic abuse
 - the cultural needs of disabled young people.

 10. For Safeguarding Adult Boards and Local Safeguarding Partnerships to provide training for all staff across police, health, education and across children and adult social care services. This should include GPs and frontline health staff, supported living and day care staff, domiciliary services' teams across voluntary and statutory services.

 11. Safeguarding Boards and Local Safeguarding Partnerships and local individual organisations to address the need for accessible resources for people with physical and sensory impairments and learning needs; braille, sign language interpretations, plain English, audio and symbols-based materials. Resources should support understanding of domestic abuse, and where to seek support.


 12. Safeguarding Boards and Local Safeguarding Partnerships to review existing local Speech and Language Therapy resources, positive behaviour support and early help for families and disabled young people to ensure adequate early help provision for disabled young people in their areas.

 13. Safeguarding Adults Boards and Local Safeguarding Partnerships need to recognise the need for early help and speech and language therapy for children with communication or learning needs and/or autism as a key issue in prevention of distress, fear, unhappiness or frustration which may be expressed in harmful ways.

 14. CQC and Ofsted need to include awareness of domestic abuse and increased risks of harm for disabled young people as part of inspections for residential settings, day centres, supported living and provisions which they inspect.
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15. Local Safeguarding Partnerships and Adult Safeguarding Boards to review provision and availability of advocacy services for disabled young people.
16. Transition planning, Education, Health and Care Plans, Child in Need and Child Protection and Looked After Child planning to include consideration of social and emotional needs, support networks and understanding of healthy relationships for all disabled young people.
17. Policy frameworks need to highlight that, while playing a fundamental role, reliance on Sex and Relationships Education in schools alone is not enough for many disabled young people who need consistently and individually thought through help to make sense of relationship and safety issues. Parents/carers may also need support in this area. Attention to the needs of disabled LGBT+ young people should be included in this provision.
18. Disabled young people need to be consulted about what works best for them. Parents and carers where appropriate, and based on consultation with the young person, need help and support to address these issues.
19. For greater attention to be given to the needs of disabled young mothers and fathers especially those who face domestic abuse. There is a recognition of the need for robust birth assessments to take place early to make sure disabled parents get assistance, advice and support for their own needs as well as support with parenting.

Service Level

1. For all managers of services to address their outward facing communication and materials to improve access for young disabled people; for organisations to see it as their responsibility to reach out to young disabled communities.
 2. For managers across sectors to encourage and make links with services in their areas to bring service provision for domestic abuse and disability into more active partnerships at local levels.
 3. For all organisations to have a lead person for work with young disabled people and ensure that local data about reach and outcomes is gathered and analysed to inform service development.
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4. For all services to examine their current policies to ensure that they address disability awareness and domestic abuse and ensure that social care, education, health, police and disability workers have training in domestic abuse, and domestic abuse workers have training on the impact of disability on risks, on communication and are aware of disabled young peoples' needs and experiences.
5. For services to develop ways to involve young disabled people in service design, commissioning and evaluation.
6. For those involved in planning for the needs of young disabled people to be more focused upon preventative work concerning relationships and safety and disabled young people's social and emotional needs. This needs to include healthy relationships, power dynamics and the gendered nature of abuse and its impact on disabled young people with learning, sensory and physical impairments, and neuro-diverse young people. This should be delivered carefully and in non-victim blaming ways.
7. Active preventative and individual work to be included in planning and discussion with young people directly and, where appropriate, their carers; with explicit support about safe and unsafe relationships (kind and unkind behaviours). This should support work being undertaken in education settings.
8. Help to express choice starts with the small things and builds skills throughout life incrementally both in formal planning processes for disabled children and young people but also in day to day life; planning at all levels needs to ensure the voices and experiences of disabled children and young people are heard throughout their lives as a basis for developing their empowerment, confidence and ability to communicate their needs and choices.
9. All services need to ensure they promote a culture that can challenge infantilising practice and help young people both to have fun and to explore and take risks appropriate to their development, in both learning and social activities.
10. Ensuring that work is undertaken with young disabled people individually based on their learning, communication and sensory needs to develop their knowledge about rights and abuse and about people and places where they can access help. This needs to take on board the needs of disabled young people for information about social media and internet safety.

11. Ensuring practice which is based on understanding behaviour as a form of communication and where all workers have training in this.
12. To ensure that training, practice and supervision by managers is holistic, trauma-informed, appreciates developmental implications of adolescence and the meaning for the day to day life of the young person of their impairment.
13. To build trusting relationships with disabled young people through listening and communicating in ways which meet their particular learning and sensory needs.
14. To open up conversations about relationships with disabled young people and ask them about friendships and relationships.
15. To ensure greater access to help for young disabled women and men as parents facing domestic abuse in their own right as well as to help support the protection of their child.



“Just because they’ve got difficulties in life doesn’t mean that they’re less than anybody else. Everyone’s equal we’re all just different”. (Young adult survivor)

