Chipping away: The role of social workers' professional judgement in safeguarding adults with learning disabilities who experience domestic violence and abuse

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## Today's Presentation

- ▶The rationale
- ▶ The literature review
- ► The study
- ►The findings
- ▶ Recommendations for practice

### The Statistics

- Domestic Violence and Abuse (DVA) is a significant social, cultural and legal issue.
- ▶ In the UK, 30% of women and 17% of men will have experienced DVA in their lifetime (ONS, 2019).
- ▶ Disabled people (women and men) are twice as likely to experience DVA as their peers without a disability (ONS, 2019).
- ▶ Of the 143 390, s42 (Care Act 2014) enquiries in 2018-19, 7990 were related to DVA. This is an increase from 2017-18 where the number was 6365 (NHS Digital, 2019).

## What we know- Reviewing the literature

Most of the literature on DVA and social work relates to child protection.

There is some literature on DVA and learning disabilities. Much of it focuses on the experiences of female victims (see Walter-Brice et al., 2012; Petska and Wendt, 2014; Douglas and Harpur, 2016; McCarthy et al., 2017).

The studies which have explored professional responses to DVA against people with learning disabilities have been multidisciplinary, rather than focusing specifically on social work (Hickson et al., 2013; McCarthy et al., 2019)

The social work specific papers tended to be theoretical (Dixon and Robb, 2016) or focused on a specific type of abuse falling under the DVA umbrella such as forced marriage (Clawson and Fyson, 2017).

## What we know- Reviewing the literature

- Themes from the literature review
  - Interaction of abuse and learning disability
    - ▶ Abuser exploits the learning disability to heighten or mask the abuse
    - Perpetrators deliberately targeting women with learning disabilities for "relationships"
  - From the victim's perspective, professionals being unsupportive or unhelpful
    - Social work interventions largely child protection focused
    - Professionals tended to safeguard without explaining processes (especially the legal restrictions)
  - ▶ There are gaps in professional knowledge
    - ▶ What constitutes specific types of abuse e.g. forced marriage
    - Level of risk of harm from abuse

### The Study

- Qualitative study
  - Semi-structured interviews about cases
  - ▶ Vignette interviews
- Sample
  - ▶ 15 participants from across 3 authorities
  - Registered social workers with experience of working with adults with learning disabilities experiencing DVA
- Analysis
  - ► Thematic analysis
  - ▶ Utilising feminist theory and Beck's (1992) Risk Society

## (Some of) The Findings

Decision making and the use of professional judgement

# Types of relationships discussed

DVA between partners- A victim with learning disabilities, and a perpetrator without an LD.

- Perpetrators often known to CJS
- Adult SW role in supporting victim with MDT context
- Gender, disability, class intersecting to amplify impact of abuse for victims

DVA between partners-Both victim and perpetrator had an LD (or ASD)

- No identified gendered patterns
- CJS often not involved
- SW lead professional in all respects
- SW acting for both victim and perpetrator

DVA within familial relationships

- Often started in childhood and patterns continued into adulthood
- CJS often not involved (or minimally involved)
- SW lead professional

### Decision making

- ▶ Participants were aware of the DASH (risk assessment) and MARAC (multi-agency forum). These were often viewed as bureaucratic and unhelpful in planning interventions. [Clarifying note added following presentation- Participants who completed the DASH were often unaware of the outcome of MARAC, therefore MARAC's advice/guidance was not being factored into their decision making. Of the participants who did attended MARAC, these were for cases where the victim/perpetrators who both had LD. MARAC was viewed as unhelpful in these cases towards planning interventions].
  - ▶ Similar findings to other research such as Mclaughlin et al., 2018.
- Participants relied on their own experience, knowledge and research to make judgements (clinical risk judgements).

## Strategies for Managing Risk

#### Building a professional relationship

- Using relationship based practice as a means of
  - ▶ 1. understanding the service user/victim
  - ▶ 2. monitoring the relationship- keeping harm reduction strategies in place
- Advantages- Allowed professionals to feel that they understood the risk of harm, could "chip away" at the case by implementing different strategies.
- Limitations- time intensive, limits transferability

#### Jennifer:

▶"...I've got a really good relationship with him anyway, regardless of any of this [safeguarding]. You know I've known him a long time, I know his family and whatever, so I think because of that he knows me, and he trusts me [...] I talk to him about everything that I am doing, and I always ask him what he wants, what his opinions are about things [...] I think he is able to make his own decisions about pretty much anything [...] and if I think something would be a good idea, I will have that conversation with him, and generally, he agrees with it, because, I think. I'm suggesting it. He knows me. He knows that I wouldn't suggest it if I didn't think it would actually be beneficial."

## Strategies for Managing Risk (continued)

#### Promoting Autonomy

- Social workers viewing their role as an advocate- helping victim to understand risks of harm and options for support and amplifying the victim's decisions/choices
- Using Mental Capacity as a guiding factor for interventionspromoting victim's decision making, including accepting unwise decisions
- Strengths- Using a clear legal framework, focused on person centred/personalised outcome
- Limitations- Relies on an understanding of DVA risks, including coercive control and the impact on decision making

Carly-

"My role is about prompting her to think about her situation and to get her to think about what she was going to do about it."

## Strategies for Managing Risk (continued)

#### The Use of Control

- When a victim did not have capacity to remain in the relationship/family home, the court of protection was (often) approached to put in place restrictions
- Advantages- a clear legal process to minimise or mitigate significant risks or harm
- Disadvantage- Sense this limited professional judgement requiring practitioners to systematically follow the processes set by the court

#### Roger-

"Then following the court's decision, we have a specific protocol for communicating with mum now, you know about time scales for writing letters and doing this and doing that, and actually, a lot of my time is taken up by that, it's very sort of administrative..."

### Recommendations

HOW CAN PRACTITIONERS BE SUPPORTED IN THIS AREA OF PRACTICE?

## Supporting Victims

Support victims to develop social networks (family, neighbours, providers) who will offer support, monitoring, assistance even after a case is closed by the social worker.

## Develop an understanding of how DVA presents and it's known (evidence based) risk factors

- Practitioners keeping up to date with their knowledge via training, seeking out professional expertise (DVA organisations).
- Employers offering appropriate DVA and safeguarding adults training to their workforce.
- Forming alliances/partnerships with DVA agencies to help mutually develop knowledge

## Understanding the impact of Coercive Control on decision making

- Consider how coercive control may impact on an individual's ability to use/weigh information in a mental capacity assessment. Also consider if control is impacting the ability of a victim to make a decision free from duress.
- Practitioners and safeguarding managers need to be aware of the options available to support an individual who is compelled to make decisions under duress, particularly the inherent jurisdiction process.
- SCIE has produced comprehensive guidance for gaining access to an adult suspected to be at risk of neglect or abuse (SCIE, 2018) this tool can be utilised to assist social workers in cases where a person is being controlled.

## How employers can support their staff

- ▶ Offer debriefing supervisions to practitioners working with cases of DVA.
- ► A social worker should not be allocated to both a victim and a perpetrator (including carers assessments).

▶ Questions?

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