



Respect response to the DH/NOMS Consultation on the Offender Personality Disorder Pathway Implementation Plan

About Respect

Respect is the UK membership association for Domestic Violence Prevention Programmes (DVPPs) and Integrated Support Services (ISSs). Our vision is to end violence and abuse in intimate partner and close family relationships. Our key focus is on increasing the safety and well-being of victims by promoting, supporting, delivering and developing effective interventions with perpetrators. We represent a network of organisations who work with perpetrators of domestic violence and also those who work with male victims.

Our work includes:

- Providing support, resources and training for members
- Managing accreditation of DVPPs and ISSs
- Developing work with young people
- Promoting knowledge of research about domestic violence and collaboration between researchers, practitioners and policy makers
- Influencing public policy and providing a national voice on men's violence against women
- Running the Respect Phonenumber, an advice and referral line for perpetrators
- Running the Men's Advice Line, a helpline for male victims
- Running Dads' Space, an online child contact centre

Respect is a UK registered charity, number 1141636

Respect is a registered company, number 7582438

To find out more about our work please visit our website www.respect.uk.net

Please also download our publication - Domestic Violence Perpetrators – working with the cause of the problem as this gives important information about the role Domestic Violence Perpetrator Programmes and Integrated Support Services. <http://www.respect.uk.net/pages/lobbying.html>

Format of our response

Respect felt that it would be more appropriate if we did not follow the set format for responding to this consultation but instead raise general points in relation to this consultation which fit with our remit and expertise. Where we have responded to specific questions set we have put the question number beside our response.

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Response emailed to pdconsultation@dh.gsi.gov.uk

Respect welcomes this consultation. However, we would like to take this opportunity to flag the importance of addressing the issue of domestic violence and other forms of violence against women and girls. There is no mention of this specific issue or how it will be addressed within this document and as such we are concerned as to how this issue will be managed by NOMS/DH under the new proposals.

Whichever option is selected Respect wants to make clear that offenders with personality disorder are appropriately assessed (even if they are not known to have committed domestic violence related offences) and if suitable to attend an IDAP or CDVP accredited programme to do so. If they are not suitable for a groupwork programme they should attend 1-2-1 sessions which will focus upon their abusive behaviour. Personality disorders are not a cause of or an excuse for violence and abuse and it is important that the risk these offenders present is managed effectively. Offender Managers and Probation Teams need to have adequate resources and training to be able to manage this group of offenders. If they are to be conducting mental health assessments to screen for personality disorders then clearly they may require additional training and information to do this safely and effectively.

Health care providers and professionals should also all receive mandatory information and training in relation to domestic violence and on specifically on how to work with domestic violence perpetrators. It is important that health professionals understand the range of ways in which domestic violence perpetrators minimise and deny (and blame others) for their behaviour so that they are equipped to deal with this and to distinguish between features of an offender's personality disorder and their abusive behaviour.

It is vital that whichever option is selected that (ex)partners/victims/survivors of the offender with the personality disorder are pro-actively contacted and that they receive appropriate support, advocacy and information about the programme (or 1-2-1 support sessions) and their partner's attendance. Support for partners or ex-partners of domestic violence offenders is vital because:

- New partners who are potentially at risk can be offered advocacy and support
- Women who are no longer in contact with the perpetrator but want to make child contact safe and appropriate for their children post-release can be supported to do so.
- Women who have never approached an organisation for help are offered advocacy, support and information (if they want it), reaching women coping in isolation with no other formal support

- Women should be able to feed back information about any new incidents of abuse or violence to the ISS (eg. harassment from prison/secure units) and agree how this information will be used to enhance their safety, making sure it doesn't put them at more risk.
- Women can use the monitoring and oversight function of the IDAP or CDVP or 1-2-1 work with the domestic violence offender to help them leave the relationship safely.

There must be support and information proactively offered to the (ex)partners of domestic violence offenders with personality disorders.

Joining up – OASYS, personality disorders and domestic violence

Respect welcomes the fact that the consultation proposes that this group of offenders will undergo an OASYS assessment. However, we speculate whether offender managers have the capacity to carry out all the assessments given current capacity of probation areas. We hope that sufficient additional resources would be allocated to Offender Managers (OMs) to fulfil this task. It is also important that OMs are given adequate training/able to link up with and consult with mental health professionals in order to fulfil this function safely. Respect would also like it to be flagged for OMs to 'think outside the box' and not consider the personality disorder in isolation from any domestic violence offending behaviour but to consider how the two may/may not be inter-related.

52. Respect would suggest not enough places. [40-60 per region is specified.] Will this be frequently monitored and reviewed or is this capped and if so for how long a period?

54 – DTC accredited programme– This programme will not adequately address sexual violence /sexual offences behaviour – IDAP/CDVP/Sex Offender Treatment Programmes should be used also for those offenders – and should not be missed off. Respect notice that the consultation states in para. 53 that 'training will be made available for staff responsible for the development and delivery of these programmes through the KUF'. Please can you confirm that this will include Probation staff working with domestic violence and sexual offenders and to specifically include those that run IDAP/CDVP and Sex Offender Treatment programmes?

Medium and low secure NHS provision

57. PIPES – Psychologically Informed Planned Environments. There was a lack of detail provided in relation to PIPES and specifically in relation to dv/sexual offenders how their behaviour would be monitored to ensure that there was not the potential or actual opportunity to harass or re-victimise

their victims. Respect would also like assurances that PIPE staff receive specialist training on domestic violence and sexual violence against women and girls.

Qu 4. Respect recommends that it is vital to include an 'understanding of, and effective response to, domestic violence and sexual violence against women and girls'.

Qu 5. Yes, but Respect would also like to add that an appropriate response to domestic and sexual violence against women and girls should also be a priority.

Para 62. Respect is concerned that because IDAP and CDVP are not cheap interventions that this means they will not be used under a payment by results system.

Para 64. Payment by results – It is important that in relation to domestic violence offenders that the following aspects of measuring success are also considered because successful interventions with this group of offenders does not come cheaply.

- Domestic Violence Perpetrator Programmes are about:
- Success through change:

The best outcome of a man's attendance at a DVPP is obviously when all violence and abuse stops and he is no longer a risk to his partner, ex-partner, future partners and children. Westmarland, Kelly, Chalder-Mills identify 6 indicators of success, based on research with perpetrators, their partners, programme workers and funders:

 1. An improved relationship between men on programmes and their partners/ex-partners which is underpinned by respect and effective communication
 2. For partners/ex-partners to have an expanded 'space for action' which empowers through restoring their voice and ability to make choices, whilst improving their well-being.
 3. Safety and freedom from violence and abuse for women and children.
 4. Safe, positive and shared parenting.
 5. Enhanced awareness of self and others for men on programmes, including an understanding of the impact that domestic violence has had on their partner and children
 6. For children, safer, healthier childhoods in which they feel heard and cared about.
- Success through risk management

Of course no behaviour change programme will be 100% successful in effecting lasting change, whether it be stopping smoking, losing weight or ending the propensity for violence. Where change hasn't happened and the perpetrator remains a risk, domestic violence perpetrator programmes such as IDAP and CDVP should be able to monitor, assess and help manage that risk, through comprehensive case management which combines information from the man and the woman, as well as from other agencies.

Multi Agency Risk Assessment Conferences (MARACs) assess, monitor and respond to current risks of domestic violence and stalking, while Safeguarding Boards protect children from harm. The presence of DVPPs (including Probation programmes, IDAP and CDVP) in these networks is critical. When they are not present, the lack of information from and about the perpetrator is often significant.

DVPPs give perpetrators time to discuss alternative belief systems and strategies which support change and have been shown to reduce physical violence, controlling behaviour, jealousy and forced sex – all critical factors in the MARAC risk assessment tool, the DASH. It is vital that the personality disorder is flagged up at MARAC.

- Success by reducing the risk of homicide
The risk of homicide post-release should be an ever present concern. Most DVPPs use a risk assessment tool such as OASYS. Recent UK research found that some domestic violence homicides were preceded by apparently little or no physical violence but a regime of extreme gender control, including coercion, sexual coercion, jealous surveillance and stalking, violence to previous partners and the perpetrator having depression, mental health issues and being at risk of suicide. This is all information which is vital to for this consultation to consider and to ensure that all staff working on the various pathways are aware of.

And it costs more to do nothing.

Qu 7. This has the potential to be too bureaucratic a process. There also needs to be sufficient attention paid to the issue of domestic violence and other forms of violence against women and girls; and the need to make all abusers accountable for their behaviour through effective behaviour change programmes. There should be a uniform system across the UK so that access to appropriate interventions does not become a postcode lottery.

Contact details

If you have any queries or comments Respect's consultation response please contact

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