

Culture of Care

A Trauma informed approach
to Domestic and Sexual
Violence and Abuse (DASVA)

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NATIONAL
COLLABORATING
CENTRE FOR
MENTAL HEALTH



Neurodiverse
Connection

Global
Black
Thrive

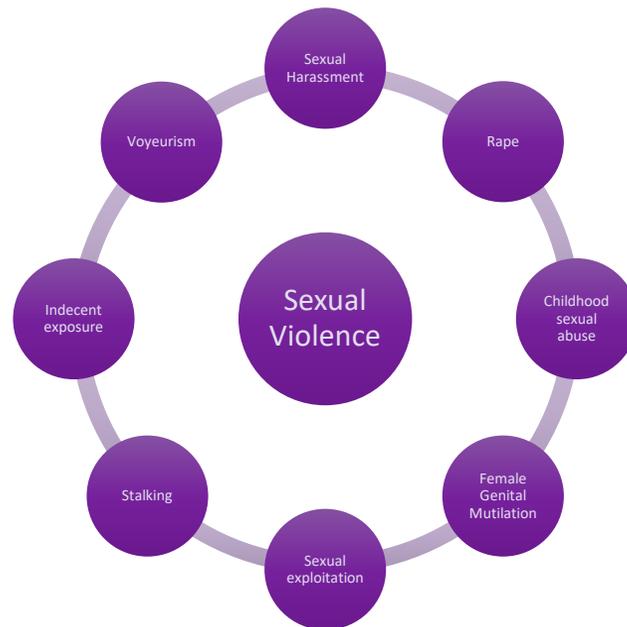
NCISH



Terminology

Sexual Violence:

Umbrella term encompasses any kind of sexual activity or act (including online) that is unwanted and took place without consent':



Domestic Abuse:

“Abusive behaviour perpetrated by a person towards another person who is **personally connected** to the perpetrator, where they are both **aged over sixteen**.

Abusive behaviour includes:

- *physical, sexual, psychological, and economic abuse*
- *threatening, coercive, and controlling behaviour.*

(Domestic Abuse Act 2021)

*The law considers two people ‘personally connected’ where they are, or have been:

engaged, married or in civil partnership, in an intimate relationship, in a parental relationship to the same child related.

- Children and ‘victim status’

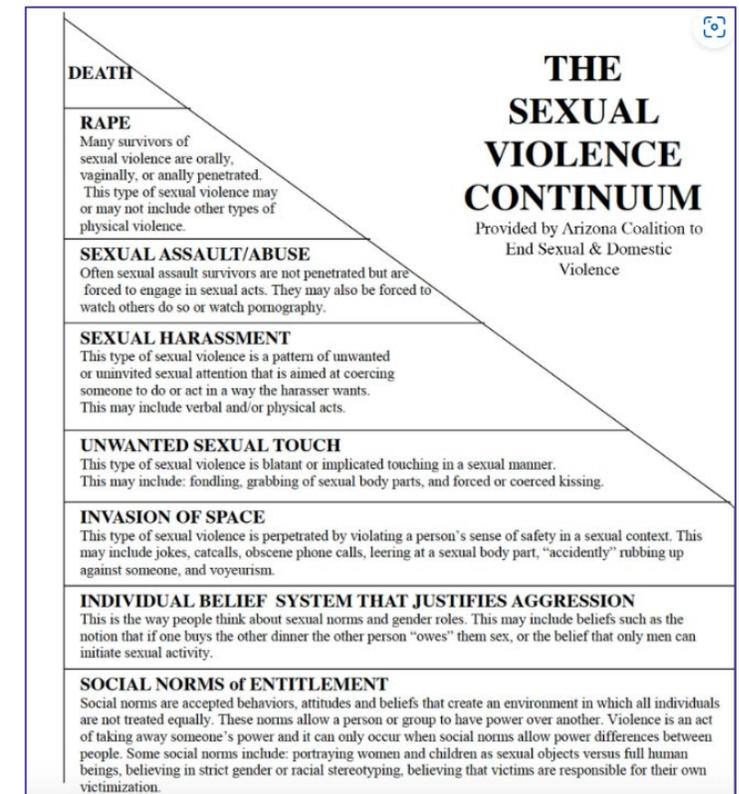
An issue of Gender Inequity & Human Rights and Justice

GBV globally endemic in every country and every culture.

- Sexual harassment a universal experience for women, the majority of which goes unreported (UN Women UK, 2022)
- Violence against Women and Girls and therefore an issue of discrimination and violation of human rights
- A serious public health issues – with profound and lasting impacts on health

Despite its wide prevalence and knowledge of the health impact:

- Charges and conviction rates for sexual assaults remain the lowest since records began (CPS, 2022)
- In England, **two** women are killed by a partner or ex-partner per week (with similar estimates in other high-income countries)
- Rooted in unequal balance of power, social and gender norms.
- Epistemic injustice: Impact of power imbalance on believing



DASVA and mental health service contact:

Bi-directional relationship between MH and experiences of DSA
(Kalifeh 2015, Devries et. al 2013)

Experiencing domestic abuse increases your risk of developing a
MH condition:

- depressive disorders x3
- anxiety disorders x4
- PTSD x 7 (Trevillion et al, 2012)
- Schizophrenia & Bipolar Disorder x 3 (Chandan, 2019)

Khalifeh et al, 2015

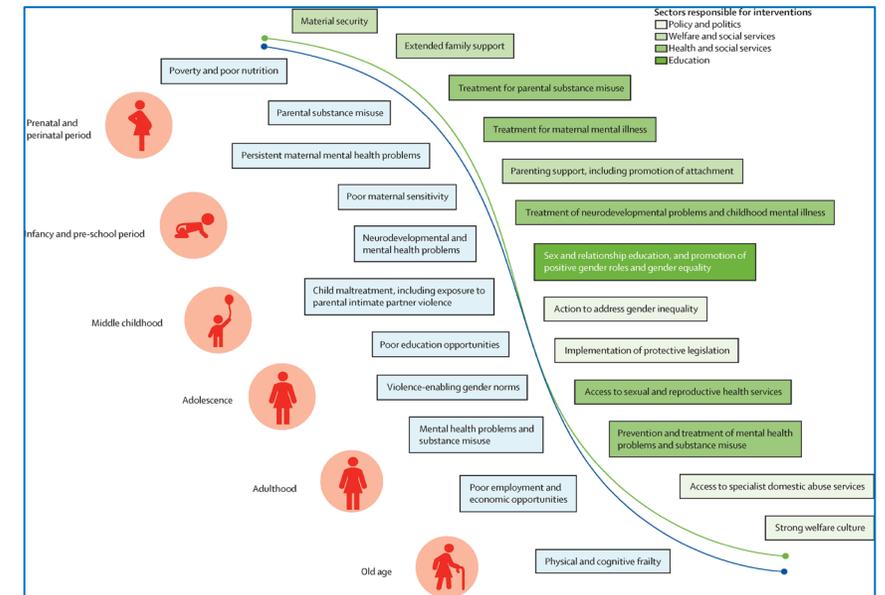
- Significantly increased rates of domestic & sexual abuse amongst those who access MH services (lifetime and in the last year)
- 69% of women and 49% of men in contact with secondary mental health services reported having experienced domestic abuse since the age of 16 highest risk amongst those revictimized



Trauma Experiences and mental health outcomes

A Trauma history is associated with poor outcomes including (Read 2007 ; Mauritz 2013).

- a greater likelihood of attempting suicide & self-harming,
- longer & more frequent hospital admissions
- higher levels of prescribed medication



Taken from The *Lancet Psychiatry* Commission on intimate partner violence and mental health: advancing mental health services, research, and policy. Oram et al. 2022

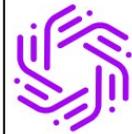
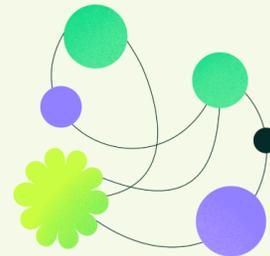
Domestic and sexual violence and brain injury



BRAIN INJURY IN THE CONTEXT OF DOMESTIC ABUSE

Too Many To Count

Brainkind reveals that 1 in 2 people who have experienced domestic abuse in England and Wales may be living with a brain injury. This compares to the prevalence of traumatic brain injury in the general population of the UK which is approximately 1 in 8.



Institute For
Addressing
Strangulation

Guidelines for clinical management of non-fatal strangulation in acute and emergency care services

Feb 2024 Review date Feb 2025



Understanding the impact

- Neuro-bio-psycho-social impact of Trauma
- Prolonged / on-going nature
- Perpetration by a 'care giver'
- Cultural normalisation/ silencing
- We still do not demonstrate understanding of Domestic & sexual abuse as urgent health issue

Harm in our services

CQC September 2018 [Sexual Safety on Wards Report](#) stated that “Sexual incidents including harassment, assaults and rapes are “commonplace” in mental health unit

Sky/ Independent (2024)

*50 **freedom of information** requests to mental health trusts*

- *‘nearly 20,000 “sexual safety incidents” in inpatient wards between 2019 and 2023, with yearly figures on the rise.*
- *Failure to implement 2020 government-backed sexual safeguarding protections, with only six authorities complying.*

Department of Health and Social Care (2010)

‘NHS organisations are expected to eliminate mixed-sex accommodation, except where it is in the overall best interest of the patient, or reflects their personal choice’...



A trauma-informed approach



Grounded in a complete understanding of the impact of trauma, adversity and wider systemic inequality on neurological, biological, psychological and social development



Seeks to create conditions that **reduce the risk of further harm** and **promote healing**



Embeds principles of **Choice, Collaboration, Safety, Empowerment, Trustworthiness and Equity**

A Trauma Informed Organisation



C&I Trauma Informed Organisation. 2021
McNicholas S, Greenfield P, Rose A



Recognise and acknowledge that adverse childhood events, inequality and trauma causes or contributes to the development of mental health problems



Develop policies and practices to reflect this trauma awareness



Seek to create conditions that reduce harm and promote healing, especially for individuals who have already experienced trauma



Have guiding principles of Choice, Collaboration, safety, empowerment, trustworthiness & Equity

The importance of lived experience leadership

01

Challenging traditional paradigms

02

Enabling true collaboration

03

Demanding change and accountability

04

Bringing authentic expertise

The need for Organisation wide approach



C&I Trauma Informed Organisation. 2021
McNicholas S, Greenfield P, Rose A

BEING SAFE IN OUR SERVICES

OUR COMMITMENT TO YOU

We strive to ensure that you have the right to feel safe. This Trust has a duty of care to protect and support those who come to services and those who work in them. This includes ensuring a safe environment for you including physical, sexual and emotional. Please tell us if you experience any incidents or concerns to help you and we will act on this, whether this comes from staff, service users or visitors.

The manager of this service is: _____

Physical safety

This includes feeling safe from the threat of harm from others as well as sexual/physical harm.

You may see or hear aggressive behaviour including obscenity or language such as racism or homophobic. It is the duty of staff to intervene if it does harm. If you see something concerning staff and you are not sure yourself, please report this to the area.

If you see the person being aggressive through the window, please tell staff so they can help you and to act on their behaviour.

Safe from Sexual Harassment/Abuse

An act or remark (sexual), this means acts from sexual harassment, abuse or aggression.

It also includes anyone abusing you or others sexual/sexual or sexual abuse or sexual harassment that are unwanted.

It is our responsibility to protect you from this, and if you are not sure if it is sexual harassment or sexual abuse, please report this to the area.

Psychological Safety

There may be times you feel afraid, unsafe, anxious and worried to stay in or visit one of our services as an inpatient.

There may be good or personal reasons from what you feel unsafe or scared and we hope you can approach us to talk to us.

However, it is our responsibility to help you regularly if you feel unsafe or have any worries.

What you can expect from us:

We will:

- Provide you with information to help about your safety and needs e.g. 7/24 helpline for your needs.
- Listen and take your concerns on and address them fairly e.g. if you are not sure about something.
- Make sure you have your own safety e.g. ensuring you have your own room.
- Have a clear and consistent safety and wellbeing plans in which to receive or seek.
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What we ask of you:

We ask that you:

- Respect other people's privacy, do not take pictures of other people, nor include others in any way.
- Do not use your mobile phone in any way of our services.
- Do not use any mobile phone, personally or socially used, to help to create any feelings that may lead to harming others.
- Let us know any ways we can help you to be safe and improve our services.
- If you feel you need help, please contact the Helpline on 0202 280 1888 if you have experienced any form of sexual assault and need help.

This poster was adapted with thanks to: Charlotte Parmentier, Foundation Trust and C&I Trauma Informed Collaborative.

Sexual Safety Collaborative

Standards and guidance to improve sexual safety on mental health and learning disabilities inpatient pathways

NATIONAL COLLABORATING CENTRE FOR MENTAL HEALTH

NHS England

Date published: 16 October, 2024
Date last updated: 16 October, 2024

NHS England sexual misconduct policy

Publication: (publication)

- ### Safety & quality measures:
- Incidents of restrictive practice
 - Incidents of sexual harm
 - Incidents of AWOL
 - Number of bank staff on shift
 - Staff burnout questionnaire
 - Patient experience questionnaire

I am supporting Act Against Racism

RC PSYCH
PSYCHOLOGISTS
PSYCHIATRISTS

ACT AGAINST RACISM #ActAgainstRacism