

**Briefing on the Domestic Abuse Bill, House of Lords Committee Stage
Commencing Monday 25 January 2021**

**Strengthen the bill to meet the safeguarding and early development needs of babies,
including unborn babies, and empower parents to break the cycle**

Key points:

- The Bill provides welcome recognition that children are directly affected by domestic abuse; however amendments are needed to **ensure babies, including unborn babies, are not overlooked as hidden victims, and parents receive support at a crucial time.**
- Babies and unborn babies need specific reference because, as shown in researchⁱ just published by the First 1001 Days Movement, there are **'baby blind-spots' in policy, planning and funding.** Measures for children are often not working for babies.
- Around **30% of domestic abuse begins during pregnancy**, while 40–60% of women experiencing domestic abuse are abused during pregnancy (SafeLives report)ⁱⁱ.
- The **first 1001 days from conception to age two is a period of uniquely rapid development** when **babies are particularly susceptible to their environment.**
- Domestic abuse experienced in utero and in the earliest years is **harmful to birth outcomes and babies' early development.** It affects parents' ability to give their baby the best start. These factors can all have **potentially serious and long-lasting consequences for children's development, mental and physical health.**
- **Tailored support for both parents at this time can harness their motivation and empower them to make changes for their baby and themselves.** (Evaluation of *For Baby's Sake*, led by King's College London)ⁱⁱⁱ.
- We urge Peers to support the amendments tabled by Baroness Stroud and signed by Baroness Armstrong, with Baroness Watkins also having signed the amendment after clause 72 to underline the need for specialist support:
 - Amend clause 3 to **clarify that children includes babies** from conception onwards, recognising the vital period from conception to age two
 - Amend clause 7, so that the Domestic Abuse Commissioner's responsibility to encourage **good practice, regarding children affected by domestic abuse, includes babies in utero, infants and young children** under two years old
 - Include a requirement (after clause 72) for the Secretary of State to make provision for **publicly-funded trauma-informed and attachment-focused support for parents** during pregnancy and before their child reaches age two
 - Amend clause 73 to stipulate that the Secretary of State's **guidance on the effect of domestic abuse on children will cover babies who were in utero during the abuse and on babies and young children aged under two.**
- In concluding the Second Reading of the Bill, Home Office Minister Baroness Williams said, *"I thank all noble Lords for what I think has been one of the most thoughtful debates I have ever heard in your Lordships' House. **No age group has been left out of the debate, including the unborn child and the fetus.**"* Now is the opportunity to make sure that this can also be said of the new domestic abuse legislation.

The case for support

Domestic abuse often starts or escalates during or soon after pregnancy and is highly correlated with other risk factors for babies and families.

- Around 30% of domestic abuse begins during pregnancy, **while 40–60% of women experiencing domestic abuse are abused during pregnancy** (SafeLives).
- **Before the pandemic, 78% of Health Visitors had perceived an increase in needs related to domestic abuse**, while 83% perceived an increase in perinatal mental health problems (Institute of Health Visiting, The State of Health Visiting in England November 2019: Results from a survey of 1040 practising health visitors).
- **In the latest Institute of Health Visiting Survey (December 2020), 82% of Health Visitors reported an increase in domestic violence and abuse.** This is one of many sources of evidence about the growing concerns about domestic abuse and the wellbeing of babies, young children and parents during the COVID-19 pandemic.
- *A Crying Shame*, Children's Commissioner (2018), highlighted **50,000 children aged 0-5, including 8,300 babies under 1, living in households where all three of domestic abuse, alcohol or drug dependency and severe mental ill-health were present.** A further 160,000 children aged 0-5, including 25,000 babies under 1 were living in a household where two of the three factors were present. The report concluded that 'despite their increased vulnerability, they can be invisible to professionals'.

The first 1001 days, from pregnancy, are a crucial time to safeguard and nurture babies' development. Domestic abuse during this period increases the risks of poor birth outcomes for mothers and babies and has an impact on long term life chances.

- **Domestic abuse in pregnancy is associated with poor obstetric outcomes** including low-birth weight and pre-term birth^{iv}.
- Domestic abuse is also a **strong risk factor for antenatal and postnatal depression**^v.
- A **mother's emotional state can have a direct influence on fetal development**, by altering the environment in the womb^{vi}. Ongoing stressors, such as domestic abuse, can disrupt babies' neurodevelopment. This can affect the cognitive functioning and emotional regulation of children, shaping **behavioural and emotional outcomes**^{vii}.
- Exposure to domestic abuse in the first 1001 days of life is associated with **adverse outcomes including poor mental and physical health, lower academic achievement, and impaired social development**^{viii ix x xi}.
- Sensitive, attuned caregiving by parents in the first 1001 days provides an important foundation for the development of secure and healthy attachments, which are important for social emotional development and can shape the relationships that children form across their lifetime. **Domestic abuse can affect a parent's ability to provide consistent, sensitive caregiving; this is particularly relevant among parents who did not receive this level of caregiving themselves**^{xii}.

Government and Parliament need to overcome 'baby blind-spots' in decision-making

- Research for the First 1001 Days Movement and launched at the Conception to Age 2 APPG on 19 January 2021 confirmed **the need for decision-makers to be more intentional about creating baby-positive systems.**
- *Working For Babies: Lockdown Lessons for Local Systems*, drew on survey responses from professionals supporting babies and families during the first COVID-19 lockdown. 78% of respondents were clear that the government in their nation had not done enough for the under 2s, creating a '**baby blind-spot**'.

"Being a baby or toddler was a lockdown 'risk factor' in its own terms. Those who have been exposed to other risk factors in addition...could be considered as having been subject to 'double jeopardy'".

"I'm not sure there was any thinking about babies' needs. We heard a lot about school age children and parents working from home but little about babies' needs." Quote from practitioner.

- The report calls on governments across the UK to take action to ensure enabling factors exist in all areas and to address the "baby blind-spots" by ensuring that babies' needs are being adequately considered at all levels, including around the Cabinet table, so that all babies live in a 'baby-positive' local system which ensures they get the best start in life.

Parents want and need trauma-informed support during the 1001 days to tackle domestic abuse and give their babies the best start in life, but current provision is insufficient.

- *A Domestic Abuse Perpetrator Strategy for England and Wales: Call to Action* demonstrates widespread backing for increased provision of behaviour change interventions for those using abusive behaviours.
- A SafeLives report highlights: **'80% of survivors have told us that they think interventions for perpetrators are a good idea.**
- Providing **trauma-informed support to fathers during the transition to fatherhood can 'harness the motivation for a new start'** and support men to overcome unhelpful and abusive behaviour patterns^{xiii}
- A main conclusion from the *Breaking Down Barriers: The National Commission on Domestic and Sexual Violence and Multiple Disadvantage* was the **call from survivors for trauma-informed support to break traumatic cycles.** As one mother said, '*I remember thinking that I don't want my girls to grow up with this. One of them was 10, one was 7 and one was 2 approx. I remember thinking 'what am I doing? Am I going to bring these children up in the same way that I was brought up?'*

Evidence from *For Baby's Sake on the value of supporting parents, starting in pregnancy*

- The independent evaluation led by King's College London (May 2020) of the *For Baby's Sake* programme identified it as the first to fill 'a key gap' with 'unique features' that 'address key limitations' of responses to domestic abuse.
- The evaluation highlighted evidence-based change mechanisms: working separately with both parents from pregnancy until their baby reaches age two; addressing the effects of domestic abuse in utero and providing trauma-informed domestic abuse support and attachment-focused parenting support to both parents.
- For a powerful illustration of how this works, watch the brief animated film (just over three minutes), featuring parents in their own voices: <https://youtu.be/KKKkWJbcqfg>

Some quotes from parents participating in *For Baby's Sake*

I've never really been a loving dad, maybe because of my past. My dad wasn't loving; he was very strict and very controlling... Doing this programme made me realise I was very controlling without realising. To me it was normal' - father

'It has improved my confidence... my ability to set healthy boundaries. It's been amazing' - mother

'I'm putting my kids first, instead of myself' – father

'It's allowed me to heal and come into myself. It's given me the confidence to be a good mum - mother.

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ⁱ **First 1001 Days Movement & ISOS Partnership (2020)**, Working for Babies: Lockdown Lessons from Local Systems

ⁱⁱ **SafeLives (2016)**, A Cry for Health: Why we must invest in domestic abuse services in hospitals,

ⁱⁱⁱ **Trevillion, K., Domoney, J., Ocloo, J., Heslin, M., Ling, X-X., Stanley, N., MacMillan, H., Ramchandani, P., Bick, S., Howard, LM.** (2020) *For Baby's Sake, Final Evaluation Report*

^{iv} **Hill, A., Pallitto, C., McCleary-Sills, J. & Garcia-Moreno, C.** (2016). A systematic review and meta-analysis of intimate partner violence during pregnancy and selected birth outcomes. *International Journal of Gynecology & Obstetrics* **133**, 269-276.

^v **Howard, L., Oram, S., Galley, H., Trevillion, K. & Feder, G.** (2013). Domestic violence and perinatal mental disorders: a systematic review and meta-analysis. *PLoS Med* **10**, e1001452, doi:10.1371/journal.pmed.1001452.

^{vi} **Glover, V. & Capron, L.** (2017). Prenatal parenting. *Current opinion in psychology* **15**, 66-70.

^{vii} **NSCDC.** (2007). The Timing and Quality of Early Experiences Combine to Shape Brain Architecture: Working Paper No. 5

^{viii} **Burke, J. G., Lee, L.-C. & O'Campo, P.** (2008). An exploration of maternal intimate partner violence experiences and infant general health and temperament. *Maternal and Child Health Journal* **12**, 172-179.

^{ix} **Evans, S. E., Davies, C. & DiLillo, D.** (2008). Exposure to domestic violence: A meta-analysis of child and adolescent outcomes. *Aggression and violent behavior* **13**, 131-140.

^x **Huth-Bocks, A. C., Levendosky, A. A. & Bogat, G. A.** (2002). The effects of domestic violence during pregnancy on maternal and infant health. *Violence and victims* **17**, 169.

^{xi} **Shay-Zapfen, G. & Bullock, L.** (2010). Impact of intimate partner violence on maternal child health. *MCN: The American Journal of Maternal/Child Nursing* **35**, 206-212.

^{xii} **Barlow, J. & Underdown, A.** (2017). Child maltreatment during infancy: atypical parent–infant relationships. *Paediatrics and Child Health*.

^{xiii} **Domoney, J & Trevillion, K** (2020) Breaking the cycle of intergenerational abuse: A qualitative interview study of men participating in a perinatal program to reduce violence. *Infant Mental Health Journal*