 

Sunflower Centre Hospital Project

It’s a healthy choice

Northamptonshire Sunflower Centre has provided support for victims of domestic abuse in Northamptonshire for nearly 20 years. During this time the service has witnessed a clear shift in awareness and social understanding of domestic abuse, with members of the public, and wider media, recognising domestic abuse is not just about physical abuse, cuts across all social demographics and needs to be spoken about if we are to keep people safe. However, we also recognise that domestic abuse remains a hidden crime which is still under reported by many sections of the community.

With this in mind Sunflower have worked with both local hospitals[[1]](#footnote-1), over the last four years, to place domestic abuse advisors within the health care system. Our project, based around Safe Lives thesis “A cry for health” recognises that 4 out of 5 people experiencing abuse do not report to the police, however, may seek help for the medical consequences of their abuse. This statistic highlights how important it is for health providers to be part of the long-term solution to tackle domestic abuse.

The effects of domestic abuse on an individual’s health are wide ranging and can be long lasting including:

* Physical injuries
* Complications before, during and after pregnancy
* Depression and anxiety
* Mental health
* Eating disorders
* Substance dependency

Safe Lives research demonstrated that domestic abuse victims in hospital experience multiple vulnerabilities. The levels of physical and sexual abuse as well as coercive and controlling behaviour are high. Two thirds of victims in hospital disclose serious mental health issues, including half with PTSD and nearly half have self-harmed or attempted suicide. Safe Lives also found that half of the victims who disclose in hospital are still with their partner. (A cry for health 2016)

Whilst some victims will make direct disclosures to professionals, many will present with other concerns which can, in fact, be indicators of the abuse they are suffering within their home. In health terms, this can manifest in repeated attendances for minor concerns, unexplained or implausible explanations for injuries, substance misuse, sexually transmitted diseases and mental health ranging from anxiety and depression through to PTSD.

Other people attend hospital for unrelated conditions, such as cancer, but will make disclosures because they are in a place where they feel safe. Regardless of how they present, what is clear is that we need to ensure that when people ask for help it is recognised, there are domestic abuse experts available to ensure they can seek advice; they are believed and are provided with options to achieve safety.

Whilst the project was originally developed for patients, it has also been used by staff members who feel safe to meet at work to get advice and support. With statistics demonstrating that 1 in 4 women and 1 in 6 men will experience domestic abuse in their lifetime it is logical to imagine that there will be a large number of staff effected by abuse. Statistics provided by Safe Lives indicate that nationally 51,355 NHS staff members are likely to have experienced abuse in the past 12 months. Our service has utilised employer domestic abuse policies to try to ensure staff are appropriately supported and kept safe in their place of work.

The project places an advisor across both hospitals offering a range of services including:

* training which focuses on ensuring staff at the hospital can identify signs of domestic abuse, feel comfortable asking the question and are clear on where to signpost them for help.
* Putting policies in place which provide clear processes on domestic abuse giving provision for both patients and staff.
* Triage, advice, signposting and support for both patients and staff.

Both hospitals have been very supportive of the project recognising the benefit it brings to both their patients and staff. As a service we are very pleased for the welcome we have been given and the impact our interventions have had.

1. Kettering General and Northampton General [↑](#footnote-ref-1)