



Scottish Marac COVID-19 survey results

About SafeLives

We are SafeLives, the UK-wide charity dedicated to ending domestic abuse, for everyone and for good.

We work with organisations across the UK to transform the response to domestic abuse. We want what you would want for your best friend. We listen to survivors, putting their voices at the heart of our thinking. We look at the whole picture for each individual and family to get the right help at the right time to make families everywhere safe and well. And we challenge perpetrators to change, asking 'why doesn't he stop?' rather than 'why doesn't she leave?' This applies whatever the gender of the victim or perpetrator and whatever the nature of their relationship.

Every year, nearly 130,000 people in Scotland experience domestic abuse. There are over 9,000 people at risk of being murdered or seriously harmed; over 12,000 children live in these households. For every person being abused, there is someone else responsible for that abuse: the perpetrator. And all too often, children are in the home and living with the impact. Domestic abuse affects us all; it thrives on being hidden behind closed doors.

We must make it everybody's business.

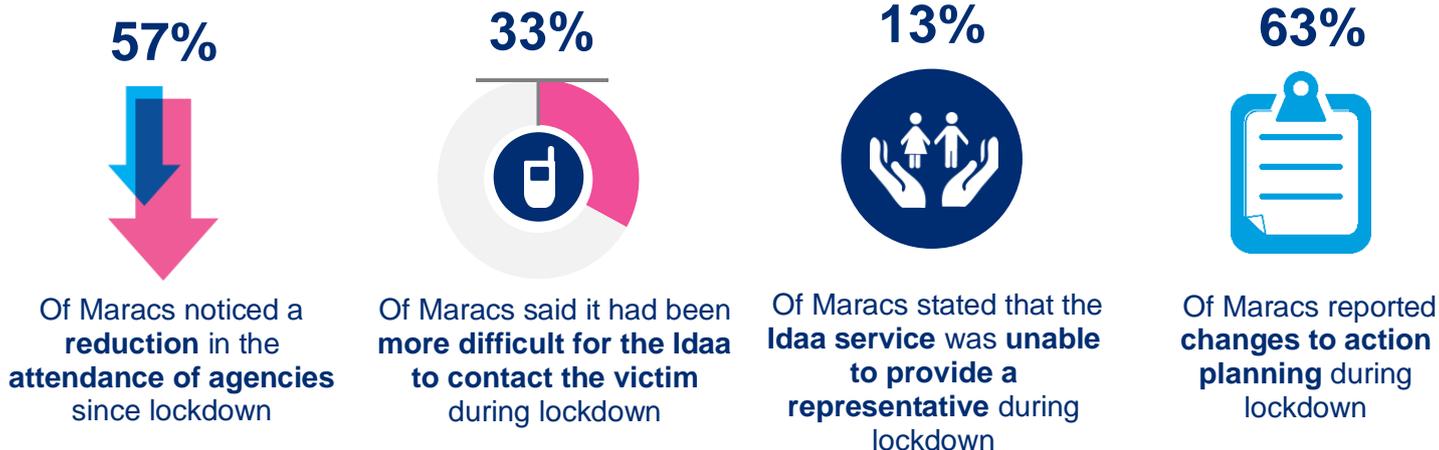
Context

In this unprecedented crisis we recognise that governments have had to introduce emergency measures to protect those who are vulnerable to COVID-19 and to ensure that services can continue to function. Scotland went into lockdown along with the rest of the UK, on 23rd March 2020.

Given that Maracs are most often held in person with a number of different agencies involved and given that they serve the victims at highest risk of harm or homicide, it is important to assess the extent to which COVID-19 has impacted them. This work was supported by funding from the Scottish Government.

SafeLives sent out a survey to each Marac in Scotland and asked them to fill it out. The survey was open from the 21st April and we had received responses from all but one Marac by the 28th of May. There were a few duplicated responses, where more than one person from the same Marac had responded to the survey, and some responses accounted for more than one Marac. The following statistics in this document are based on responses from 30 Maracs. Due to the small sample size please be aware that 1 Marac represents 3 percentage points (3%).

Key findings



Views of Marac

- Maracs explained a range of barriers during lockdown, with common ones including IT, multi-agency working, concern around victim safety and the capacity of Marac.
- Maracs identified a number of things that were working well during lockdown, with common themes including how holding meetings virtually saved time and made Marac more efficient, communication between agencies was improved, and how agencies were continuing to prioritise Marac during lockdown.

Referrals

- Just under two thirds (63%) of Maracs identified that it was too soon to tell if lockdown had affected referral numbers.
- Just over half (53%) had not identified any change to referral numbers for hidden victim groups such as BME, LGBT+ and those with disabilities.
- Almost a quarter of Maracs (23%) said they have identified repeat rates being higher than usual; 7% based on their data and 17% based on perception.

Running the Marac

- No Maracs are currently being run in person. The most common method of meeting during lockdown is teleconference and only one Marac said they were using videoconference.
- Nearly all of Maracs (97%) are still being run at the same frequency as before lockdown. 1 Marac is being run more frequently.
- Just under two thirds of Marac (30%) have not changed who acts as the Chair.
- Almost nine out of ten Maracs (87%) had not changed who was invited to attend the Marac.

Supporting the victim

- One third of Maracs (33%) stated that it had become more difficult for the Idaa to contact the victim during lockdown.
- Just under two thirds (63%) of Maracs commented how action planning had changed due to lockdown. Reasons for this included: services not offering face to face sessions, capacity of services, and victims not wanting to report to the police in person.

Voices of Maracs

Barriers

Maracs identified a range of barriers that they had come across since lockdown restrictions. Responses were coded into themes. Where multiple comments were given, these were separated out and coded separately. This was done for all the following open-ended questions.

Barriers to multi-agency working

Over one third of Maracs (37%) highlighted issues with different agencies and their participation in Marac as well as challenges coordinating a multi-agency response.

“Consistent agencies attendance - various across each of the areas”

Concerns around safety of victims

Over one third of Maracs (37%) commented on concerns around victim safety, victims' views being heard at Marac, and challenges around action planning.

“Managing safe contact with victims particularly those who are self-isolating or residing with perpetrators. Less scope for safe contact.”

Technical/IT issues

One third of Maracs (33%) made comments related to technical issues, including different agencies having access to different systems, and some agencies not being able to participate in Maracs virtually:

“Keeping communication going is a challenge. IT has been tricky (with not all partners being able to use the same IT systems etc for teleconferencing).”

Things working well

Maracs explained that there were a number of things that were working well during lockdown.

Improved efficiency

Over half of Maracs (57%) commented how holding virtual meetings saved them time and made Maracs more efficient. They also explained how being able to hold the Marac virtually ensured that it continued to take place.

“Teleconferencing has been keeping the process going.”

Better communication between agencies

Two fifths of Maracs (40%) explained how multi-agency working had improved during lockdown. This was in relation to improved communication, as well as agencies prioritising Marac during this time.

“Ongoing communication and support to the reps keeping them informed and updated as to the purpose of any changes you are trying to make to aid the process.”

“Partner agencies still see the MARAC process as important and are keen to continue to support it during lockdown...”

What else?

Support for victims

Just under two thirds of Maracs (60%) identified that it had become more challenging to manage safe contact with victims. They emphasised the lack of face to face support and survivors living with their perpetrators as key issues

“Lockdown has made it more challenging in being able to manage safe contact with some victims.”

“All services in our area are providing phone support only and this is limiting...”

The Marac process

Just over one in ten (13%) of Maracs made additional comments around the Marac process. This included increases of referrals based on professional judgement, and there not being time to discuss all cases over teleconference, and concerns over the robustness of action planning.

“Not all cases go to the teleconference due to time limit doing it this way. Email correspondence is all used for some cases.”

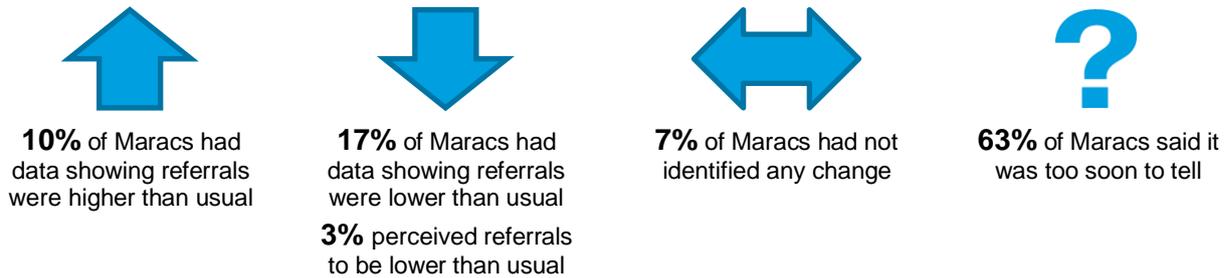
“I am not certain the action plans are as robust as they would be if the meetings were conducted by video conference2

No change or too early to tell

Half of Maracs (50%) either commented that it was too soon to identify any significant changes, or that they had not noticed any significant changes themselves.

Referrals

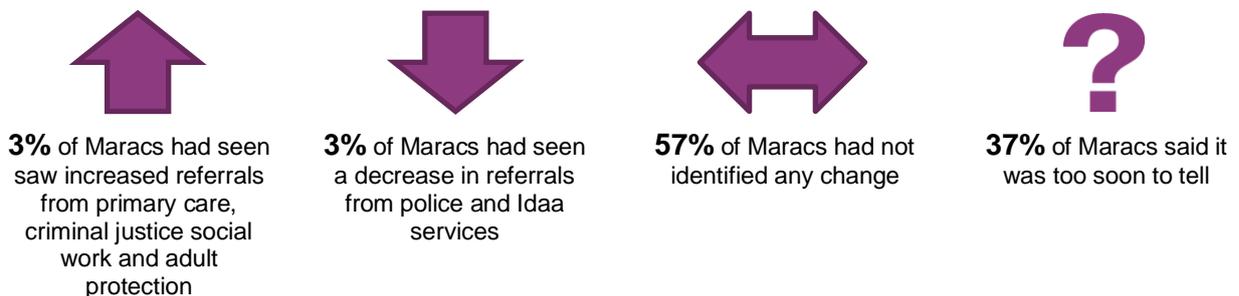
Nearly two-thirds of Maracs (63%) said it was too soon to tell if lockdown had caused a change in the number of cases they were seeing:



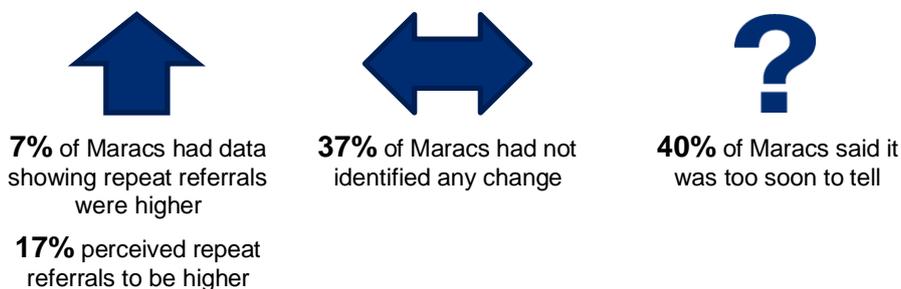
One in ten Maracs (10%) said lockdown had led to an increase in the number of referrals for groups which can often be 'hidden', such as LGBT+, BME and those with disabilities:



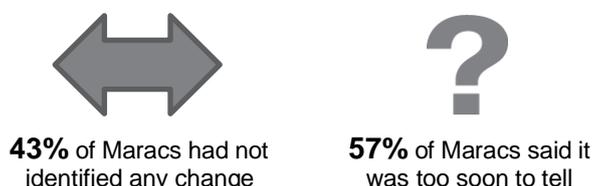
Over half of Maracs (57%) had not detected a change in the referral route of cases during lockdown:



One quarter of Maracs (23%) reported an increase in the number of repeat referrals since the introduction of lockdown:



Over half of Maracs (57%) said it was too soon to tell if lockdown has led to an increase in the number of serial perpetrators being discussed:



Running the Marac

The majority (87%) of Maracs are currently being delivered by teleconference, with only 3% being delivered by video conference. 10% stated 'other' and specified that Maracs would be held via email and by Microsoft Teams. This is a change in how all Maracs would usually deliver.



87%
of Maracs are being
delivered by
teleconference

The majority of Maracs (77%) are meeting monthly, with 13% meeting fortnightly and 10% meeting weekly. Only 1 Marac said that they had increased the frequency of the Marac with the majority (97%) keeping to the same frequency as before lockdown.

The majority (70%) of Maracs said there had been no change in who chairs the Marac. The remaining 30% said there had been a change in chair; due to either capacity or availability, including as a result of shielding.”

The majority of Maracs (87%) had not identified any changes in which agencies are invited to Marac. The remaining 10% (three Maracs) all specified education and one specified health, criminal justice social work, mental health and addiction/substance misuse. Two of the Maracs also selected other but did not leave further details.

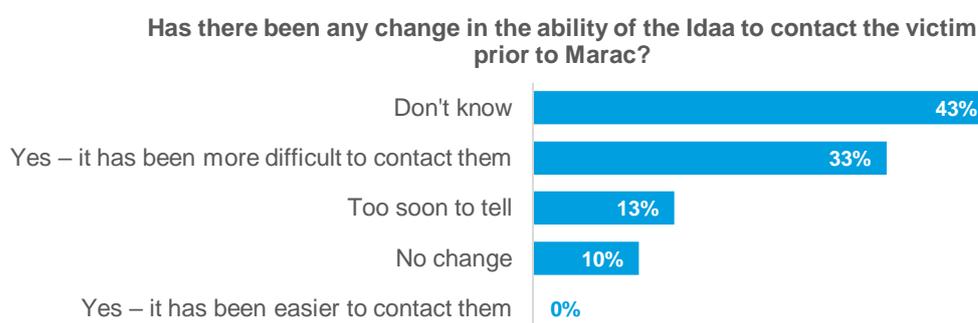
Most Maracs (57%) had not identified any changes in the attendance of invited agencies since the beginning of lockdown. For those that had noticed changes (30%) common agencies included Children and Families Social work, Education and Mental Health.

Please indicate any agencies whose frequency of attendance has reduced:	Number of Maracs
Children and Families Social Work	6
Education	6
Mental Health	6
Housing	3
Voluntary Sector	3
Addiction / Substance Misuse	3
Adult Protection	2
Idaa	1
Other (please specify)	1
Police	0
Primary Care Service	0
Secondary Care	0
Criminal Justice Social Work	0

In the majority of Maracs (70%) there had been no agencies who said they wouldn't be providing a representative. For the remaining fifth, the most common answer was Idaa with four Maracs selecting this option. The most common reason for this was because of technical issues.

Supporting the victim

A third (33%) of Maracs said that it had been more difficult for the Idaa to contact the victim prior to Marac.



The majority of Maracs (63%) noticed changes in the kinds of actions being put in place since the introduction of lockdown. Their answers were coded into common themes. The top three most common themes being:

Actions around survivor contact

Five Maracs commented on how lockdown restrictions made action planning around contacting victims more important.

“As routine appointments are no longer face to face there is more emphasis in ensuring means of ongoing contact with victims”

“Agreed that a standard action would be increased contact with victim where safe to do so.”

Actions around different agencies

Three Maracs commented on how restrictions were affecting action planning with regards to different agencies. Maracs explained that different agencies are not offering face to face support, as well as survivors not wanting to attend face to face appointments due to concerns of contracting Covid-19:

“Many agencies are not offering face to face support/ reluctant to do visits/meet victims...”

“Providing of statements to Police. Victims not wanting face to face due to risk of contracting virus contact so impacting on getting statements”

Effectiveness of action planning

Three Maracs made comments on how holding Maracs virtually had made action planning more effective:

“Phone conferencing enabled people to access databases during MARAC which led to less actions for people to do their research...this has produced shorter action logs but more meaningful.”

However, eight Maracs commented on how Covid-19 was having a negative impact on action planning:

“Actions need to be realistic and achievable therefore restrictions on service provision have impacted on actions e.g. Housing Options Interviews, accessing temporary homeless accommodation, welfare visits, supporting to appointments.”

Are Maracs adequately resourced?

Just under two thirds of Maracs (60%) said that they had adequate resources to support the Marac process. One fifth identified that they did not and one fifth didn't know. Half (50%) said that this hadn't changed since the start of lockdown, with 40% saying that it was a change.