



## Adult H Domestic Homicide Review



### What happened?

In summer 2014 South Yorkshire Police officers attended an address in the North East of the city and found that a 39 year old woman had received multiple stab wounds. She was pronounced dead at the scene. Her husband was arrested for her murder. He was later found guilty and sentenced to life imprisonment and will serve a minimum of 23 years in prison

H was born in Pakistan and was the eldest of seven siblings. She came to the UK in 1992 after marrying the perpetrator in Pakistan. English was not her first language. The perpetrator was born in the UK and grew up in South Yorkshire. His parents originate from Pakistan.

Between 2000 and 2008 H separated from the perpetrator, because life with him was so difficult, and with her two sons lived in the south of the UK close to her sister's family.

The victim never reported allegations of domestic abuse to the police (or any other agency).

However, there is credible independent evidence that H suffered domestic abuse at the hands of the perpetrator over a number of years. This information was known to members of both families. The perpetrator had a long history of offending and substance misuse, and had a reputation that caused fear amongst some members within his community. A family member said that 'H was a loving and affectionate mother, sister and daughter... She cared passionately for the happiness of others and above all the happiness of her two sons. She was the backbone of our entire family... Why is it that despite knowing how dangerous, evil and twisted that murderer was, despite knowing his character, knowing about his violent and criminal past, nobody spoke out. Maybe if they had, H would still be with us today'.

Although there is evidence to show H contemplated divorce from the perpetrator and sought, what she believed to be independent advice, she was eventually persuaded to return

### What can we do now?

GPs and other clinicians should enquire about domestic abuse when patients discuss their drug or alcohol issues, and consider if there are vulnerable adults or children in the household.

Specialist substance misuse services should ensure that addressing domestic abuse is given the same profile as safeguarding children. Questions about home circumstances and alertness for signs of domestic abuse should be a routine part of assessment processes.

from the south of England to live in South Yorkshire in 2009. The review found that despite some missed opportunities, H's homicide was neither predictable nor preventable by Sheffield agencies.

### What did it tell us?

Domestic abuse is under reported generally and **members of some BME communities may face additional hurdles when disclosing domestic abuse**. This includes language, access to interpretation and isolation to name a few. These hurdles may make it more difficult for them to disclose their experiences and then to access competent independent advice and support. The 'toxic trio' (also referred to by organisations as the 'trilogy of risk' are three risk factors that increase the risk of child abuse; they are parental mental health issues, parental substance misuse (including alcohol) and domestic abuse. In this case the substance abuse was identified but unfortunately, although present, domestic abuse was not enquired about and so the second factor of the toxic trio was not identified. Specialist substance misuse services, and GPs if they are providing treatment for substance misuse, should **always ask questions about home circumstances when assessing patients who present with issues of substance misuse**.

The perpetrator declined to engage with specialist drugs services both while living in the community and while serving terms of imprisonment. Instead he chose to seek support and treatment for his drugs misuse from his GP. Consequently his GP was not always aware of what treatment and prescribing had been undertaken while the perpetrator was in custody. Similarly prison health providers were not aware in relation to the treatment the perpetrator was receiving in the community. On most occasions the GP and prison health providers had to rely on what the perpetrator told them rather than patient notes.

The full DHR is available here: -

<https://www.sheffieldfirst.com/the-partnership/safer-and-sustainable-communities/key-documents.html>

Organisations in Sheffield should display posters and leaflets about local domestic abuse support services including resources in community languages.

Professionals should gather information from all likely sources when managing risk, thereby ensuring that all risk factors are identified and assessed

Remember that **Domestic Abuse is common**. Be curious about relationships in a family; ask about issues such as a woman returning to a relationship after a long separation. Why did she leave? Why has she returned?