

An Illusion of Inclusion: Charity Workers' Views on Police Responses to D/deaf Victims of Domestic Abuse

Abstract

Purpose: D/deaf and hard of hearing individuals are at increased risk of domestic abuse (DA) however they may experience a range of challenges when accessing support or criminal justice services. **Method:** Using semi-structured interviews with nine professionals working in a DA or deaf-specific support service/charity (that also provides DA support), we explored how D/deaf individuals access support for DA, report incidents to the police, and pursue cases through the criminal justice system (CJS). **Results:** We found that D/deaf DA victims often experience detrimental systematic barriers when trying to access DA support, report DA and participate in a criminal investigation due to a lack of appropriate communication methods being offered or reasonable adjustments being made. A lack of D/deaf and DA awareness within policing was highlighted as a recurrent issue, which impacted upon D/deaf DA victims' willingness to contact police forces, to continue to pursue justice, and to seek help in the future. We found a small number of charities are striving to encourage D/deaf DA victims to contact the police, seek help and pursue cases but are largely unable to overcome structural deficiencies within policing, and the wider CJS and support service sectors. **Conclusions:** There is a lack of official recognition of the gaps between law, policy and practice, which is alienating and excluding D/deaf DA victims. D/deaf communities remember and have lived experiences of poor policing and inadequate treatment. The findings raise important implications for policy and practice, and issues of equality, accessibility, justice and safety.

Keywords

Domestic abuse, D/deaf, British Sign Language, Interpreting, Policing, Inclusion

Introduction

We do not know how many D/deaf domestic abuse (DA) victims there are in England and Wales. Domestic abuse involves an incident or incidents of controlling, coercive or threatening behavior, violence or abuse between those aged 16 or over who are or have been intimate partners or family members (Home Office, 2013). It includes not only physical violence and sexual violence but threats of violence, coercive emotional control, degrading behavior, and financial abuse. DA is understood to be endemic in society. Estimates indicate that between 25 and 40 percent of the population (or more) experience DA at some point in their lives, disproportionately affecting women and girls (ONS, 2021; Herbert et al., 2022; Sardinha et al., 2022). It is all but impossible to identify the prevalence of DA within D/deaf or deaf and hard of hearing (DHH) populations (for comparative purposes), at present. Official data does not exist. It is estimated that just under a million people in the UK are severely/profoundly deaf, around two million use hearing aids, and over 50,000 people use British Sign Language (BSL) as their preferred language (Hearing Link Services, 2022).

Research studies, predominantly concentrated in the U.S., indicate that rates of DA experienced by D/deaf women in their lifetime may be twice that of the general population (Anderson et al., 2011; Bealieu et al., 2017). For women with any kind of a disability, the extent of DA is estimated to be between 2 - 5 times higher than the general population (Chirwa et al., 2020; Fanslow et al., 2021; García-Cuéllar et al., 2023). In the U.S., Anderson and her colleagues have conducted some pioneering research on D/deaf DA victims (e.g. Anderson, 2010; Anderson et al., 2011; Anderson & Pezzarossi, 2012), highlighting the unique characteristics, experiences, techniques of abuse (i.e., Deaf victim's status or hearing abuser privilege), consequences, and barriers to support and justice. There is a need to identify the prevalence of D/deaf DA victims so that social systems, such as the criminal justice system (CJS), accommodate their needs appropriately, protect their rights, and most importantly implement prevention and deterrence initiatives to reduce risks and disproportionalities.

Following the example of other research studies, the term D/deaf is used here to refer both to those victims who can be defined medically as 'deaf' and those who identify as culturally 'Deaf' (who consider being Deaf as an identity and themselves part of a community/ies, much like other linguistic minorities; as a difference rather than a disability – see Harris, 1995; O'Rourke & Grever, 2005; Baines, 2007; Bramwell et al., 2013; Lumsden & Black, 2020). Our use of the term D/deaf DA victims in this article can also include people who are hard of hearing. People who are hard of hearing and rely on lip reading, assistive hearing technology, or sign language can be classified as disabled and/or identify as culturally Deaf (O'Rourke & Grever, 2005). Hard of hearing people may face many or all of the same challenges as Deaf people.

In recent years there has also been an increase in research on D/deaf experiences of the criminal justice system in England and Wales. Race and Hogue (2018), Lumsden and Black (2020) and Skinner and Napier (2022) have identified barriers to support and justice, particularly during initial police-civilian interactions, interviews and judicial proceedings, comparable to those in the U.S. Our article seeks to build upon the growing volume of work by focusing in particular on D/deaf DA victims within England and Wales, rather than D/deaf victims, witnesses and suspects more generally, to better understand the issues they face, and to draw attention to the often-neglected experiences of charities and DA support services (such as the experiences of Independent Domestic Violence Advisors [IDVAs]).

This article focuses on one aspect of a larger study that sought to explore: How do D/deaf DA victims experience accessing DA support services and the CJS compared to hearing people, and the impact of such experiences from the perspective of professionals working for DA and/or deaf-specific services supporting them?

1. Encouraging D/deaf DA Victims to Recognize DA and Seek Support

Academic literature indicates that D/deaf DA victims will face significant challenges when contacting DA support services and charities from the outset. The services, educational programs and outreach work of DA agencies and charities are typically targeted at people who can hear (Lightfoot & Williams, 2009; Mastrocinque et al., 2015). Surveys indicate that D/deaf DA victims may not have the English-language literacy skills or the digital literacy skills to navigate websites, read guidance and complete online forms, so can remain unaware of support services available (to hearing people) and do not know how to seek help (Crowe, 2015).

Deaf specific services and charities, on the other hand, typically carry out a range of non-DA-related services for people who are DHH addressing an array of needs, from employment to housing and social activities. Their lack of involvement in DA-specific work means that they can lack guidance on DA disclosures, and the right questions to ask (in the right way). Generally, they do not have the same level of expertise as DA-focused agencies that interact closely with police, solicitors and courts. Deaf specific charities often work closely with a D/deaf person's partner or family across a range of non-DA-related services too. This can make disclosures or exploratory conversations difficult (Smith & Hope, 2015; Cerulli et al., 2015). In England, there is only one deaf-specific service that also provides DA-specific support.

Academic surveys also indicate a tendency among D/deaf DA victims not to seek help (Crowe, 2013, 2015, 2017; Anderson et al., 2017; Mastrocinque et al., 2022). Victims of DA, whether hearing or D/deaf, face many of the same fears. They may fear the next attack, reprisal (if they report their abuser to the police), escalation, losing their children to social services, shame or embarrassment if their family, friends or neighbors find out, being disbelieved, or losing their partner (who they usually rely upon to some degree). Some D/deaf victims may be almost entirely dependent upon a perpetrator of abuse to communicate with hearing people and to manage household affairs. The perpetrator might be their only link to any type of wider support. Confiding in childhood friends, charity workers, healthcare workers, GPs or interpreters can be fear-inducing too, since Deaf communities are usually tight knit, and their abuser (who may also be D/deaf) may have a relationship or rapport with the people they interact with (Anderson, 2014; Lightfoot & Williams, 2009; Mastrocinque et al., 2015). D/deaf victims may have little trust that their disclosure will be kept private, and fear further abuse or ostracization by their social circle for making an allegation. An abuser may also reiterate to their victim that they will hear about it if the victim tries to tell anyone, a common form of coercive control (Watson, 2014). This is part of the landscape that D/deaf DA victims and charities/support services must navigate when they try to address DA and seek/provide support.

2. Encouraging D/deaf DA Victims to Contact Police

A second barrier well documented in academic literature is the police. D/deaf DA victims may fear the police and be intimidated by them. They may fear that responding police officers will ignore them and communicate only with hearing people; misunderstand them; treat them as stupid or less educated because of their inability to hear; cast them as an aggressor and arrest them (D/deaf victims have been arrested as suspects after police officers communicated only with a perpetrator); or judge them as vulnerable and remove them from their home for their own safety (see Brown, 1997; Skinner & Napier, 2022). D/deaf communities can have collective memories of being deprived of their liberty and mistreated within state institutions and facilities, where deafness is equated with weaknesses and used as a form of social control (Baines, 2007; Skinner & Napier, 2022). D/deaf victims may even fear that the police will involve children in an incident. Though force policies discourage officers asking partners, family members and children to act as interpreters, police officers have reportedly asked for children as young as six to interpret for a D/deaf relative in need of assistance (Lumsden & Black, 2020).

D/deaf communities share stories and can recount lived experience of these very police responses (Skinner & Napier, 2022). Partly as a result, D/deaf signers have a low level of trust in policing, which has reportedly

remained largely unchanged in recent years (Race & Hogue, 2018; Lumsden & Black, 2020). These community memories can shape expectations and interactions between D/deaf DA victims and police officers, including expectations that they will be disbelieved, demeaned and disempowered by police and be deprived of their liberty. Distrust of police and other state bodies is a significant reason for D/deaf DA victims not to report abuse (Mason, 2019).

3. An Illusion of Inclusion

The third and final theme addressed in the article concerns the 'illusion of inclusion'. This is a term used by various researchers to describe the appearance that equality of access is being provided to D/deaf people, often through an interpreter, when the reality is that proper communication is not taking place because of gaps in provision (Russell & Winston, 2014; Caselli et al., 2020). The illusion can occur when organizations claim to be inclusive, referring to policies and the employment of interpreters, only for D/deaf people to continue to suffer language/communication deprivations. The illusion can perpetuate their existence in impoverished communication environments and prevent others from helping because of the outward appearance of access.

On the surface, it can appear that D/deaf DA victims have equivalent access to support services. The government's official website on DA, called 'Domestic Abuse: How to Get Help' provides guidance to D/deaf DA victims. It advises that:

If you are deaf or can't use a phone [to call 999] ... you can register with emergency SMS.
Text REGISTER to 999. You will get a text which tells you what to do next. Do this when it is
safe so you can text when you are in danger' (Home Office, 2024: 1).

D/deaf DA victims are also advised to download and use Relay UK's phone app to call 999 remotely through a Relay Assistant/interpreter (known as '999 BSL'). Both the emergency SMS and 999 BSL services are operated by Relay UK (which is run by BT – Relay UK, 2024). The government website further advises that if a victim is not in immediate danger, they can use a separate BSL video relay website (or online live chat, web form or 24 hour freephone number) to confidentially contact the 'National Domestic Abuse Helpline' (run by the charity Refuge) to discuss their rights and options from Monday to Friday 10am to 6pm (Home Office, 2024: 1).

Both the 999 BSL and Helpline video relay services (VRS) use an interpreter intermediary to link D/deaf victims with hearing people at support services (DA advisors or police staff/officers). The government webpage

also contains a link to the Domestic Violence Disclosure Scheme (also known as 'Clare's Law'), so that a victim can request police-held information about an abusive partner, as well as various injunctions such as a non-molestation order (NMO) and other information. The level of detailed information, together with YouTube videos for sign language users, suggests inclusion.

The 'illusion of inclusion', however, invites skepticism; to investigate whether provisions that look inclusive on the surface are sufficiently mitigating communication deprivations or are playing a part in papering over an extant impoverished communication environment. The government's official website says nothing of problems that D/deaf DA victims might encounter once they make contact with police officers or are advised to seek safety in a refuge. There is no mention that they might not be afforded an interpreter. Feedback on the Emergency SMS service has been mixed. Lumsden and Black (2020) reported that some D/deaf respondents, who were sufficiently literate to use the service, did not understand replies from the text service and found that the service was slow, leading to a fragmented conversation that failed to communicate the urgency of serious emergency situations. Highlighting the fragmentary nature of text exchanges, Lumsden and Black (2020) called their journal article: 'Sorry, I'm Dead, it's Too Late Now...' (employing some dark humor to highlight the problem).

999 BSL gives the appearance of inclusion and accommodation at the point of police contact too. However, issues of access (digital literacy and technical isolation), reliability (webcams do not always work) and communication quality have been reported (Lumsden & Black, 2020). To provide a degree of in-person sign language at police stations, some forces have also invested in training officers in basic sign language skills and D/deaf awareness. Known as a Police Link Officer for Deaf people (PLOD) in the UK, these officers may come from various ranks and will have undertaken deaf awareness training and a basic qualification in BSL. PLODs are volunteers who act as a special point of contact to enable D/deaf people to communicate with police when they enter a police station, and provide advice to officers who are engaging with a D/deaf civilian (Race & Hogue, 2018). However, they are very few in number and do not all have sufficient BSL fluency or the confidence to engage comprehensively in one-to-one communication in sign language (Lumsden & Black 2020; Skinner & Napier, 2022). How support services and charities support D/deaf DA victims when they encounter this reality (and the apparent privileging of oralism over sign language) is of key interest.

Research Question

This article focuses on one aspect of a broader study into the experience of D/deaf DA victims when accessing DA and criminal justice support and the impact of such experience compared to hearing DA victims. In particular, it considers how D/deaf victims of DA experience access to police assistance and ancillary services, from the perspective of DA support services who help them.

Method

This study employs a qualitative cross-sectional design (Bryman, 2016), ideally suited for exploring the complex, nuanced experiences of D/deaf individuals who have encountered DA. By capturing a snapshot of these experiences at a single point in time, the research aims to provide a comprehensive understanding of the unique challenges and dynamics involved.

Participants

The study used a combination of opportunity, purposive, and snowball sampling techniques (Bryman, 2016) to recruit participants. These methods were chosen to ensure a diverse sample of individuals who have experienced supporting D/deaf DA victims and to facilitate access to participants who might be difficult to reach through traditional sampling methods. The study consists of nine participants (two were interviewed together). Of the nine participants, four were Domestic Violence Advisors from a Deaf NGO (Deaf British Sign Language (BSL) signers) which also provide DA-specific support, and five were Independent Domestic Violence Advisors from a mainstream women's focused NGO that provides DA-specific support (hearing English speakers). Four interviewees were D/deaf and were interviewed in BSL.

Data Collection

Ethical approval was sought from the University of Wolverhampton Ethics Committee. Participants were fully informed about the purpose of the study, the nature of their involvement and the measures taken to maintain their privacy. This transparency was crucial in maintaining trust and fostering an environment where participants felt comfortable sharing their experiences. Participants were provided with a written participant information sheet and consent form beforehand and had opportunities to ask questions before starting the interview in their preferred language. We aimed to capture rich, qualitative insights into the experiences of service providers in interacting with deaf individuals, through interviews (including one joint interview with two participants who wished to be interviewed together). Participants were interviewed in their preferred language, BSL signers in BSL and English speakers in English. All interviewers were experienced doctoral level researchers and interviews conducted in BSL were done by an esteemed and experienced fluent BSL user who is a core member

of the research team. All were conducted via Microsoft Teams and were recorded (audio/video) for later transcription.

A total of eight individual/joint interviews were conducted (four in BSL and four in English) lasting approximately 30 minutes each. Interviews were semi-structured, allowing participants to express their thoughts and experiences freely. The interviews covered a range of topics including D/deaf DA victims' interactions with the police, legal, housing and health services. Our chosen method allowed for in-depth, personal accounts of the challenges faced by D/deaf individuals and the systemic barriers they experience within these services. The questions we asked in the interview were the same for all participants and were:

- 1) How do deaf victims of DA experience accessing DA services? (General and deaf specific)
 - a. Are similar problems/challenges/barriers encountered with accessing other public or private services e.g. financial support, legal aid, Citizens Advice, rehousing, estate agents etc.?
- 2) How do deaf victims of DA experience accessing the CJS?
 - a. Reporting to the police
 - b. The courts/pre- and post-trial process
 - c. Victim support
- 3) How do these experiences differ for deaf DA victims compared to hearing DA victims?
 - a. Prompts if mention delays – (1) what is considered a delay? (2) at what points are delays experienced (3) how/to what extent are delays experienced compared to hearing people?
- 4) How does the experience of accessing DA support services and the CJS effect deaf DA victims in terms of their:
 - a. Mental health and wellbeing
 - i. Do the perceived differences in treatment/experience of deaf victims compared to hearing victims affect their senses of self and wellbeing etc.?
 - b. Willingness or motives for reporting/accessing services in the future
 - c. Actual or perceived feelings of safety
- 5) Anything you'd like to add that we haven't covered?

Data Analysis

The qualitative data from the interviews were transcribed and analyzed using a six-phase thematic analysis framework (Braun & Clarke, 2006). The first stage was to transcribe the interviews (for this study that included translating the BSL into English as only one of the team is a BSL signer), followed by an initial reading to become familiar with the data. Secondly, coding significant statements and segments of the data related to the research question. Thirdly, grouping the codes into potential themes and subthemes. Fourthly, refining and reviewing the themes to ensure accuracy. Fifthly, finalizing the themes and providing clear definitions and names for each, and finally, was the write up. The raw data was originally coded in NVivo by the lead author, which developed an initial set of references which were then developed into initial themes and subthemes reflecting the broader aims of the research. These were then refined further by another member of the team for the purpose of this article primarily focusing on access issues and delays when contacting DA services and/or the police. We plan to publish the other themes not reported on in this paper in other paper(s).

The choice of interpretivism (Cohen et al., 2018) as the epistemological framework for this study is grounded in the nature of the research questions and the objectives of this study. The aim of this study is to understand the lived experiences of D/deaf DA victims when interacting with services such as the police, CJS, housing and health services. These experiences are deeply personal, context-specific and expressed in two languages (BSL and English), making interpretivism an appropriate lens through which to explore and analyze the data. Interpretivism allowed the researchers to explore the subjective experiences of the participants, capturing their perspectives, emotions, and interpretations of their interactions with various services. Our draft findings were sent to our participants to ensure that any misunderstandings, misrepresentations or misinterpretations could be corrected. This enabled some respondent validation of our analysis. We also applied relevant coding to the interview transcripts as part of the content analysis (Krippendorff, 2004), drawing out themes and examples affecting D/deaf DA victims (from the perspective of support services). These included: 1) encouragement to talk about DA; 2) seeking police assistance; 3) the initial police interaction and D/deaf considerations; 4) applying for an injunction; and 5) accessing a refuge among others (the first three are explored in this article).

Findings

In this article, our findings center around three main themes: (1) the central role of charities in encouraging D/deaf DA victims to recognize DA and seek support; (2) the role of charities in encouraging D/deaf DA victims to report DA to police; and (3) whether and to what extent charities and D/deaf DA victims experience the illusion

of inclusion when interacting with police and ancillary services. Quotes extracted from the transcripts are labelled as PS1 – PS8, representing the eight individual/joint interviews conducted. Generally, the responses between hearing and signing participants were the same. There was one D/deaf signer who reported that her experience of supporting deaf DA victims was quite positive, however this may be due to the survivor accessing the deaf-specific DA service provided by that organization in which the participant worked.

Theme 1: Encouraging D/deaf DA Victims to Recognize DA and Seek Support

PS3 told us that D/deaf victims struggle to make initial contact with DA support services and charities, some do not know how to. PS1 explained that hearing victims have a “*much more accessible route*” to support agencies because the main route is the telephone. For D/deaf DA victims, this may not be an accessible way to communicate with DA services. PS2 observed that many physical offices have closed, with a shift to remote work, which were previously more accessible points for support, because a D/deaf DA victim could attempt other forms of communication such as bringing a friend to interpret or writing a message if they could read and write. For D/deaf DA victims who could read and write, PS1 discussed the absence of web chat services for various DA charities that would have been beneficial for her client as there were times “*she was really struggling*”. The absence of obvious and accessible video interpreting services discouraged some D/deaf DA victims from seeking help from DA support services and specialist advisors (PS6).

To help address these obstacles, a small number of charities are encouraging D/deaf DA victims to recognize DA, assisting them to communicate with various support services, and encouraging them to contact the National Domestic Abuse Helpline and 999 BSL directly. The NGO we engaged with has taken a lead in employing deaf Independent Domestic Violence Advisors to assist D/deaf DA victims and pays for interpreters to assist D/deaf DA victims in meetings with police officers, solicitors, local authorities, social services and housing providers in some cases. However, it was highlighted that statutory services have a legal requirement to secure their *own* interpreters to ensure access, something which does not appear to be consistently respected. Much of their communication, support and commissioning of interpreters nationwide is done remotely. At their main offices, they can provide in-person support, including closed groups for D/deaf survivors of DA and awareness-raising workshops for D/deaf DA victims. They have hosted community coffee mornings and hired out rooms for workshops on DA through BSL.

Recognizing that a 'one size fits all' approach is the wrong approach to take (and one of the structural barriers that D/deaf DA victims face), the charities strive to reach those who do not or cannot attend community events.

PS3 mentioned how one client would prefer to text and would communicate that way all the time, whereas another client would never text. PS4 discusses how a 75-year-old woman was always accompanied by her abusive husband and found it challenging to access services. The support worker had to devise a plan to safely speak with the victim during a medical appointment by requesting she attend a cervical screening test and dressing as a nurse so that she could get a moment away from the perpetrator and disclose her abuse.

Support workers have also found that D/deaf awareness of what DA involves, and whether they are victims of it, remains low. PS2 explained that when she communicated with the deaf community at a coffee morning, they did not understand:

...that domestic abuse can come in the form of child to parent or child to grandparent...They also didn't understand the terminology...There was no sign for domestic abuse, the sign for domestic abuse was this [demonstrates fist shape – BSL sign for domestic violence which encodes punching].

Features of DA such as taking control of finances, cutting a person off from friends and family, and monitoring technology usage were not obvious. It can also be particularly difficult for D/deaf DA victims to identify financial and technological control if they rely heavily on partners or hearing people to pay for things (including paying for phone contracts, bus tickets, and managing finances) and communicating with hearing people on their behalf. There can be issues with sexual consent too. PS6 said that *“Lots of deaf people don't know about that. They're like, oh, you know, I put up with it and I said you know, you don't have to put up with it. I mean, really, if it's nonconsensual, sex is rape. But people don't understand that... there's an education gap there”*.

D/deaf DA victims also reportedly harbored a fear of being forced to move away from their community if they reported DA to support services or police. As PS6 explained that *“they [deaf people] feel comfortable in the deaf community and want to stay in the deaf community. And if they report [DA], then it might mean they have to move and then they become very isolated, they feel lonely”*. This was confirmed by PS2 who said *“in regards to domestic abuse, it's a very tight knit community, the deaf community, because they're so small. And if they're going to the same coffee morning week after week and their reporting domestic abuse on a partner who might also be there, it's not the best way to access the support services”*. The loss of social opportunities is a concern as noted by PS1 who said she had supported a client who had *“lost her social circle because he was in it...He's also deaf”*.

D/deaf people also typically rely on their knowledge of the area and local resources to get around. This is especially important for those who rely on public transport as PS1 observed: *“They know the bus driver, they know where they are, but if they move away a D/deaf DA victim can't ask the bus driver to let me know when to get off”*, or at least must begin this familiarization process again. Deaf people know who the employers are who readily employ deaf people and know that there will be ‘deaf friendly’ bus drivers if they use public transport to get to these employers. Moving even short distances, such as a refuge at the other side of a town or city, is daunting as it removes these relatively barrier free routes to mobility and employment. To help D/deaf DA victims overcome these challenges, charity employees and volunteers are regularly communicating with them, providing interpreters for them, completing forms with them, and writing emails to local authorities, housing associations, refuges and police forces to ask for assistance.

Theme 2: Encouraging D/deaf DA Victims to Contact Police

Support service and charity workers told us that contacting police had become a lot better since the rollout of BSL 999 in 2022. PS6 described 999 BSL as *“great”*. However, it was widely reported that following the initial call for police assistance or report of DA, the police service frequently fell short of expectations. PS8 said *“you call BSL 999, but then the police will arrive at the house without an interpreter”*. In one case, police officers reportedly *“came to the house without an interpreter and just used a pen and paper to communicate”*. PS6 explained that they *“might try to use a pen and paper, but some people can't read English well, so they struggle and might have to use gestures or whatever”*, highlighting the lack of communication awareness.

Furthermore, PS3 described a specific case where a D/deaf victim’s behavior change was noticed in college, leading to a safeguarding intervention. However, the team visited the home without an interpreter so PS3 had to step in to assist with statement taking, a role they are not typically expected to fulfil. PS3 recounted another case where a safeguarding referral about a young person was made by her college, and the police visited the home and spoke with the parents who were not deaf (and were in fact the abuse perpetrators). The victim was present and *“obviously couldn't hear what they were saying and didn't know what was being said”*. The police *“just kinda left after not really being able to fully communicate with the client and then taking the word of the parents who kind of said nothing had gone on”*. There are reasons for this, PS6 commented that finding an interpreter is not prioritized because of a *“lack of deaf awareness”* and because *“it takes extra time, extra effort. It's not something that they can do expediently. They don't know what the communication needs are”*. Unfortunately, to

D/deaf DA victims, *"it looks like they can't be bothered to find an interpreter"* (PS6), adding to accounts of the collective of police apathy.

In addition, there is reportedly a heavy reliance on lipreading in police-D/deaf DA victim interactions. PS2 explained that police officers claim that they had verbally told the victim what her options were and believed that the victim could lip read but that is an assumption. It can be unclear what communication is taking place, what is being understood and getting missed. PS3 mentions how her deaf client could not lip read as her family never allowed her to develop that skill. The concern is that the victim *"doesn't have a voice"* (PS6). As PS2 said, in one case that involved lipreading, she asked the police:

"did they use a BSL interpreter to offer her that communication option [lipreading] and they said 'no'. We just asked her, and she said it was fine ... I challenge this and I say that is not their first form of communication. And they said, 'oh well, I've asked them, and they said that's OK'. I said, 'have you asked them, using the BSL interpreter?'. 'No' ... [I said] 'well can you at least ask them with a BSL interpreter so we can absolutely guarantee they're aware of all their options'".

Here the assumption was that, by asking, the communication is not problematic but without an interpreter present to confirm that choice then the opportunity for proper communication is denied. D/deaf DA victims cannot tell an officer something by lipreading. It can be little more than one-way traffic. PS2 asked (rhetorically) *"how are they [D/deaf DA victim] supposed to feel safe and secure in that situation without an actual effective communication means?"*. Using communication forms other than the D/deaf DA victims' first language (via a sign language user, interpreter and/or an intermediary) creates issues of safety.

In another incident, PS2 described a deaf BSL-using woman who was taken to a police station in the middle of the night for her safety, without her hearing aids rendering her unable to hear. The officers claimed that they had asked the victim if she wanted to return home to retrieve her hearing aids before she made a statement and the victim had replied "no". However, the police did not provide a sign language interpreter when communicating with the D/deaf DA victim, even though her communication needs had changed. The victim could not hear without her hearing aids. The police said they assumed that the D/deaf DA victim understood her options as they thought she could lip read (not considering the loss of the hearing aids). This resulted in the D/deaf DA victim leaving without making a statement, and PS2 sent a request to the police to update their records with the victim's

main form of communication (BSL). The police subsequently proceeded with a victimless prosecution, which failed due to insufficient evidence.

Interviewees added that it was not uncommon for police officers to invite D/deaf victims to attend a police station where a sign language interpreter would be provided to facilitate communication, however this often involved significant delays which impacts the victims' willingness to pursue CJS involvement. PS2 explained that once victims contact the police, they often *"have to wait for a secondary contact whilst they obtain a BSL interpreter"*. And that *"you would need to wait like four days to get a BSL interpreter ... like so much can change in four days"*. This waiting time can be longer with PS6 complaining that taking a witness statement for a D/deaf DA victim *"could be anything from two weeks up to four months ... the police often say, oh, they can't find an interpreter, and often you know prevaricate"*. This suggests that finding an interpreter is part of the problem and exacerbates the negative D/deaf DA victim experiences of their police interactions.

PS5 shared an example where a D/deaf DA victim was asked to provide a statement through a sign language interpreter and had to travel from the west of England to an East Midlands Police Station where the abuse was initially reported, only to find that an interpreter was not available. This resulted in a wasted five-hour round trip and led to significant delays in the arrest of the perpetrator, prolonging the risks of DA. In another case, PS3 said that they went *"round and round in circles"* trying to get the police to obtain an interpreter so that the D/deaf DA victims could make a statement. By the time an interpreter had been arranged, the D/deaf DA victim was frustrated and no longer interested in pursuing the case. And PS7 said *"Sometimes I had to call three times to make sure that there was an interpreter there. Then when I arrived, there was still no interpreter. So that's one of the sticking points. That's one of the things we struggle at the moment, trying to make sure they have an interpreter"*.

PS2 observed that *"a lot of the feedback in regards to police support was so negative to the point where they said they wouldn't even bother speaking to the police because it was that much of a negative traumatic experience for them in trying to communicate with the police"*. PS3 concurred saying people get to a point of despair where they just want to *"move on"*.

Thus far we see that D/deaf DA victims experiences of DA support services in general (Theme 1) and reporting DA to police services (Theme 2) indicate that there is a stark difference between the images, policies and services that suggest inclusivity and the reality experienced by D/deaf DA victims on the ground.

Theme 3: An Illusion of Inclusion

The experiences and perceptions of people working for support services and charities presented above are evidence that D/deaf DA victims are suffering communication deprivation and inequality. D/deaf DA victims appear to exist in an impoverished communication environment that is not officially acknowledged. Third sector organizations are reportedly spending hundreds of pounds per meeting to hire freelance interpreters whose services end up being used to ensure that BSL users can communicate with police officers, housing providers, refuges and statutory agencies (rather than for their hiring purpose which is personal interpreters for the Independent Domestic Violence Advisors). Costs of around £375 per meeting/interview are not unusual (PS2). PS2 highlighted that independent freelancers booked through a website often need to be booked for a minimum three-hour slot, and have their mileage paid for. Multiple conversations may also need to happen across different days. Due to the cost, charities cannot afford to pay for and facilitate all of the meetings/communications that need to take place, nor are they legally required to do so. Although, every effort is made to ensure a BSL interpreter is used where needed and where possible. PS2 said “...we as a charity, really struggle to pay for the BSL interpreters because it is a lot of money”. Charities with deaf Independent Domestic Violence Advisors can apply for government Access to Work funds for individual interpreting budgets but these funds are to cover the work of the Independent Domestic Violence Advisors which does not extend to supporting the police interpreting cost.

According to the 'illusion of inclusion' theory, the outward appearance of inclusion and support can also leave other agencies unaware of the extent of a D/deaf DA victim's communication deprivation, thus discouraging them from providing additional support. Healthcare workers, emergency housing providers and homelessness teams who could liaise with and report DA to police services are reportedly falling short too. PS3 described how a D/deaf DA victim had “*evidently self-harmed*” and contacted a support worker. The D/deaf DA victim was directed to attend a hospital Emergency Department but after seven hours of waiting they could not obtain an interpreter. Healthcare staff reportedly conducted a “*half arse*” assessment without an interpreter or a member of staff who could sign, and no police referral was made (PS3).

PS7 mentioned that homelessness and emergency housing teams can “*look like they can't be bothered*” with D/deaf DA victims. Charity workers and D/deaf DA victims frequently have to remind statutory services of their legal responsibilities to ensure access and mention legislation such as the Housing Act or Equality Act to encourage them to help and comply (PS6; PS7). PS2 commented that agencies “*offer support and say we can*

help you, but agencies don't actually then prove that they can, they just offer it and then it's just the dead end".

For one D/deaf DA victim, delays in arranging interpreters and waiting for support workers to send emails about financial support (a personal independence payment) took several weeks, which resulted in her relying on a food bank to survive (PS3).

The lack of communication means that D/deaf DA victims may return to reside with their perpetrators, making it unsafe and challenging for support services to contact them again (PS1). Following support failures, D/deaf DA victims can ignore any further offers and assurances of support due to a lack of faith in their effectiveness. There was a view that, while there were some examples of good practice within various statutory agencies and teams, it was inconsistent, with PS7 saying that *"it's a little bit of a lottery"*. PS6 described it as *"... a postcode lottery"*. PS2 observed that *"[D/deaf] people have had a lifetime of discrimination and failings by statutory agencies, even before domestic abuse has been mentioned"*. This highlights that often these communication barriers after DA significantly contribute to a lack of faith in the system.

Discussion

To our knowledge, this is one of the first studies to explore the experience of D/deaf DA victims in England and Wales from the perspective of the people who help them directly, offering new insights into the challenges and barriers experienced by D/deaf DA victims when trying to access support. Support service and charity workers recounted incidents of severe D/deaf DA victim's communication deprivation. There were numerous barriers to communication, from initial awareness of and attempts to contact DA organisations (designed largely for hearing people) to seeking police assistance, places to stay as a sanctuary from abuse, and assistance to buy food once DA had been reported. Indeed, previous research has also found that D/deaf victims can fear being ignored by police officers who cannot be bothered to communicate with them or make them feel like a low priority (Race & Hogue, 2018). D/deaf victims of crime have also reported feeling that police officers 'run' as soon as they realize someone is deaf and can be made to feel that they are 'wasting police time' (Lumsden & Black, 2020).

The increase in educational programs and awareness raising campaigns in recent decades has largely targeted hearing people, and many D/deaf victims encountered by third sector workers do not have a good understanding of DA. D/deaf people can struggle to understand the features and terminology of DA. For instance, there is no sign covering the diversity of DA. Many users sign DA implying punching, but abuse can take many other non-physical forms. Such issues have also been echoed in previous research in the US (Crowe 2015; Lightfoot &

Williams, 2009; Mastrocinque et al., 2015). Some D/deaf people do not have a good standard of literacy, a few are illiterate, some cannot speak or understand English (which is a prerequisite for lipreading in English), while some simply cannot read lips raising concerns for the accessibility and impact of such campaigns and educational materials.

The few charities working directly with D/deaf DA victims are apparently one of their only lifelines, connecting them with support workers, advisors, police officers, solicitors and housing officers. D/deaf DA victims are reportedly thankful for the interpreting intermediaries and D/deaf advisors provided by organizations and for those Independent Domestic Violence Advisors who are deaf aware and proactive about their communication needs. Respondents told us that some local authority departments and statutory agencies have proactively booked interpreters in advance of meetings, recruited in-house interpreters and are utilizing more video interpreting services, but it is hit and miss, like a 'lottery' (PS6; PS7). Charities cannot fill all of the gaps in between, as they do not have sufficient funding and should not use their 'Access to Work' interpreters for this work. As highlighted by Engelman and Deardorff (2015) it appears that many interactions with the police were characterized by a lack of knowledge about the policy and law regarding equality of access for D/deaf victims among legal professionals.

This article focused largely on the reporting of DA to charities and police. It did not address charity workers' views on subsequent stages of the criminal justice process, such as experiences with interpreters in police interview settings, helping D/deaf DA victims within refuges, or interactions with solicitors or court officials (which formed part of the original study and will be published separately - charities are actively trying to bridge communication deficits within these arenas).

Focusing on the gateway to the CJS (supportive advice and police assistance), the research found that police responses to D/deaf DA victims were often unacceptable and in breach of obligations. It appears to be a rare occurrence that police officers' book and bring an interpreter with them to initial interactions and meetings with D/deaf DA victims. **This resulted in repeated and persistent delays in access or progression through the CJS and eventual withdrawal or reluctance to engage with such systems in the future. Skinner and Napier (2022) similarly reported that D/deaf victims have waited for days to attend pre-arranged police interviews with a promise of interpreters being present but for none to attend.** Charities working with D/deaf DA victims have come to expect the absence of interpreters. As PS8 said of one D/deaf DA victim:

“She wasn't sure whether an interpreter would be there. And I had to have, you know, a conversation, that I was very confident that that would happen. We drove two and a half hours and there was no interpreter there”.

Those D/deaf DA victims who can lip read arguably fare better, but they too exist in a communicatively impoverished environment because it is often impossible to know how much information has been understood without an interpreter. Police officers reportedly hold an unsound and damaging perception that lipreading is an effective way to communicate with D/deaf people. Alternatively, writing messages on a piece of paper and passing it back and forth can be slow, frustrating and as some D/deaf people cannot read or write English fluently (or at all), it is far from inclusive. Race and Hogue (2018) highlighted similar issues whereby victims have been expected to write messages back and forth with police officers or to lip read, when their preference is to use sign language. As underlined by one of our interviews, this is not appropriate or acceptable standards of communication and demonstrates a lack of deaf awareness.

Implications

These findings can inform policy development by highlighting gaps in statutory service provision in terms of D/deaf awareness and the use of interpreters in DA, and how charities are struggling to support D/deaf DA victims through traumatic experiences. Charity workers can go to great lengths to encourage D/deaf DA victims to disclose DA (such as the nurse ruse discussed by PS4), to reassure D/deaf DA victims that the police and statutory services have a duty to provide an interpreter, make referrals, and encourage D/deaf DA victims to make a police report. Charities and support services are often central to D/deaf DA victims contacting police and support services, but they can feel guilty that they encouraged D/deaf DA victims to report their abuse when D/deaf DA victims are subjected to a damaging and impoverished communication environment upon contact with the CJS (PS1). Clearly there is a need for better training, awareness and utilization of interpreting services within the CJS. However, to ensure improved knowledge and awareness in the long-term, it is recommended that ongoing training that may require different training strategies (not a one-off event) is needed to improve attitudes and responses to D/deaf victims (Engelman & Deardorff 2015). Furthermore, receiving training from a D/deaf individual may improve the impact and success of such training (Engelman & Deardorff 2015).

PS8 commented that some D/deaf DA victims would really like to be able to communicate with female police officers who can sign, but it is usually impossible. Once DA is reported, the disconnect between policing and shelter/ sustenance appears to be another gaping hole (and unexpected). Charities are now developing policies

on 'aftercare' following police interactions (and court proceedings) to help D/deaf victims deal with the effects and new traumas generated by police officers and the CJS.

Poor experiences of policing and ancillary services clearly compound stress and other mental health problems at the entry point to the CJS, evidenced by D/deaf DA victims giving up on criminal justice and returning to abusive environments. Making little meaningful effort to communicate with D/deaf DA victims is demeaning. Incomplete communication also creates safety issues for D/deaf DA victims. It can leave D/deaf DA victims in peril or contribute to the failure of a criminal prosecution. The account written/recorded by a police officer may be considerably inaccurate if they have relied upon lipreading or spoke to someone other than the victim, raising evidentiary concerns. The negative experiences feed into community storytelling and can reinforce cultural memory and distrust of policing and the state. A realization of a D/deaf DA victims fears of being ignored, disbelieved or deprioritized by police can make coercive control easier for a perpetrator and render them harder to reach in future.

Strengths and Limitations

As with any research, its limitations must be considered. The findings are based on the views of practitioners who have supported D/deaf DA victims, rather than with victims themselves. We will interview D/deaf DA victims, police officers and other professionals working in and around the CJS in the next phase of the work. Due to this being a qualitative exploratively study, our sampling approach may also not be generalizable beyond this study. Another potential limitation is that traditional qualitative methods of data collection (which are usually audio-recorded) and analysis cannot be directly applied to qualitative research in which data are collected from and/or by Deaf sign language users (which are usually video-recorded) due to unique linguistic and sociopolitical considerations that should take into account (Anderson et al. 2018). For example, sign languages do not have a standardized written form (i.e. there may be different modalities in which are entirely visual/gestural with no print base), meaning interpretation could be lost when translating from BSL to spoken/written English (Anderson et al. 2018). It is therefore highlighted by these authors that translation accuracy may be an issue, in addition to other things such as translation bias, stressing the need for a representative cultural lens too. We are mindful of this and would like to note that the BSL interviews were conducted by an experienced, qualified and fluent BSL user which experience of researching with D/deaf signers and transcribing from BSL into English, which we hope minimized any potential limitations as far as possible, however, this is something to be aware of.

Despite this, our study has many strengths and offers an original contribution to research on D/deaf DA victims experiences of accessing support and the CJs in England and Wales. The participants had all worked with D/deaf DA victims and experienced some of their frustrations, four of which belonged to the Deaf community themselves. They saw firsthand some of the impacts on D/deaf DA victims. Our interviews with charity and support workers, including some interviews entirely in sign language, is one of the first studies in England to explore D/deaf DA victims' experiences from this perspective. Future research should also capture the perspectives and experiences of D/deaf DA victims themselves as well as police officers. Furthermore, comparing the experiences within different regions and police forces would be interesting to explore the 'post code lottery' issue highlighted in the findings. Additionally, exploration of experiences of individuals living in both rural and urban areas would shed light on any additional geographical barriers.

Conclusion

The extent of communication deprivation did not appear to improve much as D/deaf DA victims first discussed DA and began to move into and through the CJS. 999 BSL, the national helpline VRS and the employment of PLODS appear as bright spots on the landscape, facilitating initial contact, but the extent of deprivation appears to worsen once D/deaf DA victims come into real-life contact with police officers and other officials who cannot understand and use sign language. Incorrect assumptions about lipreading and note writing are commonplace. The 'illusion of inclusion' appears to be real and a source of trauma. In this context, it is remarkable that Race and Hogue (2018) surveyed Police and Crime Commissioners (PCCs) and police officers about their levels of D/deaf awareness and attitudes towards D/deafness and found that over half of respondents believed that police officers communicate appropriately with D/deaf people. Communication is far from appropriate or inclusive; it is impoverished.

Every encounter between an official and a D/deaf DA victim should be treated as a crucial window of opportunity to help someone, who may be otherwise hard-to-reach (since a perpetrator of DA may often be nearby and ordinarily engage with services on their behalf). Addressing these challenges requires coordinated efforts to enhance accessibility, increase deaf awareness, and ensure timely access to interpreters and essential resources. It is important that the burden of securing a BSL interpreter does not fall on the victim. The 'illusion of inclusion' and experiences of a criminal justice 'lottery' should be addressed as a matter of urgency. Policies, resources and website guidance arguably raise the expectations of D/deaf DA victims beyond that which the police/CJS can meet and can lull them into a dangerous and false sense of safety. Interactions with police

officers and ancillary DA services (housing, finance and healthcare) appear to be a key source of harm and trauma for D/deaf DA victims.

References

- Anderson, M. (2010). *Prevalence and predictors of intimate partner violence victimization in the Deaf community*. Gallaudet University ProQuest Dissertations Publishing. <https://shorturl.at/2AlMe>.
- Anderson, M. (2014). Intimate partner violence in the deaf community: 5 things you need to know & 5 things you can do. *Psychiatry Issue Brief*, 11,(1) 1-3. <https://doi.org/10.7191/pib.1085>.
- Anderson, M. L., Leigh, I. W., & SamarV. J. (2011). Intimate partner violence against Deaf women: A review. *Aggression and Violent Behavior*, 16(3), 200-206. <https://doi.org/10.1177/1077801211412544>.
- Anderson, M. L., & Pezzarossi, C. M. K. (2012). Is it abuse? Deaf female undergraduates' labeling of partner violence. *Journal of Deaf Studies and Deaf Education*, 17(2), 273-286. <https://doi.org/10.1093/deafed/enr048>.
- Anderson, M. L., Riker, T., Gagne, K., Hakulin, S., Higgins, T., Meehan, J., Stout, E., Pici-D'Ottavio, E., Cappetta, K., Wolf Craig, K. S. (2018) Deaf Qualitative Health Research: Leveraging Technology to Conduct Linguistically- and Sociopolitically-Appropriate Methods of Inquiry. *Qualitative Health Research*, 28(11), 1813–1824. doi:10.1177/1049732318779050.
- Anderson, M. L., Wolf-Craig, K. S., & Ziedonis, D. M. (2017). Deaf people's help-seeking following trauma: experiences with and recommendations for the Massachusetts behavioral healthcare system. *Psychological Trauma: Theory, Research, Practice, and Policy*, 9(2), 239–248. <https://doi.org/10.1037/tra0000219>.
- Baines, D. (2007). 'Unravelling the anomaly of deafness'. In Austen, S. & Jeffery, D. (eds) *Deafness and Challenging Behaviour: The 360 Perspective*. Cornwall: John Wiley & Sons, 17–32.
- Beaulieu, M., McQuiller-Williams, L., & Porter J. L. (2017). Intimate Partner Violence in a U.S. College Sample: Do Auditory Status and Gender Predict Victimization? *Psychology*, 8(3), 387- 411. <https://doi.org/10.4236/psych.2017.83024>.

- Bramwell, R., Harrington, F., & Harris, J. (2013). Deafness — disability or linguistic minority? *British Journal of Midwifery*, 8(4).
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101. <https://doi.org/10.1191/1478088706qp063oa>.
- Brown, J. (1997). Working toward freedom from violence. The process of change in battered women. *Violence Against Women*, 3(1): 5-26.
- Bryman, A. (2016). *Social research methods*. 5th edn. Oxford: Oxford University Press.
- Caselli, N., Hall W., & Henner, J. (2020). American Sign Language Interpreters in Public Schools: An Illusion of Inclusion that Perpetuates Language Deprivation. *Maternal and Child Health*, 24,1323 - 1329.
- Cerulli, C., Pollard Jr. R. Q., Thew, D., Mastrocinque, J. M., Raimondi, C., DeWindt, L., Haynes, S., Kelstone, K., Thompson-Stone, J., & Chin, N. (2015). What can we learn?: Examining intimate partner violence service provision in the deaf community. *Journal of Community Psychology*, 43(2), 142-155. <https://doi.org/10.1002/jcop.21670>.
- Chirwa, E., Jewkes, R., Van Der Heijden, I., & Dunkle, K. (2020). Intimate partner violence among women with and without disabilities: a pooled analysis of baseline data from seven violence- prevention programmes. *BMJ Global Health*, 5(11), e002156. <https://doi.org/10.1136/bmjgh-2019-002156>
- Cohen, L., Manion L., & Morrison, K. (2018). *Research Methods in Education*. 8th edn. London: Routledge.
- Crowe, T. V. (2013). Intimate partner violence in the deaf community. *JADARA*, 46(3), 1-14. <https://nsuworks.nova.edu/jadara/vol46/iss3/4>.
- Crowe, T. (2015). Domestic Violence Services for the Deaf Community. *JADARA*, 49(2), 1-18. <https://nsuworks.nova.edu/jadara/vol49/iss2/5>.
- Crowe, T. (2017). 'Breaking the silence: Empowering deaf and hard of hearing survivors of domestic violence'. In Johnson, A. J., Nelson, J. R., & Lund, E. M. (Eds.), *Religion, disability, and interpersonal violence* (pp. 131–148). Springer International Publishing/Springer Nature.
- Engelman, A. & Deardorff, J. (2015) Cultural Competence Training for Law Enforcement Responding to Domestic Violence Emergencies With the Deaf and Hard of Hearing: A Mixed-Methods Evaluation. *Health Promotion Practice*, 17(2), 177-185. <https://doi.org/10.1177/1524839915621538>
- Fanslow, J. L., Malihi, Z. A., Hashemi, L., Gulliver, P. J., & McIntosh, T. K. D. (2021). Lifetime prevalence of intimate partner violence and disability: results from a population-based study in New Zealand.

- American Journal of Preventive Medicine*, 61(3), 320-328. <https://doi.org/10.1016/j.amepre.2021.02.022>
- García-Cuellar, M. M., Pastor-Moreno, G., Ruiz-Pérez, I., & Henares-Montiel, J. (2023). The prevalence of intimate partner violence against women with disabilities: a systematic review of the literature. *Disability Rehabilitation*, 45(1), 1-8. <https://doi.org/10.1080/09638288.2022.2025927>.
- Harris, J. (1995). *The Cultural Meaning of Deafness: Language, Identity and Power Relations*. Ashgate.
- Hearing Link Services. (2022). *Deafness & hearing loss facts*. <https://shorturl.at/g1bD7>.
- Herbert, A., Fraser, A., Howe, L. D., Szilassy, E., Barnes, M., Feder, G., Barter, C., & Heron, J. (2022). Categories of intimate partner violence and abuse among young women and men: latent class analysis of psychological, physical, and sexual victimization and perpetration in a UK birth cohort. *Journal of Interpersonal Violence*, 23(1-2), NP931-NP954. <https://doi.org/10.1177/08862605221087708>.
- Home Office. (2013). *Information for local areas on the change to the definition of domestic violence and abuse*. <https://shorturl.at/5iefV>.
- Home Office. (2024). *Guidance: Domestic abuse: how to get help*. Updated on 4 November 2024. Available at <https://www.gov.uk/guidance/domestic-abuse-how-to-get-help#get-help-and-support>
- Krippendorff, K. (2004) *Content Analysis: An Introduction to Its Methodology*. London: Sage.
- Lightfoot, E., & Williams, O. (2009). The Intersection of disability, diversity, and domestic violence: Results of national focus groups. *Journal of Aggression, Maltreatment, & Trauma*, 18(2), 133-152. <https://doi.org/10.1080/10926770802675551>.
- Lumsden, K., & Black, A. (2020) 'Sorry, I'm Dead, it's Too Late Now': Barriers Faced by D/deaf Citizens When Accessing Police Services. *Disability and Society*, 37(3), 476 – 495.
- Mason, T. C. (2019). Does knowledge of dating violence keep deaf college students at Gallaudet University out of abusive relationships? *Journal of American Deafness & Rehabilitation Association*, 43(2), 74-91. <https://nsuworks.nova.edu/jadara/vol43/iss2/3>
- Mastrocinque, J. M., Thew, D., Cerulli, C., Raimondi, C., Pollard Jr, R. Q., & Chin, N. P. (2015). Deaf victims' experiences with intimate partner violence: the need for integration and innovation. *Journal of Interpersonal Violence*, 32(24), 3753-3777. <https://doi.org/10.1177/0886260515602896>.
- Mastrocinque, J. M., Cerulli, C., Thew, D., Chin, N. P., & Pollard, R. Q. (2022). Understanding intimate partner violence perpetration involving the deaf population. *Journal of Interpersonal Violence*, 37(1-2), NP696-NP718. <https://doi.org/10.1177/088626052091626>.
- ONS. (2021). *Domestic abuse prevalence and trends, England and Wales: Year ending March 2021*. <https://shorturl.at/YYqp5>.

- O'Rourke, S., & Grewer, G. (2005). Assessment of Deaf people in forensic mental health settings: A risky business! *Journal of Forensic Psychiatry & Psychology*, 16(4), 671–684.
- Race, L., & Hogue, T. E. (2018) 'You have the right to remain silent': Current provisions for D/deaf people within regional police forces in England and Wales. *The Police Journal*, 91(1), 64 – 88.
- Relay UK. (2024) *Contact 999 using Relay UK*. https://www.relayuk.bt.com/how-to-use-relay-uk/contact-999-using-relay-uk.html?s_cid=relay_furls_emergencysms.
- Russell, D., & Winston, B. (2014) TAPing into the interpreting process: Using participant reports to inform the interpreting process. *Transnational and Interpreting*, 6(1).
- Sardinha, L., Maheu-Giroux, M., Stöckl, H., Meyer, S. R., & García-Moreno, C. (2022). Global, regional, and national prevalence estimates of physical or sexual, or both, intimate partner violence against women in 2018. *Lancet*, 399(10327), 803–813. [https://doi.org/10.1016/s0140-6736\(21\)02664-7](https://doi.org/10.1016/s0140-6736(21)02664-7).
- Skinner, R., & Napier, J. (2022) 'Help is on the way' (In)accessible policing in the UK through sign language interpreting. *Translation and Interpreting Studies*, 17(3), 455–477.
- Smith, N., & Hope, C. (2015). *Culture, language, and access: Key considerations for serving deaf survivors of domestic and sexual violence*. Center on Victimization and Safety, January 2015. <https://www.vera.org/publications/culture-language-and-access-key-considerations-for-serving-deaf-survivors-of-domestic-and-sexual-violence>.
- Watson, C. (2014). Violence in deaf culture: my story, my voice. *Dissenting voices*, 3(1) 81-98. <http://hdl.handle.net/20.500.12648/2716>.