# **Learning Brief – Emma**



#### **Background**

Emma, aged 30 and a single mother of three, experienced a childhood marked by domestic abuse and parental substance misuse. She moved to Cheshire to be near her father, whose suicide in 2019 significantly impacted her mental health.

Emma's relationship with Ian was characterised by coercive control and emotional abuse. Days before her death, Ian broke into her home, leading to his arrest.

## **Key Learning Points**

**Missed Early Interventions:** Services did not respond to Emma's childhood vulnerabilities.

**Impact of Bereavement:** Lack of support worsened Emma's mental health.

**Coercive Control Risks**: lan's escalating abuse highlights the dangers of manipulation and dependency.

**Suicide Prevention:** Emma's trauma and declining mental health required proactive intervention.

This case highlights the importance of a trauma-informed, multi-agency safeguarding approach.

### **Learning for Practitioners**

Emma's case highlights the following key lessons:

**Early Intervention is Crucial** – Childhood adversity, including domestic abuse, parental substance misuse, and school absences, should trigger proactive safeguarding responses to prevent long-term harm.

**Recognising Coercive Control** – Coercive and controlling behaviour is a high-risk factor for homicide and suicide. Practitioners must identify non-physical forms of abuse, ensuring victims are aware that coercive control is a crime.

Routine Enquiries for Domestic Abuse – Self-harm and mental health struggles are often linked to abuse and coercion. Routine screening in healthcare settings, especially after self-harm or relationship breakdowns, is essential.

**Suicide Risk and Bereavement Support** – Parental suicide increases vulnerability. Mental health professionals and GPs must ensure consistent follow-up, offer bereavement support, and assess ongoing risk factors.

**Multi-Agency Collaboration** – Effective safeguarding requires enhanced coordination among healthcare, law enforcement, and social care. Risk assessments, information sharing, and early intervention can help prevent harm.

#### **Coercion and Control**

Coercive control is a criminal offence under Section 76 of the Serious Crime Act 2015 and is recognised as domestic abuse in the Domestic Abuse Act 2021. It involves manipulation, isolation, and control, often without physical violence.

A high-risk factor in suicide and homicide, coercive control must be identified early, with agencies improving awareness, intervention, and victim support.



#### **Self-Harm and Suicide**

Self-harm is often a coping mechanism for emotional distress and is linked to domestic abuse, particularly in women who have separated from partners. NICE guidelines recommend routine domestic abuse enquiries for individuals presenting with self-harm.

Emma's self-harm was initially attributed to bereavement, and no concerns were raised due to her positive portrayal of her relationship. This highlights the need for consistent and proactive questioning in healthcare settings to identify and address hidden risks.



# **Familial Suicide**

Parental suicide is a significant risk factor for suicide and self-harm. Emma's father's death deeply affected her, yet there was no recorded follow-up on bereavement counselling.

The Cheshire and Merseyside Suicide Prevention Strategy (2022-2027) highlights family-related risks and promotes community awareness. This case underscores the need for proactive support, regular follow-ups, and improved access to bereavement interventions.