# **Editorial Board**

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Ian has a Master's degree in Veterinary Parasitology and is a member of the European Scientific Counsel Companion Animal Parasites (ESCCAP UK and Ireland).

# Linking domestic and animal abuse

he levels of domestic abuse in the UK are shocking and make for painful reading. From recent surveys and statistics, these are some of the facts: 1 in 3 women aged between 16 and 59 years will experience domestic abuse in their lifetime; three women each week are killed in England and Wales by a partner or former partner; and 1 in 5 adults experienced at least one form of child abuse before the age of 16 years.

Levels of domestic abuse increased during the COVID-19 lockdowns. Abuse can take several forms – psychological, physical, sexual, financial or emotional. Abuse occurs by inflicting harm, but also by failing to prevent harm, which we term neglect.

Why am I highlighting these statistics which, although naturally concerning, refer to instances of human abuse? Unfortunately, it is well recognised that there is an overlap between domestic abuse and abuse of pets. One study found that animal abuse occurred in 88% of households (with pets) where physical abuse of children had been reported. There are several motivations for this, but one scenario is that dogs can become targets or pawns in abusive situations. Pets may be harmed as part of the abuse of the victim or to act as a warning or demonstration of what the perpetrator is capable of. Although all pets may be at risk, dogs are the pets most likely to be victimised.

As veterinary professionals, we need to be alert to signs of abuse in our patients as a red flag for a wider concern for the safety of members of the household. Nonaccidental injury, which occurs in pets and people, is the evidence most likely to be seen in veterinary practice. It may be difficult to identify, partly because as vets we will concentrate on the pet and remedying the injuries we see. It may not occur to us to question the cause of the injuries. The situation may be complicated if the pet in question is presented to different vets or different clinics for repeated incidences, therefore masking the pattern of abuse.

We should be prepared to question how injuries occur. Are they consistent with the offered history? Is the story told by the client consistent? Does it vary, or do different family members give different versions? Is there a pattern or repeated injury? A warning sign is when the owner uses 'fell' to explain injuries, e.g. 'she fell off the bed' or 'he fell down stairs'. Also consider the animal's behaviour towards its owner. Is it fearful, withdrawn or aggressive to the owner?

In a short editorial, it is not possible to deal with how a practice should prepare its staff for identifying abuse, and how to approach suspicious cases. However, we do have a responsibility to be aware that it exists and consider how we deal with such cases. Fortunately the Links Group (www.thelinksgroup.org.uk) is there to help with just such issues. They raise awareness of the link between abuse of people and animals, and provide training, advice and support. I highly recommend using one or more of your practice meetings to discuss the work of the Links Group and how you can be prepared for the challenging yet crucial times when

suspicions of animal abuse occur.

As Christmas approaches, sadly it is known that abusers may give pets to their victims as a way of exerting emotional control and to cause distress by subsequently damaging that animal. Let us include a promise to be aware of this among our New Year resolutions. CA



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