



DOMESTIC HOMICIDE REVIEW

EXECUTIVE SUMMARY

Colchester Community Safety Partnership

Amica died June 2022

Chair and Author – Katie Bielec

Report Completed January 2024

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Foreword

Amica was a much-loved mother, daughter, sister, friend, and colleague who will be missed by everyone who knew her.

Amica's child has provided memories of Amica remembering how they enjoyed going to the park with their mother as they liked being pushed on the swings. The child's favourite food was McDonalds, and they would be taken there frequently by Amica.

"As a mother with a broken heart, I think that my daughter was a great woman, she desperately tried to save her child and her family, so I will always face her death with dignity. Amica's character did not allow for her to talk about what she was suffering within the walls of the house".

Amica was self-reliant and strongly motivated, friends and colleagues found her to be reserved, gentle, happy, kind and always smiling. She was described as fiercely independent and would take all work opportunities to finance herself, and further her career. Friends told her on more than one occasion to slow down or have a break, but she loved her work and loved living in the UK.

Preface

Colchester Community Safety Partnership, panel members and the author wish at the outset to express their deepest sympathy to the family of Amica. This review has been undertaken in order that lessons can be learnt with the hope to avoid another tragedy. It has been carried out in an open and constructive manner with all the agencies engaging positively. This has ensured that we have been able to consider the circumstances of Amica's death in a meaningful way and address with candour the issues that it has raised.

1. Introduction

- 1.1 This summary outlines the findings within the Overview report.
- 1.2 In line with Home Office Statutory Multi-Agency Statutory Guidance for Domestic Homicide Reviews 2016¹ paragraph 75, to protect the identity of those involved and to comply with the Data Protection Act 1998 pseudonyms have been used. Unfortunately, the family felt unable to engage with the review, therefore Amica's name was chosen by her close colleagues and Yusuf was chosen by the chair, both were agreed by the panel.
- 1.3 Amica was murdered by her husband Yusuf, they lived together with their young child in Colchester. Due to Amica and Yusuf being married Colchester Community Safety Partnership (CSP) identified the case met the criteria for a Domestic Homicide Review (DHR).
- 1.4 Initial information was sought by SETDAB to ensure different agencies were aware of the DHR and the requirements, as well as the introductory panel meeting. Paragraph 46 of the statutory guidance states that the target timescale for completion of the review is six months. However, the review was unable to be completed in this time frame due to the on-going criminal case. This caused a delay contacting family/friends and obtaining significant information from the police investigation. The CSP and panel were kept up to date throughout the process. Panel meetings were held in September 2022, July 2023, and November 2023.

 $[\]label{eq:linearized_statutory-guidance-for-the-conduct-of-domestic-homicide-reviews} \\ \frac{1}{2} \frac{1}$

- 2. Glossary
- AAFDA Advocacy After Fatal Domestic Abuse, a charity supporting families who have experienced a loss due to homicide or suicide.
- Athena A single integrated police IT system. •
- CCB Coercive Controlling Behaviour. •
- **CSP** Community Safety Partnership. •
- **CPR** Cardiopulmonary Resuscitation. •
- DASH RIC² –Domestic Abuse, Stalking and Harassment Risk Indicator Checklist provides a • consistent way to help identify those who are at high risk of harm and manage their risk.
- DHR Domestic Homicide Review. •
- **DSL** Designated Safeguarding Lead. •
- **FLO** Family Liaison Officer with the police.
- GP General Practitioner a medical doctor who treats acute and chronic illnesses and provides • preventive care and health education to patients.
- HV Health Visitor. •
- IMR Individual Management Review require agencies to look openly and critically at individual and organisational practice.
- IVF In vitro fertilisation.
- MARAC Multi Agency Risk Assessment Conferences discuss high risk domestic abuse cases • to increase safety, reduce risk and interrupt the abusive behaviour of the perpetrator.
- SETDAB Southend, Essex & Thurrock Domestic Abuse Board. •
- **UoS** University of Suffolk. .

3. Methodology

3.1 DHRs became statutory in 2011, Section 9 of the Domestic Violence, Crime and Victims Act $(2004)^3$ states a DHR should be a review of the circumstances in which the death of a person aged 16 or over has, or appears to have, resulted from violence, abuse or neglect by: a) A person to whom she was related or with whom she was or had been in an intimate personal relationship or

b) A member of the same household as herself; held with a view to identifying the lessons to be learnt from the death.

- 3.2 The panel identified organisations required to provide IMRs after SETDAB completed a scoping exercise across the Essex area, agencies were provided the terms of reference and asked to review their involvement with the family and interview any staff where appropriate. All were asked to highlight positive practice, as well as learning, recommendations, and actions.
- 3.3 Various pieces of research were used to analyse and are referenced throughout the report.

4. Involvement of family, friends, and colleagues

4.1 Amica's family all live in Italy, are aware of the DHR and provided support information. Amica's mother was provided a translated report and was able to provide memories of her daughter and feedback on the review.

https://safelives.org.uk/sites/default/files/resources/Dash%20risk%20checklist%20guick%20start%20guidance%20FINAL 1.pdf?msclkid=770463f4ceac11ec8f 0466908e13260a

https://www.gov.uk/government/publications/the-domestic-violence-crime-and-victims-act-2004

- 4.2 Amica and Yusuf had a young child together, due to the child's age and the trauma they were subjected to, it was felt it inappropriate for them to be approached directly. Social services and their foster carers provided insight into the impact of the family home on them.
- 4.3 Both Amica and Yusuf worked at the same University, their colleagues (some were also Amica's friends) were spoken to as part of the IMR process. Amica's friend and a friend of the couple were contacted but were unable to take part in the review. Statements from the criminal trial were provided and interwoven within the report.
- 4.4 Yusuf was not contacted as part of this review.

5. Contributors to the review

- 5.1 SETDAB contacted 41 agencies (including statutory and non-statutory services) across Colchester and Essex, of those the following agencies were identified to provide an IMR:
 - Essex Police
 - University of Suffolk
 - GP practice A summary report was also completed by:
 - NHS Suffolk and North-East Essex Integrated Care Board (ICB)
- 5.2 The panel comprised of agencies recommended within the statutory guidance and domestic abuse specialists. A full list of panel members is available in Appendix 2.

6. Chair and Author

6.1 Katie Bielec is an independent domestic abuse consultant, an accredited DHR chair with AAFDA and SILP⁴, accredited MARAC chair with SafeLives, has completed the Home Office Domestic Homicide Review Training, chairs MARMMs⁵ and stalking clinics. She is an associate trainer for SafeLives, Rockpool, The Hampton Trust, a guest lecturer at Bournemouth University, published guest author of 'Social Work Practice with Adults – Transforming Social Work Practice' and accredited trainer delivering Coercive Controlling Behaviour and Stalking. Katie is not associated in any way to any agency who have provided information for the review or had any personal or professional involvement with Amica, Yusuf, or their family and friends.

7. Parallel Reviews

7.1 A criminal trial was held in October 2023, Yusuf was found guilty of murder and sentenced to a minimum of 25 years. The coroner closed the case in November 2023, no inquest was carried out as all the matters were dealt with through the criminal process and recorded Amica's death by unlawful killing. There were no other reviews being conducted at the time of this review.

8. Equality and Diversity

8.1 Amica was a 52-year-old white Italian female; Yusuf is a white Turkish male and was 49 years old at the time of the murder. When considering Amica's gender; The Crime Survey for

⁴ Significant Incident Learning Process.

⁵ Multi Agency Risk Management Meetings

England and Wales (CSEW) year ending March 2022^6 showed an estimated 6.9% of women (1.7 million) and 3.0% of men (699,000) experienced domestic abuse in the last year and SafeLives were able to identify that 95% of those going to MARAC or accessing an IDVA service are women⁷. Furthermore, the Office of National Statistics (ONS) found white ethnic women are significantly more likely than men to have experienced domestic abuse in the last year (7.7% of women, compared with 3.6% of men). Crimes recorded by the police showed between the year ending March 2019 and the year ending March 2021, 72.1% of victims of domestic homicide were female, therefore Amica was at higher risk from Yusuf due to her gender. Women aged between 50 – 54 years were identified as at significantly high (45.2%) risk of violence due to domestic abuse by Police in England and Wales 2022.

- 8.2 Amica and Yusuf's race and beliefs were taken into consideration. The panel felt it important to understand if Yusuf held any cultural beliefs around his unfounded accusations that Amica was having extra marital affairs which he may have believed dishonoured him as a man, his marriage and beliefs. He evidently had views on gender roles within the marriage expecting Amica to carry out stereotypical female roles whilst also working and bringing in an income. These expectations and views were not the same as Amica's and therefore raised the risk of harm to her as he was not in full control, was not the 'main provider' which would have undermined his sense of entitlement. His decision to serve divorce papers the day before the murder may appear to contradict the belief that divorce is not 'honourable', however, it demonstrates that he wanted to remain in control of his marriage, Amica and their child. What we know is that when Yusuf 'served the divorce papers' it was a significantly dangerous moment for Amica.
- 8.3 Consideration was made whether Amica and Yusuf faced any barriers in seeking support as well as agency responses with regards to their different cultures. Both were in employment, and they had the right to remain in the UK and spoke and read fluent English.
- 8.4 There was no information to suggest Amica or Yusuf had a disability.
- 8.5 Although Amica was not pregnant at the time or years leading up to her murder, she had been through two 'rounds' of IVF. A recent study by The Lancet Global Health research 2022⁸ found 'Infertility is not only an issue of reproductive health, but also a social issue that can influence marital, family, and other interpersonal relationships, particularly in settings where childbearing is highly valued and central to ideas of womanhood. Women experiencing infertility might be socially sanctioned for childlessness or small family sizes in cultures where progeny is among what matters most. Thus, experiences of violence can affect fertility, and infertility are at higher risk for Intimate Partner Violence.'. Women who struggle with their fertility are at higher risk of physical and sexual violence than those who are not. Pregnancy is a recognised high-risk factor for victims as perpetrators can feel they are losing control and are not centre of the victim's attention. With these additional factors and pressures Amica was at higher risk of harm from Yusuf.

https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/domesticabusevictimcharacteristicsenglandandwales/yearendingmarch20

⁷ <u>https://safelives.org.uk/policy-evidence/about-domestic-abuse/who-are-victims-domestic-abuse</u>

⁸ https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(22)00205-4/fulltext

9. Dissemination

9.1 Amica's family and all agencies involved are aware the review will be published once agreed by the Home Office; however, the action plan has already been disseminated with all relevant agencies to ensure immediate action and learning could be taken forward. Following sign off from the Home Office Quality Assurance Panel, Colchester CSP will ensure the documents are disseminated to the Domestic Abuse Commissioner, Office of the Police and Crime Commissioner (OPCC) for Essex Police, the Chief Executive (or equivalent) for all partner agencies and services represented on the Review Panel and the SETDAB website⁹.

10. Homicide - The facts

- 10.1 On the day of Amica's death Yusuf ran out to the street from the family home, shouting for help and telling neighbours, '*My wife attacked me, I think that I have killed her.*' Neighbours went into the home and found Amica in the kitchen, unconscious and bleeding, they immediately started CPR on her. The police and ambulance were called to the address, where they found Amica in the kitchen. She had suffered a catastrophic injury to her chest and neck, her death was certified by paramedics at the scene.
- 10.2 Yusuf was conscious and breathing, in the lounge with one knife wound to his abdomen, he was conveyed to hospital. Police suspected Yusuf had self-inflicted his wounds, he was arrested at hospital and taken into police custody. He provided no explanation of the events, was charged with murder, and remanded into custody. At the start of October 2023 Yusuf pleaded not guilty at crown court; a jury found him guilty of murder after a three-week trial. He was sentenced to life with a minimum term of 25 years in prison.

11. Summary relationship background – Information from family, friends and colleagues

- 11.1 Amica had been in the UK since attending university, employed as a temporary lecturer at the University of Suffolk in 2010 and later re-joined in July 2011.
- 11.2 After separating from a partner, Amica met Yusuf online in the summer of 2015, he moved to the UK, and they married 3 months after they first met. Concerns were raised about the speed of the relationship, but Amica told friends they did not have time, her biological clock was ticking, they both wanted a family, and Yusuf needed a visa to stay in the UK. There were problems with Yusuf's passport and quickly their relationship became less romantic and more practical, however, Amica remained very much in love with him.
- 11.3 They had their child two years later following a second attempt with IVF. The birth was difficult, Amica was unwell both physically and mentally taking her six months to recover. Before the birth Yusuf told Amica he would stay at home with the baby so Amica could work. But soon after he wanted another child (Amica refused), and he expected her to be home to care for him and the child, at this point friends described the relationship deteriorating. Yusuf's mother also visited soon after the birth from Turkey. Amica told friends they would speak in Turkish, cook Turkish food, watch Turkish television and he would not translate leaving her to feel isolated. This upset Amica, she liked her British home, and considered herself British in a lot of ways, and wanted her child raised in a British house.
- 11.4 On one occasion a friend visited Amica at home, they reported the house strewn with dirty nappies, Amica was constantly breastfeeding, and Yusuf refused to care for the baby. It was

⁹ <u>https://setdab.org/</u>

suggested they get an Italian au pair to support Amica's continued love of teaching English. The family had several au pairs and Amica' health apparently improved.

- 11.5 Amica had never specifically reported domestic abuse or health concerns to her colleagues and was incredibly private. Her colleagues recalled how Amica had told them Yusuf was frustrated with issues around his passport and employment and this had caused friction in the relationship as he felt she did not care about it. She told her line manager that she would take her child to Italy each year to visit family but would not let her child go to Turkey without her, as she feared she would not see them again.
- 11.6 Staff at the university recall Yusuf as quiet, smooth, and charming, whilst another recalled him as demanding of Amica's attention, and possessive of her.
- 11.7 In June 2021 Amica told a friend they had been having relationship problems and described Yusuf being jealous, had started smoking and drinking and at times had smashed furniture. As a result, she and her child had sought refuge in the top floor room of their home.
- 11.8 Amica's mother recalls "how only a year before her death she was desperately able to confide in me, she said that he had taken their child to his lover's house and showed them the bed where he went to sleep. I immediately urged her to go to the Police, until the last minute of her life." She replied that she would never leave her job at the university, she loved her students, her life and advised girls to be careful with me. Amica told her mother of her pain not telling her of what she was going through out of dignity.
- 11.9 Amica's mother believes she never told the family what was truly happening, but they were aware of the "violent and verbal abuse and constant humiliation".
- 11.10 Yusuf's jealous behaviour escalated after finding some photos of her ex-partner, he was furious, calling her an immoral woman for dating a married man. He texted friends and Amica claiming she was unfaithful, was violent towards him and asked whether she was moral or immoral, which caused Amica much embarrassment. He told Amica to beg for forgiveness, that she should kneel in front of him and beg for forgiveness, if she did not, they would divorce.
- 11.11 He started calling her a whore and other names and asked their child if they had seen Mummy sleeping with other men. He made it uncomfortable for Amica's friends go to the family home, causing arguments in front of guests; as a result, friends decided to only see Amica outside the home and remain in contact via text.
- 11.12 Amica told a friend that Yusuf had been married before in Turkey, he had discovered she was a prostitute, seeing clients in their home and was linked with the Turkish mafia who he claimed he had to pay significant amounts of money to.
- 11.13 Yusuf's obsession and jealousy increased over the last 6 months of her life. He told a friend he had placed a listening device in the home and had recorded 6000 hours of audio footage, he accused Amica of having sex with another man in the family home which they did not believe.
- 11.14 Neighbours told Police, they had heard shouting and arguments sufficient for them to contemplate calling the police, (three occasions over five years) and they had never done so.

12. Summary Chronology¹⁰ – Information from agencies and facts/evidence from the trial (full details can be found in the Overview Report)

- 12.1 In the summer of 2016, a Health Visitor saw Amica, Yusuf and their new baby at home, they were identified as an isolated family with no family members in the UK, it is unclear if any support groups were offered to reduce the isolation. Over the next couple of months, the Health Visitor attempted contact Amica, who responded once stating she was struggling feeding and would attend the baby clinic, there is no record she attended. A few months later Amica saw her GP, she stated she was coping well and did not mention struggling with feeding. She was also seen by the Health Visitor at home, (Amica's parents were staying with her) and Yusuf was in the garden. She told them she was exhausted, not getting a break and was not leaving the home due to constant breastfeeding. She was identified as low risk from post-natal depression, was offered another visit but this was declined. The day after Yusuf contacted the GP requesting a letter confirming that Amica and their child were well after the 6-week check. The letter was provided, then at the end of August Amica gave consent for Yusuf to have access to her medical notes.
- 12.2 At the end of November 2016, Yusuf reported to his GP anxiety, anger, and stress, he stated his symptoms were affecting his relationship and he had a 28-week-old baby. Treatment commenced with anti-depressants, and he was directed to Talking Therapy.
- 12.3 In November 2018 Amica saw her GP she shared stress at home, described Yusuf having angry outbursts and an incident when he "*threw a knife into the sink*". She denied any physical/verbal/sexual abuse to her or their child and was aware she could call 999. At a review at the beginning of December, she spoke of different concerns at home (these were not recorded), she was diagnosed with possible perimenopause. No details of her relationship with Yusuf were recorded in this consultation, she prescribed anti-depressive and anxiety medication. The GP saw her two weeks later, she told them the medication had made her feel sick and unwell therefore had stopped taking them. She wanted to try over the counter herbal remedies and products targeted for menopause instead.
- 12.4 Amica was promoted at the beginning of March 2019, Yusuf was employed at the University on a two-year fixed term contract as a part-time lecturer from January 2020.
- 12.5 In May 2021 Yusuf requested anti-depressant medication from the GP. He reported low mood and relationship issues (it not recorded what the 'relationship issues' were), medication was prescribed, and he was signposted to counselling and 111 if in crisis.
- 12.6 In June 2021 Yusuf created a dating profile on Match.com with the name "Harry".
- 12.7 Amica sent a message to Yusuf saying "Please do not go back to where you were 3 months ago! We are in a good place now. I'm going to see my father today and need your support more than ever. I love you." Yusuf responded "Why do you think like that? There is no problem we are fine. I just wanted to see my child. If they stayed at home with your mother, they'll tell me anyway. I love you too". Four days later Yusuf sent a message to Amica "I miss you so much my love. I can't sleep thinking of you. Come quick and give me warm kisses.' Amica responded, "One week apart feels like a very long-time next week we travel together".

¹⁰ Messages within the chronology have been included as sent along with any translation.

- 12.8 During a medication review in August 2021 Yusuf disclosed to the GP that there was stress at home with his *'wife smashing plates' and 'shouting'*. He was seen again in September; no further discussion or mention of the stress or concerns was recorded.
- 12.9 Amica sent Yusuf a text message in September 2021 "Hope you managed to talk to the home office. Sorry I am a bit nervous these days and I understand you were upset yesterday. I love you." Yusuf responded with "I love you too".
- 12.10 Throughout September and October 2021 Yusuf searched the internet over sixty times varying from sleep problems, tracking Android phones, online dating, how to access deleted WhatsApp messages and how to view Google location.
- 12.11 Yusuf sent Amica a text message in October 2021 telling her that he loved her and their child and wanted them to see a 'family adviser'. Amica responded saying he was the most important person in her life, and she hoped he felt the same way, which he agreed.
- 12.12 At the beginning of November 2021 Yusuf searched the internet (some of these searches had been similar to those made in September and October. However, new searches were mainly on Amica and how to access closed files. A few days later Amica sent a message to Yusuf "It is school holiday today so our child can have a rest, keep warm and drink lots of fluids. I am working until 5pm. I will be home for the rest of the week so we can talk". She followed this up with another message "Please please talk to one of your friends today as you talked to my friend. Tell them about the past six months and be prepared to listen, do it for our family". Yusuf responded "I have been having vertigo attack since this morning. Our child keeps coughing and asks for syrup. She also wants to go out but I cannot walk even". By the end of the month Yusuf had searched six dating sites, registering on one with the name "Kevin" visiting his profile several times. Later that month during a 1-hour period Yusuf searched nine different websites about marriage, and Italian culture.
- 12.13 At the beginning of December 2021 Yusuf sent Amica an email asking her to read several websites regarding 'signs your partner still misses their ex'. Amica responded, "You are the one obsessed with my ex, not me". He answered with "So you are fine?" "Write me after reading them", "I am trying to cooperate with you to solve our problems".
- 12.14 Yusuf messaged a group chat to friends telling them his marriage was over; he was going to Turkey and if they knew of somewhere for him to stay to let him know. Whilst he was in Turkey, Amica told a friend she had found medication for schizophrenia in his name. She was encouraged to speak to a professional about what was going on. At the beginning of January 2022 Amica searched the internet for SOLACE Women's Aid and told a friend she had been given a phone number for Women's Aid but did not have the courage to use it.
- 12.15 Later that month Yusuf received a complaint at the university, he was seen by his manager and disclosed he had travelled to Turkey to visit family where he had contracted COVID-19 (dates are unclear). He shared he did not feel safe in the house and felt he needed to escape. Yusuf would not provide Amica's details, he was given advice about accessing campus for work. The manager escalated their concerns as they felt there was a 'potential domestic abuse situation'. Advice was given and passed on to Yusuf.
- 12.16 At the end of January 2022 Yusuf sent Amica an email confirming their marriage had irrevocably broken down and he wanted a divorce. Within the email he told Amica they would continue to live in the same house but separately and sleep in separate rooms as they had

been doing this since the end of December the previous year. Over the next couple of days Yusuf exchanged messages with a friend regarding a divorce. One of these messages he said, "Now I am going to sort the legal procedure out, buy a house of flat, settle down and work and read and write and of course have sex with beautiful girls".

- 12.17 Four days after his email to Amica, she text Yusuf *"I will do the couples therapy, but this time there needs to be a commitment to take action as a result of what comes of that".* In response Yusuf told Amica to arrange at least 10 sessions, and his doctor had told him they needed to both be willing to fix the marriage. Amica replied *"You have asked me to do this, and I said yes. Can you please take responsibility and arrange it? I will pay my part"*. Yusuf agreed.
- 12.18 Two days later Yusuf set up a new single dating profile under the name of "Edward".
- 12.19 At the end of January, Amica arranged couples therapy via Zoom for the beginning of February.
- 12.20 In February Yusuf sent Amica's mother an email telling her he wanted a divorce, blaming Amica. A week later he messaged a friend stating the last therapy session was 'awful', accused Amica of being narcissistic and he wanted a divorce. A day later Amica, emailed Yusuf refusing to pay for the session as he abused her in front of the therapist. He went on to send another email to Amica's mother accusing her of an affair, swearing about her, calling her names as well as detailing messages of Amica having sex with her ex-partner and how he was disgusted by her. He asked her to persuade Amica that the marriage was over and that he did not trust or respect her. Over the next week Amica searched for divorce solicitors.
- 12.21 At the end of March, Amica searched for properties for sale and house prices in Colchester. She also searched 'Urban Dictionary: Hoe' as well as 'What is Domestic Abuse?' and read information from United Nations and Women's Aid.
- 12.22 Amica conversed with her mother via WhatsApp regarding Yusuf's behaviour, she told her that he knew he had made a mistake and that he seemed to be on the right track but that she was cautious. At the beginning of April, Amica told her mother that he had booked for the three of them to go to Istanbul which should be a '*pleasant and reconciliatory trip*'. Two weeks later Amica searched the internet for the meaning of Gaslighting.
- 12.23 At the beginning of May Yusuf was invited to an interview at the university at the start of June. A few days later he screenshot Amica's daily calendar dating back to January 2022, he also searched the internet 14 times throughout May regarding how to retrieve deleted location and information from a computer or mobile phone, spyware apps, dating sites, how to activate a mobile remotely, properties in Colchester, private investigators, and Matrimonial Investigations in the UK.
- 12.24 In mid-May Amica's friend emailed her and shared a screenshot of a message Yusuf had sent regarding his intention to divorce her. Amica messaged her mother a week later stating Yusuf's behaviour had worsened. Only a few days later Amica was then contacted by her friend explaining Yusuf had contacted them and they were worried about her. Amica apologised, told them he was going through a difficult time and was trying to come to terms with past traumas. She said her unfaithfulness had become his obsession, but he was receiving help. She asked them to ignore him and thanked them for checking on her. Amica's friend offered to meet,

which Amica agreed to. Amica started to search the internet for 'Munchausen-by-proxy'¹¹, 'legitimency meaning'¹², 'monstering'¹³ and '10 top tips on how to divorce amicably'.

- 12.25 In the early evening of the 30/05/2022 Yusuf messaged Amica's friend and alleged her husband had been meeting Amica and that he had evidence of this (there is no evidence of this). Yusuf then had another conversation with the friend he met earlier that day telling them *"I have flipped for real"* and *"I feel sad and embarrassed"*. He then searched the internet for surveillance equipment and how to find files on an Apple Mac. Amica also searched the internet for 'Is my husband bipolar obsession with my fidelity?', 'Is my husband bipolar obsession with me?', 'Bipolar disorder' and "is my husband bipolar quiz".
- 12.26 The following day Amica messaged Yusuf's friend raising concerns that his behaviour had gone to a 'dark state' and that she feared for her safety. The friend responded stating Yusuf needed help and suggested he went to Turkey due to waiting lists in the UK.
- 12.27 At the end of May 2022 Yusuf met with a friend regarding making a divorce application (this was completed online). During this meeting he said to them, 'Sometimes I want to kill her, get it over and done with.' The friend described him as calm when he said this, but they could tell that he was angry, and sad about the situation. He then said, 'What would happen to their child?' to which they responded they would get lost in the system. The friend felt that due to Yusuf's Turkish culture, this was a 'cultural thing', and some nationalities say these things, so they 'waved' off the idea and did not think anything of it. Yusuf's friends suggested to him that he should go away for a while, to avoid an argument and book a ticket to Turkey which he agreed to do the following day. After this meeting Yusuf spent time on Match.com, emailed his manager seeking information for the upcoming interview and gave Amica the divorce papers which she confirmed to her mother.
- 12.28 The following day, Amica dropped her child to school and returning home, between 9:49am and 11:07am Amica engaged in several email and Teams exchanges with work. Yusuf visited his 'Edward' match.com dating profile for a final time. At 11:42am Yusuf murdered Amica.

13. Analysis

13.1.1 Awareness of domestic abuse

- 13.1.2 Although agencies had very little information regarding any domestic abuse, the evidence obtained by Police for the trial and statements from friends of both Amica and Yusuf gave an insight into the continued abuse Amica was subjected to.
- 13.1.3 It was evident from the information provided for the review that Amica was subjected to years of coercive and controlling behaviour from Yusuf. Coercive control is an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim. The behaviour is to isolate the victim as well as regulate their everyday behaviour. Liz Kelly's research explains different stages of coercive control, all of which were evident within this relationship.

¹¹ Munchausen-by-proxy is a mental illness and a form of child abuse where a child's carer makes up false symptoms or cause real symptoms to make it look like their child is sick.

 $^{^{\}rm 12}$ Leglitimency was the practice of using magic to enter another person's mind.

¹³ Monstering – criticize or reprimand severely.

13.1.4 Grooming

Yusuf's controlling behaviour appears to have been present as soon as they met. He ensured he met all the requirements she was seeking on her dating app, he promised her that he would stay at home to look after their child and that she would be able to continue to work. With all these promises Amica entered a very fast-moving relationship, marriage and had a baby within 12 months.

- 13.1.5 Perpetrators of domestic abuse present themselves as non-abusive, they do not initially abuse their victims. However, they manipulate their victims by using charming behaviours which disarms those around them. This tactic perpetrators use, are part of the initial stages of starting to isolate, control and create some form of dependence on them.
- 13.1.6 Those who are being 'groomed' by a perpetrator may not recognise the behaviours as there are no 'obvious' concerns for their safety and wellbeing. The coercive and controlling behaviour that may be present which appear to be 'loving' may be calling all the time, picking a victim up from work or when out from friends, buying them a phone with location settings due to concerns. The behaviour termed as 'Love Bombing' is common within this stage as there is a whirlwind of emotions and actions, such as quick affirmations of love, moving in together and marriage all of which were present for Amica.

13.1.7 Managing the situation

Amica appears to have started to manage the situation when she told friends on numerous occasions that Yusuf behaved in certain ways due to stress, finding a job, issues with his passport and/or his mental health. Stresses included trying for a baby via IVF, immigration, work and bringing different cultures together whilst she attempted to live a British life.

- 13.1.8 Perpetrators during this stage may start to impose their standards and expectations. Amica told a friend that Yusuf expected her to look after the baby, him, the home and work. She also raised the concerns regarding when his mother was in their home, and he insisted on speaking Turkish so she could not understand them. This isolated her within her own home, her health visitor identified she was isolated and her interaction with her friends started to reduce.
- 13.1.9 When Amica spoke with a friend about the difficulties at home, they advised her that, she should leave the house for a while. She started to do this and would often take her child out to the park or something similar. Then Yusuf would ring friends, asking where she was. He would sometimes do this whilst people were at work, insisting on speaking with them, complaining about Amica's behaviour, and wanting them to side with him. Friends say it became very awkward for them and Amica as she would continually apologise for his behaviour.
- 13.1.10 Amica may not have recognised the behaviours as abusive. Victims at this stage usually reach out to friends and family rather than professionals which is also particularly the case when there are concerns regarding immigration status, language, and cultural barriers. To support family and friends understand these behaviours as abusive, we need to raise awareness and provide people with the skills to be able to support victims without pushing family members away.

13.1.11 Distortion of perspective/reality

Amica experienced years where she had a distortion of perspective/reality, this was especially evident when Yusuf started to blame her for his behaviour. He continued to accuse her of affairs and that she was lying. He used gaslighting tactics turning the arguments onto her. He

at times even told her she was mentally unwell and 'her lies' were making him ill. Yusuf told friends that Amica was assaulting him and that he was a victim of abuse. This created doubt with some of their friends and caused Amica embarrassment and her feeling she had to continually apologise for his behaviour. Her friendship groups became smaller with her only contact through work.

- 13.1.12 He even recorded her (audio and video) on multiple occasions where he continually provoked her, appearing to want a reaction from her, when she then reacted, he would state he was the victim. This reinforced his belief that he was a victim, blamed her and created doubt with her thinking. This fuelled his obsession and jealousy over her. During this stage Liz Kelly found that victims spend more and more time in a state of anxiety which Amica was struggling with and had sought help for this with her GP.
- 13.1.13 Although still in a relationship Yusuf's behaviours were a sustained campaign of stalking. He used multiple methods of videoing, listening, and tracking Amica not only within the home but when she was at work and out of the house carrying out day to day activities. Yusuf was fixated on Amica, her alleged affairs and ensuring he could prove to everyone that he was the victim. Him working in the same organisation also enabled him to see Amica's work calendar and movements.
- 13.1.14 He was obsessed with Amica's every movement and word even though he searched and created dating profiles it is unclear whether this was to date women or to see if Amica was also on any dating sites. Amica even told him he was obsessed and asked him to stop contacting her friends and behaving in the way he was, but he continued.

13.1.15 Recognising abuse

It is unclear how long Amica thought she may be subjected to domestic abuse, but it is evident that she was starting to define what was happening to her by her internet searches to Solace Women's Aid, the meaning of Domestic Abuse and Gaslighting. Amica never reached out to practitioners or her colleagues regarding her thoughts of what was happening to her. Liz Kelly describes how this is a difficult stage for victims as they have to acknowledge themselves as someone who is being victimised. When she told her friend that she had a number for Women's Aid but did not have the courage to call them, unfortunately this does not appear to have been explored any further. This is in no way to blame her friend as these discussions were over text and having these conversations can be incredibly difficult. Additionally, without understanding domestic abuse, 'what it looks like' and the risks associated with it, it can be incredibly difficult in knowing what to say.

- 13.1.16 Amica sent several messages to Yusuf reaching out and seeking a way to 'fix' their relationship. During this time, she was clearly re-evaluating the relationship, searching the internet for properties and how to save the marriage. At this point and when Yusuf was fixated on Amica's alleged infidelity his abuse escalated and got worse. He was repeatedly searching the internet for different spyware as well as intercepting her devices.
- 13.1.17 Friends of Yusuf recall how he was checking Amica's emails and never finding anything. They described him as obsessed and that they were aware he had downloaded a Google app on her phone to track her without her knowledge. He would show screenshots of where she had been alleging, she had been meeting someone and cheating on him. They described how they were fed up with the continuous allegations and told him to get a divorce. On several occasions he was told that Amica was looking after her child, going to work, and coming home and that his allegations were not believed.

13.1.18 It does not appear that Yusuf's friends challenged his behaviour; this is not to proportion blame however, when friends are bystanders of abuse and there is no challenge, it can reinforce the controlling persons beliefs and justify their actions.

13.1.19 Ending the relationship

There appears to have been several attempts to end the relationship. Amica told her friends that she and their child were happy when Yusuf was not there as there was no tension in the house. But whilst away he had 'begged' for forgiveness and had returned. Friends had found this frustrating and told her that they would never speak to her again if she took him back without him seeing a psychiatrist. Amica told a friend that Yusuf was going to see a doctor and she was going to give him another chance. It is not unusual for those subjected to abuse to return to different stages of this cycle on multiple occasions however, the relationship will never be the same as the victim will always know the relationship is abusive even if the abuser uses grooming techniques to get them back.

- 13.1.20 The final act of ending the relationship was when Yusuf applied for a divorce, the language he used within emails and to friends was that the divorce would be on his terms with Amica having no voice. Even though Yusuf was continuing to try to remain in control, Amica's risk significantly increased as the relationship was ending, and he would no longer have power over her.
- 13.1.21 Coercive control is difficult for victims, those within their close circles, communities, and practitioners to identify. Even though coercive control was introduced within law under the S76 Serious Crime Act 2015¹⁴ there is still some misunderstanding of what coercive and controlling behaviour is. It is therefore vital we ensure we continue to find new and innovative ways to educate the public. Unfortunately, until domestic abuse impacts a victim, friends, family members, colleagues and the public are reluctant to engage and take notice. This is why organisations need to work with communities to be able to ensure different types of abuse is talked about and explained.

13.2 Evaluation and awareness of risk

- 13.2.1 No risk assessment for domestic abuse was ever completed with Amica, this is no fault of any professional as she did not disclose abuse other than to her GP when she disclosed Yusuf had thrown a knife in the sink (this will be analysed in Section 16.6).
- 13.2.2 With the information provided we were able to complete the DASH RIC to assess her risk:
 - *Was Amica frightened?* Although Amica had never said these exact words, she had reached out to a friend saying she thought he would kill her and feared for her safety. She also raised her concerns to her GP when he had thrown a knife into the sink.
 - What was Amica afraid of? She raised concerns he would kill her, she feared for her safety, and he was getting worse.
 - Was Amica isolated from friends and family? Amica had limited contact with her family, her friends were seeing her less and her only contact with people were her colleagues/friends at work.
 - *Was Amica depressed or suicidal?* Amica spoke to her GP about how she was struggling and had been prescribed anti-depressants.
 - *Had Amica tried to separate, or had they separated in the last 18 months?* There had been several attempts to separate, with Yusuf going to Turkey, but he had come back, and they had tried to resume the relationship. The relationship ended the final time in the spring of 2022.

¹⁴ https://www.legislation.gov.uk/ukpga/2015/9/section/76/enacted

- *Was there conflict over child contact?* Although they still lived together Yusuf had made several comments about the care of their child and Amica had a fear of them being taken to Turkey.
- *Did Yusuf stalk and control Amica?* He was using and searching spyware devices as well as recording her in and out of the home.
- *Was the abuse happening more often?* There was an escalation since their child was born but the behaviours significantly increased over the last year of Amica's life.
- *Was the abuse getting worse?* The allegations of infidelity, contacting family and friends and his fixation on Amica were increasing over the last year of Amica's life.
- *Was Yusuf excessively jealous?* He became obsessed and extremely jealous of Amica's previous relationships and any other he believed she was having. He also asked their child if Mummy had been with any other man.
- *Had Yusuf ever used a weapon to hurt her?* Although Amica claimed he had never been physically violent to her, she told her friend that he had thrown things causing her and her child to seek refuge upstairs. There was also the incident when he threw the knife in the sink.
- *Had Yusuf ever threatened Amica or anyone else?* He made a threat to kill Amica to a friend, it is unknown about anyone else.
- *Was Amica frightened of anyone else?* Amica was fearful that their child would be taken to Turkey.
- Were there any financial issues? Amica was the main earner for the relationship with Yusuf working temporary roles. Yusuf also mentioned finances repeatedly with regards to the divorce, with one friend alleged he demanded £60,000 from Amica as part of the divorce settlement.
- *Did Yusuf have any issues with mental health, alcohol, or drugs?* He reported his mental health was getting worse and Amica reported he was drinking alcohol leading up to the day she died.
- 13.2.1 With these risk factors identified Amica was at high risk¹⁵ of serious harm from Yusuf. Agencies, friends, and family members may not have realised this as they held 'bits' of information rather than having the entire picture. However, friends and family of Amica did raise their concerns with her asking if she ok and that they were there if she needed them.
- 13.2.2 Again, this raises the issue of raising awareness, how we can communicate this with the public and agencies as people may respond differently when armed with additional knowledge.
- 13.2.3 Another way to consider the risks Yusuf posed to Amica is with the homicide timeline¹⁶ and the different stages Yusuf went through before he killed Amica.

13.2.4 Stage 1 – A history of control or stalking

Although we do not know Yusuf's previous relationships Amica told a friend that he had been married previously and made allegations she was a prostitute, and he owed money due to her. Even though we cannot be sure he abused his ex-wife, he clearly blamed her for the debt he was in and was derogatory towards her.

13.2.5 Stage 2 – The commitment whirlwind

Within this stage, Jane Monkton-Smith notes that commitment is risky, and a controlling person believes commitment cannot be withdrawn. Those who are controlling usually seek partners who are suitable for their needs, they will actively promote themselves as the right person for the victim. Once in a 'relationship' controlling people expect commitment **to them** rather than **from** their partner and they expect this guarantee extremely early. Society and

¹⁵ High risk of serious harm or homicide

¹⁶ https://www.glos.ac.uk/content/the-homicide-timeline/

culture can also reinforce this belief around commitment and makes divorce difficult, attracts blame and the feeling of failure all of which happened within this marriage. Amica met Yusuf on a dating website with Yusuf meeting all her requirements. It is unclear when they first met in person but within 3 months they were married and had a baby within 12 months.

13.2.6 Stage 3 - Living with Control

This describes how the difficulties and dangers do not present themselves immediately or obviously. However, manipulation happens when no-one notices it and before people know it risky behaviour has a plausible explanation, encourages victims to ignore it and therefore victims become compliant. Amica and Yusuf were married for 7 years, the whirlwind at the beginning may have acted as a screen to ensure Amica did not identify the control Yusuf was exerting over her. This then continued throughout their relationship with Yusuf changing his behaviours when new challenges arose.

- 13.2.7 This stage highlights the 'Jealousy Code' and explains how jealousy can be described and at times justified as a crime of passion of murder or why someone uses control in a relationship. Yusuf justified his jealousy and control after he found the picture and lock of hair of Amica's ex-partner. He blamed her for his behaviour and took no responsibility for his actions thereafter. He did everything he could to ensure he destroyed her friendships and told everyone that Amica had been unfaithful to him to defend his actions. At times friends unintentionally colluded with him, reiterating it was Amica who was to blame and that he was not to blame himself.
- 13.2.8 Yusuf also demonstrated his sexual double standard by creating at least three different dating profiles under different names, searching several dating sites and websites of 'Beautiful women' and one occasion telling a friend that once divorced he could have sex with beautiful women. He appeared to believe he was able to do this but remained fixated on seeking evidence of Amica's infidelity.
- 13.2.9 Within Stage 3 the controlling person will also tend to impose a loyalty code to ensure the victim chooses between sides but also presenting to the 'outside' world they are happy. Some perpetrators will isolate their victims' stating friends and family can be a bad influence, however others will keep family and friends close. Yusuf did both, he isolated her by making it difficult for friends to see her in her home and by accusing her of affairs. But he also manipulated friends and family, presented himself as the victim and the bereft partner; by creating that narrative he was able to monitor their responses, whilst further isolating Amica and seeking further control of the situation. These two codes created a smoke screen to those who loved and cared for Amica ensuring they did not see the risk Yusuf posed.
- 13.2.10 What was striking with Yusuf and behaviour highlighted within this stage was the constant accusations of infidelity and disloyalty. These are a warning marker that he may have been preoccupied with such thoughts, knowing he could not deal with the possibility of it being real. Page 117 of 'In Control' states '*Most controlling people are not broken by separation in the way we might think; they are more often outraged by it. It is not necessarily the loss of the individual they are guarding against but the loss of the relationship'.* It goes on to say that some may have affairs whilst still controlling their partners. Something Yusuf certainly appeared to be considering.

13.2.11 Stage 4 – The Trigger

Once Yusuf lost control of Amica, things began to shift and change. Although they had separated before he had been able to manipulate Amica into coming back. However, in the

months leading up to Amica's death there was a finality of the relationship within both their language to each other and to those around them.

- 13.2.12 When there is a trigger point jealousy is not the only factor. Yusuf sent Amica messages telling her to meet his demands, used finances and the impact on their child as a reason why she should agree to the divorce. It is unclear how Amica responded to Yusuf when he gave her the divorce paperwork, but we know she had been actively looking at the internet regarding solicitors and information on divorce. Even though we cannot be certain, Amica appeared to want to ascertain some control over the divorce which may have meant she needed to be punished for not conforming to his expectations and demands.
- 13.2.13 Research from the timeline found that all those who kill their partners removed responsibility by denying they were abusive and portraying that they were the victims. Yusuf repeatedly reported to anyone who engaged with him that he was the victim of the relationship, and his behaviour was justified. At one stage he told friends that Amica had proved there were no extra marital affairs, and he felt he was going mad and was embarrassed. However, within a few days of these comments he searched the internet on spyware, dating sites and messaged friends telling them Amica was lying. None of these behaviours portray a victim but a person who has lost control and power over his partner and is seeking to ensure he destroys her. He continually moved between two pendulums, contradicting himself.

13.2.14 Stage 5 – Escalation

This stage is when the abuser has lost control, and they escalate their action to get it back. At this stage if a relationship has ended the controlling person may manipulate the other to regain control of the relationship. Amica described how Yusuf had told her he was sorry, wanted to try therapy (if it was on his terms) and that he behaved in this way due to his mental health. However, the relationship never went back to 'how it was' as Yusuf was obsessed and enveloped with jealousy and mistrust. Yusuf was never going to gain control of the relationship, his internet searches increased as did his visits to dating websites.

13.2.15 Yusuf also escalated his efforts to try and get others to collude in his actions and thoughts to gain his power back. As already noted throughout this report he told everyone about the situation and approached Amica's friends some who he had not spoken to for several years. Some of these friends made attempts to try and help, however, sometimes these situations can create a trap that victims can find difficult to escape from as everyone is then involved in the control and relationship.

13.2.16 Stage 6 – Change in thinking.

When an abuser has lost control, they change tactics to ensure the power has been restored. When we look at Yusuf, he had emailed Amica about divorce on 23/01/2022 but soon after they were trying therapy and went on holiday. This, honeymoon period lasted a matter of weeks before his internet searches changed to hidden microphones and private investigators. Amica's internet searches also changed to domestic abuse information and trying to understand the behaviours she was subjected to.

13.2.17 Yusuf's change of thinking rapidly increased when he bombarded Amica's friends with messages and calls along with other messages to friends and Amica's mother. His language changed using repeated swear words, calling Amica he/she and how he became determined to lead on the divorce. This along with stalking Amica became his focus.

- 13.2.18 Jane Monkton-Smith states the change of thinking is not easy and it is those closest to the person who will notice it. This was evident with Amica, she reached out to Yusuf's friend saying Yusuf had changed again, he was acting crazy, and she was frightened he was going to kill her. Amica had never raised this concern before, she knew Yusuf well and would have known her life was in danger, however, most likely did not know what to do or where to turn to.
- 13.2.19 A change of thinking can occur over a course of time or over a very short period, but once the change of thinking occurs, it is very rare those who make the decision to kill their partners will not go through with it. We cannot be certain when Yusuf's change of thinking occurred, but it was evident that his language changed in his messages, he became fixated on the divorce and ultimately, he made the conscious decision that he was going to punish her. Additionally, the day before her death Amica knew her life was in danger and voiced this with one of their friends, something she had never said before.

13.2.20 **Stage 7 – Planning**

Controlling people/abusers do not kill as a crime of passion, there is planning. Yusuf did not carry out internet searches on how to kill or have any 'murder kits' but he had sustained a campaign against her, tried to create a false impression of her as the abuser and him the victim, isolate her and tell his friend that it would be easier to kill her and what would happen to his child. These final comments show he had thought about it and the possible consequences. Additionally, as with DHRs where the alleged perpetrator has tried to make the murder look like a joint suicide; Yusuf may have served the divorce papers to continue to paint the picture of his despair. Another way in which Yusuf may have planned Amica's murder was that he ensured their child was not in the home and that he would run into the street with his self-inflicted wounds – again portraying as the victim.

13.2.21 *Stage 8 – Homicide*

Yusuf made sure Amica would not continue to live where he was not in control of her, and he made the conscious decision to brutally kill her.

13.2.22 It is vital professionals, and the community understand the stages of coercion and the homicide timeline as earlier intervention can save people's lives. As a society we need to change the narrative, diminish the language we use such as 'crime of passion' and 'they must have seen red'. Those who abuse must be held accountable and friends and families need to be supported in recognising the risk factors when there is jealousy and obsession.

13.3 Impact of different cultures and beliefs systems.

- 13.3.1 Amica was an established lecturer at the University, her career was going well with a recent promotion. Yusuf on the other hand was not as senior within his role, had fixed term contracts and what appears to have been concerns regarding his passport and his ability to work. Evidence from the court case found that Yusuf had encouraged Amica to work and gain a career, however when their child was born, his expectations changed, and he believed Amica should remain at home.
- 13.3.2 Traditionally, Turkish men are the breadwinners and provide the main income for the household, which was not the case within Amica and Yusuf's. Cultural Atlas¹⁷ ¹⁸ highlighted that Gender equality has been a core objective of the Turkish government (see <u>National</u> <u>Origins</u> and <u>Kemalism</u> under <u>Core Concepts</u>)'. However, many men still share a common view

¹⁷ https://culturalatlas.sbs.com.au/turkish-culture/turkish-culture-family

¹⁸ <u>https://culturalatlas.sbs.com.au/italian-culture/italian-culture-family</u>

that women need their husband's permission to work whereas Italian women are encouraged to be independent from a young age. Culturally there is an expectation of male and female roles.

- 13.3.3 Yusuf was jealous of Amica, he approached friends within the Turkish community about divorcing Amica and then served divorce papers the day before he killed her. He had also commented that he had contemplated killing Amica. His words were not, at the time, taken seriously. They were dismissed as 'cultural' and did not raise concerns to the friend he spoke to. It was evident that he was enraged by Amica, not only when he spoke to his friend but also when he emailed her mother, he used abusive language when describing her, detailing the apparent sexual acts she had carried out, that he was disgusted by her and did not trust or respect her. All of this indicate that he was feeling some kind of apparent shame on him and his family and that he was seeking revenge for this. These feeling of anger, revenge, finality, 'shame', so-called dishonour significantly raised the risks he posed to Amica. Perpetrators of so-called honour-based abuse aim to "correct" the victim's behaviour or restore their reputation which can lead to multiple abusive behaviours including murder. From the words he used and the behaviours he displayed not only to Amica but also from his internet searches he was evidently planning on correcting what he believed Amica had done wrong.
- 13.3.4 Divorce is not common, most Turkish couples seek to avoid it and there is a stigma regarding divorce, which is similar for those from Italy although divorce is now becoming more common in recent years. It seems prudent and significant that Yusuf served Amica with divorce papers the day before he murdered her. The chair spoke to a national domestic abuse agency who specialise in honour-based violence and abuse to seek expert advice regarding cultural factors that may have played a part in this relationship. They advised usually the female victim will seek to leave and serve divorce papers once they are safe. Yusuf serving the papers was an unusual step. It may have been his way to exert his continued control power over Amica and the relationship especially as he continued to be jealous and believe Amica was having affairs. No one knows how Amica reacted to Yusuf serving her with the divorce papers, but the panel believed his decision to serve this increased the risk to Amica. Culturally there is an expectation of male and female roles, and we should not underestimate the influence these beliefs systems hold in different cultures.
- 13.3.5 Male privilege/entitlement is a recognised behaviour/belief with men who are abusive and if there is anything that drives abuse then this is it. Abusive men will tend to have a notion that as a man in a relationship (with a woman) they will get to dominate and control their partners who will submit to them. This belief goes to the core of their identify and they will continue to fight to keep this. When we reflect on what was happening with Amica, Yusuf saw himself as the head of the family, but Amica was the main income earner, she wanted to live a British life, she had friends and was independent. All off this would have challenged his belief systems and when he found Amica's memory box it provided him with a way to start to break Amica down and ascertain his power.
- 13.3.6 Abusive men cannot imagine themselves as equal to a female. They may acknowledge they make mistakes but when it comes to being wrong to their partner this will never be acknowledged. As an abusive man if their role is challenged then their identity is diminished. There is a sense of entitlement and dominance. They will not believe this with other women in their lives such as a co-worker. But they have a different belief system over their female partners, all of which Yusuf clearly demonstrated with his internet searches, conversations with friends and how he treated Amica.

- 13.3.7 Essex Police identified Amica's murder as an opportunity to discuss the barriers of marginalised communities to seek help and support. They therefore took these concerns to the Colchester Independent Advisory Group (IAG) as an agenda item to discuss how services could engage with communities who do not regularly approach police or other services.
- 13.3.8 All communities were posed the question, and the overwhelming view was that a remark about stabbing a partner was not a culturally acceptable comment anywhere, a Turkish representative was also included within these discussions. Next Chapter were leading a piece of community outreach work as they had identified many cultures faced barriers to seeking support, which had been discussed at a previous IAG. Next Chapter will be starting a new project to reach out to community leaders to further relationships, understand the barriers, and aim to raise more awareness within communities and create some community champions so basic safety and support advice could reach victims via their own community.
- 13.3.9 In partnership with SETDAB and The Change Project, Essex Police have also created a #Reflect campaign which focuses on helping perpetrators to change their behaviour and casts a spotlight on different types of abuse from physical, CCB, stalking and harassment and uncontrolled emotions such as humiliation, jealousy, or anger.
- 13.3.10 SETDAB is also working in partnership with The Change Project which encourages people to break the cycle of domestic abuse by changing their behaviour. To ensure this campaign is successful the community needs to be able stand up to those who abuse so perpetrators can reflect and seek support if they want to change.

13.4 Intersectionality

- 13.4.1 Kimberlé Crenshaw back in 1989 first coined the term intersectionality, intersectionality is the concept that all oppression is linked. More explicitly, the Oxford Dictionary defines intersectionality as *"the interconnected nature of social categorisations such as race, class, and gender, regarded as creating overlapping and interdependent systems of discrimination or disadvantage"*.
- 13.4.2 While domestic violence impacts the lives of all women of all backgrounds, society does not treat all victims of abuse equally. Social biases influence how society perceives survivors of domestic abuse, and stereotypes often create barriers for care and assistance.
- 13.4.3 When we consider Amica and the different intersectional barriers she faced in accessing support we can identify that although she had lived in the UK for many years, her Italian background may have created a barrier in accessing support, her social status as a university lecturer may have also created a hurdle in speaking about the abuse she was experiencing, her culture as well as Yusuf's culture whilst living in UK and adapting to this, her identity as a woman may have also been an obstacle especially if Yusuf had a male privilege belief.
- 13.4.4 Not only may these different layers have created barriers with Amica seeking support, agencies may have also not recognised the abuse and risk she faced. Amica and Yusuf were university lecturers, they owned their own home, were married, employed an au-pair and had never come to any statutory organisations attention with concern therefore this may have given the impression of an 'Acquired or achieved status'. Our unconscious bias makes it hard for us to recognise when someone may be vulnerable. Unconscious bias happens when our brains make incredibly quick judgments and assessments of people and situations without us realising. Often these are based on social stereotypes, which we may not even realise we hold.

For example, sometimes the things that appear to make someone strong - status, profession, wealth - might make them vulnerable.

13.4.5 If Amica and Yusuf were identified as 'middle class'¹⁹ or a 'Universal Family' there tends to be a perception that they are not in need of support. There tends to be a reliance on them seeking support rather than organisations taking the time to explore further into what is happening 'behind the scenes'. Due to these perceptions, professionals, colleagues, and friends appeared to assume there was no domestic abuse within Amica's marriage. Everyone has unconscious bias, and it can impact in how we interact and respond to those we are working with; this family did not meet the stereotypical domestic abuse ideology and therefore their status and societal position impacted in the response they received. We all need to be aware of their unconscious bias, their perception of those we work with and how these impact on the interaction we must ensure it does not create a barrier in the response we give to those in need of support.

13.5 The University of Suffolk (UoS)

- 13.5.1 There are approximately 633 staff which the university has a duty of care to. All UoS employees are recruited using best practice processes which include the obtaining of references and right to work checks.
- 13.5.2 All managers are offered training including conflict management, recruitment and selection, health, and safety as well as eight core mandatory training modules (including Preventing Radicalisation and extremism, Safeguarding Children and Adults). Although domestic abuse is not mandatory this is currently being reviewed. In 2018/2019 the University created a Domestic Abuse Champion Network for students which has been welcomely received.
- 13.5.3 During Amica's 12 years at the university no concerns were ever raised regarding her work or sickness and no 'official' concerns were raised with regards to her safety, health, or wellbeing.
- 13.5.4 The conversations Amica had with colleagues about her relationship were snatched in the office, walking to the train station or when working in the evening. Amica appeared to be a very private person about her personal life and did not speak about her emotions very often. Her concerns about her relationship were never shared in a formal capacity regarding work or in her supervisions.
- 13.5.5 Yusuf's colleagues did not know he was married to another member of staff until January 2022 and did not know it was Amica until after her death. At the time of Amica and Yusuf's employment and Amica's death the 'Personal Relationship at Work Policy' did not require staff to disclose marriages or relationships between staff as a matter of course.
- 13.5.6 When Yusuf made the comment to his manager in January 2022 regarding him not feeling safe it was described by his manager as a passing comment and linked to the conversation regarding performance. The manager felt they explored the disclosure sufficiently and no further concerns were raised. They were proactive in their offer of different interventions and escalated to their manager for additional support. After this the manager kept in regular contact with Yusuf who then told them everything was all fine and his marriage was ending.
- 13.5.7 Yusuf presented as the victim of abuse to his manager, there could have been further exploration of the relationship and a referral to the safeguarding team. The manager stated

¹⁹ The social group between the upper and working classes.

they were concerned about not wanting to 'cross the line' or 'push a member of staff who did not want further input or involvement from the line manager/institution' as Yusuf appeared to be a proud and private man. This reluctance is understandable however, it is their responsibility to be able to ask questions to support appropriate risk assessment and referrals.

- 13.5.8 Yusuf refused to disclose who his partner was, and this was felt it was due to his fear and that she was the abuser. The management team have reflected on this with regards to if they had known they would have been able to have followed their concerns up with Amica's manager and there could have been conversations with her.
- 13.5.9 One of those colleagues who she had a 'snatched conversation' with (even though outside their formal capacity) was a manager. Although the conversation was outside of work and as a friend it raises the question of what the responsibilities of friends who are and the reluctance to take action when disclosures are made outside of a formal setting. Although there are these concerns colleagues, friends and managers need to be able to have the confidence in how to respond. It may have been of some benefit for Amica's colleague/friend to have explored this further, to try and understand the dynamics within the relationship and any risks posed to Amica and or her child. This is in no way to proportion blame as this is and continues to be difficult situations many people find themselves in. It is, therefore, imperative that employers have the support infrastructure in place to support staff.
- 13.5.10 The university has a domestic abuse policy for staff; however, it had only been introduced in January 2022 and therefore staff awareness may have been limited. Colleagues of both Amica and Yusuf, all were asked to share their knowledge and awareness of University policy in relation to safeguarding. All were able to cite potential signs of physical and emotional abuse, however signs of coercion and control were not directly referenced as examples of potential abuse. During these discussions staff close to Amica felt Yusuf was controlling giving examples such as; Amica was not often able to join in after work activities, would need to leave early, or would attend with him. At the time they did not identify this as domestic abuse but within the wider context they were able to recognise the impact of this on Amica.
- 13.5.11 Research shared by Employers Initiative on Domestic Abuse (EIDA)²⁰ Breacon Project reported that 1 in 6 victims were employed in the same workplace as their perpetrator. It also refers to workplace policies focusing on victims and stating they will not tolerate domestic abuse or other harmful behaviour however, there is little action taken against the abusers or support and guidance for managers to deal with such scenarios.
- 13.5.12 All employers must be aware of their legal obligations and consequences taking (or not taking) action relating to employee's who may be perpetrators. Therefore, when there are concerns regarding disclosures legal advice should be sought, and as such any amendments is to be included within a disciplinary policy.

13.6 SNEE ICB including General Practice and Health Visiting

13.6.1 Both Amica and Yusuf had limited interaction with health professionals, they saw their GP's however at most of these appointments they were with different clinicians. There was also minimal interaction with the health visiting team after the birth of their child.

²⁰ https://www.eida.org.uk/resources/developing-response-perpetrators-domestic-abuse

- 13.6.2 Although Amica and Yusuf never directly stated they were experiencing domestic abuse there were occasions where the GP and Health Visitor had the opportunity to have explored the family situation. The Department of Health 2010 found that 80% of women in a violent relationship seek help from health services and these are often a woman's first, or only, point of contact. It is vital those working within the NHS are aware of possible medical presenting issues which may indicated domestic abuse, how to risk assess, refer, and signpost.
- 13.6.3 When Yusuf requested the letter regarding Amica and their child's wellbeing and Amica's medical records, a form giving permission was completed. Amica was spoken to with Yusuf present and the GP suspected no coercion was present. Unfortunately, Amica was not given the opportunity to speak on her own. The GP noted that when the request was made the GP had no apparent cause for concern and therefore did not feel it necessary. Even though this was felt, it would have been appropriate to have asked to speak with Amica alone providing a safe and open environment to raise any concerns, unfortunately this was not offered.
- 13.6.4 Both Amica and Yusuf made comments of possible violence and abuse within the home. The GP was proactive in asking if there were any risk to Amica from Yusuf, she told them there were none and therefore no further discussion or risk assessment was completed.
- 13.6.5 When Yusuf raised concerns regarding his anger, stress and that there was a very young child in the home, it is unclear whether he was asked if Amica and/or their child was at risk from him. Due to the age of their child and the concerns raised it was a missed opportunity for the GP to have considered seeking safeguarding advice from the DSL and/or a safeguarding referral to social care.
- 13.6.6 Neither of the disclosures were followed up or recorded with either Amica or Yusuf. This may have been due to the GP not recognising the risks that were within the home, being seen by different GPs. This is not uncommon with general practice due to demands on surgeries and although this can ensure patients are seen to reduces the continuity of care by one GP especially when there are disclosures of domestic abuse disclosures or concerns. The surgery for Amica and Yusuf was under extreme pressure with limited time and the number of patients (36,000 over four sites).
- 13.6.7 It appears each interaction with Amica and Yusuf were dealt with in isolation as notes were not flagged with any concerns or disclosures. With regards to the flagging of notes, due to Yusuf having access to Amica's notes it would not have been safe or appropriate to have had a domestic abuse flag. Even so after Amica's disclosure of feeling low it may have been beneficial for the GP to have revisited her family situation and Yusuf's access to her records.
- 13.6.8 When Amica described concerns (these were not recorded), she was told it may be the perimenopause and was prescribed anti-depressants which resulted in her feeling unwell. It is unclear why anti-depressants were prescribed as NICE Menopause guidelines are very clear that menopause symptoms should be treated first with HRT and not anti-depressants.
- 13.6.9 AVA (Against Violence and Abuse) and IRISi Interventions²¹ note within their research, that emerging evidence suggests that women subjected to domestic abuse may be associated with worsening menopause symptoms and that menopause may lead to changes or escalation in domestic abuse. Nearly four in ten (39%) women killed by men in the UK are in the 36-55 age range (Femicide Census 2020). Menopause related health care appointments can be a key

²¹ https://avaproject.org.uk/wp-content/uploads/2021/10/Literature-Review-Menopause-and-DA-1.pdf

opportunity for intervention with women who may not otherwise disclose or identify their experiences as domestic abuse:

- Ask about domestic abuse and/or relationships in all menopause related appointments.
- Consider additional barriers midlife and older women face to disclosing domestic abuse.
- Use follow up appointments to build trust, encourage disclosure and offer support.
- 13.6.10 Due to little detail within her notes, it is unclear if any of these were discussed with Amica, she was just prescribed anti-depressants which made her feel ill. At the follow up appointment there is no record of any exploratory questions to understand her situation and how alternative solutions could be explored and no further follow up appointments were made. A review of Amica's welfare and medication should have been scheduled within a timeframe that was proportionate to Amica's needs.
- 13.6.11 Although Amica and Yusuf were in the same medical practice their notes were not linked to indicate they were married, currently the only way for healthcare staff to see if two people are linked is if they click on the EMISS to see the household. This may have been of some benefit due to the disclosures by each person and that there was a small child living at the property.
- 13.6.12 During this time there were bi-monthly newsletters disseminated to all GP Practice Managers and safeguarding leads, these contained 'hot topics', training and conferences including Domestic Abuse information provided by NHS Suffolk and North-East Essex ICB.
- 13.6.13 There was and continues to be a bi-monthly Primary Care Safeguarding Forum, after each forum safeguarding leads receive information and updates. Included within these meetings domestic abuse was/is discussed with the explanation of 'dos and don'ts' of disclosures, the DASH RIC and J9 Initiative. NHS Suffolk and North-East Essex ICB have clearly provided multiple opportunities to have shared information and upskilled those working on the frontline regarding domestic abuse.
- 13.6.14 Although this is not mandatory, attendance is encouraged and the agendas have embedded links and information to support the sharing of learning, and information. There is then an expectation for those who attend to cascade information with practice staff. Attendance at NEE Safeguarding Forum by Amica and Yusuf Medical Practice varied between 60% 100%, apart from in 2019. The representation at the forum had been the practice manager in the earlier years and the two safeguarding children leads more latterly; the safeguarding adult lead had not attended any of the forums. Unfortunately, there was a lack of cascading and sharing this valuable learning and information with the wider practice.
- 13.6.15 This may have been due to the four sites only having one Safeguarding Lead, due to this review it highlighted that each site required their own individual lead which has been implemented. This now enables all surgeries to have a single point of contact with any concerns and the leads are now able to share information easily and are present at every practice meeting. The panel also discussed when cascading information and learning there is a risk of their perception of the detail provided, however, due to pressures on frontline medical staff it is incredibly difficult to release staff from their practice. Additionally, domestic abuse is one element of their roles and therefore a realistic expectation for medical staff is for them to have an awareness of domestic abuse and the possible presenting ailments, and that they have the support and pathways to be able to reach out for advice when a patient requires support.
- 13.6.16 Within the surgery some clinicians including the couple's GPs were unaware of the DASH RIC even though this has been included in the forum discussions and training. The practice is also

a partner who has signed the MARAC Information Sharing Agreement and therefore should understand the domestic abuse pathway. Without this knowledge it is therefore not surprising there were missed opportunities to have identified risks and completed any appropriate risk assessments. As a result of this review awareness of DASH RIC has been raised amongst the GPs across Colchester Medical Practice. Domestic abuse has been added as a standing agenda item to the weekly closed meetings to ensure it remains a focus. Aide memoirs have been added to all desks containing the contact details of Compass, SETDAB and a link to the DASH RIC form. Training for staff has been added to include online learning modules for DASH RIC assessments and DHRs.

- 13.6.17 Within the Colchester area another DHR recommended the need for GPs to ensure that screening for domestic abuse and safety assessments are carried out as standard practice when patients present with mental ill-health and when mental health reviews are completed as standard. Although there were never any specific mental health concerns for Amica and Yusuf, both had expressed how they were struggling with stress and concerns that Amica was prescribed anti-depressants for.
- 13.6.18 The work undertaken on this to date is:
 - Discussion with GP safeguarding leads regarding this recommendation. The outcome was that when they review someone's mental health, they ask whether the person is thinking of harming themselves or others and record this but do not delve more into domestic abuse.
 - In the next stage of the work the domestic abuse provider has been asked to help develop a toolkit of questions that will give primary health practitioners confidence on domestic abuse. This in turn will support domestic abuse screening/enquiry to be embedded within primary care for both the victim and alleged perpetrator.
- 13.6.1 The other long-term project NHS Suffolk and North-East Essex ICB are creating a domestic abuse training package with Next Chapter for all staff in an identified GP surgery. Alongside this there will be an IDVA resource based within the surgery at agreed times. The aim is to provide some dedicated support, training, increase knowledge and hopefully confidence to have those conversations with patients, safe in the knowledge that there is a referral pathway ready to provide support should there be any disclosures of abuse.
- 13.6.2 The project will last for a year and then be evaluated for impact with the hope that if successful there is a plan to seek further finding and replicate the model across other surgeries. This project was due to go live before the pandemic but due to the unprecedented impact of COVID the project was delayed. In August 2023 this has been initiated and a preliminary meeting has been held with regards to next steps. Amica's practice as well as the other three sites within Colchester Medical Group have all been identified as part of this pilot project. This will support all staff in their training and development.
- 13.6.3 The interaction with the health visiting team appears minimal however, the family engaged with all the 'core contact's when they were scheduled. The offers for additional support or the 1-year check-up (this is an opt in offer and not a required contact). When the health visitor saw Amica she voiced her struggles with feeding and not being able to go out due to this. She was offered additional support however this was never taken up. For Amica's profile, as an older mother with a child conceived by IVF and no family support locally, this is unusual, and it would be expected that she would have accessed the universal offer, such as attending baby clinics for routine weighing.

- 13.6.4 It is unusual for a 2-year review to be completed without a parent present however if consent has been obtained to complete this check this is appropriate. Therefore, it is not unusual for the health visitor to do checks with only the au pair present. A written note about pre-school was left for Amica and the red book was updated. It is unclear what information was known about the au pair as they had only been in place for 10 days. There are no recorded notes of the au pair's first language or understanding of the meeting and whether they were able to relay any messages to Amica. Due to limited information, it is unclear what organisation the au pair was recruited from and therefore we have been unable to ascertain what safeguarding processes they had in place and what support they had when there is such a young child and appointments with health practitioners.
- 13.6.5 When Amica had her post-natal depression check she gave no indication of concern, and she was not assessed as at risk (contrary to her friends' accounts). During the few meetings the health visitor saw the Amica, Yusuf was either in the same room or present within the home which may have impacted her opportunity to have spoken freely.
- 13.6.6 The family were a 'Universal Family' with no safeguarding concerns identified, therefore, the support and intervention offered was minimal. It is not mandatory for families to engage with the health visiting team which can make it a challenge when seeking engagement. When considering Amica and Yusuf's family dynamic apart from isolation there were no other factors that would have raised concerns with the information the health visiting team had at the time.
- 13.6.7 HCRG Care Group have a domestic abuse programme and lead for domestic abuse. There is a Domestic Abuse Health subgroup that meets quarterly and has several of the commissioned domestic abuse victim service providers, as well as a SETDAB representative there.

14. Learning and Recommendations

University of Suffolk

Learning Point 1

Greater clarity is required in the Personal Relationships at Work Policy for staff to be transparent when declaring relationships with other university staff. The policy is to be shared on the university website so it can be accessed by those considering making an application to the university for employment.

Recommendation 1

To review and increase the visibility of the Relationships at Work Policy and Domestic Abuse Policy.

Learning Point 2

Knowing that personal friendships can emerge through professional relationships and information may be shared outside of the working environment between staff. If concerns are raised, staff need to know where to source information and support.

Recommendation 2

Raise awareness of the Domestic Abuse Champions and continue to enhance the training offer for the Domestic Abuse Champion's to ensure they understand the continued complexities of domestic abuse.

Learning Point 3

Raising awareness with Line Managers of professional curiosity and referral processes to Safeguarding may have facilitated the further exploration of information in who was doing what to whom, potentially greater clarity and establishment of victim / perpetrator as well as risk assessment. These

actions may have facilitated information sharing between schools and departments. However, it is noted that Yusuf did not appear to respond openly to the exploration.

There is no recommendation for this learning point as it is included within Recommendations 2 & 3.

Learning Point 4

University staff and services may potentially engage with victims and perpetrators, as well as perpetrators who may present themselves as victims. There are significant complexities in safeguarding all parties, as it is not always as simple as triangulating information between parties noting that sharing information with a perpetrator may increase the risk.

Recommendation 3

Domestic Abuse training for managers to be made mandatory.

NHS Suffolk and North-East Essex ICB and General Practice

Learning point 5

Health professionals work under continued pressure with regards to their time and what support they can offer patients. It is unlikely for a patient to make a direct disclosure of domestic abuse and may present with different ailments and illnesses. It is therefore the responsibility of all practice staff to recognise possible signs of domestic abuse and how to approach patients in a trauma informed and empathetic way.

Recommendation 4

Specific Domestic Abuse workshop to be delivered within the 'Shutdown Afternoons' with the support of the local domestic abuse provider to encourage partnership working.

Recommendation 5

A Domestic Abuse Aide Memoire will be created for every clinician's desk, of how to signpost and local resources. This aide memoire will also serve as a reminder of how to refer patients if this is needed.

Learning Point 6

Information shared at the Safeguarding Forums was not routinely shared by the Practice Manager or Safeguarding Lead, this led to in missed learning and development opportunities of staff.

Recommendation 6

Ensure all learning and information from the forum and other learning events are shared with practice staff.

Recommendation 7

Domestic abuse to be a standing agenda item in Partners and Clinical meetings.

Community

Learning Point 7

It is unclear what support networks either person had outside of work and therefore difficult to identify what barriers they faced within the community and how these could have been overcome. Community Awareness of domestic abuse is a regular learning point within DHRs, and it is for partners to work together along members of the community and victim/survivors to continue to raise awareness.

Recommendation 9

Learning from the DHR to be shared within different boards and forums.

15. Conclusion

- 15.1 Amica was a loving mother, daughter, sister, friend, and colleague who was loved by everyone who knew her. She was dedicated to her child and all those around her including her students to ensure she gave them her best to get the best from them.
- 15.2 She loved Yusuf and entered the marriage believing he would be able to provide her the life she longed for. He promised her the world but over years started to change his expectations and promises to her. His jealousy and control over Amica took hold and he became obsessed, ensuring he isolated her and retained power over his wife.
- 15.3 Amica was a private woman who rarely spoke about her life with others, this does not mean she did not want to seek support but as she told a friend she felt she did not have the courage to do so. This review has highlighted that those who are subjected to domestic abuse will not necessarily seek support and help from agencies but will talk to those around. Amica confided with those close to her and had even raised her concerns for her safety and his actions. But apart from Amica herself no one identified Yusuf's abusive behaviours or acknowledged her fears, although her friends were worried for her and wanted to ensure she was OK.
- 15.4 Yusuf on the other hand was incredibly vocal of the relationship, manipulating those around him creating a false impression of Amica. The way he behaved and tactics he used were evident of those of an abusive and controlling man.
- 15.5 Once their marriage had reached its end, Amica appeared to accept they would divorce and was seeking ways to move forward with her and their child's life. However, Yusuf was never going to allow that to happen and at no stage was she able to have a life without him. Yusuf chose to take Amica's life and their child's mother away from them, with no remorse for his actions.
- 15.6 Since Amica's death her child has been in receipt of specialist foster care who have shared evidence of the impact of emotional abuse on the child. They report the child seeks reassurance and permission to show their emotions, struggles to describe how they feel and when they fractured their wrist they did not complain. It appears they have learnt that it is not safe to show emotions which may have been met with a critical or neglectful response. It is also likely that they will have avoided contributing to an already tense living environment by keeping their feelings to themself. To develop emotional awareness and the capacity to self-regulate it is essential for children to experience frequent co-regulation with a safe adult. It is difficult for an adult in an abusive relationship to remain attuned to their child or to appropriately co-regulate with them because of their preoccupation. School have also reported evidence of the impact of abuse on their emotional development. They struggle to form and maintain friendships at school and seek to please others at their own expense. It appears that they have learnt relationships come at a price. The carers and support around the child will continue to provide specialist intervention.
- 15.7 Amica will be so dearly missed by her child, family, and friends but she will continue to be remembered as the shining light to all that knew her.

Final word from Amica's mother

Amica's murderer was an evil, lying, manipulative, demonic, crazy man, an actor and his act was only because he was jealous of Amica's success which drove him crazy.

As a mother with a broken heart, thank you if you manage to save women from their murderers, she will be partly grateful to you.

Appendix 1 - Terms of reference

Key Issues

- Consider how (and if knowledge of) all forms of domestic abuse (including the non-physical types) are understood by the local community at large including family, friends, and statutory and voluntary organisations. This is to ensure that the dynamics of coercive control are fully explored.
- Determine if there were any barriers faced in Amica reporting domestic abuse and accessing services as well as services exploring domestic abuse within the family. This should also be explored:
 - \circ $\;$ Against the Equality Act 2010's protected characteristics.
- Consider intersectionality and how aspects of Amica and/or Yusuf's social identities created any different modes of discrimination.
- Review agencies response, professional curiosity, interventions, care and treatment and or support provided.
- Consider whether the work undertaken by services in this case was consistent with each organisation and local professional standards, domestic abuse and safeguarding policies, procedures and protocols and ensure adherence to national good practice.
- Review the communication between agencies, services, friends, family and colleagues including the transfer of relevant information to inform risk assessment and management as well as the care and service delivery of all the agencies involved.
- Consider what is 'good practice' for agencies to achieve in their response to domestic abuse victims and perpetrators.
- Examine services and agencies response to the welfare of any adults and children at risk of harm.
- Determine where there are any specific considerations around equality and diversity issues such as race, religion and belief and 'so-called' honour-based abuse.

Agency	Representative and role	
Bielec Consultancy Ltd	Katie Bielec – Chair and Author	
Colchester Community Safety	Melanie Rundle - Safety and Protection Manager	
Partnership Lead (CSP)	Andrew Tyrrell - Head of Public Protection	
	Paul Donaghy - Licensing, Community Safety & Safeguarding Manager	
SETDAB	Emma Tulip-Betts – Specialist Wellbeing & Public Health Officer	
SETDAB	Tasmin Brindley – Domestic Abuse Support Officer	
Essex Police	DS Bed Pedro Anido - A/Detective Inspector - Head of Operational	
	Development within the Strategic Vulnerability Centre	
NHS Suffolk and North-East Essex ICB	Jane Whitington - Designated Nurse Safeguarding Adults	
University of Suffolk	Fiona Fisk - Academic Registrar and Director of Student Life and	
	Registry Services	
University of Suffolk	Chantalle Hawley - Assistant Director, Student Life	
Changing Pathways	Ranjit Sindhar- BAME Specialist	
Essex Partnership University	Tendayi Musundire - Head of Safeguarding	
Foundation Trust (EPUT)		
Essex Children's Safeguarding Board	Louise McSpadden - Service Manager Lead for Safeguarding	
Essex Adult Safeguarding Board	Elaine Oxley - Director of ASC Safeguarding and Quality Assurance	
Next Chapter (Domestic Abuse Service)	Ruth Cherry-Galal – Independent Domestic Violence Advisor (IDVA)	
	Manager	
Alpha Vesta	Lucy Whittaker- CEO	

Appendix 2 – Panel Representation

Appendix 3 – Reference list

https://safelives.org.uk/sites/default/files/resources/Dash%20risk%20checklist%20quick%20start%20guidance %20FINAL 1.pdf?msclkid=770463f4ceac11ec8f0466908e13260a https://www.gov.uk/government/publications/revised-statutory-guidance-for-the-conduct-of-domestichomicide-reviews https://www.gov.uk/government/publications/the-domestic-violence-crime-and-victims-act-2004 https://www.gov.uk/guidance/equality-act-2010-guidance https://safelives.org.uk/policy-evidence/about-domestic-abuse/who-are-victims-domestic-abuse https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/domesticabusevictimchara cteristicsenglandandwales/yearendingmarch2022 https://setdab.org/ https://culturalatlas.sbs.com.au/turkish-culture/turkish-culture-family https://culturalatlas.sbs.com.au/turkish-culture/italian-culture-family https://culturalatlas.sbs.com.au/italian-culture/italian-culture-family https://www.eida.org.uk/resources/developing-response-perpetrators-domestic-abuse https://avaproject.org.uk/wp-content/uploads/2021/10/Literature-Review-Menopause-and-DA-1.pdf