## John - DHR - Summary, Key Issues and Recommendations

John, aged 70, was killed by his wife Margaret, aged 64, in December 2023 after 47 years of marriage. There was no known history of domestic abuse prior to the homicide. Margaret admitted responsibility and was convicted of manslaughter by diminished responsibility, receiving a hospital order. The review found minimal agency involvement with the couple before the incident, despite indicators such as mental health concerns, chronic illness, and alcohol misuse.

## **Key Issues**

- **Limited Visibility**: Both John and Margaret were largely "under the radar" of domestic abuse services; professionals focused on presenting symptoms without exploring underlying issues.
- **Missed Opportunities**: Health professionals did not apply professional curiosity or NICE guidance when indicators such as depression, anxiety, and alcohol misuse were present.
- Older Victims & Gender: Domestic abuse among older people is often overlooked; male victims face additional barriers to disclosure and support.
- **Employer Role**: Margaret's employer had a domestic abuse policy but lacked best-practice alignment and awareness of potential perpetrator concerns.
- **Community Awareness**: Friends and family were unaware of how to respond to concerns; older victims may not identify abuse or know where to seek help.
- COVID-19 Impact: Isolation and remote consultations reduced opportunities for disclosure and assessment.

## Recommendations

- Awareness for Older Victims: Enhance visibility of domestic abuse support for older people in community settings (e.g., GP surgeries, public spaces).
- **Support for Friends & Family**: Clarify pathways for those concerned about abuse, including carers and older male victims.
- **Employer Policy Review**: Update workplace domestic abuse policies to align with best practice and include support for those concerned about harmful behaviours.
- Training for Health Professionals: Incorporate this case as a learning example; embed NICE guidance and encourage "Think Family" approaches when mental health or substance misuse is disclosed.
- Routine Enquiry & Professional Curiosity: Train clinicians to safely ask about domestic abuse during consultations and apply Making Every Contact Count principles.
- **Referral Pathways**: Ensure clear signposting to MARAC, IDVA, and specialist services for male victims and older adults.