

A PERFECT STORM

The impact of the Covid-19 pandemic on domestic abuse survivors and the services supporting them



women's aid
until women & children are safe

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For help and support, you can access Women's Aid's direct services, including our **Live Chat**, the **Survivors' Forum** and the **Survivor's Handbook**, at www.womensaid.org.uk/information-support

Women's Aid is the national charity working to end domestic abuse against women and children. Over the past 45 years, Women's Aid has been at the forefront of shaping and coordinating responses to domestic abuse through practice, research and policy. We empower survivors by keeping their voices at the heart of our work, working with and for women and children by listening to them and responding to their needs.

We are a federation of nearly 180 organisations which provide just under 300 local lifesaving services to women and children across the country. We provide expert training, qualifications and consultancy to a range of agencies and professionals working with survivors or commissioning domestic abuse services, and award a National Quality Mark for services which meet our quality standards. We hold the largest national dataset on domestic abuse, and use research and evidence to inform all of our work. Our campaigns achieve change in policy, practice and awareness, encouraging healthy relationships and helping to build a future where domestic abuse is no longer tolerated.

Our support services, which include our Live Chat Helpline, the Survivors' Forum, the No Woman Turned Away Project, the Survivor's Handbook, Love Respect (our dedicated website for young people in their first relationships), the national Domestic Abuse Directory and our advocacy projects, help thousands of women and children every year.

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Introduction

At the end of February 2020, authorities in the UK confirmed that the first case of the Covid-19 virus had been transmitted inside the country. By the 5th June 2020, the UK Covid-19 death toll had surpassed 40,000. Measures to control the spread of the virus and ensure that the NHS was able to cope with demand came into force in March 2020. On the 16th March, people were asked to work from home where they could; on the 20th March, schools were closed and on the 23rd March, a televised address to the nation by Prime Minister Boris Johnson put the country into 'lockdown'. We were instructed that we could only go outside to buy food, to exercise once a day, or to go to work (if we absolutely could not work from home). We were told that fines could be imposed for failure to comply with these new measures. The government began to ease lockdown measures at the end of May but some restrictions remain in place at the time of writing.

Being in lockdown meant being confined to our homes, with those in our household, almost 24 hours a day. Women's Aid knows that home is not a safe place for many women and children and we knew that when the government announced lockdown this would have a specific negative impact on many women and children who were experiencing, or who had experienced, domestic abuse.

Covid-19 does not cause domestic abuse, only abusers are responsible for their actions. However, the pandemic does threaten to escalate abuse and close down routes to safety for women to escape. It has put the spotlight on an existing crisis, which can no longer be ignored. Since the start of the pandemic Women's Aid has assessed and monitored the impact of Covid-19 on survivors¹ and the domestic abuse services supporting them. This

report builds on existing briefings we have published (Women's Aid 2020A, Women's Aid 2020B and Women's Aid 2020C) and represents the results of this body of work up to the start of August 2020. We will continue to monitor the impact of Covid-19 into the future.

Part 1 of this report looks at what survivors have told us about how the pandemic has affected perpetrator behaviour and their experiences of domestic abuse. This includes how lockdown measures have affected their ability to access support, both from specialist domestic abuse services and their informal support networks such as friends and family.

We know that children in households where there is domestic abuse do not just witness this abuse, they experience it in a very real way and the impacts can last into adulthood. Part 2 of this report looks at the specific impact the pandemic has had on child survivors.

To understand the choices available to women and children who are living with the trauma of domestic abuse during the Covid-19 pandemic, we need to know how the virus and lockdown measures have affected the specialist domestic abuse support sector. Part 3 of this report looks at what domestic abuse service providers have told us about the many different ways the pandemic has affected provision. This includes the impact the sector has seen on funding and sustainability; staff welfare; demand for and availability of services and the impact further down the line on demand and funding.

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1 For the purpose of this report we use the term 'survivor' to refer to women who are experiencing or have experienced domestic abuse.

Methodology

This report presents findings from the first phase of a Women's Aid research project exploring the impact of Covid-19 on experiences of domestic abuse for adult and child survivors and the specialist domestic services supporting them. We look at the period from the start of lockdown measures in March 2020 to the closure of our most recent surveys in June/July 2020.

This research poses the following questions:

- ▶ In what ways have abusers used the Covid-19 pandemic as a tool for domestic abuse?
- ▶ In what ways have the choices and needs of women experiencing domestic abuse been impacted by Covid-19?
- ▶ In what ways has the Covid-19 pandemic affected the specialist domestic abuse support sector?

For the purposes of this report we refer to the period from 23rd March as 'lockdown' and in some cases refer specifically to the 'full lockdown period' as the time when full measures were in place from 23rd March to 31st May 2020. Appendix 1 to this report gives a fuller timeline of the pandemic in the UK which is based on a more detailed, global, timeline compiled by the British Foreign Policy Group (<https://bfpgrp.co.uk/2020/04/covid-19-timeline/>).

Women's Aid's research into the Covid-19 pandemic to date does not fully capture the experiences of marginalised women, the disproportionate impact of Covid-19 on them and the role of structural inequalities and institutional racism in this. Women's Aid would

like to acknowledge the work done by Imkaan and other specialists in the field looking at the impact of Covid-19 on the experiences of Black and minoritised women, disabled women and other marginalised groups. The growing evidence base which looks to understand the impact of Covid-19 includes the following work, which is referenced in this report (see references for full details on how to find):

- ▶ *The Impact of the Two Pandemics: VAWG and COVID-19 on Black and Minoritised Women and Girls*. Imkaan, May 2020.
- ▶ *Over-Exposed and Under-Protected The Devastating Impact of COVID-19 on Black and Minority Ethnic Communities in Great Britain*. Runnymede, August 2020
- ▶ *Disabled women and Covid-19*. The Fawcett Society, May 2020.
- ▶ *The Impact of COVID 19 on Disabled Women from Sisters of Frida*. Sisters of Frida, April 2020.

The survivor-focused element of this research is based, in large part, on the findings of two surveys, which were shared through online fora. As a result, we are aware that the sample is not fully representative of those experiencing domestic abuse during the lockdown as participation was reliant on women being able to access the internet safely.

As part of this research project we used a mixture of the data sources described **on the next page**.

1. Our existing data sources:

- ▶ **Routes to Support:** the UK-Wide directory of violence against women and girls services, run in partnership by Women's Aid Federation of England, Women's Aid Federation of Northern Ireland, Scottish Women's Aid and Welsh Women's Aid www.womensaid.org.uk/routes-to-support/
- ▶ **On Track:** The Women's Aid's outcomes monitoring and case management system www.womensaid.org.uk/routes-to-support/

2. A thematic analysis of trends

These were trends reported to our direct services through anonymous data on survivors' experiences of domestic abuse related to

Covid-19, recorded by support workers at Women's Aid Direct Services (thematic analysis of trends).

3. Responses from five specially designed surveys

- ▶ initial survey of providers in April which covered the period from the start of the pandemic to 6th April (April provider survey);
- ▶ initial survey of survivors in April which covered the period from the start of the pandemic to 19th April (April survivor survey);
- ▶ a survey of community ambassadors in May;
- ▶ follow up survey of providers in June (June provider survey)
- ▶ follow up survey of survivors in June (June survivor survey)

For a full breakdown of the different data sources used see Appendix 2. This report focuses on new findings from the surveys conducted in June and the thematic analysis of trends, drawing on this plus our other data to assess what we know about the impact of Covid-19 on survivors and services to date.

Summary

Domestic abuse has got worse during the pandemic

- ▶ Two-thirds of survivors identifying as currently experiencing abuse (66.7%, 46 out of 69 answering the question) told us that their abuser had started using lockdown restrictions or the Covid-19 virus and its consequences as part of the abuse. (Women's Aid June Survivor Survey)
- ▶ Over half of survivors identifying as currently experiencing abuse (52.2%, 36 out of 69 answering questions) experienced deteriorating mental health which left them feeling less able to cope with abuse. (Women's Aid June Survivor Survey)
- ▶ Over half of survivors who had experienced abuse in the past (53.3%, 98 out of 184), said that the pandemic had triggered memories of abuse and affected their mental health. (Women's Aid June Survivor Survey)
- ▶ Women reported that the abuse they experienced got worse during the pandemic. This finding was especially true for those women living with their abuser. Of this group, 61.3% (19 out of 31) reported worsening abuse. (Women's Aid June Survivor Survey)

Access to escape and support networks was restricted

- ▶ Lockdown restrictions and the fear of spreading the Covid-19 virus made it more difficult for women to seek support or leave their abuser during lockdown. Over three quarters of survivors (78.3%, 36 out of 46) of those living with an abuser said they felt they could not leave or get away because of the pandemic. (Women's Aid April Survivor Survey)

Child survivors also experienced worsening abuse during lockdown.

- ▶ Half (53.1%, 17 out of 32) of the survivors with children who were currently experiencing domestic abuse told us that their children have witnessed more abuse towards them, and over one third (37.5%, 12 out of 32) said their abuser had shown an increase in abusive behaviour directed towards their children. (Women's Aid April Survivor Survey)

Services have seen a mixed impact on demand for services and expect to see a spike in demand in the future

- ▶ In spite of the restrictions women faced in accessing support during lockdown, most services have seen increased demand. Many have seen the impact of the pandemic on women's access to other support services such as homelessness or mental health. (Women's Aid June Provider Survey)
- ▶ Of the 30 respondents who answered questions about demand for their services as lockdown is eased, all indicated they expected to see an increase in demand for their services in either the next six months or between six months and a year from now. (Women's Aid June Provider Survey)

Availability of refuge spaces has been reduced during the pandemic

The full lockdown period, from 23rd March to 31st May 2020, saw a 42% reduction in the number of refuge vacancies added to the UK-wide Routes to Support database compared to the same period in 2019. Reasons for this decrease included:

- ▶ being unable to find move-on accommodation for women during the pandemic;
- ▶ being unable to accept new referrals due to staffing capacity;
- ▶ having to reduce the number of women/families in the refuge to meet government guidance;
- ▶ concerns over managing the spread of the virus in communal accommodation;
- ▶ lack of personal protective equipment (PPE); and
- ▶ reduced/lack of access to interpreters to support women who need them.

Support services are facing funding challenges

- ▶ In spite of short term crisis funding made available during the pandemic and the fact that most of our respondents had received this, less than half (19 out of 40) said they had experienced an overall increase in funding/income during the pandemic. (Women's Aid June Provider Survey)

Services are finding new ways of working with survivors

- ▶ Community-based support in particular has been impacted by the need to change their ways of working and find temporary alternatives to face-to-face working. Many are now offering online or telephone support and delivering remotely. This brings both opportunity to reach women who find it difficult to attend session in person, and challenges for staff working remotely during the pandemic, who are "...living at work rather than working from home" meaning an increased potential for vicarious trauma as a result. (Women's Aid June Provider Survey)

Community is increasingly important to survivors

- ▶ Women's Aid's community ambassadors felt that public awareness of domestic abuse had increased during this time, with 63% (of 32 ambassadors responding) reporting they had held more conversations with community members about domestic abuse. (Women's Aid Ambassador Survey)
- ▶ Although many (44% of 32) ambassadors had been less able to speak to survivors, two-thirds (66% of 32) of responding ambassadors had shared information or signposted survivors to support since the government lockdown. (Women's Aid Ambassador Survey)
- ▶ 34.3% of survivors reported that they had approached friends and family for support during the pandemic, although, almost a third (31.9%, rising to 32.3% amongst those who were living with their abuser) reported that friends and family were unable to help them leave due to lockdown restrictions. (Women's Aid June Survivor Survey)

Part 1: Impact of Covid-19 on survivors' experiences of domestic abuse

Domestic abuse got worse during the pandemic

As we have said in the introduction to this report, Covid-19 does not cause domestic abuse. However, it does intensify existing abuse and reduces options for escape. Women's Aid's April survivor survey at the start of lockdown found that, for many, the behaviour of their abuser had already gotten worse. Out of 46 survivors responding, over three-quarters (76.1%, 35 out of 46) reported having to spend more time with their abuser and 71.7% (33 out of 46) reported that

their abuser had more control over their life (Women's Aid, 2020A).

This pattern has continued through lockdown. When Women's Aid carried out the June survivor survey, we found that the pandemic has had a huge impact on their experiences of domestic abuse. Over 90% of respondents who identified as currently experiencing domestic abuse in this survey said that the Covid-19 pandemic affected their experiences in at least one way, as shown in **Table 1**.

Table 1: Impact of Covid-19 on experiences of abuse for women currently experiencing abuse (June survivor survey)

Statement	% all answering (69)	% those living with abuser (31)
Covid-19 impacted experiences of abuse in one or more ways	91.3% (63)	93.5% (29)
Since Covid-19:		
▶ The violence/abuse has got worse	50.7% (35)	61.3% (19)
▶ I have felt more afraid during lockdown	52.2% (36)	54.8% (17)
▶ I have felt that I have no-one to turn to for help during lockdown	58.0% (40)	67.7% (21)
▶ Friends and family cannot help me leave due to lockdown restrictions	31.9% (22)	32.3% (10)
▶ I am afraid of living in a refuge during a pandemic	21.7% (15)	35.5% (11)
▶ I feel I can't leave/get away from my partner/ex-partner because of the pandemic	30.4% (21)	48.4% (15)
▶ I haven't been able to access domestic abuse support	15.9% (11)	25.8% (8)
▶ Other impact (please specify)	18.8% (13)	9.7% (3)
The pandemic has not had a particular impact on my experiences of abuse/violence	8.7% (6)	6.5% (2)
Not answered question	(5)	(10)

Women living with their abuser

Throughout the pandemic survivors have reported abuse worsening, and this has particularly been true for those living with their abuser. In the June survivor survey, we asked in more detail about experiences of fear, isolation and the impact on survivors' mental health. We found that for those living with the abuser (see **Table 1**):

- ▶ 61.3% reported worsening abuse;
- ▶ 54.8% said that they had felt more afraid since the start of lockdown "I feel on edge the whole time and want to run away"; and
- ▶ 67.7% saying they felt they had no-one to turn to "I'm lonely, feel isolated, like a sitting duck."

Some survivors in this group said they were less able to seek help due to spending increased time with their abuser "I have nobody to tell what I am going through I am desperate to get out but he is always home". Others found that their support networks were less able to help them due to concerns around the Covid-19 virus or the need to adhere to lockdown restrictions. Almost a third of respondents in this group (32.3%) reported that friends and family were unable to help them leave due to lockdown restrictions. One survivor described her situation "... when he had been abusive no-one would come and help due to the Covid-19. Even when the police said it's ok for someone to come to sit with me no-one would come."

Impact of deteriorating mental health/wellness

As shown in **Table 2**, 53.0% of all our respondents said that the impact of the pandemic on their mental health had worsened their experiences of abuse. This included 98 women who had experienced abuse in the past, and 36 of those women currently experiencing abuse who said that the pandemic had a bad effect on their mental health that made them feel less able to cope with abuse. For example one survivor told us "lockdown has made it harder to have hope for the future and get support," whilst another described how, "I

haven't been able to get any space whatsoever and I am completely at my wits end."

Women's Aid researchers carried out a thematic analysis of trends (see Appendix 2 for methodology), which showed that lockdown restrictions put women and children at further risk, and in many cases left them trapped with their abuser. It was clear from many of the experiences recorded that women were experiencing increased fear and anxiety as a result of these circumstances. Several women reported they were suicidal due to the situation.

Table 2: Impact on mental health (June survivor survey)

Statement	%women currently experiencing abuse (69)	% women who experienced abuse in past (184)	% women responding to either question (253)
The pandemic has had a bad effect on my mental health and I feel less able to cope with abuse	52.2% (36)		
The pandemic has triggered memories of abuse and affected my mental health.		53.3% (98)	
Yes to either question above			53.0% (134)

Bringing back memories of past abuse

The April survivor survey (Women’s Aid 2020A) told us that the pandemic affected women who had thought their experiences of domestic abuse were in the past, with 13.7% of this group saying they had experienced worsening abuse since it began. The June survivor survey further explored what was happening to women who identified as having experienced domestic abuse in the past and 184 survivors in this group told us about how lockdown had affected them. Over half, 53.3% (98), said that the pandemic had triggered memories of abuse and affected their mental health.

“Living with my ex felt like being imprisoned in my home, this lockdown has brought back feelings of fear, loneliness, isolation.”

“Not being able to go to work or see friends, has made me feel trapped again”

For some survivors, wearing face coverings can recall past abuse, as described in a press release by Women’s Aid in May 2020:

“Breathing hot air, not being able to breathe freely, or feeling smothered may re-awake panic and fear in the survivor that have lain dormant for years. This triggering of past trauma can be deeply disturbing.”

The government exemptions list published in May 2020 confirms that you are not required to wear a mask if you, “cannot put on, wear, or remove a face covering without severe distress,” and Women’s Aid have issued advice on wearing face coverings for survivors.²

Most of the women in this group (67.4%) said that Covid-19 affected their experiences of abuse in one or more way/s (see **Table 3**). For some (12.5%) the pandemic led to their abuser making contact with them again “...I have a restraining order and he’s not been in contact at all in [number of] years but during the pandemic he has done that.”

Certainly many of them (23.4%) felt more afraid during lockdown, “I feel more anxious about

Table 3: Impact of Covid-19 on women who experienced abuse in the past

Statement	% who answered (184)
Covid-19 impacted experiences of abuse in one or more way/s	67.4% (124)
▶ The pandemic has triggered memories of abuse and affected my mental health	53.3% (98)
▶ I have felt more afraid during lockdown	23.4% (43)
▶ I have felt that I have no-one to turn to for help during lockdown	14.1% (26)
▶ My abuser(s) has/have got back in touch during the pandemic	12.5% (23)
▶ I have not been able to access domestic abuse support	7.1%
▶ My abuser(s) won’t let me see my children and uses lockdown measures as the excuse	1.1%
▶ Other impact (please specify)	14.7%
None of the above	33.2%
No answer	4.3%

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2 <https://www.womensaid.org.uk/covid-19-domestic-abuse-survivors-experiencing-severe-distress-when-wearing-a-mask-are-exempt/>

going out and more worried he could find me as my normal routine has been taken away. I feel isolated”.

Others (14.1%) felt that they had no one to turn to for help “If the abuse would’ve started again,

and it was a possibility, I would’ve had nowhere to go. I have no family here. I was very, very afraid for a while.”

Perpetrators use Covid-19 to control and manipulate

Perpetrators of domestic abuse very quickly learnt to use the pandemic as a tool for enacting coercive and controlling behaviour³. In the April survivor survey, women reported that their abusers had more control since the start of the pandemic and that new perpetrator behaviours included blaming survivors for the economic impact of Covid-19 and making them feel bad for being scared or worried about the virus.

Our thematic analysis of trends showed that perpetrators’ use of lockdown restrictions to control and coerce women was a key theme in many survivors’ experiences, for example their abuser preventing them from leaving the house. Survivors also talked about perpetrators disregarding their concerns about the virus and deliberately ignoring restrictions to increase fear and anxiety, in one case making specific threats the woman would die from the virus and in another spitting in the woman’s face. The risks around these behaviours and their impact on women understandably increased if she or her children were in a vulnerable health category.

The June survivor survey explored the ways in which abusers used both the lockdown restrictions and the Covid-19 virus itself as a weapon to control and manipulate. As shown in **Table 4**, 66.7% of women responding who were currently experiencing abuse said that Covid-19 had been used as part of the abuse they suffered in one or more ways. The survey questions explored the nature of the behaviours

abusers were displaying and the findings, shown in full in **Table 4**, show three broad themes.

Taking advantage of isolation and lockdown restrictions

Stories survivors told us in the June survivor survey included their abuser using lockdown restrictions to exert control: “Increased monitoring and surveillance of behaviours and online activity”. This may be due to increased opportunity for contact through children, increased time together or from using lockdown restrictions to control. For example one respondent said: “He knows I’m home all the time so is contacting me constantly and questioning why I would wear makeup or nice clothes...” and another said: “I’m shielding and [my abuser] uses not getting me food or medication to control me”.

Tactics used by perpetrators included using lockdown restrictions as an excuse to move back in to the victim-survivor’s home and refusing to leave. One survivor explains: “[my abuser] [r]efused to leave because of lockdown (can’t go to parents or anywhere) and finances (his - I have a well paid job but he lost his, says can’t afford housing)”.

The loss of respite through time apart was also something survivors and their children felt keenly: “Before when he used to get angry he’d go for a walk to calm down. But then when they

3 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, <https://www.womensaid.org.uk/information-support/what-is-domestic-abuse/coercive-control/>.

brought in only one exercise per day he couldn't go unless [the children and I] stayed in all day [as both parents were needed to take the children out]..."

Some talked about their abuser taking advantage of the reduced support networks available to them to increase control.

"I feel that my ex-partner has used his knowledge of my reduced support network to escalate his emotionally abusive & controlling behaviour - thinking that I have no one to turn to... the use of emotional blackmail and put-downs. He has refused to buy essentials for our daughter ... using the pandemic as an excuse for not being able to access shopping...He has questioned my decisions and whether I am following social distancing rules, in an aggressive way."

The Covid-19 virus as a tool to abuse

Other tactics perpetrators employed included using the virus itself as a threat, coughing and spitting at the survivor or threatening to do so. Some reported their abuser had allowed others into the house during lockdown. As the results in **Table 4** show, 37.7% of respondents to the question said their abuser refused to take precautions to stop the spread of the virus. This included not adhering to precautions such as social isolation/distancing or handwashing, which puts the survivor and any children in danger. For example:

"Refused to take virus seriously... Not getting kids to wash hands when they came home, taking them on bus unnecessarily and telling children I was paranoid etc."

Table 4: Covid-19 used by perpetrators as a tool for abuse (June survivor survey)

Statement	% answered question (69)
Covid-19 used as part of abuse in one or more way/s	66.7% (46)
My abuser:	
▶ has come to live with me saying he has to because of the lockdown measures.	7.2% (5)
▶ has coughed/spat at me	5.8% (4)
▶ has threatened to cough/spit at me	4.3% (3)
▶ will not let me work during the pandemic	5.8% (4)
▶ refuses to take precautions to stop the spread of the virus (e.g. not social isolation/distancing or handwashing, which puts me in danger)	37.7% (26)
▶ allows other people into our house despite the lockdown	7.2% (5)
▶ makes us follow very strict isolation rules (e.g. not allowing me to take daily exercise, not allowing me to go to the shops to buy essentials)	10.1% (7)
▶ has used lockdown restrictions to try to stop me leaving	10.1% (7)
Other (please specify)	27.5% (19)
None of these	33.3% (23)
Not answered	(5)

“...he gets angry if I ask him to wash his hands after being out, etc. When he’s drunk he won’t follow hygiene practices like handwashing.”

“He has been seeing his [relative who works in a job with high risk of exposure] the whole way through and not social distancing, putting us at risk...He just tells me I’m stupid for worrying and that I’m nagging him and treating him like a child.”

Conversely, others (10.1%) said that their abuser had enforced very strict isolation rules on family members or was enforcing self-imposed rules.

“...If I want to go and exercise he has been telling me he wants to exercise the times I’ve said I want to go. I’ve stood my ground and gone on my exercise anyway and he accuses me of stopping him going and turns it round on me. ...”

The economic impact of Covid-19 as a tool to abuse

Our thematic analysis of trends showed that survivors reported economic impacts of the pandemic including their abuser using a lack of employment/finances to move back into the family home. Some survivors were having to work due to poverty and feared becoming ill and children going to the perpetrator.

Abusers also used the economic impact of Covid-19, including loss of employment and financial consequences, as a tool for abuse. Our April survey (Women’s Aid 2020A) showed that almost a third (30.4%) of respondents reported their abuser blaming them for the economic impact of Covid-19 on the household. Comments in the June survey showed these behaviours continuing, as one response explained: “My husband has been on furlough from work and the situation is getting worse because he blames [me] for the cut in his wage.”

Additional impact of structural inequalities on marginalised groups of women

The Covid-19 pandemic has highlighted the significant impact of power dynamics in domestic abuse; we see abusers adapting both lockdown restrictions and the virus itself to assert control. This analysis cannot ignore the wider implications of unequal distribution of power in UK society. The pandemic has shone a light on both the existence of structural inequalities in the UK and the impact these inequalities have on the experiences of the people they discriminate against. Calls to centre the experiences of Black and minoritised women and disabled women in responses to Covid-19 and domestic abuse must be heard.

Research carried out since the start of the pandemic has shown that Covid-19 and associated lockdown measures have

disproportionately impacted women. Effects include: unequal distribution of parenting responsibilities (Andrew et al, 2020); women’s higher representation amongst areas of the workforce at high risk of exposure (The Fawcett Society, 2020A); and inequalities in government salary retention schemes (Women’s Budget Group, 2020).

Sector experts have released reports looking at the disproportionate impact of Covid-19 on Black and minoritised and disabled women during the pandemic and highlight the role played by structural inequalities. We have referenced reports by Runnymede, Imkaan, The Fawcett Society and Sisters of Frida here and more research is available. To understand the impact of Covid-19 on domestic abuse we

recommend reading these works alongside this report, please see the references section for details.

Black and minoritised women

Covid-19 has disproportionately affected Black and minoritised communities (e.g. ONS, 2020; Runymede, 2020). Survey results released by Runnymede in August 2020, [*Overexposed and Under-Protected – The Devastating Impact of COVID-19 on Black and Minority Ethnic Communities in Great Britain*](#), show that Black and minoritised groups have increased exposure to Covid-19. It finds that: “they are more likely to be working outside their home, more likely to be using public transport, more likely to be working in key worker roles, less likely to be protected with PPE and more likely to live in multigenerational, overcrowded housing, so much less able to self-isolate and shield.”

In May 2020, Imkaan released a position paper, [*The Impact of the Two Pandemics: VAWG and COVID-19 on Black and Minoritised Women and Girls*](#) (Imkaan, 2020), which finds that violence against women and girls (VAWG) and Covid-19 are intersecting with racial inequality. The paper highlights that “During the two pandemics [VAWG and Covid-19], violence against women and girls is increased but for Black and minoritised women and girls, racialised discrimination and the disproportionate impact of structural inequalities also become exacerbated”.

Disabled women

Women with a long-term illness or disability were more likely to be victims of any domestic abuse in the year ending March 2019 (13.8%), compared with those without a long-term illness or disability (6.4%) (ONS, 2019). Their disability or healthcare needs can be used by perpetrators who also act as “carers” as part of the abuse. In the April survivor survey, Women’s Aid heard from four women that their abuser had withheld medication from them and from three that their abuser had blamed them for being unable to get hold of required medication.

“I am reliant upon my abuser to get food and medication as shielding for 12 weeks. This is being used against me.”

Sisters of Frida, an unfunded disabled women’s collective, released a report in April 2020, [*The Impact of COVID 19 on Disabled Women*](#). Also in April 2020, the Fawcett Society published a briefing, [*Disabled women and Covid-19*](#), jointly with Women’s Budget Group, Queen Mary University of London and the London School of Economics. “Disabled women are already known to be at higher risk of domestic abuse, and our research suggests that household relationships are under additional strain for many of them” (Fawcett Society, 2020)

These reports highlight the impact of Covid-19 on disabled women’s experiences including access to health and medical care, social isolation and the impact on their healthcare and employment rights. They also highlight that women who are reliant on support through social care are disproportionately impacted by the challenges that sector has faced during the pandemic, such as staff shortages and lack of PPE.

Impact of lockdown restrictions on freedom to leave or seek help

Our thematic analysis of trends showed that survivors often had to share a home with the perpetrator, with many survivors being unable to act on plans to leave due to circumstances related to restrictions. A lack of knowledge about options for leaving during this time was a clear theme, with some survivors being unsure whether they would be able to access support services or unclear about whether government guidelines would allow them to do so. In some cases, perpetrators threatened to contact the police if women tried to leave.

Our April survivor survey, during the full lockdown period when more restrictions on movement were in place, showed a significant impact on women's freedom to leave or seek help. Over three quarters (78.3%, 36 out of 46) of women experiencing abuse at the time told us they thought Covid-19 made it harder for them to escape abuse (Women's Aid, 2020A).

Our June survivor survey was circulated when restrictions had started to lift and government advice had been issued that household isolation instructions would not apply if you need to leave your home to escape domestic abuse. However, we found that the lack of freedom to leave or seek help was still a major issue for survivors and almost half of those living with their abuser still felt they could not leave because of the pandemic.

One in ten (10.1%) of survivors responding to the question on how Covid-19 was used in abuse (see **Table 4**) told us that their abuser had actively used lockdown restrictions to stop them from leaving. When asked about the impact of the pandemic on housing choices (see **Table 5**), one-fifth (20.3%) of those responding said that they had tried to leave during the pandemic but had been unable to access housing or refuge space. This figure should not be interpreted as a full representation of the level of unmet need for refuge space during the pandemic as our sample is not fully representative (see methodology).

Women living with their abuser

"I want to move as I'm scared of what he will do if I stay here but I don't know who to turn to"

This impact was most obvious within the group of respondents still living with their abuser as shown in **Table 1**. Of these women 61.3% (19) said, the abuse/violence had got worse since the pandemic, yet:

- ▶ 48.4% felt they couldn't leave or get away because of the pandemic;
- ▶ 67.7% felt they had no-one to turn to;
- ▶ 35.5% felt afraid of going to a refuge service during the pandemic; and
- ▶ 25.8% had tried unsuccessfully to access domestic abuse support.

"I am working from home and my partner is a key worker but been home all the time I can't get out to view flats and leave"

Survivors explained how the pandemic had made it more difficult for them to leave their abuser. For many this was a result of increased time with the abuser or not being able to leave the house. One survivor explained that it was "Hard to get any privacy or time to make calls to anyone who can help. Can't physically leave the house ... he doesn't have any routine."

Some survivors saw increased challenges around moving home at all, "Leaving hasn't been something I can consider because of the pandemic. Things are escalating and I'm sure it's going to continue getting worse."

Others talked about their abuser being less able to leave due to the pandemic. For example:

"My partner was violent just before lockdown but because of social distancing I couldn't get him to go to his parents as he and his family said they were vulnerable."

“My partner would have nowhere to go if I were to make him leave.”

Impact on housing choices

For some their negative experiences of housing professionals affected their ability to move house, “The council have been terrible during lockdown and have not communicated adequately...” and “Council won’t help unless you tell them then they want police reports or no priority was told a 10 year wait for council house”

Two women (see **Table 5**) said they had been homeless during the pandemic, one of whom eventually found a refuge space but had to travel 600 miles. We explore the impact of the pandemic on the availability of refuge spaces further in Part 3 of this report. We know that a lack of housing options can stop women from

being able to leave abusers (Women’s Aid, 2020E). These options have been even more restricted during lockdown.

The On Track case management system started collecting some additional data on the impact of Covid-19 on survivors’ experiences in May 2020⁴. The data showed that even some of those women who ultimately received support from services were prevented from accessing one or more housing type by their abusers during lockdown. As shown in **Table 6 (next page)**, 25.2% of the women in refuge services and 14.1% of those in community-based services said they were prevented from accessing housing in one or more of the options given.

Table 5: Impact of Covid-19 on housing choices (June survivor survey)

Statement	% answered question (68)
One or more impact on housing	39.7% (27)
I was not able to secure social housing during lockdown (run by the local authority or a housing association)	16.2% (11)
I was not able to find private renting accommodation during lockdown	13.2% (9)
I was not able to find a refuge space during lockdown	5.9% (4)
[Respondents selected at least one of the three above answers]	20.3% (14)
I wanted to 'sofa surf' but friends and family felt they could not let me do this during lockdown	5.9% (4)
I have been homeless during lockdown	2.9% (2)
There has been no impact on my experiences of housing	61.8% (42)
Other impact on housing - please give details below.	19.1% (13)
Not answered	(6)

4 Data collected by 70 organisations who ran refuge and community-based support services in May 2020. Based on the 3,319 survivors supported by them who had a Covid-19 form that had been filled in within their case file.

Table 6: Impact of lockdown on survivors' access to housing (On Track)

Statement	% women in refuge services	% women in community based services
Prevented from accessing housing in any of the following:	25.2% (179)	14.1% (378)
Prevented survivor from accessing other safe / move on accommodation	14.3% (102)	8.6% (230)
Prevented survivor from being able to stay with family / friends	12.7% (90)	5.1% (138)
Prevented survivor from accessing refuge	1.4% (10)	0.9% (25)
Prevented / delayed perpetrator leaving survivor's home	0.6% (4)	2.6% (71)
Number of women in sample (see Appendix 3)	(711)	(2,682)

Experiences of accessing support

Women responding to our June survivor survey talked about the challenges they faced accessing support during the pandemic. Almost half of respondents (40.7%) said they had not accessed any form of support during the pandemic (see **Table 7**). For some survivors, this may have been due to lockdown restrictions or the behaviour of their abuser. Increased time with the abuser prevented some from seeking support, "It was very very difficult to access anything while he was in the house. Only when he has gone visiting his family was I able to try and seek advice and speak out..." For some, fear of going into refuge during a pandemic was a factor and over a third (35.5%, see **Table 1**) of those living with an abuser said they felt this way, "I'm terrified of being offered only shared accommodation. I have germphobia even before the pandemic and also I've experienced abuse and violence from women as well as men. I'm frightened of sharing with people."

Alarmingly, some felt that they were not a priority during the pandemic with one

survivor writing "feel that I would be taking up someone's place who is experiencing abuse now..." and another that "I didn't contact support services as I thought other people would need the service more than myself."

For others, the abuser's control was stopping them from seeking help, for example by cutting off support networks "I have a very minimal support network as my husband cut me off from everyone"; monitoring and surveillance "Don't dare to contact anyone because he always listens and checks my phone" .

Over half of the women (59.3%) responding to the questions on support had reached out to at least one type of support during the pandemic, the largest group (34.3%) had sought support from friends and/or family, as shown in **Table 7**. This once again highlights the importance of these informal support networks to survivors and the added impact on those who do not have them.

Table 7: Accessing support during the pandemic (June survivor survey)

Type of support accessed	% of respondents to this question (236)
Contacted any support avenue	59.3% (140)
▶ Yes - contacting the National Domestic Abuse Helpline	6.8% (16)
▶ Yes – by contacting another domestic abuse helpline	4.7% (11)
▶ Yes – by contacting the Women’s Aid Live Chat service	5.1% (12)
▶ Yes – by contacting a local domestic abuse service	13.1% (31)
▶ Yes – by looking on the Women’s Aid website	23.3% (55)
▶ Yes – by looking on another domestic abuse website	9.7% (23)
▶ Yes – from a solicitor	13.1% (31)
▶ Yes - from a counsellor/therapist	19.1% (45)
▶ Yes – from the police	11.4% (27)
▶ Yes – from my housing provider	2.1% (5)
▶ Yes - from friends or family	34.3% (81)
▶ Yes - from my employer	5.5% (13)
▶ Yes - Other (please specify)	13.1% (31)
No - none of these	40.7% (96)
Did not answer	(30)

We asked respondents to tell us about what happened when they tried to get help or support and categorised the responses of the 133 women who described what they had experienced. Of these responses, 88 could be categorised as either positive or negative, these experiences are summarised here.

Positive and helpful experiences

Over a third of survivors (35.3%, 47 of 133) talked about positive and helpful experiences in their comments. These survivors had accessed support from specialist domestic abuse services (“As good as it’s always been the refuge does

amazing work”), legal help, help from NHS services and from their employers (“Fantastic. My line manager had daily online wellbeing checks last week and general catch ups”). They also talked about informal help from friends and family. They talked about support being available and people being very willing to help.

“Help from the domestic abuse services has been invaluable. The help from a local domestic abuse organisation is an absolute lifeline. I have begun the Freedom Programme online and this is great as I would have struggled with childcare without this option.”

Negative and/or disappointing experiences

Other survivors (30.8%, 41 of 133) wrote about negative or disappointing experiences of seeking support during the pandemic. Some talked about it being difficult to get through to busy specialist support helplines, "I rang many times before getting through on the helplines..." or difficulty getting a health or legal appointment, "...I managed to get a telephone appointment this week."

Others felt that they had received a slow response from professionals, "No one available due to excess demand and as my abuse was in the past, support is not deemed as necessary at the moment." Survivors noted that domestic abuse services had limited availability because they are so busy "They suggested contacting 111 about stalking etc but the phone lines are always busy." For others their negative experience was due to the limitations of telephone/online support "Difficult as it was telephone based and felt like I was being rushed" and "I rung Women's Aid and spoke to a lady a couple of times. But I feel like meeting in person is more beneficial for trying to cope and come to terms with abuse."

Some also wrote about friends and family not able to help during a pandemic "Everyone I speak to says he needs to go and they want to help me. But how can they during covid?" and "It's hard at the moment because no one can come to see me and I can't go see anyone."

The justice system

The thematic analysis of trends showed that some women reported they had received a negative response from the police, for example, not turning up when called or failing to take appropriate action such as removing the perpetrator. Some survivors also reported negative experiences with solicitors giving inappropriate advice, contributing to women's uncertainty about their options.

Amongst respondents to the June survivor survey, experiences of the justice system during lockdown were varied, of the 52 respondents who left details four described a positive experience "Again, fantastic. I had two telephone court 'appearances' which my solicitor talked me through beforehand." There were 19 negative experiences described which included delays and challenges with remote hearings, "Remote court hearing, heard his voice and froze unable to explain my concerns".

Of those women currently experiencing domestic abuse 17.6% (13 out of 74) reported one or more incidents to the police during lockdown. Some of the comments describing their experiences referred to lack of follow up from police or delays in arresting and charging, "The police investigation is ongoing, but there have been delays because of the virus. My ex was due to be questioned, but this hasn't happened yet". Others were critical of the level of understanding of domestic abuse shown in police responses, "...They made me feel like the criminal, asking why I haven't left, like it was my fault. No matter what he does to me now, I'll never ring them again."

A community response

During Covid-19, community dynamics have been critical with many people helping their neighbours and others in the community. In April 2020, Women’s Aid carried out a survey with Women’s Aid’s ‘Ask Me’ Community Ambassadors⁵ about the impact that they are seeing on survivors. They told us that:

- ▶ they felt domestic abuse was getting worse;
- ▶ survivors are needing to talk more because of feeling more isolated;
- ▶ survivors are more worried about coming forward; and
- ▶ survivors are prioritising keeping themselves/children safe from Covid-19 over leaving their abusive relationship.

Community Ambassadors also told us that survivors are finding it harder to access even informal support, and conversations with survivors had decreased for 44% of the 32 respondents. In spite of this, two thirds (66% of 32) of Community Ambassadors responding to this survey have shared information and/or signposted survivors to get support since the government lockdown.

Awareness of domestic abuse has been high profile during lockdown – our Ambassador survey showed that, whilst conversations with survivors had decreased, most Ambassadors (63% of 32) were having more conversations about domestic abuse since the government lockdown in their communities.

What the future holds for survivors

We asked respondents in our June survivor survey what they thought they would do after lockdown and received 196 responses to this question (see **Table 8** for breakdown). Almost a quarter of those responding said they intended to seek help after lockdown measures are fully lifted. Additionally, of those in the ‘other’ category, 20 expressed that they would be looking to seek help although not all had selected ‘I will seek support or help’. In total (allowing for duplication) 30.6% of all respondents indicated they would be seeking support after lockdown, supporting concerns by service providers about a spike in demand. This rose to 46.0% if we just looked at those women currently experiencing abuse who may present with more urgent support needs.

“He’ll go back to work so I will be able to leave, physically get myself and kids and [pets] out of the house to a place of safety.”

Some survivors responding to our June survivor survey talked about being able to find more support for their children once restrictions start to ease:

“Hopefully family members will be able to help look after my son with me so he can have some normality as I feel like I’m failing to protect him during covid. I had been able to protect him from most of his dad’s behaviour towards me before this...as we hardly saw him!”

.....

5 ‘Ask Me’ trains people to become Community Ambassadors who then work within their own communities to raise awareness of domestic abuse and challenge cultural acceptance, victim-blaming stereotypes and myths around domestic abuse; listen, believe and validate survivors’ experiences; and share information and signpost survivors to access support.

"I am looking forward to my daughter having a safe space to confide in school/ friends etc. as she only has me and has been warned against speaking to me about things that happens in my ex partners care which is really difficult for her"

Others did not feel that anything would improve for them after lockdown, with 52.6% of all survivors responding that they felt this way. Worryingly this included 16 women currently experiencing abuse who said that the abuse had got worse during lockdown.

Table 8: Survivors' plans post lockdown (June survivor survey)

	% current (of 63)	% in past (of 133)	% all responding (of 196)
Total showing intent to leave or seek support (see above)	46.0% (29)	23.3% (31)	30.6% (60)
I will seek support or help about domestic abuse	38.1% (24)	15.8% (21)	23.0% (45)
I will move in with friends or family to be away from the abuser(s)	9.5% (6)	3.0% (4)	5.1% (10)
I will try to find a place in a refuge service	3.2% (2)	0.0% (0)	1.0% (2)
I will try to access social housing to be away from the abuser(s)	12.7% (8)	4.5% (6)	7.1% (14)
Other (please specify)	34.9% (22)	36.8% (49)	36.2% (71)
I don't think anything will change for me after lockdown has been loosened	42.9% (27)	57.1% (76)	52.6% (103)
Did not respond	(11)	(59)	(70)

Part 2: Impact of Covid-19 on child survivors

The perpetration of domestic abuse in homes where there are children equates to harm against those children, even when the perpetrator is not physically harming the children directly. The types of harm caused include short- and long-term impact on both physical and emotional wellbeing (Mullender, A. et al, 2002. See especially Chapter 4). In our April survivor survey (Women's Aid 2020A) we explored the impact of Covid-19 on children living in homes where domestic abuse takes place. The experiences referred to in Part 2

of this report come from the experiences of 215 survivors responding to that survey who had children. Of these, 32 were experiencing domestic abuse at the time of responding and 183 had experienced it in the past.

Between them, the women had 378 children under 18 living with them. Of these children, 54 were living in households where domestic abuse was currently happening and 31 in households where the abuser was a full-time resident.

Child survivors' experiences of abuse have got worse

Of the 32 survivors with children who were currently experiencing domestic abuse, just over half (17) told us their children have witnessed more abuse towards them and over one third (12) told us their abuser had shown an increase in abusive behaviour directed towards their children (see **Table 9**).

"I have two small children ... They are experiencing more [abuse] as they are witnessing it more"

We also found that the children of survivors who had experienced abuse in the past were exposed to further abuse during the pandemic. Of the 183 survivors in this group, 18 women said their abuser has shown an increase in abuse directed towards their children and 16

women said their children had witnessed more abuse towards them (see **Table 9, next page**).

"[Covid-19] is getting used to financially abuse women who are out of the relationship, through child maintenance allowing reduced payments"

"Covid-19 also impacts those with historic abusive relationships where children were born. Now abusers can push/force phone calls and try to get video calls etc which isn't necessarily safe or wanted. 7 years later he doesn't know where we live but is trying all he can to see into our life and home, thinks he has a valid reason to even though he's the one who's cancelled contact."

Table 9: Impact of Covid-19 on children in households with domestic abuse (April survivor survey)

Statement	% current with children (32)	% past with children (183)	% all with children (215)
My children have witnessed more abuse towards me	53.1% (17)	8.7% (16)	15.3% (33)
My abuser has shown an increase in abusive behaviour directed towards my children	37.5% (12)	9.8% (18)	14.0% (30)
I feel scared that there may not be anyone to look after my children if I get ill	40.6% (13)	39.3% (72)	39.5% (85)
I feel scared that my children will be left alone with the abuser if I get ill	50.0% (16)	47.0% (86)	47.4% (102)
My children have had reduced access to support services	21.9% (7)	24.0% (44)	23.7% (51)
My children have felt isolated	37.5% (12)	30.1% (55)	31.2% (67)
My children are not able to attend school	59.4% (19)	41.0% (75)	43.7% (94)
Did not answer question	(0)	(0)	(0)

Survivors are worried about what will happen if they get ill

Survivors told us they were scared about what would happen to their children if they were unable to look after them due to illness. As shown in **Table 9**, all survivors were scared both that there would not be anyone to look after their children if they became ill (39.5%) and that their children would be left alone with the abuser if they were to become ill (47.4%).

One survivor with underlying health conditions said “My biggest concern is that my child may be given back to our abuser if I were to become seriously unwell with the virus or not survive...”

Covid-19 makes it harder for child survivors to access support

Of all survivors responding, 23.7% told us that their children have reduced access to support services and 31.2% said their children have felt isolated (see **Table 9**).

“My child is currently having play therapy which has been put on hold due to coronavirus lock down. She cannot have her type of therapy on the phone.”

“Definitely been harder on the older child. That child was about to start [specialist support] at school but not in school now. I have him down to go to [support centre] too but it’s not working now.”

How has Covid-19 impacted child contact arrangements?

A high volume of the experiences recorded for our thematic analysis of trends were around post-separation child contact issues, with this being the main issue many survivors were seeking support around. These issues were often around perpetrators pressuring women into facilitating contact even when this would breach restrictions and put women and children at increased risk of contracting the virus. There were also many examples of perpetrators using restrictions as an excuse not to return children or to restrict women’s access to their children.

In the April survivor survey, 167 women (including both those who are currently experiencing abuse and those who have experienced abuse in the past) who responded to our survey told us about their child contact arrangements. Of these survivors, 38.3% told us child contact arrangements have been used to further abuse and 34.1% told us they were concerned about the safety of child contact during this time (see **Table 10**).

“It is a nightmare. The government wants us to agree with the other parent, with an abuser this is easier said than done and causes further stress. I’m terrified of being taken back to court if I go against the court order.”

“My abuser is withholding our young child. In violation of our custody orders, I have had no contact with my child for weeks.”

Table 10: Impact of Covid-19 on child contact arrangements (April survivor survey)

Impact	% survivors with child contact arrangements (167)
Child contact arrangements have been used to further abuse	38.3% (64)
I am concerned about the safety of child contact during this time	34.1% (57)
I am unclear about what government guidance on child contact means for me	21.6% (36)
My ex-partner has requested increased contact	15.6% (26)
I have not been able to see my children	4.2% (7)
I have been pressured to agree to unsupervised contact due to closure of contact centres	1.8% (3)
None of these	40.1% (67)

Part 3: Impact of Covid-19 on specialist domestic abuse support sector

We have already seen that, even though abusers are using the pandemic to perpetrate domestic abuse, women and children are finding it harder to seek support. Many women have not been able to do so over recent months, due to either challenges from lockdown restrictions or their abuser actively preventing them from doing so. We have also seen that many women intend to seek support in the future as lockdown restrictions continue

to ease. Part 3 of this report explores how well resourced the sector will be to meet this demand by looking at the impact of Covid-19 on funding and sustainability, staffing, and demand for and availability of services. We also consider concerns and lessons for the future. See Imkaan, 2020 for a full analysis of the impact of Covid-19 on the “by and for” expert sector.

Funding and sustainability of domestic abuse support services

We know that the domestic abuse support sector was already suffering from a crisis in funding and demand at the start of the pandemic (e.g. Women’s Aid 2020D, Women’s Aid 2019A, Women’s Aid 2018) so this research project set out to establish in what ways the Covid-19 pandemic has affected the sustainability of the sector.

At the start of the pandemic Women’s Aid carried out a survey of domestic abuse support service providers (April provider survey, see Women’s Aid, 2020B). In this survey, providers expressed their concerns and 68.9% said they were concerned about the impact of the pandemic on future fundraising. This has been particularly true for the specialist “by and for” expert sector who were significantly less confident that their organisations could survive the Covid-19 crisis (Women’s Resource Centre, 2020).

Crisis funding

In response to these concerns, government made available a number of crisis funding pots during the pandemic. Local services submitted bids to the Ministry for Housing, Communities and Local Government (MHCLG) and the Ministry of Justice (MoJ) for a share of their respective funding pots for refuge services and community-based support.

Women’s Aid’s June provider survey found that a number of services responding had successfully applied for these funding pots (34 out of 40 responding). Several respondents had positive experiences, for example saying that they had received good support, or that the process had been quite straightforward. However, there were concerns around the clarity of the process, the short timescales for making an application and the short-term nature of the funding. Providers also expressed concern around what would happen when the October 2020 deadline for spending the funds passed, with many predicting an increase in

demand at or around that time.

“...The problem is the strict time-frame within which the funds have to be utilised, by 31 October 2020. After that there is a cliff edge and on-going costs will need to be funded from other resources, probably reserves.”

“... we are being asked to say what we need until October 2020. We anticipate need will be greatest around the time the funding ends, so have also had to seek continuation funding in parallel.”

Funding levels

In spite of the fact that most of our respondents had received crisis funding, less than half (19 out of 40 responding) said they had experienced an overall increase in funding/income during the pandemic. One provider pointed out that, although they had an increase due to emergency funding, they have also lost grant funding which was more long term. “Although we have an increase in funding we know that this is to tide us over as funding will become harder to come by next year as

the impact of COVID hits.” Another said “If we had not of received funding we would have experienced a significant loss, which would have resulted in redundancies. However we appear to be back on track, but that does not mean we will not be looking at redundancies in the future. It will depend on the impact of the pandemic on society.”

Commenting on changes in funding, several respondents pointed to the short-term nature of current funding: “Short-term funding through the emergency grants has increased. However our concern is the longer term situation.” Although they were grateful for being able to secure their service for the time being, they had concerns about the future, including being able to meet any future rise in demand for their services (see section on demand for services).

Overall, services are concerned that the availability of crisis funding pots during the pandemic should not be an alternative to long-term sustainable funding solutions for the sector, “Short-term funding has increased and secured our service for 20/21. Big concerns now [are] for the impact on funding opportunities 21/22.”

Impact of the pandemic on staff at domestic abuse support services

Lockdown restrictions since mid-March have meant significant changes to the way we all work, with those of us able to work from home asked to do so, face-to-face work drastically reduced or significantly changed in nature with new infection control measures introduced which affected workloads. After schools closed on 20th March 2020 workers with children faced additional challenges with many trying to juggle working from home with homeschooling and/or childcare. The domestic abuse support sector saw the impact of these changes in a range of ways, as service providers explained in our June provider survey.

Staff perform caring roles in their home life and had to balance this with work pressures during the pandemic

As women are more likely to take on caring roles at home (ONS, 2013), in organisations where most or all staff are women, this double burden is likely to have a particular impact. This is true across the domestic abuse sector as reflected in the experiences of providers responding to our survey:

“Remote working was a challenge which was difficult for some people, homeschooling

and childcare has also disproportionately affected our staff as all women.”

“Balance of work and life has been difficult to achieve especially since 60 of our 61 staff are women and most are still in caring roles. Some are sole carer.”

Anxiety and the negative impact on mental health

As staff moved to work at home rather than in an office with other team members for support, the sense of working in isolation was a particular challenge for frontline staff working with women and children experiencing domestic abuse. One respondent described staff as “...living at work rather than working from home”.

Given the nature of the work support staff at domestic abuse services do, the potential for vicarious trauma may increase due to this impact on work/life balance. “Main impact on mental health as worry and concern at situation especially when changes to guidance announced, fears of getting infection, outreach staff working from home and how that affects staff who are at work and in jobs that can’t be done at home, disconnection with team members.”

This sense of isolation from vital team support was reflected in comments, for example “For those staff members who have worked remote they have found it very isolating and the impact of the work they do has been more severe...”

For those staff still working in refuge services there were concerns around the infection and wellbeing of residents “...For those staff members who have remained working in our refuges they have been very anxious about the risk of infection and have also had to deal with the anxieties of the women in refuge.”

Some providers were keen to acknowledge how staff members have supported each other through the crisis. However, the negative impact on the mental health of staff working with vulnerable women and children was always apparent.

“Affected levels of anxiety and mental health, however they have come together and given each other so much support.”

“Initially staff were anxious and worried and some staff lost family members. Staff have all pulled together though and continue to work and support each other.”

Concerns around remote working

In addition to the isolation of working from home or with reduced teams, staff also expressed concerns about the practical impacts of working remotely and the fact that staff were often working longer hours. Concerns included interacting with service-users through online systems (including security concerns) and worries that not all staff had the equipment or space to be able to work from home. For example, challenges finding private spaces for sensitive conversations that are essential to the work of support staff “... dealing with traumatic work in the home environment has been very challenging especially where there is not suitable space other than a bedroom.”

As is the case for many sectors, providers had mixed views on remote working. Some services highlighted that the flexible working arrangements it allowed were a positive that they would like to keep to some extent in the future.

“More flexible ways of working, perhaps less focus on 9-5 and more early or evening sessions and support delivered remotely which could better meet victims needs and can be accommodated by staff (working around child care etc.). More succinct focused meetings with less travel.”

Use of government support schemes

Out of all 40 respondents, 15 had used government support schemes such as the furlough scheme during the pandemic. Of the rest, 18 had not used the schemes and seven did not answer the question. Those who commented on their experiences talked about the challenges in service delivery this presented. Putting staff on furlough was either

a result of not being able to run particular service types, “We are unable to run groups so have furloughed group admin staff”, or the reason for not being able to continue with work “We have had to stop all volunteer placements due to Vol Co [Volunteer Co-ordinator] being on furlough...” This in turn put pressure on remaining staff through increased workloads: “...We have had to furlough referral and assessment workers so therefore this has increased workloads of practitioners.”

“... This means that other frontline workers have had to share the workload and that children in refuge have been without a dedicated children’s service. We have monitored this and it has gone without incident but there is always the risk that numbers of clients increase.”

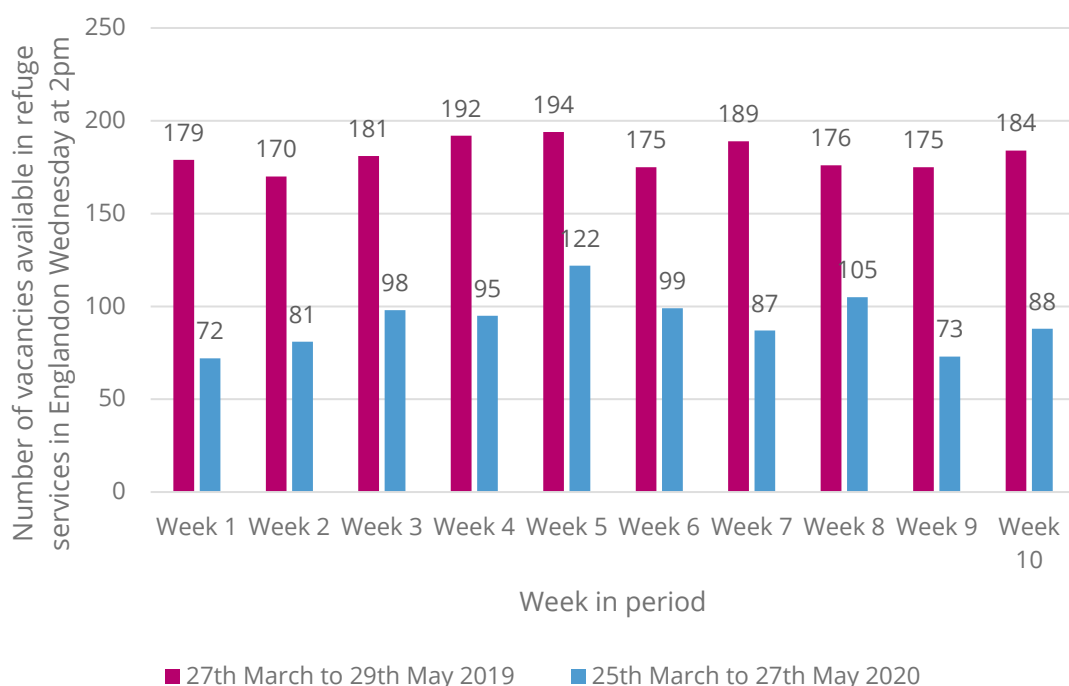
Demand for and availability of services

Availability of refuge spaces in England during lockdown

Women’s Aid found that during the full lockdown period (from 23rd March to 31st May 2020) there was a significant reduction in the number of vacancies posted by refuge services to the Routes to Support database. In total, refuge services in England posted 1,281 vacancies during the full lockdown period. This was a 40.6% decrease from the same period in 2019, when providers posted 2,157 vacancies.

Women’s Aid also looked at snapshots of available vacancies on Wednesday at 2pm each week during the full lockdown period and compared this to the same week in 2019. We found that the amount of vacancies available at a given time in 2020 was consistently around half that available in the same week in 2019. At the time of writing the level of vacancies had increased slightly but had not returned to 2019 levels, with the snapshot taken on 5th August 2020 being 37.7% lower than that taken on 7th August 2019 (96 compared to 154).

Chart 1: weekly vacancy snapshots for England, comparison by year (Routes to Support)



Reasons for the decreased availability

This decrease in availability during the full lockdown period can be attributed to a range of factors and not always because the refuge services were full. In our June provider survey, Women’s Aid looked to understand the challenges providers were facing and asked about the reasons behind this decrease.

Of the 28 responding providers who answered our questions⁶ about their refuge services, 64.3% (18) said they have seen a reduction in the availability of spaces during the pandemic. When asked what factors contributed to this reduction (see **Table 11**), the most common reasons were a lack of suitable move on accommodation (66.7% of those with reduced availability) and concerns over managing the spread of the virus in communal accommodation (61.1% of those with reduced availability).

“At the start of lockdown we offered for the women in refuge to extend their stay in order to reduce the risk of infection from new women entering the refuge.”

A third who had reduced availability talked about having to reduce the number of referrals they could take due to the challenges of adhering to government guidelines on shared housing:

“We have not advertised spaces on Routes to Support during the period of lockdown due to guidelines for shared accommodation.”

“The reduction in demand was because our refuge stopped taking new families because the accommodation is multi-occupancy. We are starting to take new families in slowly, from 6.7.20”

Table 11: Reason for reduction in availability of refuge spaces (June provider survey)

Reason	#providers	%refuges with a reduction (18)	%all refuge providers responding to question (28)
We have not been able to find suitable move on accommodation for women in our refuge/s	12	66.7%	42.9%
Concerns over managing the spread of virus in communal accommodation	11	61.1%	39.3%
We have had to reduce the number of women/families in the refuge to meet government guidance	6	33.3%	21.4%
We have not been able to accept new referrals due to staffing capacity	4	22.2%	14.3%
Lack of personal protective equipment (PPE)	2	11.1%	7.1%
Reduced/lack of access to interpreters to support women who need them	2	11.1%	7.1%
Other	3	16.7%	10.7%
Did not answer question	(6)		

6 Of the responding providers we know run refuge services, six did not answer the questions relating to availability of refuge spaces during the pandemic.

Access to move-on accommodation for refuge residents

Just over half (53.6%) of the providers talking about their refuge services said they have found it more difficult to find move-on accommodation for women during the pandemic than before, “reduction in available move on accommodation, or delays in it being available”. When asked why this was the case, half (53.6%) of all refuge providers responding reported a lack of available properties for women to move in to (see **Table 12**).

“We started at the beginning of lockdown with 21 women in 24 spaces. All women has been with us on average 8 months at the beginning of lockdown and 3 women were bidding for local authority property. The local authority were not able to get housing ready due to their contractors not working so this meant that women had to stay in refuge. This has started to lift and 4 women have successfully moved on...”

Almost a third (32.1%) said that women in their refuge reported not wishing to move out of refuge during lockdown: “The women at the moment are fearful to move on in case there is a spike in the virus.” One of the two providers who answered ‘other’ clarified that the lack of available properties was due to private landlords closing properties. The other provider reported a mixed picture by local authority area, “In some areas there have been barriers, in others the LAs have done everything possible to reduce barriers and find move-on accommodation.”

Table 12: Refuge services reporting difficulties finding move on accommodation (June provider survey)

	#provider	% of refuge providers who reported difficulties (15)	% all refuge providers responding to question (28)
Refuge services reporting increased difficulty finding move on accommodation for women during the pandemic	15	n/a	53.6%
Reason for increased difficulty:			
▶ Lack of available properties for women to move into	14	93.3%	50.0%
▶ Women not wishing to move out of refuge during lockdown	9	60.0%	32.1%
▶ Barriers from local authority housing teams	8	53.3%	28.6%
▶ Practical difficulties in moving during lockdown	8	53.3%	28.6%
▶ Lack of access to utilities/white goods for women	4	26.7%	14.3%
▶ Other (please specify)	2	13.3%	7.1%

Numbers of women ready to move on

The survey then asked providers about the numbers of women currently living in their refuge service who were ready to move on but unable to find somewhere to go. Of the 28 providers answering questions about refuge services:

- ▶ 57.1% (16 providers) told us there were women ready and waiting to move on from their refuge.
- ▶ 42.9% (12 providers, included in above number) told us that over one third of their current residents were in this situation. One provider said “approx 33% of our residents would have moved on but can’t due to COVID”
- ▶ Three providers did not answer the question

In one case, a provider whose refuge was at full capacity told us all of the current residents were actually ready to move on but there was “no suitable housing”.

Demand for local support services during lockdown

The reasons behind changes to demand in local support services during lockdown are complex, and varied from service to service as well as over time. It is undeniable, though, that measures to control the spread of Covid-19 such as lockdown and school closures have played a part in both increases in need and

restrictions on women’s ability to seek support. The quote below shows one provider’s thoughts on why they have seen an increase in demand; however, the reasons given could equally explain why women were less able to access support.

“... a combination of: increased confinement, access to and use of alcohol and drugs, children not attending school therefore giving no respite for parents, lack of support networks (friends, relatives, work colleagues etc)”

When asked about changes to demand for their different service types during lockdown, respondents’ experiences gave a mixed picture. As shown in **Table 13**, the majority of respondents reported an increase across different service types, particularly for online support. “There has been an increase in referral enquiries. We are trying to move on clients who are independent enough to move in order to have spaces for new clients.”

It is important to note that demand for refuge services will be lower when there are fewer vacancies available so this may not be a full reflection of need, as one service explained “Refuge - we have not taken referrals so have not advertised our rooms on Routes to support”.

When asked to identify possible reasons for the changes in demand for their services during the pandemic, providers talked about the different experiences survivors were seeing during

Table 13: Demand for service types during lockdown (June provider survey)

Service type	#providers answering for service type	% increased demand	% reduced demand	% no change
Refuge	26	57.7% (15)	15.4% (4)	26.9% (7)
Community-based services	30	80.0% (24)	6.7% (2)	13.3% (4)
Online support	22	90.9% (20)	0.0% (0)	9.1% (2)
Telephone support	31	80.6% (25)	3.2% (1)	16.1% (5)

lockdown and how this impacted on their ability to access support. Some cited the increased severity of abuse as a reason for an increase in demand, “more women have reached out for support, more physical abuse, more anxiety, kids witnessing more abuse...”

Conversely, where services had seen a reduction in new referrals they could also identify this as an impact of the pandemic. One provider explained they had seen “Less new demand due to lockdown - more restrictions to keep to home and less reasons for leaving home as children not at school and parents not at work - we were more active on social media and offered LiveChat which has worked as a way of contact.”

Specialist services run by and for Black and minoritised women have always had particular referral patterns. Imkaan’s paper on the impact of Covid-19 (Imkaan, 2020) explores the particular nature of the increase in referrals that they have seen during the pandemic.

Impact of the pandemic on support needs of women accessing services

Importantly, when it comes to measuring demand on service provision we must consider more than just the numbers of women and children referred. As one respondent explained “Demand is not just about numbers, but about complexity of cases, about increased distress and stress due to lockdown combined with the distress of e.g. child contact disputes, escalating mental health crises, and the increasing demand on workers’ time and energies because group work cannot be run face to face.” Where individual women and children need more time from support workers to meet their needs, this has an impact on staff caseloads. Reflecting on why this may be the case, providers talked about the impact of lockdown restrictions and isolation on women’s mental health “the main difference is the isolation of our clients who need far more intensive support and more frequent”.

Other services, such as those supporting people around homelessness, mental health or substance use, have suffered the same

challenges as the domestic abuse sector in offering services. Providers talked about the lack of availability of support from other agencies, due to the pandemic. One said, “We have found that more women referred to our community-based services have needed longer term and more in-depth support than before the pandemic. We think this is because they generally have complex needs and also there is a lack of availability of other agencies to support them. We need more trained staff in order to cope with demand in the future.” Another explained that since the pandemic it has been “...- harder to refer to statutory and voluntary agencies for complex cases e.g. mental health”

As a result of increased severity of abuse during the pandemic and this strain on other services, several providers reported receiving referrals from women with higher and more varied support needs during the pandemic “... we have noticed a 50% increase in survivors experiencing mental ill health, drugs and alcohol”

Changes to referral pathways

Women’s Aid asked providers responding to our June provider survey if they have seen any change in where referrals to their service are coming from. Of the 31 providers who answered this question, 77.4% (24) said they had seen some kind of change. The nature of this change varied between providers, for example, some mentioned receiving more self-referrals, although a smaller number of providers said they had seen a decrease in self-referrals. Responses also indicated a changeable picture throughout the different stages of lockdown, “...There was an initial decrease from statutory agencies for the first couple of weeks of the lock down, which picked up again as services settled into new ways of working”, or increased enquiries from third parties “...We’ve also had more concerned friends and neighbours contacting us than previously.”

What the future holds for the specialist domestic abuse support sector

Concerns around future demand

This report has shown that the Covid-19 pandemic has had a negative impact on women’s freedom to access support services at the same time as increasing the severity of the abuse suffered. We have also seen increased awareness of domestic abuse during the pandemic, so it is easy to understand why domestic abuse service providers predict a future spike in demand. “We think demand will increase - partially because of the lockdown withdrawal (i.e. people will be able to get help) and partly because there is more awareness about services. We will need extra resources to help us meet demand.”

Of the 30 respondents who answered questions about demand for their services as lockdown is eased, all indicated they expected to see an increase in demand for their services in either the next six months or between six months and a year from now (see **Table 14**). None expected to see a decrease or no change to demand over the coming year.

“Austerity and unemployment are likely to reduce other support available which

will increase reliance on our services. We also know that many women have had intolerable experiences during lockdown and we will be dealing with that for a long time. The family and criminal courts are going to be harder to access and more ineffectual than usual. General homelessness will increase due to unemployment etc. putting strain on available resources...”

Despite all of the challenges, some comments highlighted services’ hard work to meet this demand and adapt to new ways of working: “As a sector I feel we have all done an amazing job at adapting our services.”

Concerns about future funding

“I am concerned that some of our funding will end in the autumn and that it will be a much more challenging fundraising landscape. However, demand for our services will continue at high levels or may increase.”

At the same time as predicting an increase in demand, our June provider survey showed that

Table 14: Future demand as lockdown measures ease (June provider survey)

Expectation	% providers responding (30)
We expect to see an increase in demand in the next six months	73.3% (22)
We expect to see an increase in demand between six months and a year from now	63.3% (19)
Providers who expect to see an increase in demand in one or other of above time periods	100% (30)
Providers who expect to see an increase in demand across both time periods	36.7% (11)
Decrease in demand during either period	0.0% (0)
No change during coming year	0.0% (0)
Question not answered	(10)

providers are concerned about future funding for their services, "We think there are going to be some very hard and challenging times ahead". They spoke of concerns that funders are offering crisis money now but then reducing or removing funding offers in the future as a result, "Concerns for next year are around recover and rebuild. Will funding be available? Lots of funders have brought forward monies and released them early to give support during the Covid-19 crisis...I think next year could be increasingly dire." Or that domestic abuse support may not be seen as a priority in the near future "Lack of funding following this deluge of funding - our services are being seen as a priority now but when things return to some sort of normality our fear is that funding will evaporate and the priority will no longer be recognised..."

Several others commented on the short-term nature of funding and concerns that staff redundancies may be possible in future. "We are concerned at how short term the COVID related funding from the government is. We feel that the true impact will come further down the line, and we may not be able to meet demand."

The expected spike in demand was a concern with providers asking for government to ensure that this was anticipated in funding arrangements, "Longer term funding to help us plan and cope for an increase in referrals." Providers noted that they are required to spend current crisis funds by October 2020 and were worried about what would happen after that.

"I am concerned about funding and resourcing post-October 2020 it seems that all funding is short-term and doesn't recognise the long-term trauma caused to survivors and children who have been locked in with their abusers during the pandemic. The coming years worry me in terms of our sustainability."

Positive opportunities

We asked respondents to tell us about the positive learning and opportunities arising from the pandemic that they would like to develop in the future. We found the following common themes in their replies.

Better public awareness of domestic abuse

"I think the awareness of DA [domestic abuse] and the impact on victims has been raised significantly during the pandemic and public awareness has increased which can only be positive."

Local support and better local partnership working

"Other organisations in the community reaching out, e.g. local museums, the huge increase in local volunteering and neighbourliness, which could aid DA [domestic abuse] survivors in the long run."

Improvements in IT and communications within the organisation

"We are maximising our cloud based IT and realise that this solution isn't as scary as we thought."

"New ways of working have been embraced and we now see the opportunities of using electronic communication methods more frequently."

New ways of delivering services through digital technology

"Some of our video group work has worked well for clients that would have found it difficult to attend a group for various reasons and I want to continue this as well as the valuable face-to-face work that benefits others."

"Increased access to service for some women through online platforms- e.g. working women/students..."

"New ways of delivering services in terms of more accessible for people unable to travel - digital platforms."

Conclusion and recommendations

Perpetrators have used the Covid-19 pandemic as a tool for domestic abuse

From the start of the lockdown we saw perpetrator behaviour evolve, much like the virus itself, to include new tools for control and manipulation. Coercive and controlling behaviour exhibited by perpetrators has been central to the way we have seen them use the Covid-19 virus itself and lockdown restrictions as an integral part of the abuse they inflicted. We have heard from survivors who tell us that

their abuser has used anxiety about the virus to control them, for example deliberately not adhering to safety guidelines and blaming them for the economic impact of lockdown. Perpetrators have abused lockdown restrictions to exert power and control by isolating women and children from their family, friends or other support networks.

Women experiencing domestic abuse have seen their choices restricted by Covid-19

Survivors told us that their experiences got worse during the pandemic. At the same time, survivors found that increased control from their abuser and the restrictions on their movements meant that the pandemic reduced access to escape routes and put avenues for seeking help further out of reach. In particular where women share a home with their abuser, they have found it increasingly difficult to find time and space to seek help.

Prior to lockdown, fleeing abuse was already a challenging and tumultuous time for many survivors and the lockdown measures have made leaving an abusive situation harder than ever. Survivors face substantial challenges accessing specialist domestic abuse services, mental health support and maintaining informal contact with friends and family.

Risk to child survivors

The impact is not limited to adult survivors; children of parents who are experiencing domestic abuse do not just witness it, they experience the abuse in a very real way, and the impact can last into adulthood. With the closure of schools, many children are spending more

time with their abuser and we have seen there was an increase in abuse directed at children during the lockdown. For others, child contact arrangements have been used to further abuse and are placing children at risk of further harm.

The Covid-19 pandemic has affected the specialist domestic abuse support sector

The domestic abuse support sector was already facing a funding crisis when this pandemic hit, and there was little or no financial resilience to meet these huge new challenges. Services have seen a significant financial impact due to Covid-19, and many are concerned about the impact of this on the wellbeing of both staff and survivors.

The domestic abuse support sector has been adapting fast to meet the changing needs of the women and children they support. They have striven to adhere to the government guidelines and are continuing to offer vital support to domestic abuse survivors. However, providers

have faced many challenges and are expecting to see increased demand for all of their services continue in the future as lockdown measures continue to ease, and the impact of worsening abuse and restricted freedoms during the pandemic becomes clearer.

With other services limited, and survivors and their children faced with escalating abuse and increasingly complex barriers to support, the need for specialist domestic abuse services has never been more critical. This is particularly true of the specialist services provided by and for marginalised women and the issues highlighted by specialists in this field must be addressed.

A perfect storm

Whilst the Covid-19 pandemic did not cause domestic abuse, it created a perfect storm of challenges for survivors and the services supporting them. The Covid-19 virus, and lockdown measures designed to fight it, gave perpetrators a tool that they quickly learnt to use for coercion, manipulation and to induce

fear. This in turn exposed survivors to worsening domestic abuse, whilst restricting their access to support. At the same time, the pandemic created challenges for the specialist domestic abuse support sector in providing life-saving support, including lost income, staff shortages and additional costs of remote working.

Recommendations

To address this perfect storm we must ensure that those women and children most at risk during the Covid-19 pandemic can access the vital support they need. To do this:

1. Domestic abuse must be seen as a priority at the highest level within all work across government. Survivors responding to our surveys have been clear that they want to see increased awareness of coercive and controlling behaviour and its impact. "... There always seems to be a silence in society when it comes to domestic abuse. We need those at the top to help break these silences".
2. Businesses and communities can play a critical role in raising awareness of abuse and signposting survivors to specialist support, however a number of safeguards must be established if community schemes are to be safe and effective. Such schemes must be designed to reach survivors who face the greatest barriers to support, including Black and minoritised women, migrant women, Deaf and disabled women and LGBT survivors.
3. Providers maintain that government need to develop longer-term funding strategies, for all service types, if the sector is to survive the current crisis and grow to meet

the anticipated increase in demand. To prepare for this spike, they need long-term sustainable funding for quality services, (including ring-fenced national funding for services led 'by and for' marginalised groups of survivors), an end to damaging commissioning practices, improved local partnership working and the deadline for spending crisis funding extended to after October 2020.

4. The government must create a long-term sustainable funding solution for all support services. Women's Aid estimate that investment of £393m a year is needed to secure a sustainable specialist refuge sector and vital community-based support that is available and accessible to all women in England (Women's Aid, 2019B).
5. The government must address the recommendations outlined by [Imkaan](#) and other 'by and for' sector experts looking at the impact of Covid-19 on the experiences of Black and minoritised women, migrant women, Deaf and disabled women and other marginalised groups. To ensure equal protection and support for migrant women government must make urgent changes to the domestic abuse bill.

Joint VAWG sector recommendations (including domestic abuse sector experts)

On 21st May 2020 the Prime Minister held a summit on 'Hidden Harms'. In June 2020, Women's Aid and other VAWG sector organisations published a set of recommendations for an action plan⁷ following the summit. The joint recommendations note the importance of listening to sector expertise, in particular around preparing for the anticipated increase in demand for support over the coming months, which is unlikely to be predictable or uniform. It further notes the extensive work already done by the sector to estimate the level of investment needed. This paper covers recommendations on funding for specialist VAWG services, as well as the measures needed to deliver equal protection and support for migrant women, a criminal and family justice system which works for survivors, and reforms to health services, housing services and many more.

“Highlight, raise awareness, understanding of coercive control, emotional and psychological abuse and provide support.”

“Longer-term funding strategies for what are essential services. A funding model that asks us what we need to be sustainable rather than asking us to bid for pre-defined activities or new project-based funding. A far greater commitment to funding [all service types]...”

7 <https://www.womensaid.org.uk/recommendations-for-the-hidden-harms-action-plan/>

Appendix 1

Timeline of lockdown measures

Taken from a more detailed timeline compiled by British Foreign Policy Group which can be found at <https://bfpbg.co.uk/2020/04/covid-19-timeline/>.

February 28th 2020: UK authorities confirm the first case of the illness to be passed on inside the country.
March 13th 2020: A host of UK sporting events announce their postponement including the London Marathon. Premier League fixtures are suspended.
March 16th 2020: Boris Johnson begins daily press briefings, urging everybody in the UK to work from home and avoid pubs and restaurants to give the NHS time to cope with the pandemic.
March 18th 2020: The UK government announces most schools across England will be shut down from Friday until further notice. Wales and Scotland announce they will also close schools.
March 20th 2020: The UK government orders all pubs, restaurants, gyms and other social venues across the country to close. The chancellor announces the government will pay up to 80% of wages for workers at risk of being laid off
March 23rd 2020: Prime Minister Boris Johnson, in a televised address to the nation, says that Britons should only go outside to buy food, to exercise once a day, or to go to work if they absolutely cannot work from home. Citizens will face police fines for failure to comply with these new measures.
May 7th, 2020: The BBC reports that 'An analysis from the Office of National Statistics has shown that Black men and women are nearly twice as likely to die from COVID-19 as their white counterparts'. The study took account of age, where people live and some measures of deprivation, disadvantage and health.
May 10th, 2020: UK Prime Minister announces plans for the easing of lockdown, which includes allowing unlimited exercise and going back to work if you cannot work from home.
May 24th, 2020: UK schools to begin phased reopening beginning June 1st with year one and year six, and then on June 15th year ten and year twelve.
May 25th, 2020: UK government announces non-essential retailers may reopen from June 15th.
May 27th, 2020: England to launch 'test and trace' system aimed at replacing lockdown restrictions.

Continued over page

May 29th, 2020: Lockdown restrictions in England continue to ease, with groups of up to six people allowed to meet from June 1st, whilst maintaining strict social distancing rules.

May 30th, 2020: UK to allow vulnerable people who fall under the 'shielded' category to go outside and meet one person from another family whilst maintaining social distancing.

June 19th, 2020: UK Chief Medical Officers suggest that the threat level should be lowered to Level 3.

June 22nd, 2020: UK government announces that those who are shielding can meet groups of up to six outdoors and form a support bubble with one other household from the 6th July.

June 23rd, 2020: England announces that pubs, restaurants and hotels will reopen on the 4th July.

June 27th, 2020: NHS calls for BAME pregnant women to receive extra coronavirus checks and support due to their higher vulnerability to coronavirus.

June 29th, 2020: Lockdown reimposed on Leicester after surge in local infections.

July 1st, 2020: UK businesses cut 11,000 jobs in 2 days.

July 4th, 2020: Pubs, restaurants, barbers and places of worship reopen in the UK in what is dubbed 'Super Saturday'.

July 13th, 2020: Beauticians, spas and tanning salons reopen in the UK.

July 30th, 2020: UK imposes local lockdown on a number of areas in the North of England.

July 31st, 2020: UK reverses decision to ease lockdown further on Saturday, postponing the reopening of casinos and bowling alleys for at least two weeks

Appendix 2

Data used in this report

Existing data sources

Routes to Support: The data used in this report relates to vacancies added to the database by refuge services. These vacancies are added when they become available and marked as filled (removed) when they are no longer available. For this report we have looked at the impact of Covid-19 on the availability of these refuge vacancies in two ways. Firstly, we have taken a weekly snapshot of the number of vacancies available at a given time (2pm on a Wednesday) for each week in the full lockdown period from Wednesday 25th March to Wednesday 27th May. As Routes to Support stores this data on a weekly basis we were also able to note the equivalent snapshots for the same week in 2019 to provide a comparative picture of availability. Secondly, we carried out an analysis of the vacancies added to the database during the period 23/3/20 to 31/5/20 and a comparison with the same dates in 2019 to show the total numbers of new vacancies created during the two time periods. In this way we could confirm that the reduction in availability represented a reduced number of vacancies being added rather than just vacancies being filled more quickly.

On Track: The data in this briefing look at women who were accessing a refuge service and/or a community based service at any point between 1st – 29th May 2020. The data was filtered to only include female clients. People who identify as male, intersex, non-binary or in any other way are not included in this analysis. The data for this report was extracted from On Track on the 22nd July 2020.

This data is taken from 70 organisations who ran refuge and/or community-based support services in May 2020. These 70 organisations supported 13,294 women during this time. This report is based on the 25.0% (3,319) of these survivors who had a Covid-19 form that had been filled in within their case file. The On Track data presented in this report is based on these 3,319 women.

The data is disaggregated by refuge and community based services. There were 58 organisations who ran refuges during this period. These 58 organisations supported 1,405 women during this time, of which 711 (50.6%) had a Covid-19 form completed.

There were 61 organisations who ran community-based services. Community-based services include IDVA, outreach, and floating support. These 61 organisations supported 12,037 women in community-based services during the reporting period, of which 22.3% (2,682) had a Covid-19 form completed.

Thematic analysis of trends

Direct services involvement with survivors: since the start of the pandemic we have kept an anonymous record of issues raised by survivors using our direct services¹. We carried out a thematic analysis which we then used to frame the questions in our second survivor survey.

For the first 12 weeks of the pandemic² support workers at Women's Aid Women's Aid Direct Services recorded anonymous data on survivors' experiences of domestic abuse related to Covid-19. A total of 121 experiences were recorded and the majority of these (63.6%) were from survivors accessing the email support service. The other experiences were recorded from survivors accessing Live Chat (25.6%) and a smaller number through the Survivor's Forum (9.1%) and the No Woman Turned Away project (1.7%). The data relates to a small number of survivors and having not been collected through a formally designed research project, cannot be considered widely representative. The data does however reflect the lived-reality of survivors' experiences and a thematic analysis provides an indication of the common issues faced by survivors during the pandemic.

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- 1 Women's Aid Live Chat Helpline, email service <https://www.womensaid.org.uk/information-support/> and No Woman Turned Away project <https://www.womensaid.org.uk/no-woman-turned-away/>
 - 2 Data was recorded by support workers from 18th March to 9th June 2020

Covid-19 surveys

Women's Aid circulated two surveys to survivors through our Survivors' Forum and other relevant online fora. In addition Women's Aid circulated two surveys to providers of local domestic abuse support services. Finally a survey was circulated to our Ask Me ambassadors. The surveys were sent to all services listed on Routes to Support and shared online. Surveys were online and asked a mixture of open and semi-structure questions.

April survivor survey (Women's Aid, 2020A). This survey was designed to help us build a picture of the impact of Covid-19 on survivors' experiences of abuse, their children and their ability to access support. The survey was circulated via Women's Aid's Survivors Forum, and survivor Facebook groups. It could be completed between 6th and 19th April 2020. These findings reflect the concerns of survivors at that time and do not take into account any developments after 19th April. The majority of the findings are available in a briefing on the Women's Aid website. This report uses previously unpublished findings from this survey to explore the impact of Covid-19 on child-survivors.

Continued on next page

Covid-19 surveys continued

April provider survey (Women's Aid, 2020B). This survey was designed to help us build a picture of the initial concerns that these services had about Covid-19 and its current impact on the support that they can offer. The survey consisted of twelve questions and was distributed to all local domestic abuse service providers in England, including Women's Aid members, via email, our Twitter account and our services directory Routes to Support. The findings are available in a briefing on the Women's Aid website.

Ambassador survey April 2020 (Women's Aid, 2020C). To find out the impact Community Ambassadors are seeing of government lockdown on survivors of domestic abuse and how the pandemic is affecting their activities, Community Ambassadors fed back to us through a short survey. The survey consisted of 10 questions and was shared via an email newsletter and social media. Thirty-two Community Ambassadors responded to the survey in April 2020. They were spread across thirteen geographical areas which were representative of the vast majority of areas in which the scheme has been delivered.

June survivor survey. We used our learning from the first survivor survey and from monitoring of what survivors told our direct services teams about the impact of Covid-19 to devise a further survey in June 2020. This second survey explored more fully the impact of the pandemic on survivors' experiences of abuse and some of the ways in which perpetrators are using Covid-19 as a tool for coercive and controlling behaviour. The survey was circulated via Women's Aid's Survivors Forum, and survivor Facebook groups between 1st and 24th June 2020. The findings from this are shown in this report.

June provider survey. This survey explored issues raised during the pandemic and asked providers some questions about crisis funding, referrals and the availability of refuge vacancies. It was distributed to all local domestic abuse service providers in England, including Women's Aid members, via email, our Twitter account and our services directory Routes to Support between 24th June and 7th July 2020. The findings from this are shown in this report.

Appendix 3

Survivor survey June 2020 demographics

We received 266 responses, 74 were currently experiencing abuse or violence and 192 had experienced abuse or violence in the past. Of these 266 respondents, 264 were women and two defined as non-binary. We received two additional responses from men which are not included in this analysis. One woman defined as trans and two did not answer this question. This sample is representative of the UK population and have been restricted to those survivors able to safely access an online survey.

Age	
Age group	% respondents
16-20	1.1%
21-30	15.8%
31-40	31.2%
41-50	34.6%
51-60	13.5%
61-70	3.8%

Disability	
Do you have a disability or long-term health condition?	% respondents
Do not wish to say	2.6%
No, neither	59.4%
Yes, both	5.3%
Yes, disability	7.5%
Yes, long-term health condition	25.2%
Grand Total	100.0%

Ethnicity	
Ethnicity	% respondents
Any other Mixed/ Multiple ethnic background	0.4%
Any other White background	3.8%
Asian/ Asian British Indian	2.3%
Asian/ Asian British Pakistani	0.4%
Black/ African/ Caribbean/ Black British African	0.4%
Black/ African/ Caribbean/ Black British Caribbean	0.4%
Do not wish to say	1.5%
White and Asian Mixed/ Multiple ethnic groups	0.4%
White and Black Caribbean	0.4%
White English/ Welsh/ Scottish/ Northern Irish/ British	86.5%
White Gypsy or Irish Traveller	0.8%
White Irish	3.0%
Grand Total	100.0%

Sexual orientation	
How would you describe your sexual orientation?	% respondents
Asexual	2.6%
Bisexual	4.5%
Do not wish to say	3.4%
Gay woman/lesbian	1.1%
Heterosexual/straight	87.2%
Other (please specify)	0.4%
Pansexual	0.8%
Grand Total	100.0%

Insecure immigration status

Do you have insecure immigration status?	% respondents
Do not wish to say	2.6%
No	89.8%
Not sure	0.8%
Yes	6.8%
Grand Total	100.0%

Country

Where do you live?	% respondents
Do not wish to say	1.5%
England	74.1%
Northern Ireland	2.6%
Other country (please specify)	1.9%
Scotland	11.7%
Wales	8.3%
Grand Total	100.0%

Sex of perpetrator

Is the person/people being abusive or violent against you (now or in the past)...	% respondents
A man	83.1%
A woman	1.5%
Multiple abusers (all men)	10.9%
Multiple abusers (men and women)	4.5%
Grand Total	100.0%

Relationship to you (could tick more than one)	
Relation to you	% respondents
Current partner (incl spouse)	21.4%
Ex-partner (incl spouse)	80.8%
Family member	12.8%
Someone else	5.3%

Household (could tick more than one)		
Household description	% all respondents (266)	% of those living with an abusive partner (41)
I have children (aged 18 or under) who sometimes live with me	1.1% (3)	2.4% (1)
I have children (aged 18 or under) who live with me	53.8% (143)	48.8% (20)
I have children (aged 18 or under) who don't live with me	2.3% (6)	2.4% (1)
I live with an abusive partner	15.4% (41)	n/a
I live with an abusive family member	3.0% (8)	2.4% (1)
I live alone	14.3% (38)	0.0% (0)
Other (please specify)	24.4% (65)	9.8% (4)

Appendix 4

Provider survey June 2020 respondents

Our survey was sent to all domestic abuse support services listed on Routes to Support in England. We received 40 responses to our survey from providers running 63 local services between them. Of these providers, 28 told us that they run one or more refuge services. Between them, respondents run 50 local refuge services with 699 spaces, 18% of all refuge spaces in England.

Responding service providers (all)

	Total responding services	Total #local services they run
Responding	40	63
Total in England		370
% responding		17.0%

Responding refuge service providers (included in table above)

	Total responding refuge services	Total #refuge services they run	Total #refuge spaces these services hold
Responding	28	50	699
Total in England		263	3914
% responding		19.0%	17.9%

Regional breakdown of local services run by respondents

Region	%providers responding (63)	%refuge services responding (50)
East Midlands	9.8%	9.8%
East of England	9.8%	9.8%
London	7.3%	7.3%
North East England	4.9%	4.9%
North West England	14.6%	14.6%
South East England	22.0%	22.0%
South West England	9.8%	9.8%
West Midlands	12.2%	12.2%
Yorkshire & Humberside	9.8%	9.8%

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