

THE DOMESTIC ABUSE REPORT 2022

THE ANNUAL AUDIT



women's aid
until women & children are safe

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With support from the Women's Aid team

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Women's Aid is the national charity working to end domestic abuse against women and children. Over the past 47 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 over 170 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 data set 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.

www.womensaid.org.uk, www.loverespect.co.uk

Contents

Foreword	5
Introduction	6
Data sources used for this report	6
On Track: The Women's Aid case management and outcomes monitoring system	6
Routes to Support	7
Women's Aid Annual Survey 2021	7
Section 1: the service users	9
About our sample	9
Key findings	10
1.2 Age	12
1.3 Children	13
1.4 Disability	14
1.5 Sexual orientation and gender identity	15
1.6 Ethnicity	16
1.7 Nationality and citizenship	17
1.8 Experiences of abuse	19
1.9 Support needs	22
Section 2: The provision of services	24
Key findings	24
2.1 Who are the service providers?	26
2.2 Specialist support for women experiencing additional inequalities	28
2.3 Types of services	30
2.4 Refuge services and spaces	32
2.5 Service capacity and demand for support	37
2.6 Dedicated services for children and young people	40
2.7 Services for men	41
Section 3: The work of support services	43
Summary of key findings	43
3.1 Impact of the Covid-19 pandemic	44
Challenges related to the pandemic	44
Impact of the pandemic on demand	48
New doors opening during the pandemic	50
3.2 Challenges during 2020-21	53

Contents (continued)

Funding challenges during 2020-21	53
Barriers to accepting referrals	53
3.3 Achievements in 2020-21	56
3.4 Funding sources - domestic abuse services	58
Working without dedicated funding	58
Police and Crime Commissioner Funding	61
Clinical Commissioning Group Funding	62
Local authority funding for refuge provision	63
Local authority funding for CBS provision	66
3.5 Early implementation of the Statutory Duty	67
Local discussions about the new statutory duty	67
Funding allocation	68
Clarification about future funding arrangements	69
Local authority needs assessment	69
Strategy for delivering the statutory duty	70
Local Partnerships Boards	70
Conclusion	73
Appendix 1: Glossary	75
Appendix 2: Methodology	76
Section 1: The service users	76
Section 2: The provision of services	76
Section 3: The work of support services	77
Appendix 3: Definitions of service types	78
Accommodation	78
Community-based services (CBS)	78
Open access services	79
Recovery work	79
Dedicated children and young people's service	79
Other	79
Appendix 4: Women's Aid Annual Survey 2021 respondents	80
References	81

Foreword



Farah Nazeer

Chief Executive, Women's Aid Federation of England

Reading through this report renews the awe I have for the work done by domestic abuse services.

The number of women and children supported in 2020-21 is staggering, an estimated 10,809 women and 11,890 children supported in refuges, and an estimated 124,044 women and 148,852 children received community-based support in England.

The challenges in 2020-21 were many, some pre-existing and some new. When the pandemic started and related restrictions came into force, services had to adapt quickly to remote working, cope with staff absences, modify communal spaces to try to prevent the spread of Covid-19, and quickly find the funds to purchase PPE, extra cleaning materials and home-working equipment. Staff and volunteers have continued to go above and beyond to be there for survivors in these extremely challenging circumstances. When face-to-face community work wasn't possible, they started online and telephone-based support. As well as Women's Aid's national Live Chat service, there are now many local remote services supporting survivors online (we recorded 28 local services running an online chat service on 1st May 2021). A network of services driven by compassion and determination that we should be proud of, whilst we regret it needs to exist in the first place.

The main focus of this report is the financial year 2020-21 (from April 2020 to March 2021). The Domestic Abuse Act 2021 received Royal Assent just after the end of this period, in April 2021, and introduced a new statutory duty to provide safe accommodation (with associated funding) for

victims of domestic abuse, including children. Early feedback from domestic abuse services suggests that there is considerable variation in how this duty is being implemented in different local areas. It is too early to reach conclusions about the impact of this statutory duty on sector funding however - and it must be noted that this funding is not applicable to community-based support. Our report next year should have more information on the impact of the duty.

Emergency public funding made available to domestic abuse services has certainly helped keep services running during the pandemic and is likely behind the welcome increase in refuge spaces in England. The number of spaces in refuge services increased by 354 (from May 2020 to May 2021) and this is the highest annual increase seen in recent years. However, demand for support remains high and the number of refuge spaces still falls far short of what is recommended by the Council of Europe (a 24.2% shortfall). The absence of long-term, sustainable funding also remains a big concern for domestic abuse services.

The work to end violence against women and girls and to shift societal attitudes remains as prescient as ever. Despite all the challenges thrown their way in 2020-21, professionals and volunteers working in domestic abuse support sector have shown themselves to be resilient, resourceful and, above all, committed to meeting the needs of domestic abuse survivors. They are the hidden heroines of the pandemic. One domestic abuse service responding to our annual survey, reflected on their staff team's attitude and work in 2020-21 with the following words: "WE WERE INCREDIBLE!" I whole-heartedly agree.

Introduction

This report is the 2022 edition of Women's Aid's yearly publication on the provision, usage and work of domestic abuse services in England. We primarily examine the financial year 2020–21, but have also included information about the early implementation after April 2021 of the new statutory duty to provide support for victims of domestic abuse, including children, within safe accommodation¹. The Women's Aid data sources used in this report are On Track, Routes to Support and the Women's Aid Annual Survey 2021. This report answers the following key research questions:

1. What are the needs and experiences of survivors accessing domestic abuse support services?
2. What is the scope and nature of domestic abuse service provision in England?
3. What impact has Covid-19 had on the usage and provision of domestic abuse services in England?
4. What challenges are domestic abuse support services facing, how many of them are commissioned by a local authority and what work are they most proud of?
5. What has been the initial impact of the statutory duty on refuge services?

Copies of all editions of The Domestic Abuse Report can be downloaded for free online at:
www.womensaid.org.uk/evidence-hub

Data sources used for this report

On Track: The Women's Aid case management and outcomes monitoring system

On Track provides local domestic abuse services with a case management and outcomes monitoring system. The system provides them with the information they need to report to funders, evaluate their services and improve their understanding of survivor's needs, while the case management tools support them to provide vital life-saving support to survivors and their children. On Track's outcomes monitoring

tools are based on the Imkaan and Women's Aid Outcomes Framework. On Track's outcomes monitoring tools are based on the Imkaan² and Women's Aid Outcomes Framework. Imkaan uses this framework in their case management system, Synthesis, which centres the work of 'by and for' expert organisations for Black and minoritised women.

On Track is used by over 85 local service providers throughout England as well as being used by our own Live Chat and email support services, and the No Woman Turned Away project. Every region

¹ Introduced through Part 4 of the Domestic Abuse Act 2021

² <https://www.imkaan.org.uk> : "We are the only UK-based, second-tier women's organisation dedicated to addressing violence against Black and minoritised women and girls i.e. women which are defined in policy terms as Black and 'Minority Ethnic' (BME)."

in England is represented by the organisations contributing data to On Track.

Through the information they collect in their daily work, services contribute to an anonymous national dataset which is held by Women's Aid. At the time of writing (July 2021) On Track contains information on 138,225 survivors who have accessed domestic abuse services since the system was launched on 1st April 2016.

On Track's national data includes a range of information about survivors' journeys, both for adults and for children and young people accessing domestic abuse support services. On Track records data on referral patterns, experiences of abuse, support needs, survivor demographics, support provided, outcomes, feedback and negative experiences of external services (e.g. housing, legal services, local authority safeguarding, NHS, police).

Routes to Support

Routes to Support is the UK violence against women and girls directory of services and refuge vacancies, run in partnership by Scottish Women's Aid, Welsh Women's Aid, Women's Aid Federation of England and Women's Aid Federation of Northern Ireland. Routes to Support is part funded by the Department for Levelling Up, Housing and Communities. The resource provides violence against women and girls services with 24-hour access to information that supports their work. Sophisticated search tools can identify the most suitable service for the women, children and men they are supporting. It facilitates referrals through national, regional and local helplines as well as between local services, and has been an integral part of the work of the domestic abuse sector since its creation in 2003.

During the year 2020-21 there were 178,922 logins to the site by staff at domestic abuse support services in England alone, demonstrating how widely it is used. The directory gives Women's Aid comprehensive data on the full range of

all domestic abuse services including, but not limited to, those run by Women's Aid members. This includes information about the types of domestic abuse services provided, the number of bedspaces available in refuge services, the people supported by these services and changes to provision over time. The directory is updated on a rolling basis by dedicated staff at Women's Aid, meaning each entry is fully updated every year in addition to any updates received from services during the year. Entries are added and removed throughout the year as providers change.

Women's Aid Annual Survey 2021

This survey was sent in June 2021 (with a deadline in early July) to all domestic abuse services in England which run both or one of refuge and/or community-based support (CBS) services. Respondents were self-selecting. We received responses from 81 organisations who were running 154 service entries on Routes to Support. This gives a response rate of 38.0%³. Of these 81 respondents:

- ▶ 63 responded that they ran refuge services (12 indicated that they did not, and six did not respond to the question)
- ▶ 58 responded that they provided community-based services (13 indicated that they did not, and ten did not respond to this question)

This year the survey asked questions about the impact of the Covid-19 pandemic, key challenges and achievements, how services were funded in 2020-21, and the initial impact of the statutory duty to provide support for victims of domestic abuse, including children, within safe accommodation.

To find out more about Women's Aid's evidence base, including On Track and Routes to Support, and how they might support you visit our online Evidence Hub at www.womensaid.org.uk/evidence-hub

³ 154 out of 405 services responded.

1.1 Key Findings



Women and children supported (estimated) 2020-21

Refuge services



10,809 women
11,890 children

Community-based services



124,044 women
148,852 children

Refuge spaces

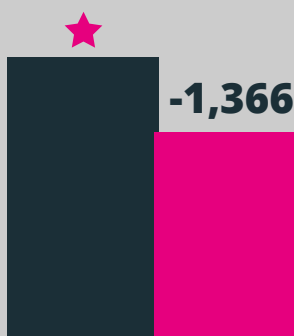


1st May 2020

+354



1st May 2021



This is the highest increase seen in recent years. However, there is still a

24.2% shortfall

in the number of refuge spaces compared to that recommended by the Council of Europe.



Less than **half of refuge vacancies** posted on Routes to Support from April 2019 to March 2020 could accommodate a woman with **two children**.



Less than **one in five** could accommodate a woman with **three children**.



Only **6.3%** of all vacancies posted on Routes to Support in 2020-21 could consider women who had **no recourse to public funds**.



The **length of abuse** experienced by domestic abuse service users ranged from **less than a month** to **66 years**.

The average was **six years**.

87.7% of organisations responding to our annual survey reported that Covid-19 had **affected demand** for their services.

Of these organisations, **84.5%** told us that **demand** for the support they offer had **increased**.

Section 1: the service users

About our sample

The first section of this report details who accessed the domestic abuse support sector (the service users) in the year 2020-21 by looking at survivors and their needs and experiences. This is done by analysing data from a sample of 34,860 female survivors recorded on On Track who finished a period of support from services using the system during the year 2020-21 from domestic abuse services using On Track. Of these:

- ▶ 3,274 survivors accessed refuge services;
- ▶ 31,586 survivors accessed community-based support (CBS) services⁴.
- ▶ Some survivors used both refuge and CBS services during the year, so the sum of the two figures above is more than the total sample.

Throughout the analysis presented here, we show information across the whole sample of 34,860 women (each woman represented only once even where she accessed more than one service type⁵). We only highlight comparative demographics between refuge and CBS services where there is a noteworthy difference in the results.

Women and children escaping abuse come from all backgrounds, have a diverse range of experiences, and require support that meets their needs. This report presents demographic information on service users. It does not set out to explain or analyse the needs and experiences of different groups of women. However, we know that for many women and girls, their experiences and support journeys will be shaped by multiple, often intersecting, inequalities, and the Covid-19

pandemic has highlighted more than ever the stark impact of these inequalities (Imkaan, 2020; Runnymede, 2020; Sisters of Frida, 2020).

We are looking at women who have successfully accessed support services. There are many survivors of domestic abuse who, for a variety of reasons, are unable to access specialist help, or are delayed in doing so for a long time. If we were to look at a profile of support needs and demographic background for these survivors, it would likely be different to that of the survivors in our sample from On Track. This is because accessibility is about more than just availability of space in a refuge or a place in a CBS service; when looking at whether provision meets need, we need to consider whether services that are available can meet the needs of diverse women. As Section 2 of this report shows, not all services are resourced to provide for women with specific support needs such as substance use, mental health support, communication or accessibility/mobility; or to accommodate a service user's children and any support and access needs the children may have. This includes the needs of minoritised women and children whose experiences will have been shaped by multiple forms of oppression and discrimination.

Women's Aid's No Woman Turned Away project has consistently found that the most minoritised women tend to face the greatest barriers in their search for refuge provision, with intersecting structural barriers and inequalities (such as poor agency responses or exclusion on the basis on immigration status) impacting on women's ability to access appropriate safety and protection (Women's Aid, 2021a).

⁴ Community-based services include floating support, outreach, IDVA and advocacy services

⁵ It is important to note that this only applies where a woman has accessed more than one service in the same organisation. The data provided from each organisation is independent and therefore if a woman accessed different services from different organisations she would be counted twice in our analysis.

Key findings

Our analysis of national On Track data gives us the following key findings. Our sample was 34,860 survivors (supported by 71 organisations running

199 domestic abuse services in England and using On Track during 2020-21).

1. Most women accessing services have children:

- ▶ 60% of service users in community-based services (CBS) services had children⁶ and 5.9% were pregnant⁷.
- ▶ 59.7% of women in refuge services had children⁸ and 7.3% were pregnant⁹. There were 42,598 children of service users in the sample, averaging 1.2 children per service user across all services.

2. Immigration status and the associated challenges in accessing benefits continue to be significant barrier for women who are trying to access support:

- ▶ 30% (1,223) of those who weren't British nationals did not have access to public funds and 9.5% did not know if they had recourse to public funds.

3. Abuse can take a range of different forms and can last for a significant length of time:

- ▶ The length of abuse experienced ranged from less than a month to 66 years; the average was six years¹⁰.
- ▶ 88% of a sub-sample of service users¹¹ had experienced emotional abuse and 66.6% had experienced jealous or controlling behaviour.
- ▶ 37.6% of service users disclosed having support needs around their mental health; for service users in CBS, this was 36.3% and for those in refuge services this was higher at 49.2%.

6 Missing data unknown

7 Missing data= 0.1%; Declined to answer= 0.1%; Don't know= 10%; Not Asked= 3.8%

8 Missing data unknown

9 Declined=0%; Don't know=2.6; Not asked= 1.1%

10 Base (n=12350); Those who are experiencing/ have experienced abuse within the last year

11 From sub-sample of 25,988 community-based and refuge service users within the overall sample of 34,860 for whom an abuse profile on current abuse is available

4. Domestic abuse continues to be gendered:

- 94.3% of perpetrators were male¹².

5. The need for mental health support continues to be prevalent:

- 37.6% of service users had support needs around their mental health¹³.
- 35.1% of service users in a sub-sample of 31,395 abuse profiles¹⁴ reported feeling depressed or having suicidal thoughts as a result of the abuse. In CBS, this was 34.0% of service users and in refuge services the percentage was much higher at 45.6%.

Note on comparisons

This report presents data on service users under many of the same categories presented in the previous report, *The Domestic Abuse Report 2021: The Annual Audit*. Although this may appear to show change over time, we cannot be confident that we are measuring change over time in service user profiles; rather, we are measuring difference between two samples of service users. With more organisations joining On Track the sample is changing year on year. Although we are consistent with our methodology and analysis, we cannot be sure that differences between them are the result of change due to time passing rather than other factors, for example structural inequalities faced by minoritised people, and differences in representation of minoritised people in each sample.

¹² These are the perpetrators recorded on On Track in cases of domestic abuse against female service users. Information about perpetrators was recorded in 29, 841 cases, there was not a perpetrator(s) recorded for every service user and some service users had multiple perpetrators recorded. Service users where no alleged perpetrator recorded: 5046. These are the perpetrators recorded on On Track in cases of domestic abuse against female service users. Information about perpetrators was recorded in 29, 841 cases, there was not a perpetrator(s) recorded for every service user and some service users had multiple perpetrators recorded. Service users where no alleged perpetrator recorded: 5046.

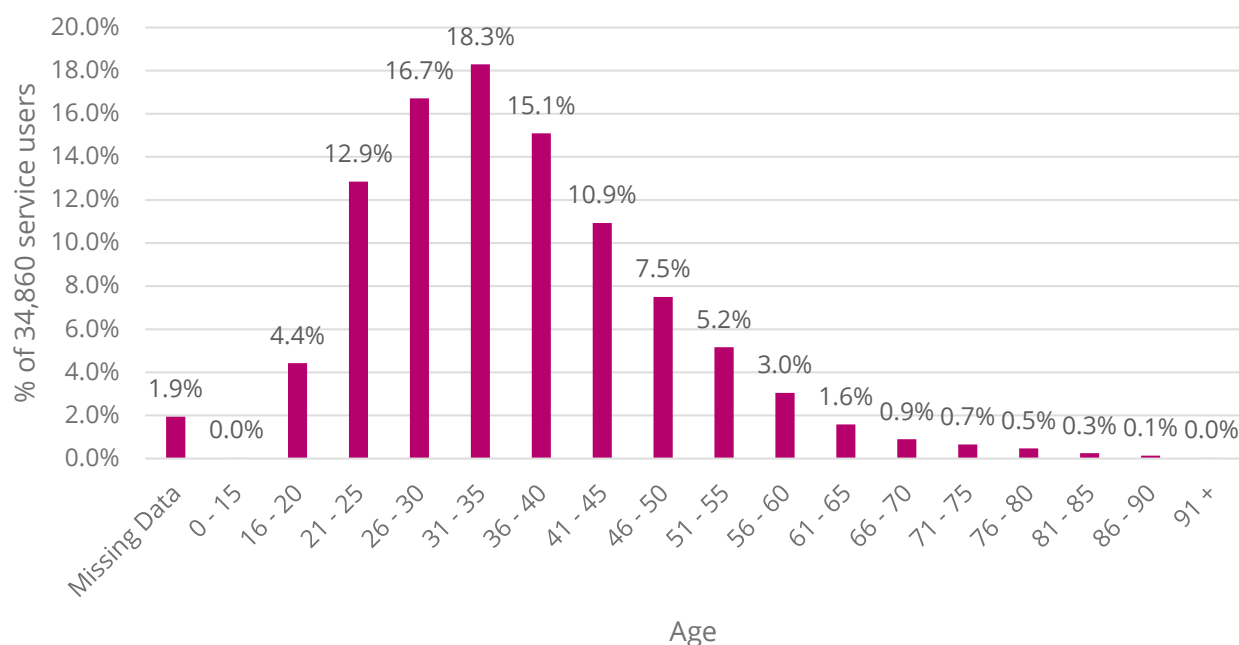
¹³ Missing data= 0.3%; Declined to answer= 0.2%; Don't know= 12.6%; Not asked= 4.6%

¹⁴ A sub-sample of 31,395 abuse profiles (3,194 refuge and 28,201 CBS), includes both historic and current abuse.

1.2 Age

- The ages of survivors in our sample ranged from under 18 to over 91, with the most common age group being 31-35 years (18.3%), closely followed by 26-30 years (16.7%) and 36-40 (15.1%).
- Older women were underrepresented in the sample. Only 4.0% of service users in the total sample were 61 or over and this fell to 1.6% in refuge services. This is unlikely to reflect need, as we know that older women experience particular barriers in accessing support (Age UK, 2019). The most recent Femicide Census Report showed that between 2009 and 2018, 14% of femicide victims were aged 66 and over. Of these, 34% were killed by intimate partners, and 25% by their sons (Femicide Census, 2020).
- Although the Crime Survey for England and Wales does not capture the experiences of older women, with their sample not exceeding women over the age of 74, it can be used to demonstrate that young women are an at-risk group for domestic abuse. In the year ending March 2020 women aged 16 to 19 years were significantly more likely to be victims of any domestic abuse in the last year than women aged 25 years and over (ONS, 2020).

Chart 1.1: Age of service users 2020-21* (On Track)

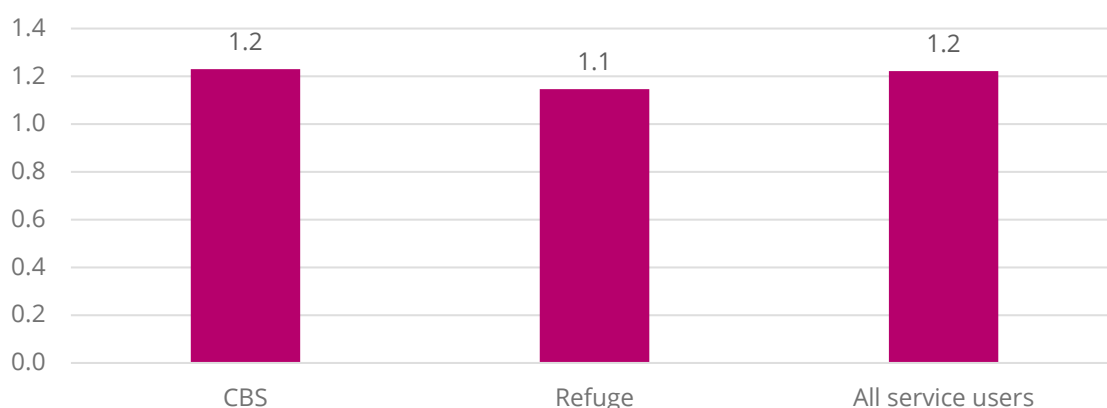


*Percentage of 34,860 service users in our sample

1.3 Children

- There were 42,598 children of service users in the sample, averaging 1.2 children per service user across all services.
- 60% of service users in CBS services had children¹⁵ and 5.9% were pregnant¹⁶. On average there were 1.2 children per service user¹⁷.
- 59.7% of women in refuge services had children¹⁸ and 7.3% were pregnant¹⁹. On average, there were 1.1 children per service user²⁰.
- 21,910 service users within the 34,860 sample had children.

Chart 1.2: Average number of children per service user 2020-21* (On Track)



*Average number of children per service user in our sample of 34,860 women (Refuge= 3, 274. CBS= 31,586)

¹⁵ Missing data unknown

¹⁶ Missing data= 0.1%; Declined to answer= 0.1%; Don't know= 10%; Not Asked= 3.8%

¹⁷ Missing data unknown

¹⁸ Missing data unknown

¹⁹ Declined=0%; Don't know=2.6%; Not asked= 1.1%

²⁰ Missing data unknown

1.4 Disability

- ▶ Overall, 24.5% of all survivors in the sample had at least one disability that they disclosed²¹.
- ▶ In refuge services 27.5% of all service users reported having a disability; the most common disability reported amongst all service users was having a mental health condition (29.6%), and 7.4% had more than one disability.
- ▶ In CBS services 24.2% of all service users were disabled; similar to refuge services, a mental health condition was the most common disability (16%) and 6.0% had more than one disability.

Women with physical disabilities make up a small percentage of women using domestic abuse services, although we know that disabled

women are more likely to experience domestic abuse (14.7% of disabled women experienced domestic abuse in the last year compared to 6.0% of women who were not disabled (ONS, 2020)). Of the survivors in the sample, only 9% of women in refuge had physical disabilities, yet demand is likely be much higher than the accessible space available. As detailed in Section 2.6, only 1.2% of refuge vacancies listed on Routes to Support in 2020-21 were suitable for a woman with limited mobility and just 1.4% of vacancies could accommodate a woman requiring a wheelchair accessible space.

²¹ Missing data= 0%; Don't know= 9.1%; Not Asked= 4.6%; Declined to answer= 0.1%

1.5 Sexual orientation and gender identity

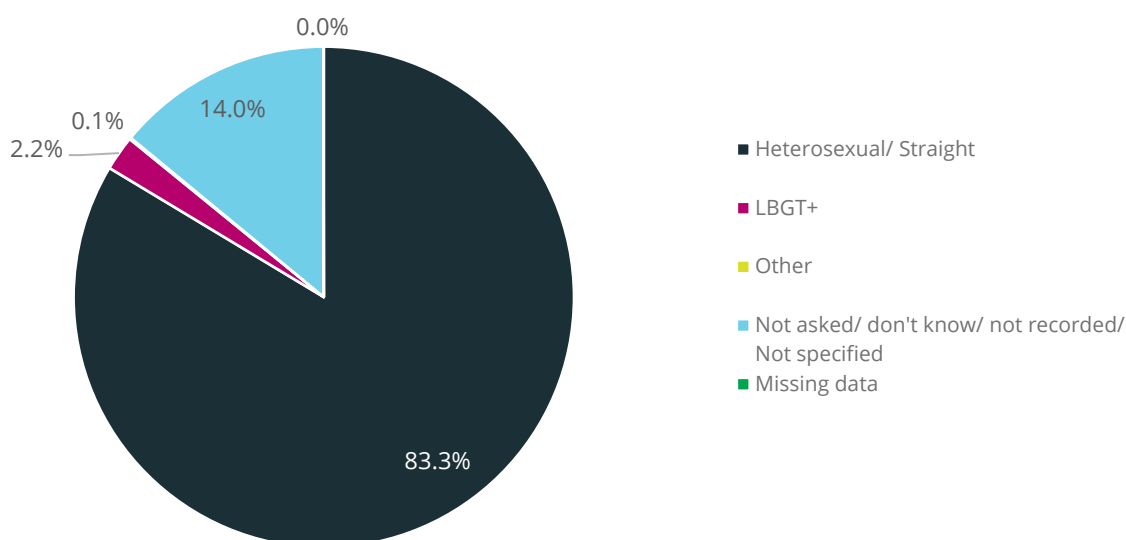
- 2.2% of service users overall (781) identified as lesbian, bisexual, gay, asexual, pansexual or queer²². In refuge, this number was 2.9%²³ and in CBS it was 2.2%²⁴.
- 0.6% of services users overall (225) were trans²⁵.

It is important to note that 13.9% of women did not disclose or were not asked about their sexual orientation²⁶ and 10.6% did not disclose or were not asked whether they were trans²⁷. As we know from research on LGBT+ survivors experiences of abuse, survivors experience a range of challenges

in accessing support (Stonewall, 2018; Gallop, 2020), so it may be that these women did not feel comfortable disclosing or did not feel it was necessary. This is important to consider as there are only five services exclusively for LGBT+ survivors on Routes to Support.

Sexual orientation data should not be used to assume the gender of the perpetrator(s). For example, a service user may be lesbian but the perpetrator(s) may be a male intimate ex-partner or family member/members²⁸.

Chart 1.3: Sexual Orientation of service users 2020-21* (On Track)



*Percentage of 34,860 service users in our sample

²² Missing data= 0%; Not asked= 0%; Not specified= 0%; Declined to answer= 0.4%; Don't know= 7.4%; Other= 0.1%

²³ Don't know= 2.3%; Not asked= 5.3%; Other= 0.1%

²⁴ Missing data= 0%; Not asked= 0%; Not specified =0%; Don't know= 7.9%; ; Not asked 6.7%; Not recorded= 0%; Other= 0.1%

²⁵ Missing data= 0%; Declined to answer= 0.1%; Don't know= 5.4%; Not asked= 5.1%; Not recorded= 0%

²⁶ Missing data= 0.0%; Not asked 0.0%; Not specified= 0.0%; Don't know 7.4%; Not asked 6.5%; Not recorded 0.0%

²⁷ Missing data= 0.0%; Declined to answer= 0.1%; Don't Know= 5.4%; Not asked= 5.1%; Not recorded= 0.0%

²⁸ On Track collects information about female and male survivors and survivors who do not define as male or female. This report only presents data from those who have self-defined as female.

1.6 Ethnicity

► Almost two thirds of service users (62.8%) were White British.

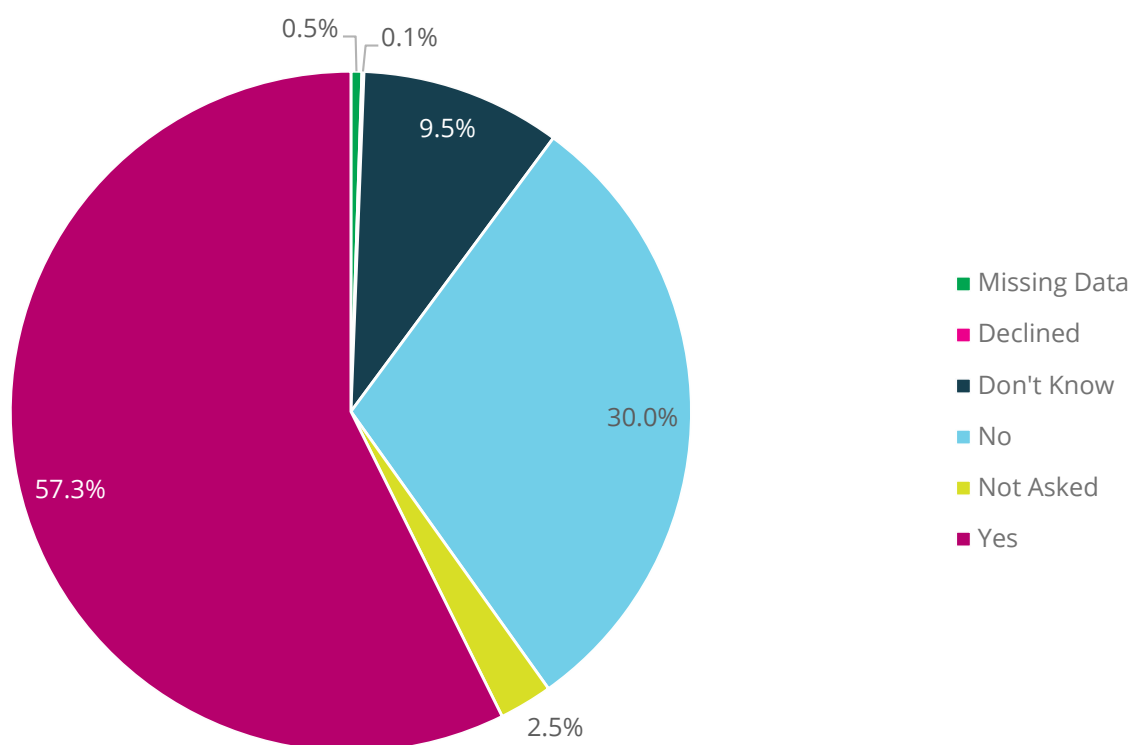
► 8.9% of services users were from Asian/Asian British ethnic backgrounds, and 6.2% were from Black/African/Caribbean/Black British ethnic backgrounds.

Table 1.1: What are the ethnic backgrounds of service users? 2020-21 (On Track)	Percentage of 34,860 service users in our sample
Missing data	0.9%
Asian/Asian British	
Indian	1.7%
Pakistani	3.8%
Bangladeshi	1.0%
Chinese	0.3%
Any other Asian background, please describe	2.1%
Black/African/Caribbean/Black British	
African	3.4%
Caribbean	1.5%
Any other Black / African / Caribbean background, please describe	1.2%
Mixed/Multiple Ethnic Background	
White and Black Caribbean	1.3%
White and Black African	0.3%
White and Asian	0.3%
Any other Mixed / Multiple ethnic background, please describe	1.0%
Other Ethnic group	
Arab	0.8%
Any other ethnic group, please describe	1.3%
White	
British	62.9%
Irish	0.6%
Gypsy or Irish Traveller	0.3%
Eastern European	3.8%
Any other White background, please describe	3.0%
Don't know	5.5%
Not asked	2.9%
Declined	0.2%

1.7 Nationality and citizenship

- Of the service users who were not British nationals (4,075), 30% (1,223) had no recourse to public funds²⁹.
- 29.6% of service users in CBS did not have recourse to public funds, this rose slightly to 31.8% of those in refuge.
- It is important to note that 9.5% of women did not know if they had recourse to public funds.
- Service users who were not British nationals had a wide range of immigration statuses. Most common was indefinite leave to remain (19.7%), followed by spouse visa (15.9%).
- There was a higher percentage of service users with indefinite leave to remain in refuge than using CBS (11.8% compared to 5.4%).

Chart 1.4: Recourse to public funds for those who are not British nationals 2020-21* (On Track)



*Percentage of service users who are not British nationals (4,075)

Table 1.2: What are the immigration statuses of service users (of those who are not British nationals)? 2020-21 (On Track)	Percentage of 4,075 who are not British nationals
Indefinite leave to remain (ILR)	19.5%
Spouse visa	15.9%
EEA national currently working	9.9%
Unclear/unknown	7.2%
Limited leave to remain	6.7%
UK national	6.4%
EEA national other	5.5%
EEA national receiving welfare benefits	5.1%
EEA family member	4.4%
Not asked	4.0%
Insecure/no status	3.3%
Dependant on husband's/wife's visa	2.6%
Asylum seeker awaiting decision	2.0%
Discretionary leave to remain	1.8%
Refugee	1.2%
EEA national financially self-supporting	1.1%
Study visa	1.1%
Work visa(s)	1.1%
Visitor's visa	0.5%
Missing data	0.3%
EEA national in UK studying	0.2%
Declined	0.2%
Settled status	0.1%
British/EU national	0.0%
Humanitarian protection	0.0%
Husband/wife sponsorship	0.0%

1.8 Experiences of abuse

- ▶ The length of abuse experienced before accessing the support service ranged from less than a month to 66 years; the average length was six years. 35 women who were supported reported experiencing over 50 years of abuse.
- ▶ 94.3% of perpetrators were male³⁰.
- ▶ 87.8% of a sub-sample of service users³¹ had experienced emotional abuse and 66.6% had experienced jealous or controlling behaviour.
- ▶ 54.8% of this sub-sample had experienced physical abuse. In refuge the number was much higher at 67.2%.
- ▶ 50.7% of service users in refuge, and 30.5% of CBS users in the sub-sample had experienced financial abuse. The economics of abuse however, can spread wider than financial abuse from a perpetrator, with many survivors facing additional economic and housing challenges after leaving the relationship (Women's Aid, 2019).
- ▶ 36.7% of service users in refuge in the sub-sample, and 34.8% of CBS users had experienced surveillance, harassment or stalking.

More detail in Chart 1.5 on page 20

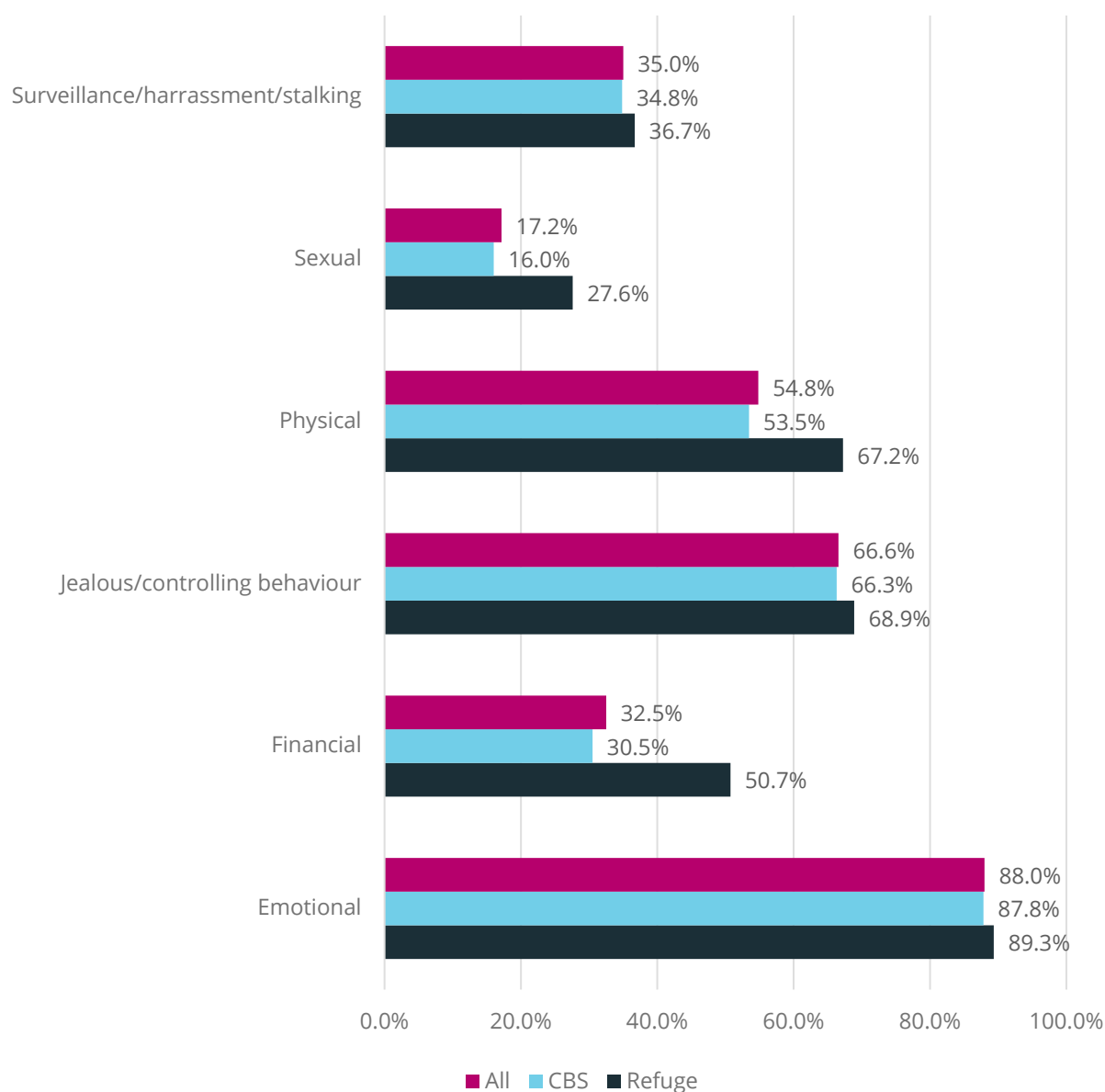
- ▶ 16% of service users using CBS in the sub-sample had experienced sexual abuse; this was much higher for those using refuge support (27.6%).
- ▶ 21.8 % of a sub-sample of service users³² had experienced attempted strangulation or suffocation. In refuge the percentage was 27.9% and in CBS it was 21.1%. Under the new Domestic Abuse Act 2021, it is worth noting that non-fatal strangulation is now a criminal offence.
- ▶ 27.0% of this sub-sample had experienced threats to kill. In refuge the percentage was 36.1% and in CBS it was 26.0%.
- ▶ 35.1% of service users in this sub-sample reported feeling depressed or having suicidal thoughts as a result of the abuse. In CBS, this was 34.0% of service users and in refuge services the percentage was much higher at 45.6%.
- ▶ 9.6% of refuge service users in this sub-sample said they had self-harmed as a way of dealing with the abuse.

More detail in Chart 1.6 on page 21

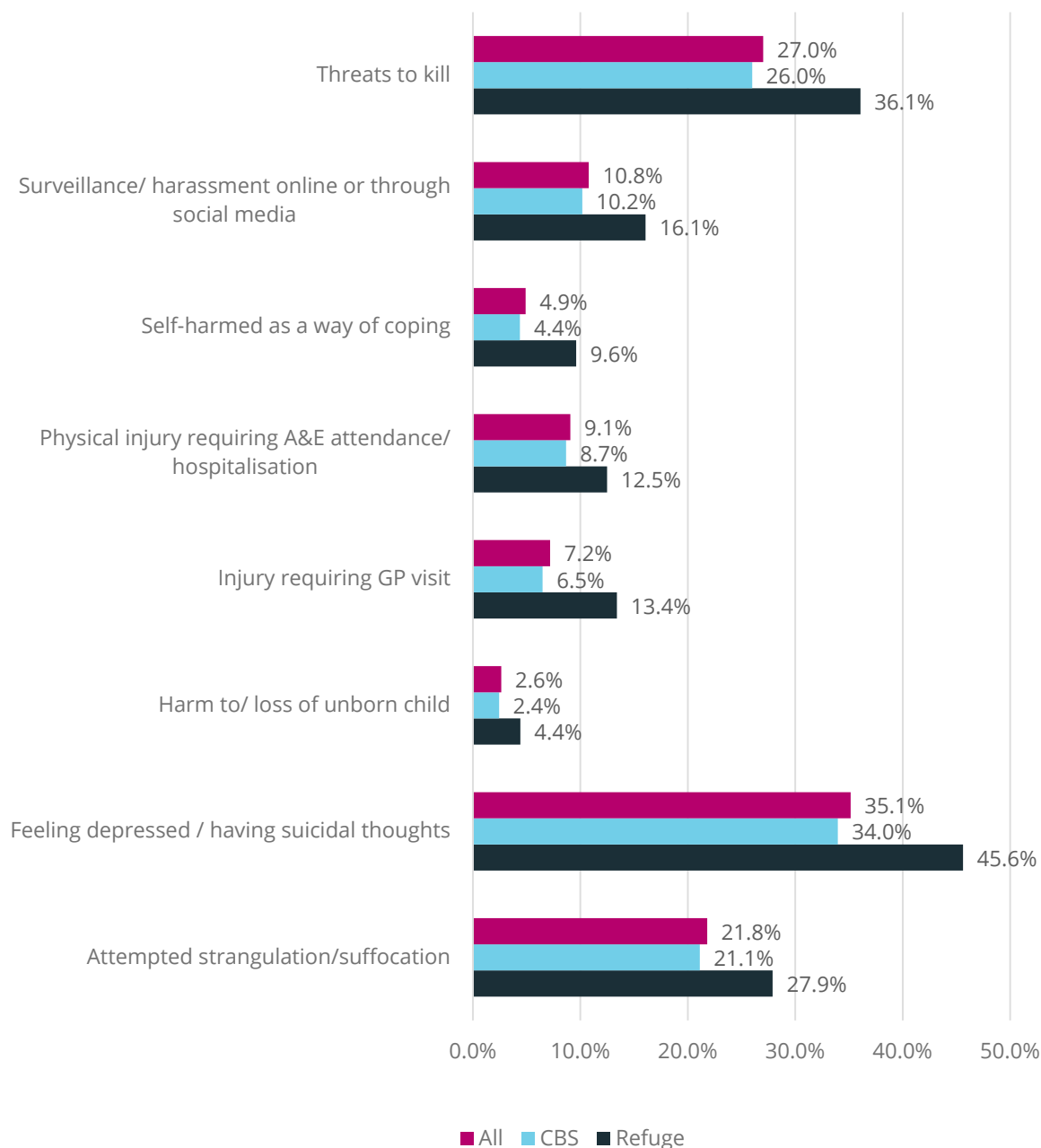
30 These are the perpetrators recorded on On Track in cases of domestic abuse against female service users. Information about perpetrators was recorded in 29,841 cases, there was not a perpetrator(s) recorded for every service user and some service users had multiple perpetrators recorded. Service users where no alleged perpetrator recorded: 5046.

31 From sub-sample of 25,988 community-based and refuge service users within the overall sample of 34,860 for whom an abuse profile on current abuse is available

32 A sub-sample of 31,396 abuse profiles (3,194 refuge and 28, 201 CBS) , includes both historic and current abuse.

Chart 1.5: Type of abuse experienced by service users 2020-21* (On Track)

*From sub-sample of 25,988 service users within the overall sample of 34,860 service users for whom an abuse profile on current abuse is available. When considering this data, it is worth noting that a service user is likely to experience multiple abuse types and many types of abuse are underpinned by controlling behaviour. Multiple abuse profiles may be recorded if survivors access more than one service or return to a service.

Chart 1.6: Experiences of service users 2020-21* (On Track)

*From a sub-sample of 31,395 CBS and refuge service users within the overall sample of 34,860 for whom an abuse profile is available. Of these 34,860 service users, 21,469 were seeking support for current abuse and 5,907 were seeking support for historic abuse. This information was missing for 2,042 service users (some service users were seeking support for both current and historic abuse). Multiple abuse profiles may be recorded if survivors access multiple services or return to a service within the reporting period.

1.9 Support needs

- ▶ 37.6% of service users had support needs around their mental health³³; for service users in CBS, this was 36.3%³⁴ and for those in refuge services this was higher at 49.2%³⁵. 5.8% of service users had a 'dual diagnosis' - support needs for their mental health as well as support needs around alcohol and/or drug issues.
- ▶ 10.9% had support needs around their physical health³⁶; for service users in CBS this was 10.4%³⁷ and for those in refuge services this was higher at 16.2%³⁸.
- ▶ 5.3% of women accessing support services required an interpreter for a spoken language other than English³⁹.
- ▶ 0.7% were d/Deaf⁴⁰ or hearing impaired, some of whom will require a British Sign Language interpreter or other forms of reasonable adjustment to ensure they can access support services.

33 Missing data= 0.3%; Declined to answer= 0.2%; Don't know= 12.6%; Not asked= 4.6%

34 Missing data= 0.3%; Declined to answer= 0.2%; Don't know= 13.5%; Not asked= 5.0%

35 Missing data= 0.1%; Declined to answer= 0.2%; Don't know= 4.1%; Not asked= 4.6%

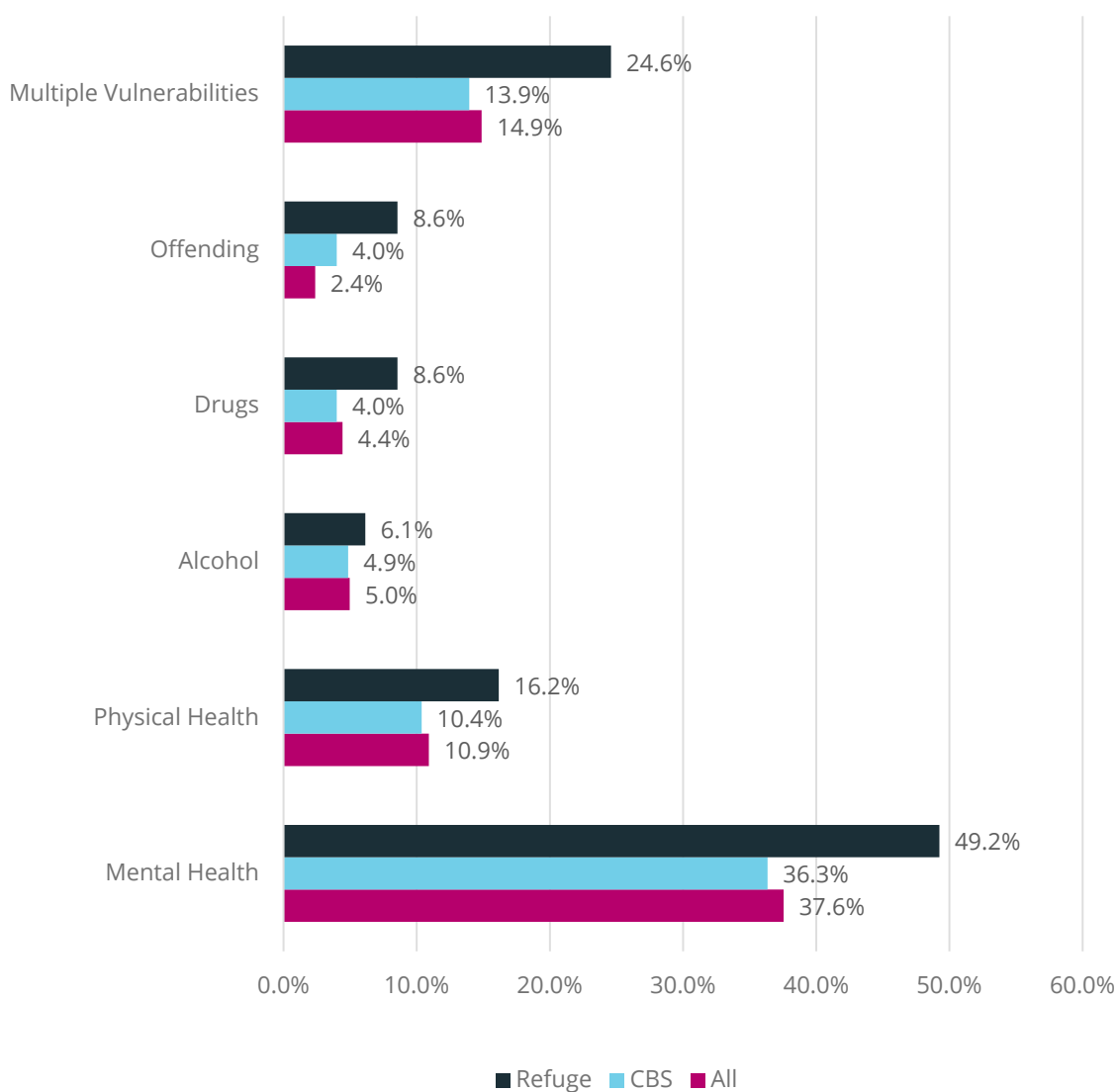
36 Missing data= 0.2%; Declined to answer= 0.1%; Don't know= 12.6%; Not asked= 5.4%

37 Missing data = 0.2%; Declined to answer= 0.1%; Don't know 13.5%; Not asked= 5.8%

38 Don't know = 3.2%; Not asked = 0.8%

39 Missing data= 0.1%; Declined to answer= 0.1%; Don't know= 5.5%; Not asked= 1.7%

40 The word deaf is used to describe or identify anyone who has a severe hearing problem. Deaf with an uppercase D is used by many organisations to refer to people who have been deaf all their lives, or since before they started to learn to talk. Many Deaf people have a sign language as their first language and may need specific language support. For more information, please see www.signhealth.org.uk/about-deafness/deaf-or-deaf/

Chart 1.7: Support Needs of service users 2020-21* (On Track)

*Percentage of 34,860 service users in our sample. Some survivors will not have been able to access services because the service was not resourced to meet their specific support needs.

Section 2:

The provision of services

This section of the report looks at information from Routes to Support and uses a format employed in previous editions of the Annual Audit to provide the best insight into the numbers and accessibility of local domestic abuse service services in England.

Key findings

1. Domestic abuse services continue to offer a wide range of service types:

- ▶ On 1st May 2021, there were 229 domestic abuse service providers running 391 local services throughout England.
- ▶ These 391 services deliver a range of service types including community-based support, open-access support such as helplines and therapeutic support like counselling. Of the 391 services, 269 included refuge services and 223 included dedicated services for children/young people.
- ▶ Between 1st May 2020 and 1st May 2021, 20 local services had a net increase in the number of service types they offered. Only 55.0% of these had a corresponding increase in staff.
- ▶ The number of services delivering some service types fell. The most significant change was in the number of counselling services, with the number of local services providing counselling decreasing by 15.
- ▶ Two refuge services run exclusively for LGBT+ survivors were added to Routes to Support in 2020-21

2. We saw an increase in refuge spaces, largely due to emergency funding made available in response to the pandemic. However more needs to be done to make sure these spaces are sustainable and accessible to all:

- ▶ The number of spaces in refuge services increased by 354 from 3,935 on 1st May 2020 to 4,289 on 1st May 2021; although this is a net change and does not give a full picture of change in the sector as it does not account for services opening or closing during the year. This is the highest increase seen in recent years, yet this figure still falls short of the number of spaces recommended by the Council of Europe by 1,366, which represents a 24.2% shortfall⁴¹. It is yet to be seen whether refuge spaces set up with emergency Covid-19 funding will

⁴¹ Council of Europe (2008): "...safe accommodation in specialised women's shelters, available in every region, with one family place per 10,000 head of population." (p. 51)

remain once this funding has come to an end. We know that a significant proportion of refuge spaces, and in particular spaces in 'by and for' expert women's organisations⁴² for Black and minoritised women, are not funded through local authority commissioning arrangements, leaving them in a precarious position and reliant on insecure funding streams (see Section 3.4).

- Many of the additional spaces made available between May 2020 and May 2021 were available to men, which means the overall number of spaces for men has increased by 55.2% (100 additional spaces). On 1st May 2021 there were a total of 281 refuge spaces available

to men, 23 for men only and 258 for either men or women.

- Only 6.3% of all vacancies posted on Routes to Support in 2020-2021⁴³ could consider women who had no recourse to public funds. This makes it even more challenging to assess the level of demand from this marginalised group of women.
- Less than half of refuge vacancies posted on Routes to Support in 2020-2021⁴⁴ could accommodate a woman with two children. This fell to less than one in five for a woman with three children.

3. Women continued to face barriers to accessing support services and travelled significant distances to seek refuge:

- 61.9% of all the referrals received in refuge services using On Track were rejected. The main reason why referrals to refuge services were rejected was a lack of space or capacity; with 26.5% of rejected referrals being for this reason. This also equates to 15.6% of all referrals received being rejected due to lack of space or capacity.
- 45.0% of all the referrals received in community-based services (see **Table 2.9**) were rejected (for any reason). The main reasons for rejection were that the survivor did not want support (31.4% of all those referrals were rejected), that the service was unable to contact the survivor (22.7% of all those referrals were rejected) and

that the client was already in service (21.8%)

- The majority of women (79.6%) placed in refuge between 1st July 2020 and 31st March 2021 came from a different local authority area to the refuge they moved to (2,788 out of 3,503 women⁴⁵).
- The majority of women travelled to a refuge that was located within the same region⁴⁶ as their previous home (71.9%, 2,518 out of 3,503 women), however over a quarter of women travelled to another region to access a refuge suitable for her needs that was located in an area away from the perpetrator/s of abuse (28.1%, 985 out of 3,503 women).

⁴² See Appendix 1: Glossary for definition of 'by and for' expert organisations

⁴³ April 2020 to March 2021

⁴⁴ April 2020 to March 2021

⁴⁵ In addition to the 3,503 women for which a previous location was recorded, there were 1,771 women placed in refuge between 1st July 2020 and 31st March 2021 for which their previous location was recorded as 'unknown'.

⁴⁶ Region here refers to another region of England, for example, the North West of England, or another country in the UK (Northern Ireland, Scotland or Wales)

4. The restrictions related to Covid-19 presented challenges to domestic abuse services and meant they had to identify new ways of providing their services:

- There were significantly fewer refuge vacancies compared to the previous year. This was largely due to the effects of the Covid-19 pandemic; we know services faced a range of issues related to Covid-19 that impacted on refuge availability, such as difficulties finding move-on accommodation for women, being unable to accept new referrals due to staffing capacity and having to reduce the number of women/families in the refuge to meet government guidance (Women's Aid, 2020a). Despite the overall increase in refuge spaces, there were 2060 fewer vacancies posted in 2020-21 than in 2019-20 (a fall of almost one-fifth, 19.9%). The reduction in availability was mainly in the first half of the year when pandemic restrictions were more severe. There were 26.6% fewer vacancies posted between April and September 2020 compared to the same period in 2019, falling to 8.5% fewer vacancies posted between October 2020 and March 2021 compared to the same period in the previous year.
- Online live chat was added as service type on Routes to Support for the first time, in recognition that many local services now offer this type of service. 28 local services were recorded as running an online chat service on 1st May 2021.

2.1 Who are the service providers?

There were 229 domestic abuse service providers with services listed on Routes to Support in England in May 2021. These organisations were running 391 local services between them throughout England. 269 of these included refuge services and 223 included dedicated services for children/young people. Of the 229 providers, 160 (running 229 local services) are members of Women's Aid and 23 (running 28 local services) are members of Imkaan⁴⁷. Of these 23 Imkaan members, 21 (26 local services) are members of both Imkaan and Women's Aid. 44 providers (running 94 local services) hold the Women's Aid National Quality Standards.⁴⁸

The majority (66.8%) of local domestic abuse support services are run by dedicated providers⁴⁹. Of the 269 local services with a refuge service, 65.8% of these are run by a dedicated provider. Just over a third of local domestic abuse services are run by organisations that also offer other types of services or have a wider remit, including housing associations, other charities, or local authorities. Some local services provide specialist support dedicated to certain groups of women, with 76.7% of these services being run by dedicated providers (see 2.4).

International conventions and frameworks include domestic abuse within a wider definition

⁴⁷ <https://www.imkaan.org.uk/> : "We are the only UK-based, second-tier women's organisation dedicated to addressing violence against Black and minoritised women and girls i.e. women who are defined in policy terms as Black and 'Minority Ethnic' (BME)."

⁴⁸ <https://www.womensaid.org.uk/what-we-do/national-quality-standards/> : "The Standards support dedicated specialist domestic abuse services by providing a set of criteria against which they can evidence their quality."

⁴⁹ Organisations constituted solely for the purpose of delivering violence against women and girls (VAWG) support services.

of violence against women and girls (VAWG), a term which also encompasses other interlinked forms of violence such as sexual violence and so called 'honour'-based violence⁵⁰. Of the domestic abuse services included in this report, most also support women who have experienced/are experiencing another form of VAWG, as shown in **Table 2.1** below.

We have seen a net increase of 21 local services since 1st May 2020, when 222 providers were running 370 services, compared with 229 providers running 391 services at 1st May 2021. Net change, however, does not reflect the changes to provision that happen throughout the year, for example where new services are established in some areas, others may be closing elsewhere due to lack of funding. Tendering processes can also result in services shifting to other providers over

the course of the year, however this happened with less frequency in 2020-21 compared to recent years. There were 32 local services added to Routes to Support and 11 services removed from the system during 2020-21⁵¹. Of the 11 services removed from Routes to Support, five of these were removed because the tender for the service changed hands to another provider, compared to the 12 and 10 services respectively that were removed from Routes to Support due to a tender change in 2019-20 and 2018-19. This may suggest that some contracts were extended in 2020-21 to reduce disruption at a time when services were under significant pressure due to Covid-19.

Table 2.1: Support for women experiencing other forms of violence against women and girls (VAWG), May 2021 (Routes to Support)

Form of VAWG	Number of refugees	% of refugees	Number of CBS services	% of CBS services
Female genital mutilation (FGM)	238	88.5%	221	64.6%
Forced marriage	264	98.1%	266	77.8%
So called 'honour'-based violence	253	94.1%	247	72.2%
Sexual violence	175	65.1%	186	54.4%
Trafficking	178	66.2%	164	48.0%
All	269		342	

⁵⁰ The Council of Europe Convention on preventing and combating violence against women and domestic violence recognises "the structural nature of violence against women as gender-based violence, and that violence against women is one of the crucial social mechanisms by which women are forced into a subordinate position compared with men" <https://www.coe.int/fr/web/conventions/full-list/-/conventions/rms/090000168008482e>

⁵¹ Between 1st May 2020 and 30th April 2021

2.2 Specialist support for women experiencing additional inequalities

In recognition of the specific needs and experiences of women experiencing additional inequalities and the intersecting forms of discrimination that women face, there are services across the country which provide dedicated support to certain groups of women. There are 39 refuges in England which are run for a specific group of women. Availability of these services is very low: spaces in dedicated services make up just 11.4% of all refuge spaces in England, and just under half of these are in London. Not all of these services are 'by and for' expert organisations, led by women from the group they support. Of the 28 refuges which are

run exclusively for Black and minoritised women, 18 are run by organisations that are members of Imkaan. Of the 10 refuge services which are not members of Imkaan, 6 are run by dedicated domestic abuse services, 3 are run by housing associations and one is run by a charity which also provides wider services other than VAWG support. Two refuge services run exclusively for LGBT+ survivors were added to Routes to Support in 2020-21. **Table 2.2** gives a full breakdown of services run exclusively for a specific group and shows the services that are based in London. **Table 2.3** shows a breakdown of the different types of providers running these services.

Table 2.2: Services (with number of refuge bedspaces) exclusively for groups, May 2021 (Routes to Support)

Service dedicated for	London	All England
Black and minoritised women	20 (202)	37 (364)
Women with insecure immigration status	0 (0)	1 (62)
Women from specific religious group (no refuge services)	2 (0)	2 (0)
Eastern European women (no refuge services)	1 (0)	3 (0)
Women with substance use/alcohol use/mental health support needs	2 (14)	3 (21)
d/Deaf women (no refuge services)	1 (0)	2 (0)
Women who have experienced/are experiencing forced marriage (no refuge services)	0 (0)	2 (0)
LGBT+ survivors (no refuge services)	2 (0)	5 (8)
Women over 45	0 (0)	1 (4)
Young women (16-24)	0 (0)	2 (19)
Women with learning disability	2 (12)	2 (12)
Total	29 (228)	60 (490)

**Table 2.3: Provider types of services run exclusively for groups, May 2021
(Routes to Support)**

Service dedicated for	Dedicated provider	Housing Association	Other	All
Black and minoritised women	32	3	2	37
Women with insecure immigration status	0	0	1	1
Women from specific religious group	2	0	0	2
Eastern European women	3	0	0	3
Women with substance use/alcohol use/mental health support needs	2	1	0	3
d/Deaf women	0	0	2	2
Women who have experienced/are experiencing forced marriage	2	0	0	2
LGBT+ survivors	4	1	0	5
Women over 45	1	0	0	1
Young women (16-24)	2	0	0	2
Women with learning disability	0	1	1	2
Total (%)	48 (80.0%)	6 (10.0%)	6 (10.0%)	60

2.3 Types of services

Local domestic abuse service providers in England offer a range of service types to meet the needs of the survivors and child survivors they support (**Table 2.4**). Service types include:

- ▶ refuge services (including a range of accommodation types such as shared, self-contained or dispersed, which meet the different needs of women and children accessing the service);
- ▶ resettlement services for women moving on from refuge services;
- ▶ community-based support (CBS) services (including outreach, floating support and advocacy);
- ▶ open access services (such as a helpline, drop-in services or other non-referral services);
- ▶ dedicated support for children and young people (CYPS);
- ▶ therapeutic services (such as formal counselling, support groups or group work programmes); and
- ▶ prevention work (such as educational work with schools).

Full definitions of these service types and the work they do can be seen in Appendix 3. Both refuge and CBS services run CYPS and therapeutic support as part of their core work, alongside delivering a planned programme of emotional and practical support and facilitating peer support between service users.

As shown in **Table 2.4**, there have been changes in the number of all service types compared with figures at May 2020. The most significant change has been in the number of counselling services, with the number of local services providing counselling decreasing by 15. We know that many services faced staffing issues and had to change

the ways in which they operated in 2020-21 due to the pandemic (Women's Aid, 2020a). Online chat was added as a service type option on Routes to Support during 2020-21, in recognition that many local services now offer this type of service. In May 2021, 28 local services were recorded as running an online chat service. An online chat service enables survivors to access support and information directly from a trained support worker in real time through a computer, phone or other internet device. Covid-19 restrictions that were in place throughout 2020-21 meant that many women experiencing domestic abuse were spending increased amounts of time at home with the perpetrator of abuse (Women's Aid, 2020). Accessing an online chat service can be more discrete than, for example, making a phone call to a helpline, and can therefore provide vital access to support when making contact with other support services is difficult. Other notable changes to types of services are an increase in the number of local services providing a helpline, and an increase in the number of services offering prevention work. There has also been a slight increase in the overall number of refuge services.

Analysis of staffing levels at local services and the numbers of service types being delivered during 2020-21 indicate that some local services extended their provision without a corresponding increase in staffing. For example, of the 24 services that had a net increase in the number of service types they offered between May 2020 and May 2021, 50.0% reported no change to staffing level and one service reported they were operating with a smaller staff team despite providing additional service types. This continues a trend seen in recent years of some local services having to increase their provision without a corresponding increase in resource.

Table 2.4: Types of support services for women available in England, May 2021 (Routes to Support)

Service types	Number of services	Change from May 2020
Refuge	269	+6
Resettlement	208	+1
Floating support	78	-6
Outreach	196	+1
IDVA service*	142	+7
Prevention work	148	+8
Helpline	146	+9
Drop-in	93	-3
Online chat**	28	-
Formal counselling	137	-15
Support groups	255	+2
CYPS	223	+3

*This is the number of Independent Domestic Violence Advocate (IDVA) services, not the number of individual staff members working as IDVAs.

**Online chat was added as a service type on Routes to Support during 2020-21

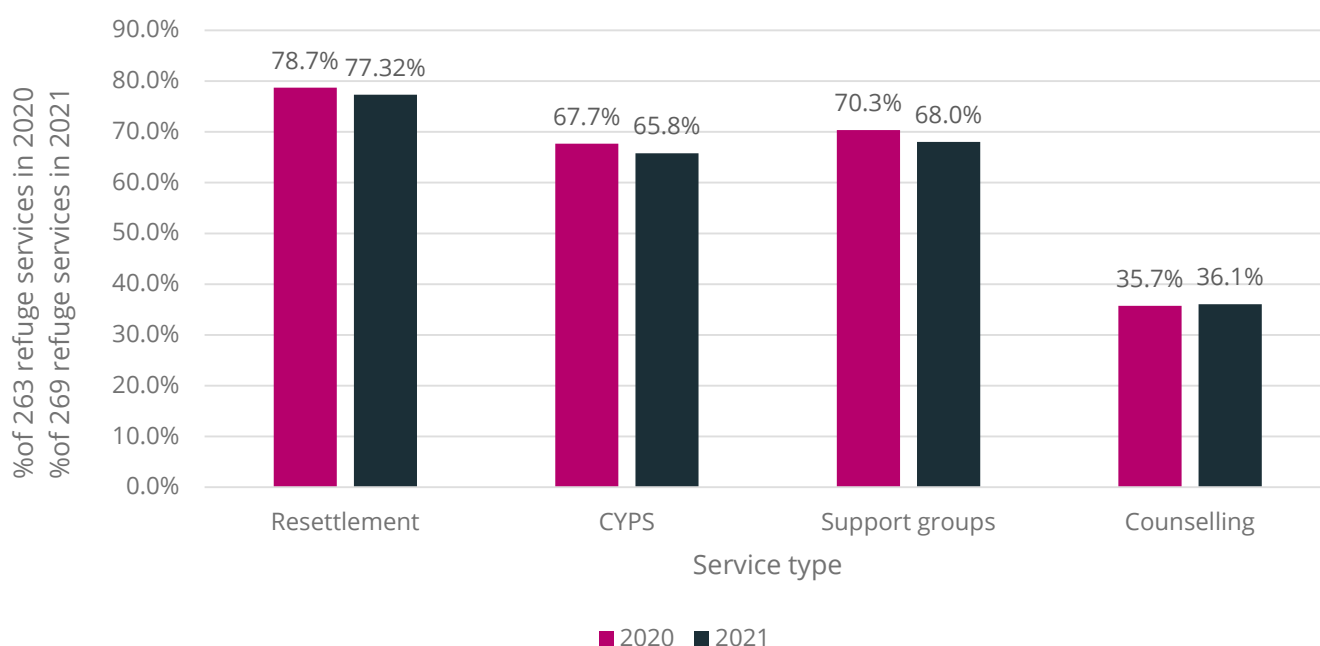
2.4 Refuge services and spaces

As mentioned in Section 2.3, 269 of the 391 local services available in England on 1st May 2021 were running refuge services. Refuge services include accommodation in shared, communal accommodation, self-contained properties located on the same site or dispersed properties in the community. They are distinct from other types of emergency accommodation because residents receive a planned programme of therapeutic and practical support designed to facilitate women's recovery from experiences of domestic abuse. This support is informed by women's strengths, choices and needs, and can involve (but is not limited to) one-to-one emotional support, group work with other residents, legal advice and support with housing. Other service types are often run alongside refuge to assist with different aspects of a woman's recovery, such as a formal

counselling service to process the emotional and psychological effects of domestic abuse, or a resettlement service to support with the transition from refuge to independent living. As shown in **Chart 2.1**, many local services running a refuge service do not have the resource to provide these additional service types. There has been little change since 2020 in the percentage of refuge services which offer additional service types, and it is still the case that less than three-quarters (68.0%) of local refuge services were able to provide support group/group work programmes to residents and only 65.8% of refuge services have a dedicated CYPS service. Only 36.1% of refuge services - just over a third - were able to provide a formal counselling service.

Refuge services varied in size from just one shared house with space for two households, to a refuge

Chart 2.1: Service types in refuge services for women available in England, May 2021 (Routes to Support)



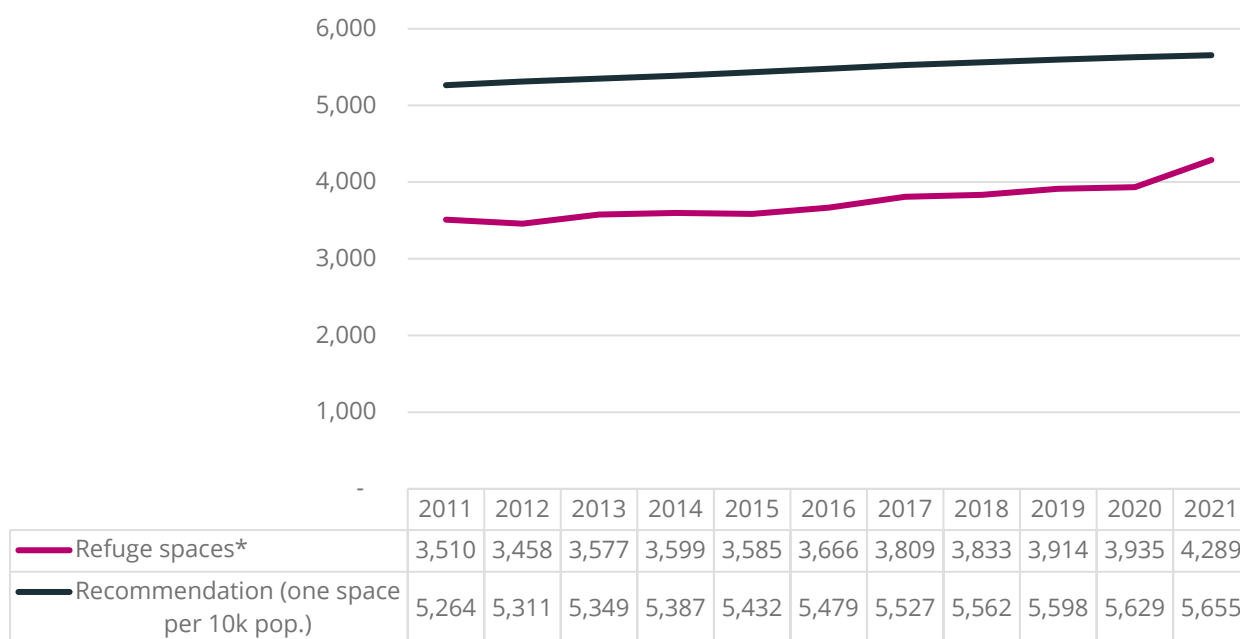
service with over 75 units of accommodation across different sites. This variation means that, to examine the current level of refuge provision and changes over time, we need to look at the number of spaces available in refuge services. One space is one unit of accommodation for a woman and her children (one household), regardless of how many beds or cots are in the unit.

There has been an increase in the number of spaces in England every year since 2010. Between May 2020 and May 2021, we have seen the highest ever yearly increase, largely as a result of additional refuge spaces that were set up with emergency funding made available in response to Covid-19. In the year ending May 2021, there was an increase of 354 spaces, from 3,935 bedspaces for women at May 2020 to 4,289 bedspaces at May 2021. Some of these spaces are not exclusively for women, with 258 of these

4,289 spaces being for either men or women. See 2.8 for full details of the provision that is available for men. Many of the additional spaces made available between May 2020 and May 2021 were available to men, which means the overall number of spaces for men has increased by 55.2% (100 additional spaces) from May 2020 to May 2021.

Despite the increase in spaces, the figure of 4,289 still falls short (by 1,366) of the Council of Europe's minimum recommendation⁵² (see **Chart 2.2**), which represents a 24.2% shortfall. There is regional variation, and although refuge space shortfall in England has reduced overall (compared to 30.1% on 1st May 2020) largely as a result of the increase in spaces that were set up with emergency Covid-19 funding, it has not fallen in every region. We know the refuge sector is supported by a considerable number of spaces which receive no local authority commissioned funding (16.8% of

Chart 2.2: Refuge bedspaces since 2010 by year (Routes to Support)



⁵² Council of Europe (2008): "...safe accommodation in specialised women's shelters, available in every region, with one family place per 10,000 head of population." (p. 51). Based on ONS mid-year estimate for 2018: 55,977,178.

all refuge bedspaces running at 1st May 2021), with a disproportionate number of these non-commissioned spaces provided within expert services by and for Black and minoritised women (see Section 3.4). The level of shortfall would be significantly higher if these non-commissioned services were not available.

The shortfall in refuge spaces means there will only be a limited number of spaces available on any given day, and significantly fewer vacancies were made available during 2020-21 overall. As shown in **Table 2.5**, page 36) there were 2,060 less vacancies posted during 2020-21 compared to the number made available in 2019-20, which is a decrease of almost one-fifth (19.9%). The average number of times each space became available fell from 2.6 times per year in 2019-20 to 1.9 times per year in 2020-21, despite the increase in the number of spaces overall. Spaces likely became available less frequently in 2020-21 due to the impact of Covid-19. For example, some refuge services experienced difficulties sourcing move-on accommodation due to restrictions or had to reduce the number of referrals they could take due to government guidelines on shared housing (Women's Aid, 2020). These issues had a greater impact on vacancies in the first half of the year when pandemic restrictions were more severe, with there being 26.6% fewer vacancies posted between April and September 2020 compared to the same period in 2019, falling to 8.5% fewer vacancies posted between October 2020 and March 2021 compared to the same period in the previous year.

The actual number of spaces available to a woman looking for refuge will be dependent on whether available spaces are appropriate for her specific needs and circumstances. To determine how many spaces will be suitable a referring agency will ask a number of questions. These questions can include the following:

1. How many children does she have?

Units of refuge spaces vary in size and will be able to accommodate either single women only or families of different sizes. The availability of suitable spaces will depend on the number of children the woman is fleeing with. Of the vacancies listed on Routes to Support in 2020-21, 42.2% were suitable for a woman with two children. Less than one in five vacancies (15.3%) could accommodate a woman with three children.

2. Is she in paid employment?

Housing costs are higher in supported accommodation services such as refuges due to a number of factors, such as maintenance of communal areas and security arrangements, meaning women in low-paid employment may need to leave their jobs in order to access benefits to cover the cost of staying in refuge. For women in paid employment who are able to cover these costs, going into refuge may still mean having to leave her job for safety reasons. If a woman does wish to remain in paid employment and it is safe for her to do so, this can restrict the geographical area in which she can search for refuge as she will generally need to be located close to her place of work.

3. Does she have additional support needs?

Refuges are only able to accept a referral if they have the staff capacity, suitable facilities and specialist support that may be required to meet a woman's specific needs. Some women require additional support around mental health, or drug/alcohol use and this is often related to their experiences of domestic abuse. As the information on vacancies (**Table 2.5**, page 36) and the availability

of specialist workers (**Tables 2.6** and **2.7** on page 36) shows, it can be difficult for a woman to access a refuge space if she has additional support needs around mental health, or drug/alcohol use. The number of refuge services with specialist support workers has decreased slightly from 2020; now only 14.5% of all refuge services have a specialist mental health support worker(s) and only 9.3% have a specialist drug use workers and specialist alcohol use workers. As noted in Section 2.5, the number of local services which provide a counselling service has fallen by 15 since 2020. Refuge service providers also have to consider the needs of existing residents and dynamics in the refuge when assessing the suitability of a referral.

4. Does she have accessibility needs?

For women who need vacancies in physically accessible rooms (for themselves or their children), options are very limited. During 2020-21 only 1.4% of vacancies were in rooms fully accessible for wheelchairs and a further 1.2% were suitable for someone with limited mobility. These figures vary from region to region. Women with hearing or vision impairments are also likely to require specific facilities for services to be accessible to them.

5. Does she have recourse to public funds?

If a woman is denied recourse to public funds⁵³ the spaces available to her will be limited. As shown in **Table 2.5** only 6.3% of all vacancies listed during 2020-21 could consider women who were not eligible to access public funds. This is little changed from the 5.4% of vacancies listed during 2019-20. In many cases this is also conditional on another agency, such as social services, guaranteeing funding to cover her stay. The low numbers of vacancies that are suitable for women with no recourse makes it even more challenging to assess the level of demand from this marginalised group of women. Data from Routes to Support shows that there were only 79 women with no recourse to public funds who made successful referrals to refuge services in London between 1st April 2020 and 31st March 2021, yet in the same period there were 102 recorded instances of women with no recourse to public funds who made unsuccessful referrals in London. This isn't a reflection of unmet need however as it includes only those referrals made when a vacancy suitable for a woman with no recourse was available.

53 If someone's residence permit to live in the UK includes the condition 'no recourse to public funds' then that person will not be able to claim most state benefits.

Table 2.5: Refuge vacancies posted in 2020-21. % vacancies for each group (change from 2019-20)

Types of vacancies	Vacancies available to different groups	Change since 2019-20
# All vacancies posted, England	8,280	-2,060
Woman plus two children	42.2%	-0.8%
Woman plus three children	15.3%	+0.2%
No recourse to public funds	6.3%	+2.3%
Full wheelchair access	1.4%	+0.5%
Person with limited mobility	1.2%	0.0%

Table 2.6: Community-based services with specialist support workers, May 2021 (Routes to Support)

Specialist worker type	Mental health support needs	Drug use support needs	Alcohol use support needs
Number of community-based services	29	16	15
Change from 2020	-1	-2	-2

Table 2.7: Refuges with specialist support workers, May 2021 (Routes to Support)

Specialist worker type	Mental health support needs	Drug use	Alcohol use
Number of refuge services	39	25	25
Change from May 2020	-1	-1	-1

2.5 Service capacity and demand for support

Although domestic abuse services supported large numbers of women and children over the previous financial year, this annual audit shows the great need for domestic abuse services and the gaps that exist between capacity and demand for support. Using On Track national data as our baseline data, we have produced national estimates of what the referral numbers would look like if 100% of services had been using On Track (see Appendix 2 for methods). We calculate that all refuge services in England supported an estimated 10,809 women and 11,890 children in 2020-21 and all community-based services supported an estimated 124,044 women and 148,852 children (see **Table 2.8**, page 38, on national referrals estimates). These estimated referral numbers demonstrate that many domestic abuse services do not have the capacity or the resources to meet the demand for their support.

We found that 61.9% of all the referrals received by refuge services using On Track were rejected. The main reason why referrals to refuge services were rejected was a lack of space or capacity, with 26.5% of rejected referrals being for this reason (see **Table 2.9**, page 39, for further details). This also equates to 15.6% of all referrals received being rejected due to lack of space or capacity. With this in mind it is worth noting that the number of vacancies in refuge services fell by almost one-fifth (19.9%) over the last year (see Section 2.6). It is important to note that the referral figures reported here are likely to be lower than they would have been because of the impact of the COVID-19 pandemic. Although the percentage of declined referrals remains in line with what we have presented in previous years, there was a reduction the number of vacancies posted by refuge services on Routes to Support between April and September 2020. This means the actual number of referrals are lower, as there was a 40.6% decrease in availability of refuge vacancies between 23rd March and 31st May 2020. This continued until September when we saw vacancy numbers return to previous levels, largely due to emergency funding.

45.0% of all the referrals received in community-based services (**Table 2.8**, page 38) were rejected (for any reason). The main reasons for rejection were that the survivor did not want support (31.4% of rejected referrals), that the service was unable to contact the survivor (22.7% of all those referrals were rejected) and that the client was already in another service (21.8%). As discussed in previous reports, it is important to bear in mind that the decision to access and accept support can be a very difficult one for a survivor. A survivor may be scared of a controlling perpetrator discovering that she has accessed support. Also, her situation may have changed since the referral was first made, for example, she may have moved out of the area or is accessing support elsewhere. A referral may have been made on her behalf by a third party without her permission or full support.

These figures for declined referrals are unlikely to tell the whole story of demand. There are likely to be survivors who could have benefitted from accessing domestic abuse services but were never referred because the referring agency already knew that the service was over-subscribed or full, or that it was not resourced to support women with specific needs (for example, needs around drugs and alcohol use, needs around a mental health diagnosis). In addition, many survivors do not reach out for support or will delay doing so for a long time, or they are prevented from doing so by a controlling perpetrator(s).

There may be many reasons why women wish to access refuge in a certain area of the country, for example, to be near to family and support networks, or to be able to access places of worship. It may be necessary to remain in a particular area to complete a course of medical treatment or to maintain contact arrangements with her children. Geographical restrictions can, then, along with the factors outlined above, further limit women's options. During 2020-21, data on the journeys women made to access refuge was collected through Routes to Support for the first time. When a refuge service accepted a referral and removed the vacancy from Routes

to Support, the worker removing the vacancy was asked to record which local authority the woman was located in before coming to the refuge. As shown in **Table 2.9**, 79.6% of women placed in refuge between 1st July 2020 and 31st March 2021 came from a different local authority area to the refuge they moved to (2,788 out of 3,503

women⁵⁴). The majority of women travelled to a refuge that was located within the same region⁵⁵ as their previous home (71.9%, 2,518 out of 3,503 women), however over a quarter of women travelled to another region to access refuge in a safe location that was suitable for her needs (28.1%, 985 out of 3,503 women).

Table 2.8: Referrals to all services in 2020-21 (estimates calculated from baseline data from On Track⁵⁶)

	Refuge services	CBS services
Women		
Estimated referrals accepted/women supported during the year	10,809	124,044
Estimated referrals declined during the year	17,561	101,490
Estimated total referrals received during the year	28,370	225,534
Children		
Estimated children supported during the year	11,890	148,852

54 In addition to the 3,503 women for which a previous location was recorded, there were 1,771 women placed in refuge between 1st July 2020 and 31st March 2021 for which their previous location was recorded as 'unknown'.

55 Region here refers to another region of England, for example, the North West of England, or another country in the UK (Northern Ireland, Scotland or Wales)

56 Baseline data on: 3,854 accepted and 6,260 declined referrals to refuge services; 41,438 accepted and 33,688 declined referrals to CBS services.

Table 2.9: Reasons for referral decline (On Track baseline data)

	Refuge	CBS
No space / capacity to support	26.5%	0.4%
Already active in service	0.8%	21.8%
Identified as perpetrator	0.2%	0.3%
Identified as unsafe to work with	1.0%	0.2%
Ineligible for support (age)	0.0%	0.0%
Ineligible for support (borough)	1.4%	4.2%
Ineligible for support (not domestic abuse)	2.1%	1.1%
Ineligible for support (service description)	1.5%	1.5%
Needs better met elsewhere - already supported by DV agency	3.3%	3.6%
Needs better met elsewhere - Referred to a partner agency	3.4%	3.3%
Previous convictions for violent / sexual offences / arson	0.7%	0.0%
Unable to meet support needs around disability	1.9%	0.0%
Unable to meet support needs around drug and alcohol	6.9%	0.0%
Unable to meet support needs around language	0.6%	0.1%
Unable to meet support needs around large family	0.6%	0.0%
Unable to meet support needs around mental health	5.2%	0.2%
Unable to meet support needs around NRPF	2.7%	0.0%
Survivor declined support/could not be contacted	11.8%	29.8%
Other	10.6%	7.1%
No data	2.3%	2.0%

Table 2.10: Journeys made by women accessing refuge services, July 2020 - March 2021 (Routes to Support)

Previous locations of women	Number of women	% of women
Same local authority as refuge	715	20.4%
Different local authority to refuge	2,788	79.6%
Same region as refuge	2,518	71.9%
Different region to refuge	985	28.1%
Total women (where previous local authority home was known)	3,503	

2.6 Dedicated services for children and young people

Of the 269 refuge services running in England in May 2021, 230 (85.5%) were running at least one dedicated children and young people service (CYPS). 169 (62.8%) refuges employed a dedicated CYP worker, whose primary role it is to engage young people, offer them emotional support, and assist families with essential tasks such as school admission. Dedicated children's

workers create a separate space for children in refuge where they can begin to understand life there and their experiences that led them to it. As shown in **Table 2.11**, refuge services offer a range of other dedicated services, such as play therapy and mentoring, to support children and young people and help them recover from their experiences of abuse.

Table 2.11: Dedicated services for children and young people (CYP) in refuges, May 2021 (Routes to Support)

Service	Number of refuges	% of refuges	% change from 2020
Dedicated emotional support	195	72.5%	-1.3%
Outings/activities/play sessions	195	72.5%	-2.0%
Individual support	175	65.1%	+0.4%
CYP worker	169	62.8%	-1.1%
Advocacy	53	19.7%	-0.4%
Play therapy	106	39.4%	-0.1%
Support group	89	33.1%	-2.7%
Mentoring	42	15.6%	0.0%
CYP counselling	33	12.3%	-0.3%
Family support worker	5	1.9%	-0.4%
Art therapy	2	0.7%	0.0%
Refuges with a dedicated CYP service	177	65.8%	-1.9%
Total number of refuges	269		

2.7 Services for men

Routes to Support is primarily a directory of services available for women and children. The information in this section is not therefore an exhaustive account of support services available for men experiencing domestic abuse because dedicated specialist services for men (such as the Men's Advice Line, the national helpline for men run by Respect⁵⁷) are not listed in the directory. Routes to Support does, however, tell us where services for women and children also offer support for men, including the numbers of refuge spaces available for men.

It is important to note that there are differences in the domestic abuse typically experienced by women and by men, in that more women experience domestic abuse than men, and women are more likely to be repeat victims, to be seriously harmed or killed, and to be subjected to coercive control (Women's Aid, 2020b). There is some evidence that male victims need different services to female victims. A report published by the organisation Respect notes:

"From our helpline data from nearly 17,823 male victims it seems that men do not have the same needs as female victims. It would not be helpful for male victims simply to replicate the services or ways of helping female victims – projects working with male victims need to continue to monitor male victims' needs and ways of presenting for help, in order to help them best and to make best use of our resources."

(Respect, 2019)

The report also notes that very few of the men contacting the Men's Advice Line were looking for a space in a refuge (only 1.2% of 17,823 male helpline callers were signposted to refuge services) and that the most common forms of help requested were legal advice, help in accessing the Criminal Justice System and accessing a local male domestic abuse service. However, the report acknowledges that more research is needed into the reasons behind this (Respect, 2019).

On 1st May 2021, 186 out of 391 entries (47.6%) on Routes to Support had one or more services for men, including 39 out of 269 refuges (14.5 % of refuges) which could also accommodate men. There were 281 refuge spaces available for men, 23 for men only and 258⁵⁸ for either men or women. Although the number of spaces for men only has fallen by one space since May 2020, the overall number of spaces which men can access (because they are available to both men and women) has gone up significantly by 100 spaces, which represents a 55.2% increase. We have also seen an increase in most other services types provided for men, continuing a trend for service provision for men overall rising year on year. See **Tables 2.12** and **2.13** on page 42.

⁵⁷ Respect describes its work as "a pioneering UK domestic abuse organisation leading the development of safe, effective work with perpetrators, male victims and young people using violence in their close relationships." <https://www.respect.uk.net>

⁵⁸ These 258 spaces are also included in the 4,289 spaces for women mentioned earlier in this report.

**Table 2.12 Services for men in England*, May 2021 (and change from May 2020)
(Routes to Support)**

Service types	Number of services in England in May 2021	Net change since May 2020
Refuges with space for men	39	+6
Floating support	27	-2
Helpline	93	+6
Outreach	114	-1
Project based	32	+3
Domestic violence advocacy project	90	+7
Sexual violence advocacy project	28	+4
Information and advice	119	+1
Total entries with one or more services for men	186	

*This is not an exhaustive list of the services provided for male victims or perpetrators, rather these numbers are for services offering support to women who also work with male victims or perpetrators

**Table 2.13 Refuge bedspaces for men in England*, May 2021 (and change from May 2020)
(Routes to Support)**

	Bedspaces available to men	% of all refuges with space for men	% of all spaces available to men
Number at May 2021	281	14.5%	6.5%
Net change from May 2020	+100	+2.0%	+1.9%

* This is not an exhaustive list of the services provided for male victims or perpetrators; rather these numbers are for services offering support to women who also work with male victims or perpetrators.

Section 3:

The work of support services

This section explores the work of domestic abuse support services through the findings of the Women's Aid Annual Survey 2021. This survey asked about the challenges, achievements and funding of domestic abuse services. This year we also asked about experiences of the Covid-19 pandemic and the new statutory duty to provide support for victims of domestic abuse, including children, within safe accommodation. Respondents were self-selecting and, in 2021, 81 organisations responded who were running 154 service entries on Routes to Support. This gives a response rate of 38.0%⁵⁹. Of these 81 respondents:

- ▶ 63 responded that they ran refuge services (12 indicated that they did not, and six did not respond to the question)
- ▶ 58 responded that they provided community-based services (13 indicated that they did not, and ten did not respond to this question)
- ▶ Five respondents were members of Imkaan⁶⁰.

Summary of key findings

- ▶ The Covid-19 pandemic had led to many challenges including having to quickly adapt to remote working, maintaining staffing levels and addressing concerns about the safety and wellbeing of staff and survivors. It had also led to opening some new doors for domestic abuse services, including new funding sources, advantages in remote delivery of services, and new and strengthened partnerships with external agencies/services. (See 3.1.)
- ▶ 87.7% of organisations responding to our annual survey reported that Covid-19 had affected demand for their services. Of these organisations, 84.5% told us that demand for the support they offer had increased. (See 3.1.)
- ▶ Organisations responding to our annual survey were proud of their achievements in adapting to new ways of working and coping during the Covid-19 pandemic, the positive attitude and resilience of their staff teams, and that they had managed to open new services or expand areas of their domestic abuse support work. (See 3.3.)
- ▶ Despite the new funding sources being made available during the pandemic, financial insecurity continues to be a major challenge for domestic abuse services, particularly in relation to the short-term nature of much funding and funding falling short of service delivery costs. (See 3.4.)
- ▶ 69.5% of refuge services were commissioned by their local authorities in 2020-21. This is roughly the same as in the previous year (71.7% in 2019-20). (See 3.4.)
- ▶ 67.2% of survey respondents that had CBS provision told us that they had received funding from their local authority for CBS in 2020-21. However, this funding often did not cover full costs of delivering services. (See 3.4.)

⁵⁹ 154 out of 405 services responded.

⁶⁰ <https://www.imkaan.org.uk>: "We are the only UK-based, second-tier women's organisation dedicated to addressing violence against Black and minoritised women and girls i.e. women which are defined in policy terms as Black and 'Minority Ethnic' (BME)."

- 51.9% of organisations responding to the annual survey told us they had been running an area of their domestic abuse service in 2020-21 without any dedicated funding. (See 3.4.)
- In the early implementation of the new statutory duty, there appeared to be considerable variation in the way that local authorities were interpreting the regulations and guidance in the statutory duty. (See 3.5.)

Note on comparisons

We would advise caution when making comparisons between findings from different annual surveys. Although differences in findings may suggest year-on-year change, because of differences in sample composition each year, these would require further investigation.

3.1 Impact of the Covid-19 pandemic

The year 2020-21 was dominated by the Covid-19 pandemic and this has had a clear impact on the way services were run and the demand for domestic abuse support.

Challenges related to the pandemic

Our annual survey asked organisations to reflect on the challenges they had faced in 2020-21 due to the pandemic. The following key themes emerged from their responses.

Move away from face-to-face to remote delivery of services



“Whilst the staff had sufficient IT equipment to support service users virtually, a lot of service users didn’t, so we had to obtain funding to supply them with tablets or smartphones. They also couldn’t afford internet so we had to obtain funding to provide prepaid internet sim cards & WIFI hotspots.”

“The need for our Community team to work remotely meant we had to update our technology and the challenges for those staff to work from home and to adapt to supporting clients on virtual platforms.”

Many respondents wrote about the challenges of swiftly changing services from face-to-face to remote delivery (either online or over the telephone). They also wrote of the challenges of facilitating remote access for staff working from home because of the pandemic, including quickly finding the resources to purchase IT equipment for home use and training staff in new methods of communicating and delivering services. Another difficulty was that survivors sometimes did not have the equipment needed to access support remotely or did not have a private, safe space in which to access support (for example, they lived in shared accommodation or with the perpetrator/s).

Concerns over survivor safety and wellbeing



“Women were often forced to spend unprecedented amounts of time at home with the perpetrator and no means of contacting services for help thus putting them at greater risk of harm.”

“Refuge accommodation x 15 families, isolating, testing positive for Covid-19, keeping contamination to a minimum and keeping staff safe.”

Many organisations wrote about the challenges of keeping survivors safe during the pandemic. This was in terms of both safe from Covid infection and safe from abuse. Respondents wrote about the particular challenges of keeping communal refuge facilities ‘Covid safe’ and introducing new cleaning regimes, purchasing personal protective equipment (PPE), providing Covid-testing for service-users, and asking new arrivals to refuge to initially self-isolate. Having to subject new refuge residents to a period of initial self-isolation also had clear negative impacts on mental well-being for survivors including children who had already gone through the trauma of domestic abuse and being displaced from their homes. There were also comments about the dangerous and traumatic situations many survivors were in during the pandemic, especially during lockdown periods, where they may be at home with the perpetrator(s) for most of the time, and the challenges services faced in being able to reach and support these survivors.

Concerns over staff safety and wellbeing



“Supporting staff well-being and preventing burnout due to the pandemic.”

“For the refuges, some staff were furloughed and/or had to work from home to make it safe. Working from home presents its own problems, with staff having children at home and the ability to work confidentially at home.”

There were also concerns about staff safety and wellbeing during the pandemic, including keeping staff as safe as possible from Covid infection through social-distancing measures, remote delivery of support, purchasing PPE and cleaning products. Organisations also emphasised the negative impact of Covid-19 on staff wellbeing and their concerns about staff burnout. There were comments on the fears of staff of becoming infected with Covid-19, stresses in adapting to new ways of working, difficulties in home-working (including working in shared accommodation, with children in the home), difficulties in juggling home-schooling demands with conducting confidential work from home, and isolation from other staff members.

Issues with external services



“GP surgeries were closed to most patients meaning many women were left with no safe place to disclose.”

“A big challenge was the impact on other services, which led to a delay in actions, such as court proceedings. Many women are still awaiting amended court hearing dates in both criminal and family court arenas. Many statutory agencies, such as social care stopped face to face contact which led to raised concerns within staff teams regarding safeguarding.”

Some organisations commented on the impact of external services closing or reducing their capacity during the pandemic. This included external service providers no longer being able to come into refuges, slow response rates from external organisations, reduction in opportunities for survivors to disclose abuse and be referred to support, and delays in family and civil court proceedings.

Staffing levels



“Staff sickness, self isolation and care needs for member of their own families.”

“We juggled with maintaining service as usual across our teams with staff sickness and isolating at times.”

Some organisations faced challenges relating to reductions in staffing (or staff being limited in the work they could perform) at points during 2020-21. This was due to staff having to self-isolate after contracting Covid-19 or because members of their household had tested positive or had symptoms. Staff were also sometimes unable to work because they were caring for sick family members. Staff who were shielding (because they are particularly vulnerable to serious illness if infected) were no longer able to carry out any work with face-to-face contact with staff or service-users. The creation of ‘Covid bubbles’ in refuge services meant that staffing in buildings at any one time had to be reduced and the ‘bubbles’ kept separate.

Funding challenges caused by the pandemic



“[A challenge in 2020-21 was] Level of referrals into refuge was for clients with high level needs which we struggled to manage with our current resources. (We haven’t had an uplift to our accommodation support funding in over 10 years).”

Despite new short-term funding pots opening up during the pandemic, several respondents wrote about challenges with funding (which for some were different at different stages of the pandemic). These challenges included:

- ▶ initial difficulties in securing additional funds to covers costs incurred in the response to the pandemic (for example, PPE and cleaning products, laptops for home-working),
- ▶ difficulties in responding to applications for funding with short time-frames,
- ▶ the short-term nature of funding – leading to difficulties in future planning,
- ▶ meeting increased demand with current resources,
- ▶ some fundraising stopped because of the pandemic (for example, charity shops closed and fundraising events were cancelled).

Increases in demand



“Obviously variance in demand was a key feature – first lockdown (and subsequent lockdowns) saw a decrease in contacts and referrals but these surged when restrictions lifted, with our contacts and referrals doubling the level seen before the pandemic.”

“An increase in referral enquiries and all new clients presented with higher support needs than in normal times.”

Respondents told us about the challenge of coping with increases in demand for the support they provided. They also told us about an increase in referrals for/from survivors with what is often termed ‘complex needs’ (for example, high-level mental health support needs, addiction support needs, multiple support needs) and not always being sufficiently resourced to meet these needs. Some organisations also reported increases of referrals from women with no recourse to public funds. Some respondents pointed out that levels of demand had been variable throughout the year, with dips in demand during lockdowns and sharp rises thereafter.

Lack of availability of move-on accommodation



“Housing was at a standstill in first lockdown so unable to move clients on, therefore unable to take on new cases.”

“Lack of refuge beds both in our refuges and nationwide - mainly due to bedblocking.”

Some respondents told us of the lack of availability of move-on (from refuge) accommodation. Organisations wrote about ‘bed blocking’, with survivors (and their families) having to stay longer in refuge services, with the knock-on negative effect on refuge bedspace availability.

Impact of the pandemic on demand

87.7% of organisations responding to our annual survey reported that Covid-19 had affected demand for their services. Of these organisations, 84.5% told us that demand for the support they offer had increased and 33.8% reported that the type of referrals they had received had changed during the pandemic.

Many respondents commented on increases in demand, with some making comparisons to levels of demand in the previous year. One respondent wrote:

“We experienced a 150% rise in referrals... For every room space available between April 2019-December 2019 we received 4.13 referrals for this space. For every room space available between April 2020-December 2020 we received 9.19 referrals for this space.” Another commented, “We saw a significant increase in community referrals and our commissioned services were managing at 140% above contracted capacity.”

Some respondents commented on variations in levels of demand throughout the year, with referrals slowing down during periods of

lockdown or tighter restrictions and then rising again once restrictions had been eased or lifted. One organisation wrote, “Demand for services decreased slightly during the lockdowns and we then saw a sharp increase in demand when restrictions eased.” Another noted that there had been “...a significant increase when restrictions were released for all our services.” A few services noted that referrals for their children’s services had dropped during times of school closure but had risen again once schools reopened. This could be indicative of the scarcity of disclosure opportunities for children when face-to-face contact with school professionals had ceased. 11.3% of respondents reported that demand had decreased during the pandemic. This could be referencing these dips in demand during times of heightened Covid-related restrictions (see **Table 3.2**).

Some respondents also noted in their comments that they were receiving more referrals for survivors with high-level support needs (for example, related to mental ill health and substance use). This could be the result of other support services not being available or having

limited capacity during the pandemic, and the consequences of the trauma experienced of living in lockdown circumstances with a perpetrator(s). One organisation commented that the women being referred or self-referring to them had

“...higher complex mental health needs such as depression, psychosis, more frequent self-harm and suicidal tendencies, aggression, short tempers and non-compliance to House Rules and government guidelines, to name a few.”

Table 3.1: Did the Covid-19 pandemic affect demand for your services?

(Women’s Aid Annual Survey 2021)

Response	% of all respondents (81)
No	4.9%
Unsure	7.4%
Yes	87.7%
Missing data	0.0%
Total	100.0%

Table 3.2: How has the Covid-19 pandemic affected demand for your services in 2020-21?

(Women’s Aid Annual Survey 2021)

Response	% of respondents that indicated that the pandemic had affected demand for services (71)
Demand increased	84.5%
Demand decreased	11.3%
The type of referrals we received changed	33.8%

Tick box question – respondents can tick more than one category. No missing data.

New doors opening during the pandemic

As well as being a time of challenges, the Covid-19 pandemic also brought some positive opportunities for domestic abuse services, and services described successfully coping with unprecedented changes and difficulties. As one survey respondent put it, “The Covid-19 pandemic

taught us all that in challenging times we must innovate and adapt in order to survive.” We asked organisations in our annual survey to comment on the opportunities afforded by the pandemic and their responses were largely centred around these three main areas:

New short-term funding pots during the pandemic



“The COVID funding was amazing, we went from an organisation with two laptops to all community staff having a new laptop, better phones etc. having to change our way of working initially was difficult due to lack of IT equipment but once the grants came into play this quickly changed.”

“The support we got from the local community was really encouraging and they fundraised over £15k for us.”

The Covid-19 pandemic was a time of both funding challenges but also some short-term funding opening up. Services valued the short-term funding pots made available during the pandemic and the work they did with this funding shows what can be achieved with funding increases and the need for sustained funding. While some respondents mentioned challenges in having the resources initially to buy Covid-related items, many respondents had received funding from new Covid-related grants/funding streams during the pandemic. This had enabled them to purchase the necessary IT equipment to facilitate remote delivery of support and home-working and to make their services ‘Covid-safe’ with the purchase of PPE and cleaning supplies. These new funding pots helped services meet increased demand. For some organisations, they were able to expand their services, including offering more refuge bedspaces. Some respondents wrote about the usefulness of donations of goods for survivors (for example, food parcels) and how local community members had fundraised for them. While these funding pots were welcome, some respondents did also mention the challenges of having to complete funding applications at short notice, the burden of some monitoring requirements attached to funding and insecurity associated with the short-term nature of much funding.

Advantages in remote delivery of services



“We adapted our services for remote working and have discovered some benefits that we will continue post-restrictions e.g. whilst we will deliver in-person group work again, we will offer Zoom group work as well, particularly for more specialist services such as for parents experiencing child to parent violence, where there can be challenges to identifying local cohorts.”

“Flexibility afforded to both service users and staff through remote working achieving better work life balance. Ability to explore virtual training to reach a wider audience and run peer group session via virtual means.”

“Development of current community services to run virtually using online Microsoft Teams, Instagram, Zoom etc adapted Power to change group work to deliver this virtually. Some Staff reported they can work more effectively from home due to having not to travel to see clients.”

Although having to adapt quickly to remote delivery had been challenging, many respondents wrote about the advantages of this way of working for both staff and service-users. It has meant that they could reach more survivors, and not just those who live locally to the service, they could offer greater flexibility in when support takes place and no travel time is involved. The move to online meetings and communication has meant that it has become easier to communicate with external agencies/organisations and easier to take part in multi-agency meetings (with no travel time or travel expenses now involved). The move to online delivery platforms has also meant that staff are more able to take part in training and professional development opportunities.

New and strengthened partnerships with external agencies/services



“More partnership working with local authority housing teams to help move people on to settled accommodation from safe house and freeing more safe house bedspaces. More joined up work with statutory and other voluntary agencies, especially around comms and reaching out to women trapped at home, closer working with police, social services and local authority. More fast track referral pathways with community BAME organisations due to the work around the disproportionate impact of Covid and [awareness created by] Black Lives Matter.”

“New local partnerships leading to funding for specialist IDVAs based in Mental Health Trust and Early Years Service.”

“[Local authority] decided to open up further residential facilities previously occupied by university students to be used as temporary refuge spaces for women with children.”

Respondents told us about the benefits of increased partnership working, either with new partners or strengthening existing relationships. These were partnerships with funders, commissioners, statutory agencies, other domestic abuse services and other voluntary organisations. These collaborations had led to skills-sharing between organisations, opportunities to expand areas of domestic abuse work in partnership with others (including the creation of new refuge bedspaces) and joint work in public communications about domestic abuse support.

3.2 Challenges during 2020-21

Our annual survey asked about the challenges domestic abuse services had faced in 2020-21, aside from the challenges of working during the pandemic. Their responses were varied, with comments on problems with staffing levels, keeping staff supported, the commissioning process, coping with high demand, and a lack of move-on accommodation.

Funding challenges during 2020-21

The most dominant theme in the responses to the challenges question was difficulties related to funding. This is despite an increase in short-term funding pots during the pandemic. Difficulties were centred on the short-term nature of much funding, “lack of sustainable funding” (including those crisis funds made available during the pandemic). One respondent described the uncertainty about future funding as “the constant spectre of re-commissioning looming”. This funding insecurity had clear negative implications for future planning and staff retention. One organisation commented that: “Funding is always an issue. Until we are adequately and sustainably funded we will always lose good staff due to the uncertainty of their funding.”

Survey respondents also commented on the challenge of funding falling short of the cost of service delivery or not being sufficient to allow services to deal with current demand. One organisation commented that they were “...having to ask staff to deliver more work and support increasingly complex clients to consistently safe quality standards for the same or very similar salary. Not ideal and very difficult to sustain longer term.”

Barriers to accepting referrals

We asked respondents about challenges relating to accepting referrals in their refuge services and in their community-based services. Respondents were given a list of options and were asked to pick the three biggest barriers. (See **Tables 3.3** and **3.4** on pages 54-55.)

For those respondents that had refuge provision, the biggest barrier to accepting referrals was a lack of bedspaces (66.7% picked this option). This is similar to the findings of previous annual surveys and reflects the figures on the current shortfall in bedspaces in England (there is a shortfall of 1,366 bedspaces as measured against the number of spaces recommended by the Council of Europe). Other significant barriers to accepting referrals to refuge were:

- ▶ unable to support survivors with mental health needs (34.9% picked this barrier)
- ▶ unable to support survivors with drug or alcohol support needs (33.3%),
- ▶ unable to support survivors with no recourse to public funds (31.7%),
- ▶ unable to take new referrals because of the Covid-19 pandemic (30.2%)

For those responding who ran community-based services, the biggest barriers to accepting referrals were lack of capacity, such as lack of staff or limited numbers could be supported in a particular service (75.9% chose this option) and the cancelation of face-to-face services due to the Covid-19 pandemic (74.1%). This is in keeping with comments given about challenges concerning issues with staffing levels (staff absences because of testing positive for Covid-19 or someone in their household testing positive; difficulties with combining work and home-schooling) and having to quickly change to remote delivery of support.

Table 3.3: What were the biggest barriers to accepting referrals to your refuge services in 2020-21? Please pick THREE of the issues listed below.

(Women's Aid Annual Survey 2021)

Barrier	% of respondents with refuge provision (63)
Lack of bedspaces available	66.7%
Unable to support survivors who have previously been evicted from a refuge service	4.8%
Unable to support survivors with previous convictions	1.6%
Pandemic – unable to take new referrals	30.2%
Unable to support survivors with language support needs	6.3%
Unable to support survivors with drug or alcohol support needs	33.3%
Unable to support survivors with no recourse to public funds	31.7%
Unable to support survivors with mental health needs	34.9%
Being short-staffed	22.2%
Unable to accommodate large families	23.8%
Other	25.4%
Tick box question - respondents were asked to pick three categories	

Table 3.4: What were the biggest barriers to accepting referrals to your community-based services in 2020-21? Please pick THREE of the issues listed below.

(Women's Aid Annual Survey 2021)

Barrier	% of respondents with refuge provision (63)
Lack of capacity	75.9%
Being short-staffed	46.6%
Unable to support survivors with no recourse to public funds	6.9%
Unable to support survivors with mental health needs	8.6%
Unable to support survivors with drug or alcohol support needs	10.3%
Unable to support survivors with previous convictions	5.2%
Unable to support survivors with language support needs	13.8%
Face-to-face services cancelled because of the pandemic	74.1%
Other	44.8%
Tick box question - respondents were asked to pick three categories	

3.3 Achievements in 2020-21

We asked organisation what aspect of their domestic abuse service/work they were most proud of in 2020-21. The most dominant themes emerging from their comments were pride in:

Adapting to new ways of working and coping during the Covid-19 pandemic



"We were proud that we were able to quickly adapt to COVID and ensure services continued safely and effectively."

"Adapted to all the challenges and changed throughout the rules changes and as more information became available. Thinking on our feet at times and how we all pulled each other through the situation."

"A very quick and effective move to home working with very limited impact on service delivery or survivors."

Many respondents wrote about their pride in how their organisations had swiftly adapted to new ways of working during the pandemic, with as little disruption as possible to the support they offered and sometimes even expanding their work in some areas. They also wrote of how staff had worked hard to keep everyone as safe as possible from infection.

The positive attitude and resilience of their staff team



"Staff adaptation, flexibility and resilience - around working environment, adapting working practices, being creative with continuing to deliver quality support, providing activities for residents despite restrictions (eg for Eid, Christmas, LGBTQ+ month, International Women's Day), managing constant staff shortages, taking on increased tasks (eg cleaning, arranging Covid-19 testing) and increased responsibilities."

"...the teams across the organisation have pulled together to get the job done and we have not needed to close our refuge doors or cancel our community group programmes, which has been a great achievement."

Another main theme was pride in staff teams and their resilience and positivity in the face of very challenging circumstances. They wrote about staff quickly learning new ways of working with always a clear focus and determination to meet the needs of survivors and successfully juggling pressures at home (for example, caring for sick family members, home-schooling) with work challenges. One respondent summed it up with these words: "WE WERE INCREDIBLE!"

Opening new services or expanding areas of work



“New site identified and secured to house BME women.”

“Opening a new refuge with space for up to 19 families during the first lockdown.”

“We were proud to launch our live chat service and that we were able to keep refuges operating smoothly throughout the pandemic.”

Some respondents expressed their pride in being able to develop or grow their services during the challenging times of the pandemic. This included creating new refuge bedspaces (which is reflected in the increase in bedspaces in England reported on in Section 2) and opening or expanding services for survivors in the community.

3.4 Funding sources - domestic abuse services

As previously discussed, funding challenges persisted in being a major issue for domestic abuse services in 2020-21. One significant reason services faced funding challenges is the continued fragmented funding landscape in the sector which continues in spite of the emergency funding we saw as part of the Covid-19 response. This continues to result, all too often, in services providing part of their work with no dedicated funding and having the burden of sourcing funding from multiple funders.

Working without dedicated funding

This year, 51.9% of organisations responding to the annual survey told us they had been running an area of their domestic abuse service in 2020-21 without any dedicated funding (see **Table 3.5** for full details). The Government has committed to a focus on prevention in its *Tackling violence against women and girls strategy* (Home

Office, 2021).⁶¹ However the most common areas of work run without dedicated funding were domestic abuse prevention/educational work (20 respondents) and therapeutic support services (counselling, group work) (20 respondents). Survey respondents told us about the variety of ways that running an area or areas of work without dedicated funding had impacted on them. Their responses painted a picture of uncertainty; of those respondents running work areas without dedicated funds (n=42):

- ▶ 73.8% were using their financial reserves⁶² to cover costs, which is not a solution that can be relied on indefinitely.
- ▶ 28.6% reported being unable to plan for the future.
- ▶ 14.3% had lost staff because of job insecurity linked to funding. (See **Table 3.7**)

Table 3.5: Were you running an area(s) of your domestic abuse service for women WITHOUT dedicated funding in 2020-21?

(Women's Aid Annual Survey 2021)

Running an area(s) without dedicated funding	% of total respondents
No	42.0%
Yes	51.9%
Missing data	6.2%
TOTAL	100.0%

⁶¹ "We must address the attitudes and behaviour that can underpin crimes of violence against women and girls as part of our approach to tackling them. To do this, more needs to be done to raise awareness and understanding of them across the public and among professionals, and to make sure more of our children and young people understand what healthy relationships and behaviour look like. More also needs to be done to better understand what works to prevent the cycle of abuse." (Home Office, 2021: 15)

⁶² Financial reserves are funds set aside to protect a charity from loss of income, therefore they must be replenished to protect from future uncertainties.

Table 3.6: Which areas of your domestic abuse service were you running without dedicated funding in 2020-21?**(Women's Aid Annual Survey 2021)**

Area of service ran without dedicated funding	% of respondents running an area of service without dedicated funding (42)
Domestic abuse refuge provision	33.3%
Accommodation-based services (other than refuge)	7.1%
Domestic abuse prevention/educational work	47.6%
Community-based domestic abuse services for women (outreach, floating support, advocacy)	42.9%
Therapeutic support services (counselling, group work)	47.6%
Children and Young People's domestic abuse services in refuge	28.6%
Children and Young People's domestic abuse services in the community	19.0%
Specialist domestic abuse services for Black and minoritised (BME) women	4.8%
Specialist domestic abuse services for Lesbian Bisexual Trans (LBT) women	0.0%
Specialist domestic abuse services for women with complex needs	14.3%
Specialist domestic abuse services for women with disabilities	2.4%
Other	23.8%

Two respondents running an area of work with dedicated funding did not reply to this question

Tick box question – respondents can tick more than one category

Table 3.7: Please tell us how this lack of dedicated funding impacted on your delivery of the service.**(Women's Aid Annual Survey 2021)**

Impact	% of respondents running an area of service without dedicated funding (42)
We used reserves to cover the costs	73.8%
We relied on volunteers to deliver the service	16.7%
We lost staff as a result of job insecurity	14.3%
We have had to reduce the number of women we can support in the service	14.3%
We have had to reduce the number of children and young people we can support in the service	4.8%
We have had to reduce staff hours within the service	0.0%
Service can only continue for a limited amount of time	19.0%
We are unable to support women with more complex needs due to the level of support available	16.7%
We are unable to plan for the future and this impacts on the service we deliver	28.6%
Other	16.7%
Two respondents running an area of work with dedicated funding did not reply to this question	
Tick box question – respondents can tick more than one category	

Police and Crime Commissioner Funding

Most annual survey respondents with refuge provision did not receive any commissioned funding for their refuge services from their local Police and Crime Commissioner (PCC) in 2020-21 (69.8% - No; 22.2% - Yes; 7.9% - Missing data). About half of responding organisations with CBS provision had received commissioned funding for their CBS services in 2020-2021 (41.4%- No; 53.4%- Yes; 5.2%- Missing data). Community-based services may include IDVA provision that

is co-located in police forces, so this may explain why domestic abuse support in the community appears to be better funded by PCCs than refuge provision. It is important to note that any funding is unlikely to cover all of the service costs and may even only cover a small percentage of the costs – see the discussion in *Fragile Funding Landscape* (Women's Aid, 2021b).

Table 3.8: Did you receive any commissioned funding for your refuge services from a PCC (Police and Crime Commissioner) in 2020-2021?

(Women's Aid Annual Survey 2021)

Response	Number of respondents	% of those with refuge provision
No	44	69.8%
Yes	14	22.2%
Missing data	5	7.9%
TOTAL	63	100.0%

Table 3.9: Did you receive any commissioned funding for your community-based services from a PCC (Police and Crime Commissioner) in 2020-2021?

(Women's Aid Annual Survey 2021)

Response	Number of respondents	% of those with CBS provision
No	24	41.4%
Yes	30	53.4%
Missing data	3	5.2%
TOTAL	58	100.0%

Clinical Commissioning Group Funding

A large majority of the annual survey respondents with refuge provision (54 out of 63) did not receive any commissioned funding from a Clinical Commissioning Group for their refuge services in 2020-2021 (No – 85.7%; Yes – 4.8%, Missing data – 9.5%). Most respondents with community-based provision (43 out of 58) also had not received any commissioned funding from a CCG for their

community-based support services in the last financial year (No - 75.9%; Yes – 19.0%; Missing data - 5.2%). Again, it is important to note that any funding is unlikely to cover all of the service costs and may even only cover a small percentage of the costs (Women's Aid, 2021b).

Table 3.10: Did you receive any commissioned funding for your refuge services from a CCG (Clinical Commissioning Group) in 2020-2021?

(Women's Aid Annual Survey 2021)

Response	Number of respondents	% of those with refuge provision
No	54	85.7%
Yes	3	4.8%
Missing data	6	9.5%
TOTAL	63	100.0%

Table 3.11: Did you receive any commissioned funding for your community-based services from a CCG (Clinical Commissioning Group) in 2020-2021?

(Women's Aid Annual Survey 2021)

Response	Number of respondents	% of those with CBS provision
No	43	75.9%
Yes	12	19.0%
Missing data	3	5.2%
TOTAL	58	100.0%

Local authority funding for refuge provision

To determine the level of local authority funding for domestic abuse refuges, we used responses to our annual survey and to Freedom of Information (FOI) requests we sent to local authorities in England. To fill in any outstanding information, we sent emails to refuge providers asking for information about local authority commissioning. (See Appendix 2: Methodology for more details.)

Around two thirds of refuge services were commissioned by their local authorities in 2020-

21 (69.5%) – see **Table 3.12**. This is roughly the same as in the previous year (71.7% in 2019-20). Members of Imkaan (services led by and for Black and minoritised survivors) were less likely to be commissioned by the local authority, with only six out of 18 services being fully commissioned (See **Table 3.13**). This local authority funding is related to the support costs of running a refuge. The accommodation element of refuge services is usually covered by housing-related benefits claimed by refuge residents. It should be noted

Table 3.12: Commissioned refuge services in 2020-21 (local authority)
(For methodology see Appendix 2)

2020-21	Number	% of total	2019-20	Number	% of total
Commissioned refuge	187	69.5%	Commissioned refuge	193	71.7%
Partially commissioned refuge	18	6.7%	Partially commissioned refuge	6	2.2%
Non-commissioned refuge	48	17.8%	Non-commissioned refuge	60	22.3%
No data	13	4.8%	No data	10	3.7%
Other	3	1.1%			
Total	269	100.0%	Total	269	100.0%
2020-21			2019-20		
Commissioned bedspaces	3321	77.4%	Commissioned refuge	3239	76.2%
Non-commissioned bedspaces	720	16.8%	Non-commissioned refuge	788	18.5%
Bedspaces - no data	215	5.0%	No data	224	5.3%
Bedspaces - other	33	0.8%			
Total household	4289	100.0%	Total	4251	100.0%

Notes:

Three refuge services have been classed as 'other'. Two of these services are located in crown dependencies outside of England and therefore do not operate under the same local government commissioning arrangements. The other refuge service classed as 'other' is managed and provided directly by the local authority rather than the contract being awarded to another organisation.

One commissioned refuge service told us their local authority consider them to be commissioned as they provide contracted funding. The funding under this contract was however made available through a grant from DLUHC, rather than a local funding pot. It is possible that other providers are 'commissioned' under similar circumstances.

that this is a major barrier to survivors with no recourse to public funds who are unable to claim state benefit and to women who want to keep their employment while resident in refuge (which would prevent them from being able to claim benefits). However, it should be noted that commissioned funding often does not cover all the costs of supporting refuge residents (Women's

Aid, 2021b). We asked annual survey respondents whose refuge provision was commissioned by the local authority how much of the costs were covered by this funding (see **Table 3.14**, page 65) – although it should be noted that around a third of respondents expected to reply to this question did not, so it does not give us a complete picture.

Table 3.13: Imkaan members - Commissioned refuge services in 2020-21 (local authority)
(For methodology see Appendix 2)

2020-21	Number	% of total	2019-20	Number	% of total
Commissioned refuge	6	33.3%	Commissioned refuge	5	27.8%
Partially commissioned refuge	3	16.7%	Partially commissioned refuge	1	5.6%
Non-commissioned refuge	9	50.0%	Non-commissioned refuge	12	66.7%
Total services	18	100.0%		18	100.0%
Bedspaces - commissioned	118	44.5%	Bedspaces - commissioned	108	42.5%
Bedspaces - non-commissioned	147	55.5%	Bedspaces - non-commissioned	146	57.5%
Bedspaces - no data	0	0.0%	Bedspaces - no data	0	0.0%
Bedspaces - other	0	0.0%	Bedspaces - other	0	0.0%
Total household	265	100.0%		254	100.0%

Table 3.14: How much funding did you receive through being commissioned by the local authority for your refuge services in 2020-21?**(Women's Aid Annual Survey 2021)**

Amount of funding received from local authority	For activity costs (Direct activity costs, accessibility costs, external contractors)	For central costs(Admin/finance staff, management/governance staff, premises/other central costs)	For support staff costs(Salaries, additional employment costs, clinical supervision, staff training)
All costs	6	6	7
Half or less of costs	6	7	7
More than half of costs	23	23	23
Missing data	17	16	15
TOTAL	52	52	52

Local authority funding for CBS provision

We gained information on local authority funding for community-based domestic abuse services from the annual survey only (this is different to the methods used to calculate the level of local authority funding for refuge provision detailed above). 39 of the 58 survey respondents (67.2%) that had CBS provision told us that they had received funding from their local authority in 2020-21 (19 had received no local authority funding and there were no missing responses). Of these 39 organisations, only 13 reported that

it was all of their community-based support that was funded by the local authority. We asked these 39 respondents to give details about how much of the CBS provision this local authority funding covered. The results in **Table 3.15** show that funding rarely covered all costs and that 'being commissioned' should not be mistaken for being fully funded.

Table 3.15: How much funding did you receive through being commissioned by the local authority for your community-based services in 2020-21?

(Women's Aid Annual Survey 2021)

Amount of funding received from local authority	For support staff costs (Salaries, additional employment costs, clinical supervision, staff training) Number of respondents	For activity costs (Direct activity costs, accessibility costs, external contractors) Number of respondents	For central costs (Admin/finance staff, management/governance staff, premises/other central costs) Number of respondents
All costs	9	8	7
Half or less of costs	7	7	7
More than half of costs	15	15	15
None	2	2	2
Missing data	6	7	8

3.5 Early implementation of the Statutory Duty

The Domestic Abuse Act 2021 introduced a statutory duty on tier one local authorities⁶³ in England to provide support for victims of domestic abuse, including children, within safe accommodation.⁶⁴ In April 2021, some elements of this new statutory duty came into force. Local authorities were given draft guidance to allocate related funding while they carried out needs assessments and develop strategies. We asked services responding to our annual survey for their feedback on how the statutory duty was being implemented in their local area. It should be borne in mind that these responses were given in June and early July 2021, early in the implementation of the duty.

There appeared to be considerable variation in the way that local authorities were interpreting the regulations and guidance in the statutory duty. Comments from respondents revealed a concerning lack of clarity about the statutory duty and what it will mean locally. This comment from a respondent seems to sum up the concerns of many: “As yet we are still in the dark

as to how the LA will implement the statutory duty in [local area].” There were also some concerns that the statutory duty will lead to safe accommodation only for local survivors (rather than recognising that survivors usually have to leave their local area in order to safely access refuge services). There were, however, some examples of positive experiences, with some survey respondents reporting a focus on specialist domestic abuse services in the delivery of the duty locally. However, an apparent inconsistency in approaches across local authorities was the overarching finding.

Local discussions about the new statutory duty

Of the 63 survey respondents that ran refuge provision, 52.4% (n=33) had been invited to discuss the new statutory duty and associated funding/commissioning with their relevant local authority. (See **Table 3.16** for full details).

Table 3.16: Have you been invited to discuss the statutory duty and associated funding/commissioning with the relevant tier one local authority?

(Women’s Aid Annual Survey 2021)

Responses	Number of respondents	% of respondents with refuge provision (63)
No	15	23.8%
Unsure	9	14.3%
Yes	33	52.4%
Missing data	6	9.5%
Total	63	100.0%

⁶³ Tier one local authorities are county and unitary councils (other than London Boroughs), the Greater London Authority and the Isles of Scilly Council.

⁶⁴ For more information: <https://www.gov.uk/government/publications/domestic-abuse-bill-2020factsheets/local-authority-support-for-victims-of-domestic-abuse-and-their-children-within-safeaccommodation-factsheet>

Funding allocation

23.8% (n=15) of respondents with refuge provision reported that their local authority had already allocated temporary funding tied to the statutory duty (before a needs assessment) and 3.2% (n=2) reported that funding had been allocated after a needs assessment. 31.7% (n=20) of respondents

with refuge provision told us that no funding has been allocated yet and 34.9% (n=22) reported that they were unsure whether funding had already allocated (6.3% did not respond to this question). (See **Table 3.17.**)

Table 3.17: Has your local authority already allocated funding tied to the statutory duty in your local area?

(Women's Aid Annual Survey 2021)

Responses	Number of respondents	% of respondents with refuge provision (63)
No - no funding has been allocated yet	20	31.7%
Unsure	22	34.9%
Yes - this is funding after a needs assessment	2	3.2%
Yes - this is temporary funding before a needs assessment takes place	15	23.8%
Missing data	4	6.3%
Total	63	100.0%

Clarification about future funding arrangements

58.7% (n=37) of respondents with refuge provision reported that their relevant local authority had not clarified what future funding arrangements were for accommodation-based domestic abuse services. (See **Table 3.18** for full details.)

Comments seemed to indicate a lack of clarity about funding arrangements and a continued

emphasis on short-term funding. There was one concerning case where the organisation reported that the local authority had so far spent the funding allocated for safe accommodation on administrative costs and an internal secondment for a one year post for a local Domestic Abuse Commissioner.

Table 3.18: Has the relevant tier one local authority clarified what future funding arrangements for accommodation based domestic abuse services will be?

(Women's Aid Annual Survey 2021)

Row Labels	Number of respondents	% of respondents with refuge provision (63)
No	37	58.7%
Unsure	14	22.2%
Yes	8	12.7%
Missing data	4	6.3%
Total	63	100.0%

Local authority needs assessment

52.4% (n=33) of respondents had taken part in the relevant tier one local authority's needs

assessment for the statutory duty. (Full details in **Table 3.19**.)

Table 3.19: Have you taken part in the relevant tier one local authority's needs assessment for the statutory duty?

(Women's Aid Annual Survey 2021)

Response	Number of responses	% of respondents with refuge provision (63)
No	17	27.0%
Unsure	8	12.7%
Yes	33	52.4%
Missing data	5	7.9%
Total	63	100.0%

Strategy for delivering the statutory duty

38.1% (n=24) of respondents with refuge provision had taken part in the relevant tier one local authority's development of a strategy for

delivering the statutory duty. (See **Table 3.20** for full details.)

Table 3.20: Have you taken part in the relevant tier one local authority's development of a strategy for delivering the statutory duty?

(Women's Aid Annual Survey 2021)

Response	Number of responses	% of respondents with refuge provision
No	24	38.1%
Unsure	10	15.9%
Yes	24	38.1%
Missing data	5	7.9%
Total	63	100.0%

Local Partnerships Boards

39.7% (n=25) of respondents with refuge provision reported that the relevant tier one local authority had established a local partnership board to oversee the delivery of the statutory duty (see **Table 3.21**). 22 of these 25 organisations told us that local domestic abuse services were

represented on the local partnership board. 18 of these 25 organisations responded that they had been invited to be on this local partnership board (four told us they had not been invited and three were unsure).

Table 3.21: Has the relevant tier one local authority established a local partnership board to oversee the delivery of the duty?

(Women's Aid Annual Survey 2021)

Response	Number of respondents	% of respondents with refuge provision
In process of setting it up at the moment	13	20.6%
No	6	9.5%
Unsure	15	23.8%
Yes - please give more details in the comment box below	25	39.7%
Missing data	4	6.3%
Total	63	100.0%

Some of the comments on the new statutory duty

Women's Aid Annual Survey 2021

“

“At this moment, lack of communication and involvement in planning makes this a difficult question to answer.”

“All refuges and domestic abuse services are represented by the local partnership board in our local authority area, I am aware of two (ourselves included) services by and for Black and minoritised women.”

“Other key DV/SV services are included [on the local Partnership Board] they are all primarily white British service providers. The LA is intending to take BME specialist services in house...”

“I had hoped that this would be a positive thing for accommodation based services but now I am not so sure. I fear it may lead to them stepping back from the national refuge network with less accommodation available, and restrictions on national access and more priority for local people.”

“I have made two requests in writing to be included in the discussions and been 'fobbed off' both times despite guidelines stating charity/on commissioned services locally should be included.”

“I think the LA are lost in this process - there's no dedicated lead.”

“I'm not sure our local authority know how it's being implemented! We had an initial conversation about it, but have heard nothing since.”

”

Some of the comments on the new statutory duty (continued)

Women's Aid Annual Survey 2021

“

“Just mainly concerned with the current lack of clarity over funding and sustainability. Also concerned about other accommodation providers coming in and "selling" themselves as DA providers even though they do not have the expertise.”

“[Local authority] appear to be doing all they can to implement their statutory duties - and to engage with DA service providers throughout this process. It's encouraging to see [local authority] are actively including funding for the provision of children's services into refuge and safe accommodation as a priority. [Local authority] are actively involving us as providers with the needs assessment. It can be challenging responding to very tight deadlines for information- but we understand the timescales [local authority] are working to.”

“Our Tier 1 local authority appears to be implementing its statutory duty in a collaborative and responsible way - including all relevant local providers in the discussions and planning for future services and the needs assessment.”

“There is a lack of clarity about how the statutory duty is being implemented in the two Local Authorities with which we are connected. We have been consulted to differing levels by both but have yet to see any outputs from the consultation.”

“We are finding it difficult to get information on timescales. We are desperate for the additional funding as our staff are on their knees in our refuges currently. We don't understand why it is taking so long to confirm the additional funding for this year.”

“We work for three local authorities and each one has a very different approach. Two have not involved us at all, the other has asked for some input.”

”

Conclusion

The year 2020-21 was a challenging one, dominated by the response to Covid-19 and the rapid changes in ways of working that were precipitated by the pandemic. Despite these immense pressures, domestic abuse services have successfully adapted and found ways to continue to meet the needs of survivors and their children. During 2020-21, domestic abuse providers across England continued to support thousands of women experiencing abuse, and even more children, with an average of 1.2 children for every woman supported. Throughout the year, an estimated 10,809 women and 11,890 children were supported by refuge services and an estimated 124,044 women and 148,852 children accessed community-based support services.

We know that meeting demand and the sometimes high-level support needs was a particular challenge and during the year, 61.9% of all the referrals received in refuge services using On Track were rejected (the majority due to lack of space). In short, demand for services continues to exceed provision available, in spite of an increase in the number of refuge spaces available nationally (which is likely to be due to emergency funding made available during the pandemic).

Where space is available it may not be accessible or suitable for all women. Whilst there is no such thing as a 'typical' survivor (as shown in our On Track data), minoritised women continue to experience additional barriers, for example, 30.0% of the women accessing services who were not British nationals, had no access to public funds.

We know there are many survivors of domestic abuse who, for a variety of reasons, are unable to access specialist help or are delayed in doing so for a long time. Survivors accessing specialist domestic abuse services have often been living with the abuse for long periods of time; the average length of abuse women face before

accessing support continues to be six years. The impact this has on women, their safety and their mental health is staggering - it is no surprise, given this, that at least 37.6% of survivors in the sample had mental health support needs, rising to 49.2% of women accessing refuge services. Over a third of service users in this year reported feeling depressed or having suicidal thoughts as a result of the abuse, rising to 45.6% for those women in refuge services. This makes the fact that 15 fewer services than last year were able to provide a formal counselling service especially concerning.

It remains clear that refuge is a national network - women travelled significant distances to seek refuge. The majority of women (79.6%) placed in refuge between 1st July 2020 and 31st March 2021 came from a different local authority area to the refuge they moved to, and over a quarter of women travelled to another region of the country. As well as the need for a national network of refuge services, these findings illustrate the severe impact and disruption that domestic abuse has on the lives of those experiencing it.

The impact of the Covid-19 pandemic presented new challenges for services in 2020-21. The pandemic forced services to develop innovative ways of working to continue reaching survivors who needed their support. Following the launch of Women's Aid's national Live Chat service in 2019, a number of local services are now running their own online support with Live Chat services added to Routes to Support for the first time this year. Organisations told us how they had successfully and rapidly adapted to new ways of working and embraced the possibilities offered by remote delivery of support and online training and partnership work. They benefitted from new short-term funding sources opening up during the pandemic. However, despite the emergency funding made available during the pandemic, the insecurity of short-term funding

and funding that falls short of service costs remain major challenges for domestic abuse services. 51.9% of organisations responding to the annual survey told us they had been running an area of their domestic abuse service in 2020-21 without any dedicated funding. Around two thirds of refuge services were commissioned by their local authorities in 2020-21 (69.5%). This is roughly the same as in the previous year. However, commissioning does not equate to covering all service delivery costs and services often have to make up the shortfall through additional fundraising or run areas of work with no dedicated funds.

The Domestic Abuse Act 2021 gained royal assent just after the year 2020-21 ended. The Act introduces many new measures (some that are still to be implemented) including a statutory duty on local authorities to commission safe accommodation for domestic abuse survivors (including children) in their area. The information gathered in our annual survey can only tell us about the early impact of this statutory duty (as the survey took place in June/July 2021). Our findings suggest considerable variation in how

local authorities were interpreting the statutory duty and uncertainty and confusion among service providers. We will continue to monitor the implementation of this new statutory duty and will have more findings to present in next year's annual audit report. There is still work to be done to standardise the funding for community-based domestic abuse services (which are not covered by the statutory duty). Only 67.2% of annual survey respondents that had community-based provision told us that they had received funding from their local authority for CBS in 2020-21 and where there was funding, this often didn't cover all costs.

During incredibly challenging times, professionals and volunteers in domestic services have continued their hard work in putting the needs of survivors first. They quickly adapted the services they offered and their way of working in response to the pandemic and related restrictions and lockdowns. The statistics on the number of women and children supported given in this report and the comments on their achievements pay testament to their dedication and resilience.

Appendix 1:

Glossary

Service types: Routes to Support details which service types are offered against each entry, an entry can contain multiple service types.

Service provider: any organisation providing a domestic abuse service. This could be a dedicated provider or a larger organisation running a domestic abuse service, for example a housing association.

Service user: any woman who is accessing/has accessed domestic abuse support services. Dedicated provider: an organisation constituted for the sole and specialist purpose of delivering domestic abuse services.

Entry/entries: one service listing on Routes to Support. A service provider may have multiple entries where they operate in more than one local authority or have services in the same local authority with different referral criteria, for example a general access refuge and another for Black and minoritised women only.

Bedspaces: a unit of accommodation for one woman and her children, regardless of how many beds/cots are in the unit.

No recourse to public funds: If someone's residence permit to live in the UK includes the condition 'no recourse to public funds' then that person will not be able to claim most state benefits.

The 'by and for' expert sector: For this report Women's Aid uses the definition of the 'by and for' expert sector as set out by Imkaan in the Alternative Bill (Imkaan, 2018). This definition is aligned with the principles of the Women's Aid Quality Standards, the Shared Sector Standards⁶⁵ and the National Statement of Expectations⁶⁶. "We define women-only VAWG specialist organisations as the by and for expert sector (sometimes written as by and for expert services or organisations). This term refers to specialist services that are designed and delivered by and for the users and communities they aim to serve. This can include, for example, services led by and for Black and minoritised women, disabled women, LGBT+ women, etc. In the context of VAWG we refer to women-only VAWG services as manifesting specific expertise designed and developed to address VAWG." Imkaan, 2018

⁶⁵ <https://www.womensaid.org.uk/what-we-do/national-quality-standards/>

⁶⁶ The National Statement of Expectations, published by the Home Office in December 2016 as part of the government's violence against women and girls strategy, stresses that the government expects local services to put the victim at the centre of service delivery, including by having "access to a broad diversity of provision, considering how services will be accessible to BME disabled, LGBTQQI and older victims and survivors, and those from isolated or marginalised communities".

Appendix 2:

Methodology

Section 1: The service users

This section looks at the profile, needs and experiences of women accessing support services. To do this we have used data from On Track, Women's Aid's case management and outcomes monitoring system, which allows front-line workers in local domestic abuse services to record information about service users and contains data on the experiences of over 100,000 women supported by local domestic abuse services across England (see section on data sources for more

information). Information about service users for this report was taken from cases closed between 1st April 2020 and 31st March 2021. These data relate to 34,860 female survivors⁶⁷ (where sub-samples are used, this is highlighted in the report). Data were collected by 71 organisations running 199 domestic abuse services (of which three organisations started using On Track during the reporting period).

Section 2: The provision of services

This section includes a snapshot of the available provision in England on 1st May 2021 and analysis of change during the year from 1st May 2020 along with analysis of refuge referrals and vacancies during that same year.

Information about the services in England only was taken from Routes to Support as snapshots on 1st May each year. Refuge vacancies added to the Routes to Support database during the year 2020-21 were analysed. Routes to Support provides information about the types of domestic abuse services, the number of bedspaces in refuge services, who these services can support and changes to provision over time. The directory is updated on a rolling basis by dedicated staff at Women's Aid meaning each entry is fully updated every year in addition to any updates received

from services during the year. Entries are added and removed throughout the year as providers change.

Referral estimates used in the report are calculated by using baseline data from On Track. The following steps were taken:

- a. Refuge: ratio of women housed to refuge space for services using On Track applied to services not using On Track that are listed on Routes to Support for the same region.
- b. Community-based services (CBS): ratio of women supported to individual service type (e.g. outreach, IDVA, floating support) for responding services applied to services not using On Track that are listed on Routes to

⁶⁷ On Track collects information about female and male survivors and survivors who do not define as either male or female. This report will only present information on female survivors.

Support for the same region. Numbers of children: average number of children per woman accessing services from On Track applied to above two estimates.

- c. Estimated number of referrals declined to refuge and community-based services: the

percentage of referrals accepted and declined from our baseline data was applied to the estimated numbers of women accepted in steps A and B above to give an estimated number of referrals declined to each service type.

Section 3: The work of support services

This section discusses responses to the Women's Aid Annual Survey 2021. The Women's Aid Annual Survey is a national survey of the whole range of specialist domestic abuse services for women and children in England. An online survey is sent to all domestic abuse services in England; respondents are self-selecting. The survey is semi-structured. Open-text questions are categorised according to common themes.

Local authority funding for refuge provision

This draws on evidence from a number of data sources that together provide a comprehensive picture of local authority refuge commissioning in England. These evidence sources are:

- ▶ a snapshot of all domestic abuse refuge services in England listed on Routes to Support on 1st May 2021
- ▶ responses to the Women's Aid Annual Survey 2021

- ▶ Freedom of Information request data⁶⁸

- ▶ a targeted email survey of providers of selected domestic abuse service providers, sent to providers where it had not been possible to determine (through the other data sources outlined above) whether their refuge service was local authority commissioned in 2020/1.

Analysis and comparison of these data sources, along with Women's Aid sector expertise and specialist knowledge about domestic abuse service providers has enabled us to confirm the numbers and proportion of refuge services and bedspaces in England that are funded through local authority commissioning arrangements.

⁶⁸ Women's Aid submitted a Freedom of Information (FOI) request to all local authorities (local authorities) in England in December 2020. The purpose of the FOI request was to build a nationwide list of domestic abuse contracts, their monetary values and renewal dates, and whether spending on domestic violence support had increased or decreased since the contracts were last tendered. The FOI request was sent to 341 local authorities and of these, 300 local authorities responded. The FOI responses included information about contracts for both refuge and community-based services, however this section looks at funding for refuge services only.

Appendix 3:

Definitions of service types

Accommodation

Refuge: Offers accommodation and support only for women experiencing domestic abuse which is tied to that accommodation. The address will not be publicly available. It will have a set number of places. Residents will receive a planned programme of therapeutic and practical support from staff and access peer support from other residents. This will include:

- ▶ Access to information and advocacy
- ▶ Emotional support
- ▶ Access to specialist support workers (e.g. drugs/ alcohol use, mental health, sexual abuse)
- ▶ Access to recovery work
- ▶ Access to support for children (where needed)
- ▶ Practical help

- ▶ Key work and support planning (work around support needs including parenting, finances and wellbeing)
- ▶ Safety planning
- ▶ Counselling

Accommodation (other than refuge): Any accommodation offered to women experiencing domestic abuse which does not meet the definition below. For example this may be move-on accommodation, a shelter where the address is disclosed or dispersed accommodation without the planned programme of support.

Resettlement: Only available to refuge residents moving on to independent living. A service is available to women staying in the refuge prior to move-on and post move-on.

Community-based services (CBS)

Floating support: Tied to accommodation, but the accommodation is not offered as part of the service. Will also have a set number of places. These services are primarily about supporting women and children to maintain their accommodation.

Outreach: Not offered in the project's building and it does not have a set number of spaces. The support offered is broader and not focused on accommodation. Women can access these services in a range of community centres or the service may come to the women in their home or other venues (e.g. cafes or neutral meeting places).

Domestic abuse advocacy project (including IDVA): Involves the provision of advice, information and support to survivors living in the community based on an assessment of risk and its management. Operates within an inter-agency context, and is usually part of a multiagency risk management strategy or MARAC process and focuses on providing a service to victims judged to be at medium to high risk of harm to address their safety needs and help manage the risk that they face.

Open access services

These services are available without a planned programme of support and can be accessed anonymously as and when the woman needs to.

Helpline: A helpline is a support and referral service that is accessed by phone and can be accessed anonymously. It needs to have a designated telephone line and be a specific service offered at fixed advertised times. The service is delivered by dedicated staff or volunteers trained for that purpose and not engaged in other tasks.

Drop-in service: Women can access support at a specified venue without a pre-arranged appointment from trained staff.

Advice and information service: Other open access support projects, this would include crisis intervention services and other advice services whether accessed by telephone or in person.

Online chat: Online chat is a support and referral service that is accessed via the web. It needs to be a specific service offered at fixed advertised times by dedicated staff or volunteers trained for that purpose and not engaged in other tasks.

Recovery work

These services do not offer accommodation, but may be offered to refuge residents. A woman and/or child has to attend the project's building to access these services.

Counselling: Counselling is formal counselling offered by qualified practitioners

Group work programmes: Group work programmes are defined groups facilitated by trained staff

Support groups: Support groups are attended by survivors within a refuge or community-based support setting and offer peer support/self-help work.

Dedicated children and young people's service

Children's work: Staffed by trained children's workers. A service where they provide emotional support, group work, activities, afterschool clubs or holiday clubs for the children or do specific outreach work.

Young people's work: Staffed by trained youth workers. A service where they provide emotional support, group work, activities.

Other

Prevention work: Work carried out in community groups such as schools aimed at prevention/

awareness raising. Clients do not self-refer but the service may be booked by professionals.

Appendix 4:

Women's Aid Annual Survey 2021 respondents

Regional distribution of survey respondents

Women's Aid Annual Survey 2021

Region	Number of respondents	% of total respondents (81)
East Midlands	11	13.6%
Yorkshire and Humberside	10	12.3%
West Midlands	12	14.8%
North West England	16	19.8%
South East England	21	25.9%
South West England	8	9.9%
London	7	8.6%
North East England	10	12.3%
East of England	11	13.6%

Respondents could choose more than one region.

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