

THE DOMESTIC ABUSE REPORT 2023

THE ANNUAL AUDIT



women's aid
until women & children are safe

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Women's Aid

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Women's Aid is the national charity working to end domestic abuse against women and children. For almost 50 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 just under 170 organisations which provide 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 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, 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 Women's Aid Directory and our advocacy projects, help thousands of women and children every year.

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Executive Summary

Introduction and methodological approach

This report is the 2023 edition of Women's Aid's yearly publication on the provision and uptake of domestic abuse services in England, examining the financial year 2021-22. We situate this report within the context of the statutory duty to provide support for survivors of domestic abuse, including children, within safe accommodation, which was introduced in October 2021 through Part 4 of the Domestic Abuse Act 2021. The Women's Aid data sources used in this report are On Track, Routes to Support, the Women's Aid Annual Survey 2022, Freedom of Information requests and five key informant interviews.

Information about service users for Section 1 of this report was taken from a sample of 38,045 female survivors recorded through Women's Aid's bespoke case management system On Track who finished a period of support from a refuge or community-based support (CBS) service in England

in the year 1st April 2021 to 31st March 2022. The second section of the Audit includes a snapshot of the available provision in England on 1st May 2022 and analysis of change during the previous year. Information about the services was taken from Routes to Support, the UK violence against women and girls directory of services and refuge vacancies. Section 3 draws together the findings from the Women's Aid Annual Survey 2022, which was distributed to domestic abuse services in England running refuge and/or community-based support (CBS) services and Freedom of Information (FOI) request data from 307 local authorities in England. Women's Aid also conducted semi-structured interviews with representatives of five organisations who had completed the survey. Key informants were selected based on a purposive sample which included organisations in different geographical locations, working locally and/or nationally, and organisations of varying sizes.

Key Findings

Section 1: The service users

The first section of this report details who accessed the domestic abuse support sector (the service users) in the year 2021-22, as well as their needs and experiences. Most service users (75.6%) were between the ages of 21 and 45 and most women (62.0%) had children, with an average of 1.3 children per service user in the overall sample. Over a quarter of survivors (28.7%) reported having a disability and, of these respondents, 56.0% had a mental health disability and 22.3% had a physical

health disability. More widely, of all women using domestic abuse services, 41.0% had mental health support needs, which increased to 50.2% of those in refuge. There were 4,611 (12.1%) service users who were not British nationals and, of these, 30% did not have recourse to public funds.

Domestic abuse continues to be gendered. 94.6% of perpetrators were male and 73.0% of perpetrators were a partner or ex-partner of the service user.

Abuse can take a range of different forms and can last for a significant length of time. The most common kinds of abuse reported by service users were emotional abuse (85.5%) and jealous or controlling behaviour (64.4%). Service users also commonly reported experiencing

physical abuse (53.5%). Each type of abuse was experienced by a higher proportion of women in refuge services than in CBS services. The length of abuse experienced ranged from 0 years to 66 years. The average length of abuse was six years and one month.

Section 2: The provision of services

Section 2 of the report looks at the availability and accessibility of local domestic abuse services in England. Routes to Support data shows that domestic abuse services continue to offer a wide range of service types, including community-based support, open-access support such as helplines and therapeutic support like counselling. Of a total of 395 services, 270 included refuge services and 237 included dedicated services for children/young people. There has been a net increase in the number of all service types offered by local services between 1st May 2021 and 1st May 2022, with the exception of drop-in services which have remained the same. The most significant increases were in the number of local services offering prevention work and online chat services, which both increased by 18. The number of local services offering a dedicated service for children/young people also increased by 14. The increase we saw in the number of bedspaces during 2020-21 (largely as a result of emergency Covid funding) appears to have been sustained over the period 2021-22 and bedspaces have increased (1st May 2022) by a further 55. There is, however, still a 23.2% shortfall.

Despite the increase in the number of spaces, fewer vacancies were made available during 2021-22 overall compared to previous years. There were 229 fewer vacancies posted than in 2020-21, when vacancies were already at significantly lower levels due to the impact of the pandemic. We know that services continued to face pressures related to Covid-19 and other issues that affected their capacity in 2021-22, such as difficulties with staffing levels and recruitment, more complex cases and longer support times (see section 3.2).

Women continued to face barriers to accessing support services. Only 9.1% of all vacancies posted on Routes to Support in 2021-22 could consider women who had no recourse to public funds. Although this has increased from 6.3% of vacancies in 2020-21, it is clear women with no recourse to public funds continue to face barriers in accessing refuge. Less than half of refuge vacancies posted on Routes to Support in 2021-22 could accommodate a woman with two children. Fewer than one in five could accommodate a woman with three children. Less than 1% of all vacancies were suitable for a woman requiring a wheelchair accessible space.

This report found that 61.6% of all the referrals received in refuge services using On Track were rejected, with 26.2% of rejected referrals being due to lack of space or capacity. 50.4% of all the referrals received in CBS services were rejected; the main reasons for rejection were that the survivor did not want support (30.6% of rejected referrals), that the service was unable to contact the survivor (25.7% of rejected referrals) and that the client was already in another service (24.6% of rejected referrals).

The majority of women travelled to a refuge that was located within the same region as their previous home (67.5%, 2,853 out of 4,229 women), however, over one third 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 (32.5%, 1,376 out of 4,229 women).

Section 3: The work of support services

The third section of this report explores the work of domestic abuse support services, including, this year, their reflections of the implementation of the statutory duty. Organisations responding to the Annual Survey were proud of their achievements in continuing to provide support during the Covid-19 pandemic, highlighting 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, especially for marginalised survivors. Increases in the length and complexity of cases, trying to ensure long-term and sufficient funding, the Covid-19 pandemic, recruitment and retention of staff, and the cost-of-living crisis more generally have presented services with significant challenges during 2021-22.

Almost three quarters of refuge services were commissioned by their local authorities in 2021-22 (71.1%), which is a small increase on the previous year. However, commissioned funding often does not cover the full costs of service delivery and service providers needed to make up the shortfall through additional fundraising or by

drawing on their reserves. Insufficient funding, more generally, continued to be a concern for the respondents to the Annual Survey, with 44.0% of respondents telling us they had been running an area of their domestic abuse service in 2021-22 without any dedicated funding.

Survey respondents reflected on their experiences of the statutory duty over the past year and these findings are explored in Section 3. Of survey respondents who run a refuge service, 49.2% received funding as a result of the statutory duty. Service provider experiences around the implementation of the duty were mixed, including optimism for service expansion from the increase in dedicated funding, alongside concerns around the commercialisation of commissioning. There also appeared to be considerable variation in the way that local authorities were interpreting the regulations and guidance. Providers expressed concern around a shift towards a reduction of funding for specialist services, in particular by and for services, in favour of competitive tenders and more generic housing-focused providers during 2021-22.

Concluding remarks

Overall, the findings of the Annual Audit 2023 highlight the ongoing work of dedicated domestic abuse services and how specialist, accessible provision is essential for supporting survivors. Domestic abuse services continue to feel the

pressure of a lack of adequate funding and believe that domestic abuse commissioning should place transparency, an understanding of VAWG and the need for specialist and holistic services at the centre of practices.

Glossary

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

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 National Quality Standards, the Shared Sector Standards¹ and the National Statement of Expectations². "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, Deaf or 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).

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.

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.³

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

Service user: any woman who is accessing/has accessed domestic abuse support services.

Specialist services: services that are specifically designed to support someone affected by domestic abuse, sexual violence and/or other forms of VAWG. This means their core business is to support survivors of, or help end, domestic abuse and other forms of VAWG. Specialist services differ from generic services because they recognise the continuum of violence against women and girls. Their delivery of support and services is always needs-led and gender-responsive.

¹ <https://www.womensaid.org.uk/what-we-do/national-quality-standards/>

² 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".

³ Our research has shown that survivors with insecure immigration status may sometimes be misunderstood as having no recourse to public to funds when this is not the case, limiting their access to support to which they are entitled (Womens Aid, 2022a).

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

Accommodation (other than refuge): Any accommodation offered to women experiencing domestic abuse which does not meet the definition above. 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 support (CBS) services

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. It focuses on providing a service to survivors judged to be at medium to high risk of harm, aims 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.



Foreword

Farah Nazeer

Chief Executive,
Women's Aid Federation of England

Every year, our Annual Audit shows the progress we've made, but is also a reminder of how far we have to go. We know that specialist domestic abuse services are working day in, day out to provide survivors with the vital support they need – whether that's a refuge to welcome them into safety, a therapeutic service to support their longer-term recovery, or just someone to hear and believe them. But there are still countless barriers in place that prevent too many women from even starting their journeys to safety.

Insufficient funding continues to be a concern for the respondents to our survey, with 44.0% telling us they had been running a portion of their domestic abuse service in 2021-22 without any dedicated funding at all. In a year when we are facing a cost-of-living crisis, the continued underfunding of life-saving domestic abuse services is an urgent issue. Domestic abuse organisations cannot continue to run services with no budget when they face rising energy bills and challenges in recruiting and retaining staff. We fear services may shut down as a result unless urgent and decisive action is taken, leading to further financial strain on our already stretched public services, including the NHS, and creating longer waiting lists of women who urgently need to escape abusive partners – but critically leading to the real possibility of the safety of women and children being compromised.

While 71.1% of refuge services were commissioned by their local authority in 2021-22, a small but positive increase on the previous year, this model does not cover the full costs of service delivery. Commissioned funding may cover costs related to providing support to residents (such as staff salaries) but often not areas like building maintenance and central running costs. As a result, commissioned service providers often make up the shortfall through additional fundraising or by drawing on their reserves, leading to concerns about financial sustainability.

We also discovered a worrying trend for local authorities to take services 'in-house' rather than to

fund them directly: in 2020 there was just one refuge service in England run by a local authority, but our research has found that at least eleven councils are now running some kind of in-house refuge or safe accommodation service. Firstly, this practice negatively impacts specialist domestic abuse services' ability to attract and retain staff – as local authorities offer higher pay than domestic abuse service providers are funded (often by the very same councils) to offer. It can also discourage survivors from seeking help, as many have experienced racism and discrimination by public services, and would prefer to speak to a specialist, independent service they can trust. And finally, it exacerbates the existing, chronic under-funding of smaller services run 'by and for' the communities they serve, in favour of competitive tenders and more generic housing-focused providers. The result will be fewer women getting help, particularly those from Black and minoritised backgrounds, those who are Deaf or disabled; and those who identify as LGBT+.

We also gained insight into the impact national legislation is having on the frontline. Some services are reporting a positive impact from the 2021 Domestic Abuse Act, which has improved funding and collaboration in certain areas. Sadly, however, its implementation at a local level remains highly inconsistent, creating a postcode lottery. There needs to be improved accountability for local authorities to deliver on the ambitions of the duty, to ensure that all survivors can benefit. This is essential to the Domestic Abuse Act living up to its potential.

While these figures present constant challenge, I remain hopeful that we can work together to meet the needs of survivors now and reduce domestic abuse in the future. Every day, I see the passion and commitment of so many people who are working to bring about a time when domestic abuse is completely intolerable in society, and all survivors can access the support they need to recover and thrive. It is a marathon, not a sprint, but I know we will get there, by working together and doing all we can to create a brighter future.

Introduction

This report is the 2023 edition of Women's Aid's yearly publication on the provision, usage and work of domestic abuse services in England, examining the financial year 2021-22. We situate this report, in particular, within the context of the statutory duty to provide support for survivors of domestic abuse, including children, within safe accommodation, which was introduced in October 2021⁴. The Women's Aid data sources used in this report are On Track, Routes to Support and the Women's Aid Annual Survey 2022, Freedom of Information requests and five semi-structured interviews. 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 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?
4. What has been the initial impact of the statutory duty on refuge services and how are service providers finding the changes?

Copies of all editions of The Domestic Abuse Report, along with Women's Aid's other research, can be downloaded for free online at:
www.womensaid.org.uk/evidence-hub

Note on comparisons: We would advise caution when making comparisons between findings from different Annual Reports. Although differences in findings may suggest year-on-year change, because of differences in sample composition each year, including more organisations using On Track, these would require further investigation. Although we are

consistent with our methodology and analysis, we cannot be sure that differences in findings between years are the result of change over time rather than other factors, for example differences in the representation of minoritised people in each sample.

⁴ Introduced through Part 4 of the Domestic Abuse Act 2021.

Methodology

Section 1 - On Track: The Women's Aid case management and outcomes monitoring system

Section 1 looks at the profile, needs and experiences of women accessing domestic abuse support services. To do this, we have used data from Women's Aid's bespoke case management and outcomes monitoring system. On Track is used by 91 local domestic abuse services to record information about service users. Every region in England is represented by organisations using 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. This national data includes a range of information about survivor's journeys. For adults and children and young people accessing domestic abuse support services, On Track records data on client demographics, referral patterns, experiences of abuse, support needs, support provided, and outcomes of support. It also captures data on the negative experiences survivors may have when accessing external services, such as the NHS, police, housing providers and local authorities.

At the time of writing (October 2022), the On Track national dataset contains information on 198,770 survivors, 183,053 of whom are female⁵, who have accessed domestic abuse services since the system was launched on 1st April

2016. Information about service users for this report was taken from a sample of 38,045 female survivors recorded on On Track who finished a period of support from a refuge or community-based service using On Track in the year 1st April 2021 to 31st March 2022, and who consented for their anonymised data to be shared with Women's Aid. Of these:

- ▶ 3,499 accessed refuge services.
- ▶ 34,546 accessed community-based support (CBS) services⁶.

Throughout the analysis presented, we show information across the whole sample of 38,045 women (with each woman represented only once even where she accessed more than one service type⁷). We only highlight comparative demographics between refuge and CBS services

⁵ 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.

⁶ Community-based services include floating support, outreach, IDVA and advocacy services.

⁷ 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.

where there is a noteworthy difference in the results. Where sub-samples are used, this is highlighted in the report.

Women and children escaping abuse come from all backgrounds, have a diverse range of experiences, and require specialist support that meets their needs. While 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.

This section only looks 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. If we were to look at a profile of support needs and demographic background for such 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. Therefore, 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. These include support needs around mental health, substance use, language, and disability, as well as any support needs a client's children may have. Black and minoritised women and their children may also have additional support needs resulting from multiple forms of oppression and discrimination for which services may not be resourced to provide.

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 of immigration status) impacting on women's ability to access appropriate safety and protection (Women's Aid, 2022a).

Section 2 - Routes to Support

This section includes a snapshot of the available provision in England on 1st May 2022 and analysis of change during the year from 1st May 2021 along with analysis of refuge referrals and vacancies during that same year⁸. Information about the services (in England only) was taken from Routes to Support. Routes to Support is the UK violence against women and girls directory of services and refuge vacancies, run in partnership by Women's Aid Federation of England, Women's Aid Federation of Northern Ireland, Scottish Women's Aid and Welsh Women's Aid.

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

⁸ Vacancies posted to Routes to Support from April 2021 to March 2022.

part of the work of the domestic abuse sector since its creation in 2003.

During the year 2021-22, there were 179,972 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.

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 that are listed on Routes to Support for the same region which are not using On Track

b. Community-based support (CBS) services: 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 Support for the same region. Numbers of children: average number of children per woman accessing services from On Track applied to above two estimates.

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 - Women's Aid Annual Survey 2022, key informant interviews and Freedom of Information request data

This section explores the work and experiences of support services over the past year, using data from responses to the Women's Aid Annual Survey 2022, key informant interviews with service providers and Freedom of Information (FOI) request data.

Women's Aid Annual Survey 2022

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. The online survey was sent in May 2022 (with a deadline of mid-June) to all domestic abuse services in England that run both or one of refuge and/or community-based support (CBS) services, listed in Routes to Support (395 services in total). Respondents were self-selecting. The survey

contained both open and closed questions. Open-text questions were categorised according to common themes. We received responses from 84 organisations who were running 160 service entries on Routes to Support. This gives a response rate of 41.0%⁹. Of these 84 respondents:

► 59 responded that they ran refuge services (16 indicated that they did not, and nine did not respond to the question)

⁹ 160 out of 395 services responded.

- ▶ 55 responded that they provided community-based services (13 indicated that they did not, and 16 did not respond to this question)

This year the survey asked questions about the impact of the statutory duty to provide support for survivors of domestic abuse (including children) within safe accommodation, as well as key challenges and achievements, and how services were funded in 2021-22.

Key informant interviews with service providers

To explore in further detail the themes emerging from the survey, in September 2022, Women's Aid conducted semi-structured interviews remotely with representatives of five organisations who had completed the survey. Key informants were selected based on a purposive sample which included organisations in different geographical locations, working locally and/or nationally, and organisations of varying sizes.

Freedom of Information (FOI) requests

To provide a comprehensive picture of local authority refuge commissioning in England, we gathered additional evidence sources that were used alongside the snapshot of domestic abuse refuge services in England listed on Routes to Support and the responses to the Women's Aid Annual Survey 2022.

Women's Aid submitted a Freedom of Information (FOI) request to all local authorities in England in June 2022. 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 340 local authorities and of these, 307 local authorities responded. 100% of County Councils responded to our requests.

A targeted email survey of providers of selected domestic abuse service providers was 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 2021-22.

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.

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

Key findings from On Track

About our sample:

38,045 women ended their time in either a refuge or community-based service (CBS) between 1st April 2021 - 31st March 2022.

Refuge services

3,499



Community-based services

35,546



62%



of women had children



1.3

children per service user

Aged 21-45



74.6%



Had a disability



28.7%



4,628

were **not** British nationals

30%



were recorded as **not having** recourse to public funds

Mental health support needs:



all women **41.0%**



in refuge **50.2%**



Women reporting feeling depressed/ having suicidal thoughts:

all women **35.6%**



in refuge **47.5%**



85.5%



experienced
emotional abuse

64.4%



experienced
jealous/controlling
behaviour

23.4%



lived with the
perpetrator all or
some of the time

SECTION 1

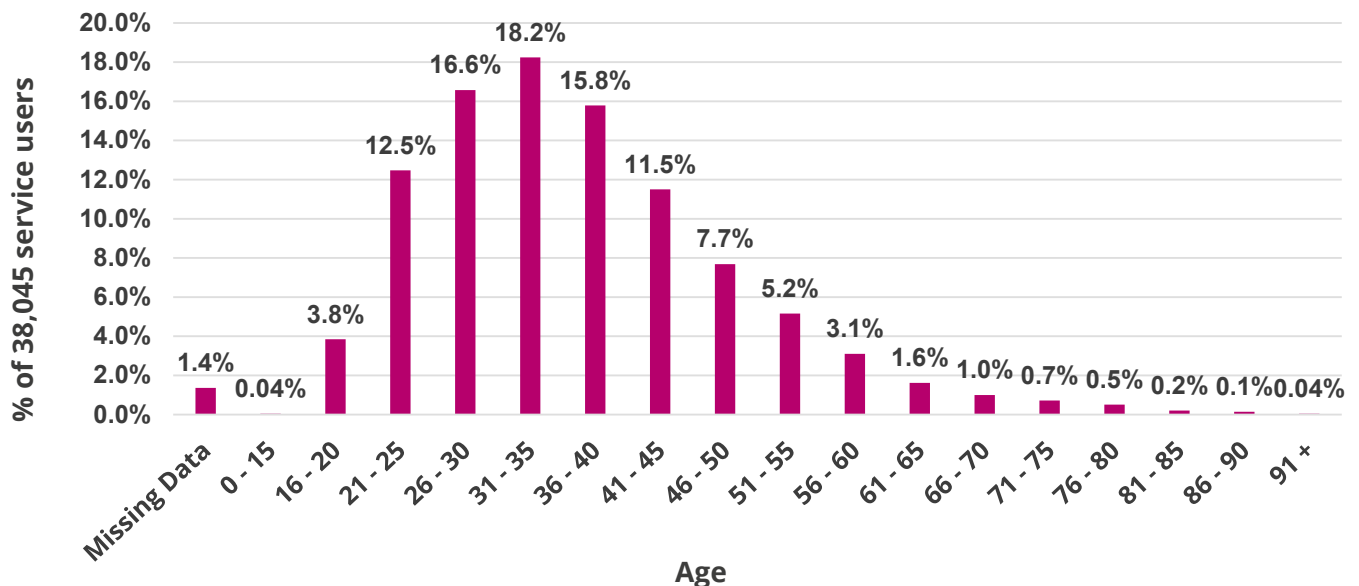
The service users

1.1 Age

- ▶ The ages of survivors in our sample ranged from under 15 to over 91, with the most common age group being 31-35 years (18.5%), closely followed by 26-30 years (16.8%) and 36-40 (15.8%)¹⁰.
- ▶ 75.6% of survivors in the sample were between the ages of 21 and 45.
- ▶ Older women were underrepresented in the sample. Only 4.3% of service users in the total

sample were 61 or over and this fell to 1.4% in refuge services. This is unlikely to reflect need, as we know that older women experience particular barriers in accessing support (Age UK, 2020). The most recent Femicide Census Report showed that, in 2020, 20% of femicide victims were aged 66 and over, with the oldest victim being 89 years old (Femicide Census, 2022).

Chart 1.1: Age of service users 2021-22* (On Track)



*Percentage of 38,045 service users in our sample.

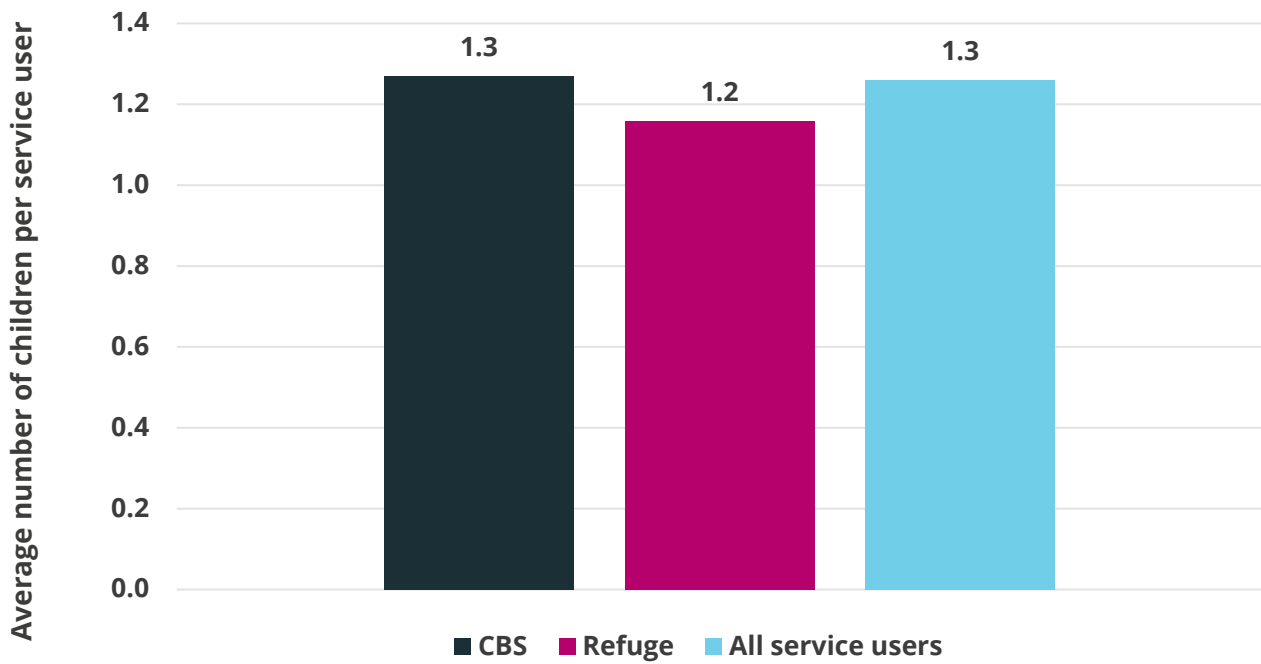
1.2 Children

There were 48,036 children of service users in the sample, averaging 1.3 children per service user across all services. Of those service users who have children, the average number of children per service user was 2.0.

- ▶ 21,409 service users within the sample of 38,045 (61.9%)¹¹ had children.

- ▶ 62.0% of service users in CBS services had children and 6.1% were pregnant¹². On average, there were 1.3 children per service user, and 2.0 children per service user with children¹³.
- ▶ 61.1% of women in refuge services had children and 7.7% were pregnant¹⁴. On average, there were 1.2 children per service user, and 1.9 children per service user with children¹⁵.

Chart 1.2: Average number of children per service user 2021-22 (On Track)



*Average number of children per service user in our sample of 38,045 women (Refuge = 3,499; CBS = 34,546)

11 Missing data unknown

12 Missing data = 0.1%; Don't know/Not asked/Not recorded = 11.1%; Declined to answer = 0.1%

13 Missing data unknown

14 Missing data = 0.0%; Don't know/Not asked/Not recorded = 3.3%; Declined to answer = 0.0%

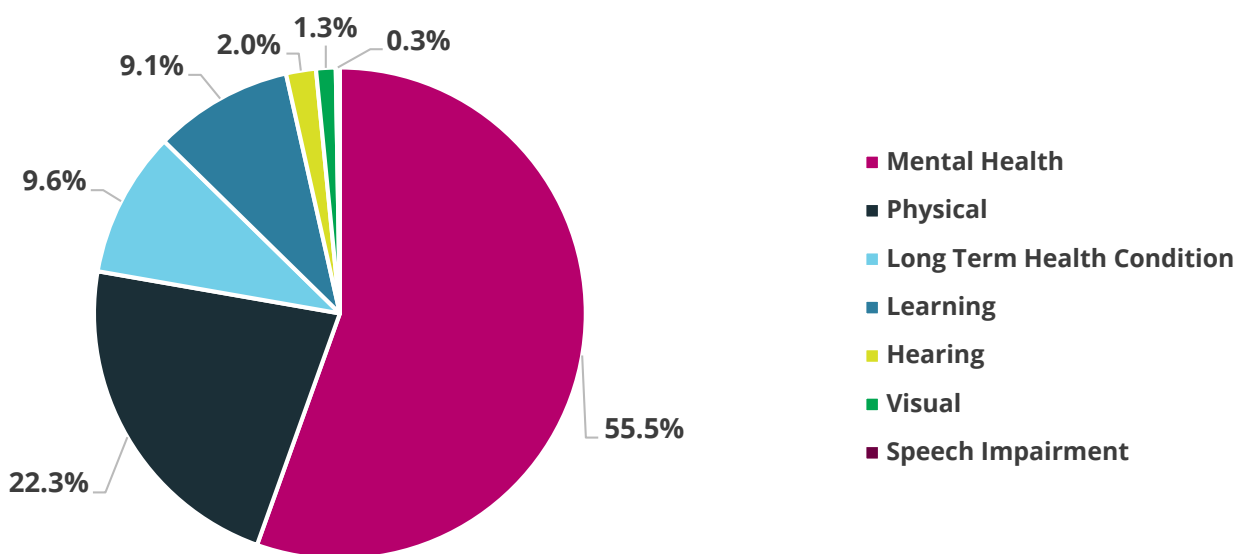
15 Missing data unknown

1.3 Disability

- ▶ Overall, 28.7%¹⁶ of all survivors in the sample had at least one disability that they disclosed.
- ▶ In refuge services, 29.9%¹⁷ of all service users reported having a disability; the most common disability reported was having a mental health condition (21.1%), followed by having a physical diasability (8.1%). 8.6% reported that they have multiple disabilities¹⁸.
- ▶ In CBS services, 28.5%¹⁹ of all service users reported having a disability; having a mental health condition was also the most common reported disability (20.1%), followed by having a physical disability (8.1%). 7.2% reported that they had multiple disabilities.

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 2020 compared to 6.0% of women who were not disabled (ONS, 2020)). Of the survivors in the sample, only 8.7% of women in refuge had physical disabilities, yet demand is likely be much higher than the accessible spaces available. As detailed in Section 2.4, only 1.1% of refuge vacancies listed on Routes to Support in 2021-22 were suitable for a woman with limited mobility and just 0.9% of vacancies could accommodate a woman requiring a wheelchair accessible space.

Chart 1.3: Types of disabilities reported by service users 2021-22* (On Track)



*Percentage of a sub-sample of 13,885 service users who reported having a disability.

¹⁶ Missing data = <0.1%; Don't know/Not asked/Not recorded = 10.5%; Declined to answer= 0.1%

¹⁷ Missing data = <0.1%; Don't know/Not asked/Not recorded = 2.5%; Declined to answer= <0.1%

¹⁸ Missing data unknown

¹⁹ Don't know= 7.6%; Not Asked= 3.7%; Declined to answer= 0.1%

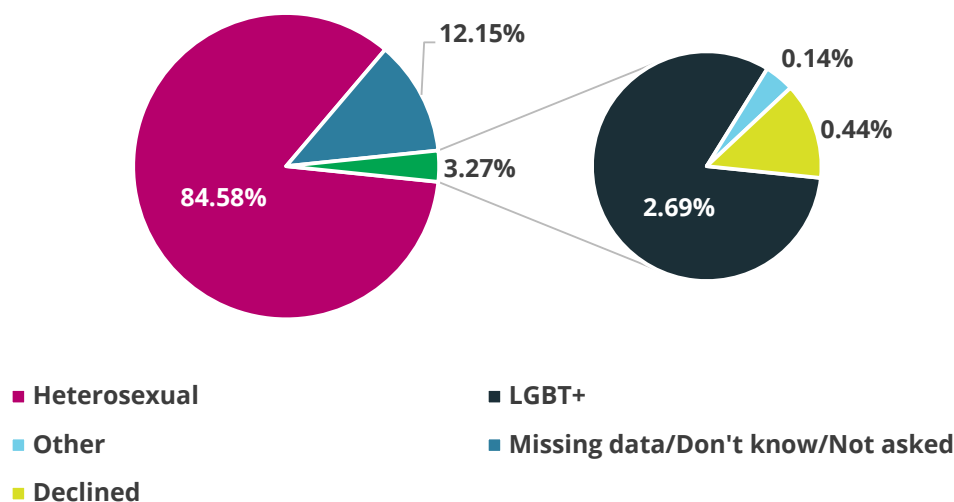
1.4 Sexual orientation and gender identity

- ▶ 3.1% of service users overall (1,022) identified as lesbian, bisexual, gay, asexual, pansexual or queer²⁰. In refuge, this number was 3.8%²¹ and in CBS services it was 2.6%²².
- ▶ 0.9% of services users overall (348) identified as transgender²³.
- ▶ It is important to note that 12.6% of women did not disclose or were not asked about their sexual orientation²⁴ and 10.0% did not disclose or were not asked whether they identified as trans²⁵. As we know from research on LGBT+ survivors' experiences of abuse, they can experience a range of challenges in accessing support

(Stonewall, 2018; Galop, 2019), 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 were only five services exclusively for LGBT+ survivors on Routes to Support on 1st May 2022. Two of these were refuge services and the other three were running CBS services and/or open access services exclusively for LGBT+ survivors.

- ▶ Sexual orientation data should not be used to assume the gender of the perpetrator(s). For example, a service user may identify as a lesbian, but the perpetrator(s) may be a male intimate ex-partner or family member²⁶.

Chart 1.4: Sexual orientation of service users 2021-22* (On Track)



*Percentage of 38,045 service users in our sample

²⁰ Missing data = <0.1%; Not asked/Don't know/Not recorded = 5.6%; Declined to answer = 0.4%

²¹ Missing data = <0.1%; Not asked/Don't know/Not recorded = 2.5%; Declined to answer = 0.4%

²² Missing data = <0.1%; Not asked/Don't know/Not recorded = 6.9%; Declined to answer = 0.4%

²³ Missing data = <0.1%; Not asked/Don't know/Not recorded = 9.9%; Declined to answer = 0.1%

²⁴ Missing data = <0.1%; Not asked/Don't know/Not specified = 12.1%; Declined to answer = 0.4%

²⁵ Missing data = 0.0%; Not asked/Don't know/Not recorded = 9.9%; Declined to answer = 0.1%

²⁶ 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.

1.5 Ethnicity

- ▶ Across all services, 63.2%²⁷ of service users were White British. In refuge services, this was 53.4% compared to 64.2% in CBS services.
- ▶ 9.6% of all service users were from Asian/Asian British ethnic backgrounds, and 6.3% were from Black/African/Caribbean/Black British ethnic backgrounds.

Table 1.1: What are the ethnic backgrounds of service users? 2021-22 (On Track)	Percentage of 38,045 service users in our sample
Missing data	0.5%
Asian/Asian British	
Indian	1.7%
Pakistani	4.5%
Bangladeshi	1.6%
Chinese	0.3%
Any other Asian background, please describe	2.3%
Black/African/Caribbean/Black British	
African	3.5%
Caribbean	1.7%
Any other Black / African / Caribbean background, please describe	1.2%
Mixed/Multiple Ethnic Background	
White and Black Caribbean	1.4%
White and Black African	0.4%
White and Asian	0.4%
Any other Mixed / Multiple ethnic background, please describe	1.0%
Other Ethnic group	
Arab	0.8%
Any other ethnic group, please describe	1.4%
White	
British	63.6%
Irish	0.6%
Gypsy or Irish Traveller	0.3%
Eastern European	3.6%
Roma	0.1%
Any other White background, please describe	3.3%
Don't know	3.9%
Not asked	2.3%
Declined	0.2%

²⁷ Missing data= 0.5%; Don't know/Not asked/Not recorded = 6.2%; Declined to answer= 0.2%

1.6 Nationality and citizenship

- ▶ There were 4,628 service users who were not British nationals. 30.0%²⁸ of these services users were recorded as having no recourse to public funds. 9.7% reported they did not know if they had recourse to public funds (this could be reported by either the service user or their caseworker).
- ▶ Of a sub-sample of 4,628 service users who were not British nationals, there were a range of immigration statuses. Most common was indefinite leave to remain, making up 20.0%²⁹ overall; in CBS services this was 18.6%³⁰ and in refuge services this was 25.2%³¹.
- ▶ The next most common immigration status was spouse visa, making up 15.8% of all service users³²; in CBS services this was 14.4%³³ and in refuge services this was 21.3%³⁴.
- ▶ A higher percentage of service users with EEA immigration backgrounds accessed CBS services (17.6%) than refuge services (10.6%).

A higher proportion of survivors with indefinite leave to remain (ILR) or spouse visas accessed refuge services compared to CBS services. This is likely due to the types of funding available for refuge spaces; those with spouse visas or ILR can apply for the destitution domestic violence (DDV) concession or apply for welfare benefits to secure public funds to pay for a refuge space. However,

other types of immigration visas will have No Recourse to Public Funds (NRPF) conditions, so funding for a refuge space is not available for survivors in this position. It is likely that the difference is a result of survivors with other types of immigration statuses being restricted from accessing refuge services and not necessarily that survivors with ILR or spouse visas are more likely to need a refuge space.

As detailed in section 2.4, only 9.1% of vacancies listed on Routes to Support 2021-22 could consider survivors with no recourse to public funds, so it is difficult to know the actual number of survivors with each type of immigration status that require refuge services. With perpetrators using insecure immigration as a means of coercive control³⁵ and the lack of resources to provide adequate immigration advice within the sector, many women from migrant backgrounds are continued to be put at risk of further abuse and are restricted from accessing essential resources to reach safety. Our research has also shown that survivors with insecure immigration status may sometimes be misunderstood as having no recourse to public to funds when this is not the case. This limits their access to support to which they are entitled and puts them at risk of further abuse (Women's Aid, 2022a).

²⁸ Missing data= 0.6%; Don't know/Not asked/Not recorded = 11.7%; Declined to answer= 0.3%

²⁹ Missing data= 0.4%; Don't Know/Not Asked/Not recorded = 3.2%; Declined to answer= <0.1%

³⁰ Missing data= 0.4%; Don't Know/Not Asked/Not recorded = 3.6%; Declined to answer = 0.1%

³¹ Missing data= 0.2%; Don't know/Not asked/Not recorded = 1.4%; Declined to answer = 0.0%

³² Missing data= 0.4%; Don't Know/Not Asked/Not recorded = 3.2%; Declined to answer= <0.1%

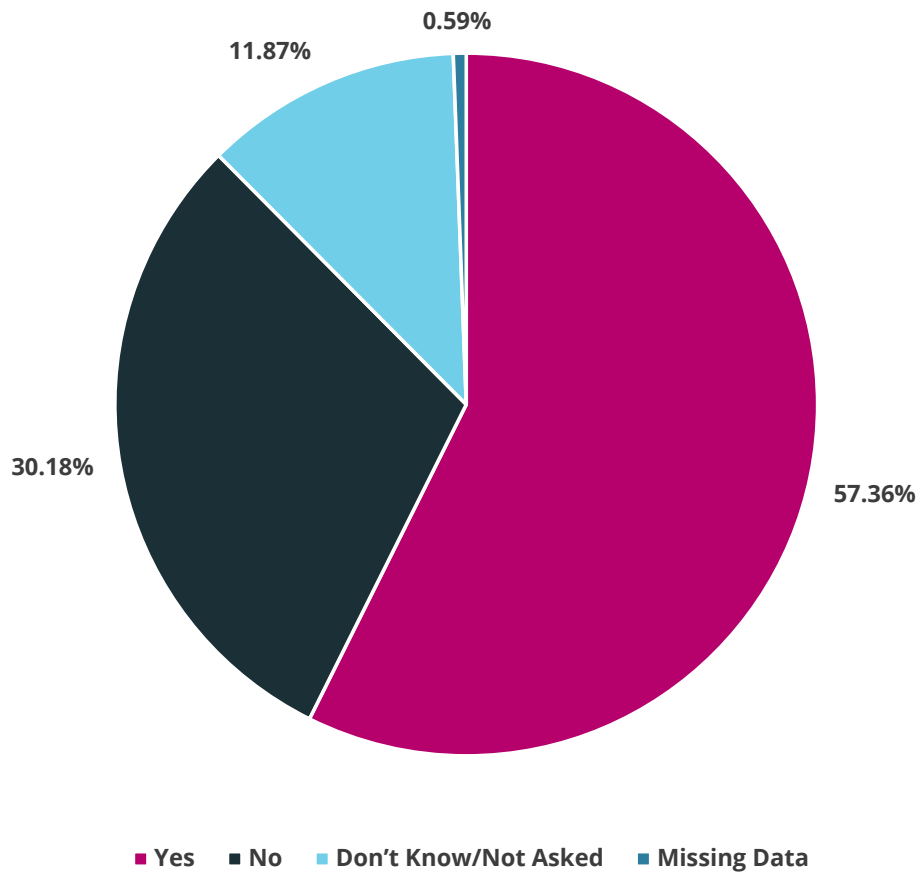
³³ Missing data= 0.2%; Don't know/Not asked/Not recorded = 1.4%; Declined to answer = 0.0%

³⁴ Missing data= 0.2%; Don't know/Not asked/Not recorded = 1.4%; Declined to answer = 0.0%

³⁵ Many migrant women experiencing abuse are wholly dependent on their perpetrators because of having insecure immigration visas. This leads to types of coercive control such as making direct threats of deportation as well as scaring survivors from accessing statutory and other support services out of fear of deportation and detention. This leads many women from being too scared to leave their abusive situation and access support (Southall Black Sisters, n.d; Imkaan, 2012).

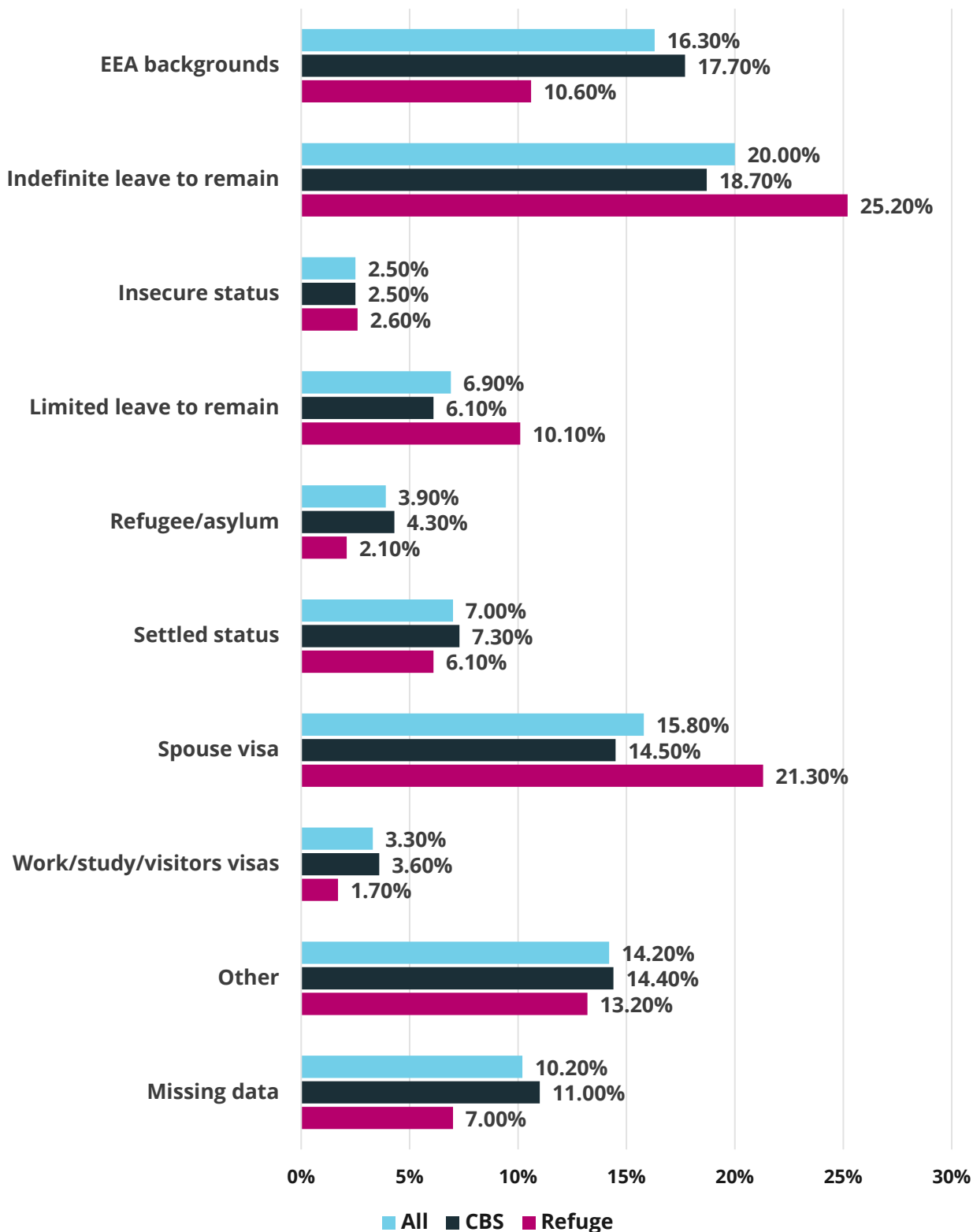
Table 1.2: What are the immigration statuses of service users (of those who are not British nationals)? 2021-22 (On Track)	Percentage of 4,628 who are not British nationals
Indefinite leave to remain (ILR)	20%
Spouse visa	15.8%
EEA national currently working	5.7%
EEA national other	3.8%
EEA family member	2.5%
EEA national receiving welfare benefits	3.5%
EEA national financially self-supporting	0.7%
EEA national in UK studying	<0.1%
Family reunification	<0.1%
UK nationals	5.2%
Limited leave to remain	6.9%
Insecure/ no status	2.5%
Dependent on husband's/wife's visa	3%
Asylum seeker awaiting decision	2.5%
Discretionary leave to remain	17.6%
Refugee	1.1%
Study visa	1.4%
Work visa(s)	1.3%
Visitor's visa	0.5%
Pre-Settled Status	4.2%
Settled status	7%
Family reunification	<0.1%
Husband / Wife sponsorship	<0.1%
Parent visa	0.2%
Not asked	3.2%
Missing data	0.4%
Declined	<0.1%
Unclear/unknown	6.9%

Chart 1.5: Recourse to public funds for those who are not British nationals 2021-22* (On Track)



*Percentage of 4,628 service users who are not British nationals.

Chart 1.6: Immigration statuses of services users who are not British nationals 2021-22* (On Track)



*Percentage of 4,628 service users who are not British nationals

1.7 Experiences of abuse

- ▶ The length of abuse experienced before accessing the support service ranged from 0 years to 66 years. The average length of abuse was 6 years and 1 month.
- ▶ 94.6% of perpetrators were male³⁶, and 73.0% of perpetrators were a partner or ex-partner of the service user³⁷.
- ▶ 85.5% of a sub-sample of service users for whom an abuse profile is available³⁸ had experienced emotional abuse, while 64.4% had experienced jealous or controlling behaviour. Coercive and controlling behaviour became a criminal offence in the Serious Crime Act 2015.
- ▶ 30.5% of the sub-sample had experienced financial abuse. This figure rose to 52.8% among those accessing refuge support. 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 that may not be captured by this figure (Women's Aid, 2019).
- ▶ 38.2% of service users in refuge in the sub-sample, and 33.7% of CBS service users, had experienced surveillance, harassment, or stalking.
- ▶ 16.9% of service users in the sub-sample had experienced sexual abuse. This figure was higher for those in refuge, at 29.7%.
- ▶ 53.5% of the sub-sample had experienced physical abuse, with this percentage being higher among those accessing refuge support, at 67.7%.
- ▶ 21.1% of the sub-sample had experienced attempted strangulation or suffocation. It is worth noting that, under the Domestic Abuse Act 2021, non-fatal strangulation and non-fatal suffocation are now criminal offences.
- ▶ 26.2% of the sub-sample had experienced threats to kill. This figure was higher for those in refuge, at 36.1%.
- ▶ 14.7% of the sub-sample of service users reported experiencing an injury which required medical intervention as a result of the abuse. This figure rose to 25.8% for those service users in refuge.
- ▶ 35.6% of service users in the sub-sample reported feeling depressed and/or having suicidal thoughts as a result of the abuse. This number was higher among those in refuge services, at 47.5%.
- ▶ 9% of service users in refuge reported having self-harmed as a means of coping with the abuse.

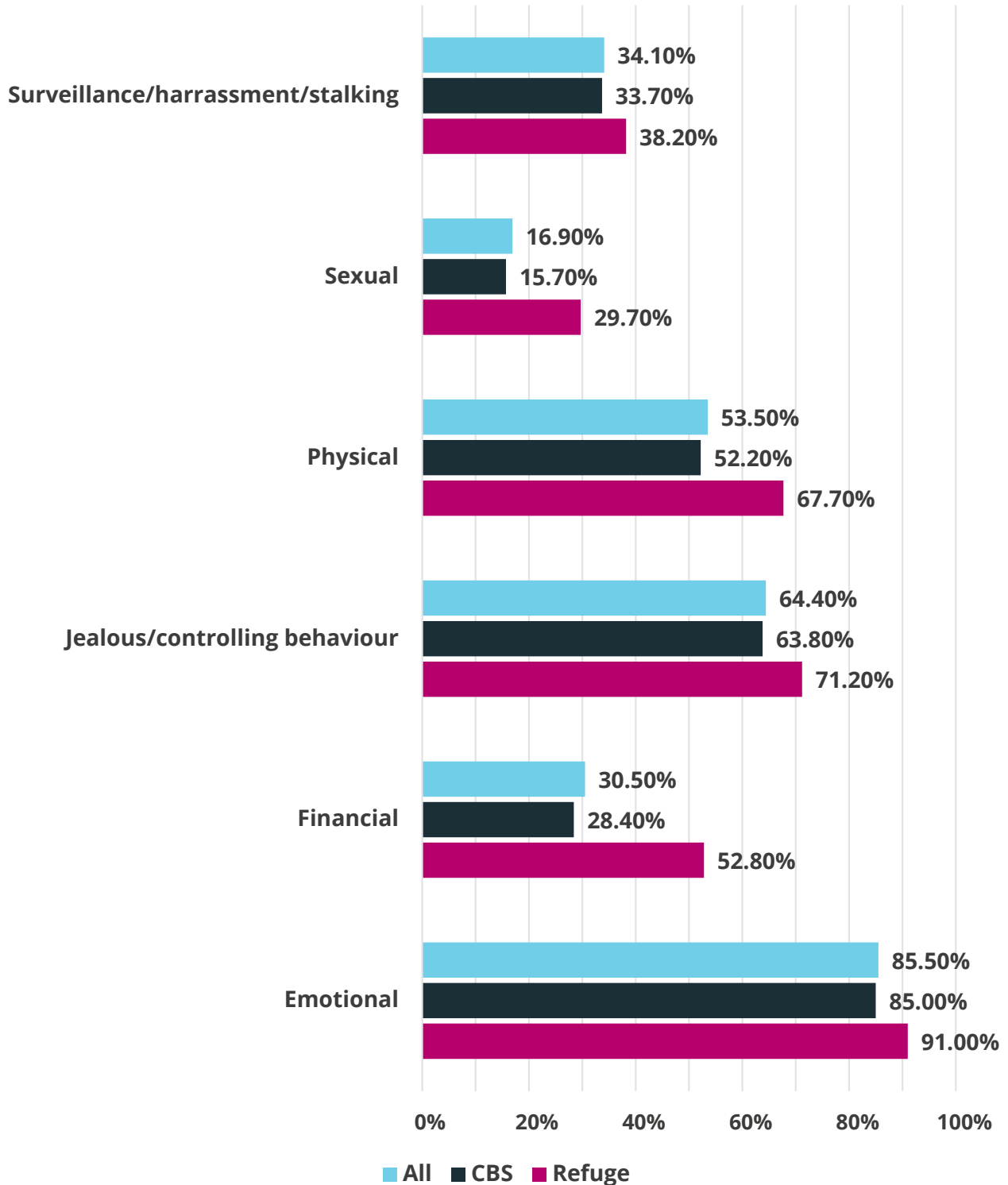
36 These are the perpetrators recorded on On Track in cases of domestic abuse against female service users. Information about perpetrators was recorded in 30,344 cases, there was not a perpetrator(s) recorded for every service user and some service users had multiple perpetrators recorded. Service users where no alleged perpetrator recorded: 4,202.

37 Missing data = 0.6%; Don't know/Not asked/Not recorded = 1.1%; Declined to answer = <0.1%

38 A sub-sample of 31,292 abuse profiles (3,499 refuge and 34,546 CBS), including both historic and current abuse.

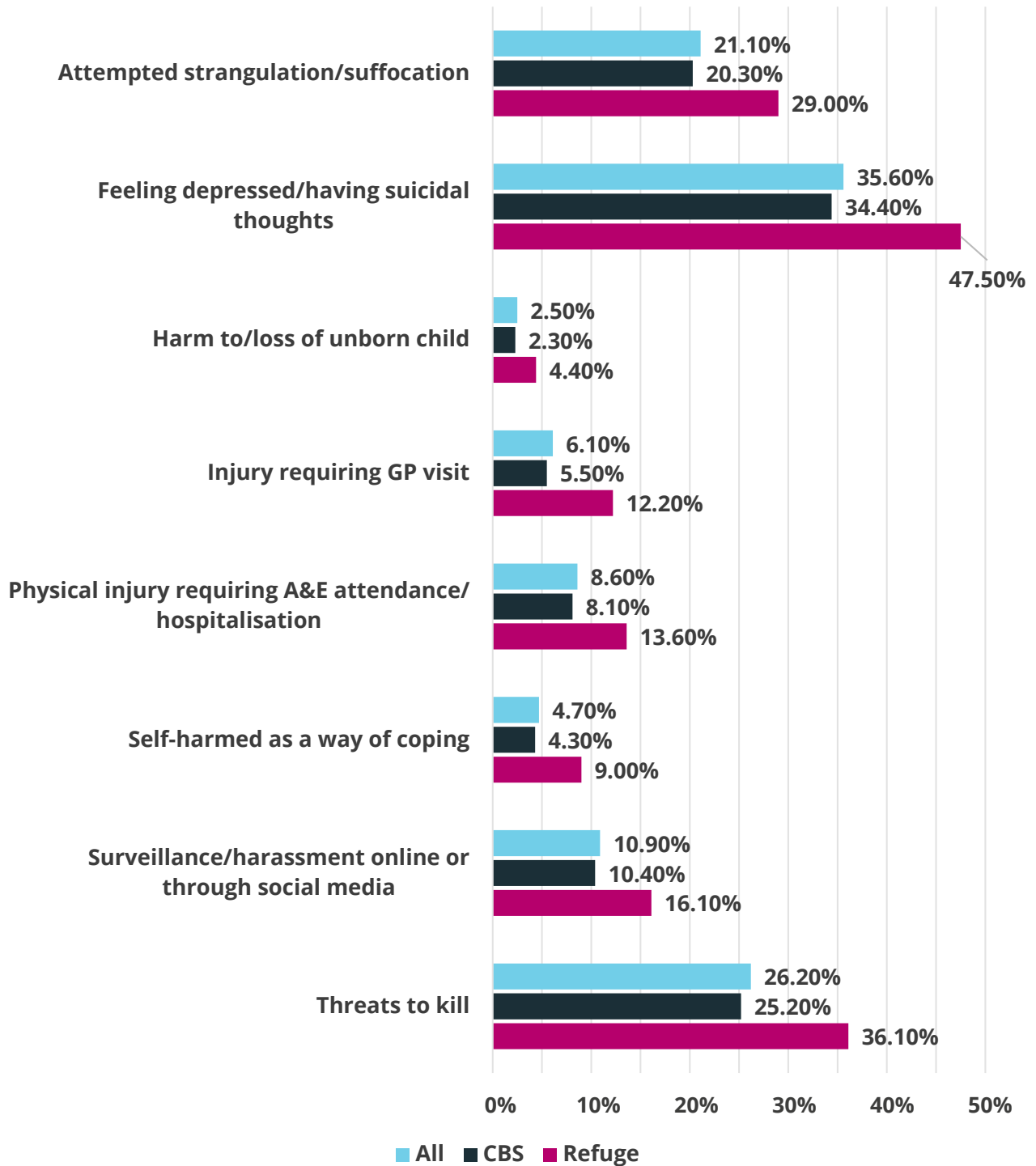
39 Missing data= 2.9%; Don't know/Not asked/Not recorded = 14.2%; Declined to answer= 0.2%

Chart 1.7: Type of abuse experienced by service users 2021-22* (On Track)



*From a sub-sample of 31,291 service users within the overall sample of 38,045 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 a survivor accesses more than one service or returns to a service.

Chart 1.8: Experiences of abuse of service users 2021-22* (On Track)



*From a sub-sample of 31,291 service users within the overall sample of 38,045 service users for whom an abuse profile on current abuse is available. Of these 38,045 service users, 24,943 were seeking support for current abuse and 6,926 were seeking support for historic abuse. This information was missing for 2,315 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.

1.8 Support needs

- ▶ 41.0% of service users had support needs around their mental health³⁹; for those service users in CBS this was 40.1%⁴⁰ and for those in refuge services this was higher at 50.1%⁴¹. The link between domestic abuse as a driver of mental ill health is well established, yet many survivors still face barriers when accessing adequate mental health support. Women's Aid's *Deserve To Be Heard* campaign sets out seven pillars for an effective mental health response to survivors, including providing women-only spaces and support delivered by professionals with expertise on domestic abuse (Women's Aid, 2022b).
- ▶ 6.0% of service users had a 'dual diagnosis' and had support needs around mental health and drug and/or alcohol use.
- ▶ 11.9% had support needs around their physical health⁴²; for service users in CBS this was 11.2%⁴³ and for those in refuge services this was higher at 17.6%⁴⁴.

More detail in Chart 1.9 on page 31

⁴⁰ Missing data= 2.9%; Don't know/Not asked/Not recorded = 15.2%; Declined to answer= 0.2%

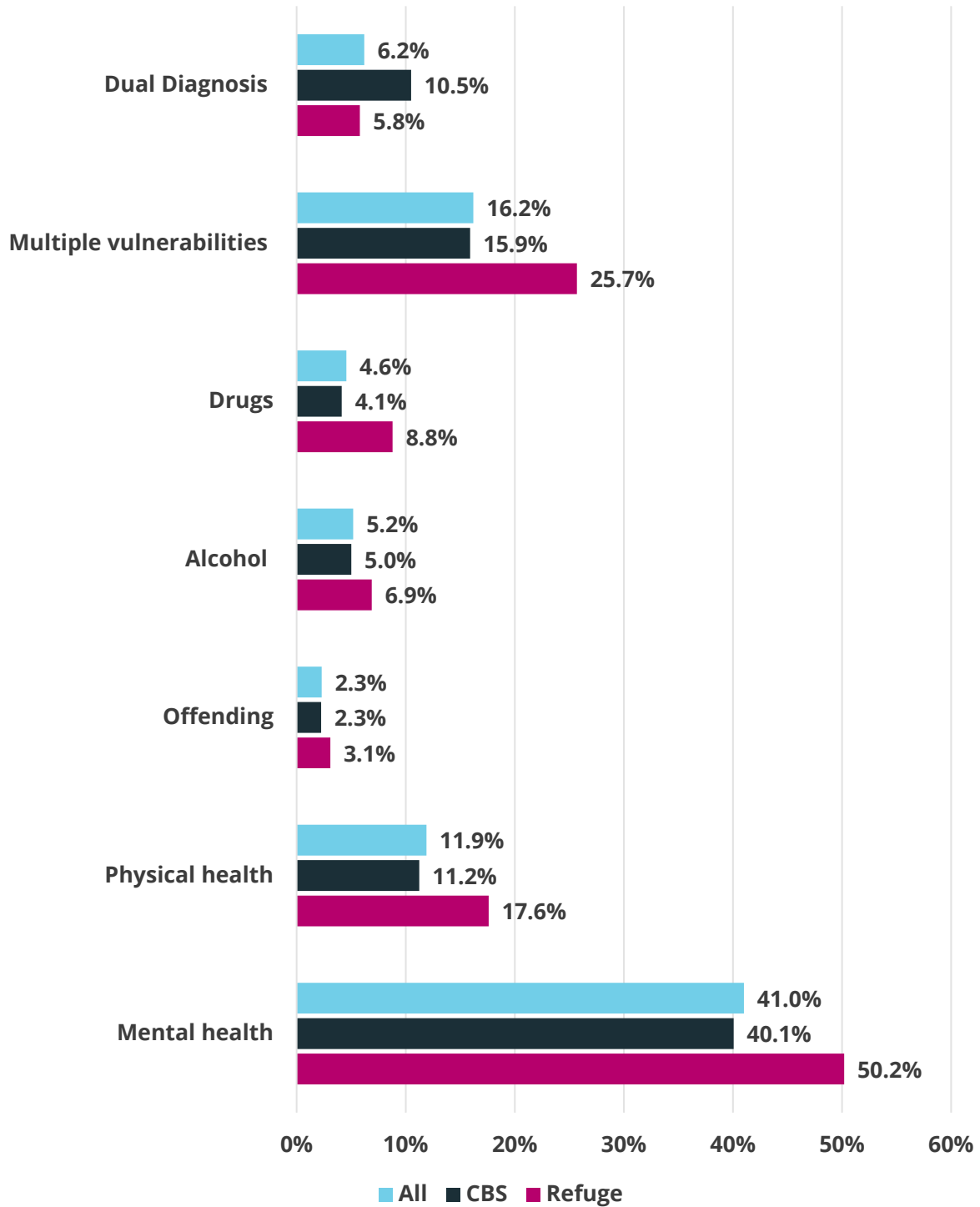
⁴¹ Missing data= 0.2%; Don't know= 4.3%; Declined to answer= 0.2%

⁴² Missing data = 0.2%; Don't know/Not asked/Not recorded = 14.8%; Declined to answer = 0.1%

⁴³ Missing data = 0.2%; Don't know/Not asked/Not recorded = 16.0%; Declined to answer= 0.2%

⁴⁴ Missing data = 0.1%; Don't know/Not asked/Not recorded = 3.2%; Declined to answer = 0.0%

Chart 1.9: Support Needs of service users 2021-22* (On Track)

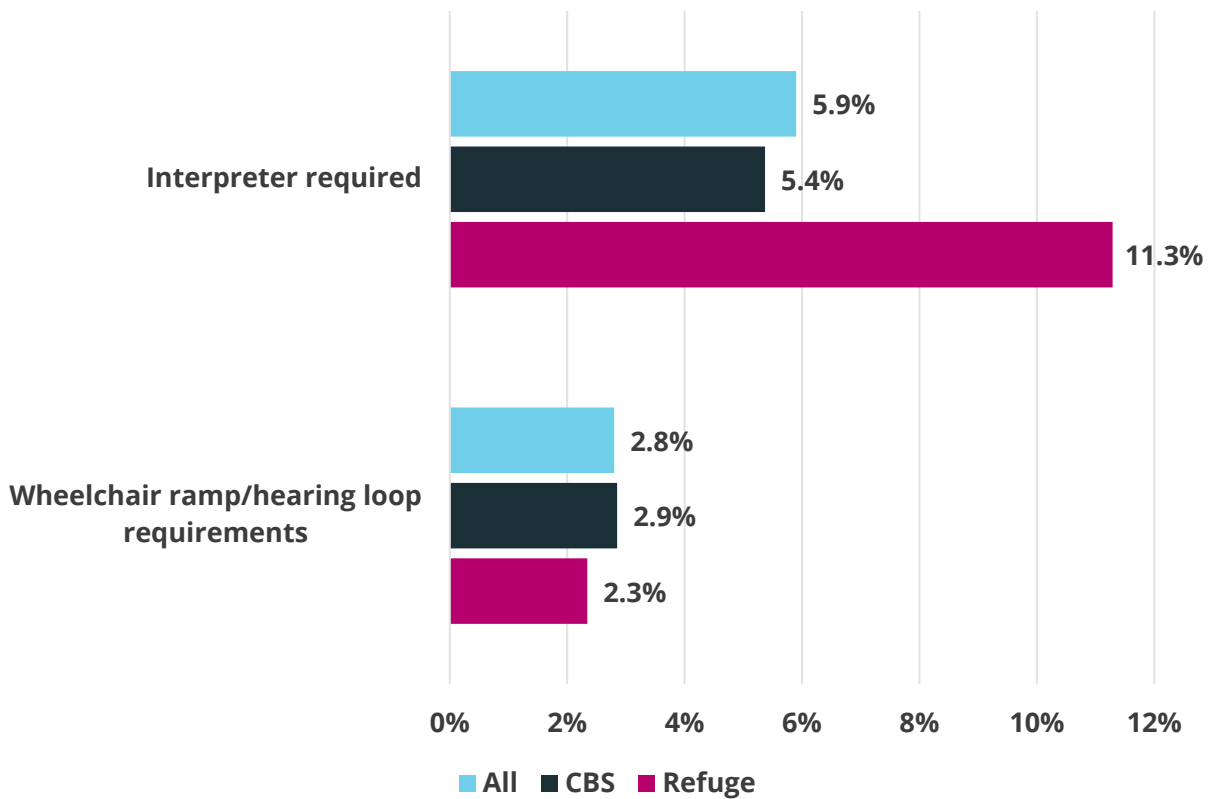


*Percentage of 38,045 service users in our sample. Some survivors will not have been able to access services because the service was not resourced to meet their specific support needs.

1.9 Accessibility

- ▶ Of a sub-sample of 34,546 service users for whom accessibility data is available, 2.9%⁴⁵ of service users had access requirements, such as needing a wheelchair ramp or hearing loop.
- ▶ 5.9%⁴⁶ of service users required an interpreter (British Sign Language or other language). For service users in CBS, this was 5.4%⁴⁷ and for those in refuge services this was higher at 11.4%⁴⁸.
- ▶ 0.07% were d/Deaf⁴⁹ 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.

Chart 1.10: Access requirements of service users 2021-22* (On Track)



*Percentage of 34,546 service users in a sub-sample of service users for whom accessibility data is available.

⁴⁵ Missing data = 0.1%; Don't know/Not asked/Not recorded = 12.5%; Declined to answer = <0.1%

⁴⁶ Missing data= 0.2%; Don't know/Not asked/Not recorded = 6.2%; Declined to answer= 0.1%

⁴⁷ Missing data= 0.1%; Don't know/Not asked/Not recorded = 6.7%; Declined to answer= 0.1%

⁴⁸ Missing data = 0.6%; Don't know/Not asked/Not recorded = 1.0%; Declined to answer = 0.1%

⁴⁹ 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/aboutdeafness/deaf-or-deaf/

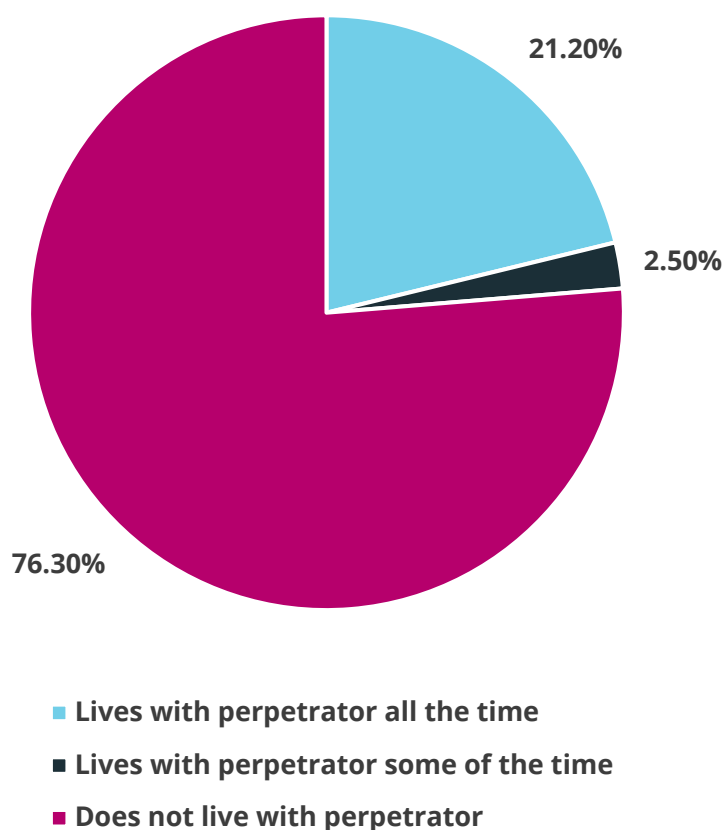
1.10 Accommodation

► In a sub-sample of 23,429 service users for whom data is available⁵⁰, 21.2% of service users lived with the perpetrator all the time, while a further 2.5% of service users lived with the perpetrator some of the time. This was lower for those in refuge services, 17.2% of whom lived with the perpetrator all the time and 2.2% of whom lived with the perpetrator some of the time.

► In a sub-sample of 8,535 service users for whom data is available⁵¹, 13.5% of service users had a joint tenancy or mortgage with the perpetrator. A further 4.2% of service users lived in accommodation held solely in the perpetrator’s name.

► 61.8% of the sub-sample had a tenancy or mortgage solely in their own name.

Chart 1.11: Living arrangements of service users 2021-22* (On Track)



*From a sub-sample of 23,429 service users within the overall sample of 38,045 for whom accommodation data is available.

50 A sub-sample of 23,429 service users (1,974 refuge and 21,455 CBS) for whom data on residence with perpetrator is available.

51 A sub-sample of 8,535 services users (826 refuge and 7,709 CBS) for whom tenancy/mortgage data is available.

1.11 Employment

- ▶ Of a sub-sample of 13,795 services users for whom data is available, 38.6%⁵² of service users were unemployed and not seeking work; for service users in CBS this was 35.2%⁵³ and for those in refuge services this was higher at 59.2%⁵⁴. This is likely because women accessing refuge services face severe and wide-ranging barriers to sustaining employment, including the physical and mental health impacts of domestic abuse, the need to move to access a refuge, and the risk from the perpetrator knowing their place of work. Therefore, those accessing refuges will be more likely to need to claim housing benefit to pay for their refuge space.
- ▶ Overall, 16.9% of service users were employed full time and 13.4% were employed part time (less than 24 hours).
- ▶ 4.4% of all service users were long term sick or disabled; this was 4.4% in both refuge services and CBS services.

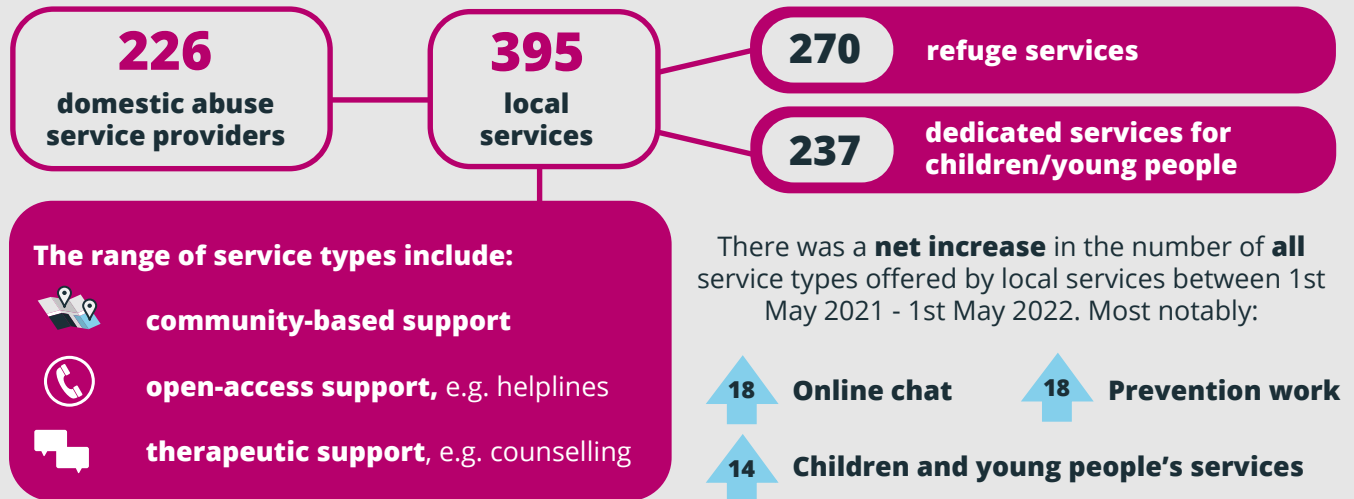
52 Don't know/Not asked/Not recorded = 1.2%; Declined to answer = 0.1%

53 Declined to answer = 0.1%; Don't know/Not asked/Not recorded = 2.1%

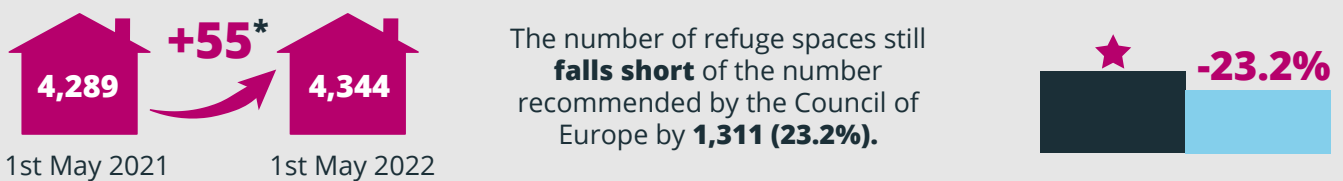
54 Declined to answer= 0.1%; Don't know/Not asked/Not recorded = 2.5%

Key findings from Routes to Support

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



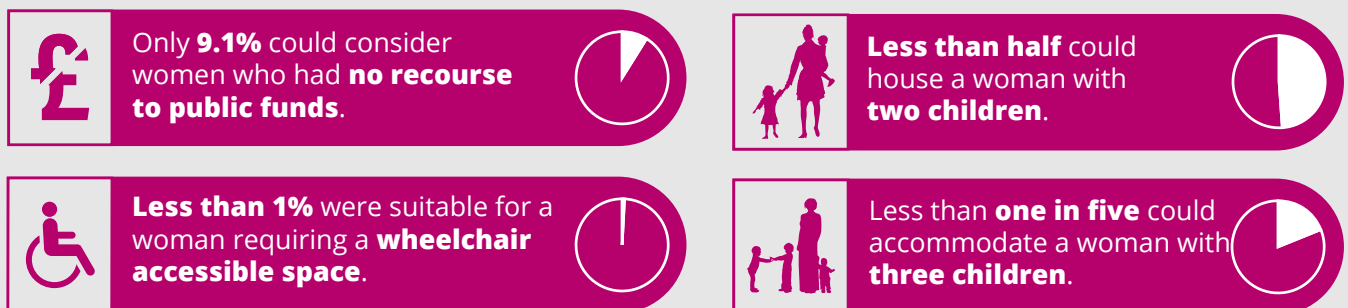
2 The number of refuge spaces has increased but there is still shortfall.



*This **net change** does not give a full picture of change in the sector as it does not account for services opening or closing during the year.

3 More needs to be done to make sure refuge spaces are sustainable and accessible to all.

Of vacancies posted on Routes to Support from April 2021 to March 2022:



4 Domestic abuse services continued to support large numbers of women.



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.

2.1 Who are the service providers?

There were 226 domestic abuse service providers with services listed on Routes to Support in England in May 2022. These organisations were running 395 local services between them throughout England. 270 of these included refuge services and 237 included dedicated services for children/young people (CYP). Of the 226 providers, 157 (running 300 local services) are members of Women's Aid and 22 (running 29 local services) are members of Imkaan⁵⁵. Of these 22 Imkaan members, 21 (with 27 local services) are members of both Imkaan and Women's Aid.

The majority (67.1%) of local domestic abuse support services are run by dedicated providers⁵⁶. Of the 270 local services with a refuge service, 66.3% 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 82.5% of these services being run by dedicated providers (see 2.4).

International conventions and frameworks include domestic abuse within a wider definition 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 violence⁵⁷. 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 on the next page**.

We have seen a small net increase of four local services from 391 on 1st May 2021, to 395 on 1st May 2022. There has been a slight net decrease in the number of providers running these local services, with there being 229 providers on 1st May 2021 compared to 226 on 1st May 2022. Net change does not reflect the changes to provision

⁵⁵ 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)."

⁵⁶ Organisations constituted solely for the purpose of delivering violence against women and girls (VAWG) support services.

⁵⁷ 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" www.coe.int/en/web/conventions/full-list?module=treaty-detail&treatyid=210

that happen throughout the year, for example as some providers are able to expand their provision and setup new services, others may close due to lack of continued funding. Contracts for services also move between different providers as a result of tendering processes. There were 20 services added to Routes to Support and 16 services

removed from the system during 2021-22⁵⁸. Of the 16 services that were removed from Routes to Support, nine of these were removed because the tender changed hands to another provider. Two providers merged to form one organisation and two services which were temporary projects set up in response to Covid-19 came to an end.

Table 2.1: Support for women experiencing other forms of violence against women and girls (VAWG), May 2022 (Routes to Support)

Form of VAWG	Number of refugees	% of refugees	Number of CBS services	% of CBS services
Female genital mutilation (FGM)	241	89.3%	230	81.6%
Forced marriage	264	97.8%	272	96.5%
So called 'honour'-based violence	254	94.1%	254	90.1%
Sexual violence	186	68.9%	193	68.4%
Trafficking	178	65.9%	165	58.5%
All	270	-	282	-

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 45 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 11.8% of all refuge spaces in England, and just under half of these are in London. Not all these services are 'by and for' expert organisations, led

by women from the group they support. Of the 33 refuges which are run exclusively for Black and minoritised women, 20 are run by organisations that are members of Imkaan. Of the 13 refuge services which are not run by members of Imkaan, 10 of them are run by dedicated domestic abuse service providers and three are run by Housing Associations. **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 2022 (Routes to Support)

Service dedicated for	London	All England
Black and minoritised women	21 (206)	42 (400)
d/Deaf women	0 (0)	2 (0)
Eastern European women	1 (0)	3 (0)
LGBT+ survivors	2 (0)	5 (8)
Women from specific religious group	1 (0)	1 (0)
Women aged over 45	0 (0)	1 (4)
Women with insecure immigration status	0 (0)	1 (62)
Women with learning disability	2 (12)	2 (12)
Women with substance use/alcohol use/mental health support needs	2 (14)	4 (29)
Women who have experienced/are experiencing forced marriage (no refuge services)	0 (0)	2 (0)
Young women (aged 16-25)	0 (0)	2 (19)
Total	29 (232)	65 (534)

Table 2.3: Provider types of services run exclusively for groups, May 2022 (Routes to Support)

Service dedicated for	Dedicated provider	Housing Association	Other	All
Black and minoritised women	38	3	1	42
d/Deaf women	0	0	2	2
Eastern European women	3	0	0	3
LGBT+ survivors	4	1	0	5
Women from specific religious group	1	0	0	1
Women over 45	1	0	0	1
Women with insecure immigration status	0	0	1	1
Women with learning disability	0	1	1	2
Women with substance use/alcohol use/mental health support needs	3	1	0	4
Women who have experienced/are experiencing forced marriage (no refuge services)	2	0	0	2
Young women (16-24)	2	0	0	2
Total (%)	54 (83.1%)	6 (9.2%)	5 (7.7%)	65

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 (CYP);
- ▶ 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 CYP services 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** (next page), there have been changes to the number of all service types compared with figures at 2021. We see increases in all service types at May 2022, with the exception of drop-in services which have remained the same. The most significant increases have been in prevention work and online chat services, which have both increased by 18. CYP services have also increased by 14. There was, however, regional variation in these changes and not every region benefitted from the overall increase. For example, there was an increase of six services offering prevention work in the South East of England but the number of services offering this service type fell by one in the East Midlands. The South East of England saw the highest net increase in all service types overall, with the number of service types in this region increasing by 32 overall. Some regions saw a net decrease with London (-6), the North West of England (-3), the West Midlands (-2) and the East Midlands (-1) all having a lower number of service types at May 2022 compared to May 2021.

It is important that survivors are able to access a full range of service types to meet their individual support needs and wishes. A recent report with initial findings from a mapping exercise carried out by the Domestic Abuse Commissioner⁵⁹ found that less than half of survivors in England and Wales were able to access the type of community-based support that they wanted, with there being regional variation in availability and gaps in access to different types of provision, amounting to a 'postcode lottery' of support (Domestic Abuse Commissioner, 2022).

⁵⁹ domesticabusecommissioner.uk/about/: "The Domestic Abuse Commissioner is an independent voice that speaks on behalf of victims and survivors. The Commissioner will use her statutory powers, which are set out in the Domestic Abuse Bill, to raise public awareness and hold both agencies and government to account in tackling domestic abuse."

Table 2.4: Types of support services for women available in England, May 2022 (Routes to Support)

Service types	Number of services	Change from May 2020
Refuge	270	+1
Resettlement	212	+4
Floating support	80	+2
Outreach	200	+4
IDVA service*	146	+4
Prevention work	166	+18
Helpline	153	+7
Drop-in	93	0
Online chat	46	+18
Formal counselling	138	+1
Support groups	261	+6
CYP service	237	+14

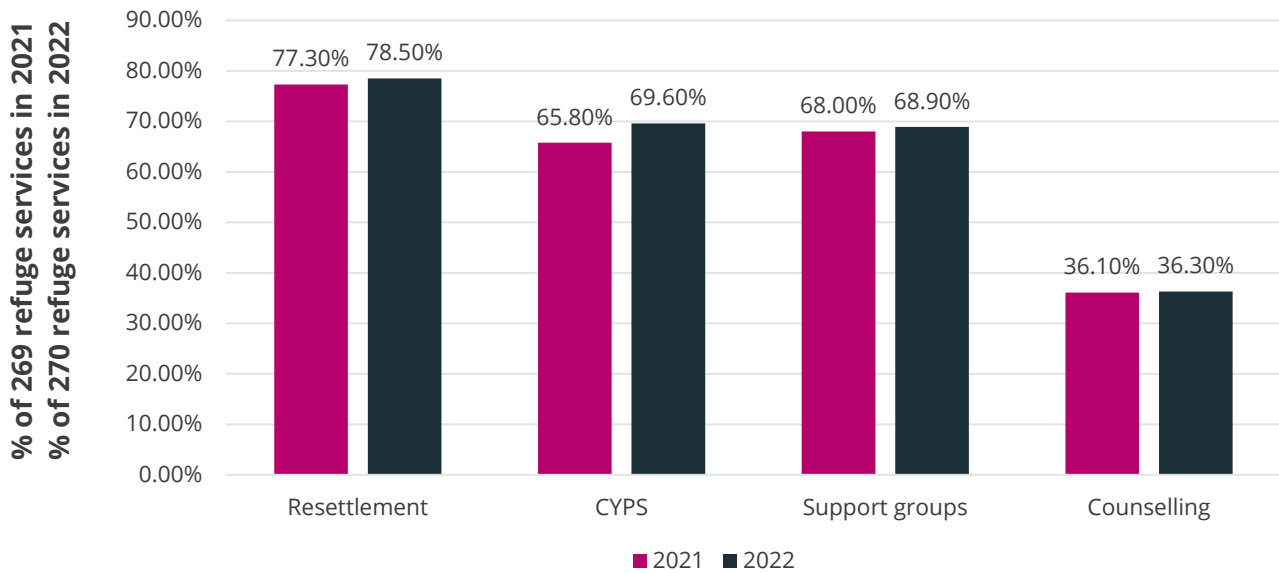
*This is the number of Independent Domestic Violence Advocate (IDVA) services, not the number of individual staff members working as IDVAs.

2.4 Refuge services and bedspaces

As mentioned in Section 2.3, 270 of the 395 local services available in England on 1st May 2022 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 their recovery from experiences of domestic abuse. This support is informed by the woman'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 from 2021 in the percentage of refuge services which can offer additional service types, and it is still the case that less than three-quarters (68.9%) of local refuge services were able to provide support group/group work programmes

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



to residents and only 69.6% of refuge services have a dedicated CYP service. Only 36.3% 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 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 bedspaces available in refuge services. One bedspace 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 bedspaces in England every year since 2010. In the previous year, between 1st May 2020 and 1st May 2021, we saw the highest ever yearly increase of 354 bedspaces, largely as a result of additional refuge bedspaces that were set up with emergency funding made available in response to Covid-19. It

was not clear whether these additional bedspaces would remain after this emergency funding came to an end, however the increase appears to have been sustained through to 2021-22. In the year ending March 2022 there was an increase of 55 bedspaces, from 4,289 bedspaces for women on 1st May 2021 to 4,344 bedspaces on 1st May 2022. Some of these bedspaces are not exclusively for women, with 285 of these 4,344 bedspaces being for either men or women. See 2.8 for full details of the provision that is available for men. There is regional variation in changes to the number of bedspaces, with some regions seeing a net increase, some a net decrease and other having no change in the number of bedspaces available. Yorkshire & Humberside saw the highest net increase with an increase of 41 bedspaces. The region with the highest net decrease is the North East, where we see a decrease of 38 bedspaces.

Despite the sustained increase in bedspaces, the figure of 4,344 still falls short (by 1,311) of the Council of Europe’s minimum recommendation⁶⁰

⁶⁰ 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 the ONS mid-year population estimate for 2020: 56,550,138.

(see **Chart 2.2**) and represents a 23.2% shortfall. There is regional variation again here and although refuge shortfall has fallen slightly overall (compared to 24.2% on 1st May 2021), it has risen in some regions. We know the refuge sector is supported by a considerable number of bedspaces which receive no local authority commissioned funding (13.0% of all refuge bedspaces running on 1st May 2022), with a disproportionate number of these non-commissioned bedspaces provided within expert services by and for Black and minoritised women (see Section 3.3 for details). If these non-commissioned services were not available, the level of shortfall would increase from 23.3% (1,311 bedspaces) to 32.4% (1,833 bedspaces).

The shortfall in refuge bedspaces means there will only be a limited number of bedspaces available on any given day. There are a number of factors which impact how regularly services can advertise each bedspace, such as the length of time residents require support for and whether they have staffing capacity to provide support to new referrals. Despite the increase in bedspaces overall, fewer vacancies were made available during 2021-22 compared to previous years. As shown in **Table 2.5**, during the previous year 2020-21 we saw a significant decrease in the number of vacancies being made available, with almost one-fifth (19.9%) fewer vacancies posted compared to 2019-20. This was likely due to the impact of Covid-19, for example, during

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

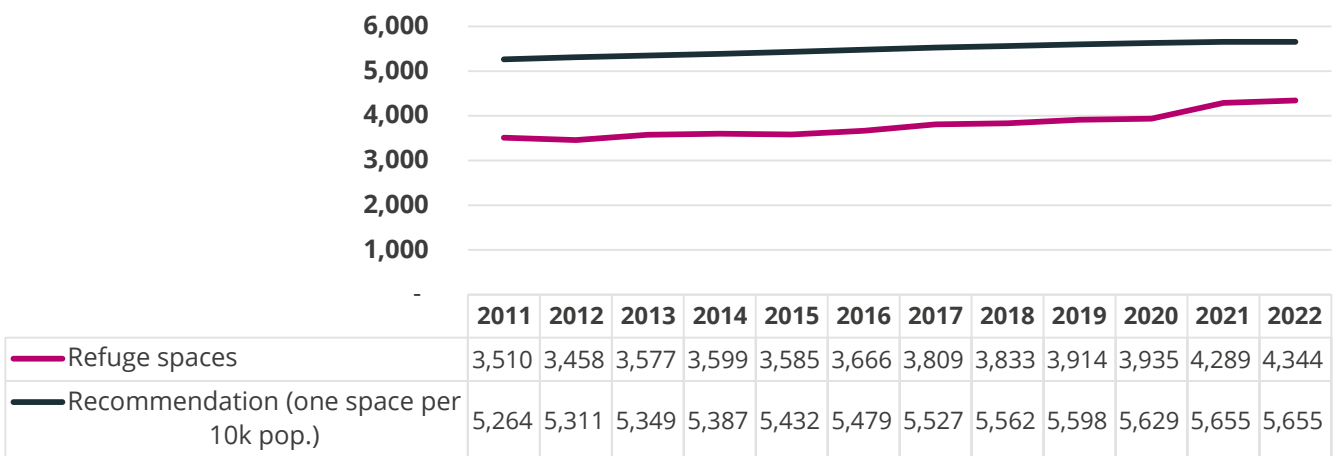


Table 2.5: Bedspaces and vacancies on Routes to Support (change from 2019-20 before the pandemic)

Year	#bedspaces	#vacancies	Change from 2019-20	%decrease from 2019-20
2019-20	3,935	10,340	-	-
2020-21	4,289	8,280	2,060	19.9%
2021-22	4,344	8,051	2,289	22.1%

the pandemic services faced challenges with staffing shortages and difficulties sourcing move-on accommodation (Women's Aid, 2021c). The number of vacancies made available in 2021-22 has fallen even further, with there being 229 fewer vacancies compared to the number in 2020-21 despite there being more bedspaces overall. This is a decrease of 22.1% from 2019-20 before the pandemic. In 2019-20, each bedspace became available 2.6 times per year however in both 2020-21 and 2021-22 this fell to only 1.9 times per year.

Although the most severe pandemic restrictions were no longer in place throughout 2021-22, the further decrease in the number of vacancies being made available indicates that services continued to face issues which impacted on their capacity. In this year's Annual Survey, local services reported

experiencing ongoing issues related to Covid-19, difficulties with staffing levels and recruitment, more complex cases and longer support times (see section 3.2). These pressures are likely why numbers of vacancies being made available have remained at a lower level compared to numbers available during 2019-20 before the pandemic.

The actual number of bedspaces available to a woman looking for refuge will be dependent on whether available bedspaces are appropriate for her specific needs and circumstances. To determine how many bedspaces 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 bedspaces vary in size and will be able to accommodate either single women only or families of different sizes. The availability of suitable bedspaces will depend on the number of children the woman is fleeing with. Of the

vacancies listed on Routes to Support in 2021-22, 39.0% were suitable for a woman with two children. Less than one in five vacancies (13.7%) 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 may need to be located close to her place of work. Along with these significant barriers to remaining in paid employment, women may be unable to work while recovering from the emotional and physical impacts of the abuse they have experienced.

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 as often these are coping mechanisms adopted as a result of their experiences of domestic abuse (Women's Aid, 2021a). As the information on vacancies (**Table 2.6**) and the availability of specialist workers (**Tables 2.7** and **2.8**) show, it can be difficult for a woman to access a refuge bedspace if she has additional support

needs around mental health, or drug/alcohol use. The number of refuge services with specialist support workers has increased from 2021; now 17.8% of all refuge services have a specialist mental health support worker(s), 10.8% have a specialist drug use worker(s) and 11.9% have a specialist alcohol use worker(s). As noted earlier in this section, only 36.3% of refuge services are able to provide a counselling service. Refuge service providers also have to consider the needs of existing residents and dynamics in the refuge when assessing the suitability of a referral.

Table 2.6: Refuge vacancies posted to Routes to Support in 2021-22. % vacancies for each group (change from 2020-21)

Types of vacancies	Vacancies available to different groups	Change since 2020-21
# All vacancies posted, England	8,051	-229
Woman plus two children	39.0%	-3.2%
Woman plus three children	13.7%	-1.6%
No recourse to public funds	9.1%	+2.8%
Full wheelchair access	0.9%	-0.5%
Person with limited mobility	1.1%	-0.1%

Table 2.7: Community-based services with specialist support workers, May 2022 (Routes to Support)

Specialist worker type	Mental health support needs	Drug use support needs	Alcohol use support needs
Number of community-based services	35	19	18
Change from 2021	+6	+3	+3

Table 2.8: Refugees with specialist support workers, May 2022 (Routes to Support)

Specialist worker type	Mental health support needs	Drug use	Alcohol use
Number of refuge services	48	29	32
Change from May 2022	+9	+4	+7

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 2021-22 only 0.9% of vacancies were in rooms fully accessible for wheelchairs and a further 1.1%

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 funds⁶¹ the bedspaces available to her will be limited. As shown in **Table 2.6** only 9.1% of all vacancies listed during 2021-22 could consider women who were not eligible to access public funds. This has risen from 6.3% of vacancies in 2020-21. 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.

⁶¹ 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.

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 ongoing 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 section on Methodology). We calculate that all refuge services in England supported an estimated 10,502 women and 12,602 children in 2021-22 and all community-based services supported an estimated 131,094 women and 170,422 children (see **Table 2.9** 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 61.6% 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

26.2% of rejected referrals being for this reason. With this in mind, it is worth noting again that the number of vacancies in refuge services fell in 2021-22 compared to the previous year (see Section 2.4) and that local services reported experiencing a number of issues which impacted on their capacity during the year (see section 3.2 for details).

50.4% of all the referrals received in community-based services (**Table 2.9**) were rejected (for any reason). The main reasons for rejection were that the survivor did not want support (30.6% of rejected referrals), that the service was unable to contact the survivor (25.7% of all those referrals were rejected) and that the client was already in another service (24.6%). 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. The

Table 2.9: Referrals to all services in 2021-22 (estimates calculated from baseline data from On Track)

	Refuge services	CBS services
Women		
Estimated referrals accepted/women supported during the year	10,502	131,094
Estimated referrals declined during the year	16,847	133,208
Estimated total referrals received during the year	27,348	264,302
Children		
Estimated children supported during the year	12,602	170,422

62 In addition to the 4,102 women for which a previous location was recorded, there were 1,413 women placed in refuge during 2021-22 for which their previous local authority was not known.

Table 2.10: Journeys made by women accessing refuge services 2021-22 (Routes to Support)

Previous locations of women	Number of women	% of women
Same local authority as refuge	699	17.0%
Different local authority to refuge	3,403	83.0%
Total women (where previous local authority home was known)	4,102	
Previous locations of women	Number of women	% of women
Same region as refuge	2,853	67.5%
Different region to refuge	1,376	32.5%
Total women (where previous region home was known)	4,229	

service may not be appropriate for her particular needs or the 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. When a refuge service accepts a referral and removes a vacancy from Routes to Support, the worker removing the vacancy is asked to record which local authority the woman was located in before coming to the refuge, or where this information is not available, whether the woman was previously located in a different region. As shown in **Table 2.10**, 83.0% of women placed in refuge during 2021-22 came from a different local authority area to the refuge they moved to (3,403 out of 4,102 women⁶²). The majority of women travelled to a refuge that was located within the same region⁶³ as their previous home (67.5%, 2,853 out of 4,229 women⁶⁴), however over one third of women travelled to another region to access refuge in a safe location that was suitable for her needs (32.5%, 1,376 out of 4,229 women).

⁶³ 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)

⁶⁴ In addition to the 4,229 women for which it was possible to determine whether they had travelled to another region, there were 1,286 women placed in refuge during 2021-22 for whom it was not possible to determine their journey.

2.6 Dedicated services for children and young people

Of the 270 refuge services running in England in May 2022, 228 (84.4%) were running at least one dedicated children and young people service (CYP). 177 (65.6%) refuges employed a dedicated CYP worker, whose primary role 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 2022 (Routes to Support)

Service	Number of refuges	% of refuges	% change from 2020
Dedicated emotional support	201	74.4%	+2.0%
Outings/activities/play sessions	195	72.2%	-0.3%
Individual support	180	66.7%	+1.6%
CYP worker	177	65.6%	+2.7%
Advocacy	29	10.7%	-9.0%
Play therapy	109	40.4%	+1.0%
Support group	84	31.1%	-2.0%
Mentoring	41	15.2%	-0.4%
CYP counselling	32	11.9%	-0.4%
Family support worker	5	1.9%	0.0%
Art therapy	2	0.7%	0.0%
Refuges with a dedicated CYP service	188	69.6%	+3.8%
Total number of refuges	270	-	-

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 Respect⁶⁵) 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 bedspaces 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 bedspace 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 2022, 191 out of 395 entries (48.4%) on Routes to Support had one or more services for men, including 43 out of 270 refuges (15.9% of refuges) which could also accommodate men. There were 307 refuge bedspaces available for men, 22 for men only and 285⁶⁶ for either men or women. Although the number of bedspaces for men only has fallen by one space since May 2021, the overall number of bedspaces which men can access (because they are available to both men and women) has increased by 26 bedspaces. We have also seen an increase in most other service types provided for men, continuing a trend for service provision for men overall rising year on year. See **Tables 2.12** and **2.13** (next page).

⁶⁵ 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." www.respect.uk.net

⁶⁶ These 285 bedspaces are also included in the 4,344 bedspaces for women mentioned earlier in this report.

Table 2.12 Services for men in England*, May 2022 (and change from May 2021) (Routes to Support)

Service types	Number of services in England in May 2022	Net change since May 2021
Refuges with bedspace for men	43	+4
Floating support	26	-1
Helpline	98	+5
Outreach	120	+6
Project based	26	-6
Domestic violence advocacy project	99	+9
Sexual violence advocacy project	32	+4
Information and advice	119	0
Total entries with one or more services for men	191	

*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 2022 (and change from May 2021) (Routes to Support)

	Bedspaces available to men	% of all refuges with a bedspace(s) for men	% of all bedspaces available to men
Number at May 2022	307	15.9%	7.1%
Net change from May 2021	+26	+1.4%	+0.6%

* 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 2022, as well as five interviews with representatives from services, and FOI data requests.

Key findings

- ▶ Organisations responding to our Annual Survey were proud of their achievements in continuing to provide support throughout 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, especially for marginalised survivors. (See 3.1).
 - ▶ Increases in the length and complexity of cases, trying to ensure long-term and sufficient funding, the Covid-19 pandemic, recruitment and retention of staff, and the cost-of-living crisis more generally have presented significant challenges for services over the past year. Respondents also raised concerns regarding political discussions around single-sex services and the detrimental impact this could have on their services. (See 3.2).
 - ▶ 71.1% of refuge services were commissioned by their local authorities in 2021-22. This is a slight increase on the previous year (69.5% in 2020-21). (See 3.3.).
 - ▶ 72.7% of survey respondents providing CBS services told us that they had received funding from their local authority for CBS services in 2021-22. However, this funding often did not cover the full costs of delivering services. (See 3.3.)
 - ▶ 44.0% of organisations responding to the Annual Survey told us they had been running an area of their domestic abuse service in 2021-22 without any dedicated funding, with domestic abuse prevention/educational work the most common area to be run without dedicated funding. (See 3.3.).
 - ▶ 49.2% of respondents running a refuge service had received funding as a result of the statutory duty. (See 3.4).
 - ▶ Service provider experiences around the new statutory duty were mixed, including optimism for service expansion from the increase in dedicated funding, alongside concerns around the commercialisation of commissioning and the erosion of specialist services. There appeared to be considerable variation in the way that local authorities were interpreting the regulations and guidance. (See 3.4.).
-

3.1 Achievements in 2021-22

We asked organisations what aspect of their domestic abuse service and work they were most proud of in 2021-22. The following themes emerged from their comments.

Continuing to provide support throughout the pandemic

Perhaps unsurprisingly, when asked what organisations were most proud of over the previous financial year, a large number talked about continuing to support survivors through the pandemic. As we explored in last year's annual audit, the Covid-19 pandemic and related Government restrictions presented organisations with many challenges when it came to delivering services. Organisations were pleased that they had been able to face these and continue running their services.

A common source of pride for organisations was their team. Respondents discussed how staff had worked hard to continue providing quality support to survivors of domestic abuse, despite the many challenges they faced from insecure funding, recruitment and the pandemic.

“

“Providing consistent and effective support during the pandemic.”

“We are proud to say we were able to meet the challenges that we faced during the Covid-19 Pandemic.”

“

“Staff and their resilience in continuing to deliver excellent services for women throughout a second year of uncertainty; new ways of working and increasing caseloads.”

Service expansion

Some respondents reported being able to open new services or expand the ones they already had. For some organisations this meant being able to hire new employees, and therefore support more survivors, for others it meant developing new services altogether. This included both refuge spaces and community-based support (CBS) services. For some organisations this service expansion had been enabled through the implementation of the statutory duty. However, experiences of the statutory duty varied considerably. This is explored further in section 3.4.

“

“We were able to increase capacity, support more service users and develop additional services.”

Supporting marginalised survivors with multiple disadvantages

Some organisations reported that they were especially proud of being able to meet the needs of a wide range of survivors over the past year, including those facing structural barriers or multiple disadvantages. Almost all of these responses specifically mentioned supporting women with insecure immigration status/ no recourse to public funds, reflecting how much the needs of these survivors continue to be overlooked.

“

“Our continued work with women that have complexity of needs and those facing multiple disadvantages, particularly where other services will not accept women into service for a variety of reasons. We are proud to be a service that supports women from all backgrounds and cultures including those with no recourse to public funds. We accept referrals for women with mental health diagnosis and have had wide success in working with these women and families to enable them to rebuild their lives after the trauma of abuse moving into permanent accommodation and resettling. Equally we are proud that we have been able to support women who are working to come into refuge and continue working as this too is often a barrier to safety.”

“Engaging with our partners to call for better support for migrant women.”

3.2 Challenges during 2021-22

Our Annual Survey asked organisations to reflect on the challenges they had faced in 2021-22. Their responses were varied, with concerns raised around the difficulties of the Covid-19 pandemic, staffing levels and capacity, increases in demand and complexity alongside a lack of safe move-on accommodation and the cost-of-living crisis, as well as the changing funding and commissioning landscape.

Increased demand: case lengths and complexity

Along with concerns around funding, recruitment and staff shortages due to the pandemic, many organisations also experienced an increasing demand for their services. As explored in further detail below, this increase in demand could in part be linked to the lack of support from statutory services.

“

“Many services were overloaded with demand without any additional capacity being allocated from local authority funding.”

This increased demand also related to the difficulty in accessing safe move on accommodation for survivors, as well as what many organisations described as increasing complexity of needs from survivors using their services.

Increases in demand and complexity of cases was compounded by the lack of external support organisations received from other services. Many discussed the barriers they experienced when it came to accessing statutory services and government departments, such as the police and the Department for Work and Pensions (DWP).

“Increase in demand for services for refuge. Lack of move on accommodation after refuge – resulting in bed blocking. No support for domestic abuse victims within the community who are not medium to high risk as deemed by the DASH Risk Assessment.”

“The biggest challenge is meeting the ever-increasing complexity of needs of the women using our services, alongside the limits on statutory funding for these services.”

“The length of time to support a service user and the duration of support increased due to remote working and having to wait for increased amount of times to get through to agencies such as DWP for benefit issues.”

“We have struggled to access statutory services from health and social care partners due to availability and delays.”

Recruitment and retention of staff

The domestic abuse sector has experienced considerable challenges around recruitment and retention of specialist staff over the past year.

This problem appears to have been compounded by competitive tendering processes and statutory agencies developing their own domestic abuse services, leaving some organisations struggling to compete. In Section 3.4, we explore this further, along with what the changing landscape of domestic abuse support services might mean for survivors trying to access support, and the impact on established domestic abuse organisations who hold a positive reputation in their communities.

“We know that staff can go and work for Tesco’s and probably get paid more, and they’ll have a job that’s less stressful and less difficult and won’t have difficult hours or working shifts or whatever.” – **Interview**

Funding

The most common challenge faced by domestic abuse services was around funding, where short term contracts left organisations often unable to plan for the future. Many respondents also commented on the fact that despite increasing caseloads, funding remained the same. Another organisation raised the fact that despite pandemic restrictions remaining in place for much of 2021, emergency Covid-19 funding provided by the Government only lasted until March 2021.

In addition to the short-term nature of contracts, concerns around the loss of funding for specialist women's services and a potential move towards 'universal supported housing' commissioning models were also raised, which are explored in further detail in Sections 3.3 and 3.4.

“

“Short term funding and very late notice continuation funding causing significant staff disruption...”

“Funding - no increase from the local authority in spite of the number of people supported doubling. End of Covid-19 funding in March 2021 and no follow-on support.”

“Funding remains low but demand increases. Support needs are higher, commissioner expectations are higher and the need to support people longer-term to ensure they are successful in recovery has increased. This work and the costs incurred are being taken on by all the providers to ensure the best possible services are provided but it is unsustainable for many.”

Continued issues around the Covid-19 pandemic

Given that Covid-19 restrictions were in place for much of 2021, a large number of organisations cited the pandemic as one of the defining challenges of 2021-22. As we explored in last year's Annual Audit, the Covid-19 pandemic presented domestic abuse services with a wide variety of issues that they had to work hard to overcome.

Many of these reported challenges were similar to the previous financial year, including concerns for the wellbeing of survivors and practical difficulties adapting to changing ways of working. This time, however, issues with staffing due to Covid-19 featured much more heavily.

“

“2021 continued to be defined by the pandemic, with staff having to constantly adapt to changing levels of restrictions - this continued to be a challenge.”

“Supporting service users' health and wellbeing, in particular their mental health, feelings of sadness, anxiety, stress and reliving trauma of being restricted, during lockdown.”

“The impact on staffing due to covid-related absence.”

Single-sex service provision

The domestic abuse sector is made up of a diverse group of organisations providing a range of support and services to different groups of survivors. Due to the gendered nature of domestic abuse and the disproportionate rate at which women experience it, some organisations run exclusive services to meet the needs of women and children. Many of these organisations have existed for decades and have acquired an invaluable reputation amongst women in their communities. Some of these organisations raised concerns regarding the way that single-sex services are being discussed in the media and politics, and the impact this is having on funding, staff, and the services they can deliver.

“

“The prospect of legal challenge, and negative media attention in the highly tense atmosphere around this issue is of course a concern for the future.”

“We anticipate that the issue of single-sex services will also be an increasing source of challenge and pressure over the coming months.”

“We all know this issue continues to be a wide-ranging and divisive issue that plays out in challenging ways for feminist organisations.”

Cost-of-living crisis

Lastly, some organisations reported already having concerns around the cost-of-living crisis and how this would impact their ability to support survivors.

Concerns around the cost-of-living crisis were also at the forefront of organisations’ minds during the interviews, which are further explored in Section 3.4. Their primary concern was how survivors could be impacted.

“

“The cost-of-living crisis will only exacerbate the current Domestic Abuse situation and there is no expectation of emergency funding to help businesses and charities through this period.”

“

“Probably my main concern would be around the cost of living - not only the impact of the rising cost of living on the cost of running services, but also the impact of the cost of living on the survivors themselves.”

“Any pressure is an excuse for accelerating or continuing the abuse that you subject somebody to. Isn't it? So, there will be more conflict, won't there, in relationships in households ... because of financial pressures, potentially more people will have less options ... children will stay in abusive households for longer.”

“It's already hard enough to leave a perpetrator and to try and escape abuse. This will make it so much more impossible for victims to do that.”

3.3 Funding sources - domestic abuse services

Funding challenges continued to be a major issue for domestic abuse services in 2021-22, often despite the new funding requirements on Local Authorities as a result of the Domestic Abuse Act. Dynamics around the changing funding landscape are explored in further detail in Section 3.4 on the Impact of the statutory duty.

Working without dedicated funding

This year, 44.0% of organisations responding to the Annual Survey told us they had been running an area of their domestic abuse service in 2021-22 without any dedicated funding (see **Table 3.1** for full details). The most common areas of work run without dedicated funding were domestic abuse prevention/educational work (22 respondents), community-based domestic abuse services (outreach, floating support, advocacy (16 respondents) and therapeutic support services (counselling, group work) (14 respondents) (see **Table 3.2**). 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=37):

- ▶ 81.1% were using their financial reserves⁶⁷ to cover costs, which is not a solution that can be relied on indefinitely.
- ▶ 45.9% reported being unable to plan for the future.
- ▶ 43.2% felt they were unable to support women with more complex needs
- ▶ 35.1% had lost staff because of job insecurity linked to funding. (See **Table 3.3**)

Table 3.1: Were you running an area(s) of your domestic abuse service for women WITHOUT dedicated funding in 2021-22?

Women's Aid Annual Survey 2022

Running an area(s) without dedicated funding	% of total respondents
No	47.6%
Yes	44.0%
Missing data	8.2%
TOTAL	100.0%

⁶⁷ 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 3.2: Which areas of your domestic abuse service were you running without dedicated funding in 2021-22**Women's Aid Annual Survey 2022**

Area of service ran without dedicated funding	% of respondents running an area of service without dedicated funding (37)
Domestic abuse refuge provision	27.0%
Accommodation-based services (other than refuge)	21.6%
Domestic abuse prevention/educational work	59.5%
Community-based domestic abuse services for women (outreach, floating support, advocacy)	43.2%
Therapeutic support services (counselling, group work)	37.8%
Children and Young People's domestic abuse services in refuge	27.0%
Children and Young People's domestic abuse services in the community	24.3%
Specialist domestic abuse services for Black and minoritised (BME) women	10.8%
Specialist domestic abuse services for Lesbian Bisexual Trans (LBT) women	2.7%
Specialist domestic abuse services for women with complex needs	5.4%
Specialist domestic abuse services for women with disabilities	2.7%
Other	14.0%

One respondent running an area of work without dedicated funding did not reply to this question.

Tick box question – respondents can tick more than one category.

'Other' responses included Helplines and online chat services, as well as Hospital IDVA and Housing Link workers

Table 3.3: Please tell us how this lack of dedicated funding impacted on your delivery of the service.**Women's Aid Annual Survey 2022**

Impact	% of respondents running an area of service without dedicated funding (37)
We used reserves to cover the costs	81.1%
We relied on volunteers to deliver the service	32.4%
We lost staff as a result of job insecurity	35.1%
We have had to reduce the number of women we can support in the service	24.3%
We have had to reduce the number of children and young people we can support in the service	18.9%
We have had to reduce staff hours within the service	8.1%
Service can only continue for a limited amount of time	35.1%
We are unable to support women with more complex needs due to the level of support available	43.2%
We are unable to plan for the future and this impacts on the service we deliver	45.9%
Other	13.5%

One respondent running an area of work without 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 2021-22 (74.6% - No; 18.6% - Yes; 6.8% - Missing data). Over half of responding organisations with CBS service provision had received PCC commissioned funding for their CBS services in 2021-22 (36.4% - No; 58.2% - Yes; 5.5% - Missing data). Community-based support 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 full costs of providing the service (refuge or CBS) and may even only cover a small percentage of the costs – see the discussion in Fragile Funding Landscape (Women's Aid, 2021b, pp. 14-16).

Table 3.4: Did you receive any commissioned funding for your refuge services from a PCC (Police and Crime Commissioner) in 2021-22?**Women's Aid Annual Survey 2022**

Response	Number of respondents	% of those with refuge provision
No	44	74.6%
Yes	11	18.6%
Missing data	4	6.8%
TOTAL	59	100.0%

Table 3.5: Did you receive any commissioned funding for your community-based support services from a PCC (Police and Crime Commissioner) in 2021-22?**Women's Aid Annual Survey 2022**

Response	Number of respondents	% of those with CBS service provision
No	20	36.4%
Yes	32	58.2%
Missing data	3	5.5%
TOTAL	55	100.0%

Clinical Commissioning Group funding

A large majority of the Annual Survey respondents with refuge provision (49 out of 59) did not receive any commissioned funding from a Clinical Commissioning Group for their refuge services in 2021-22 (No – 83.1%; Yes – 8.5%, Missing data – 8.5%). Most respondents with community-based provision (42 out of 55) also had not received any commissioned funding

from a CCG for their community-based support services in the last financial year (No – 76.4%; Yes – 20.0%; Missing data – 3.6%). Again, it is important to note that any funding is unlikely to cover the full costs of providing the service and may even only cover a small percentage of the costs (see *Fragile Funding Landscape - Women's Aid, 2021b* - especially pp. 14-16)⁶⁸.

⁶⁸ Recent legislative changes around the [Health and Care Act 2022](#) are likely to impact how CCG funding is commissioned in future years.

Table 3.6: Did you receive any commissioned funding for your refuge services from a CCG (Clinical Commissioning Group) in 2021-22?**Women's Aid Annual Survey 2022**

Response	Number of respondents	% of those with refuge provision
No	49	83.1%
Yes	5	8.5%
Missing data	5	8.5%
TOTAL	59	100.0%

Table 3.7: Did you receive any commissioned funding for your community-based support services from a CCG (Clinical Commissioning Group) in 2021-22?**Women's Aid Annual Survey 2022**

Response	Number of respondents	% of those with CBS service provision
No	42	76.4%
Yes	11	20.0%
Missing data	2	3.6%
TOTAL	55	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 address any gaps, we sent emails to refuge providers asking for information about local authority commissioning. (See section on Methodology for more details.)

Local authority funding is related to the 'support costs' of running a refuge, which includes staff salaries, training and clinical supervision, along with 'activity costs' and 'central costs' involved in running the organisation and premises. The 'accommodation costs' element of refuge services, such as rental and service charges, are usually

covered by housing-related benefits claimed by refuge residents. It should be noted that this is a major barrier to survivors with no recourse to public funds who are unable to claim state benefit, as well as women who want to keep their employment while resident in refuge, as this would prevent them from being able to claim the benefits needed to pay for their accommodation costs.

Almost three quarters of refuge services were commissioned by their local authorities for all of their bedspaces in 2021-22 (71.1%) – see **Table 3.8**. This is a very small increase on the previous year (69.5% in 2020-21), with levels returning to roughly the same as the period before the

Covid-19 pandemic (71.7% in 2019-20). There were 35 refuge services (13.0% of all refuge services) that received no commissioned funding from their local authority. There were also 23 'partially commissioned' refuge services that received funding through a local authority commissioning process for some of the bedspaces in their refuge service, but were also running additional bedspaces

that were not included in their commissioned contract and were funded through other means.

Members of Imkaan (services led by and for Black and minoritised survivors) were less likely to be commissioned by the local authority, with only nine out of 20 services being fully commissioned (See **Table 3.9**).

Table 3.8: Local authority commissioning of refuge services and bedspaces in 2021-22

2021-22	Number	% of total	2020-21	Number	% of total
Commissioned refuge	192	71.1%	Commissioned refuge	187	69.5%
Partially commissioned refuge ⁶⁹	23	8.5%	Partially commissioned refuge	18	6.7%
Non-commissioned refuge	35	13.0%	Non-commissioned refuge	48	17.8%
No data	16	5.9%	No data	13	4.8%
Other	4	1.5%	Other	3	1.1%
Total	270	100%	Total	269	100.0%
2021-22			2020-21		
Commissioned bedspaces	3501	80.6%	Commissioned bedspaces	3321	77.4%
Non-commissioned bedspaces	522	12.0%	Non-commissioned bedspaces	720	16.8%
Bedspaces - no data	261	6.0%	Bedspaces - no data	215	5.0%
Bedspaces - other	60	1.4%	Bedspaces - other	33	0.8%
Total	4344	100%	Total	4289	100.0%

Notes: Four 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 two refuge service classed as 'other' are managed and provided directly by the local authority rather than the contract being awarded to another organisation.

⁶⁹ The number of spaces these partially-commissioned services were running are included in the totals shown in this table for commissioned spaces, non-commissioned spaces and spaces for which there is no data.

Table 3.9: Imkaan members - Local authority commissioning of refuge services and bedspaces in 2021-22

2021-22	Number	% of total	2020-21	Number	% of total
Commissioned refuge	9	45.0%	Commissioned refuge	6	33.3%
Partially commissioned refuge	0	0.0%	Partially commissioned refuge	3	16.7%
Non-commissioned refuge	11	55.0%	Non-commissioned refuge	9	50.0%
Grand Total	20	100.0%	Grand Total	18	100.0%
Bedspaces - commissioned	140	50.9%	Bedspaces - commissioned	118	44.5%
Bedspaces - non-commissioned	135	49.1%	Bedspaces - non-commissioned	147	55.5%
Total	275	100%	Total	265	100.0%

Even for refuge services who are commissioned for all of the bedspaces in their service, funding often does not necessarily cover *all* the costs of supporting refuge residents⁷⁰. We asked Annual Survey respondents who were commissioned for refuge

by the local authority to what degree all of the costs involved in providing the service were covered by this funding, broken down by the type of cost. Funding for 'support costs' was found to be higher than for 'activity costs' and 'central costs' (see **Table 3.10**).

Table 3.10: How much funding did you receive through being commissioned by the local authority for your refuge services in 2021-22?**Women's Aid Annual Survey 2022**

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)	For support staff costs (Salaries, additional employment costs, clinical supervision, staff training)
All costs	4	4	13
Half or less of costs	10	18	4
More than half of costs	12	8	21
None	12	8	0
Missing data	8	8	8
TOTAL	46	46	46

⁷⁰ See *Fragile Funding Landscape* - Women's Aid, 2021b - especially pp. 14-16.

Local authority funding for CBS service 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). 40 of the 55 survey respondents (72.7%) that had CBS service provision told us that they had received funding from their local authority in 2021-22 (15 had received no local authority funding and there were no missing responses).

Of these 40 organisations, only 12 reported that it was all of their community-based support that was funded by the local authority. We asked these 40 respondents to give details about how much of the CBS service provision this local authority funding covered. The results in **Table 3.11** show that funding rarely covered all costs and that ‘being commissioned’ should not be mistaken for being fully funded.

Table 3.11: How much funding did you receive through being commissioned by the local authority for your community-based support services in 2021-22?

Women’s Aid Annual Survey 2022

Amount of funding received from local authority	For support staff costs (Salaries, additional employment costs, clinical supervision, staff training)	For activity costs (Direct activity costs, accessibility costs, external contractors)	For central costs (Admin/finance staff, management/governance staff, premises/other central costs)
	Number of respondents	Number of respondents	Number of respondents
All costs	10	7	9
Half or less of costs	5	10	17
More than half of costs	20	10	7
None	0	7	1
Missing data	5	6	6
TOTAL	40	40	40

3.4 Impact of the statutory duty

“This isn't feminist claptrap that we're making up. This is stuff that's recognised by the UN, by governments, by everyone. Why is it that this is not filtering through on the ground into how these services are being funded and how local authorities are understanding the problem of domestic abuse in their local areas?” - Interview

The Domestic Abuse Act 2021 introduced a statutory duty on tier one local authorities in England to provide support for survivors of domestic abuse, including children, within safe accommodation, regardless of whether they have a local connection⁷¹. As part of this, from 1st October 2021, local authorities are now required to: appoint a multi-agency Domestic Abuse Local Partnership Board; assess the need for

accommodation-based domestic abuse support in their area for all survivors or their children; and develop, publish, monitor, and evaluate a strategy for the provision of such support to cover their locality. One year on from its launch, we asked services responding to our Annual Survey for their feedback on how the statutory duty was being implemented in their local area.

Refuge funding from the new statutory duty

Of the 59 survey respondents that ran refuge provision, 49.2% (n=29) had received funding as a result of the statutory duty (see **Table 3.12** for full details). Some of those responding 'unsure' (11.9%) commented on the fact that they had been asked to complete lengthy questionnaires but had not yet seen a difference within their services.

Our interviews also reflected the positive impact on accommodation provision that the dedicated funding from the duty was having on their refuge services.

“The [statutory] duty seems to have resulted in some increased funding across some of our services, where they fall into tier one commissioning bracket, which has enabled us to offer, I would say, better quality support and also expand our provision ... In London, essentially, they have deployed what's called a 'safe accommodation framework' and it was up to providers to say how they thought that money should be spent. And obviously responding to their needs assessment” - Interview

“We also were able to get some funding to increase our provision of refuge workers in our services, which has reduced our caseloads within the refuges and enabled us to offer a better-quality support service” - Interview

⁷¹ Home Office. (2022) Domestic Abuse Act 2021: overarching factsheet. Policy Paper. London: Home Office. Available [online](#).

Table 3.12: Did your refuge service receive funding as a result of the statutory duty?**Women's Aid Annual Survey 2022**

Responses	Number of respondents	% of respondents with refuge provision (59)
No	16	27.1%
Unsure	7	11.9%
Yes	29	49.2%
Missing data	7	11.9%
TOTAL	59	100.0%

Bedspaces funding from the new statutory duty

The number of bedspaces that were funded as a result of the statutory duty varied amongst respondents. Of the 29 survey respondents that

ran refuge services and received funding from the statutory duty, 31% received no funding for bedspaces.

Table 3.13: How many bedspaces were funded under the statutory duty?**Women's Aid Annual Survey 2022**

Number of bedspaces funded under statutory duty (Grouped)	Number of respondents	% of respondents with SD funded refuge provision (29)
None	9	31.0%
1 to 10	5	17.2%
11 to 20	4	13.8%
21 to 30	5	17.2%
31 to 40	4	13.8%
40+	0	0%
Missing data	2	6.9%
TOTAL	29	100.0%

Chart 3.1: Bedspaces funded under the statutory duty



Respondents were also asked to give details of the type of bedspace that had been funded as a result of the statutory duty, looking at dispersed accommodation, communal accommodation and self-contained accommodation. The most commonly funded type of accommodation in the survey was communal accommodation, whereby 48% of the total bedspaces funded by the statutory duty had been in communal accommodation (n=209 of a total of 438) (see **Table 3.14**).

Respondents detailed what level of funding tied to the statutory duty was covered across different areas of safe accommodation service delivery. Housing-related support was the service that was

most commonly funded by statutory duty funding, with 82.8% of respondents that received statutory duty funding saying that they received funds for this (n=24). Counselling and therapy services were the least commonly funded by the statutory duty, with only 31.0% of survey respondents reporting they received funds for these services (n=9). (See **Table 3.16** for full details). Whilst these results may not be surprising given DLUHC’s housing remit, they do raise the question of whether more holistic domestic abuse support is being neglected and highlight the need for commissioners to understand the wraparound support provided within a refuge service to fully address the multi-faceted and long-term trauma of domestic abuse.

Table 3.14: How many of these bedspaces were in the following accommodation types?

Women’s Aid Annual Survey 2022

Type of Accommodation	Number of bedspaces reported as a result of the statutory duty	% split by type of accommodation
Bedspaces in Communal Accommodation	209	48%
Bedspaces in Dispersed Accommodation	82	19%
Bedspaces in Self-contained Accommodation	147	34%
TOTAL	438	100.0%

Sustainable funding and the statutory duty

Of the survey respondents that received funding from the statutory duty, most services (41.4%) still felt worried about where future funding for their refuge services would come from, despite the changes (n=12). Comparatively, 27.6% (n=8) were ‘not worried’, and 27.6% were ‘unsure’ (n=8) (see **Table 3.15**).

The short-term nature of local authority contracts commissioned under the statutory duty – often only for one year – was of particular concern amongst our survey respondents and interviewees.

Whilst most respondents had not yet noticed any significant impacts of the statutory duty on their funding streams, some expressed concern that this may soon be the case and they may lose funding elsewhere, with some instances already arising.

“It seems absolutely ridiculous that they’re commissioning on a year-by-year basis. And the impact on us with that is if we are successful, it’s really difficult to get staff because it’s only a one-year fixed term and then if you do get staff, brilliant staff, you’re likely to lose them... one year funding is impossible to manage” - **Interview**

“We lack certainty around where funding will come from beyond March 2023” - **Survey**

“Currently we are still waiting year-on-year to find out funding for the following financial year. The local authorities are planning to commission services, but they are slow to develop their commissioning intentions so are just maintaining the status quo and funding the minimum at the moment” - **Survey**

“Not to date, but we believe that Children in Need and other trust giving organisations may review their ability to fund services that should be met by the statutory duty. This will mean children within refuge locally will not have any access to specialist support” - **Survey**

“The statutory duty has reduced our opportunity to access other local grant funding, e.g., the PCC and funding from smaller voluntary grant makers” - **Survey**

“The local authority has decided to reshape outreach services for a larger county-wide contract (at present there are three providers covering different areas of the county)” - **Survey**

Table 3.15: Do you feel that your refuge service now has sustainable funding as a result of the statutory duty?

Women’s Aid Annual Survey 2022

Perceptions of future funding	% of respondents with SD funded refuge provision (29)
No, I am worried about where future funding will come from	41.4%
Unsure	27.6%
Yes, I am not worried about where future funding will come from	27.6%
Missing data	3.4%
TOTAL	100.0%

Table 3.16 Did the funding from the statutory duty cover all the services you deliver within safe accommodation?**Women's Aid Annual Survey 2022**

		Funding level			
		Funded by statutory duty funding	Not applicable to our service	Not funded by statutory duty funding	Missing data
Type of service: % of respondents with statutory duty funded refuge provision (29)	Overall management of services within relevant safe accommodation	52%	3%	41%	3.4%
	Support with the day-to-day running of the service	66%	3%	28%	3.4%
	Advocacy support	52%	3%	31%	13.8%
	Domestic abuse prevention advice	55%	3%	31%	10.3%
	Specialist support for victims: Designed specifically for victims with relevant protected characteristics	45%	3%	45%	7%
	Specialist support for victims: Designed specifically for victims with additional and / or complex needs	45%	3%	41%	10%
	Children's support	62%	3%	28%	6.9%
	Housing-related support	83%	3%	10%	3.4%
	Advice service	55%	14%	17%	14%
	Counselling and therapy	31%	21%	38%	10.3%

Effects of the Act on awareness

Participants in our interviews reflected that the introduction of the Domestic Abuse Act had, in general, made a positive impact on awareness and understanding of domestic abuse amongst the general public, shining a spotlight on the issue.

Some interviewees also suggested that there had been some increased awareness and engagement from statutory partners as a direct result of the Domestic Abuse Act and the subsequent statutory duty.

However, some interviewees were less positive and noted that further work is required to improve statutory partners' engagement and understanding of domestic abuse.

“

“It's more of a talking point, isn't it? So, if people are talking about it, people more aware about it. I think there's an increasing understanding. But it's like anything, it takes time, doesn't it?” - Interview

“In terms of ... the impact on awareness that the Domestic Abuse Act had, it's ... definitely heightened public awareness around domestic abuse. That's potentially in part from the pandemic.” - Interview

“

“[There has been] a kind of increase in their awareness and their keenness to engage with us around improving systems and processes for survivors. So, I think it's maybe filtered through in that.” - Interview

“

“Nobody's coming in knowing some of the great things that have happened as a result of the campaigning and changes in the Act. Nobody's bringing that in at the moment. I definitely don't think any of the awareness raising stuff that's happened through the government has had impact.” - Interview

Children and young people as victims of domestic abuse

Many of the organisations that we interviewed expressed hope and gratitude for the way that the new Domestic Abuse Act explicitly recognises children and young people who witness domestic abuse as victims in themselves.⁷² This groundbreaking enactment is a testament to those who have strived to highlight the impact that

growing up around domestic abuse can have upon children, including survivors, campaigners and the domestic abuse sector. One organisation in particular reflected on the difference this had made in enabling these children to access support in her local area.

⁷² This applies to a child who 'sees or hears, or experiences the effects of, the abuse.' www.legislation.gov.uk/ukpga/2021/17/section/3/enacted

“

“There’re some specific bits in the Domestic Abuse Act that feel really hopeful, such as children and young people being in the statute as victims. I’m really hopeful that will pan out into something that will really change the lives of those children because it’s not there at the moment” - Interview

“To try and get therapeutic help and counselling support for children and young people, you have to reach a certain threshold and we could never get our children and young people in our services above that threshold according to the local authority’s assessment. We felt that we were always fighting that process. Since the Domestic Abuse Act, that has changed, so threshold isn’t applied as strictly to children and young people who have been victims of domestic abuse and it means we’ve been able to access service provision much quicker than we have been before and also some very specialist help for children and young people as part of their recovery that’s not just generic therapeutic support but particularly related to domestic abuse recovery” - Interview

This said, there are some discrepancies emerging across how local authorities choose to interpret what this means when it comes to commissioning. One of the key functions of the Domestic Abuse Commissioner will be to encourage good practice in the identification of children affected by domestic abuse and the provision of protection and support.

One interviewee voiced concerns around emerging discrepancies they had noticed between the approaches of different local authorities across the country.

“

“It’s been left to local authorities to interpret what their response to children would be, so there isn’t consistency about what’s being commissioned. We’re seeing things like children’s outreach provision. There is a lot of therapeutic support for children, but I don’t necessarily think it’s translating into perhaps where it’s needed, for example, children’s workers in refuges, specialist DA support for children within community-based services. It’s being left for commissioners to say what they think children need so perhaps that needs defining more.” - Interview

Responses of local authorities and commissioning practices

Survey respondents were asked for their comments on the implementation of the statutory duty and these issues were expanded upon in the interviews with service representatives. Overall, experiences of respondents in the approaches of their local authorities differed quite significantly. Some had been invited to participate in consultations with local authorities, who involved partners in the domestic abuse sector and utilised the expertise and experience of existing services.

However, interviews with service providers also found that the majority of services had experienced a rushed approach from their local authorities with regards to needs assessments, strategy development and commissioning more generally, with a 'tick box' approach to the required processes rather than meaningful engagement.

“

“It has required local authorities and partners to really think about their provision and adjust it and make it more flexible and it's challenged them on things that they've had in place before” – Interview

“They've been ... really open to conversation and dialogue about changing things or doing things in a slightly different way” – Interview

“We've also got specialist services now that we didn't have before and there is increased provision for survivors and particularly for those who were considered in that kind of 'hard to reach' category of survivor. So, particularly those people with disabilities, older victims, people from ethnic minority communities, LGBTQ communities as well. I think there has been a sense of, 'right, we've got the capacity now and the funding to meet the need that we've not been able to before'” – Interview

“

“There's quite a lot of knee jerk commissioning, so what we saw last year particularly was lots of local authorities who needed to spend their New Burdens funding really quickly. And I think that ... for some cases they didn't necessarily think about the best shape of what that was that they were commissioning and did it quickly, wanting to spend the money” – Interview

“It was quite a rush for local authorities to comply with some decisions ... In the cold light of day, and now that things have settled, I wonder if things could have been done slightly differently if local authorities have been given a bit more time” – Interview

Needs assessments, in particular, were reported to have often been carried out poorly and with lack of real commitment and contextual understanding, sometimes leaning on existing services in an extractive way.

“

“It’s been too easy for local authorities to conduct this as a box ticking exercise with no real commitment to meaningful consultation. Early on, when we had to do the needs assessment last year, it really felt like a data harvesting exercise. It was just like, ‘right, send us all this data’. So, we had to do a lot of work to create these data reports to write case studies for them on top of what we already were busy doing” – Interview

“

“They put it out to tender to invite consultants in to do the piece of work for them, particularly both the needs assessment and the writing of the strategy ... They put it out as a very quick process and appointed a consultancy who just did a terrible job, and they had to take it off them and reappoint someone else to take over ... They just took all the data and crunched it into their machine, and it spat out this data set and a generic strategy, which was pretty rubbish. They did some consultation with our staff team as part of that and with other providers and agencies locally. They came to our women’s refuge and did some work there with residents. But then, in the material they produced, they completely ignored all the consultation because it was just data, and a very universal generic document” – Interview

Framings around VAWG

Across the interviews, respondents were concerned about a lack of attention to, and understanding of, wider framings around VAWG, as well as the gendered nature of abuse within local authority responses.

“

“Linking it to violence against women and girls - it sounds really odd, but that doesn’t get much of a mention, and it doesn’t get much of a mention in the strategy, I don’t think. It’s almost trying to constantly trying to remind them” – Interview

“An analysis about gender inequality is completely and increasingly missing from the response to domestic abuse and I think that’s a real concern, actually. That’s a real backward step and, you know, the feminist movement has fought so hard for that to be recognized, and that’s being rolled back” – Interview

Interviewees were concerned about the way this may influence the development of local authority domestic abuse strategies and commissioning practices. In light of a lack of attention to VAWG framings, they felt that local authorities were more likely to prioritise economic arguments in how they make commissioning decisions, resulting in generic or universal housing-focused services, rather than specialist needs- and women-centered services.

One service representative that was interviewed reflected that a local authority's lack of previous leadership in the VAWG sector, as well as their lack of previous experience in domestic abuse commissioning processes, may have affected how they have approached their new statutory responsibility.

By contrast, one provider we interviewed talked about how they had been commissioned to train around 500 professionals on the requirements of the Domestic Abuse Act and that they felt this model had been very productive throughout the county.

“

“The people who work in commissioning and procurement aren't experts on domestic abuse, so they will just say, 'OK, what's the best economic way of us ticking this box and procuring these services' and they'll just go down a procurement route” – Interview

“It's encouraged... it's elevated generic services and not women-centered services, even though that wasn't the purported kind of purpose of the funding” – Interview

“

“It might be down to what kind of structure they have in terms of oversight of VAWG services. There is one local authority area - which I'm not going to name - but it's a city unitary authority and they haven't done any commissioning of VAWG services for a long time and they're really struggling because they haven't got the infrastructure set up. And I do think it's a lot down to the leadership around VAWG in the tier one authorities. Because sometimes the tier one authorities have had nothing to do with commissioning at all in the past.” – Interview

“

“One particular example of good practice [has been] essentially developing a safe accommodation Pilot. They've worked very carefully to work through the findings of their needs assessments, and they have developed a pilot in response which will offer an increased accommodation provision within the county and be developed to ensure that it can meet the needs of all survivors ... For example, those with disabilities, those with large families, those with pets – any group that's traditionally quite hard to accommodate within a refuge ... One of the things that they did with the DA Act very, very early on - they commissioned [us] to train virtually all of their professionals in the requirement of the DA Act. So, we're talking about around 500 professionals, and I think that focus on the importance of the Act and it being a momentous change in the response to domestic abuse has been really productive within the county. I just wish that all other like 21 authorities were following their model really.” – Interview

Trends in commissioning practices

We asked organisations if they had noticed any changes in commissioning practices since the introduction of the statutory duty.

Increased in-house commissioning

Prior to the introduction of the statutory duty, there was one refuge service listed on Routes to Support which was managed by a local authority. On 1st May 2022 there were two refuge services on Routes to Support which were provided in-house by two different local authorities, however Freedom of Information Request data from 2022 shows that nine other local authorities were also running some kind of in-house refuge or safe accommodation service. Many respondents had noticed an increase in their local authority funding of in-house domestic abuse services and roles. They raised concerns regarding the loss of expertise from specialist domestic abuse services.

Organisations also discussed the impact of in-house commissioning on their services, where multiple respondents reported already having lost staff to roles in the local authority.

“

“They’ve also funded themselves, such as some children’s workers and some housing and homelessness workers who are not domestic abuse specialists, and who are not working in specialist domestic abuse provision.

They’ve just kind of commandeered some of that new burdens funding to pay for some of the stuff they were already doing. And it’s not specific to domestic abuse at all. And they’re not appointing domestic abuse qualified workers” – Interview

“It’s given the local authority a lot of power. Suddenly they have all this money, but actually that power is not matched ... by their expertise or their willingness to collaborate. So, what we’ve seen is a lot of them funding in-house to massively extend an IDVA service to do their own in-house project where they just hire loads and loads of housing IDVAs” – Interview

“

“Recruitment has been particularly challenging due to increased staffing costs and impact of the pandemic; the charity has been losing highly skilled specialist staff to statutory services with better terms & conditions.” – Survey

“Understandably a lot of our staff move on to higher paid jobs in local authorities, which is putting pressure obviously on our services, there’s gaps in teams and things like that.

And then obviously there’s new people come in, all the pressure that puts on training and inducting them, getting them up to speed in the way that we would want them to be.” – Interview

As explored in Section 3.2, recruitment has already been a struggle for the domestic abuse sector over the past year and having to compete with domestic abuse jobs in the local authority is putting even more pressure on specialist domestic abuse services.

“

“Recruitment has been our biggest challenge and staying competitive with our salaries. We had to review many of our salaries to enable us to recruit, which obviously creates greater pressure on fundraising.” - Survey

Capacity issues of increased requirements for data and evidence

When asked about the impact of the statutory duty, some organisations reported an increased demand for data and evidence from commissioners. This meant staff had to spend more time on this work and meet tight deadlines set by funders, without the capacity to necessarily do so.

“

“Lots of requests for information and stats. Hours of extra admin time. But no funding received as a result beyond the already contracted amount for housing-related support.” - Survey

“Increased pressure on data reporting/monitoring.” - Survey

“We have been required to complete lengthy questionnaires across all our services with tight deadlines to respond.” - Survey

“Many services were overloaded with demand without any additional capacity being allocated from local authority funding. Diverse projects were commissioned for new upcoming work, without consideration for the already overstretched and under capacity mainstream services such as IDVA” - Survey

Universal services and specialist services

Annual survey responses and interviews revealed concerns over the shift to competitive tendering and increased emphasis on low administrative burden and efficiency, with practises sometimes

neglecting the importance of quality and specialism. Participants described concerns that domestic abuse commissioning was being viewed by some as a commercial opportunity, resulting in a move towards more ‘universal’ housing services.

“

“I am concerned about refuge provision being considered ‘universal supported housing’ by commissioners and procurement teams at Councils who are failing to see specialist support for victims as a key aspect, and instead treating it as ‘homelessness support’ that can be delivered by anyone anywhere” - Survey

“I think there’s ... awareness ... that domestic abuse is now a commercial opportunity ... particularly [among] housing associations who are looking at their business models, diversifying their funding streams. This is just a juicy little contract for them to land” - Interview

“The way that the duty’s being implemented is undermining the specialist VAWG sector and I think as more funding has come into domestic abuse, suddenly it’s become a commercial opportunity for agencies that previously would not have been interested. As the director of our local rape crisis centre puts it, ‘the boys in suits get out of bed for these big contracts’. And I think that’s what’s happened” - Interview

Alongside this, interviewees repeatedly expressed their support for the importance of specialist services within domestic abuse service provision, and yet how these have often been under threat.

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“I’d love to see consultation with specialist providers in their area because there’s a massive pool of talent. I would say everywhere in the country there are specialist providers that [commissioners] could be consulting with. And what we’re very often finding is that specialist providers are excluded from the part of the [local authority] Board that deals with commissioning. They’re dealing with a really sensitive and important situation, without the expertise that they need to do that in a good, joined up way” - Interview

“There needs to be some recognition of the importance of that and how we protect that expertise and experience we’ve built up that relationship with victims and survivors over decades in this borough. It’s a reputation and a reach that can’t be matched, and it’s hard to put that into evidence in a procurement process, if all they’re considering is how do we get the cheapest provision and ... value for money. They know the price of everything but the value of nothing” - Interview

“Just generally speaking, a greater focus on specialist services and the value of gendered services as well, specifically with services that are commissioned through the duty, would be really good to see” - Interview

Interviewees and survey respondents noted the decommissioning of specialist services as well as the erosion of holistic and wrap-around services, including counselling and therapies. Counselling and therapy were the least likely service areas to receive funding under the statutory duty, with only 31% of surveyed respondents receiving funding in this area.

“

“Our experience is that locally there seems to be no desire to invest in the specialist women’s sector providers – a decision to tender most of the commissioned services just before the DA Act came into statute has left the provision in this area disjointed and survivors who would have had continuity of support feeling lost and unsupported” – Survey

“It’s so unrealistic for local authorities to think that they can just carve up someone’s service and divvy it up and hand it out to different people ... we’re more than the sum of our parts. You can’t just like, apportion bits off and give them out it. It doesn’t work like that.” – Interview

“There were a lot of opportunities that were shaped in such a way that they excluded specialist women’s organizations from bidding” – Interview

“We are increasingly finding that the statutory sector is developing its own DA services or training staff in awareness and pulling back on commissioning specialist services, such as ours. This is a concern and could have a significant impact on women.” – Survey

The decommissioning of specialist services is particularly a concern for Black and minoritised by and for services. This reflects the Domestic Abuse Commissioner’s 2022 mapping report that found by and for services were five times less likely to receive statutory funding than non-by and for domestic abuse services.

“

“There’s also an issue there with by and for services because sometimes the needs assessment won’t identify ... a need for culturally specific services, when there actually is that need” – Interview

Real world impacts on survivors and the changing landscape of services

The primary concern for domestic abuse organisations was the impact that this could have upon survivors’ safety and their ability to access good quality support. Many of the domestic abuse organisations we spoke to had existed for decades and had an established

reputation amongst professionals and women in the community. As articulated by one respondent, life is often already confusing for many survivors without changing the landscape of domestic abuse services and support.

“Life is confusing enough for people who’ve got a lot going on with a lot of different people contacting them without making it even more confusing, by having more than one agency doing the same or similar things ... potentially, worst case scenario looks like, ‘well, I don’t know who’s doing what, so I’m not going to engage with anybody’. It’s like, ‘my life has become chaotic because I’ve been subjected to all of this stuff, and I’ve got all these different people from different agencies getting in touch with me asking me to tell them my story. I’ve had enough of you all to be honest’” - Interview

“You basically have people who are potentially dropping down the gaps between services and they don’t have continuity of support, which makes no sense at all and leaves people vulnerable. Splitting up of services makes it much harder for survivors to get what they need when they need it in a way that’s not confusing and is holistic” - Interview

Along with concerns of how survivors would be able to navigate a fragmented landscape of domestic abuse services, there were some more general concerns about what kind of support the new commissioned services would be providing to survivors.

“I had a look at their website – if I was a survivor [and] wanted to access that service, how would I do that? And the answer is that you have to download and fill in a five-page referral form from their website, which asks you for basically everything about yourself, including your immigration status and all that kind of stuff. So great if you want to fill in a database really, really consistently. Terrible if you actually want to support women ... It’s not going to be as open access as we’ve been. That’ll be a big impact of the new service ... They also will only work with women for 12 weeks. And now we have women who we’ve worked with for years. What happens to those women after the 12 weeks? This is something we don’t have an answer to yet” - Interview

Local Partnerships Boards

66.1% (n=39) of survey respondents with refuge provision reported that their domestic abuse service is represented on their relevant tier one local authority’s Local Partnership Board to oversee the delivery of the statutory duty (see **Table 3.17**). 31 of these 39 organisations responded that the Local Partnership Board had quarterly meetings, and the Local Partnership Boards of the remaining eight organisations met more frequently.

Table 3.17: Is your domestic abuse service represented on the Local Partnership Board?
Women’s Aid Annual Survey 2022

Response	Number of respondents	% of respondents with refuge provision
No	7	11.9%
Unsure	8	13.6%
Yes	39	66.1%
Missing data	5	8.5%
TOTAL	59	100.0%

Experiences of Local Partnership Boards amongst the interviews were generally positive, acknowledging their potential as a mechanism of accountability and space for expert consultation.

“*They also feed up into the partnership boards and information is disseminated down from them as well. I think we’re pretty lucky in the areas that we work that they’ve heard and that we sit on those boards. I think in some areas that doesn’t happen. And so, I think we’re pretty privileged in that way. Not that it is a privilege, it should be a right, shouldn’t it, to be able to represent the sector at that level?” - Interview*

“It’s been a really positive experience. We already had a kind of group that met anyway and so that group kind of morphed into the partnership board and then with some additional invitees. It is a really constructive place. It feels like a team working together to achieve something and to improve things. Certainly, you can air difficult things there and challenge a decision or challenge policies or approaches. And it’s been that group that really has helped the local authority to understand that their domestic abuse strategy isn’t quite good enough and that we need to do more on that over the coming year” - Interview

However, respondents also highlighted concerns for the representation of a range of domestic abuse services – particularly by and for services - amongst the board members, as well as the importance of an independent Chair. One interviewee raised that the current Chair of their Local Partnership Board was a representative from the police, and the potential for conflicts of accountability that this may pose.

“*It’s chaired by the police ... It can be quite defensive of police, and policies and actions can be very focused on policing at times ... I’m not sure it’s great that we have police chairing this partnership board. I’m not entirely sure who it should be, but I think police are one of the accountable bodies, so I’m not sure they should be chairing something where they are also accountable ... I think there should be someone with more independence” - Interview*

“We started doing a bit of mapping of the local partnership boards that we do sit on, and one thing is around the representation of by and for organizations on those partnership boards, which is really important as it’s not yet clear that they’re getting adequate representation” - Interview

Conclusion

The year 2021-22 was marked by significant changes in the external environment, with the introduction of the Domestic Abuse Act (2021) and the new requirements of the Part 4 statutory duty for local authorities. Domestic abuse services have worked tirelessly to meet the needs of survivors and their children, navigating this shifting context, and adapting where necessary in order to continue to provide reliable, high-quality support.

There is no such thing as a 'typical' survivor (as shown in our On Track data) and specialist, accessible services are, therefore, essential. However, women continue to face barriers in accessing services and many require additional support. Whilst 28.7% of survivors have a disability, only 1.1% of refuge vacancies listed on Routes to Support in 2021-22 were suitable for a woman with limited mobility and just 0.9% of vacancies could accommodate a woman requiring a wheelchair accessible space. At the same time, 41.0% of all women using services had mental health support needs, which increased to 50.2% in refuge. 4,611 (12.1%) women were not British nationals and 30% of these women did not have recourse to public funds.

There has been a net increase in the number of all service types offered by local services between 1st May 2021 and 1st May 2022, with the exception of drop-in services which have remained the same. The previously seen

increase in the number of bedspaces during 2020-21 (largely as a result of emergency covid funding) appears to have been sustained and bedspaces have increased by a further 55 bedspaces. There is, however, still a 23.2% shortfall and, despite the increase in the number of spaces, fewer vacancies were made available during 2021-22 overall compared to previous years. There were 229 fewer vacancies posted than in 2020-21, when vacancies were already at significantly lower levels due to the impact of the pandemic.

Providers expressed concern around a shift towards a reduction of funding for specialist services, in particular by and for services, in favour of competitive tenders and more generic housing-focused providers during 2021-22. As the funding landscape changes under the statutory duty, this will be closely monitored by Women's Aid over the next year, to ensure that vital specialist services are adequately supported and their expertise is recognised. Insufficient funding continues to be a concern for the respondents to the Annual Survey, with 44.0% of respondents telling us they had been running an area of their domestic abuse service in 2021-22 without any dedicated funding. Meanwhile, almost three quarters of refuge services were commissioned by their local authorities in 2021-22 (71.1%), which is a small increase on the previous year. However, commissioning

does not cover the full costs of service delivery and service providers often have to make up the shortfall through additional fundraising or by drawing on their reserves.

Service providers and their staff demonstrated great resilience by continuing to deliver high-quality services during the challenging context of the Covid-19 pandemic; some organisations expanded provision to increase capacity and support more survivors, including those with complex needs. Increases in demand, coupled with extended case lengths and continued difficulty accessing move-on accommodation, often necessitated these adjustments and presented a major challenge for services.

Recruitment and retention of staff was of particular concern to service providers over the period. Largely, this was a result of increased caseloads and the effects of the pandemic, but it was exacerbated by a perceived increase in in-house commissioning by local authorities, who were thought to be offering better terms and conditions that service providers could not compete with.

In the context of the statutory duty, service providers were concerned about the knock-on effect this in-house provision might have on funding and availability of specialist domestic abuse support going forward. Interviewees told us they would like to see more collaboration between local service providers and local authorities, along with greater recognition of their own sector expertise, and long-term approaches. Domestic abuse commissioning under the statutory duty should place transparency, an understanding of VAWG and the need for specialist and holistic services at the centre of practices. These concerns, along with consistency in commissioning practices between local authorities across England, will be closely monitored and reported on by Women's Aid in 2022-23.

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Appendix 1

Women's Aid Annual Survey 2022 respondents' regional distribution

Regional distribution of survey respondents

Women's Aid Annual Survey 2022

Region	Number of respondents	% of total respondents (84)
East Midlands	12	14.3%
Yorkshire and Humberside	11	13.1%
West Midlands	9	10.7%
North West England	13	15.5%
South East England	14	16.7%
South West England	5	6.0%
London	15	17.9%
North East England	11	13.1%
East of England	8	9.5%

Respondents could choose more than one region.

The Domestic Abuse Report 2023: The Annual Audit

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