



Meeting the Needs of Women and Children

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Findings of the Women's Aid
Annual Survey 2016

Published March 2017

women's aid
until women & children are safe



Citation

Please cite statistics from this report as from
'Women's Aid Annual Survey 2016'

Acknowledgments

Thank you to all the services who provided vital data for this report.

Published by:

Women's Aid Federation of England

PO Box 3245, Bristol, BS2 2EH

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ISBN 978-0-907817-28-4

Women's Aid is the national charity working to end domestic abuse against women and children. Over the past 40 years Women's Aid has been at the forefront of shaping and coordinating responses to domestic violence and abuse through practice. We empower survivors by keeping their voices at the heart of our work, working with and for women and children by listening to them and responding to their needs. We are a federation of over 220 organisations who provide more than 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. 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. The 24 Hour National Domestic Violence Helpline on 0808 2000 247 (run in partnership with Refuge) and our range of online services, which include the Survivors' Forum, help hundreds of thousands of women and children every year.



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Foreword

Polly Neate
Chief Executive, Women's Aid



The pressures on women and children seeking support to escape or recover from domestic abuse, and on the services that support them, are rising to intolerable levels.

Women are seeking help for increasingly complex needs, particularly those coming into refuges, but they are coming up against a system increasingly geared to short-term, community-based, criminal justice-focused risk management.

This latest Women's Aid Annual Survey clearly shows both why recent injections of government funding have been essential, and why without greater accountability for local commissioning decisions, and a sustainable new system of refuge funding, they can never be enough.

The fact that a third of domestic abuse organisations were running an area of service without dedicated funding in 2015/16 is evidence of a sector whose extraordinary fragility contrasts dramatically with the sheer scale of the problem it addresses: domestic abuse is endemic, with a call to the police every 30 seconds (and this despite the fact that many women don't involve the police), and an average of two women a week being killed.

Local commissioners should pay particular attention to the needs of domestic abuse

survivors outlined by these survey results. These needs can only be met by experienced, specialist services. An organisation's specific track record and needs-led approach should be scrutinised by commissioning processes so that generic organisations cannot grow their business by adding domestic abuse funding to their multiple income streams.

This year's survey tells a story about austerity and the impact of overall spending cuts. But that is not the only story, and it's important to resist a defeatist response to these statistics. Issues about the way in which limited funding is allocated are at least as important.

For example, about two thirds of women and children in refuge came from a different local authority area – yet commissioners are increasingly saying refuges can only accommodate local women, dismantling what has been for years a lifesaving national network. And the number of services running without funding has a simple cause: specialist services are decommissioned in favour of inadequate, one-size-fits-all alternatives, but women don't go away – they continue seeking specialist support and the women who run those services still strive to help them.

Meeting the Needs of Women and Children
Findings of the Women's Aid Annual Survey 2016

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Executive Summary



The Women's Aid Annual Survey is the only national survey of the whole range of specialist domestic abuse services for women and children in England. It collects data on domestic abuse services and on the women and children who use them. The 2016 Annual Survey questionnaire was sent to all domestic abuse services in England. We received responses from 179 domestic abuse services, of which 145 ran refuge support and 114 ran

community-based support in 2015/16.¹ The survey questions were based around two main time periods:

- ▶ the work of services in the preceding financial year (2015/16)
- ▶ women and children using services on a Day to Count (for refuge services) and in a Week to Count (for community-based services) in October 2016

Key findings

Domestic abuse services

- ▶ The funding landscape for domestic abuse services is fragmented in nature, with funding coming from a variety of sources and the proportion of local authority funding differing greatly from service to service. 10.2% of responding services received no funding at all from their local authority in 2015/16.
- ▶ About half of respondents gave comments on their biggest challenge in 2015/16 as being funding cuts and uncertainties over future income.
- ▶ About one in four referrals to refuge services in 2015/16 were declined due to lack of space/capacity; there are likely to have been many more potential referrals that weren't made because the refuge was already known to be full.

Women and children

- ▶ Domestic abuse services play a vital role in keeping women and children safe and aiding their recovery: nearly two thirds of women resident in refuge services on the Day to Count had children with them and about half of the women using community-based services in the Week to Count had children.
- ▶ The Annual Survey results highlight the range of survivor support needs. Community-based service users most frequently had needs relating to health, justice, housing and their children. Refuge residents most commonly had needs relating to housing, health, finance and their children.
- ▶ Only about one in six survivors in community-based services and about one in five in refuge services had seen a criminal case or sanctions against the perpetrator.

¹ It is possible to run just refuge support, just community-based support or both. Response rates varied for different parts of the survey.



Domestic Abuse Services

The Year to Count:

1st April 2015 - 31st March 2016

"The most challenging issue our service faced in 2015/16 was lack of funding, resources and staff, which means we have not been able to do quality work with women and children apart from crisis management."

"The most challenging issue our service faced in 2015/16 was maintaining funding in order to deliver and develop services. This means a great deal of time is spent looking for new funding sources and completing funding applications - grants, bids and tenders."

Funding and commissioning challenges

Issues around funding seemed to dominate experiences of running a domestic abuse service in 2015/16. Of the services who responded to the open text question on their biggest challenge of 2015/16, about half (50.4%) gave comments about funding cuts and uncertainties over future income. Indeed, just over a third of respondents reported that they were already running an area of their service without dedicated funding in 2015/16.

Another major challenge facing services were issues around tendering for funding and the commissioning process (23.1% of services gave comments on this). This included the time spent on identifying funding sources and making applications (which can divert resources from support work), and the pressures of taking part in a competitive tender. Respondents were also concerned

about commissioning practices which focused narrowly on lowest unit cost and quantity rather than quality and expertise. This can lead to the exclusion of vital services such as therapeutic care for children and counselling for adults, and a lack of adequate funding to cover management and core costs.

The survey's findings highlight the fragmented nature of the funding landscape for domestic abuse services, marked by a variety of funding sources, reduced funds and considerable uncertainty over future income. On average, services received 45.9% of their funding from local government. However, the proportion of funding services received from their local authority in 2015/16 differed greatly, spanning the whole range from no funding at all (10.2% of responding services) to full funding (7.4% of respondents).

The Annual Survey this year also highlights that a large number of referrals to domestic abuse services are self-referrals (about a quarter of referrals to refuge were self-referrals). This shows not only the accessibility of domestic abuse services but also that cutting or moving funding will not stop women from self-referring. It does, however, make it much harder for services whose funding has been cut or ended to provide support. This indicates the need for commissioning to account for demand outside of referrals generated through statutory agencies.

Meeting demand

The number of survivors supported by community-based services in 2015/16 is staggering: 92 community-based services (responding to this part of the survey) accepted 61,491 referrals in 2015/16. This demonstrates the vital role played by community-based services in supporting thousands of women and children across the country.

For refuge services, the number of referrals declined exceeded the number accepted. Over half of the 19,854 referrals² to the 124

responding refuge services were declined in 2015/16 (for any reason). The main reason for declining referrals was lack of space/capacity to support: about one in four referrals to refuge services in 2015/16 were declined for this reason.³

Meeting support and access needs

Domestic abuse services are supporting a huge number of women with complex needs. Despite this, the high levels of demand mean that services are still having to decline referrals because they are not able to meet the woman's specific support needs, including needs around drug and alcohol use and mental health, or because the woman had no access to public funds.

Domestic abuse services also told us about the challenges involved in establishing migrant women's eligibility for state benefits (including navigating the relatively new benefit rules for women who have moved to the UK from the European Economic Area) and finding the funding to support those survivors with no eligibility for housing benefit.

- 2 These are instances of referral and do not exactly equate to actual numbers of women. For example, one woman may have been referred to four services until she was finally accepted into a service. These would count as three declined referrals and one accepted referral, but all relate to only one woman.
- 3 Statistics on referrals alone cannot give us the full picture of demand. It is likely that there were many more potential referrals but they were not made as referring agencies already knew that the service was full. In addition, many survivors do not disclose abuse or, when they do, may not be taken seriously or have their need for specialist support identified.



Women and Children

The Day and Week to Count:

Thursday 13th October 2016; Monday 10th October -
Friday 14th October 2016 inclusive

Biggest challenge in 2015/16:

"Year on year we have found more victims presenting to our services and find ourselves under pressure to support them as we have not received any additional funding/resources to cope with the increase in demand."

"Austerity measures resulting in greater needs of beneficiaries facing deprivation, reduction in services to assist creating greater demands and less partners to support our work. In summary, increased pressure from all sides due to funding cuts and threats of further cuts."

The Day to Count and the Week to Count, which took place in October 2016, are a census day and week for refuge services and community-based services respectively.

104 responding community-based services told us about 11,568 women and 2,598 children and young people (aged under 18) being directly supported in the Week to Count 2016. 10,366 children and young people were also being indirectly supported that week through support to their mothers. Community-based services were unable to support 424 women that week.⁴

The 131 refuge services responding to this part of the survey told us about 2,017 women and 2,118 children/young people (aged under 18) resident in refuge on the Day to Count 2016. 78 women and 78 children/young people were also turned away from refuge services that day.⁵ About three quarters of women in refuge services had crossed local authority boundaries in order to access refuge.

4 These are instances of referral. A woman and her children may be counted more than once if they were turned away from more than one service. As these are snapshot data, taken on just one week or day, caution is advised when comparing these numbers to previous Days and Weeks to Count.

5 See the previous footnote.

A range of support needs

The Annual Survey results highlight the range of survivor support needs. This includes a large percentage of women with complex support needs. On the Day and Week to Count, over a third of women in refuge and almost a quarter of women using community based services had mental health support needs.

Refuge residents most commonly had needs relating to housing (for example, needing refuge accommodation and support with move-on housing); finance (for example, needing help with debt, accessing benefits, accessing their own income); health (for example, needing access to counselling or treatment for physical, mental or sexual health); and their children (for example, needing parenting support and support with issues around child contact).

Community-based service users most frequently had needs relating to health; justice (for example, needing support with injunctions, reporting to police, the criminal justice system, family law or support at court); housing (for example, support with home security or accessing refuge accommodation); and their children.

Mothers, children and young people

Nearly two thirds of women resident in refuge services that day had children with them and about half of the women using

community-based services had children. 6.2% of the women in refuge services and 5.5% of the women using community-based services were pregnant. Over half of women in refuge and over a quarter of women using community-based services presented with needs relating to her children.

The absence of older women

Older women were notably absent in the Day and Week to Count: women aged 56 and over made up only 4.4% of community-based service users and only 2.3% of refuge residents. There is research that indicates that domestic abuse is just as much of a significant issue for older women as it is for younger women⁶, therefore these very low numbers of older women accessing support services are very concerning.

Experiences of coercive control

Coercive control (a range of abusive behaviours that aim to cause fear and restrict personal freedom) was a prominent feature of the abuse that service-users had experienced. Almost three quarters (73.1%) of refuge residents and 42.9% of community-based service users reported experiencing/ having experienced coercive control. It should be borne in mind, however, that some women may not have recognised the abuse they were experiencing as coercive control or may blame themselves for the abuse.

⁶ See: Mouton, C., Rodabough, R., Rovi, S., Hunt, J., Talamantes, M., Brzyski, R. and Burge, S., 'Prevalence and 3-Year Incidence of Abuse Among Postmenopausal Women', *American Journal of Public Health*, vol. 94, No.4, April 2004; The Femicide Census - Women's Aid in partnership with Karen Ingala Smith *Redefining an Isolated Incident* (Published online: Women's Aid and Karen Ingala Smith, 2016), p. 4.

Access to justice

It seems that many of the women using domestic abuse services during the Day and Week to Count had little contact with the criminal justice system despite the crimes that had been committed against them. Only a third of women using community-based services and about half of women in refuge services had had the domestic abuse reported to the police (by themselves or by a third party). Only about one in six survivors in community-based services and about one in five survivors in refuge services had seen a criminal case or sanctions against the perpetrator.

Conclusion

The survey's findings emphasise the important role specialist domestic abuse services play in supporting and providing safety for women and children, many of whom will have had little engagement with the criminal justice system. This includes both refuges and community-based services, and the survey this year highlights the huge number of women and children that community based services support each year.

Survivors are presenting with a range of needs, notably around housing, finance, health, justice and their children, and a large proportion of service users are mothers of young families. A large proportion of survivors are also presenting with complex needs and whilst services support a huge number of women with complex support needs, they still have to routinely turn women away because they do not have the capacity to support them.

The Annual Survey paints a picture of services that, in a time of reduced funding, insecure

funding and narrow commissioning, are often under considerable pressure to meet the high demand for the vital support they offer.

Meeting the Needs of Women and Children
Findings of the Women's Aid Annual Survey 2016



Full Report





Introduction

The Women's Aid Annual Survey is the only national survey of the whole range of specialist domestic abuse services for women and children in England. Its findings, alongside the data Women's Aid regularly collects on service provision through UK Refuges Online (UKROL)¹, make up the largest collection of data on specialist domestic abuse support work and on the women and children who use these important services.

The findings of the Women's Aid Annual Survey 2016 highlight the vital work conducted by domestic abuse services in supporting women, and their children, with a range of needs, many of whom have had little engagement with the criminal justice system. The results paint a picture of services struggling — in a time of reduced funding and uncertainty over future income — to meet high demand and support survivors presenting with high-level support needs.

The survey questionnaire was sent out to all domestic abuse services in England in September 2016. 179 domestic abuse services responded², of which 145 ran refuge

support and 114 ran community-based support in 2015/16³. The 2016 Annual Survey questionnaire covered three main time periods:

- ▶ The **previous financial year** (1st April 2015 – 31st March 2016)
- ▶ A census day for refuge services called **The Day to Count** (Thursday 13th October 2016)
- ▶ A census week for community-based services called **The Week to Count** (Monday 10th October – Friday 14th October 2016 inclusive)

On the Day to Count, 2,017 women and 2,118 children were resident in the responding refuge services. In the Week to Count, community-based services were directly supporting 11,568 women and 2,598 children and young people (aged under 18).

Details on methodology, including the calculation of the response rate, can be found in Appendix A.

- 1 UK Refuges Online is the UK wide database of domestic abuse services and refuge vacancies, run in partnership with Women's Aid Federation of Northern Ireland, Scottish Women's Aid and Welsh Women's Aid.
- 2 This gives an overall response rate of 53.3%. Response rates differed for different questions. See Appendix A on methodology for more details on how the overall response rate was calculated. This is because not all questions were relevant to every service and some services did not answer all questions relevant to them.
- 3 It is possible to run just refuge support, just community-based support or both.

This report has been divided into two main sections:

- ▶ SECTION ONE: **Domestic abuse services.**
The Year to Count
- ▶ SECTION TWO: **Women and children.**
The Day and Week to Count

All quotes given in this report are from domestic abuse services responding to the survey.

Definitions

What is a domestic abuse refuge service?

A refuge service offers accommodation and specialist support for women and their children at a safe and confidential address. Residents receive a planned programme of therapeutic and practical support from staff and access peer support from other residents. Refuge services also often run prevention or educational work in their local community.

What is a domestic abuse community-based service?

A community-based service offers specialist support to survivors who are based in the community, rather than resident in a refuge. They offer advice, support and information to women in the service's own building, in community venues, over the telephone, online or in a survivor's own home. This includes floating support, outreach support, resettlement support, drop-in services, counselling, group work, specialist support for children/young people and multi-agency advocacy projects. Community-based services also often run prevention or educational work in their local community.

These descriptions are based on the definitions used in UK Refuges Online (UKROL).

Section One Domestic Abuse Services The Year To Count

1/2

Over half of **referrals** to refuge services in 2015/16 **were declined** (for any reason).

1/3

Just over a third of respondents were **running an area of their service without dedicated funding** in 2015/16.



On average, services received 45.9% of their funding from local government, however the proportion of local authority funding varied greatly among services. **10.2%** of services received **no funding at all from their local authority** in 2015/16.



About **one in four referrals** to refuge services in 2015/16 were **declined** because of **lack of space/capacity to support** ... and more potential referrals will not have been made to refuges already known to be full.



About **half** of the services responding said their **biggest challenge** in 2015/16 was **funding cuts** and **uncertainties**.

61,491

Community-based services supported an astonishing number of women in 2015/16; the 92 responding services accepted **61,491 referrals**.



"The most challenging issue our service faced in 2015/16 was lack of funding, resources, and staff which means we have not been able to do quality work with women and children apart from crisis management."

"The most challenging issue our service faced in 2015/16 was maintaining funding in order to deliver and develop services. This means a great deal of time is spent looking for new funding sources and completing funding applications - grants, bids and tenders."

"Commissioning is largely on lowest unit cost and quantity rather than quality, specialism and expertise and track record..."



Domestic Abuse Services: The Year to Count

The Year to Count describes the experiences of domestic abuse services in the preceding financial year (2015/16). Questions in this section of the Annual Survey asked about referrals to refuge and community-based services, challenges faced in the previous year and sources of funding. All the data given in this section of the report are from the time period 1st April 2015 to 31st March 2016 and are from analysis of the large sample of services responding to the Annual Survey.

Funding challenges

Similarly to last year's Annual Survey results, our findings highlight a lot of uncertainty and challenges over securing funding in 2015/16. Out of the 121 services who responded to the open text question on the biggest challenge in 2015/16, about half (50.4%) gave comments about funding cuts and uncertainties. This included the anxiety caused by not knowing whether funding would be renewed, meaning that retaining staff and planning ahead was very difficult.

Other major themes were:

- ▶ issues around tendering and commissioning, including the time spent on applying for funding and searching for funding sources, and the pressures of competitive tendering (23.1%);
- ▶ the challenge of meeting demand for services (11.6%);
- ▶ meeting complex needs of survivors, including needs around drug and alcohol use and mental ill health (14.1%); and
- ▶ meeting the needs of survivors with no recourse to public funds, including the time taken establishing a woman's eligibility for state benefits and trying to secure funding where there was no recourse to public funds (14.1%).

Percentages shown represent proportions of the total number of comments – 121 responses in total. Individual comments may have been coded with more than one theme.

Funding and commissioning challenges in 2015/16



"Commissioning is largely on lowest unit cost and quantity rather than quality, specialism and expertise and track record and commissioning doesn't allow adequately for management/core costs or for essential costs like the cost of advocacy which is vital to effective service delivery for women where we have to fight every battle."

"The inability to forecast and plan ahead due to year on year funding."

"The most challenging issue our service faced in 2015/16 was unknown future funding, reduction in resources for statutory and third sector resulting in increased risk and inadequate services, lack of therapeutic services for children and counselling services for adults."

"The intensive time required to write bids and tenders with reduced resources."

"Reaching full capacity of referrals and having to prioritise cases."

"Reduction in grant/LA funding alongside a rise in number of referrals compounded by closure of services such as women's community groups which creates gaps of support in women's exit strategy from our services."

"Contract for refuge provision was halved."

"Lack of funding and uncertainty for the future of our charity meant that staff levels fell causing a lot of pressure for staff members left."

"The most challenging issue our service faced in 2015/16 was lack of funding, resources, and staff which means we have not been able to do quality work with women and children apart from crisis management."

"[Contract reduced] From a 24 hour service which was able to support high and complex need to office hours only and a generic on call system....."

Over a third of survey respondents (34.1%; 61 respondents) said they were running an area of their service without dedicated funding in 2015/16 (see **Table 1.1**). The areas that were being run without dedicated funding (see **Table 1.2**) were refuge provision (13 services), prevention/educational work (18 services), community-based support for women (20 services), children and young people's work (20 services), specialist Black and Minority Ethnic support (three services), support for women with complex needs (nine services) and 'Other' (22 services). Areas of services mentioned in comments for 'Other' included perpetrator programme, helpline, pet fostering, counselling service, childcare, art work, staff costs, volunteer programme and outreach work.

Table 1.1 Were you running an area of your service without dedicated funding in 2015/16?

Answer options	Percentage of total respondents	Response count (number of services)
Yes	34.1%	61
No	59.8%	107
Missing Responses	6.1%	11
Answered question		168

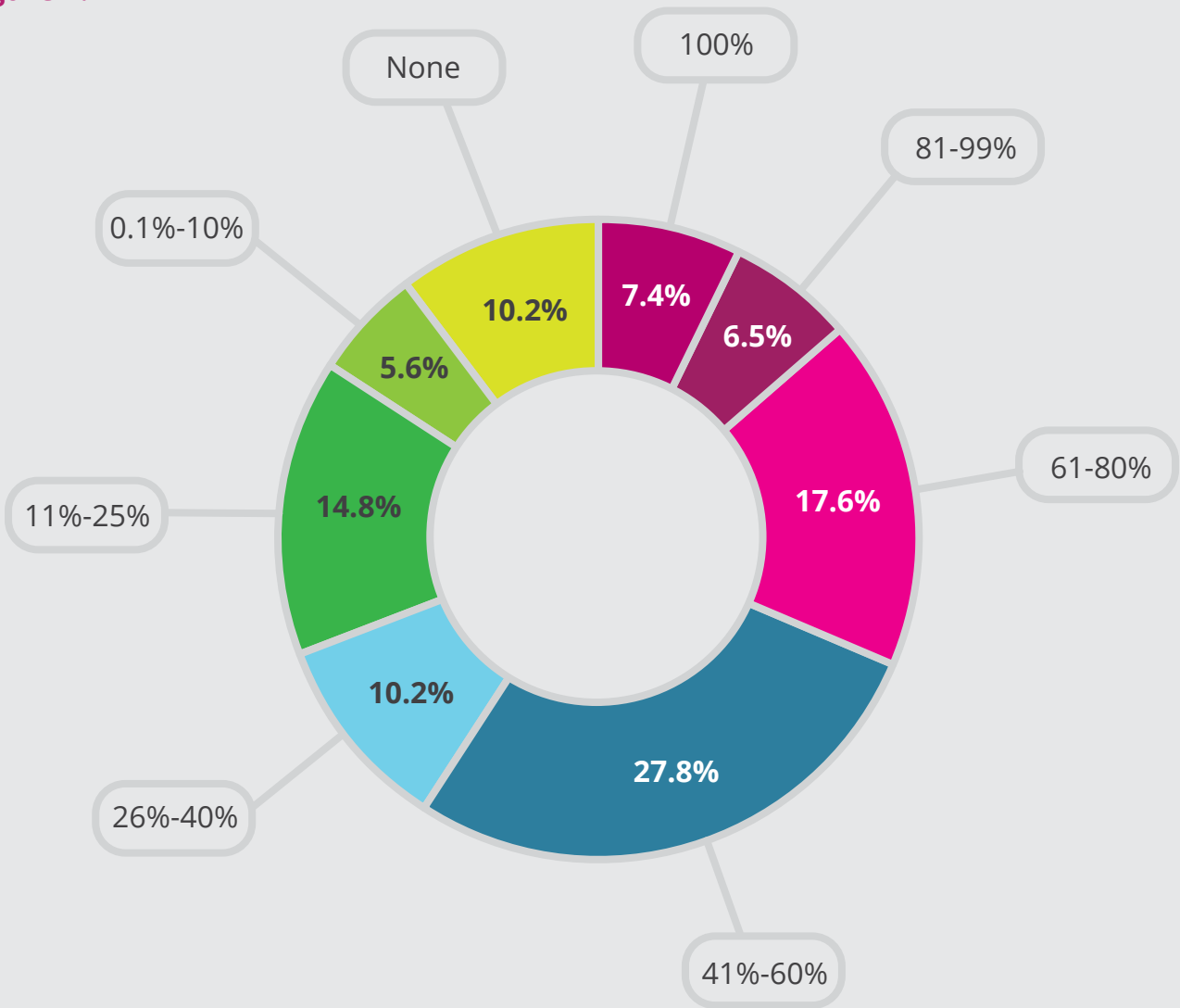
Table 1.2 Which area of your service were you running without dedicated funding in 2015/16? Services could tick more than one option

Answer options	Response count
Refuge provision	13
Prevention/educational work	18
Community-based services for women	20
Children and young people's services	20
Specialist BME services	3
Specialist LGBT services	0
Services for women with complex needs	9
Other Unfunded areas of service mentioned in comments included: perpetrator programme, helpline, pet fostering, counselling service, childcare, art work, staff costs, volunteer programme and outreach work.	22
Answered question	60
Skipped question	1

Local authority funding

On average, services received 45.9% of their funding from local government in 2015/16, but there were large variances in the amount of funding individual services received. This ranged from no funding at all (10.2% of respondents to this question) to 100% local authority funding (7.4% of respondents). See **Figure 1.1** for a breakdown of the proportions of local authority funding received by responding services.

Figure 1.1



108 services responded to this question*

Numbers in the segments are the percentage of services who received funding in this range.

* We contacted those services whose responses on sources of funding did not add up to 100% and asked for corrections. When we did not hear back from the service with a corrected response, we excluded their response from analysis.

Sources of funding

The survey findings show the fragmented nature of funding in the domestic abuse sector. Services typically rely on a wide variety of sources for funding (see **Table 1.3**), and this brings the administrative burden of reporting to various funders and submitting bids to multiple sources for future funding. This burden may be especially hard for small organisations who do not employ professional fundraisers or bid writers. It may also pull resources away from support work.

The survey asked about the proportion of funding from different sources. This is the proportion of funding for the whole service which in some cases was just refuge provision, in some just community-based support, and in others both of these. The highest average proportion of funding came from a local authority, **45.9%** (although as explained previously, there were a wide range of amounts received from local government). The other main sources of funding were, on average:

- ▶ Charitable funding (for example, from trusts or foundations) – **13.7%**
- ▶ Government/statutory grants (other than local authority funding) – **11.2%**
- ▶ Housing benefit for refuge residents – **24.0%** (This average was calculated from a sample of responding services that included refuge support. We excluded from analysis any service that did not run any refuge support as housing benefit would not be relevant for them.)



“The most challenging issue our service faced in 2015/16 was maintaining funding in order to deliver and develop services. This means a great deal of time is spent looking for new funding sources and completing funding applications - grants, bids and tenders.”

Table 1.3 Sources of funding for domestic abuse services in 2015/16 (as a percentage of the overall funding)

Source of funding	Average percentage of overall funding
A local authority	45.9%
Other government/statutory grants	11.2%
Charitable funding (e.g. from trusts and foundations)	13.7%
Corporate funding/sponsorship	0.6%
Community fundraising (e.g. sponsored events, cake sales)	0.9%
Individual giving (i.e. private donations)	1.3%
Legacy income	0.5%
Housing benefit for refuge residents ¹	24.0%
Residents' personal contributions	1.9%
Reserves	1.3%
Charity shop revenue	0.1%
Revenue from delivering training or consultancy work	0.4%
Other	1.6%
Common mentions in 'Other' comments: EU funding, bank interest, gifts in kind and donated services	
Responses from 108 services²	

- 1 This average was calculated from a sample of responding services that included refuge support. We excluded from analysis any service that did not run any refuge support as housing benefit would not be relevant for them.
- 2 We contacted those services whose responses on sources of funding did not add up to 100% and asked for corrections. When we did not hear back from the service with a corrected response, we excluded their response from analysis.

High demand for refuge space

Table 1.4 Referrals to refuge services in 2015/16³

	Refuge services: number of referrals RECEIVED	Refuge services: number of referrals ACCEPTED	Refuge services: number of referrals DECLINED	Missing data on accepted or declined
Total number of referrals	19,854	7,552	11,344	958
Percentage of total received	100.0%	38.0%	57.1%	4.8%

124 services responded to these questions

Our survey findings highlight that refuge services are struggling to meet the high demand for their specialist support. The number of referrals declined by refuge services outnumbered the referrals accepted in 2015/16. Refuge services in our sample accepted 38.0% of the referrals they received and declined 57.1% in 2015/16. In other words, over half of all referrals to refuge services were declined for any reason (See **Table 1.4**).

It is important to note that these are instances of referral rather than actual numbers of women; if a woman was referred to several services she will be counted more than once⁴. We know that the stress of trying to find available and suitable space, perhaps experiencing several rejected referrals before finally being accepted into a refuge, compounds what is already a very distressing and frightening time for a survivor escaping a perpetrator of abuse.

- 3 Individual responses were excluded from analysis where the number of referrals declined and accepted exceeded the number of referrals received.
- 4 For instance, a woman might be referred to one service that does not have capacity to support her, then referred to another one that also does not have capacity and then is finally accepted at a third service. These will be counted as three instances of referral, two instances of declined referral and one instance of accepted referral, but they are just concerning one survivor.

The main reason for declining referrals was a lack of space or capacity to support the survivor; 23.6% of the total referrals received were declined for this reason. For a breakdown of why referrals were declined see **Table 1.5**. The main action taken by refuge services regarding declined referrals was to refer to another refuge (16.7% of total referrals received were referred to another refuge) – see **Table 1.6** for more details.

These figures cannot give us the full picture of demand. There are likely to be survivors who needed refuge support but never disclosed the abuse they were experiencing. In addition, some survivors may have presented with need but were never referred to specialist services, perhaps because in some cases referring agencies did not identify a woman's need for refuge support or they already knew the refuge was full or could not meet her specific needs. The online referral database, UK Refuges Online (UKROL), shows the number of vacancies available, so services with access to this system would know in advance when refuges were full.

Meeting support and access needs – refuge services



Biggest challenge of 2015/16:
"The increased demand on the service coupled with the limited capacity to meet this demand with financial cuts."

Some referrals were declined because the refuge service could not meet the survivor's specific needs around support or access; for example, 2.9% of referrals received were declined because the refuge could not support the woman's needs around drug and alcohol dependency, 2.6% were declined because there was no capacity to support the woman's mental health needs. There are likely to be further potential referrals that were not made because the referring agency already knew that the refuge was unable to support the client's specific needs (these are also displayed on UKROL).

Several services also commented on the challenges they faced, and the resource-intensive work involved, when they were able to accept referrals for women with complex or high-level needs around substance and alcohol use or mental ill health. This is a particular challenge in a time of funding cuts when services are often working with reduced resources and reduced access to specialist workers, such as those with drug and alcohol support experience. One service commented: "We found that supporting women with complex

misuse issues to be quite challenging and would impact on other survivors within the refuge.”

Respondents also talked about the challenge of supporting survivors with uncertain immigration status and those migrant women with no access to public funds. This is in terms of the time and resources expended in establishing a woman's individual rights to benefits, and subsequently, if she has no access to public funds, securing money from alternative sources to fund her stay in refuge. 3.0% of referrals were declined because the woman had no access to public funds. However, this is not representative of the proportion of survivors needing refuge support with no recourse to state benefits. Many women would not have been referred to a refuge because the referring agency already knew about her immigration status and that services would not be able to support her. In addition, many women may not approach agencies for support because they know they are not entitled to public funds or are concerned about the impact on their immigration status of disclosing the abuse.

Some respondents talked about the particular challenges of supporting nationals who have come to the UK from the European Economic Area (EEA)⁵. These were challenges around understanding the rules on access to housing benefit for this group, the time it takes to clarify individual women's eligibility for state benefits and trying to secure funding to support those women who did not have access to housing benefit because they did not have a right to reside as a worker. One service said their biggest challenge in 2015/16 had been “supporting EEA nationals with complex issues around right to reside and habitual residency.”

7.0% of referrals received in refuge services were declined because the survivor did not want support. Leaving your home and uprooting your (and your child/ren's) life is a very difficult decision to make and it is unsurprising that some survivors felt they were not ready for this life-changing move. There are several reasons why a survivor may choose to stay with a perpetrator, including fear of a violent backlash from the perpetrator if she tried to leave (against her or her children/family) and the disruption moving into a refuge (and probably leaving a job, schools, friends, possessions, her usual healthcare provider) would cause to her (and her child/ren's) life. It could also be that she was referred inappropriately and she was not looking for refuge support.

Biggest challenge in 2015/16:
“Working with women who have immigration issues, EEA nationals and how they can access our service when we encounter changes regarding benefit.”

5 The EEA includes EU countries and also Iceland, Liechtenstein and Norway.

Table 1.5 Why referrals were declined in 2015/16 – refuge services 120 services responded to this question	
Reason for declining	Referrals declined as percentage of total number of referrals received
No space/capacity to support the survivor	23.6%
Survivor does not want support	7.0%
Unable to contact survivor	2.8%
Ineligible for support (age)	0.2%
Ineligible for support (from out of area)	0.4%
Ineligible for support (needed a different service)	4.2%
Unable to meet support needs around language	0.2%
No space/capacity to support survivor and her large family	2.1%
Unable to meet support needs around mental health	2.6%
Unable to meet support needs around disability	0.8%
Unable to meet support needs around no recourse to public funds	3.0%
Unable to meet support needs around drugs and alcohol	2.9%
Previous convictions for violent/sexual offences/arson	1.1%
Not safe for survivor in the area where refuge is based	3.3%
Other Some themes in the comments: Survivor's support needs in general were too high, survivor didn't want to stay in communal accommodation, survivor's behaviour was unacceptable, survivor not at high enough risk or at too high risk, survivor had son over age of 16 with her who was not allowed in all-women refuge.	4.0%
Missing responses (at least - as more than one category could be allocated to an individual referral the missing data percentage could be higher and we are unable to calculate it exactly)	3.1%

Table 1.6

Action taken for declined referrals in 2015/16 – refuge services

101 services responded to this question

Action taken	Referrals declined as percentage of total number of referrals received
Referred to another refuge	16.7%
Referred to a specialist domestic abuse community-based service	5.3%
Referred to another specialist violence/abuse against women and girls service	3.0%
Referred to National Domestic Violence Helpline	6.7%
Referred to a local domestic abuse helpline	2.1%
Referred to another service/organisation (not specialist in domestic abuse)	2.7%
Referred back to original referring agency	8.6%
No action taken	1.8%
Other Some themes in the comments: Gave advice, referred/gave information about other services (e.g. local authority services, asylum support, housing services, sanctuary scheme)	2.1%
Missing responses (at least - as more than one category could be allocated to an individual referral the missing data percentage could be higher and we are unable to calculate it exactly)	6.0%

Stretched community-based services

Table 1.7
Referrals to community-based services in 2015/16⁶

	Community-based services: number of referrals RECEIVED	Community-based services: number of referrals ACCEPTED	Community-based services: number of referrals DECLINED	Missing data on accepted or declined
Total number of referrals	79,552	61,491	14,322	3739
Percentage of total received	100.0%	77.3%	18.0%	4.7%

92 services responded to these questions

Community-based services supported a staggering number of women in 2015/16; the 92 responding services accepted 61,491 referrals. The proportion of referrals declined in 2015/16 was smaller for community-based services (compared to refuge services) and the main reasons for declining referrals also differed. Roughly one in five (18.0%) referrals to community-based services were declined (compared to over one in two referrals to refuge services) - see **Table 1.7**.

Again, it is important to note that these are instances of referral and do not exactly equate to actual numbers of women. As explained in our commentary on referrals to refuge services, these data from our Annual Survey cannot give a complete picture of demand for community-based support.

The main reasons for declining referrals to community-based support were being unable to contact the survivor (8.5% of the total referrals received) and the survivor not wanting support (8.1%) – see **Table 1.8**. The most common action taken on declined referrals was to refer back to the original referring agency – see **Table 1.9** for further details.

As discussed in the section on refuge referrals, the decision to get support on domestic abuse can be a very difficult one: the survivor may feel shame about telling someone else about her relationship, she may be afraid that the perpetrator will find out and punish her, she may not feel emotionally ready. It could also be that survivors were referred inappropriately, without their input.

⁶ Individual responses were excluded from analysis where the number of referrals declined and accepted exceeded the number of referrals received.

"Service users referred by social care or troubled families, service users did not want support but were being pushed into accessing our services. This made it difficult to contact and engage with these women."

We asked services how many attempts they usually made to contact a survivor: none of the respondents indicated they just made one attempt, just under half of the respondents said they made three attempts (44.9% of 98 question respondents), and 39.8% made four, five or six attempts. (See **Table 1.10** for a full breakdown of responses).

We also asked services to tick the main reasons why women did not want support, 54 services responded and they indicated that the main explanations were:

- ▶ Survivor found support elsewhere (63.0%)
- ▶ Survivor staying with perpetrator (96.3%) (Community-based services do accept women who are still in abusive relationships. However, some women may feel that they would not be safe staying with the perpetrator while getting support, fearing him finding out and punishing her.)
- ▶ Survivor still looking for support but decided their service was not suitable for her (35.2%)
- ▶ Survivor still looking for support but decided their service not suitable for her children (16.7%)
- ▶ Survivor still looking for support but in different geographical area (63.0%)
- ▶ 'Other' comments (48%): Survivor felt she did not need service or was not emotionally ready, survivor referred without her consent, survivor felt too many agencies were involved in her support, survivor just wanted advice, survivor moving out of the area.

(54 services responded - services could respond to more than one option. Percentages in brackets refer to proportion of services responding to this question)

Table 1.8**Why referrals were declined in 2015/16 – community-based services**

85 services responded to this question

Reason for declining	Referrals declined as percentage of total number of referrals received
No space/capacity to support the survivor	0.3%
Survivor does not want support	8.1%
Unable to contact survivor	8.5%
Ineligible for support (age)	0.0%
Ineligible for support (from out of area)	0.6%
Ineligible for support (needed a different service)	1.3%
Unable to meet support needs around language	0.0%
No space/capacity to support survivor and her large family	0.0%
Unable to meet support needs around mental health	0.1%
Unable to meet support needs around disability	0.0%
Unable to meet support needs around No Recourse to Public Funds	0.0%
Unable to meet support needs around drugs and alcohol	0.0%
Previous convictions for violent/sexual offences/arson	0.0%
Other Themes in comments included: Person presenting for support identified as perpetrator, the support issue was not domestic abuse, no childcare available	1.7%
Missing responses (at least - as more than one category could be allocated to an individual referral the missing data percentage could be higher and we are unable to calculate it exactly)	0.5%

Table 1.9**Action taken for declined referrals in 2015/16 – community-based services**

74 services responded to this question

Action taken	Referrals declined as percentage of total number of referrals received
Referred to refuge services	0.4%
Referred to another specialist domestic abuse community-based service	1.0%
Referred to another specialist violence/abuse against women and girls service	0.2%
Referred to National Domestic Violence Helpline	0.1%
Referred to a local domestic abuse helpline	1.0%
Referred to another service/organisation (not specialist in domestic abuse)	1.2%
Referred back to original referring agency	5.9%
No action taken	1.5%
Other	
Some themes in the comments: Gave advice instead, referred to a more relevant service/agency (e.g. a children's service, a perpetrator programme)	1.5%
Missing responses (at least - as more than one category could be allocated to an individual referral the missing data percentage could be higher)	4.8%

Table 1.10

The number of attempts usually made to contact a survivor who has been referred.

Answer Options	Percentage of respondents to question
1 attempt	0.0%
2 attempts	2.0%
3 attempts	44.9%
4 attempts	17.3%
5 attempts	11.2%
6 attempts	11.2%
Other Comments included: As many as necessary, depends on the level of risk from a risk assessment, no set number of times.	13.3%
98 services responded to this question	

Section Two

The Day and Week to Count

On the Day to Count and in the Week to Count¹...

2/3 Nearly **two thirds** of women in **refuge** services had **children** (aged under 18) **with them.**

About **half** of the women using **community-based services** had **children** (aged under 18).

1/2



Over half of women in refuge and over a quarter of women using community-based services presented with **needs relating to their children.**

6.2% of women in refuge services and 5.5% of women using community-based services were **pregnant.**



About three quarters of women in refuge services came from a **different local authority area.**

Older women were notably absent in the Day and Week to Count: women aged 56 and over made up only 4.4% of community-based service-users and only 2.3% of refuge residents. This is despite research that indicates that women of all ages experience domestic abuse.



A third of women using community-based services and about half of women in refuge services had had the domestic abuse **reported to the police.**

Only about one in six survivors in community-based services and about one in five in refuge services had seen a **criminal case or sanctions against the perpetrator.**



Community-based service users most commonly had needs relating to **health, justice, housing and children.**

Women in refuge services most commonly had **housing, health and financial** needs and needs relating to their **children.**



"Year on year we have found more victims presenting to our services and find ourselves under pressure to support them as we have not received any

additional funding/resources to cope with the increase in demand. We have also found the number of support services declining locally so it is becoming increasingly difficult to refer victims/survivors onto other organisations for help."

"Austerity measures resulting in greater needs of beneficiaries facing deprivation, reduction in services to assist creating greater demands and less partners to support our work. In summary, increased pressure from all sides due to funding cuts and threats of further cuts."

¹ Total of 2017 and 2118 children resident on the Day to Count in the 131 refuge services responding to this part of the Women's Aid Annual Survey 2016. Total of 11,568 women using community-based services in the Week to Count in the 104 community-based services responding to this part of the Annual Survey.



Women and Children The Day and Week to Count

The Day to Count and the Week to Count sections of the Annual Survey questionnaire asked questions about service users on a census day (for refuges) and during a census week (for community-based services) in October 2016. The data presented in this section of the report are a snapshot picture of service use on that day or in that week taken from the large sample of services responding to the Annual Survey. As these are snapshot data from just one day, caution is advised when comparing actual numbers with those of previous Days to Count.

The Day to Count (refuge services): Thursday 13th October 2016

131 refuge services responded to the Annual Survey telling us about²:

- ▶ 2,017 women resident in refuge
- ▶ 2,118 children/young people resident in refuge
- ▶ 78 women and 78 children/young people turned away

The Week to Count (community-based services): Monday 10th October - Friday 14th October 2016 inclusive

104 community-based services responded to the Annual Survey telling us about³:

- ▶ 11,568 women using community-based services
- ▶ 2,598 children/young people directly supported
- ▶ 10,366 children/young people indirectly supported (though support to their mothers)
- ▶ Unable to support 424 women that week

² This does not represent the total number of service users that day, rather, a large sample made up of those services responding to the survey. 131 refuge services and 104 community-based services responded to this part of the survey. See Appendix A on methodology.

³ See previous footnote

Mothers, children and young people

There were 2,017 women with 2,118 children resident on our Day to Count in the survey sample from refuge services. A large proportion of residents that day were mothers with children (aged under 18) with them in refuge (63.8%). 17.7% of women in our refuge sample had more than two children with them and 6.2% were pregnant. 78 women and 78 children/young people were also turned away on that day⁴. The reasons for declining referrals are explored in Section One of this report.

There were 11,568 women in the survey sample from community-based services during our Week to Count. About half of these women had children aged under 18 (50.1%), about a quarter (24.8%) had more than two children and 5.5% were pregnant. The community-based services responding to our Annual Survey also told us that they directly supported 2,598 children and young people (aged under 18) and indirectly supported (through support to their mothers) 10,366 children and young people that week. Community-based services were unable to support 424 women that week and it is likely that many of these women had children.⁵ (Again, see Section One of this report for more details on why referrals are declined.)

5.7% of the refuge residents that day and 2.7% of the community-based service users that week had had their children taken into care because of the domestic abuse.

The harm caused to children by experiencing domestic abuse has been well-documented⁶, whether this is harm through witnessing abuse towards their mother, experiencing direct abuse from a perpetrator, or both. The harmful impact on children can include mental ill health, developmental delays, learning difficulties, speech and language difficulties and sleeping problems⁷. It is important to stress that responsibility for the harm caused to children lies with the perpetrators of domestic abuse, and not with the non-abusive parents.

Domestic abuse services have an in-depth understanding of the impact on children and young people and offer specialist support including parenting support for mothers, and emotional and practical support for children and young people, such as play therapy, counselling, group work, after-school or holiday clubs. As well as offering direct services for children, domestic abuse services are also indirectly supporting children and young people by supporting their mothers. This is because addressing the mother's wellbeing and safety will positively impact upon her ability to look after her children and on her children's wellbeing⁸.

4 Women and children may be counted more than once if they were turned away by more than one responding service that day. As these are snapshot data, taken from just one day, caution is advised before comparing with previous Days to Count.

5 See previous footnote.

6 See: Mullender, A., Hague, G., Imam, I., Kelly, L., Malos, E. and Regan, L., *Children's Perspectives on Domestic Violence*. (London: Sage, 2002); Thiara, R.K. and Harrison C., University of Warwick, *Safe not sorry: Supporting the campaign for safer child contact* (Bristol: Women's Aid, 2016); Women's Aid, *Nineteen Child Homicides* (Bristol: Women's Aid, 2016)

7 Mullender, A., Hague, G., Imam, I., Kelly, L., Malos, E. and Regan, L., *Children's Perspectives on Domestic Violence*. (London: Sage, 2002). See especially Chapter 4.

8 Thiara, R.K. and Harrison C., University of Warwick, *Safe not sorry: Supporting the campaign for safer child contact* (Bristol: Women's Aid, 2016), P. 18

The needs of survivors

Biggest challenge of 2015/16: "Austerity measures resulting in greater needs of beneficiaries facing deprivation, reduction in services to assist creating greater demands and less partners to support our work. In summary, increased pressure from all sides due to funding cuts and threats of further cuts."

This year's Annual Survey questionnaire included a new question on the needs of survivors accessing support. A description of the different categories of need included in the survey question is given in **Table 2.1**. This question reflects the focus on needs in Women's Aid's Change that Lasts model and the needs-centred work currently carried out by many services in our federation. Change that Lasts, developed in partnership with survivors and specialist local services, is a cross-sector approach that places the survivor at the heart and builds responses around her needs and the strengths and resources available to her.

The answers to this question confirm what we already knew about the wide range of survivors' needs. They also reinforce the importance of adequately funding dedicated support services so they can meet these needs within the specialist context of domestic abuse.

Unsurprisingly, nearly all the women in refuge accommodation (90.8%) had housing needs (we can speculate that if we could account for missing data this might be nearer 100%); this would include needing to access the safety of emergency accommodation and safe move-on accommodation. Health needs (82.0%), finance needs (81.7%), and needs relating to her child(ren) (57.1%) were also particularly high for the sample of women in refuge services.

For the community-based services sample, the highest percentages were for health needs (38.2%), justice needs (29.4%), housing needs (26.7%) and needs relating to her child(ren) (26.0%). In contrast to women already in refuge, the housing needs of women using community-based services are more likely to be related to access to refuge housing, finding new accommodation after leaving a perpetrator, or needing support to increase security at their current accommodation (often known as 'target hardening' or the work of a 'sanctuary scheme'). The full results are given in **Figure 2.1**. We were unable to calculate missing data as more than one category option could be allocated for each woman.

It should be stressed that these are data from a sample of survivors using support services and not survivors in general. As discussed in Section One, some survivors are unable to

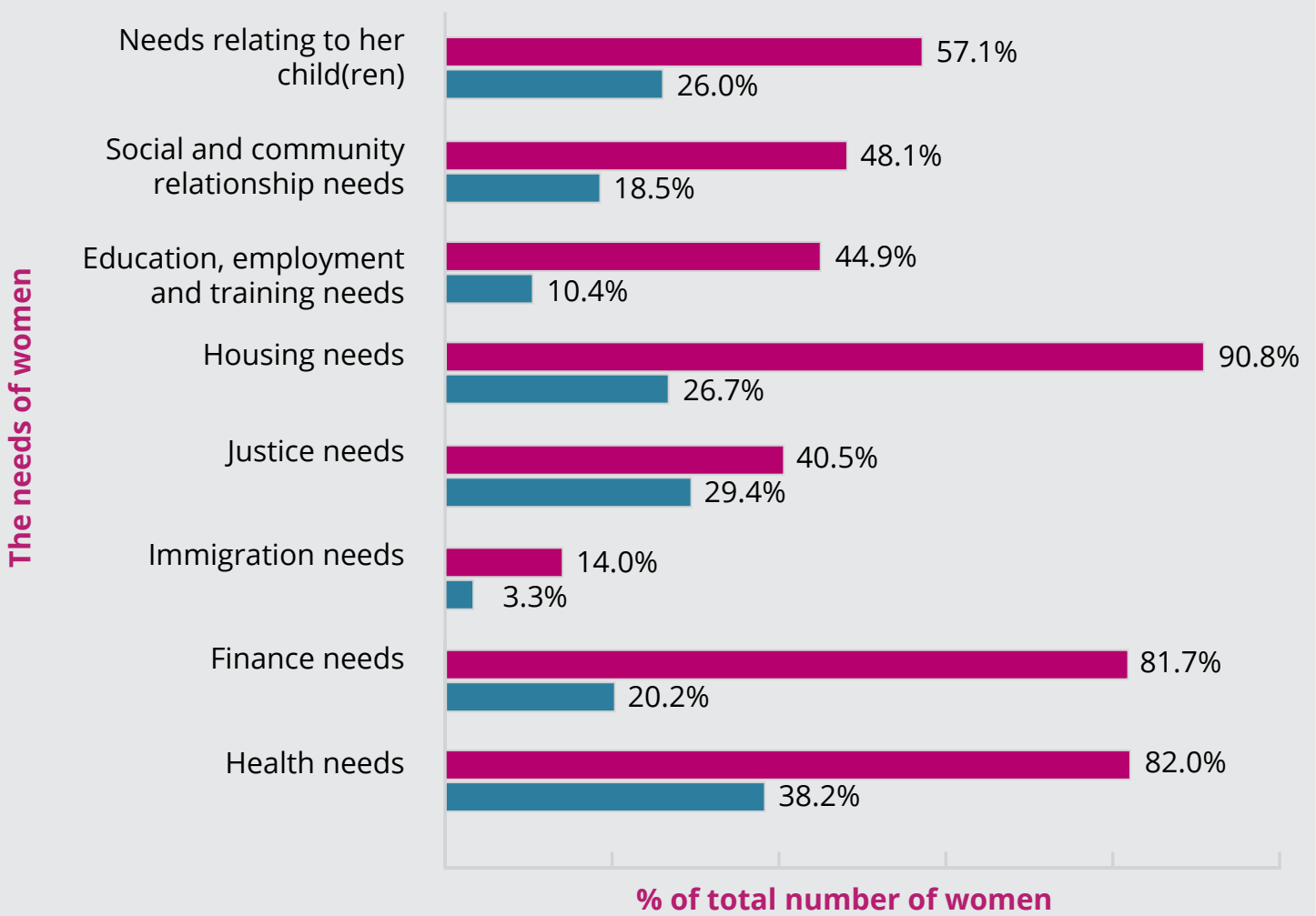
Biggest Challenge of 2015/16: "The increase in support needs of clients, especially mental health."

access support because services do not have the resources to meet their specific needs; for example this could be a lack of capacity to support high-level support needs around mental health or drugs and alcohol use. In addition, some services are not able to support migrant women who have no recourse to public funds or whose eligibility for public funds is uncertain.

In answering this survey question, we recommended that services referred to the

results of needs assessments or directly asked the survivors. We asked services to answer according to women's needs regardless of whether they were currently receiving support on these issues. Although services do offer support on the range of issues given, we realise that not all the issues might be actively supported at that moment and we wanted to capture the full range of need.

Figure 2.1 The needs of women using domestic abuse services on the Day to Count and in the Week to Count, October 2016



■ Percentage of total number of women (2,017) refuge service
 ■ Percentage of total number of women (11,568) community-based service

Table 2.1

Areas of need

Area of need	Examples given to survey respondents
Health Needs	Needing to access counselling, group work, healthy eating groups, life skills groups, treatment for physical, mental or sexual health, support with suicidal thoughts/feelings, registering with a GP, self-harming or substance misuse
Finance Needs	Needing support with debt and money management, destitution, accessing benefits, accessing own income
Immigration Needs	Needing support with clarifying status, regularising status, Destitute Domestic Violence (DDV) Concession application
Justice Needs	Needing support with injunction/s, reporting to police or criminal justice system/process, family law or support at court
Housing Needs	Needing support with home security, homelessness through domestic violence, emergency accommodation/refuge, resettlement, maintaining a tenancy
Education, Employment and Training Needs	Needing support with staying in current work safely, finding new work, training, volunteering
Social and Community Relationships Needs	Accessing community, faith-based and social groups, re-establishing relationships with friends and family
Needs relating to her Child(ren)	Needing to access specialist support for her children, parenting support, issues around child contact

Health and disability

The survey asked questions about health and disability support needs: 6.1% of community-based service users had physical health needs and 23.4% had mental health support needs; 14.8% of refuge service users had physical health support needs and 31.8% had mental health support needs. Very few women in our sample were learning disabled or had a physical disability (including any sensory impairment): 2.2% of community-based service users were learning disabled and 5.0% were physically disabled; 3.6% of refuge service users were learning disabled and 6.0% were physically disabled. (See **Figure 2.2.**)

We know that mental and physical ill health are common outcomes of domestic abuse and that pre-existing health conditions (pre-dating the abuse) are often exacerbated by experiences of domestic violence.⁹ We also know that disabled women experience domestic abuse and that being disabled can strongly influence the extent and nature of

the abuse, with women's impairments often used in the exertion of power and control.¹⁰ It is therefore unlikely that the data given here from domestic abuse services are representative of the proportions of women in these groups who experience abuse and need support.

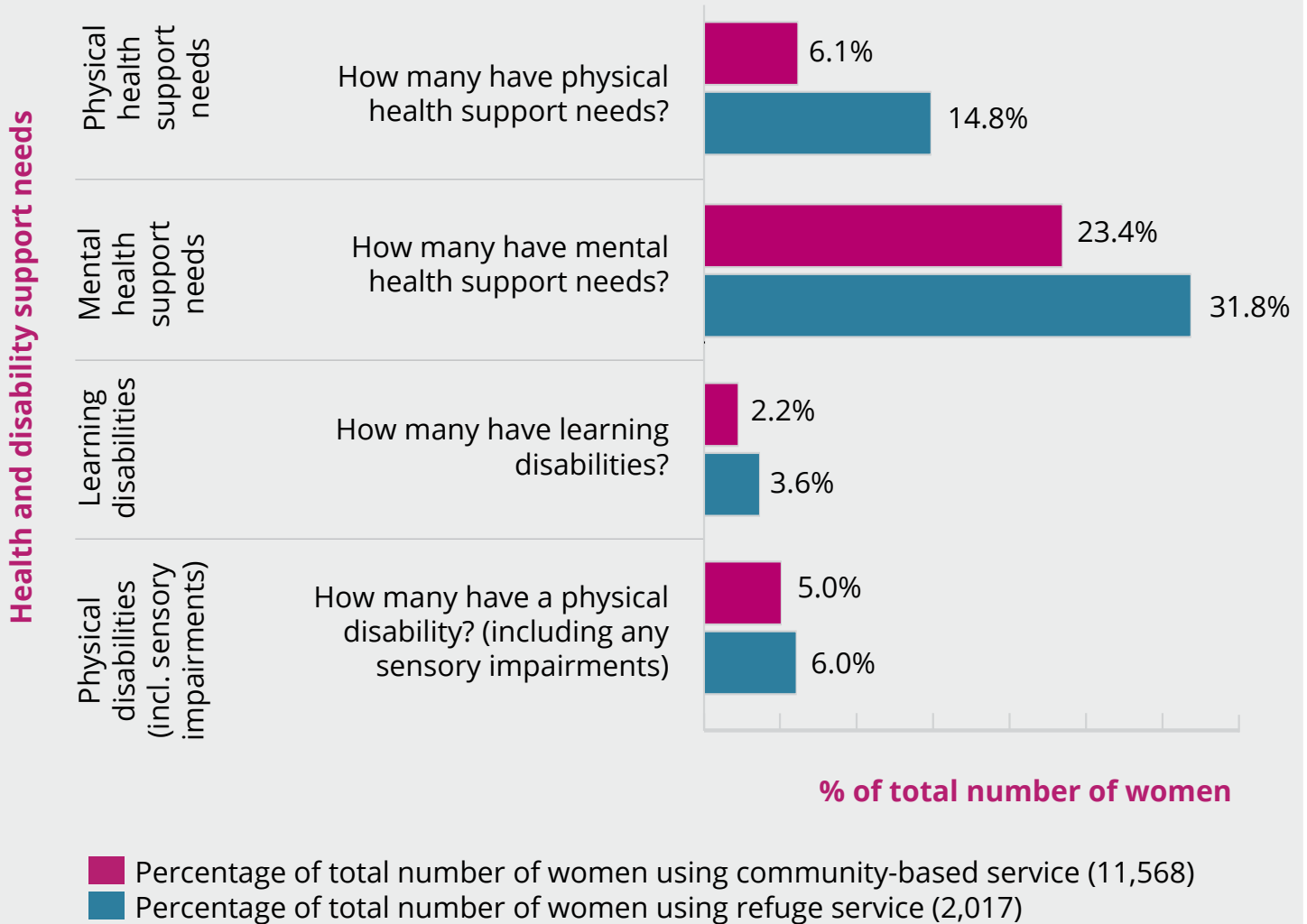
Women who are disabled or have long-term ill health may face particular barriers to accessing support and safety; for example, their opportunities to contact support agencies may be limited, face-to-face support in accessible buildings may not be available, the perpetrator may also be their 'carer', and their experiences of abuse may not be readily believed or taken seriously.¹¹ In addition, as explored in Section One of this report, women may be turned away from or not referred to specialist support because the service doesn't have the capacity or resources to meet what is often called 'complex needs'. This includes high-level support needs linked to a woman's health (physical or mental) or disability.

9 See Humphreys, C. and Thiara, R.K., 'Mental Health and Domestic Violence: "I Call it Symptoms of Abuse"' (*British Journal of Social Work*, 2003, 33, 209–226); Oram, S., Khalifeh, H., Howard, L.M., 'Violence against women and mental health' (*The Lancet Psychiatry*, 2016, Volume 4, Issue 2, 159 – 170); World Health Organization (WHO), *Violence against women Intimate partner and sexual violence against women Fact sheet* Updated November 2016 (Published online: WHO, 2016); NICE, *Domestic violence and abuse Quality Standard [QS116]* (Published online: NICE 2016)

10 Hague, G., Thiara, R.K., Magowan, P. and Mullender, A., *Making the links Disabled women and domestic violence Final report* (Bristol: Women's Aid, 2008)

11 *ibid.*

Figure 2.2 The health and support needs of women using domestic abuse services on the Day to Count and in the Week to Count, October 2016



Age

The age groups of women using domestic abuse services during the census day and week are similar to the findings from the previous year's Annual Survey. For refuge residents, the numbers of women peak in the following age groups: 21-25 years, 26-30 years, 31-35 years and 36-40 years. The highest number of women were in the 26-30 years age group (25.5%). There is a similar pattern for women using community-based services, with the numbers peaking for the same age groups, and the highest number of women were also in the 26-30 years group (16.5%). See **Figure 2.3** for further details.

There was a very low number of older service-users in our sample. In our sample of community-based service users, women aged 56 and over were only 4.4% of the total number of women. In our sample of refuge residents, women aged 56 and over made up only 2.3% of the total number of women.

Data on the prevalence of domestic abuse among older women are limited and there are currently no national prevalence estimates for older women in England and Wales (although there are plans to change

data collection for the Crime Survey of England and Wales to include respondents aged over 59).¹² However, it seems likely from what evidence exists that older women experience domestic abuse at similar rates to younger women. For instance, a US study of 91,749 women concluded that post-menopausal women are exposed to abuse at similar rates to younger women¹³; and data from the Femicide Census¹⁴ (developed by Karen Ingala Smith and Women's Aid) also suggest that domestic abuse among older women is a significant issue. Therefore, the very low numbers of older women accessing domestic abuse services is very concerning.

The Femicide Census shows that women can be victims of femicide at any age and that 149 women aged 66 and over were killed by men in England and Wales between January 1st 2009 and December 31st 2015. 50 of these women (34%) were killed by their partner or spouse/ex-partner or ex-spouse. 34 of them (23%) were killed by their sons.¹⁵ Out of the total number of women (936) killed by men between 2006 and 2009, women aged 66 and over were the third largest group (15.9%). The largest group of women were aged between 36 and 45 years – 21.7% of the total.¹⁶ See **Figure 2.4** for more details.

- 12 The self-completion section on domestic and sexual abuse of the Crime Survey of England and Wales (the source of data for national prevalence estimates) is not currently given to respondents over the age of 59 years to complete. However, the Office for National Statistics (ONS) are currently piloting lifting this upper age limit.
- 13 Mouton, C., Rodabough, R., Rovi, S., Hunt, J., Talamantes, M., Brzyski, R. and Burge, S., 'Prevalence and 3-Year Incidence of Abuse Among Postmenopausal Women' (*American Journal of Public Health*, vol. 94, No.4, April 2004)
- 14 The Femicide Census is a database containing information on women killed by men in England and Wales since 2009. It was developed by Karen Ingala Smith and Women's Aid working in partnership, with support from Freshfields Bruckhaus Deringer LLP and Deloitte LLP. Femicide is generally defined as the murder of women because they are women, though some definitions include any murders of women or girls.
- 15 The Femicide Census - Women's Aid in partnership with Karen Ingala Smith *Redefining An Isolated Incident* (Published online: Women's Aid and Karen Ingala Smith, 2016), p. 4 and p. 23
- 16 The Femicide Census - Women's Aid in partnership with Karen Ingala Smith *Redefining An Isolated Incident* (Published online: Women's Aid and Karen Ingala Smith, 2016), p. 16

Figure 2.3 Ages of women using domestic abuse services on the Day to Count and in the Week to Count, October 2016

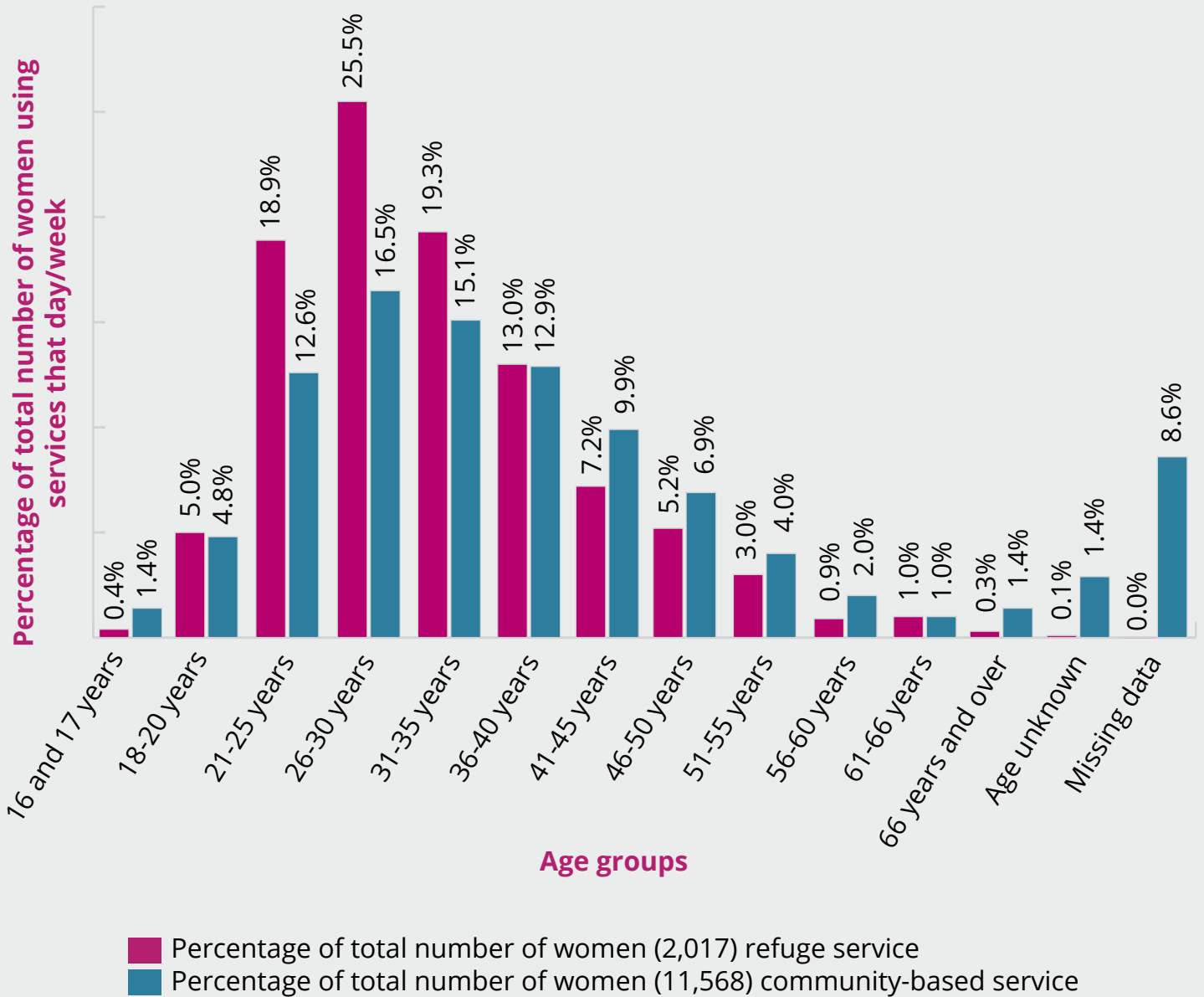
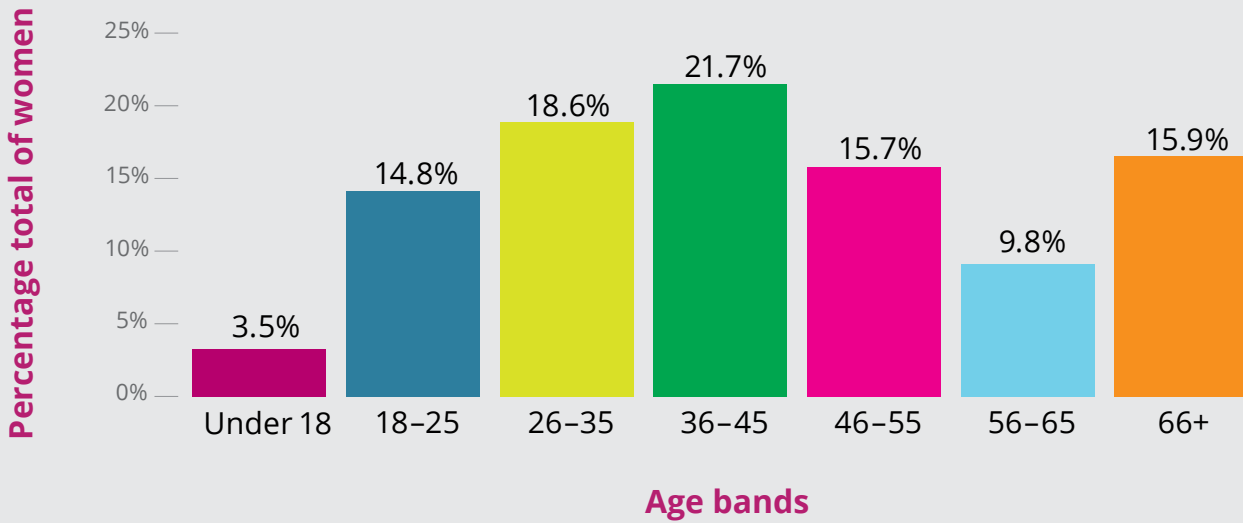


Figure 2.4 Age bands of women killed between 2009 and 2015 in England and Wales



Ethnic background

During the census week for community-based services, survivors were most commonly in the White ethnic group (61.6%). The second largest ethnic group was Asian/Asian British women (9.3%), and the third largest group was the Black/Black British ethnic group (8.8%). 3.7% were from a mixed/multiple ethnic background; 2.5% were from 'other ethnic group' (including Arab ethnic group); missing responses and where the respondent had marked that the ethnic group was unknown made up 14.1% of the total.

Survivors in refuge services on the Day to Count were also most commonly from a White ethnic group (54.3%). The second largest ethnic group was Asian/Asian British women (21.5%). 14.0% of women were

in the Black/Black British ethnic group, 4.7% were from a mixed/multiple ethnic background and 4.4% identified as being from 'other ethnic group' (including Arab ethnic group). Missing responses and where the respondent had marked that the ethnic group was unknown were 1.1% of the total. See **Table 2.2** for the full details.

Eight of the services responding to the Annual Survey were dedicated Black and minority ethnic (BME) domestic abuse services. These vital specialist services offer expert understanding of the double impact on BME survivors of racism and sexism and the particular family and community structures at the heart of BME survivors' experiences of abuse.¹⁷ A Women's Aid investigation into the needs of Black survivors and their children described this dual impact in the following way: "Black

17 Thiara, R.K. and Roy, S., *Vital Statistics 2 Key Findings Report on Black, Asian, Minority Ethnic & Refugee women & children facing violence & abuse* (London: Imkaan, 2012), p. 5

women often face the dual problem of racism from the wider society and rejection from their own communities."¹⁸

BME survivors often face particular barriers in accessing justice and public services, such as the police, health and housing services.¹⁹ Imkaan, a UK-based, Black feminist organisation dedicated to addressing violence against women and girls, describes these barriers in the following way:

Black and minority ethnic (BME) women escaping abuse often experience repeat victimisation in the form of racism and discriminatory cultural stereotypes that minimise their experiences of violence and can render invisible the violence they have survived. BME women may be additionally excluded from services due to unfamiliarity, information gaps in service provision, cultural/religious incompatibility and a lack of appropriate language services.²⁰

18 Rai D.K. & Thiara R.K., *Redefining spaces: The needs of black women and children using refuge services in England* (Bristol: Women's Aid, 1997)

19 See www.womensaid.org.uk/the-survivors-handbook/women-from-bme-communities/

20 Imkaan, *Supporting Black and Minority Ethnic Women and Girls: 10 top things for commissioners of ending violence against women and girls services to consider* Briefing (London: Imkaan, 2014), p. 1

Table 2.2: Ethnic groups of women using domestic abuse services on the Day to Count & in the Week to Count, October 2016

Ethnic Group	% of total number of women in community-based services (11,568)	% of total number of women in community-based services (11,568)	% of total number of women (2,017) in refuge	% of total number of women in refuge (2,017)
White				
British	55.0%	61.6%	44.8%	54.3%
Irish	0.8%		0.7%	
Gypsy or Irish Traveller	0.5%		1.0%	
Any Other White background	5.3%		7.7%	
Mixed/Multiple ethnic groups				
White and Black Caribbean	1.5%	3.7%	2.1%	4.7%
White and Black African	0.5%		0.7%	
White and Asian	0.4%		0.7%	
Any other mixed or multiple ethnic background	1.2%		1.2%	
Asian/Asian British				
Indian	2.0%	9.3%	4.2%	21.5%
Pakistani	3.3%		9.3%	
Bangladeshi	0.9%		4.1%	
Chinese	0.5%		0.4%	
Any other Asian background	2.7%		3.4%	
Black / African / Caribbean / Black British				
African	3.9%	8.8%	7.8%	14.0%
Caribbean	2.7%		2.9%	
Any other Black/African/Caribbean background	2.2%		3.3%	
Other Ethnic Groups				
Arab	0.6%	2.5%	2.0%	4.4%
Any other ethnic group	2.0%		2.3%	
Ethnic Group Unknown				
Ethnic Group Unknown	7.8%	7.8%	0.8%	0.8%
Missing Responses for women				
	6.3%	6.3%	0.3%	0.3%
TOTAL:	100.0%	100.0%	100.0%	100.0%

Employment status

A minority of women using domestic abuse services were in paid employment (14.7% of community-based service users and 7.7% of refuge residents). A further 8.8% of refuge residents had had to give up paid employment in order to enter refuge. This is likely to be for a number of reasons: because they had to move away from their location of employment in order to safely access refuge; they had to give up their job because of the risk of the perpetrator finding them through their place of work or they needed to give up paid employment in order to qualify for benefits to pay for refuge accommodation.

Experiences of abuse

Coercive and controlling behaviour is 'the dark heart of domestic abuse'²¹ and has been a criminal offence since the end of 2015. Coercive control is defined in statutory guidance as 'a purposeful pattern of behaviour which takes place over time in order for one individual to exert power, control or coercion over another.' The term 'coercive control' was first described by Susan Schechter in her 1980s work on women and male violence.²² It can be applied to a range of behaviours (physically violent or abusive in non-physical ways) that are conducted with the aims of causing fear and submission. They are actions that deliberately restrict someone's personal

freedom, their 'space for action'²³. The writer Evan Stark emphasises the gendered nature of coercive control in his descriptions of men's entrapment of women in personal life; abuse based in and perpetuated by ingrained social structures of gender inequality²⁴. Examples of coercive and controlling behaviour include extreme monitoring of a person's activities, dictating (with the threat of harm) someone's daily routine, including perhaps what she may wear and where she may go, and isolating her from her friends and family.

As power and control are the background to domestic abuse, it is unsurprising that a large proportion of service users during our Day and Week to Count were survivors of coercive controlling behaviour. Out of our sample of refuge service users, almost three-quarters (73.1%) had reported experiencing/had experienced coercive control; and, in the sample of community-based service users, the proportion reporting was 42.9%. We need to treat these data with caution, however, as it may be that some women were being controlled but did not recognise it as such or blamed themselves for the abuse they were experiencing.

Financial abuse was also a prominent feature of the abuse experienced by women in our sample, particularly the women in the refuge sample. Financial abuse is often used as a means of increasing the perpetrator's control and reducing the survivor's means

- 21 Neate, P., 'The Archers' domestic abuse plot should end in tragedy - that's the reality' (Published online: *The Telegraph*, 2016)
- 22 See Schechter, S., *Women and male violence: the visions and struggles of the battered women's movement* (Cambridge, MA, USA: South End Press, 1982); Schechter, S., *Guidelines for mental health practitioners in domestic violence cases 4* (1987)
- 23 Kelly, L., 'The Wrong Debate: Reflections on Why Force is Not the Key Issue with Respect to Trafficking in Women for Sexual Exploitation' (*Feminist Review* 73, 139-144, 2003)
- 24 Stark, E., *Coercive control: How Men Entrap Women in Personal Life* (U.S.A: Oxford University Press, 2007)

of independence. It can include control over a survivor's money, exploitation of her assets and sabotage of her efforts to work or expand her job prospects through volunteering or study. Over half of the refuge sample (54.5%) and a quarter of the community-based services sample (25.4%) had experienced or were experiencing financial abuse.

Access to Justice

Our survey findings on criminal justice again reinforce the notion that domestic abuse is often a hidden crime. The domestic abuse had been reported to the police (by the survivor herself or by someone else) for a third of the community-based services sample (33.5%) and about half of the refuge sample (49.5%). When asked about criminal sanctions against the perpetrator, the numbers were even lower. Similarly to last year's findings, the number of survivors who had seen criminal proceeding against the perpetrator was low. Only about one in six (16.8%) in our community-based services sample and about one in five survivors (20.9%) in our refuge sample had seen a criminal case or criminal sanctions against the perpetrator.

A report published by Her Majesty's Inspectorate of Constabulary (HMIC) in March 2017 also raised significant questions about access to justice for domestic abuse survivors. It found that, regarding domestic abuse, there is considerable variation in arrest rates in different police force areas,

ranging from only a quarter of perpetrators being arrested in some forces to over three quarters in another.²⁵ The report commented that:

*"In some forces, the use of arrest as a way to support and protect victims has reduced to disturbingly low levels. On too many occasions, formal and informal police action to protect victims and deter offending is not being carried out."*²⁶

In just over a third of all reported domestic abuse crimes in the year leading up to June 2016, the case had been closed because the victim did not support further action.²⁷ HMIC expresses concern that some forces seem to be finalising investigations into domestic abuse at an early stage under the category of the victim not wanting to support further action:

*"HMIC has significant concerns that too often officers are electing to use this outcome to justify an investigation being completed, rather than engaging well with victims or pursuing cases on their behalf, even though the victim may be reluctant to proceed (often for complex reasons such as their own vulnerability or due to intimidation)."*²⁸

Data from the Annual Survey and from the HMIC report raise important questions about the barriers that are preventing women from

25 Her Majesty's Inspectorate of Constabulary (HMIC), *PEEL: Police effectiveness 2016 A national overview* (Published online: HMIC, 2017)

26 *ibid.*, p. 19

27 *ibid.*, p. 84

28 *ibid.*, p. 14

reporting abuse and supporting criminal proceedings. We know that survivors often do not report domestic abuse to the police (perhaps because of fear of backlash from the perpetrator or fear they will not be taken seriously) and, when there is police involvement, survivors may not engage with criminal proceedings (again, often because of fear).²⁹ For some migrant women there may be additional fears around their immigration status having an impact on the support they can receive from the police.³⁰ The data also reinforce the importance of having support services available independent of criminal justice agencies because criminal justice agencies may not feature greatly in many survivors' experiences.

In community-based services in the Week to Count referrals most commonly came from statutory agencies (32.7%). There are, however, a large amount of missing data about sources of referral to community-based services, therefore the results for this question should be treated with caution (there are at least 30.9% 'missing data'³¹). A breakdown of the results can be found in **Table 2.3**.

Sources of referral

The most popular category of referrals to refuge services on the Day to Count was referrals from statutory organisations (32.6%), such as the police, social care, health services and educational services. The next highest numbers were for referrals from another violence against women organisation (28.5%) and self-referrals (25.3%).

29 All-Party Parliamentary Group on Domestic and Sexual Violence, *Women's access to justice: from reporting to sentencing* (Published online: Women's Aid, 2014) See Chapter 2, point 20

30 Thiara, R.K. and Roy, S., *Vital Statistics 2 Key Findings Report on Black, Asian, Minority Ethnic & Refugee women & children facing violence & abuse* (London: Imkaan, 2012), p. 16

31 More than one category may have been selected for each woman, therefore the number of missing data category may be greater than this figure.

Table 2.3

Source of referrals to domestic abuse services on the Day to Count and in the Week to Count, October 2016

NB More than one category may have been selected for each woman

Source of referral	Percentage of total number of women using REFUGE SERVICES (2,017 women)	Percentage of total number of women using COMMUNITY-BASED SERVICES (11,568 women)
Self-Referral	25.3%	14.9%
Friends / Family	0.7%	0.9%
Another violence against women service or organisation	28.5%	10.0%
Statutory agencies, including police, health, social care, education	32.6%	32.7%
Faith Organisation	0.3%	0.0%
Counselling	0.1%	0.3%
Drugs / Alcohol	0.5%	1.2%
Parenting Support	0.4%	0.5%
Solicitor	0.5%	0.3%
Specialist Children/Young People's Support	0.8%	0.4%
Other Referral sources included in comments: internal referrals, women's services/ organisations, health providers, hostel, family justice, generic victim support and relationship support services, advice services and sexual assault services	8.1%	7.8%
Missing responses for women (at least - as more than one category could be allocated to an individual referral, the missing data percentage could be higher and we are unable to calculate it exactly)	1.8%	30.9%



Conclusion

Once again, the findings of our Annual Survey of domestic abuse services describe over-stretched services, often struggling to meet the demand for the specialist support they offer, in terms of the number of survivors and children referred to them and the support and access needs they present.

The Annual Survey found that over the course of a year, both refuges and community-based domestic abuse services supported thousands of women and children. 91 responding community-based services alone accepted 61,491 referrals in 2015-16. These survivors present with a range of needs; addressing these needs is central to assisting a survivor's recovery, safety and independence. Community-based service users most commonly had needs relating to health, justice, housing and children. Housing, finance, health-related needs and needs relating to children were particularly prevalent among survivors in refuge.

As well as highlighting the needs of those using domestic abuse services, the Annual Survey findings also raise questions about who is not accessing these services but might be in need of safety and support. In the preceding financial year, nearly a quarter of all referrals received by refuge services were declined because of lack of space or capacity to support survivors. More potential referrals will not have been made because services were already known to be full and, in addition, some survivors will not disclose abuse or seek support. Responding services

also talked about the challenges in meeting the, sometimes high-level, support needs of survivors and the difficulties involved in supporting survivors with no recourse to public funds, or whose eligibility for state benefits is unclear. It is also concerning that there are very low numbers of older women accessing domestic abuse services, as we know that domestic abuse is likely to be just as significant an issue for older women as it is for younger women.

There are clearly issues around fairness of access not only to support services, but also to criminal justice: only a third of the community-based services sample and about half of the refuge sample had had the domestic abuse reported to the police, and even lower proportions had seen a criminal case or criminal sanctions against the perpetrator (about one in six survivors in community-based services and about one in five survivors in refuge services).

Almost three quarters of refuge residents and just under half of community-based service users during the Day and Week to Count reported experiencing/having experienced coercive control (a range of abusive behaviours that aim to cause fear and restrict personal freedom). Although the actual proportions may be higher as some survivors may not have identified the abuse they experienced as coercive control.

We know that exposure to domestic abuse causes significant harm to children and responsibility for this harm lies with the perpetrator of abuse. The Survey's findings

emphasise the important role specialist abuse services play in supporting mothers and their young families: almost two thirds of women in refuge on the Day to Count had children with them and about half of the women using community-based services in the Week to Count had children.

Many survey respondents talked about the challenges of securing funding for their services and insecurity over continuing funding. Just over a third of respondents were running an area of their service without any dedicated funding in 2015/16.

This is a time of fragmented funding for the domestic abuse sector, with funding often coming from a variety of sources. It is also a time of the dominance of competitive tendering as the model for local authority funding. This funding landscape means that resources are being diverted from supporting survivors and their families into the frequent bidding for future funds and reporting to various current funders. It also leads to considerable uncertainty, and this insecurity stalls plans to develop services and, for many, even calls into question whether they will still be in existence by the time of next year's Annual Survey.



Appendix A: Methodology

We sent a link to an online survey to all the domestic abuse services in England. At the time there were 373 services in England on the domestic abuse services database UK Refuges Online (UKROL), but we discovered four of these had just closed, giving a final number of 369. 277 of these services included refuge support in their provision.

As well as an online survey, we also gave services the option to fill in the form via an electronic document and email or post it to us; we then manually entered the answers online. We made a telephone call to all services to remind them to fill in the survey and to ask if they had any queries about it, and finally we also sent reminder emails.

We received 179 responses (See Appendix B for details about respondents). We asked for responses from each individual service listed on UKROL. However, sometimes when a large organisation ran several services they just sent one overarching response and, in seven cases, services sent two entries for different parts of the same service. We have adjusted our calculation for the response rate to take these discrepancies into account, giving an overall response rate of 53.3%.¹ The response rate varied throughout the survey (some parts were not relevant to some services and some services skipped some relevant questions).

The survey was in the form of a semi-structured questionnaire and asked questions about three main time periods:

- ▶ The previous financial year (1st April 2015 – 31st March 2016), how services are funded.
- ▶ The Day to Count: a census day for refuge services, Thursday 13th October 2016.
- ▶ The Week to Count: a census week for community-based services, Monday 10th October to Friday 14th October 2016 inclusive.

The data we received were analysed using SurveyMonkey and Excel. Any free text answers were categorised according to identified common themes.

We were unable to verify the information given or control for any inputting errors by service respondents.

¹ Calculation for response rate: $(179/336) \times 100$



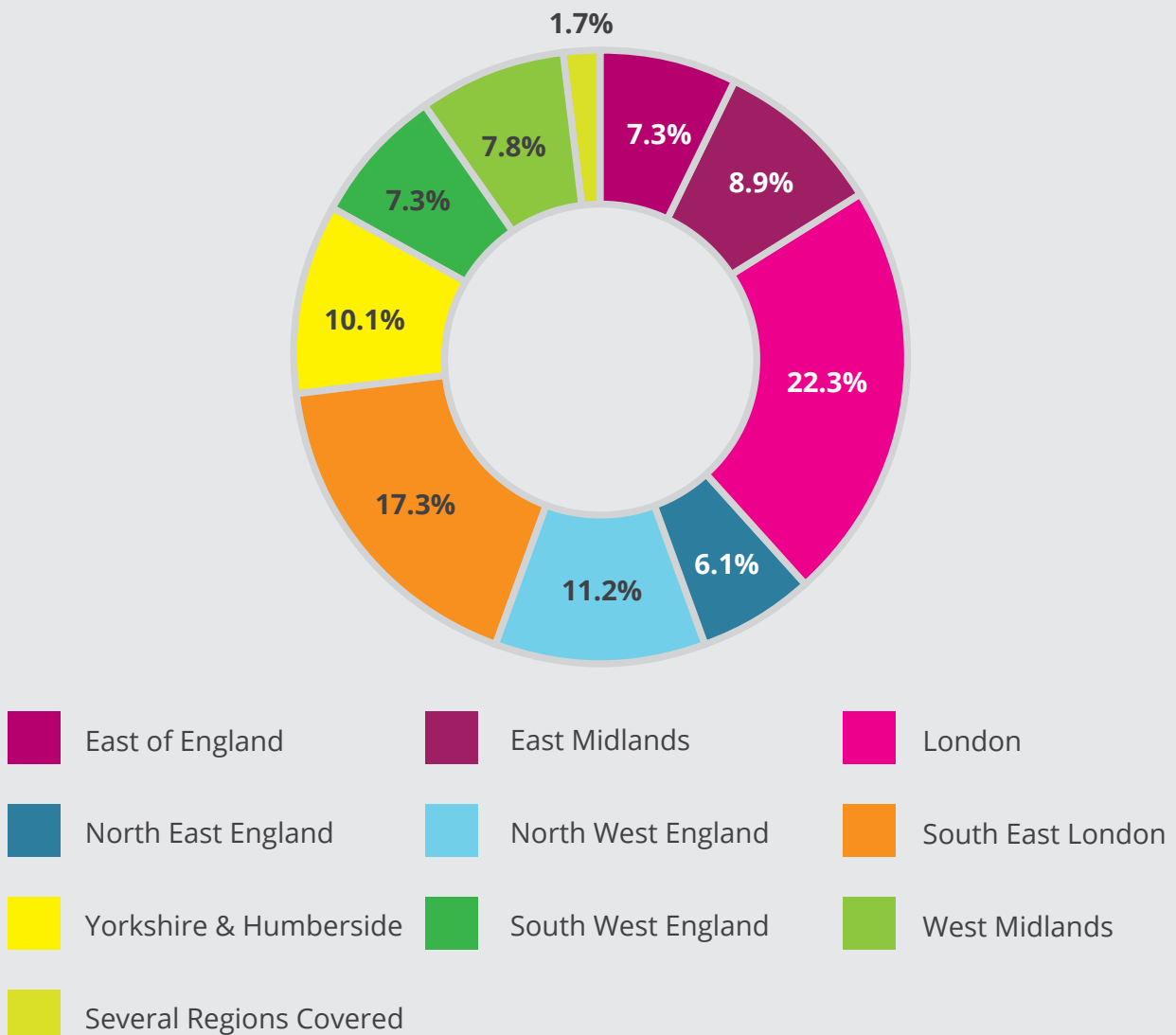
Appendix B: The Respondents

We received 179 responses from services based in all regions of England (see Figure B.1 for details). 50.3% of respondents were part of a larger organisation (49.7% were not).

Of these 179 responses, 145 said they ran refuge support in 2015/16 and 114

said they ran community-based support in 2015/16. Three services skipped the question on community support in 2015/16. Eight of the responding services were specialist Black and Minority Ethnic (BME) services.

Figure B.1 Where responding services were based (regions)



*Meeting the needs of women and children
Findings of the Women's Aid Annual Survey 2016*

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© Women's Aid 2017
ISBN 978-0-907817-28-4