

NOWHERE TO TURN

2019

Findings from the third year of the
No Woman Turned Away project



women's aid 
until women & children are safe

Report authors

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Acknowledgments

We are extremely grateful to the Ministry of Housing, Communities and Local Government (MHCLG) for continuing to fund the No Woman Turned Away (NWTa) project. This funding has provided additional support for women who have faced barriers to accessing a refuge, and detailed monitoring of the journeys of survivors seeking safety from domestic abuse.

We would also like to extend our deepest gratitude to the survivors who provided input for this report. We are especially grateful to those survivors who provided artwork for this publication, as well as valuable interview data which shed light on the nuances of survivors' experiences of searching for a refuge. Thank you also to the survivor who provided input into the analysis of artwork for this report. Many thanks to our members Humraaz, Next Link and Rise for supporting this research.

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Many thanks to Kate D'Arcy and Sarika Seshadri, Heads of Research and Evaluation at Women's Aid, Susie Marwood, Senior Digital Media and Publications Officer, as well as the wider team for their support.

Dedication

This report is dedicated to the survivors whose experiences of seeking safety from domestic abuse are documented here.

All names and identifying features used in the report have been changed to protect survivors' anonymity.

Women's Aid is the national charity working to end domestic abuse against women and children. Over the past 45 years, Women's Aid has been at the forefront of shaping and coordinating responses to domestic violence and 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.

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

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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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309 women were supported by the **No Woman Turned Away** project this year

Where did they sleep while waiting for a refuge space?



What happened while waiting for a refuge space?

59 experienced **further abuse** from the perpetrator

21 were **physically assaulted**

20 women **called the police** out to respond to an incident

17 survivors created artwork and took part in interviews for this report

"You feel like you've got nowhere to turn."

"They kept me going. Little bits by little bits they kept reinstalling that hope. And the more hope I had, the more courage I had."

What happened to the 309 women?



22% secured a place in a refuge




11% found emergency accommodation



17% stayed with friends and family



9% stayed put (not living with the perpetrator)



10% remained living with or returned to the perpetrator

The No Woman Turned Away project

The No Woman Turned Away (NWTa) project has been funded by the Ministry of Housing, Communities and Local Government (MHCLG) since January 2016. It provides dedicated support to women who face barriers in accessing a refuge space. A team of specialist domestic abuse practitioners¹ receive referrals from the National Domestic Violence Helpline (NDVH)², and we are continuing to conduct detailed monitoring and analysis of survivors' experiences alongside this. This year's report analyses survivors' journeys based on three types of data sources:

- ▶ quantitative data collected by the NWTa specialist practitioners between the 12th January 2018 and the 11th January 2019 using Women's Aid's data collection software On Track³;
- ▶ qualitative interviews with 17 survivors of domestic abuse, 16 of whom faced barriers in accessing a refuge space; and
- ▶ artwork (drawings, photographs, poems and collages) created by these survivors, which documents their search for a refuge space.

Our two previous reports *Nowhere to Turn* (Women's Aid, 2017) and *Nowhere to Turn, 2018* (Women's Aid, 2018a) focused largely on quantitative data (with some qualitative analysis), and documented statistical information on the struggles of women who face barriers to accessing a refuge space. This report adds to these findings by using interview data and artwork created by survivors to illustrate the lived impact that unequal access to refuges and support services has on these women.

Given the scarcity of resources in the current economic climate, it is important to obtain a detailed understanding of what types of support are most significant to survivors. To achieve this, survivors of domestic abuse were consulted throughout this year's research. This included a survivor survey which offered input into the methodological process, as well as the contribution of a survivor into the analysis of the artwork.

“Little bits
by little bits,
they kept
reinstalling
that hope.
And the more
hope I had,
the more
courage I
had.”

Gita

¹ In previous NWTa report we referred to specialist practitioners as 'caseworkers'. We have changed this to reflect their job title.

² Run in partnership between Women's Aid Federation of England and Refuge.

³ On Track is the Women's Aid case management and outcomes monitoring system.

live with my scars, ride, tame the
ghosts in my head that run wild
and wish me death. should you
share my ash to the wind
I'd hope you'd all of my
sure



“Maybe someone will see my picture and feel the same thing... it’s a type of connection.”

Faiza

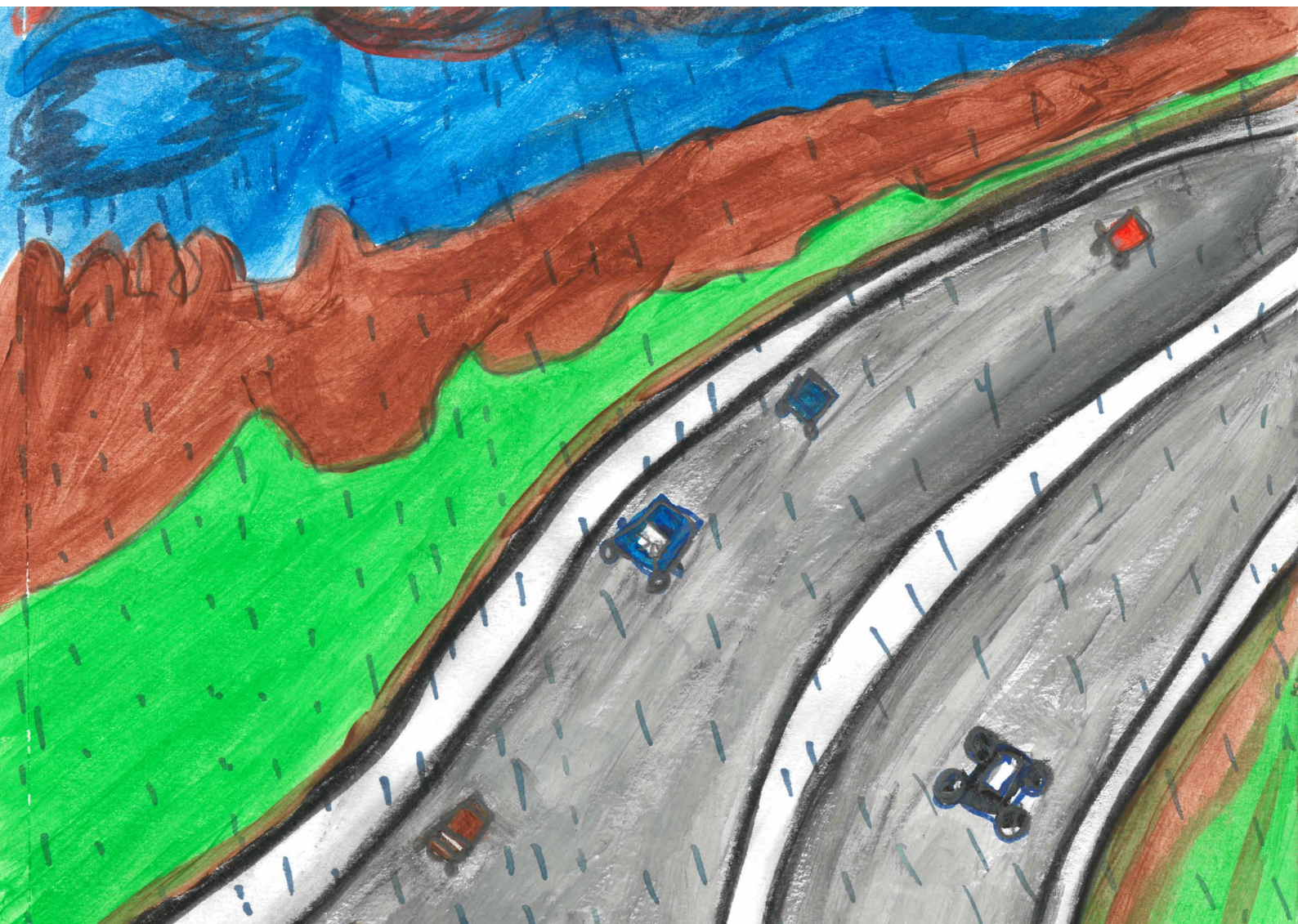
Image by Aisha, who was driving from her abusive husband’s house to her sister’s house, where she stayed while waiting for a refuge place.



to communicate and how they want to express it, without restriction. In addition, used in conjunction with statistical data and interviews, survivors’ artwork can make visible a dimension of experience that may otherwise have remained hidden, and can add valuable knowledge to our understanding of survivors’ experiences. We are hoping that the artwork that we have used to illustrate this report will allow the reader to see survivors’ journeys in new ways.

Participants were eager for their artwork to have impact and bring about a change in the system. In addition, many participants spoke about the therapeutic benefits of creating artwork, and how it helped them to process their often long and painful journeys⁴.

Throughout the report all participants’ names have been changed in order to protect their identity, and artwork and interview data has been anonymised where necessary. In some instances, where experiences bore similarities, we have printed one woman’s artwork alongside another woman’s interview data. All participants were given the opportunity to review the report before its publication.





Part 1:

Experiences of seeking refuge

1.1 Challenges in securing support

As detailed in the previous two No Woman Turned Away (NWTa) reports, *Nowhere to Turn* and *Nowhere to Turn, 2018*, women supported by the specialist practitioners have a range of needs that may act as barriers to accessing safety⁵. **Table 1** outlines the circumstances and support needs of women supported by the NWTa specialist practitioners this year. Although there are some slight deviations, the proportion of women with each support need remains largely consistent with previous findings. The five most common challenges for women seeking a refuge space continued to be: ties to their local area; mental health support needs; disabilities; having no recourse to public funds (NRPF)⁶; and supporting four

“You feel like you’ve got nowhere to turn.”

Gita

Table 1: Support needs and circumstances of women supported by the NWTa specialist practitioners.*

	Number of women	% out of total number of women
Women who were tied to their local area	127	41.1%
Women with mental health support needs	117	37.9%
Women who had one or more disability	76	24.6%
Women who had no recourse to public funds (NRPF)	60	19.4%
Women with 4+ children	48	15.5%
Women with older male children	23	7.4%
Women with substance use support needs - drugs	20	6.5%
Women with same language support needs	18	5.8%
Women with substance use support needs - alcohol	17	5.5%
Women previously evicted from refuge	12	3.9%
Women with an offending history	8	2.6%

* Many women had more than one of the listed support needs or circumstances.

⁴ This is explored further in a forthcoming issue of *Safe* (Austin, J., 2019).

⁵ Please see previous reports for a detailed explanation of the barriers women face when accessing refuge (Women’s Aid, 2017 and Women’s Aid, 2018a).

⁶ More information on NRPF is available at: www.gov.uk/government/publications/public-funds--2/public-funds

or more children. Many women had more than one support need. Like last year, almost half of the women supported by the NWTa project were from Black and Minority Ethnic (BME) backgrounds (127 out of 309; 41.10%), reflecting the barriers that women from BME backgrounds continue to face when trying to access places of safety.

Data collected via loosely-structured interviews revealed that the listed support needs commonly acted as barriers largely due to insufficient availability of specialist support. Several women spoke of the impact that this had on their sense of self-worth. Gita, a young woman who had suffered domestic abuse from several perpetrators, and who had mental health and drug support needs, noted the following:

"I was being really honest with them and I was saying about my mental health and stuff and that I've just OD'ed and a lot of them wasn't too fond of me going there. Because I said that I was a recovering addict ... You feel like you've got nowhere to turn, literally, like no-one's going to help you. It made me really more depressed ... I really felt let down ... I just felt like the whole system didn't really care."

That moment when you
are lying in bed and
don't know you are crying
until you realise your
pillow is wet.....



► Image by Aisha, who stayed with her sister while waiting for a refuge space.

This feeling of systemic failure was echoed in particular by those women who had NRPF. While women on spousal visas can currently apply for the destitute domestic violence (DDV) concession⁷ to access financial support, many others (for example those with other kinds of visas, asylum seekers and those with an insecure immigration status) are left with little opportunity to receive support. Emira, a migrant woman who was fleeing her abusive husband with her young daughter whilst on a tourist visa, spoke about the impact this had on her wellbeing:

“When I found out after my court hearing that they can’t do anything for my immigration status, that I couldn’t get benefits on my [tourist] visa ... I can’t work, then I was thinking how am I going to survive, how am I going to care for my daughter? I was so worried for that.”

Another participant, Alya, who had been denied recourse to public funds, spoke about how she felt that her inability to apply for housing benefit, work or study meant that she was at risk of returning to her violent husband, who had successfully obtained citizenship of a European country and who had invited Alya to come to the UK as a family member of an EU citizen:

“I have no benefit, nothing, and I cannot apply for indefinite leave ... My only chance is to go back to him. Because if I go back to him in two or three months I can get my indefinite leave. Because if you have been here five years, you can apply for indefinite leave ... but I cannot go back ... If before this decision I had known that I would be stuck, I would have never taken this decision. I will stay even with what happened. I will stay there with my husband. I was thinking that everything will be solved because I am domestic violence. But that’s not true.”

Taking the risk of returning to an abusive husband must be understood in the context that women who have lived in the UK for several years commonly no longer have access to any financial or social capital⁸ in their country of origin. They are integrated into local communities and in some cases their children only speak English. For some women returning to their country of origin would bring with it a very real threat to their life. As one participant, Mumtaz, a young woman whose parents had died, put it:

“If there was any hope of surviving then it was here in the UK, not in [my country of birth].”

⁷ Information about the DDV concession is available on the government website (Home Office, 2018).

⁸ Social capital includes, for example, shared norms and values, and mutually beneficial interpersonal relationships.

Aisha, a young woman who had come to the UK for an arranged marriage, noted that in addition to frequently having an insecure immigration status, when women come to the UK from other countries they "don't know the rules". She suggested that those who have recently arrived in the UK should be introduced to domestic violence laws and the availability of services on their first GP visit. In a poem she wrote in Urdu (see below), Aisha spoke about how she initially had high hopes for her marriage, but her lack of knowledge about domestic violence and the help available within the UK system almost cost her her life.

►
Poem by Aisha,
who felt trapped
by not knowing
about domestic
violence laws and
means of support.

آنکھوں میں بے بائے کچھ خواب تھے۔
Eyes full of Dreams.

دل نے جگانے کیونے ارمان تھے۔
Heart had woken up new wishes.

باغوں نے گلے کیونے ملا اب تھے۔
Garden's bloomed some Roses.

امیدوں کے بھونے کچھ جاں تھے۔
Web of expectation was knitted.

ٹوٹ کر بکھر جائیں گے لیا پتہ تھا۔
Did not know they will be shattered in pieces.

ایسے ہی کچھ ایسے ہی سوئے سوال تھے۔
Had some confusing questions.

یوں زندگی کی آزمائشوں کو پورا کرتے کرتے.....
While completing tests of life.....

نہم اپنے ہی ہاتھوں سے اپنی جان لینے چلے تھے۔
I almost took my own life with own my hands.

1.2 Where did women stay while they waited for a refuge space?

As noted in last year's report *Nowhere to Turn, 2018*, many women relied on the support of friends, family and even strangers while waiting for a refuge space. **Table 2** shows the number of women who sofa-surfed, stayed in emergency accommodation, in hotels, or slept rough while searching for a refuge space. The interviews conducted for this report highlight the difficulties survivors face whilst staying in non-refuge accommodation.

“I don't know what I would have done if I hadn't known the people that I did.”

Emma

Table 2: Where did women stay while waiting for a refuge space?*

	Number of women	% out of total number of women
Spent time sofa-surfing	136	44.0%
Spent time in emergency accommodation (same local authority)	29	9.4%
Spent time sleeping rough (including using 24h spaces to sleep, or living in her car)	22	7.1%
Spent time in emergency accommodation (different local authority)	13	4.2%
Paid to stay in a hostel/B&B/hotel	12	3.9%

* Some women stayed in more than one type of temporary accommodation. These were the only recorded options. It was not always known where women were staying.

Experiences of sofa-surfing

44.0% of the women supported by the NWTa project sofa-surfed during their search for a refuge space. Many spoke about the gratitude they felt towards the people who let them stay in their home. Moira, for example, noted:

“My friend was very helpful and very supportive at the time, initially, and that made a big, big difference. She was my rock ... And my mum and my dad, they've been absolutely amazing.”

“The most difficult thing was staying with the family friend.”

Zainab

However, whilst deeply grateful for the help that they received, most of the women we spoke to told us about the safety risks

► **Image by Aisha, who, as mentioned earlier in this report, was staying with her sister after leaving her abusive husband.**



that they experienced in these situations, the strain that sofa-surfing put on their relationships, and the effects that this arrangement had on their ability to process their experiences. Moira noted that when you are staying with another person “you try to make an effort,” and that she was “on edge, all the time” when she was staying with her friend. Similarly, another participant, Emma, who was staying with her sister after fleeing her abusive partner, noted the following:

“Being on the floor between my nieces, I couldn’t ... feel any of the emotions because it really upset my sister, so for two months I was trying to hold it all in.”

Several participants spoke about how they felt that they had overstayed their welcome, but that they had nowhere else to go. Emira, who, together with her young daughter, was sleeping on the floor of her friend’s son’s bedroom, noted how sometimes her friend’s son would wake up at night and scream, “No, no, no, they can’t live in my room, they can’t stay here”. Another participant, Rowan, told us that her ex-partner was threatening her sister’s family and that therefore her brother-in-law “just wanted [her] out of there”. However, she “had nowhere to go”. Rowan ended up staying with parents from her son’s school who she barely knew:

“It was like we’ve just been at the school a couple of months and I was having to confide in them. And they would like offer that I could sleep on their sofa... I stayed on people’s sofas that I didn’t know very well.”

Rowan spoke about how she felt unable to deepen her friendship with these women once she had been housed and required more long-term support, because she felt a sense a shame and debt towards them.

Another participant, Nidhi, who was fleeing her abusive husband with her teenage daughter, had to rely on the help of a complete stranger to find a bed for the night:

“I’ve got nobody. I’ve got no relatives, nothing, and I was scared about what his family would do. And we just sat at a bus stop, it was like a gift from God. We were sat at the bus stop and this woman that we don’t know, we’ve never met, just came past, saw our suitcase and asked, ‘Are you going somewhere?’ and I said, ‘No’. She said, ‘Do you want chips, do you want coke?’ and I said, ‘No’ ... I said, ‘We just need somewhere to stay for tonight.’ So this lady took us home.”

Some women experienced further abuse whilst sofa-surfing. Moira, for example, spoke about staying with her friend and her three children. Initially her friend was very supportive, but the cramped conditions and the uneven balance of power led to further abuse:

“She started to get controlling as well and she got funny when ... she didn’t like it when ‘aw who’s that messaging you again’ she’d get really, really funny ... one abusive relationship to another ... I was waiting for this [over £100] cheque to come through ... I think she took it. She couldn’t cash it, but she didn’t like the fact that I was getting this cheque, which would have helped me out a lot. Basically if I didn’t have the cheque, it was stopping me from doing what I wanted to do ... She wanted me to stay in the house all the time, give her a lift here, there, everywhere ... I felt like I was constantly making cups of tea ... It really got bizarre. Couldn’t believe it ... It feels like sometimes I jumped from the pan into the fire.”

Moira’s experiences culminated with her and her friend breaking up their lifelong friendship.



▲
Image by Aisha, who was abused over the telephone by her sister-in-law while she was staying with her sister.

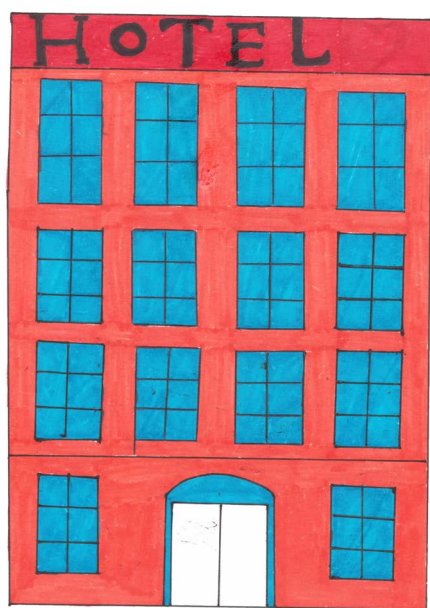
Another participant, Gita, spoke about the violence she experienced from her partner and her partner's father after she left her flat, where she experienced severe violence from her brothers:

"I had two sets of abusers, one was family and I tried to seek refuge with my ex, but the moment he realised that I needed him ... With him it wasn't really physical until I couldn't go home ... his dad broke my rib."

These experiences illustrate that while those who can turn to friends, family or strangers may be considered lucky in some ways, the strain put on relationships, overcrowding, and the potential for further abuse, mean that sofa-surfing is rarely an acceptable outcome for those fleeing domestic abuse.

Staying in hotels and B&Bs

Table 2 (page 13) shows that not all of those fleeing domestic abuse are able to rely on the support of others for accommodation. Twelve women (3.9%) paid to stay in hostels, hotels or B&Bs while they waited for a refuge place. Interviews revealed that some of the most vulnerable in our society often have limited social capital, for example those who have only recently settled in the UK. Staying in a hotel for extended periods of time brings with it a number of complications, including a lack of access to cooking facilities, which, when combined with limited funds, can cause severe difficulties in accessing adequate food supplies.



The image of the hotel was drawn by Safa.

Safa, a young mother with no recourse to public funds, stayed in a hotel for three months whilst waiting for a refuge space. The lack of money and cooking facilities meant she struggled to feed herself and her two young children. In addition, she rarely felt able to leave the building because the hotel in which they stayed was in the vicinity of her abusive husband's house. Due to the stress of being hungry and without a home, her children became disruptive, which in turn meant that hotel staff complained about them. As a consequence, Safa felt unable to leave her room with her children, which further limited her freedom of movement.

Our research revealed that staying in hotels whilst pregnant brought with it additional challenges, such as having inadequate access to bathroom facilities during periods of morning sickness. Sexually inappropriate behaviour by male hotel staff was also identified as a cause for concern and made women feel unsafe at this vulnerable time.

Rough sleeping

Table 2 (page 13) shows that 22 (7.1%) of the women supported by the NWTa specialist practitioners slept rough while waiting for a refuge space; this includes sleeping in their car or in 24-hour homeless shelters. This equates to one in 14. While this is slightly lower than in last year's report (11.7%), it remains unacceptable. Five of the women who slept rough had their children with them and one woman was pregnant.

Interviews revealed some of the devastating impacts that the threat of rough sleeping had on the wellbeing of women seeking refuge. Nidhi and her teenage daughter had no money or social contacts, and eventually sofa-surfed with a stranger. She spoke about the dangers of street homelessness:

"We were sitting on a park bench and we're crying... [The police officer] rang us and said, 'Have you got a house?' I said, 'We're sitting in a park. If we're alive when you find us take us, if we're dead just take our bodies because it's raining and we're just sitting in the park. We don't have anywhere to go.'"

Staying in emergency accommodation

Of the women supported by the NWTa project, 13.6% were able to access emergency accommodation while waiting for a refuge space, usually in the form of emergency shelters. In our interviews some women spoke about how they felt that homeless shelters were inadequate for women who had just fled domestic abuse. Abby, for instance, a young woman who in the past had struggled with a drug addiction, spoke about her experiences of staying in a homeless shelter for people with drug support needs:

"I specifically asked could I be put in a women's only hostel. But right next door there was a male only hostel ... And also my first night in the hostel I had to ring an ambulance because someone OD'ed on heroin and then I didn't sleep for the whole time that I was at the hostel, so that was nearly five days. So four nights I had zero sleep. I had psychosis and this is not good for anyone, but my brain... I couldn't use the toilet in the hostel, it was disgusting and it smelt like crack. It was not nice ... that was more harmful for me than good ... I was put in a situation where really that could have tipped me over the edge."



"We don't
have
anywhere
to go."

Nidhi



▲
**The images above
were provided by our
participant Rowan, who
throughout her journey
was aware of the risk of
rough sleeping.**

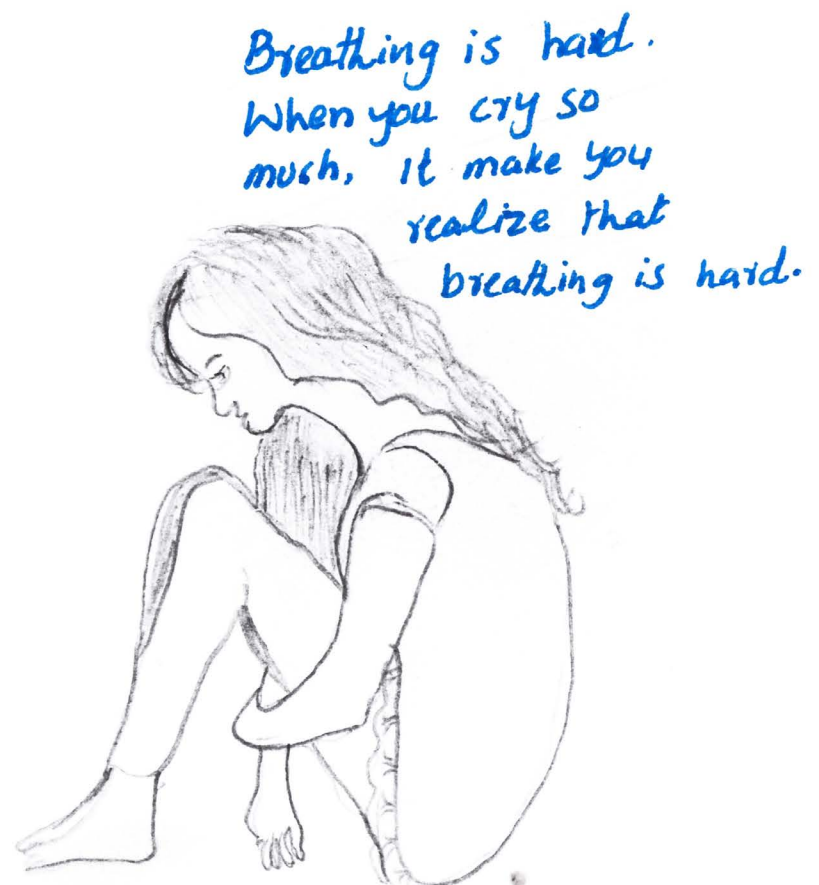


▲ Zainab's image of the hostel in which she was staying.

Zainab, a young Muslim woman, had been asked to leave by the family friends she had been staying with for several weeks. She spoke about her experiences of being placed in a mixed-gender homeless hostel:

"Because the hostel was a mixed place I never stepped outside of my room, I stayed in my room for three days. Not eating, just tea, three days not eating. I felt like a prisoner in jail. I felt like I was going to go mad. No mobile phone network, no wi-fi, nothing. Really hard. I spent all three days just crying."

Abby and Zainab's experiences emphasise the significance of women-only safe spaces, and that offering women a roof above their heads is not sufficient to cater for the needs of those fleeing domestic abuse.



► The drawing and hand-written statement here were provided by our participant Faiza, who received treatment in hospital for two days while waiting for a refuge space and during that time did not have any visitors.

Transient living

While each type of temporary sleeping arrangement (or the lack thereof) comes with its own set of difficulties, many women face the added stress of moving between multiple houses while waiting for a refuge space. Gita, for instance, spoke about staying with five different friends so as not to burden each one for too long. She also stayed with her ex-partner for one night, where she was further abused.

Survivors spoke about making do with very few personal belongings, if any. Aisha, for example, spoke about how she “had nothing, just two suitcases”. Others, like Mumtaz, had left their abusers “with just the clothes on [her] body”, and were not even always wearing shoes.

For many survivors of domestic abuse, the absence of a safe and consistent home means that the threat of rough sleeping is always present. Rowan, for example, “felt homeless” throughout the whole time that she and her young son waited for a refuge place. She described the impact that this had on her:

| “I haven’t breathed out yet. I’m still surfing this anxiety.”

Even though Rowan and her son never had to sleep rough, she included rough sleepers in her artwork to represent the ever-present threat (see page 21). She also spoke about how this image was “a mess” for a reason:

| “My picture is a mess on purpose ... because that’s what my head and my life is like and has been for a long time.”

Many participants spoke about how the feeling of transience was exacerbated by the number of phone calls they had to make in their search for a safe space to stay. Zainab, for example, provided the painting and quote on the next page.

Zainab also spoke about the distress she felt, because “every time [she’d] have to repeat [her] story.” Similarly, Samira, a young mother of one with ties to her local area, noted:

| “The difficult thing is that you keep repeating your own story ... when someone asks me what happened I cry.”

“I was holding my breath. I don’t think I breathed out that whole time.”

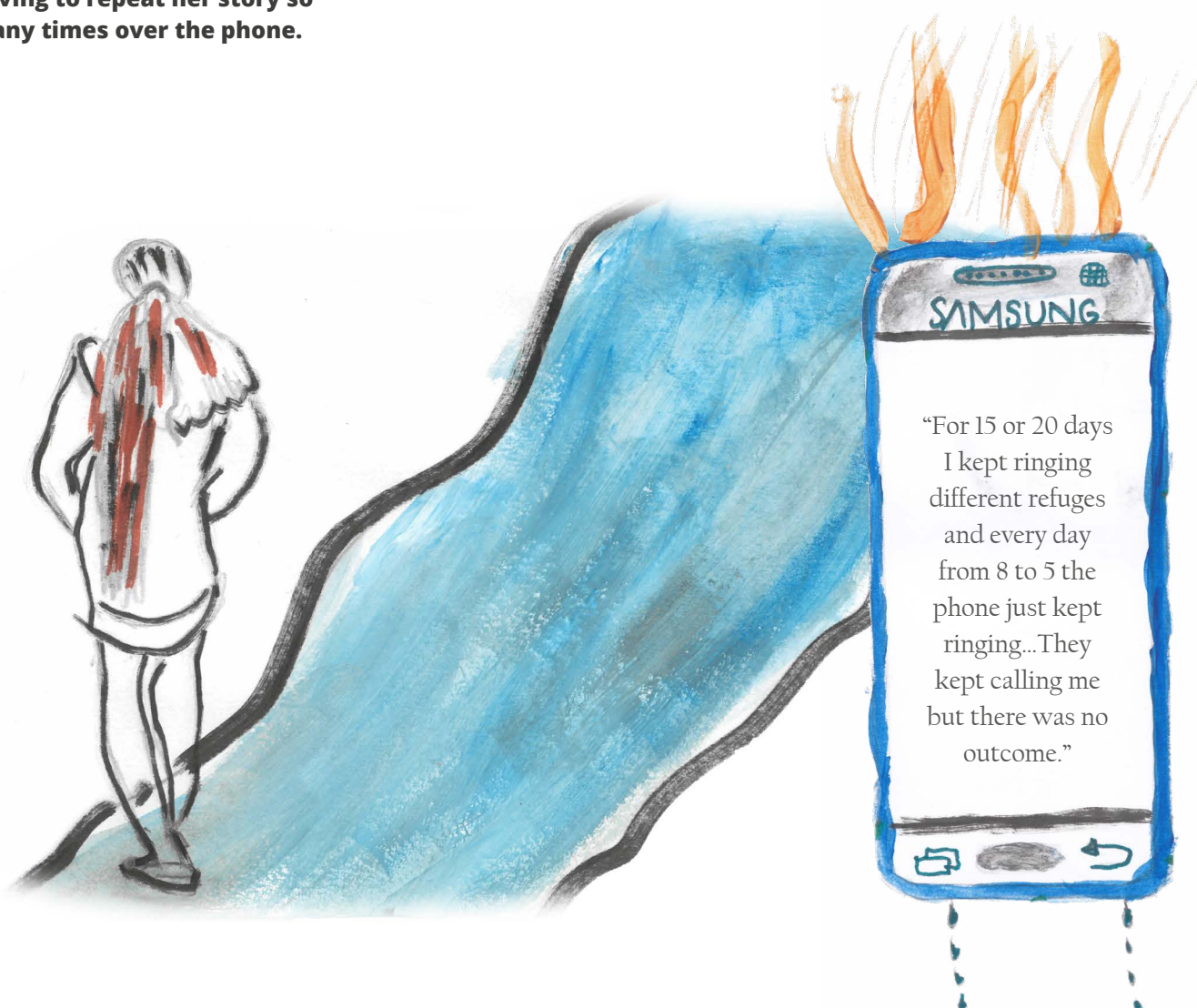
Rowan

One participant, Gita, told us of the effect that making a vast number of phone calls had on her:

"I didn't even know which refuge had accepted me. I had been doing all these phone calls and with this one I had answered a lot of questions and I felt like I had progressed more so I was starting to feel quite confident and then they said, 'You can come here,' and I was like, 'Yay!' and then I was like, 'Where am I coming to?'"

For professionals supporting survivors of domestic abuse, it is important to remember that survivors are often dealing with multiple professionals – and an array of practical and emotional difficulties – when trying to arrange support.

Image and words by Zainab, who spoke of her distress at having to repeat her story so many times over the phone.





▲ Image by Rowan, who said, "My picture is a mess on purpose ... because that's what my head and my life is like and has been for a long time."

“It’s really, really difficult. I had to suffer, really to suffer, until the day that I left [for the refuge] came. It was a really long, long [12 days].”

Alya

1.3 What happened to women while they waited for a refuge space?

Almost a fifth of the survivors supported by the NWTa project experienced further abuse at the hands of the original perpetrator, as shown in **Table 3**. For some women this resulted in physical injuries, and some called the police out to an incident while they were waiting for a refuge space. Almost a fifth of women told their NWTa specialist practitioner that they were scared to go outside while waiting for a refuge space, due to the threat of further harm from the perpetrator.

Table 3: Survivors’ experiences while waiting for a refuge space.*

	Number of women	% out of total number of women
Experienced further abuse from the perpetrator	59	19.1%
Was scared to go outside	54	17.5%
Was physically injured as a result of an assault by the perpetrator	21	6.8%
Called the police out to respond to an incident	20	6.5%
Spent time as an inpatient/overnight in hospital	11	3.6%
Spent time in police custody	2	0.6%
Spent time under section	2	0.6%

* Survivors may have had more than one experience.

The proportion of those who experienced further abuse from the perpetrator while waiting for a refuge space is more than three times that of last year’s report (5.7%). Although the small sample size warrants caution, it may represent a worrying upwards trend.

Interviews revealed that often the abuse survivors experience while waiting for a refuge space is a result of the survivor returning to the perpetrator because they have no other option. Gita, who had experienced severe abuse from her brothers (and subsequently her partner), explained her decision in this way:

“I went back to my flat because I didn’t have anywhere ... as soon as I was back my brother drove past and spat at me.”

► **The artwork and words on the next page are by Emma, who created this image of herself in a cage to represent the financial and logistic difficulties of leaving an abusive relationship.**

*“And the flame inside me becomes a fire
Illuminating the bars you built to hold me.
I find my strength, my courage, my determination, my voice,
And I use these like a key.”*



Other participants, like Safa, spoke about encountering their abuser when staying in unsafe temporary accommodation, such as a hotel near to the abuser's home. Tabia, who had fled her family to avoid a forced marriage, was staying in a refuge which was located close to Tabia's family home. She experienced abuse from some of her family members, before moving to a refuge in a different local authority.

Financial difficulties and lack of access to food

The lack of accommodation options for many survivors was frequently tied to almost insurmountable financial difficulties. This was exacerbated by the fact that many women had experienced economic abuse prior to fleeing their abusers, leaving them with very little access to money of their own, if any.

For many women this meant that they struggled to meet their immediate needs. This included clothing and feeding themselves and their children, and paying for the phone bills



This image, drawn by Alya, captures the continuing sense of entitlement the perpetrator feels he has to control the survivor.

and transportation that were required to organise a place of safety.⁹ One participant, Emira, noted the following:

"I have no money at all, for my daughter, for her food, for her clothes, it's getting colder day by day. My daughter was wearing my friend's son's clothes, he was seven years old, my daughter was [a few years younger], they were too long for her and she was wearing them."

We also heard from Safa earlier in the report, who was struggling to feed herself and her two young children in the hotel she sought shelter in for three months. Not only did she feel unable to leave the hotel, she also went hungry on a daily basis:

"The money I got from social services was never enough ... I would get a portion of chips and the children would eat and I would stay hungry ... It was very expensive [in the hotel] and I couldn't go out to get food."

Eventually, as depicted by Safa to the right, one of her children's teachers organised for a pizza to be delivered to the hotel every day. This was paid for by the school.

A lack of access to religiously appropriate food increased the risk of going hungry. Mumtaz, a young Muslim woman, told us the following:

"The police took me to a hotel. The food there was not Halal. I had not had anything to eat at home for four days and then that night I also stayed hungry because there was nothing to eat. There was nothing Halal."

Mumtaz went on to stay for several weeks with an organisation which posed as a legitimate domestic violence support service and to which Mumtaz had been referred by the police. However, this organisation turned out to be illegitimate and abusive, and was later investigated by the police. Mumtaz was not able to access food there either:

"There was no duvets, no mattress, no nothing. It was so dirty, so dirty, I didn't know what to say. I just sat in the corner all night, thinking 'what's going to happen?' I was so hungry. It was seven days that I had not eaten. Even if someone had given me stones, I was that hungry that I would have eaten them, but there was nothing there. I went to the GP and they said, 'Your blood sugar levels are very different,' and I said, 'I've got nothing to eat.'"¹⁰

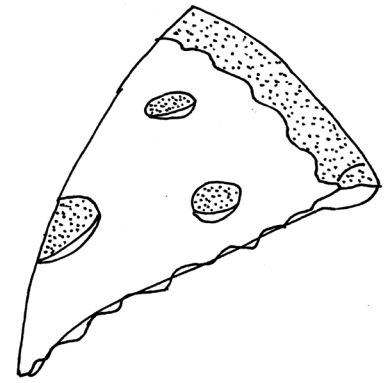


Image by Safa. One of her children's teachers organised for a pizza to be delivered to the hotel every day.

⁹ Our report *The Domestic Abuse Report 2019: The Economics of Abuse* (Women's Aid 2019b) shows that 36.8% of 57 surveyed survivors of domestic abuse did not have money to pay for essentials after leaving the perpetrator, 14% accessed a food bank, and 31.6% used credit to cover essential needs like food. Available at www.womensaid.org.uk/research-and-publications/the-domestic-abuse-report/

¹⁰ Mumtaz later received refuge-based support from a Women's Aid member organisation.

Our research revealed how without a home with cooking facilities and a fridge, even food banks provided insufficient nutrition, especially in the case of pregnant women. One participant, Rowan, spoke about the difficulty of getting hold of the food vouchers she was entitled to without having access to money:

“I remember trying to get that £100 food voucher when it’s the other side of town and you don’t have any money for the bus. It takes a whole day to organise that ... I had no money for the bus ... I couldn’t afford the phone calls.”

These concerning findings have led us to introduce the collection of additional quantitative data by the NWTAs specialist practitioners. This will help us to understand the prevalence of women and children supported by the NWTAs project who are going hungry after fleeing domestic abuse. Depending on the continuation of funding for the project, the results will likely be shared in future reports.

Image by Lasma, representing the desperate feeling of having nowhere to turn, and no access to money.



No money, no home.

Impact on survivors' wellbeing

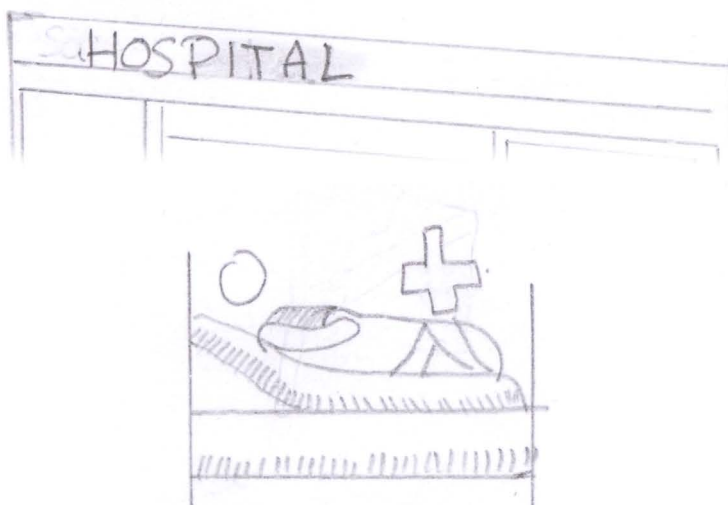
Some women were positive about their experiences of seeking a refuge place, and spoke about the kindness shown to them by professionals, friends, family and even strangers. Many also spoke about how their children gave them the strength to survive these experiences. However, unsurprisingly given our data, the majority of women spoke about the immense negative impact of their experiences on their own wellbeing and that of their children. This added to the trauma that they experienced following abuse. The time it took to find a refuge place - days, weeks, or months - and the inability of many to secure a place at all, created a situation which for some was simply unbearable. Both physical and mental health were affected, for example in the case of Nidhi and her teenage daughter:

"I was really unwell from not eating and being homeless, so [my daughter] said [to the domestic violence worker] we need help and if my mum doesn't get help, I can't live without my mum ... [My daughter] had complained of pain in her chest and I had swelling in my stomach. So I made a GP appointment and after the check-over my daughter was assessed as at risk [of taking her own life¹¹]. I hadn't rested for a week since becoming homeless and I had swelling on my stomach so two ambulances were called and we were both taken to hospital ... [My daughter] was that bad that she kept looking up where her mum was. The paramedic held her all the way because she was that bad."

"By the end of it I was just broken and there's just pieces of me ... I don't know whether my perpetrator was worse or this was worse ... I'd come from one thing and got dumped into another hellhole."

Mumtaz

¹¹ This detail was added by the refuge worker who acted as an interpreter.



I am not faking
being sick, I'm faking
being well

Drawing and words by Faiza, who received treatment in a hospital for two days whilst waiting for a refuge space.

Other participants spoke about how the barriers that they faced in accessing a safe refuge place compounded the trauma of their previous experiences, pushing them to the brink of suicide. Mumtaz, who, as stated earlier in this report, tried to receive support from an organisation which turned out to be illegitimate and abusive, stated:

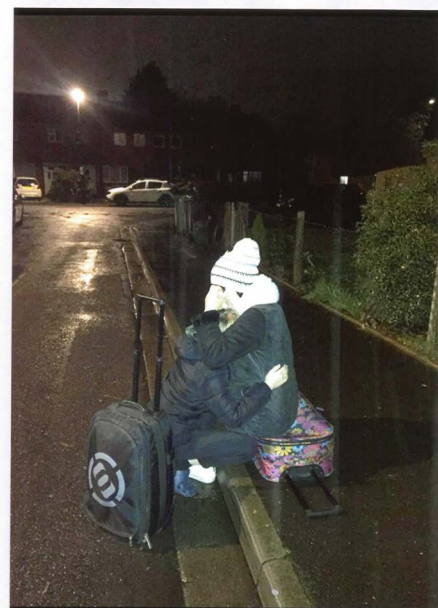
“I was that gone that I just stood in front of a truck. And it stopped in time and the driver shook me and said, ‘What are you doing?’ ... I just wanted my life to end, it was that bad.”

Interviews also highlighted how survivors’ journeys of seeking justice as well as a safe place to stay could cause stress to the point of physical symptoms such as nose bleeds. These symptoms could be so severe that they created a sense of a risk of stress-related death. The pain and despair that many women felt throughout their journeys is expressed poignantly in the two photographs below, taken by our participant Lasma.

**Images by Lasma,
capturing the pain and
distress many women felt
during their journeys.**



Emotional and physical pain.



Despair!

1.4 How many women were accommodated in a refuge?

While all the women supported by the NWTa project received specialist support, in many cases the barriers faced by women were insurmountable despite the hard work from the specialist practitioners. Of the women supported by the NWTa specialist practitioners, 22.3% were eventually accommodated in a suitable refuge space, a slight decrease from last year (25.5%)¹². For a further 11.0% the outcome at the time of case closure was that they were accommodated in emergency accommodation, and 1.6% of women were accommodated in a private rental home. Others were staying with friends and family when their case was closed by the NWTa specialist practitioner, or stayed put in a home that they did not share with the perpetrator, but where there was nonetheless risk of further harm. Twenty-two women were staying in a home that they shared with the perpetrator and eight women returned to the perpetrator. For one woman, the outcome at case closure was that she continued to sleep rough. Further details of the outcomes for the women supported by the NWTa specialist practitioners are given in **Table 4**.



▲
Image of a bird
drawn by our
participant Emira.

¹² In *Nowhere to Turn 2018* (Women's Aid 2018a) we reported that 51 out of 264 women were accommodated in a refuge.

Table 4: Outcome at the end of support from the NWTa specialist practitioner.

	Number of women	% out of total number of women
Accommodated in suitable refuge space	69	22.3%
Outcome unknown/Lost contact	36	11.7%
Stayed put – living with friends and family	35	11.3%
Stayed put – not living with perpetrator at time of referral	29	9.4%
Stayed put – living with perpetrator	22	7.1%
Emergency accommodation, different local authority (LA) (long-term)	16	5.2%
Staying with friends and family	16	5.2%
Emergency accommodation, same LA (short-term)	15	4.9%
Emergency accommodation, same LA (long-term)	12	3.9%
Returned to perpetrator	8	2.6%
Emergency accommodation different LA (short-term)	7	2.3%
Accommodated in private rental (in area of residence)	4	1.3%
Accommodated by community or religious group	1	0.3%
Accommodated in private rental (out of area of residence)	1	0.3%
Paying to stay in B&B or hotel or hostel	1	0.3%
Returned to country of origin	1	0.3%
Sectioned or in hospital	1	0.3%
Sleeping rough	1	0.3%
Other	34	11.0%

13 These numbers are similar to last year, when five out of 61 (8.20%) women with NRPF were accommodated in a suitable refuge.

As reported in *Nowhere to Turn, 2018*, there were again inequalities in refuge access depending on the specific barriers that women faced. In particular, it is notable that only 11.7% (7 out of 60 women) of those women with NRPF were accommodated in a suitable refuge.¹³ While 27.4% of those with one support need were accommodated in a suitable refuge, only around 20% of those with two (18.3%), three (21.2%), four (19.2%) or five (20.2%) support needs found suitable refuge accommodation.

Many of the women who took part in the interviews spoke about the complex emotions that they experienced when they found out that they had been successful in securing a refuge place. Despite the sense of apprehension and loss that comes with entering the unknown, women overwhelmingly spoke about the relief and sense of safety

that they felt. Emira, who was fleeing

her abusive husband with her young daughter, said that when the refuge worker called to offer her a space, she was “so happy, so hopeful”.

Gita spoke about how she felt her “future could start again”. Another participant, Samira, told us that she felt like she was “so lucky there’s someone here to help” her. Safa described her emotions in the following way:

“I never knew what refuge was, but I was happy because I thought I could get a home from a refuge. I could cook food from a refuge. I could get a stable life. So I packed my bags immediately and brought them downstairs. I couldn’t wait.”



This picture was drawn by Alya, who, while unsure about the next step of her journey, felt safe in the specialist BME refuge in which she managed to be accommodated.

Part 2:

Survivors' experiences with statutory services

Part 1 of this report paints a detailed picture of how survivors of domestic abuse face an array of often unimaginable difficulties when fleeing the perpetrator. Apart from the emotional toil and physical dangers that are commonly associated with such a move, many face practical difficulties in their search for a safe space to live. This section explores the specifics of survivors' interactions with local housing departments, social services and the police.

Last year's report, *Nowhere to Turn, 2018*, highlighted positive experiences, as well as the failings, of some local housing teams and social services. Here we build on these findings by focusing in detail on some of the impacts that survivors' interactions with statutory services had on their experiences of seeking a refuge space.

While some survivors spoke about the positive interactions that they had, many continued to feel neglected and exposed to stigma and blame.

2.1 Survivors' experiences with local housing teams

For many survivors the first point of contact before approaching a refuge is a local housing team. Under Part VII of the Housing Act 1996¹⁴, the Homelessness Act 2002¹⁵, and the new Homelessness Reduction Act 2017¹⁶, these teams have a duty to assist those fleeing domestic abuse¹⁷. However, our data suggest that, as reported last year, the hopes of many survivors to be placed in safe accommodation by housing teams remain unfulfilled amidst a national housing crisis defined by a lack of affordable housing and cuts to local services.

Of the 309 women who were supported by the NWTa project this year, 145 (46.9%) contacted a housing team. At least 49 of these (33.8%) were prevented from making a valid homelessness application. Reflecting the findings of last year's

“I really felt let down...I just felt like the whole system didn't really care.”

Gita

¹⁴ Available at www.legislation.gov.uk/ukpga/1996/52/contents

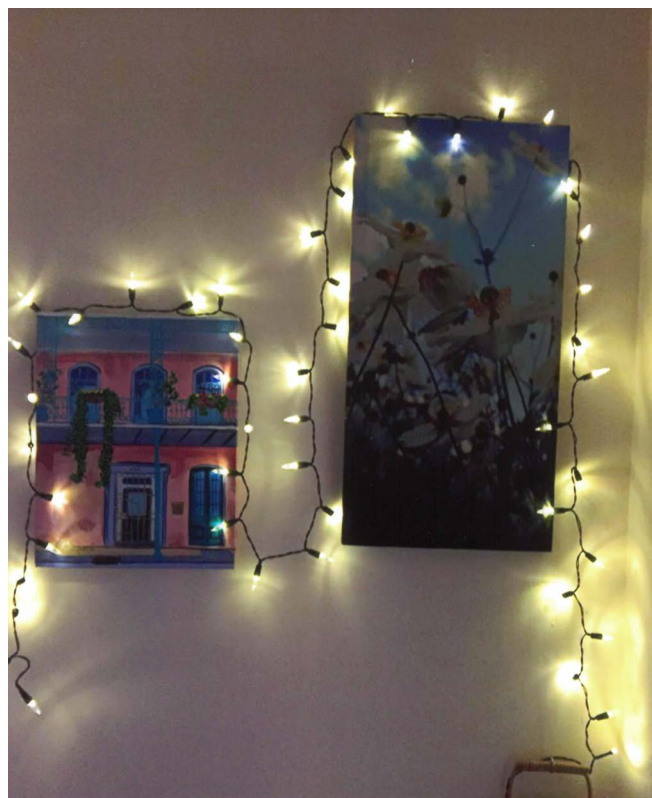
¹⁵ Available at www.legislation.gov.uk/ukpga/2002/7/contents

¹⁶ The Homelessness Reduction Act places increased duties on councils to prevent homelessness. Available at www.legislation.gov.uk/ukpga/2017/13/contents/enacted

¹⁷ See *Nowhere to Turn, 2018* (Women's Aid 2018a) for further details.



New home!



Photographs by Lasma, who had a positive experience with a housing officer.

18 As reported in *Nowhere to Turn, 2018* last year, 52 out of the 97 women (53.61%) who approached their local housing team were prevented from making a valid homelessness application. While this year more women approached a housing team, similar numbers were prevented from making a valid homelessness application.

19 Homelessness Code of Guidance 2018, available at: www.gov.uk/guidance/homelessness-code-of-guidance-for-local-authorities/chapter-21-domestic-abuse

report¹⁸, reasons given for this continued to include: housing teams ignoring guidance which states that local connection rules do not apply in cases of domestic violence¹⁹, suggestions by staff for the victim to return to the perpetrator instead; and recommendations to call the National Domestic Violence Helpline (NDVH).

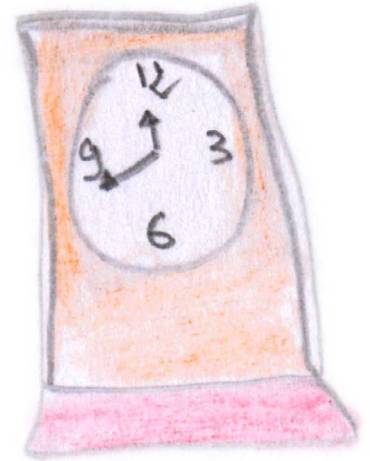
In the interviews that we conducted, some women spoke about their interactions with staff in local housing departments in positive ways. Lasma, for instance, described the housing officer she dealt with as “kind”. Lasma also took the photographs above. They represent the home provided for her by the council after being accommodated in a refuge for several months.

Another participant, Faiza, described her experiences with her local housing team in the following way:

“They were really nice. I always think that I’m really, really lucky ... they gave me the control to decide what I wanted to do ... I made the decision where I wanted to go.”

However, many women described their interactions as problematic. While survivors were seemingly aware of the pressure that local councils are under, several women spoke about the impact of the absence of care. Abby, for instance, noted the following:

“They have a lot to work on I guess, but I guess the pressure is really hard for them as well, a lot of pressure ... I don’t know, I try not to be too hard on them, but I felt like shit. I felt like I was scum of the earth, because I couldn’t fend for myself and I needed help and they didn’t take any care or time in making that any better ... They didn’t have much compassion, they didn’t have very good customer skills, not that I’m a customer. It was like a robot, emotionless, which I found a bit disrespectful if I’m honest ... It’s tough because I know the pressure that the councils are under, you’re always going to be a statistic, but I felt they need to be a bit more real.”

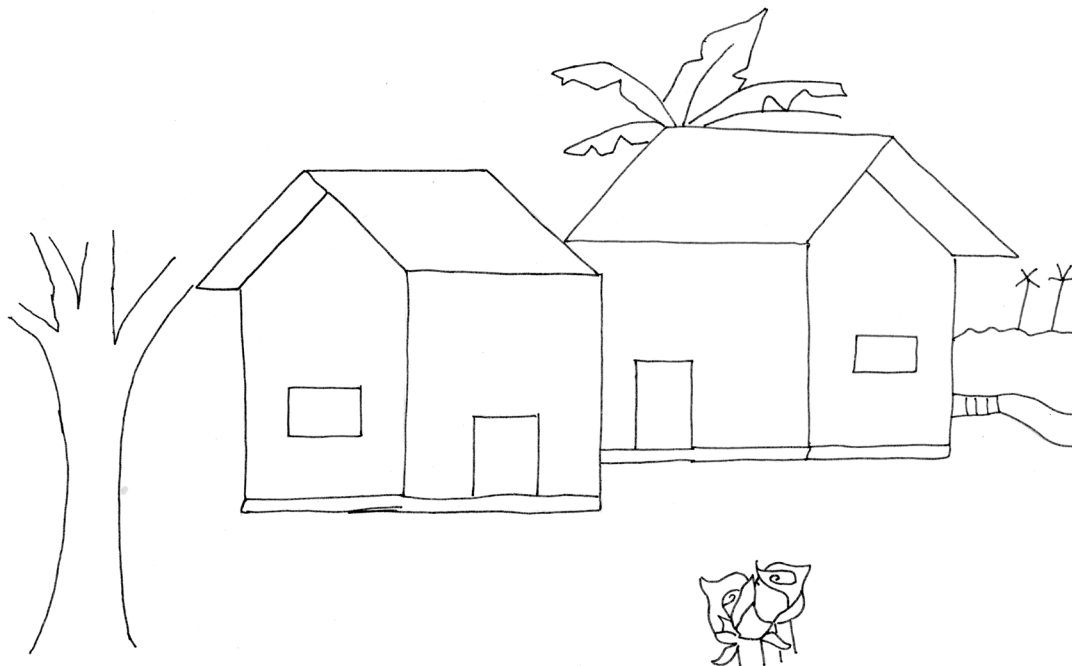


▲
Image provided by Alya, who had to wait a long time before being seen by social services.

Abby also spoke about the long waiting times she experienced. Indeed, the first time she went to the council the waiting times were so long that she decided to return to the perpetrator:

“I went to the council at 9am and I finally got somewhere at 5pm. I was there the whole day ... I was in the council a week prior and it got to 5pm and [my ex-partner] was coming back from work and I bailed, I went back ... they were taking so long just to try to get me a bed for the night. It was too much, the pressure was building, the time was moving on. It was too much, it broke me. It broke me and I went home.”

Image drawn by one of the participants, Safa. ▼





▲
Image provided by Nidhi and her daughter to illustrate their experiences with their housing team, as well as their experiences of homelessness.

When Abby returned to the council a week later, she felt overwhelmed by the pressure put on her to prove that she had experienced domestic abuse:

“Questions, question, just really specific questions about the abuse. It wasn’t a very nice experience ... I had answered all the questions and he asked me all of them again. Real unnecessary delving I feel. They should have just taken the word of my mental health team, they’re a service too and if they’re saying that I need this place that should be what I need, but that wasn’t the case ... even someone just saying, “I’m really sorry we have to go through this process”, fine. But no, not even that! It was more like they were trying to catch me out.”

Abby also spoke about her housing team’s lack of understanding about the dangers she faced in her local area, where many people were criminally connected with her ex-partner:

“They haven’t understood how vulnerable I’ll be [in my area of origin].”

Nidhi, who had moved to the UK from India and was fleeing her abusive husband with her teenage daughter, found the treatment she received from her local housing team so distressing that it made her feel suicidal:

“When we came out of the council I thought at least in India there’s rivers that you can jump in and kill yourself. Here there’s nothing. How do you kill yourself? For the first time in my life I just thought it’s better if I die. There’s nothing that we can do.”

Nidhi’s distress was exacerbated by the fact that she had not been told by the housing officer why she could not receive help, and the way she was spoken to:

“They didn’t say it was because of the immigration, they didn’t say we can’t help you for this reason, there was no explanation whatsoever ... when you’re already traumatised and you’re already scared and then a professional talks loudly or down to you, they should know that you’re already scared. One lady, she goes, [my daughter] was crying, she said to her, ‘Why are you crying? Stop it!’.”

Nidhi also spoke about the injustice she felt that those with no recourse to public funds cannot receive help from local housing departments:

“I’ve been working in this country for three years, I’ve given to the system, I wasn’t taking anything, no child tax credit, nothing. So if I’m paying into the system, why can’t I get something in return? But there was no explanation.”

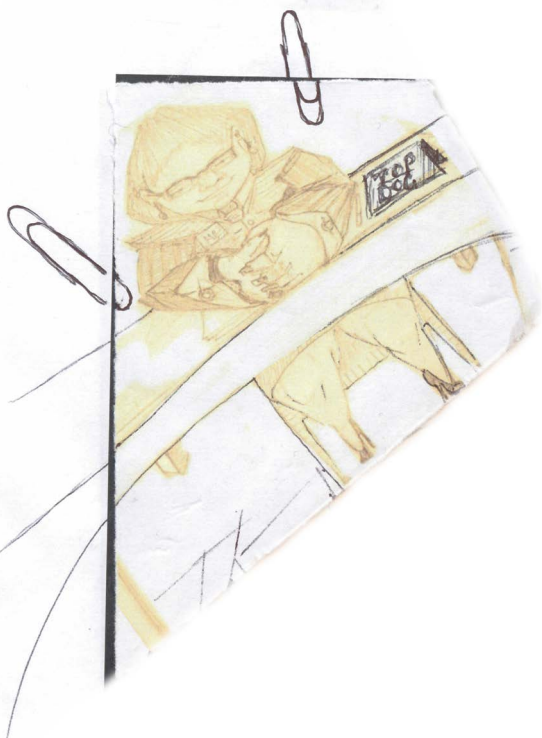
Several of the other participants shared Nidhi’s feelings of injustice and discrimination from statutory services based on their immigration status.

The process of asking the council for emergency accommodation was described by one woman, Emma, as so “humiliating” that the second time she found herself in a relationship with an abusive partner it prevented her from asking for help. The first time Emma had fled an abusive relationship her son had been a teenager and there were no suitable spaces available for families with an older male child. Asking the council for support was her only option of finding a safe place to live:

“Just the whole feeling of having to sit there and prove ... I shouldn’t have to prove to you ... cos if I wasn’t in a desperate situation I wouldn’t be here ... That was so degrading, to sit in front of a housing officer who wants me to tell them all the horrible things that have happened to me to prove that I need this housing. It was just demeaning and degrading and awful ... When you do finally go it’s such a massive thing and if you’ve got all these blocks in place stopping you from getting the help, or feeling like you can’t ... they could definitely be more understanding and recognise that in order to be in this situation you have to be desperate, the lowest point you’ve probably ever been. And you just desperately want somebody to help ... That was my only knowledge of the process ... and (when I was in a second abusive relationship) I was like I’m not going through that again, I can’t If you’ve got children, especially a son that’s too old for refuge, it’s just humiliating, like it isn’t bad enough, now I have to sit across [a housing officer] and be asked really personal questions. I’m here telling you I’ve been a victim of abuse for [many] years, [many] years ... I’m here because I have nowhere else to go. To be put through that process is just horrible, really horrible ... I was like, I’m not doing that again.”

“I’m here because I have nowhere else to go. To be put through that process is just horrible, really horrible.”

Emma



▲
Image by Rowan, depicting her interactions with the housing officer.

As shown on the left, for Rowan, her experience of being turned away from the local council without explanation had such a deep impact on her that she included the housing officer she encountered as a significant part of her artwork. She described her feelings of powerlessness which arose in her interactions:

“It’s almost like a comedy sketch, you know, she was like, ‘Well you’d have to fill out the G43 and a half form or you...’ It was like are you for real? And I remember my sister said, ‘Ok so it seems like the only option left is that my sister’s going to be homeless,’ and she’s like, ‘Hmm yeah,’ and I remember her being like as if like that’s no problem at all ... She was just so aloof ... You were absolutely a number ... I was turned away from emergency housing in a really aloof way, just like yeah sorry no, computer says no ... And I was like pleading, but this is a situation I’m going to be sleeping with my son out in the park and he’s got special needs and it’s like, ‘Yeah, no. No we can’t do that I’m afraid.’ And there’s like no reason for it.”

Nidhi suggested that local housing teams must do more to fulfil their obligations under Part VII of the Housing Act 1996, the Homelessness Act 2002 and the new Homelessness Reduction Act 2017 to help those at risk of homelessness.²⁰ This was particularly important for those with additional ‘priority needs’, for example, those fleeing domestic violence with a child, as was the case in her situation:

“There’s different reasons that you can go to the council for. Why have you got all these reasons if you’re not going to listen? Why is there a list of reasons if you’re not going to help with those issues?”

While our data do not allow us to generalise beyond our sample, overall our interview data and the quantitative data collected by the NWTAs specialist practitioners suggest that local housing teams are continuing to fall short of their obligations and that any potential impact of the new Homelessness Reduction Act 2017 is yet to become visible.

²⁰ See footnotes 12, 13 and 14 for details.

Megan's Story

Megan was pregnant and had five young children. She was fleeing her ex-partner, who had threatened to kill her. Megan needed to find safe accommodation within travelling distance of her hospital for antenatal care, and there was no suitable and sufficiently large refuge space available on Routes to Support²¹ for Megan and her children.

Megan presented to her local authority as homeless. They offered her and her children accommodation very near to where she was fleeing from, which was not safe for Megan to take up. When Megan explained this, she was told that this was the only area in which they could offer her accommodation and that she should approach another local council. When Megan approached a different local council, she was told to make contact with her original local council.

Megan was unsure about what to do, and decided that she and her children would stay with an elderly relative in a one bedroom flat. Conditions were cramped and Megan was afraid that the perpetrator would find her at this address, which was known to him. At this point Megan called the National Domestic Violence Helpline (NDVH), which referred her to the No Woman Turned Away (NWTa) project.

After reassurance from the NWTa specialist practitioner, Megan presented as homeless to the council in the area where she was temporarily staying. She was falsely advised that she needed to provide evidence of the abuse, and was again told to approach her original local housing team, despite Megan and her NWTa specialist practitioner emphasising that living in that area was too dangerous.

With sustained support from the NWTa specialist practitioner and Megan's supportive family members, who escorted her to her local housing team, Megan and her children were eventually accommodated in emergency accommodation in an area outside of her local borough and danger area, but with good links to Megan's hospital. The house was not ideal for Megan and her family due to the great number of stairs, which were difficult to climb for Megan whilst pregnant and not entirely safe for her young children. However, Megan was happy to stay there until a more permanent solution could be found. She was thankful for the support from the NWTa specialist practitioner.

21 Routes to Support is the UK-wide database of domestic abuse services and refuge vacancies, run in partnership between Women's Aid Federation of England, Women's Aid Federation of Northern Ireland, Scottish Women's Aid, and Welsh Women's Aid.



▲
Image provided by
Alya, who fled her
abusive husband with
her two children.

2.2 Survivors' experiences with social services

Apart from housing teams, many survivors of domestic abuse also deal with social services departments. Under the Children's Act 1989, Part III, Section 17²², they have a duty to safeguard and promote the welfare of children in their area who are 'in need', and to promote the upbringing of these children by their families. In addition, under the Care Act 2014, Part 1²³, social care teams have the duty to provide assistance to adults requiring care and support due to a disability, illness or mental health condition.

Of the women supported by the NWTAs specialist practitioners, 87 (28.2%) contacted social care teams while searching for a refuge space. They failed to meet their obligation to safeguard women and children in 25 (28.7%) of those cases.²⁴ In most of these cases, social services refused to accommodate both the mother and the children. However, in some cases they offered to accommodate the child, but not the mother, and in this way neglected their duty to house children with their mother whenever possible.

It is important to point out that many of the women who approached social services received satisfactory support from social workers, who tend to do all they can to manage increased caseloads. Moira, who was supported by a social worker due to her disabilities, noted:

"My social worker was absolutely brilliant, because we ended up doing it as a priority case ... I got priority because of my disabilities."

²² Available at: www.legislation.gov.uk/ukpga/1989/41/section/17

²³ Available at: www.legislation.gov.uk/ukpga/2014/23/contents/enacted

²⁴ As reported in *Nowhere to Turn, 2018* (Women's Aid 2018a), last year 77 women contacted social services and 32 of these were failed by social services (41.6%).

However, many survivors spoke about how overstretched social workers were struggling to meet their duty of care. Alya, who was assaulted by her abusive husband in the home that they shared with their two young children, spoke about how she and her children had to stay there for 12 days after being told that social services would be in touch with her shortly. Alya and her children locked themselves into a bedroom for almost the entire time. She drew the image below and told us the following:

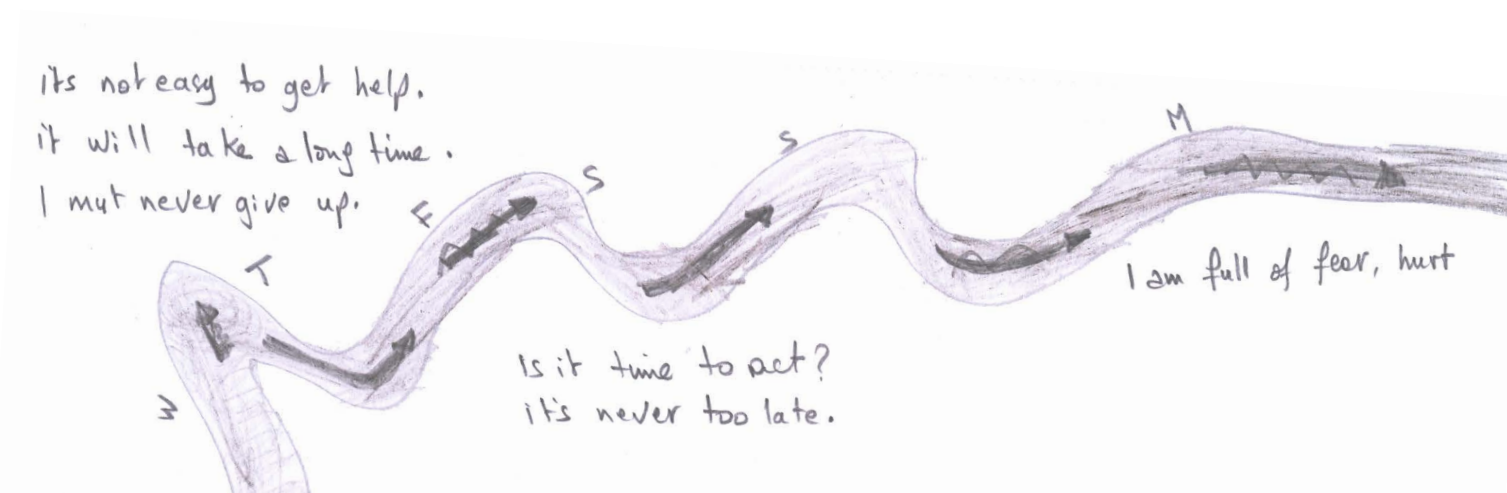
“I have heard from many people that when they called the police, automatically social services came, in the meantime and they act and they do their job. But in my case why didn't they come? If I hadn't called them many times, I am sure no-one will call me ... I didn't meet [the social worker] until the day we left home ... [in 12 days] I tried not to meet [my husband], every day. I just stay in the room and just go down to bring something for kids to eat.”

In some cases, social services did not step in because, unlike the survivor herself, they did not regard the situation as severe enough. Rowan, as discussed in Part 1 of this report, was sofa-surfing with her young son (who has special needs) for several weeks before being accepted by a refuge. However, social services did not offer to support Rowan with her living situation or in any other way:

“Social services let me down. They said your son is fine because he's with you and you're not abusive so he's fine. Twice I got turned away by them. The second time they said we're not concerned for him because you're making all the right choices, which is nice, but I also felt like the blind leading the blind.”

Another participant, Safa, who, as we heard earlier in this report, had NRPF and was staying in a hotel with her two young children for three months while waiting for a refuge

Image by Alya, who waited 12 days for a social worker to get in touch, trying to avoid her husband the whole time.



space, spoke highly of her social worker. She told us that “the social worker was very helpful and came to visit regularly”. While the benefits system ought to provide all survivors of domestic abuse with sufficient funds to buy essentials, in Safa’s case the social worker helped Safa by providing her with a £60 voucher every week. However, one week the social worker did not turn up, leaving Safa without support and struggling to feed herself and her children. Safa’s case highlights that it is of utmost importance for social services to have sufficient staff levels to offer consistency during staff absence.

Our research also flagged some inconsistency in the response by social services towards women at different stages of their pregnancy. Women in the early stages of pregnancy are unable to access the same support available to those at a later stage. Despite this, some social care services are pushing them to report abuse to the police without being able to support them with the consequences. We heard how inadequate support by statutory services had the potential to have a devastating impact on women’s lives and were reminded that statutory services (and the government bodies which fund them) need to take their responsibility for protecting survivors of domestic abuse extremely seriously.



▲
Image by Alya, who experienced a rapid response from police officers after an incident of physical violence from her husband.

2.3 Survivors’ experiences with the police

Finally, while survivors do not always choose to report domestic violence to the police, many do deal with police officers to safeguard themselves and their children, or to formally report domestic violence. Of the women supported by the NWT specialist practitioners, 113 (36.6%) contacted the police.²⁵

Several of the women who took part in interviews spoke of the quick response that they received when they called the police out in relation to an incident of domestic violence. Mumtaz, for example, noted that “within two minutes of [her] calling the police, they were at [her] house.”

Some women, for example Lasma, also spoke about the excellent support that they received from first responders and the impact that this had on them:

“When police came and they were so supportive I finally felt very strong....and how quickly they responded...that made a massive difference...basically in a few seconds he was put in handcuffs and put in a police car.”

²⁵ Findings from *Survival and Beyond: Annual Survey 2017* (Women’s Aid 2018c) show that women accommodated in a refuge are more likely to report domestic violence to the police (43.7%) than those who use community-based services (28.0%).

Lasma also spoke about the excellent follow-up care she received:

“And then very often I had a phone call from police, saying, asking me ‘What you feeling?’, ‘Are you safe?’, ‘Are you alright?’ Very, very kind.”

For Lasma, this care meant that she then felt able to open up to other professionals in her local housing department and her local domestic violence organisation. In turn, this meant that she was able to ask for the help that she needed to find a refuge space.

Several participants told us about the value of talking to a police officer who speaks their native language and who understands their cultural background. Zainab, a young woman from an Asian background, noted:

“They understood [my cultural background]; they let me speak in my own time, so it was very positive. Because of this it was much easier [to speak to the solicitor]. Because the police and the solicitor both could speak my language.”

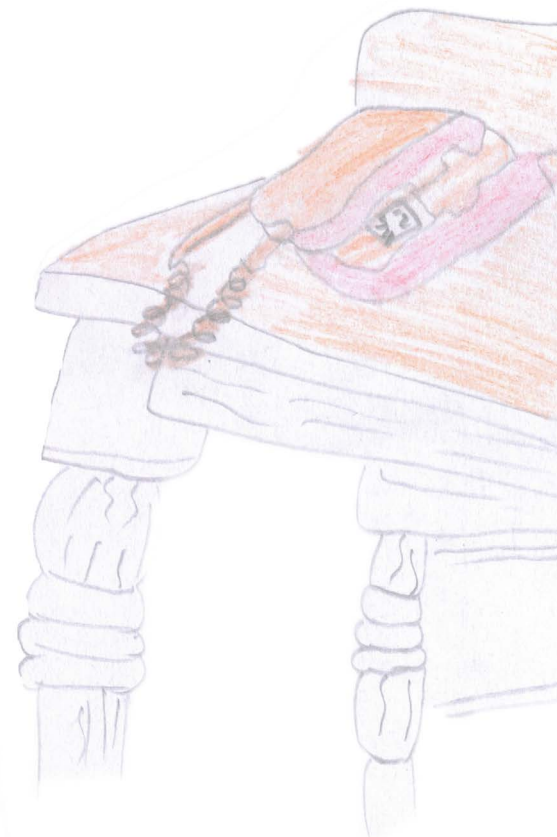
However, there were inconsistencies in the response that survivors received from the police, and some officers appeared to lack knowledge about domestic violence. When police did not respond adequately, participants (understandably) felt incredibly let down. Mumtaz spoke about calling the police a second time while suffering abuse from an illegitimate support organisation which turned out to be exploitative:

“I called the police and said, ‘I need help,’ but nobody came.”

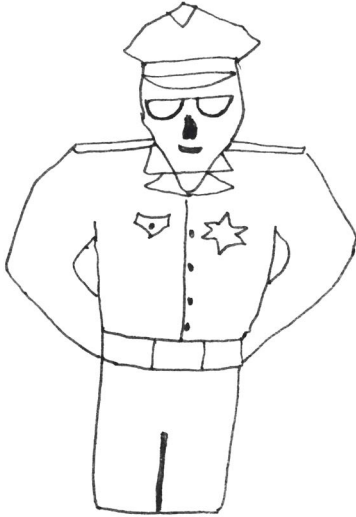
For Mumtaz, this meant that she felt not only unsafe, but also as though she was alone with nowhere to turn.

For Alya, while the initial response of the police was rapid, there was no follow-up response from either the police or social services, and after a very short spell in prison, the perpetrator was given permission by the police to return to the house he shared with Alya and their children, which was registered in his name.

The case of another participant, Nidhi, highlights how there is still some way to go in ensuring that all first responders



▲
Alya drew the phone above to point to her experiences of waiting to be called back by the police and/or social services.



▲
The police officer above was drawn by Safa, who reported her abuser to the police.

are adequately trained to recognise the signs of domestic abuse. Nidhi and her teenage daughter suffered extremely violent abuse by Nidhi's husband. He beat Nidhi with a heavy metal object on several occasions, and, although their house had many bedrooms, Nidhi and her daughter were confined to just one room in the house. This room was not carpeted and contained only a single mattress which was placed on the floor.

One night after beating Nidhi, which was a daily occurrence, her husband called the police and asked them to remove Nidhi and her daughter from the property, which was registered in his name. There were bruises on Nidhi's body at this point. The police woke her and her daughter up very late in the evening after they had gone to bed, and removed them from their home. They dropped them off at a hotel, but refused to tell them where it was located. Whilst driving, Nidhi's daughter pleaded with the police to treat them kindly, arguing that both had suffered extreme abuse at the hands of Nidhi's husband. There was no response from the officers.

As explained in Part 1 of this report, Nidhi and her daughter were made homeless as a result of their removal from the property, and both ended up requiring hospital treatment. The effects of homelessness added to the injuries that they had sustained through years of abuse. Understandably, following this treatment, Nidhi was hesitant to report the abuse to other professionals. She described how the treatment she had received from the officers still affects her and her daughter now:

"Even now when a police car goes by it takes [my daughter] back to them days. I hate the sound, the feeling we're back there."

▼
The image of the police car below was drawn by Alya to depict her experiences with the police, which were ultimately disappointing.

The failure of the police officers to recognise that the conditions in which Nidhi and her child were living pointed to domestic abuse, tells us that more work needs to be done to train professionals to recognise the signs and to act appropriately. Had officers received adequate training, Nidhi and her daughter's journey may have taken a very different direction.



Part 3:

What support is needed and what is offered by the NwTA project?

3.1 What type of support do survivors receive from the NwTA project?

Parts 1 and 2 of this report highlight the importance of providing additional support to women who face barriers in accessing a refuge space via the No Woman Turned Away (NwTA) project. The specialist practitioners recorded the support they provided using On Track, Women's Aid's outcomes monitoring and case management system. The figures included in this part of the report again relate to support provided to the 309 women who finished receiving support between the 12th January 2018 and the 11th January 2019.

How much support did women receive?

On average, women received four hours and 10 minutes of support from the NwTA specialist practitioners, a slight increase from last year²⁶. This ranged from 15 minutes to over eight hours. This support was provided on a daily or almost daily basis over an average time span of 20.5 days. However, this time span ranged from just one day to 140 days.

What type of support do women receive?

Table 5 shows that the breakdown of the support the specialist practitioners offered to survivors is similar to findings from last year's report (Women's Aid 2018a).

Again, the majority (40.6%) of specialist practitioners' time was spent on the telephone with survivors. Liaising with professionals and advocating on behalf of the survivor comprised a further 23.8% of specialist practitioners' time. This typically involves talking to refuge workers to see if a refuge space will meet the survivor's needs, liaising with local domestic abuse services to get the survivor linked in with local support, and talking to other professionals such as social workers.

26 As reported in *Nowhere to Turn, 2018* (Women's Aid 2018a), last year survivors received an average of three hours and thirty minutes of support. Feedback from the specialist practitioners indicates that although generally the number of support hours provided is sufficient to offer satisfactory support, in some instances an increase in available time would mean that survivors could be offered further support.

Table 5: What type of support do women receive?

Type of support	% of specialist practitioners' time
Phone contact with survivor	40.6%
Liaison with other professionals	15.3%
Attempting contact/chasing up	11.9%
Email contact with survivor	11.6%
Paperwork	9.9%
Advocacy on survivor's behalf	8.5%
Other	2.2%

What do women receive support with?

The range of support offered by the specialist practitioners is outlined in **Table 6**.²⁷ Unsurprisingly given the nature of the NWTa project, the most common topics were housing, and referral and signposting. All survivors received support around these categories. Safety planning advice and emotional support were also frequently given over the phone, with over two-fifths of survivors receiving support in these areas. In more than 40% of cases, the NWTa specialist practitioners responded to survivors' emotional needs in addition to their practical needs, often giving them the courage to keep searching for a safe place to live.

More than one in three women were supported with safeguarding, and 30.1% were supported with needs relating to their children. Many women were anxious about taking their children with them to a refuge, and, as discussed in Part 2 of this report, were already in contact with social services. The

Table 6: What do women receive support with?

	Number of women supported	Proportion of women supported
Housing	309	100.0%
Referral and signposting	309	100.0%
Safety planning	131	42.4%
Emotional support	128	41.4%
Safeguarding	116	37.5%
Risk assessment	110	35.6%
Children	93	30.1%
Immigration	64	20.7%
Finances	58	18.8%
Parenting	49	15.9%
Mental health	45	14.6%
Physical health	44	14.2%
Criminal justice	43	13.9%
Civil justice	35	11.3%
Family law	34	11.0%
Drugs and alcohol	16	5.2%
Multi-Agency Risk Assessment Conference (MARAC)	16	5.2%
Offending	12	3.9%
Sexual health	9	2.9%
Other	233	75.4%

²⁷ Women commonly received support in more than one area.

specialist practitioners supported women in these areas by offering advice, liaising with social workers, and referring and signposting women to local agencies who can offer support with their children.

Over 20% of survivors received support with immigration issues. Often this involved connecting the survivor to other services to apply for the DDV concession or to clarify their immigration status. As highlighted in Part 1 of this report, women's immigration status determines whether they have access to public funds. When women have been denied access to public funds, their search for a refuge is considerably more difficult.

As we know from Part 1 of this report, poverty and access to finances were key concerns for survivors seeking a refuge space. 18.8% of survivors were supported by the specialist practitioners with their finances. This ranged from offering information about foodbanks to accessing housing benefit.

Impact of the NWTa project

Part 1 of this report already stated that the dedicated support of the NWTa specialist practitioners resulted in 22.3% of survivors finding suitable refuge accommodation, and a further 11.0% accessing emergency accommodation. The value of the support that the NWTa project provided was mentioned by one of the women we interviewed, Gita:

"Between my friends, the Shelter lady and the woman from NWTa on the phone, they kept me going. Little bits by little bits, they kept reinstalling that hope. And the more hope I had, the more courage I had."

Even with the significant support of the NWTa specialist practitioners, for many women the barriers they face when searching for refuge are insurmountable. They either give up, or have to seek alternative accommodation. As discussed in Part 1 of this report, this frequently means staying with friends or family, which not only relies on the survivor having sufficient social capital to do this, but also puts them at risk of continued abuse, especially if the perpetrator knows the location. The remainder of this part of the report examines the gaps in provision and the importance of specialist services, looking at what the survivors we spoke to told us about what they wanted from refuges.

I was really happy, I was really excited, I felt like my future could start again.

Gita

Gita's Story

Gita experienced abuse from her male relatives, which continued even once she had moved out and found her own flat. She decided that she had to leave her flat and moved in with her partner and his father. However, both of them became physically and emotionally abusive towards her. Gita again fled her home and stayed on a friend's sofa. The pressure of this, combined with the trauma of the abuse, led Gita to take an overdose and she ended up in hospital.

At the hospital Gita started searching for a refuge space. Gita phoned up a lot of refuges over the following months and answered all the questions they had for her. However, she was unable to find a refuge that could support her with her mental health and substance use. During this time, Gita continued to sofa-surf with friends.

Gita approached Shelter for help and received advice to call the National Domestic Violence Helpline, which in turn referred her to the No Woman Turned Away (NWTa) project. The NWTa specialist practitioner supported Gita in her endeavour to find a safe space to live, searching Routes to Support for a refuge space for her and passing her the numbers of the refuges with suitable vacancies.

Eventually, Gita was accepted into a refuge which could support her needs. Her worker from Shelter understood Gita's situation and accompanied her to a supermarket car park in the pouring rain, where a refuge worker was able to come and collect her.

Gita reflected on how she felt once she had settled into the refuge, saying the following:

"I was really happy, I was really excited, I felt like my future could start again. I felt like even though I'm not independent because I've got a lot of help around me, it was still that step of independence ... I was really happy."



Transitioning

▲
Gita drew this lion to illustrate her process of "transitioning", which was enabled by the support that she received.

3.2 Gaps in provision

There continues to be a substantial lack of refuge spaces. *Women's Aid's Domestic Abuse Report 2019: Annual Audit* (Women's Aid, 2019a) found that the number of refuge bed spaces in England increased by 15 beds in the year ending 1st May 2018. However, due to an increase in population, the shortfall against the 2008 Council of Europe recommendation²⁸ actually increased to a total of 1,715 bed spaces.

The report also found that 59.7% of referrals to a refuge were declined in 2017-18, estimating that the equivalent of 405 referrals to a refuge are declined every week. Interviews revealed that some survivors of domestic abuse feel that the "system" is not "caring" and not "protecting" them.

The gaps in provision are not limited to refuge accommodation. Key findings from the *Annual Audit* showed widespread, unsustainable pressures on the domestic abuse service provision sector:

- ▶ 56.7% of respondents were running an area of their domestic abuse service without any dedicated funding in 2017-18.
- ▶ 30.6% of respondents reported that, since 2014, they had needed to reduce the amount of support (in terms of staff time) they were able to give to each service user due to funding shortages.

²⁸ 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).

The true level of refuge provision can only be understood by considering both the availability of refuge spaces, *and* their accessibility, ie whether the space can meet a survivor's need, is in a suitable location, and is available when she needs it.

Maisha's Story

Maisha had come to the UK on a spousal visa, had no recourse to public funds (NRPF), language support needs, and was in the early stages of pregnancy. Her husband and mother-in-law were severely abusive. They locked Maisha in the house without any access to money, and monitored her movements. One day, while her husband was not at home and her mother-in-law was asleep, Maisha decided to call the National Domestic Violence Helpline, which in turn referred her to the NWTAs project. Initially there were no suitable refuge spaces available for women with NRPF. The NWTAs specialist practitioner put Maisha

in touch with a local specialist BME support organisation which could communicate with her in her native language (Bengali), and help her to apply for the DDV concession. After being given this new lifeline, Maisha was able to flee her home and sofa-surfed with relatives for nearly two weeks while waiting for the DDV concession to be granted. Once the relevant paperwork had arrived, with the help of her NWTAs specialist practitioner and the specialist BME organisation, Maisha was able to find a space in a BME specialist refuge. She was very grateful for the support that she received from the NWTAs specialist practitioner.

The importance of specialist services

As noted in Part 1 of this report, finding a suitable refuge is harder for those most marginalised by society. Key findings from the *Annual Audit* (Women's Aid, 2019a) showed the following based on snapshot figures taken in May 2018:

- ▶ Half of the specialist BME refuges in England are based in London (15 specialist BME refuges out of a total of 30).
- ▶ 8.9% (24) of refuge services have a specialist drug use worker, a decrease of six workers compared to last year.
- ▶ Only 17.3% of refuges (47) have a specialist mental health worker, a decrease of sixteen workers compared to last year.

The desire to find a suitable refuge that could support survivors' needs was a key theme in the interviews we conducted, and in the artwork provided by participants.



▲
Faiza drew the images of the three heads above to illustrate the importance of specialist support for women from BME backgrounds.

Aisha's representation of her telephone support worker from a specialist BME organisation.





▲
Smiley faces by Nidhi and her teenage daughter.

Many survivors spoke about how they felt that their needs impeded their search for a refuge. One survivor, Moira, needed a refuge space that could support her disability-related needs, but, as discussed in Part 1, the lack of availability of accessible refuge spaces meant that she had no choice but to stay with her increasingly abusive friend while she waited for an appropriate space. She noted the following:

“If I could have gone from A to C without going to B, without going to my friend’s, straight to the safe house, that would have been absolutely brilliant. And I think I would have been out of there a lot quicker ... I think that was mainly because of my disabilities. If I didn’t have my disabilities, I think I would have been there sooner. But because of my needs, they had to meet my needs, it was harder for them to get a place, because there’s not a lot of places about for disabled [women]. There’s a few, but not many.”

Many survivors placed great value on the specialist support they had access to, having found a refuge. Faiza drew the images of the three heads on the previous page to illustrate the importance of specialist support for women from BME backgrounds. Similarly, Aisha drew the image over the page of her telephone support worker from a specialist BME organisation. Aisha noted that her support worker “understands [her] whole problem, whole thing.” Another participant, Mumtaz, explained that “sometimes as human beings we relate most to people who speak the same language as us,” especially after going through traumatic experiences. The smiley faces on the left were provided by Nidhi and her teenage daughter to signify the extent to which they felt supported in a BME specialist refuge.

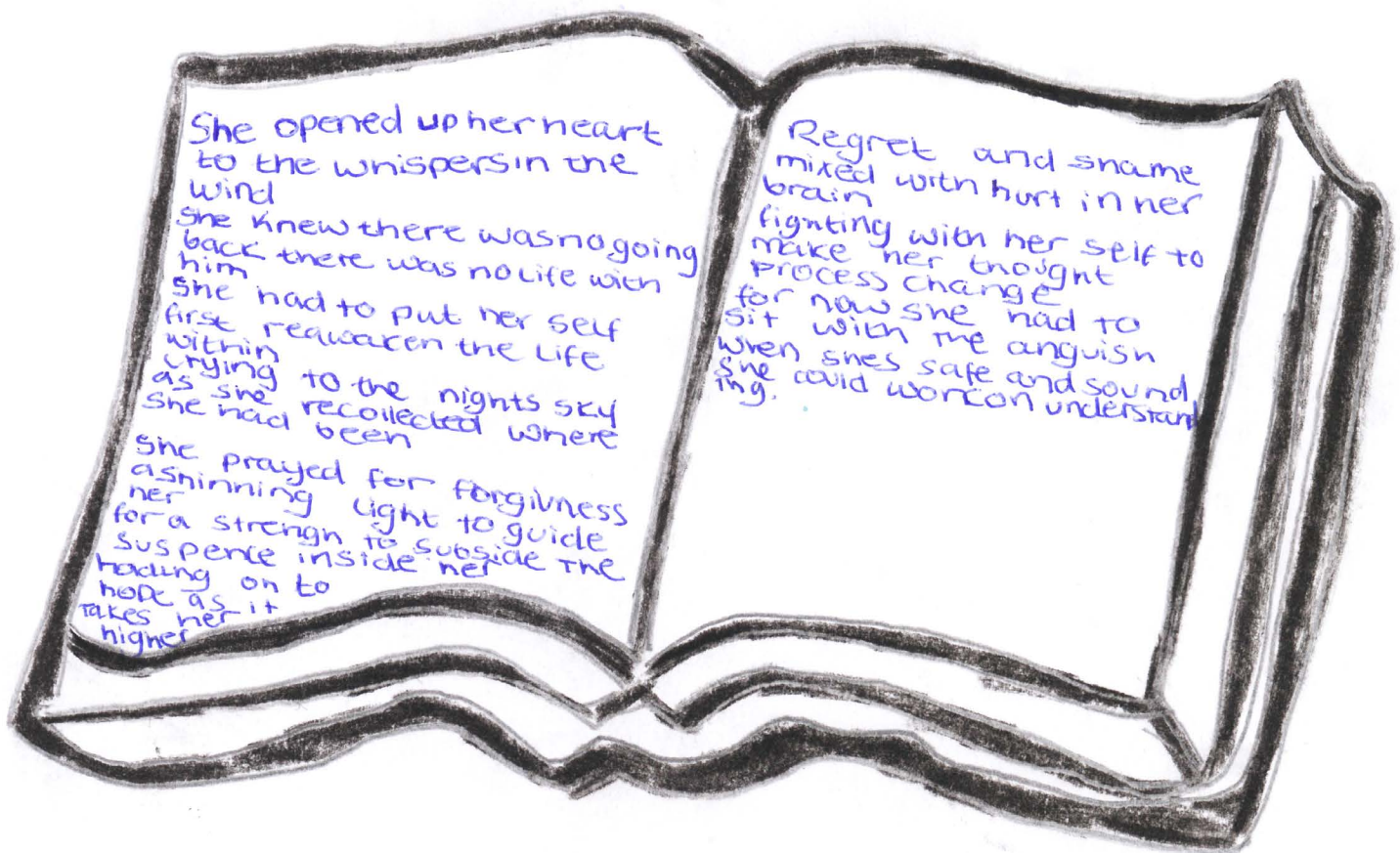


◀
Emma drew the green and blue figures here to document the significance of the support that she received in a refuge which offered specialist support for LGBT women.

Abby, who had mental health and drug support needs, noted the following about the specialist support that she received in a refuge for women with complex needs:

"There's more on-hand support, people come in every day. They do check in, there's more support. There's always a member of staff floating about most days of the week ... [The extra specialist support in the complex needs refuge] made me feel a lot safer ... and security come round in the night times, which is nice, but that's the same wherever you are ... I feel really lucky to be given this opportunity."

Finally, we will close this part of the report with a poem by Gita entitled *Open Book*, which she wrote to express how she "could work on understanding" once she was accommodated safely in a refuge where she received support with her specific needs.



Conclusions and Recommendations

Conclusions

This report details the often harrowing and long-drawn-out experiences of women seeking refuge accommodation. Arts-based methods and interviews added to our statistical analysis by allowing us to document the nuances of survivors' experiences of seeking a refuge space and what makes a difference to them. In addition, arts-based methods offered survivors substantial input into the report and were often described as therapeutic by survivors²⁹.

The report highlights how women continue to face a range of barriers when accessing safety. Often those who are not able to be accommodated in a refuge immediately, if at all, rely on their social connections – and even strangers – to find a safe place to live. This puts a huge strain on existing and new relationships, and some survivors face additional abuse in these vulnerable circumstances. Women who face barriers to accessing a refuge and who do not have social connections are confronted with the possibility of becoming street homeless.

While waiting to be accommodated in a refuge, many survivors encounter often insurmountable financial difficulties. These are often exacerbated by previous financial abuse. Many go hungry and struggle to feed and clothe not only themselves, but also their children. While Women's Aid's national annual survey already reports on the proportion of service users who access food banks nationally³⁰, future NWTAs reports will likely monitor the proportion of women supported by the NWTAs project who go hungry.

Local housing departments, social services, and the police continue to offer inconsistent responses. This report points to the need for further, and more consistent, training of professionals. Women asserted that they wanted responses to be tailored to their individual needs. Such a personalised response is emphasised within Women's Aid's Change That Lasts³¹ approach, which incorporates training delivered to professionals, as well as the general public.

29 See Austin, J. (2019).

30 Report accessible here: www.womensaid.org.uk/research-and-publications/the-domestic-abuse-report/

31 More information about Change That Lasts is available at: www.womensaid.org.uk/our-approach-change-that-lasts

Our report showed how the way a professional responds on first disclosure – offering the right response the first time – can have a huge impact on a survivor’s wellbeing and their future journey. Survivors benefit from specialist support, including specialist refuges (for example BME refuges). It is vital in the struggle against domestic violence to continue their funding. A domestic abuse bill would offer a welcome opportunity to reform the ways in which survivors of domestic abuse are supported by improving the statutory response and raising awareness. In particular, the government’s proposed new legal duty on local authorities to deliver support for survivors in accommodation-based services could help to improve the sustainability of refuge provision in England. It is critical, however, that a new duty is underpinned by: national oversight arrangements that enable refuges to continue to operate as a national network of services; safeguards to ensure local authorities fund specialist services that have the expertise to support women and children escaping domestic abuse; measures to ensure the sustainability of services led ‘by and for’ BME survivors; and the secure funding settlement required to ensure provision meets need.

Finally, this report highlights the indispensable and life-saving work provided by the NwTA specialist practitioners, who are continuing to work tirelessly to support survivors of domestic abuse into refuges.

**Photograph and poem
by Samira, to capture
the hope for the future
offered to her and her
young son by going
into a refuge.**



CAMING LAVA

Confusion in my heart
 Confusion in my head
 Weighing heavy
 Makes me sad

Is leaving him the end of me?
 I've tried and tried.
 There is no blame
 But now I see that from darkness
 Comes light.

A New chapter.
 After all this hardship
 There is still beauty.
 There is still hope.

Recommendations

Recommendations for the government

Provide sufficient bed spaces in specialist refuges to meet the level of demand nationally.

- ▶ Continue working with Women's Aid, Imkaan and other specialist providers to ensure any proposed new legal duty on local authorities to deliver support in accommodation-based services establishes a sustainable funding model for specialist refuges, which can flex to meet demand so that there are enough refuge spaces to ensure that no woman is turned away³².
 - Any future funding model should ensure that women are able to access a space with the appropriate support to meet her needs. This should include: sufficient specialist support for women with complex needs including mental health and substance use; an increase in accessible spaces for disabled women; availability of larger refuge spaces for women with four or more children; options for women with older male children such as increasing the number of self-contained refuge accommodation spaces; and sufficient support for women with multiple support needs.
 - The new model requires robust national oversight arrangements and must ensure that all refuges are able to accept women and children fleeing from any area of the country, rather than accepting them on the basis of their connection to the local area.
- ▶ Establish safeguards to ensure that local authorities fund specialist services with the expertise in meeting the needs of women and children escaping domestic abuse, not generic 'accommodation-based' provision.
- ▶ Ensure that there is dedicated national funding for specialist BME services, rather than incorporating them into mainstream services.

³² See Women's Aid's (2018b) *Funding a National Network of Refuges* report for detailed recommendations on a future funding model.

³³ Also see the campaign on abolishing NRPF by the Southall Black Sisters: <https://southallblacksisters.org.uk/campaigns/immigration/abolish-no-recourse-to-public-funds-campaign>

Ensure that migrant women, including those with no recourse to public funds, do not face discriminatory treatment which prevents them from safely escaping domestic abuse and having fair access to services.

- ▶ Expand the destitution domestic violence (DDV) concession eligibility criteria to include all migrant women who have no recourse to public funds (NRPF)³³. This will ensure that

women who are not on a spousal/partner visa can access specialist refuge. This will also go some way to meet the government's requirements to protect migrant women as outlined in the Council of Europe Convention on Preventing and Combating Violence Against Women and Domestic Violence (the Istanbul Convention)³⁴ and the UN Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)³⁵.

- ▶ Improve training for domestic abuse providers and statutory services on the immigration rights and entitlements of women fleeing domestic abuse. This would help to ensure that when survivors ask for help they are appropriately advised.
- ▶ Ensure that EEA nationals who are fleeing domestic abuse in the UK are able to access refuge spaces.
- ▶ Ensure that foreign spouses can access information about their partners' previous history.
- ▶ Ensure GPs are trained to provide introductory information about domestic violence and the support available when they register new clients who are settling in the UK.
- ▶ Review legal aid for immigration cases to ensure all survivors of domestic abuse can access immigration advice.
- ▶ Establish a 'firewall' to separate immigration control from the public services survivors seek help from, alongside safe and confidential reporting systems for those with insecure status³⁶.
- ▶ Ensure all UK Visas and Immigration (UKVI) and Home Office staff making decisions on Indefinite Leave to Remain receive independent, specialist training on domestic abuse.

Ensure that domestic abuse, from early intervention and prevention through to support, is a strategic priority within local authorities and statutory services, with robust measures of accountability.

- ▶ Monitor adherence to the national statement of expectations³⁷ and how local areas are prioritising the needs of survivors of domestic abuse, and ensure services are commissioned to meet all of their needs.
- ▶ Monitor adherence to the new Homelessness Reduction Act 2017³⁸ and the implementation of the homelessness code of guidance for local authorities³⁹, and ensure that they are working to support victims of domestic abuse.

34 Available here: <https://rm.coe.int/168046e60a>

35 Available here: www.ohchr.org/en/professionalinterest/pages/cedaw.aspx

36 Also see 'Step Up! Migrant' campaign: <https://stepupmigrantwomen.org/>

37 The national statement of expectations (Home Office 2016) outlines what local areas need to put in place to ensure their response to VAWG issues is as collaborative, robust and effective as it can be so that all victims and survivors can get the help they need. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/574665/VAWG_National_Statement_of_Expectations_-_FINAL.PDF

38 Available at www.legislation.gov.uk/ukpga/2017/13/contents/enacted

39 Homelessness Code of Guidance for Local Authorities (2018), available at www.gov.uk/guidance/homelessness-code-of-guidance-for-local-authorities

- ▶ Ensure that local housing teams provide a consistent approach to priority need across local authorities, so that victims of domestic abuse are always given appropriate support.
- ▶ Through a domestic abuse bill, ensure individuals fleeing domestic abuse are automatically considered in priority need for housing, rather than being subject to the 'vulnerability test'.
- ▶ Increase funding for training on domestic abuse for staff within statutory services.

Ensure that sufficient women-only spaces are available in emergency hostels.

- ▶ Women-only emergency hostels should be supported to have specialist training on domestic abuse and safety planning, including how experiences of domestic abuse may interact with other factors such as mental health support needs and exposure to substance use.⁴⁰

Ensure effective mechanisms and sanctions are in place to shift the onus of stopping the abuse onto perpetrators.

- ▶ Early intervention and prevention measures should ensure the police are equipped to hold perpetrators to account through effective monitoring and enforcement measures, including:
 - o Ensuring the implementation of new Domestic Abuse Protection Orders (DAPOs) which the government has proposed to bring forward within a domestic abuse bill.
 - o Ensuring that any criminalisation of breaches to new DAPOs is enforced.
 - o Ensuring that the new DAPOs allow for the removal of perpetrators from a joint home where appropriate and safe to do so.
- ▶ The police should be required to link victims directly with support services. This would need to run alongside sufficient resourcing for community-based domestic abuse support for women in this situation. This will open up more options for support and early intervention for women who are unable to (or do not want to) access a refuge.

Continue to fund the No Woman Turned Away project.

- ▶ This will ensure that survivors who face barriers in accessing a refuge space can be supported during their search by a specialist practitioner, and that the barriers to accessing support can continue to be monitored and lessons learned.

⁴⁰ Also see St Mungo's work in this area: www.mungos.org/news/st-mungos-marks-international-womens-day-with-launch-of-new-womens-homelessness-strategy/

- ▶ It will also allow Women's Aid to further build on our research and evaluation work to deepen our understanding of how best to utilise public funds to support survivors of domestic abuse.

Recommendations for local authorities

Ensure services are commissioned that will give the right response the first time round.

- ▶ Ensure that all survivors have access to community-based independent and specialist dedicated services that can provide early interventions and that are responsive to their individual needs. This report highlights the diversity of women's needs and the importance of addressing those needs through commissioning services with a needs-led and trauma-informed approach to tackling domestic abuse. This approach underpins the Change That Lasts pilots currently being rolled out by Women's Aid, building on women's individual strengths and resources to ensure sustainable safety and wellbeing for themselves and their children.⁴¹

Ensure women with language support needs can access statutory services.

- ▶ Information on the rights of survivors and support services must be available in multiple languages/formats.

Ensure that local housing and homelessness teams are abiding by the Housing Act 1996, the Homelessness Act 2002, and the Homelessness Reduction Act 2017.

- ▶ In line with these acts, housing teams must abide by their duty to help those who have become unintentionally homeless because they have been forced to leave their home as a result of domestic abuse.
- ▶ Ensure that all frontline staff are trained on the rights and entitlements to housing of survivors of domestic abuse, and that they understand and uphold them.
- ▶ Monitor how the Homelessness Reduction Act 2017 is working for survivors of domestic abuse.

Ensure that there are clear links between local strategies for domestic abuse and homelessness.

- ▶ Ensure that homelessness strategies and supported housing strategies are developed and align with violence against women and girls (VAWG) or domestic violence and abuse strategies on both a local and national basis.

⁴¹ See: www.womensaid.org.uk/our-approach-change-that-lasts

- ▶ Develop a ‘whole housing approach’ to tackling domestic abuse which ensures access to a full suite of housing options, availability of suitable move-on accommodation, and incentives for agencies and organisations to work together more collaboratively.

Increase availability of information about domestic abuse and local domestic abuse services.

- ▶ Increase advertising in local GP practices, libraries and community centres.
- ▶ Increase online presence, including on social media.

Recommendations for statutory agencies

Ensure women with language support needs are supported adequately.

- ▶ Ensure that all women with language support needs are provided with suitable interpreters.

Ensure that domestic abuse is truly ‘everyone’s business’, identifying it as a key priority area for staff training and development and a strategic priority in terms of safeguarding the well-being of local communities.

- ▶ Professionals should receive specialist training and ongoing development on the dynamics of domestic abuse (including recognising coercive control and removing a sole focus on physical abuse), and on referral pathways for women seeking support to prevent them from slipping through the net. This training should be delivered in collaboration with specialist domestic abuse organisations, such as Women’s Aid and Imkaan, with quality assurance and key points of accountability built in⁴².
- ▶ Ensure that the protection of all victims of domestic abuse is central to the response of all professionals working in statutory services who are coming into contact with victims of domestic abuse (for example, housing officers, police staff, midwives, etc). Their ability to identify and respond to survivors is crucial.

42 The Women’s Aid Change That Lasts approach includes the Trusted Professional scheme, aimed at front-line practitioners that work in the public and voluntary sector, and are likely to be in contact with survivors of domestic abuse. Building on the trusting relationship already established with survivors, the Trusted Professional scheme focuses on the non-physical, coercive and controlling signs of domestic abuse, so that these are not missed when a survivor is in contact with a Trusted Professional. In addition, Trusted Professionals are provided with a practical toolkit to support needs-led conversations to help survivors. See: www.womensaid.org.uk/our-approach-change-that-lasts/trusted-professionals-scheme/



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▲
Image by Nidhi and her teenage daughter. Even though finding a refuge space can be difficult, many survivors who took part in the research wanted to encourage other women to keep fighting for their right to be safe.

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Appendix 1:

Methodology

On Track

The No Woman Turned Away (NWTa) specialist practitioners collected data through On Track, the Women's Aid case management and outcomes monitoring system. They collected data on women's needs, demographics, outcomes, the barriers they had faced and what happened to them while they were waiting for a refuge space or other safe outcome. This data is explored in Part 1 of the report.

The specialist practitioners completed questions on women's experiences with statutory services when they closed a case on On Track, including data on local housing teams, social services, and the police. In addition to this, the specialist practitioners completed a negative capture form when there has been bad practice where they gave detail about the incident. This data is explored in Part 2 of the report.

Using On Track, the specialist practitioners also recorded the time spent on each case and the types of support they gave to women (eg advocacy on behalf of a woman, looking for a refuge space). This data was analysed in Part 3 of the report.

On Track data covers the time period 12th January 2018 – 11th January 2019.

Interviews and arts-based methods

In-depth qualitative interviews and arts-based methods added to the quantitative methods by allowing us to explore the nuances of survivors' journeys of trying to access a refuge space. Seventeen participants from three different member organisations (one of which was a specialist BME organisation) took part in these methods. The data also allowed us to obtain a more detailed understanding of what types of support are of most significance to survivors.

While interviews are an excellent way to explore the nuances of women's experiences, survivors of domestic abuse may

“I took all my
pain, all my
feeling, I took
out and put in
this project.
I feel better...
Now I can look
and think it's
in the past.”

Lasma



▲
Image by Faiza.

not always feel comfortable expressing all aspects of their – often traumatic – experiences using language. We therefore combined interviews with arts-based methods, which gave participants the opportunity to express themselves using artistic means.

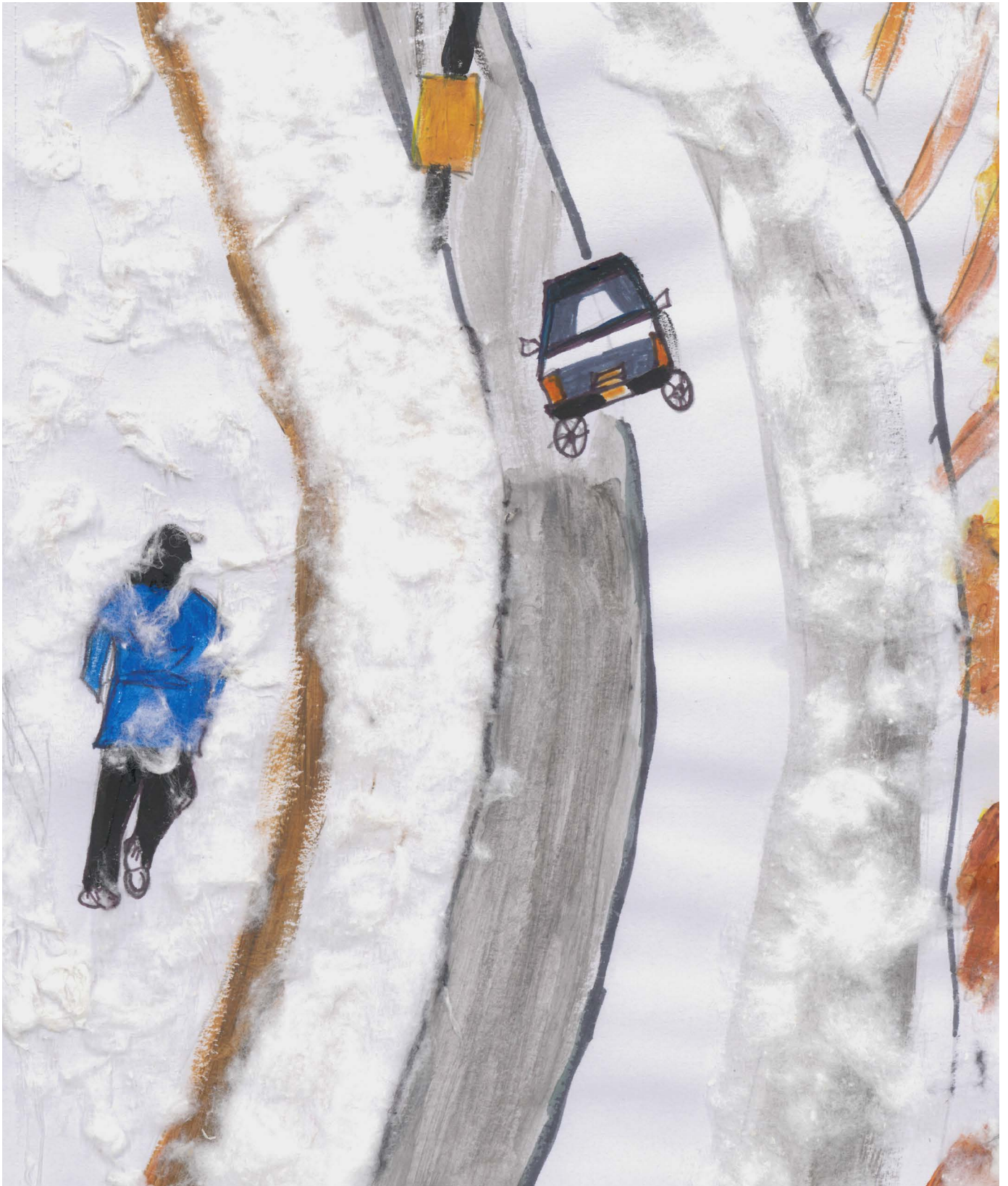
Participants produced a range of artistic outputs, including drawings, collages, photographs and poems. They did so in their own time, which gave them the opportunity to decide what they wanted to communicate and how they want to express it. To make sure survivors felt comfortable expressing themselves using art, and to therefore be inclusive, we asked participants to choose which specific method they wanted to use. In addition, we emphasised that artwork will not be evaluated according to whether it looks or sounds aesthetically pleasing, but that it is the process and the story behind the arts-based output that is of most value to the project.

The accompanying semi-structured one-on-one interviews, in which survivors discussed their artwork and their experiences of seeking a refuge space, lasted roughly between 30 minutes and two hours. Interpreters were provided where requested, and all survivors were given the phone number for the National Domestic Violence Helpline in case they required support after their interview.

Survivors were consulted throughout the research. This included a survivor survey which offered input into the methodological process, the contribution of one survivor into the analysis of the artwork, and the opportunity for all participants to review the report before its publication. Our methods may be termed 'participatory', as they involved close collaboration with participants, and researchers and participants working together to create an impact which is defined and endorsed by the participants themselves. Participatory methods are especially relevant when conducting research with those whose voices are commonly silenced, as is the case for women fleeing domestic abuse.^{43, 44}

43 See Patricia Maguire's 1987 pivotal book *Doing Participatory Research: A Feminist Approach* for further information on participatory methods.

44 See Austin, J. (2019).



▲
Image by Aisha, using cotton wool to represent snow during her journey.

Appendix 2:

Profiles of women supported by the NWTA specialist practitioners

Gender

	Number of women	Percentage of total number of women
Female	309	100.0%
Total	309	

Transgender

	Number of women	Percentage of total number of women
Yes	0	0.0%
No	189	61.2%
Don't know	27	8.7%
Declined	0	0.0%
Not asked	93	30.1%
Total	309	

Age

	Number of women	Percentage of total number of women
16-20	7	2.3%
21-30	81	26.2%
31-39	125	40.5%
40-49	48	15.5%
50-59	28	9.1%
60-69	3	1.0%
70-79	1	0.3%
Don't know	0	0.0%
Declined	0	0.0%
Not asked	16	5.2%
Total	309	

Ethnicity

	Number of women	Percentage of total number of women
White		
British	148	47.9%
Irish	1	0.3%
Gypsy or Irish Traveller	4	1.3%
Eastern European	10	3.2%
Any other White background	8	2.6%
Mixed / Multiple Ethnic background		
White and Black Caribbean	4	1.3%
White and Black African	1	0.3%
White and Asian	0	0.0%
Any other Mixed / Multiple ethnic background	4	1.3%
Asian / Asian British		
Indian	13	4.2%
Pakistani	18	5.8%
Bangladeshi	5	1.6%
Chinese	0	0.0%
Any other Asian background, please describe	10	3.2%
Black / African / Caribbean / Black British		
African	36	11.7%
Caribbean	13	4.2%
Any other Black / African / Caribbean background	7	2.3%
Other ethnic group		
Arab	10	3.2%
Any other ethnic group, please describe	6	1.9%
Don't know	2	0.6%
Declined	0	0.0%
Not asked	9	2.9%
Total	309	

Disability

	Number of women	Percentage of total number of women
Yes	76	24.6%
None	216	69.9%
Don't Know	9	2.9%
Declined	0	0.0%
Not Asked	8	2.6%
Total	309	

Type of disability

	Number of women	Percentage of total number of women
Hearing	2	2.6%
Learning	8	10.5%
Mental health	57	75.0%
Physical	31	40.8%
Visual	2	2.6%
Total number of women with a disability	76	
Number of clients with more than one disability	21	6.8%

Religion

	Number of women	Percentage of total number of women
Christian	9	2.9%
Hindu	4	1.3%
Jewish	1	0.3%
Muslim	32	10.4%
Sikh	2	0.6%
Any other religion	2	0.6%
No religion	2	0.6%
Don't know	36	11.7%
Declined	1	0.3%
Not asked	220	71.2%
Total	309	

Sexual orientation

	Number of women	Percentage of total number of women
Bisexual	1	0.3%
Heterosexual	51	16.5%
Lesbian	0	0.0%
Other	2	0.6%
Don't know	48	15.5%
Declined	1	0.3%
Not asked	206	66.7%
Total	309	

Relationship status

	Number of women	Percentage of total number of women
Cohabiting	20	6.5%
Divorced	4	1.3%
In relationship but not cohabiting	5	1.6%
Married	78	25.2%
Separated	55	17.8%
Single	115	37.2%
Don't know	6	1.9%
Declined	0	0.0%
Not asked	26	8.4%
Total	309	

Pregnant

	Number of women	Percentage of total number of women
Yes	19	6.1%
No	275	89.0%
Don't know	8	2.6%
Declined	0	0.0%
Not asked	7	2.3%
Total	309	



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