

Solace written response to the Home Office call for evidence: Violence Against Women and Girls (VAWG) strategy 2021-2024

Introduction

Solace Women's Aid (Solace) is the leading provider of violence against women and girls (VAWG) services in London. In 2020, our services touched the lives of 27,414 women, children and men. Of those, we supported 14,601 women, 94 male survivors and 1,392 children in our frontline services, and worked with 11,327 people through our prevention services.

Summary and recommendations

- 1. Domestic abuse must remain within the VAWG strategy, which should be gendered and intersectional.** All forms of VAWG including domestic abuse are a cause and consequence of women's inequality. The vast majority of perpetrators are men, and survivors women. Our 46 years of experience as one of the largest frontline VAWG services is that survivors and perpetrators do not fit into neat categories, and a snapshot audit of our data during December 2020 found that across our four core service areas of refuge, community-based services, rape crisis and counselling services survivors reported a range of forms of VAWG including domestic abuse, sexual violence, stalking and harassment, forced marriage and so called 'honour'-based violence. 14% of the type of VAWG disclosed by refuge service users was rape or other sexual offences, and 39% of the type of VAWG disclosed by rape crisis services users was domestic abuse. The Ascent Advice Plus service delivered in partnership with 13 other VAWG providers across London is publicised as a VAWG service, and as a result over 40% of the service users report a form of VAWG other than domestic abuse. The partnership also enables an intersectional response to survivors' needs, recognising the additional barriers to safety and recovery women from minority groups face and responding through referring to the most appropriate service.
- 2. The strategy should reflect the impact of the pandemic and the medium and long-term effects of the economic recession on VAWG.** Measures needed to control the spread of coronavirus have had a huge impact on VAWG and on the services supporting survivors. Emergency funding to increase capacity in the short-term has been welcome, but the strategy must address the cumulative impact of successive lockdowns on the scale of abuse survivors have been subjected to, and their trauma and mental health needs as a result. Our advice line saw a 50% increase in demand during the last quarter of 2020, our counselling services have seen a 100% increase in referrals, but we had to turn two referrals out of seven away in December 2020 because of lack of capacity. We were able to accommodate just 40% of referrals to our refuge services in December 2020, turning one third away due

to lack of capacity (rather than suitability). It has also been harder to support women and their families into move on accommodation when they are ready to leave refuge as temporary accommodation provided by councils is in increasingly worse condition and lacking basics. We have had to use crisis funding to provide over 200 women and their children with necessities like beds and white goods since the first lockdown.

- 3. The strategy should aim to ensure that every school in England is connected with their local VAWG services, and has access to expert provision of VAWG prevention education.** The aim should be for a whole school approach that goes beyond relationships and sex education lessons and support teachers, non-teaching staff, governors and parents as well. Operation Encompass is a very welcome and needed scheme to ensure schools are aware of abuse in the homes of children in their care. Most abuse however is not reported to the police. Solace currently works in schools and colleges in Haringey and Islington, where we have established relationships with local agencies and long-running VAWG services that can support referrals. Our specialist caseworker provides ongoing support to survivors who have disclosed VAWG to us as a result of the prevention programmes we have run. Women aged 26 to 35 make up the highest proportion of our service users by age, followed by women age 19 to 24. Given that the average time the women we work with live with abuse is 6 years and 4 months if we could access younger women earlier, we could reduce that time and the impact of the abuse.
- 4. The strategy should set out a goal of sharing good practice examples of effective training packages and programmes with statutory agencies and work with the Ministry of Housing, Communities and Local Government to ensure training of frontline council staff is be part of councils' local VAWG strategies.** Southwark Council commissions training to increase their housing officers' understanding of VAWG including how to identify and respond to survivors. We ran the training in October 2019, and again between September and November 2020 and, as a result, referrals to Southwark's co-located housing IDVA increased by 29% between 2019 and 2020.
- 5. A national cross-Government perpetrator strategy is needed to sit alongside the VAWG strategy, and should increase the number of perpetrators who attend a programme where appropriate.** Our perpetrator programme has proven outcomes for survivors. Of survivors who were offered linked support (as required by all Respect accredited providers) with our perpetrator programme over two years, 73% felt safer, 63% of those experiencing physical violence said it had stopped entirely, and 86% reported a decrease in emotional and physical abuse. Yet of the roughly 400 survivors who exited community-based services in December 2020, only 1% of the primary perpetrators had accessed a programme. To be effective, the perpetrator strategy should incorporate a national quality assurance system for perpetrator interventions, ensuring Respect accreditation for all programmes funded from national Government and public bodies. A national perpetrator programme should expand the range of options for perpetrators to include provision for young perpetrators, high harm and prolific perpetrators, and those perpetrating abuse outside of heterosexual relationships. We recommend a small project working with female offenders, who are a far smaller group but for whom there is little or nothing in

the way of behaviour change programmes – which should start from a place of understanding the causes of perpetrating abuse as all programmes should.

- 6. The strategy should support the development of partnership working based on models such as the pan-London Ascent Advice and Counselling and Ascent Advice Plus services, particularly in large urban areas.** The ‘hubs’ and ‘spokes’ model centralises referrals for standard and medium risk VAWG survivors into two hubs and relies on a network of 14 specialist VAWG organisations to provide an intersectional response to service users’ needs with the consistency of one caseworker advocating for each survivor. The commissioning model has also provided a medium-term sustainable funding stream for smaller organisations that are often disadvantaged by competitive tendering models but provide vital life-saving service for the communities they support. In 2015 an independent social impact report estimated that for every £1 spent on the partnership £6 of social value was created. However, it also must be noted that demand is increasing for these services and additional funding is needed to meet that need.
- 7. The strategy should commission an expansion of services designed to meet the needs of women and children and young people who have experienced multiple disadvantages.** Research by Women’s Aid Federation of England highlighted the gap in services for women with these experiences before the pandemic in their No Woman Turned Away project. We have developed expertise in assertive outreach to this group of survivors with excellent outcomes, and places in our specialist multiple disadvantage refuge are always in high demand. Over the year 2019-20, 14 rooms became available in one of our specialist refuges and we received 133 referrals for those rooms, meaning we turned almost 90% of women away. Waiting lists for the project we run for younger women are around six months. We are deeply concerned about the cumulative impact of multiple lockdowns on survivors’ mental health; problematic substance use; risk of street homelessness and other survival strategies which might include prostitution, and/ or self-harm and suicide.
- 8. The Government must adopt amendments to the Domestic Abuse Bill to extend its provisions to migrant women and the VAWG strategy should learn lessons from the innovative crisis accommodation models commissioned during the pandemic.** Migrant women with insecure migration status and women with no recourse to public funds are some of the most vulnerable women because their immigration status can be deliberately exploited by perpetrators. Fear of being reported to the Home Office and of deportation is a barrier to survivors accessing support. The emergency Covid-19 refuge set up by Solace in partnership with Southall Black Sisters has provided a lifeline, with fully funded places enabling caseworkers to support women with domestic violence destitution concession applications and support women with recourse with applications for welfare and housing support. But the refuge– funded on a smaller scale until June 2021 - is unable to meet demand, particularly for the places reserved for women with no recourse to public funds. Half of the referrals turned away from the refuge between May and November 2020 were due to lack of space for these women.

- 9. The strategy should expand services for older women and should include work with the Department of Health and NHS England to develop training and resources for GP practices health services to understand and respond to older survivors of VAWG.** Across our services around 8% of service users are aged 55 and over. Older women often face additional barriers to getting support such as mobility issues, disabilities, age related conditions and abuse from adult children. They tend to be referred to our services, including our two specialist services for this age group, through third parties including GPs, hospitals, and the police. We have found that specialist support makes it easier for them to stay engaged as our advocate recognises and works to remove the additional barriers they face.
- 10. The Government should exempt survivors aged 35 and under from the shared accommodation rate for housing benefit and the housing element of Universal Credit.** Women aged 35 and under make up 50% of our service users. One of the barriers younger women face is access to suitable housing when they have no choice but to leave their homes for safety; whether they are living with an abusive partner or their location is known by their perpetrator. Younger women without children are subject to the shared accommodation rate for under 35s. But shared accommodation for survivors of trauma is not suitable and disincentivises younger women from getting help. Some housing departments also offer younger women mixed shared accommodation, which is entirely unsuitable and potentially unsafe.
- 11. The Government should amend the Domestic Abuse Bill to include community-based services under the duty to support survivors, and ensure that accommodation-based services include dedicated support for children as well as adult women survivors.** The VAWG strategy should commit to researching the benefits of specific support for children who have witnessed (and therefore are victims of) VAWG and ensure commissioners of VAWG services also commission dedicated support for children. Of the nearly 200 children in our refuges in December, around 30% had children's services involvement, but we were able to support 97% through specific support for children and families, including family support workers, specialist child counselling and therapy and parenting workshops. Upon leaving refuge, 20% of service users with children had increased their parenting capacity and increased their understanding of the impact of domestic abuse on parenting.
- 12. The strategy should centre the experiences and needs of Black and minoritised survivors.** Survivors who face multiple forms of inequality and discrimination including because of their race and ethnicity, disability, sexual identity, gender identity, and age face additional barriers to accessing support from statutory agencies and support services. Specialist VAWG services run by and for the communities they support have been disproportionately hit by cuts made by councils and other commissioners over the past ten years. The pandemic has impacted some groups more than others, with higher health and economic impact among Black and Asian communities and Disabled people. The additional trauma and needs of these groups should be reflected in the VAWG strategy.

- 13. The VAWG strategy should prioritise accessibility of services for Deaf and disabled survivors and fund specialist services to provide support directly and to capacity build in areas where no specialist services exist.** Across the Ascent and Ascent and Advice Plus partnership around 9% of survivors disclosed a disability, yet 16% of working age people are estimated to have a disability and 45% of adults over state pension age. In addition, studies have shown that disabled women are twice as likely to experience domestic abuse and twice as likely to be raped or sexually assaulted compared to non-disabled women, so it is clear that disabled women, who are at greater risk of VAWG, are not accessing the support services they need.
- 14. A victim led response and an understanding of perpetrator behaviour must be embedded in the strategy's approach to criminal justice responses.** Not all survivors want to pursue a criminal justice response, which is why a national perpetrator strategy is crucial. However, the drop in prosecutions and convictions for VAWG crimes is a failure of the state to uphold women and girls human rights, and reflects the experiences of survivors who do pursue charges and who are too often left retraumatised by the experience. MOPAC's London Rape Review found that victim withdrawal from cases is one of the biggest reasons for the attrition of rape cases from allegation to conviction, yet survivors continue to be undermined and discredited by some police forces, reporting to our IDVAs and ISVAs that alleged perpetrators of abuse exert influence over the police to undermine their credibility.
- 15. The Domestic Abuse Bill and VAWG strategy should ensure that survivors are given the highest banding/points so that their priority housing status translates into provision of a new home.** We remain concerned that given that housing officers are not fulfilling existing duties in all areas the new laws will not help as many women and children as they should. Under the Homelessness Reduction Act 2018, the prevent and relief duties of local authorities should have improved survivors' experiences of making a housing application when made homeless through domestic and sexual abuse. We conducted research over the summer of 2019 including a survey of around 100 women, and found that 30% of women seeking shelter were turned away six times or more; 53% of women who had secure tenancies lost them after fleeing abuse and 62% of those seeking help from a local authority had a bad experience.
- 16. The strategy should commit to the Home Office working with Ministry for Housing, Communities and Local Government to ensure that there is sufficient social and affordable housing available to support councils to meet the duty in the Domestic Abuse Bill.** There are some councils that have demonstrated real leadership in supporting survivors of VAWG and have excellent practice. But the scarcity of social and affordable housing in London had also led to housing officers in many areas increasingly gatekeeping and at times gaslighting rather than supporting survivors. Women making applications to housing departments have been told to return to perpetrators by housing officers; they have had the police called to verify their description of events; and some have even had perpetrators called directly by housing officers, putting them in greater danger.

17. The strategy should commit to the Home Office working with the Department for Work and Pensions to exempt survivors of VAWG from the benefit cap and lift the local housing allowance to at least 50% of the median for the area.

Women made homeless through VAWG are more likely to be the primary carers for children and their housing needs tend to be greater than men's in terms of the number of rooms they need and the need for proximity to schools and nurseries as well as their support networks. The local housing allowance at 30% median market rates sets women up to fail, particularly those who have been subjected to financial and economic control and continue to experience post-separation abuse. In December 2020, 37% of women leaving Solace refuge services moved into private sector accommodation; 15% into temporary accommodation and 11% into social housing. Our IDVAs and caseworkers report that rent arrears is one of the biggest challenges to women moving on from crisis, and fear of homelessness is one of the greatest barriers to survivors escaping domestic abuse and VAWG.

18. The strategy should include a range of accommodation models to support survivors needs. Move on accommodation with continued specialist support has been a big gap in services for the women we support in refuges, and for survivors who need their own units but need intensive support such as the women we support through our Amari and Rhea projects. Ideally there would be a range of accommodation options for survivors, including short fully-funded refuge accommodation with intensive support like the covid-19 emergency refuge; standard refuge accommodation for five months, move on accommodation in independent units in partnership with councils and housing associations to make them affordable, and long-term secure accommodation to provide the safety and security for survivors and their children to recover.

19. The VAWG strategy should provide a national multi-year funding settlement for the specialist VAWG sector, delivered by all government departments responsible for VAWG – including ring-fenced funding for specialist VAWG services including those led 'by and for' Black and minoritised women, Deaf and disabled women and LGBT+ survivors. Competitive tendering models disadvantage specialist services and in particular many of the smaller organisations we work in partnership with to provide specialist expertise, because they do not have the capacity to submit multiple funding bids and because they provide services by community need rather than covering a geographical area. The competitive tendering model also incentivises a race to the bottom on quality of service, losing the specialist VAWG expertise survivors need to large non-specialists including housing associations and non-VAWG charities. We would like to see an end to competitive tendering and a move towards values-based commissioning from national, regional and local commissioners.

20. The strategy should set out that the Domestic Abuse Commissioner's needs assessment will be wider than domestic abuse, encompassing all forms of VAWG which, as we have evidenced, also affect domestic abuse survivors. The strategy should focus on embedding and expanding best practice, and only fund new services or programmes where there is a gap for survivors. There are numerous projects and programmes that have been evidenced to be effective at improving

outcomes for survivors and lessons should be learned from the wealth of existing evidence.

As well as the recommendations set out above, Solace also supports the Joint Principles for the VAWG Strategy 2021-24, put together by a number of specialist VAWG organisations. The principles are set out in full here: <https://www.endviolenceagainstwomen.org.uk/wp-content/uploads/Joint-Principles-for-the-VAWG-Strategy-2021-2024-1.pdf>.

Section one - Scope, scale, and prevalence of VAWG

The need for a VAWG strategy inclusive of domestic abuse

This submission covers all forms of VAWG as experienced by our service users and is informed by the breadth of services we provide and the expertise of our workforce. We welcome the invitation to provide evidence on all forms of VAWG experienced by the survivors we work with.

However, we reiterate in the strongest terms the objections that have been made to the Home Office about separating domestic abuse from other forms of VAWG as a backwards step to the years of progress made to understand and treat all forms of VAWG as cause and consequence of women's inequality and to recognise that perpetrators' crimes and survivors' experiences do not fit into neat categories. It is simply not possible to separate domestic abuse from other forms of VAWG and in so doing the Home Office risks creating discriminatory hierarchies of provision. Black and minoritised women and girls disproportionately experience forms of VAWG not defined as domestic abuse. These false distinctions will put barriers and unnecessary red tape in the way of intersectional and effective responses to VAWG because national strategies inform funding and commissioning practices.

Solace has been established for 40 years, and our services have grown and expanded in that time in response to the needs and experiences of the survivors we work with and for. Our experience is that the disclosures made by survivors when they first access our services usually only tells part of their story. Survivors' understanding of their own experiences, their trauma and their needs can change over time and it is because of the breadth of services and partnership working Solace provides that we are able to respond to those changing needs. In addition, there are intrinsic and important links between the forms of abuse perpetrators carry out, with stalking and harassment linked to domestic homicides for example.

The need for a gendered and intersectional strategy for domestic abuse and VAWG

Further, it is crucial that domestic abuse and violence is recognised as a gendered crime within the VAWG framework because it is – as with other forms of VAWG – a cause and consequence of women's inequality. Domestic abuse when carried out by men towards women and girls or by family or community members in the name of 'honour' is an expression of male power and dominance that is learned early and perpetuated through society's systems and structures. It is at the extreme end of a spectrum, on which sexual harassment and threats of violence towards women also sit. The misogyny, often intersected

with other forms of hatred and discrimination such as racism, anti-Semitism and ableism, that is targeted at women and disproportionately women from minority groups who speak out on social media on public platforms, is intrinsically linked to the controlling, manipulative and violent behaviour perpetrated by abusers in intimate relationships with women, whether as partners, family members, or child to parent.

The Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence 2011 (Istanbul Convention) recognises violence against women as a violation of human rights and a deprivation of liberty. A coordinated strategy to end VAWG must be grounded in the UK's commitment to human rights, and obligations to take positive action to prevent and protect women from violence. Delivering equal access to rights and entitlements for all women and girls must be a fundamental principle within the VAWG strategy.

The fear and lived experience of male violence limits the life of every single woman and girl. The vast majority of abuse and violence experienced by women is perpetrated by men and normalised by society, media and popular culture. We work with male victims and are supportive of specialist provision for them, but the approach should be different and proportionate, whether as a separate statement or a male victims strategy. While we recognise the under-reporting of domestic abuse and sexual violence by men, of the 14,695 adults we supported in our services in 2019-20, 96.3% were female and fewer than 1% were male.

We also recognise the needs of LGBT+ survivors of intimate partner abuse and violence and support Galop's recommendation for the Home Office to publish a position statement on support for LGBT+ survivors alongside the VAWG strategy. LGBT+ survivors face additional barriers to accessing support including perpetrators threats to 'out' them, and facing discrimination from services and service users in standard VAWG services. Evidence on the extent of violence and abuse faced by LGBT+ survivors varies, though for most groups it is estimated to be at least as high as in heterosexual relationships, and higher for transgender men and women.

Women and girls are currently not all treated the same, so how they experience violence – and access support, safety and justice – is not the same either. Their experiences differ according to their background, access to resources, the sectors in which they work and many other factors that define their participation in society. Some women are affected disproportionately due to their race, ethnicity, sexuality, gender identity, disability, age, class, immigration status, caste, nationality, indigeneity, and faith.

Case study

Amina is 18 years old, she is British Indian Muslim who was living with her mother and her 4 younger stepsiblings, her father lived in Tanzania and she has no relationship with him. She was referred to Solace by her college wellbeing advisor for help to leave the abusive family environment.

Amina disclosed that her mother only allowed her to go to college and home, she withheld her passport, she tracked her college emails, she threatened to send Amina to Tanzania, threatened to get her boyfriend arrested, and made threats to kill and to throw acid on her.

Her mother and grandmother talked to her about getting married to someone she didn't want to marry. She reported that her mother had beaten her with a wooden cooking stick when she found out about a previous boyfriend 3 years ago. Amina and her caseworker made a safety plan and Amina said she was ready to leave. Finding a refuge space was a challenge as there were very few single spaces available and they were too close to the danger areas.

Despite good cooperation between the college, the police, MARAC and our caseworker, the council housing department did not make an offer to support Amina. Our caseworker sent them the Government's guidelines to local authority on forced marriage but they did not provide emergency accommodation for Amina as they were obliged to do. A refuge place was found but was not ready for the when the police escorted Amina from her family home as arranged, so Solace funded hotel accommodation until it was ready.

To achieve the Government's aim of eliminating VAWG for all women and girls the new strategy must centre women and girls who experience sexual violence, forced marriage, so called 'honour based' abuse, FGM and other culturally specific forms of abuse, and tackle the systemic barriers facing Black and minoritised women, migrant women, Deaf and disabled women, LGBT+ survivors and women facing multiple forms of disadvantage. For too many of these women, as outlined in section four, there are currently gaps in services and specialist by and for Black and minoritised women's services have been decimated over the past decade, increasing the barriers.

Scale of VAWG and the impact of Covid-19 restrictions

The impact of Covid-19 and associated restrictions cannot be overstated in relation to the scale of abuse and violence victim survivors have been subjected to; the ways in which they have been able to access support (or not); the impact it has had on survivors' mental health and the long-term impacts it will continue to have as a result of the trauma experienced under lockdowns. The double dip recession and job losses caused by the pandemic also create the conditions association with an increase in VAWG. We have provided some evidence from our 'business as usual' operating conditions, as well as highlighting additional needs resulting from the pandemic that will continue beyond the lifting of restrictive measures.

Advice and counselling

Solace runs its own advice line for survivors of domestic abuse, sexual violence and any other form of VAWG, taking calls directly from survivors and as part of the pan-London Ascent Advice and Counselling and Ascent Plus partnership (Ascent).

Over eight years we have supported 63,096 people, averaging at close to 8,000 individual survivors a year. The number of service users the partnership is contracted to support is based on an estimate of need by each London borough, taken from police and crime data. The current contract covers 2017-2021 is funded to support around 21,800 service users in total over the four-year period.

The rise in demand can be seen for these services through:

- The advice service saw a 50% increase in demand during the last quarter of 2020, with an increase in both calls and emails from survivors and professionals to the service.
- The cumulative number of service users supported through Ascent between 2017-2021 is currently 24% higher than profiled at around 26,900, with the last quarter still to complete and report.

The calls we have been receiving in recent months and throughout the pandemic through our advice line, echoed by other organisations in the Ascent Advice and Counselling partnership, are often from women in greater distress and with higher needs, including an increase in suicidal ideation. Someone who may have called their caseworker on a weekly basis is now calling daily for support.

Referrals to our counselling services have seen a 100% increase and several of our partners have had to close their waiting lists meaning there is a significant backlog in people needing support (even before any restrictions are lifted and any potential surge in contact that may lead to). One of our partners reported that the usual waiting time for counselling is 8-12 weeks, but the waiting time has increased to 20 weeks since the beginning of the COVID-19 pandemic. Although partners are working hard to process referrals and reopen waiting lists, additional funding and capacity would be required to resolve this issue across the partnership and to meet the need of those who are not even able to be added to the waitlists.

Across the services Solace delivers directly, we supported 14,695 adults including 94 male survivors, and 1,392 children in 2019/20. Spikes in calls to our own advice line and referrals to services have fluctuated since the first spike just before the first lockdown commenced. We experienced a second increase when restrictions lifted in April but it was not sustained over the summer months. However, we saw a 30% increase in calls between August and September, indicating that children going to school may be a window of opportunity for survivors to seek help. Without additional resources for the spikes more calls go unanswered. During July and August 2020 we were able to answer around half of all calls received while the line was open, this dropped to 40% during September.

Refuge and accommodation services

The week before March 2020 lockdown was announced we were receiving around two referrals for every one refuge space but by the time survivors had been locked down for four

to five weeks enquiries spiked, and we were getting around four enquiries for every one refuge space that became available. Data from our audit show that in December 2020 we were able to accommodate 40% of referrals to our refuges. Of those we turned away, one third were down to lack of space and capacity rather than suitability for the survivor.

Successive lockdowns have also made it harder to find appropriate move on accommodation for women leaving refuge. In 2020, 70% of women Solace supported had a housing need and 41% of women leaving Solace refuges have been placed in temporary accommodation (excluding those who have moved to family and friends which may also be temporary). When we support women to move on from refuge including in temporary accommodation provided by councils, increasingly they are moved into empty and unsuitable housing. We have had to use crisis funding to provide over 200 women and their children with necessities like beds and white goods.

Digital exclusion

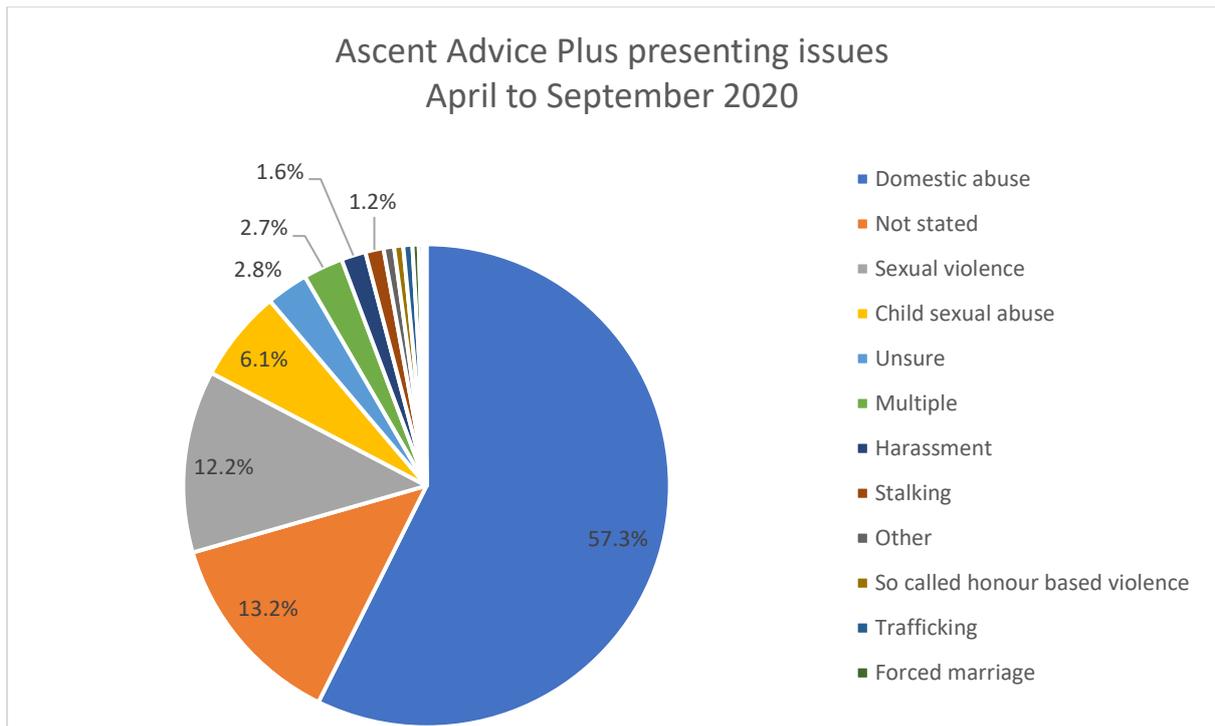
In order to comply with social distancing requirements, many statutory services have rapidly moved online and vastly reduced or completely removed in-person appointments and face to face support. Our community-based advice and support teams have found it particularly challenging to assist survivors with applying for support including housing applications and benefits online because they do not have access to either the necessary devices or the digital skills or both.

The move to majority online or telephone appointments of primary healthcare also impacts survivors' ability to access services in privacy, limits opportunities for disclosure and limits opportunities for healthcare professionals to notice signs of abuse and violence. Older survivors in particular are more likely to make disclosures to GPs than other referral routes, and are more likely to experience digital exclusion.

With an expectation that everyone will make at least some of the move online more permanent, the Government should ensure that the VAWG strategy recognises and addresses the need for survivors facing digital exclusion to access services through face-to-face appointments and paper forms.

Type of VAWG

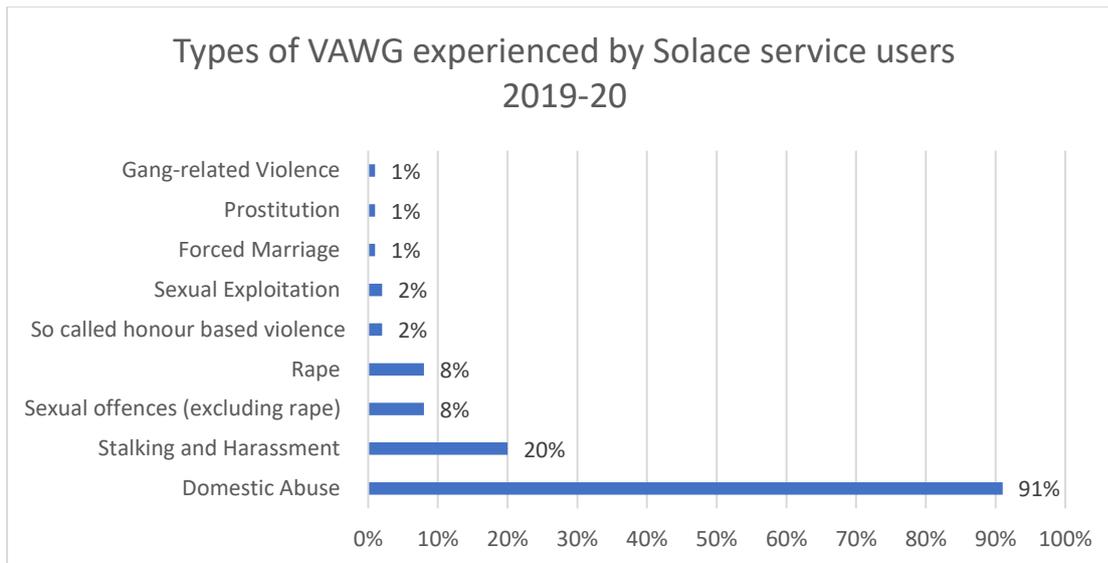
Data from the advice services we provide through Ascent Advice Plus show that while the majority of services users initially disclosed their experience of domestic abuse, over 40% had experienced another form of VAWG, child sexual abuse, or not specified, including 12% who presented with support needs for sexual violence and 6% for child sexual abuse. While close to 3% of referrals presented with experience of multiple forms of VAWG, our experience is that this increases over time once survivors begin their sessions with a case worker. When initially engaging with services, survivors may only disclose some of their experiences and go on to disclose other forms of abuse or violence subsequent to the initial contact.



It is also important to note the proportion who did not state the issue or were not sure. These advice services are publicised as VAWG services rather than domestic abuse services, and some partners specifically reference eligibility for support with historic abuse. Survivors are therefore able to get in touch without necessarily knowing or being sure of what type of abuse they have experienced or that what they have experienced was in fact abusive.

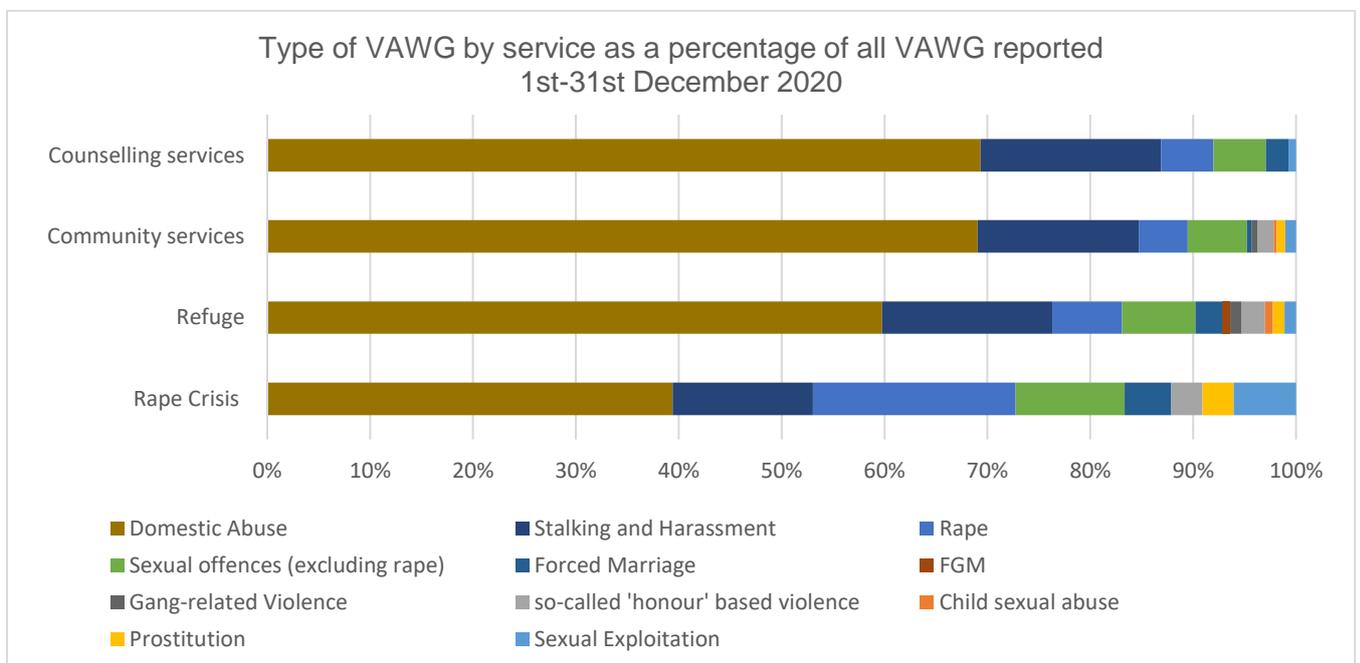
As with Ascent, the data we initially record across our direct services does not always capture the full picture in terms of the experiences of VAWG survivors have been subjected to. The data we have on the types of VAWG experienced by Solace service users shows that service users experienced the following types of VAWG and abuse during 2019/20¹.

¹ The total is over 100% because it is by type of VAWG and not individual.



Again, while the data generally underestimate the extent of VAWG number of service users have experienced, it does demonstrate the overlap between domestic abuse – which 91% of Solace service users have experienced, and other forms of VAWG, particularly rape and other sexual offences.

To get a more accurate picture, we conducted a data audit of type of abuse experienced by survivors who accessed our services for the month of December 2020. Each type is presented as a percentage of all VAWG or abuse experienced (not of all services users).



As expected, our audit found an even greater overlap than initially reported to services, and a huge overlap in the type of abuse experienced by survivors, which affects the way specialist services and agencies should respond to them in supporting them with safety planning and recovery. In all four of the core services we audited, domestic abuse, sexual offences and rape, and stalking and harassment are the most prevalent forms of VAWG

experienced by our service users, with some variation between the services but not as much as might be assumed. Survivors of forced marriage, so-called 'honour' based violence and prostitution also present across our services. The evidence clearly demonstrates the need for a joined up VAWG strategy, and not a separation between domestic abuse and other forms of VAWG and abuse.

Section two: Activity to aid prevention, including examples of successful prevention programmes and how they could be expanded.

Prevention programmes are vital to combat prevailing gendered expectations and stereotypes that create the conducive context for VAWG, and to teach children and young people about healthy relationships, consent and safety planning. Not only do educational programmes challenge damaging messages as a preventative measure, they can also help identify and intervene where children and young people are in abusive or exploitative situations. For programmes to effect change long-term, they should be part of a 'whole school approach', supporting and training teachers and parents as well as the children and young people.

Solace currently works in schools and colleges in Haringey and Islington, where we have established relationships with local agencies and long-running VAWG services that can support referrals.

The POW project has been running for five years, and is an interactive educational training programme focused on raising awareness of 8 strands of VAWG. POW usually takes place over ten weeks and is delivered at KS3 and KS4 (with different age-appropriate content for each) in schools and youth clubs and meets the Department for Education's current relationships and sex education guidance. The outcomes we aim for and consistently achieve are that:

- Young people can identify all eight types of violence against women and girls and are aware of situations where someone may be at risk of violence.
- Young people are confident in safely challenging someone's abusive behaviour.
- Young people understand the legal implications of each type of violence.
- Young people are aware of suitable sources that offer support after abuse.

As a result of disclosures made in previous school programmes, our POW worker continues providing advocacy support to three individual cases who have been impacted by abuse they witnessed or experienced. She currently provides support to individuals through online Zoom meetings while also liaising with allocated social workers, key workers, and school practitioners.

The work that Operation Encompass is doing to connect the police to schools is a very welcome and needed scheme to ensure schools are aware of abuse in the homes of children in their care. Most abuse however is not reported to the police. The refreshed VAWG strategy should aim to ensure that every school in England is connected with their

local VAWG services, and has access to expert provision of VAWG prevention education, ideally with a whole school approach that goes beyond relationships and sex education lessons and support teachers and parents as well.

A key gap in prevention work with children and young people is intervention to work specifically with boys and young men who present with signs of, or who demonstrate, actual abusive behaviour. When girls and young women disclose abuse there are (limited) services that work specifically with younger aged women providing advice, support and counselling. Perpetrator programmes designed for men would not be suitable for young men and boys, particularly those not actively acting out abuse but showing signs that could develop into abuse. Alongside the new VAWG strategy a national perpetrator strategy is needed, and as part of the strategy the Government should look to fill the gap for younger perpetrators with a trauma-informed approach that recognises the prevalence of abuse in perpetrators' histories.

Training for statutory agencies and services can also be an effective prevention tool, especially when incorporated into a local VAWG strategy. We provide core training on understanding and responding to domestic abuse, as well as creating bespoke training packages in response to need based on the experiences of our service users. A good example of effective training is Southwark Council, which commissions a housing IDVA to support their housing team as part of their local VAWG strategy. They also commission training to increase their housing officers' understanding of VAWG including how to identify and respond to survivors. We ran the training in October 2019, and again between September and November 2020 and as a result referrals to the housing IDVA increased by 29% between 2019 and 2020. The VAWG strategy should share good practice examples of effective training packages and programmes with statutory agencies.

Section three - Evidence on perpetrators including who commits VAWG crimes and what works to stop them.

Focus on perpetrators is important for several reasons. Interrupting patterns of abuse and changing beliefs and attitudes can reduce the number of people subjected to abuse and improve the lives of both survivors and perpetrators. It is also vital to have alternative responses to the criminal justice system, which some survivors do not want to pursue.

Solace Domestic Violence Prevention Programme (SDVPP) is for people who have had a history of being violent or abusive towards a partner or family member and are willing to work to change this behaviour. The main objective of the programme is to increase safety for victims and children through reducing perpetrator's abusive behaviours. The service is open to all perpetrators of domestic abuse, regardless of sexuality or gender, the majority of attendees are men who are abusing current or ex-partners. We currently undertake this programme in Southwark and are about to expand to Bexley.

Men attend a 26-week rolling group programme; there is also the option of one-to-one work where attending a group isn't appropriate. Victim/survivors of attendees are offered support via a linked partner service, this includes advocacy, safety planning and an update on his progress through the programme. This year the perpetrator programme helped 23 men to

address their abusive behaviour and the partner service supported 36 associated victim/survivors.

Over the last two calendar years (2019 and 2020), outcomes for survivors who were offered linked support included:

- 73% felt safer;
- Where there had been physical violence 63% reported that it had stopped entirely and a further 28% reported that prevalence and/ or severity of physical violence had decreased;
- 86% reported that emotional and psychological abuse had decreased or stopped by the time they exited our services; and
- 63% had improved health outcomes, predominantly mental health such as reduction in anxiety, reduction in self-harming and improved coping skills.

Perpetrator programmes won't work for all perpetrators, but particularly where survivors want to maintain a relationship with them and including where there are children involved, they should be available to all commissioners as part of their local or regional VAWG strategy. At the moment there is a postcode lottery with most areas offering a limited programme or nothing at all. Our audit of data on outcomes for the roughly 400 survivors who exited our community-based services in December showed that only 1% of the primary perpetrators of abuse had accessed a perpetrator programme. A national perpetrator programme should expand the range of options for perpetrators to include provision for young perpetrators, high harm and prolific perpetrators, and those perpetrating abuse outside of heterosexual relationships.

Finally, while far fewer in number we do see female perpetrators of VAWG and male victims, and there is emerging evidence that the motivations and triggers are different to male perpetrators. We would welcome a commitment to commission a small research project, proportionate to the level of offending by women, into working with female perpetrators, as part of a national perpetrator strategy. More broadly the perpetrator strategy should recognise the value of the full range of options of working and intervening with perpetrators including criminal justice, civil remedies and behaviour change programmes, sometimes in combination.

Section 4 - Services and support for victims, including best practice (which could be expanded), and areas where service provision is inadequate or absent.

Best practice examples and gaps in provision

Ascent Advice and Counselling and Ascent and Advice Plus

Through two hubs one each in East and West London led by Solace and the Women and Girls Network respectively, Ascent takes calls and emails directly from survivors as well as referrals from agencies including local authorities, health services, the police and social

services². The hubs work with 'spokes' across London to provide further services and support that will best meet survivors' needs including practical advice and support to engage with statutory agencies; immigration advice and support; advice and support assessing risk and forming safety plans; referrals to refuge or other accommodation services and local housing authorities; and one-to-one and/ or group counselling. Since January 2020, MOPAC has provided additional funding for Ascent's advice casework and to extend the partnership (under 'Ascent Advice Plus') to fund support for survivors provided by Galop (LBT women), Stay Safe East (Disabled women), Sign health, and Respond (learning disabled and/or autistic women).

The strength of this model is that there is ability for consistent access to services across London and the range of expertise and 'by and for' organisations within the partnership means we are able to support survivors' needs with an intersectional response. The commissioning model has also provided a medium-term sustainable funding stream for smaller organisations that are often disadvantaged by competitive tendering models but provide vital life saving service for the communities they support. In 2015 an independent social impact report estimated that for every £1 spent on the partnership £6 of social value was created.

For the year 2019-20 the partnership assisted 7,860 new users to access advice, counselling and support;

- Approximately 13,000 individual counselling sessions were delivered, enabling women to have increased self-esteem, confidence and wellbeing in order to move towards independence;
- 7,311 users received 1-1- advice, advocacy and casework support;
- 16 women with no recourse to public funds were assisted with accommodation and living expenses to enable them to be safe after fleeing violence/ abuse.
- 1,988 women accessed legal advice and/or had an increased understanding of the law and their rights following abuse.

As a result 4,509 service users reported reduced fear/ greater feelings of safety with over a third of service users having put in place a safety plan (cumulative total), and 2,629 women reported improved self-esteem, motivation and confidence to rebuild their lives.

We recommend this model for other large urban areas that have a reasonable range of VAWG services including specialist 'by and for' services for different groups of survivors, although the model can work well for capacity building as well. In normal times, caseworkers from the partnership would deliver services from locations in-borough, such as children's centres. This kind of flexibility could be useful in less densely populated areas as well as large urban areas.

However, counselling and therapeutic services desperately need more resource now more than ever. Our data audit for December 2020 showed that of the seven referrals to Ascent

² Ascent Advice and Counselling is undertaken by the following specialist organisations: Asian Women's Resource Centre, Ashiana Network, Chinese Information and Advice Centre, EACH Counselling and Support, IMECE Women's Centre, Iranian and Kurdish Women's Rights Organisation, Jewish Women's Aid, Latin American Women's Rights Service, Nia, Rape and Sexual Abuse Support Centre, Rights of Women, Southall Black Sisters, Women and Girls Network (all members of the London VAWG Consortium).

counselling services, one was accepted to a waiting list and the rest were turned away due to lack of space or capacity. During the same period Solace also received seven referrals to our borough-commissioned counselling services and could only accept three and add two to our waiting lists.

Multiple disadvantage services

Research by Women's Aid Federation of England highlighted the gap in services for women with experiences of multiple disadvantages before the pandemic in their No Woman Turned Away project³. Our audit of refuge data found that we were unable to accommodate around 6% of referrals in December because we were unable to meet survivors' support needs around drug and alcohol or around mental health. This is likely to vastly underestimate the real number, as most agencies are aware of the challenges of supporting this group in standard refuges and would not refer them in the first place.

We support this group with several innovative projects including support for women who have experienced street homelessness or are currently street homeless. There is well-established evidence that the number of street homeless women is likely to be significantly underestimated by the existing calculation methods, and there is also evidence that VAWG including domestic abuse, sexual violence and sexual exploitation is near universal among this population. In London, the CHAIN database captures data on people sleeping rough and is used by multiple agencies. Around 17% of people on CHAIN are women, but homeless women are known to engage less with agencies or services that support street homeless people as they are usually gender-neutral and so not safe for vulnerable women. Research commissioned by Crisis in 2006 surveyed 144 single homeless women across English towns and cities and found that 60% of respondents had slept rough but only 12% had engaged with a rough sleepers' team.

Solace Housing First Islington is the first project of its kind to be run by a specialist VAWG provider, whereby Solace provides the specialist support to this group of women and initially Fulfilling Lives Islington and Camden (FLIC) allocated and managed the flats, though we do this now. Four out of the five women in the project identified by the Islington Multi-Agency Risk Assessment Conference (MARAC) as repeat, high risk women who did not engage with other services have maintained safe, secure accommodation as a result of the project. Since August, we have also been funded for a Housing First Project in Westminster, in partnership with Standing Together Against Domestic Abuse and several housing associations. Eight out of the eleven women we worked with in the first year of this project have been able to maintain tenancies after many years of rough sleeping.

The Women's Safe Engagement and Recovery (WiSER) project targets women who find it very hard to access/engage with support and who are facing severe and multiple disadvantage. The project is delivered in partnership with Against Violence and Abuse (AVA), Fulfilling Lives Islington and Camden (FLIC), Hopscotch, IMECE Women's Centre, Nia and Women at the Well using assertive outreach in a trauma and psychologically informed way. This means that support workers will go to wherever the women are to work

³ <https://www.womensaid.org.uk/no-woman-turned-away/>

with them, at times that are achievable for them. That could be a café in the evening or on a bus at the weekend.

Across the first two years of the project, WiSER supported 54 women, nine of whom were supported for two years and the rest for up to a year. All of the women had experienced at least three of the following forms of severe and multiple disadvantages in addition to VAWG:

- homelessness,
- substance misuse,
- mental ill-health,
- physical health issues,
- insecure or uncertain immigration status,
- affected by or at risk of prostitution,
- history of offending behaviour,
- history of children being removed from her care and/or at risk of further removals.

In total, 78% of the woman supported by WiSER over the two years were supported into safe housing; 37% were supported to access mental health or counselling services; and 72% were supported to access drug and alcohol services. In addition, the number of women who reported self-harming at least some of the time reduced from 41% to 29% in the first year, and from 27% to 9% in the second year. The number who were in contact with a perpetrator fell from 83% to 38% in the first year, and from 52% to 27% in the second year. Across both years, the number of women able to set boundaries in their relationships increased from 38% to 69%.

Case study

Nira was referred to the WiSER project by a Solace IDVA, because she needed more support than the IDVA was able to provide within her caseload. Nira is of Indian Hindu heritage. She has a history of childhood trauma, mental health issues and drug addiction since age of 15. She married via an Islamic ceremony and converted to Islam aged 18 when she met the father of her first child. As a consequence her family disowned her. All of Nira's 4 children (3 sons and 1 daughter) have been removed from her care by children's social care due to concerns around her drug use, mental health and vulnerabilities around exploitative relationships.

Nira has diagnoses of depression, post-traumatic stress disorder (PTSD), obsessive-compulsive disorder (OCD) and emotionally unstable personality disorder (EUPD). She has smoked heroin and crack cocaine for a number of years, however she had a period of 7 years prior to the birth of her daughter where she was free from drug use. Nira does not feel safe in her current accommodation provided by a housing association as her current perpetrator lives in the set of flats next door her to building.

Since Nira was referred to WiSER, her advocate has built a trusting relationship with her and supported Nira to engage with her support network including her outreach support worker, psychiatrist, GP, housing officer, substance worker, adult social care worker, children's social care and sexual offences investigation trained officer. In September 2020, having reduced her use of drugs sufficiently through a methadone prescription, Nira's advocate physically accompanied her to a residential rehabilitation centre where she stayed until October 2020. Her advocate was able to arrange a sanctuary scheme for her home to make her feel safer when she came out, and has supported Nira to face up to and begin managing her debts. The non-judgemental and trauma-informed approach of the advocate has meant Nira has been able to learn and understand more about the impact of trauma on her life, reduce her patterns of self-blame, and start thinking about manageable coping strategies, goals, and activities she enjoys.

Our specialist multiple disadvantage refuge in Camden has eight rooms and offers 24-hour support to women with mental health needs and problematic substance use, we have one space for women with no recourse to public funds. The average length of stay is between nine and twelve months, compared to an average stay of five months in our other refuges. When women leave the specialist refuge, most go on to access other types of supported accommodation or accommodation with community support. Demand for the specialist refuge places is high. Over the year 2019-20, 14 rooms became available and received 133 referrals for those rooms. That means we are forced to turn away nearly 90% of the referrals we receive for the specialist refuge, and that was before the pandemic. We are deeply concerned about the cumulative impact of multiple lockdowns on survivors' mental health; substance misuse and other survival strategies which might include self-harm and suicide attempts.

We would like to see the next VAWG strategy address the increased complexity of survivors' needs by expanding services that are designed to meet the needs of women who have experienced multiple disadvantages, and for the Home Office to work with the Ministry of Justice on its female offender strategy; with the Ministry for Housing, Communities and

Local Government on its ending homelessness strategy, and with the Department of Health and Social Care and NHE England on the long-term plan for mental health provision so that they reflect the experiences and needs of women who have experienced VAWG.

Covid-19 Crisis Project and migrant women

Across our services we supported 444 women with no recourse to public funds in 2019-20 including supporting 130 women through our immigration service. There is always greater need for the limited number of refuge places we are able to offer this group of survivors, who are some of the most vulnerable women because their insecure migration status can be deliberately exploited by perpetrators.

With funding from the Mayor of London and the Julia and Hans Rausing Trust, Solace worked in partnership with Southall Black Sisters (SBS) to set up an emergency refuge providing crisis accommodation with specialist support to women and children fleeing domestic abuse and other forms of violence against women and girls (VAWG), across London during the Covid-19 pandemic. This was in response to the spike in need for crisis accommodation following the Government announcements about lockdown in March 2020. Specialist support was provided by SBS for women with no recourse to public funds.

The refuge was able to support a set number of women with no recourse to public funds over the course of the first contract and there was particularly high demand for those places. Between May and November 2020, the project turned 60 referrals away due to unsuitability. Half – the biggest reason - were due to lack of space for women without recourse to public funds. The next biggest reason was because the women's mental health needs were too great to be managed safely at the refuge. The crisis project has been funded by MOPAC to continue at a reduced scale until June 2021, with resettlement support for women to move on from the crisis period and one-third of the units for women with no recourse to public funds. We continue to turn women with no recourse to public funds away because need is greater than capacity.

Unlike most refuges, supported accommodation or other housing projects to support women and children made homeless through VAWG, the crisis project has been fully funded and not therefore reliant on women accessing housing benefit or universal credit to fund the accommodation element. This gives us the time to work with women who have recently taken the courageous and dangerous step of fleeing an abuser to build trust and allow her to breathe. We can then begin the process of supporting her through bureaucratic and complex systems to apply for financial support and move on accommodation, bearing in mind that coercive and economic control is a common feature of domestic abuse and this can be the first time women have to take control of their finances. The wholly funded model also made it more straightforward to support women with no recourse to public funds to make domestic violence destitution concession application and/ or support to regularise their migration status.

We would like to see other short-term crisis accommodation funded on a similar model. The Ministry of Housing, Communities and Local Government should work together with the Department for Work and Pensions to make this possible (transferring the welfare cost of supported accommodation to fund the whole project).

The Home Office must also adopt amendments to the Domestic Abuse Bill that would extend protections of the Bill to all migrant women, in recognition of their particular vulnerability to exploitation and abuse, so that we and other support services can support them and they can get help without fear of immigration controls or homelessness. There is no need for more research, as Southall Black Sisters, Latin American Women Rights Service and others have stated, there is a wealth of evidence that this group needs protection.

Older women

Across our services around 8% of service users are aged 55 and over. Older women often face additional barriers to getting support such as mobility issues, disabilities, age related conditions and abuse from adult children or from their carer. Our Silver Project provides an advocate to work with older women in any London borough, and with funding from Comic Relief we have been able to extend our work with older women through the Visible Women Project for older survivors. Older women's needs can also be more complex as many of the older women we work with have been in abusive relationships for a long time and are often still in those relationships, and if they do decide to leave facing homelessness is particularly daunting and refuge may feel unsuitable. They are also more likely to experience abuse from an adult child or grandchild, usually sons and grandsons. It is hard to estimate the need among this group of survivors, who are usually referred to support services like ours through third parties including GPs, hospitals, and the police, and less likely to self-refer. They may not know that they can get support while living with abuse and there tends to be less focus on adult child to parent or grandparent abuse.

Case study

Julia was referred to Visible Women in early April 2020, having made a disclosure to her GP of emotional abuse from her adult son who lived with her. Julia described her son as having mental health problems and she wanted to support him. While a Solace advocate was on the phone to Julia, her son attacked her to try and take the phone away. The IDVA called the police who removed the perpetrator and the Visible Women advocate called Julia to begin safety planning. She also followed up a non-molestation order that had been initiated by the community advice team and liaised with adult social care to get Julia's lock changed.

The Visible Women advocate worked with Julia over the next two months, during which time she disclosed significant emotional abuse, physical abuse and coercive control perpetrated by her son, who had witnessed the abuse she had experienced from a former partner as a child. Julia frequently presented as confused, overwhelmed and found it very difficult to follow through on intended tasks related to finances, her home or personal administration. She was furloughed in the midst of the coronavirus crisis with underlying health conditions and struggling with her mortgage debts. Adult social care closed her case as soon as the immediate danger was over, but our advocate worked with her for another six weeks, until she was confident that Julia was accessing the support she needed and was clear about where to get help if there were any other incidents from her son.

We are pleased the ONS plans to start collecting data on abuse of people aged 75 and older, but more needs to be done to connect older women with support services like ours. We have found that specialist support makes it easier for them to stay engaged as our advocate recognises and works to remove the additional barriers they face. The VAWG strategy should include work with the Department of Health to develop training and resources for GP practices health services to support them to understand and respond to older survivors of VAWG.

Younger women

Around 15% of our services users are aged 19-24 but we believe the need to be greater among this age group as the service users in the next age bracket (26 – 35) are the highest proportion we work with making up 35% of service users. Given that the average time the women we work with live with abuse is 6 years and 4 months if we could access younger women earlier we could reduce that time. We reiterate the need for all schools and colleges to run prevention programmes connected to VAWG services where possible, so that younger women learn signs of abuse early on, and know where to get help if they need it.

We are part of a partnership of organisations (led by Women and Girls Network) that runs the CoRAGEous Project, supporting Black and minoritised children and young people (CYP) up to the age of 25 across London. Solace provides a CYP counsellor, a multi disadvantage advocate and a community engagement worker to provide support and therapy for CYP experiencing various forms of VAWG as well as raising the profile of VAWG with them. Based on our experience of working with adult women with experience of multi disadvantage, the CouRAGEous team go to the locations where the young women are (up until lockdown). Locations can include youth clubs, festivals, and libraries to make ourselves visible and accessible to these young women. The support we have provided for 15 young women aged 16-24 with multiple disadvantage has made a considerable difference to their outcomes. Many are now settled in secure housing and requiring far less intense with less repeated referrals. The need for these services is huge, with waiting lists for counselling at around 6 months on average.

One of the barriers younger women face is access to suitable housing when they have no choice but to leave their homes for safety; whether they are living with an abusive partner or their location is known to the person or people who is or has abused or exploiting them. Younger women without children are subject to the shared accommodation rate for under 35s unless they have already been living in a refuge or homelessness refuge, but most service users are supported in the community. Shared accommodation for survivors of trauma is not suitable and disincentivises younger women from getting help. Some housing departments offer younger women mixed shared accommodation, which is entirely unsuitable and potentially unsafe. The Government should exempt all survivors of VAWG from the shared accommodation rate.

Children

We welcomed the Governments amendment to the Domestic Abuse Bill to include children who have witnessed abuse as victims, 55% of women we supported in 2019-20 have children. We see first-hand the trauma children present with when they come into refuges

and community-based services. We provide family support workers and sessional workers in refuges, and floating family support workers in the community, to build relationships and work with children in a trauma-informed way and to support survivors with other services including children's social care and family courts. Most commissioners do not fund this essential provision when they commission refuges or community-based services, but we have always seen the impact of abuse on children, and prioritised funding support for them ourselves through our fundraising activities.

Support for survivors around parenting and therapeutic support for children also reduces public spend on social services intervention. Of the nearly 200 children in our refuges in December, around 30% had children's services involvement, but we were able to support 97% through specific support for children and families, including family support workers, specialist child counselling and therapy and parenting workshops. Upon leaving refuge, 20% of service users with children had increased their parenting capacity and increased their understanding of the impact of domestic abuse on parenting.

Case study

Sarah came to one of our refuges with her young son, Daniel, having fled Daniel's abusive father who had been emotionally abusive for many years. Sarah was initially mistrustful of all professionals, and was worried about disclosing the problems she had with finances and parenting challenges. She had some attachment issues with Daniel and was anxious about him going to nursery. Sarah was worried that Daniel would be removed from her care.

The family support worker was able to gain Sarah's trust over time and work with her on her parenting skills. She supported Sarah and Daniel with clearer boundaries and a routine, and as a result Daniel's nursery attendance improved and he has begun potty training. Sarah and Daniel have now moved on from the refuge, and their family support worker has supported Sarah with a nursery transfer for Daniel and to connect to local children's centre for ongoing parenting courses.

Unfortunately, we do not have the resources to support as many of the nearly 2,300 children in our community services in the same way. Of those who had a parent we were supporting in December, were only able to refer around 6% to specialist children's services within Solace.

It is essential that the Domestic Abuse Bill is amended to include community-based services, which are accessed by two thirds of the survivors we support, under the duty to support survivors, and that accommodation-based services include dedicated support for children who are also survivors. The VAWG strategy should commit to researching the benefits of specific support for children who have witnessed VAWG and ensure commissioners of VAWG services also commission dedicated support for children.

Disabled survivors

Across the Ascent and Ascent and Advice Plus partnership around 9% of survivors disclosed a disability, with a further 12% who told us they would prefer not to say. An additional 0.3%

said they were Deaf or hearing impaired, with 3.2% preferring not to say. An estimate 16% of working age people are estimated to have a disability and 45% of adults over state pension age⁴. Studies have shown that disabled women are twice as likely to experience domestic abuse and twice as likely to be raped or sexually assaulted compared to non-disabled women⁵, so it is clear that disabled women, who are at greater risk of VAWG, are not accessing the support services they need.

Through additional funding provided by MOPAC, Ascent has been able to add capacity to the partnership with Stay Safe East and Respond to provide the specialist support survivors need. The VAWG strategy should prioritise accessibility of services for Deaf and disabled survivors and fund specialist services to provide support directly and to capacity build in areas where no specialist services exist.

Black, Asian and minority ethnic women

As a London-based organisation, our service users reflect the ethnic and racial diversity of the Capital⁶. In 2019/20, 23% of our service users were of Black African or Black Caribbean heritage, 11% were Asian, 6% were of mixed or multiple ethnicities, and 44% were white. Through the Ascent Advice and Counselling partnership and as members of the London VAWG consortium we are able to refer survivors to specialist 'by and for' organisations where they need culturally or racially specific support outside our services. We also work in partnership to deliver many of our services so that survivors can access the support they need through a single caseworker. Cuts to specialist services over the past decade however have made it increasingly difficult to refer Black and minoritised women to the support they need and would benefit most from.

Given London's diverse population the funding cuts to specialist Black and minoritised women's services over the last ten years have been severe, and the pandemic has disproportionately impacted on these smaller organisations. Waiting lists for counselling and therapeutic services run by and for Black and Asian women are either longer or closed. One of the partner organisations which specialises in supporting women from specific communities has a usual waiting time for counselling of 8-12 weeks, but the waiting time has increased to 20 weeks since the beginning of the pandemic.

In view of the way the pandemic has affected Black and Asian communities living in cities and urban areas, the toll on the workforce in specialist support services has been immense, and we are concerned about the survival of smaller specialist VAWG organisations. Recent funding announcement from the Ministry of Justice to prioritise specialist 'by and for' Black and minoritised women's services was welcome, but the VAWG strategy should centre Black and minoritised women's experiences and include a long-term sustainability plan for these vital organisations, taking account of the impact of the pandemic.

Section five - Criminal justice and other system response.

⁴ <https://www.gov.uk/government/publications/disability-facts-and-figures/disability-facts-and-figures>

⁵ <https://safelives.org.uk/knowledge-hub/spotlights/spotlight-2-disabled-people-and-domestic-abuse>

⁶ <https://www.ethnicity-facts-figures.service.gov.uk/uk-population-by-ethnicity/national-and-regional-populations/regional-ethnic-diversity/latest#full-page-history>

Criminal justice response

Charges and prosecutions for domestic abuse and rape and sexual offences have fallen across the board in England and Wales, despite an increase in arrests made. In November 2020, the ONS reported that charging rates for domestic abuse dropped by 73% between 2018 and 2020^[1], and in October 2020, the London Assembly Police and Crime Committee published findings from London that rape and sexual offences have risen by a quarter in London over the last five years but between April 2015 and March 2019, there was a drop in successful prosecutions in London for rape and sexual offences from 1 in 9 down to 1 in 16⁷.

A criminal justice response is not always what survivors want, and the Home Office should develop a national perpetrator strategy alongside the VAWG strategy to encompass a range of responses and services beyond a criminal justice response. However, the drop in prosecutions and convictions reflects the experiences of survivors who do pursue charges and who are too often left retraumatised by the experience. Support for victims and embedding an understanding of perpetrator behaviour must be central to the Home Office and Ministry of Justice's work to improve the work of the police, Crown Prosecution Services (CPS) and courts in relation to VAWG cases.

Feedback from our IDVAs and ISVAs reported that alleged perpetrators of abuse (APOA) continue to exert emotionally controlling behaviour towards survivors despite bail conditions requiring them not to contact the survivor and witness. APOAs also exert influence over the police to undermine survivors' credibility with the police. Survivors have told their independent advocates that police have asked if they were lying, and made other comments that undermine rather than build trust with survivors.

Police and victim support services need to keep survivors better informed about cases. Survivors have reported hearing nothing from victim support when their APOA has been charged, and survivors often believe that in pursuing a criminal justice response the APOA will receive a prison sentence which can deter them from continuing to support the case. Police can also use jargon that survivors do not understand.

As survivors of VAWG crimes have often been subjected to coercive control, dominance and emotional abuse, it is imperative that the police behave in ways that empower and support them to feel their experiences matter and they matter. We understand the pressures police and the wider criminal justice system are under particularly at the moment, but MOPAC's London Rape Review found that victims withdrawal is one of the biggest reasons for the attrition of rape cases from allegation to conviction⁸ so we see this as a crucial area for investment by the police.

Housing

Lack of alternative accommodation and fear of homelessness are one of the biggest barriers to survivors escaping domestic abuse and VAWG. Housing is not just an issue for domestic abuse survivors – most survivors of rape and sexual violence know their perpetrator and

⁷ <https://www.london.gov.uk/press-releases/assembly/sexual-offences-and-rape-cases-convictions>

⁸ https://www.london.gov.uk/sites/default/files/london_rape_review_final_report_31.7.19.pdf

some need support to move to a new location for their own safety and recovery. In addition, stalking and harassment makes up around 16% of the VAWG experienced by services users across our services.

Prior to the pandemic London was the epicentre of the national housing crisis and supporting the 71% of our service users who have a housing need had become increasingly challenging. We conducted research over the summer of 2019 including a survey of around 100 women, and found that 30% of women seeking shelter were turned away six times or more; 53% of women who had secure tenancies lost them after fleeing abuse and 62% of those seeking help from a local authority had a bad experience⁵. Under the Homelessness Reduction Act 2018, the prevent and relief duties of local authorities should have improved survivors' experiences of making a housing application when made homeless through domestic and sexual abuse.

There are some councils that have demonstrated real leadership in supporting survivors of VAWG and have excellent practice. But the scarcity of social and affordable housing in London had also led to housing officers in many areas increasingly gatekeeping and at times gaslighting rather than supporting survivors. In spite of the increased awareness of domestic abuse during the first lockdown and the measures taken by the Government to support survivors as well as the emphasis on housing homeless people through 'Everyone In', negative experiences of women and their advocates with housing officers have been exacerbated by lockdown in many local areas rather than ameliorated by it. Women making applications to housing departments have been told to return to perpetrators by housing officers; they have had the police called to verify their description of events; and some have even had perpetrators called directly by housing officers, putting them in greater danger.

We have also supported women who have been moved into temporary accommodation that is not fit for purpose. Survivors and their children are left to sleep on floors, left hungry and lacking facilities to prepare food. Women who leave their abuser with almost nothing are placed in housing without essentials like beds, fridges and sofas. Solace alone has supplied basic furniture for 200 women who have been provided accommodation after fleeing their abuser and two women returned to refuges having been placed in damp or inappropriate housing last year.

Case studies

A Solace Independent Domestic Abuse Advisor (IDVA) was working with Janet, who had been made homeless through domestic abuse and violence and assessed as high risk. Janet's alleged perpetrator of abuse was on police bail having been charged. The IDVA supported Janet to make a homelessness application and was phoned by a Housing Officer who talked Janet into saying she was not experiencing domestic violence "right now" and didn't therefore need to make the application. The Housing Officer then told our IDVA that Janet hadn't disclosed domestic violence to them and did not meet the criteria for council provided accommodation.

Celia was being physically and psychologically abused by her daughter and her partner, who trapping her in the house and took her wages. Celia managed to escape and stayed with someone she knew until they said she needed to leave. She reported to her council that she had been made homeless through domestic abuse and was told she would have to sleep on the streets for three nights before they would help her, and then she could have a room in a mixed sex hostel. Celia is over 50 and was extremely distressed. Celia was referred to Solace by adult social services, but we had no rooms available so we funded a hotel and food vouchers for four nights while a caseworker supported Celia to make another application with the council and advocate for her with the housing officer. Celia has been moved into a temporary one bedroom flat.

Rachel wanted to leave the area where she was living because her perpetrator was aware of her address and attempting contact her despite a non-molestation order being in place. The housing officer in the area she was due to move to was slow to respond and Rachel's Solace IDVA followed up. It was only at this point the IDVA was informed of Rachel's rent arrears, which had built up to £2,468, and the housing officer said they wouldn't normally proceed with private rented accommodation in such cases. Once Rachel proved she could make weekly repayments of £15 she was added to the waiting list, but was told by the council they would only make one offer to end their housing duty to her. Rachel was pregnant at the time and already had one child so wanted to bid for a 2-bedroom property. But because these are so high in demand, the points far exceed what Rachel was allocated by the council, and the rents too high for her to afford on London Housing Allowance rates. Once she considered her options and with her existing debt to account for, Rachel decided to stay where she was living.

Move on accommodation with continued specialist support has been a big gap in services for the women we support in refuges, and for survivors who need their own units but need intensive support such as the women we support through the Amari and Rhea projects. Ideally there would be a range of accommodation options for survivors, including short fully-funded refuge accommodation with intensive support like the covid-19 emergency refuge; refuge accommodation for three to five months, move on accommodation in independent units in partnership with councils and housing associations to make them affordable for survivors, and long-term secure accommodation to provide the safety and security for survivors and their children to recover.

Partnerships with housing associations have worked well. We work with Commonweal Housing Association with several of our accommodation-based services and the Housing First Westminster scheme has a number of housing association partners. Women made

homeless through VAWG are more likely to be the primary carers for children and their housing needs tend to be greater than men's in terms of the number of rooms they need and need proximity to schools and nurseries as well as their support networks.

Provisions in the Domestic Abuse Bill, including the amendment to automatically make people made homeless through domestic abuse priority need for housing, should address some of the issues we have experienced. But we are calling for the Bill to go further and to ensure that survivors are given the highest banding/points so that their priority status translates into provision of a new home. We also remain concerned that given that housing officers are not fulfilling existing duties in all areas the new laws will not help as many women and children as they should.

The Home Office should also work with the Ministry for Housing, Communities and Local Government to ensure that there is sufficient social and affordable housing available to support councils to meet the duty in the Domestic Abuse Bill. We support Standing Together Against Domestic Abuse's whole housing approach, and recommend Government develops national partnerships with housing providers based on learning from existing projects like our partnership with Commonweal. But until there is a supply of genuinely affordable housing particularly in London and the South East, the Home Office should work with the Department for Work and Pensions to exempt survivors of VAWG from the benefit cap and lift the local housing allowance to at least 50% of the median for the area, as recommended by the Women's Budget Group.

Funding and commissioning models

Under the last VAWG strategy, funding from central Government departments often had to be used by VAWG services to fill gaps left by funding cuts made by councils under austerity. But central Government funding has generally been made available through a series of one-off funding announcements allocated through competitive tendering, often with requirements for innovative delivery models and only lasting for one year. This commissioning model favours large non-specialist organisations with the capacity to write and submit numerous bids which undercut the bids of specialist services. They tend to offer services at lower costs in the short-term, though provide poorer value for money in the long-term and risk a race to the bottom in terms of the long-term quality services survivors need. The short-term funding approach also leaves service users and staff with uncertainty from one year to the next, which is particularly problematic when working with people who have experienced trauma and need stability to build trust and recover.

The Extraordinary circumstances of 2020-21 with the global pandemic and restrictions have required short-term emergency funding to support the associated exacerbation of VAWG. The Government's announcement of £76 million in emergency funding for domestic abuse charities during the first lockdown in 2020 was welcome. Like many services however, we have been particularly concerned that any of the emergency funding received up to now must be spent by the end of March, which is also when a significant number of our service contracts come to an end, creating a potential cliff edge for service users.

We are grateful that a lot of the local and regional commissioners we work with have extended their current contracts by a year to avoid a cliff edge in April 2021. But while very

welcome in the context of the ongoing uncertainty about the lockdown restrictions; the vaccine roll out; and the passage of the Domestic Abuse Bill, we risk another cliff edge this time next year while dealing with the impact of at least a year of conditions that have exacerbated abuse and violence and affected staff mental health and wellbeing in direct and indirect ways.

The Treasury announced a funding package in its 2021-22 spending review for councils to deliver on the new duty to provide support to victims of domestic abuse and their children in refuges and other safe accommodation in the Domestic Abuse Bill, but commissioners and the sector need clarification on whether tier one councils should budget for the same amount from 2022-23 and beyond. Additionally, the Bill is still making its way through the House of Lords and is not expected to receive Royal Assent until the Spring. This leaves significant uncertainty for both local authorities and specialist services they fund.

While the Ministry of Justice's announcement of £40 million from April 2021 is a welcome acknowledgement of the need for additional community-based services, sexual violence services, and funding for specialist 'by and for' services, it risks simply being another sticking plaster unless the strategy prioritises sustainable funding commissioned by need rather than through competitive tendering.

The VAWG strategy should build on the funding for accommodation to provide a national multi-year funding settlement for the specialist VAWG sector, which ensures all forms of service provision are resilient for the future and is delivered by all government departments responsible for VAWG – through ring-fenced funding for specialist services including those led 'by and for' Black and minoritised women, Deaf and disabled women and LGBT+ survivors.

The Domestic Abuse Commissioner's needs assessment should be wider than domestic abuse, encompassing all forms of VAWG which, as we have evidenced, also affect domestic abuse survivors. We also recommend that this strategy focuses on embedding and expanding best practice, and only funding new services or programmes where there is a gap for survivors. There are numerous projects and programmes that have been evidenced to be effective at improving outcomes for survivors and lessons and lessons should be learned from these. Projects outlined in section 4 for specific groups of survivors for example, some of which were pilots that have been effective, now face being closed with no replacement for those survivors. This leads to instability for the service, the staff and the survivors we work with.