

Sheffield Safe Accommodation Needs Assessment Data 2022

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1. Introduction and Methodology

This Needs Assessment is the first refresh of the 2021 Safe Accommodation Needs Assessment that was compiled to help inform the commissioning of safe accommodation in Sheffield, to feed into the Safe Accommodation strategy and domestic abuse strategy. The refreshed report supports the requirement of the Department for Levelling Up, Housing and Communities (DLUHC) for local authorities to collate data into a needs assessment for the purpose of creating a local strategy.

This report reviews national policy and guidance, as well as national reports to show the requirements of local authorities and provide a national picture. Findings from research and the Crime Survey of England and Wales help us to understand the prevalence of domestic abuse, and the need for safe accommodation. These national estimates are then applied to the local population to help us understand the potential prevalence in Sheffield.

National data is compared to what we know happens in Sheffield to help provide an overview of areas of good practice locally, but also where we need to improve. By comparing local activity with what we know about national prevalence and activity the report aims to identify where there is a lack of provision both in accommodation and additional support provided to victims of domestic abuse and how funding can be directed to better address gaps in the support offered in Sheffield.

In this document where gaps in provision and data collection are identified these will be collated to provide a list of recommendations that can feed into the local strategy, commissioning decisions, and working to improve the data that is collected locally to provide more insight in future needs assessments.

2. National Policy and Guidance

The UK government has published documents that outline the governments expectations and requirements of local authorities to provide suitable care, support, and housing to those in need and victims of domestic abuse. These documents impact on the commissioning of refuge and alternative accommodation for survivors of domestic abuse. Key points taken from recent publications are provided below. There is also a summary of additional reports and research in Appendix A that have helped to inform this needs assessment.

Domestic Abuse Act

The Domestic Abuse Act¹ places a statutory duty on tier one local authorities to provide support to victims of domestic abuse and their children within refuges and other safe accommodation.

The Act has maintained a broad definition of safe accommodation in recognition of the diversity of housing in which victims and their children may live.

The new duty covers the provision of support to victims and their children residing in refuge accommodation; specialist safe accommodation; dispersed accommodation; sanctuary schemes; and move-on or second stage accommodation.

Domestic abuse support is defined as:

Advocacy support – development of personal safety plans, liaison with other services (for example, GPs and social workers, welfare benefit providers).

Domestic abuse-prevention advice – support to assist victims to recognise the signs of abusive relationships, to help them remain safe (including online) and to prevent re-victimisation.

Specialist support for victims with protected characteristics and / or complex needs, for example, interpreters, faith services, mental health advice and support, drug and alcohol advice and support, and immigration advice.

Children’s support – including play therapy and child advocacy.

Housing-related support – providing housing-related advice and support, for example, securing a permanent home and advice on how to live safely and independently; and

Counselling and therapy for both adults and children.

¹ <https://www.gov.uk/government/publications/domestic-abuse-bill-2020-factsheets/local-authority-support-for-victims-of-domestic-abuse-and-their-children-within-safe-accommodation-factsheet>

Spending review 2020 - provides £98 million of additional resource funding, bringing total funding to £125 million, to enable local authorities to deliver the new duty to support victims of domestic abuse and their children in safe accommodation in England.

Local Partnership Board - Tier 1 local authorities are required to convene a multi-agency Local Partnership Board (LPB) to support them in performing certain specified functions. These will be to:

- **Assess the need and demand** for accommodation-based support for all victims and their children, including those who require cross-border support.
- **Develop and publish strategies** for the provision of support to cover the locality and diverse groups of victims.
- **Give effect to strategies by making commissioning / de-commissioning decisions**
- **Meet the support needs of victims and their children**
- **Monitor and evaluate local delivery**
- **Report back to central Government**

There is also a duty for the DLUHC to produce statutory guidance; and a duty for LAs to have regard to statutory guidance in exercising the above functions.

Needs Assessment - A standardised needs assessment has been developed by the DLUHC to support LAs in assessing local need and demand on services.

Local strategies - LAs are required to develop and publish a robust local strategy based on the needs assessment.

The clauses in the Domestic Abuse Act aim to ensure local authorities, with support from their LPBs, have the right knowledge and steps in place to accommodate the needs of all victims.

The duty to convene a Local Partnership Board came into force in April 2021. Sheffield's existing Domestic and Sexual Abuse Strategic Board has taken on the role of the Local Partnership Board.

In Sheffield, the DLUHC funding is used to support women in refuges and people in Safe Zones, together with those at risk of domestic abuse in their own homes who have Sanctuary Scheme items fitted, to access housing and/or legal advice, related to housing issues.

Supported Housing: National Statement of Expectations²

The National Statement of Expectations (NSE) was developed in collaboration between the Ministry of Housing, Communities and Local Government (MHCLG, now the DLUHC) and the Department for Work and Pensions (DWP) with input from local councils and the supported housing sector. Together, they are committed to seeing delivery of good quality supported housing which meets residents' needs and represents good value for money. The NSE provides a mechanism for establishing the vision for accommodation standards, quality, and value for money. The NSE is not a statutory requirement, and to date there has been no definitive set of guidelines on what should reasonably be expected from the accommodation element of supported housing. However, it is hoped that organisations involved in the provision of supported housing will use, adopt, and find the principles and examples of best practice helpful.

In supported housing, accommodation is provided alongside support, supervision, or care to help people live as independently as possible in the community, including for people fleeing domestic abuse with their children.

In order to deliver the ambitions of the NSE local authorities should work alongside providers and local delivery partners to:

- Assess local demand and plan effectively
- Ensure safe and good quality supported housing
- Ensure supported housing provides good value for money

The strategy in Sheffield was designed in line with these principles.

² <https://www.gov.uk/government/publications/supported-housing-national-statement-of-expectations/supported-housing-national-statement-of-expectations>

3. National Data

National data helps to provide an estimate of the scale of domestic abuse in England. We can use this data to look at the current position and the historical trend of domestic abuse prevalence. This can also help to inform estimates of domestic abuse prevalence in Sheffield. We can also look at national data regarding refuge placements and utilisation as a result of domestic abuse across England.

Crime Survey for England and Wales

The Crime Survey for England and Wales (CSEW) is an important means to understand the true level of crime due to its ability to find out about crimes which do not get reported to, or recorded by, the police. The survey has previously shown that out of all crimes committed only 4 in 10 are actually reported to the police.³

The 2017/18 CSEW asked some specific questions around domestic abuse and found that for those that did not report domestic abuse, the most common reasons given were: the abuse was too trivial or not worth reporting (45.5%), it was a private family matter and not the business of the police (39.5%), and the victim didn't think the police could help (34.2%). There is no updated information around reasons domestic abuse is not reported as this has not been included in the most recent CSEW.

Sexual offences and domestic abuse-related crimes recorded by the police provide a good measure of crime related demand on police but do not provide a reliable measure of trends in these types of crimes. Improvements in police recording practices and increased reporting by victims have contributed to increases in recent years. The figures do, however, provide a good measure of the crime-related demand on the police. The CSEW provides a better picture of the overall trend in violent crime and a more reliable measure of the long-term trends in sexual assault, stalking and harassment, and domestic abuse.⁴

Previous Needs Assessments have reported CSEW findings with reference to research by Gadd et al (2002)⁵ regarding male victims. This research is over twenty years old and more recent research has shown increasing numbers of men reporting being a victim of domestic abuse. For example, research by Respect Men's Advice Line⁶ reported an increase in demand of 57% in comparison to 2019/20. The Making Invisible Men, Visible report⁷ highlights that while one in four of all victims who report to the police are male, only one in twenty of all victims supported by community services are men.

This report will use the reported CSEW estimates to understand the potential national prevalence of domestic abuse for both females and males. However, the finding from the

³ Information taken from the About the Survey section of the Crime Survey website
<https://www.crimesurvey.co.uk/en/AboutTheSurvey.html>

⁴<https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/bulletins/crimeinenglandandwales/yearendin gmarch2022#domestic-abuse-and-sexual-offences>

⁵ Gadd, D., Farrall, S., Dallimore, D & Lombard, N (2002) *Domestic abuse against men in Scotland*, Scottish Executive Central Research Unit <http://www.gov.scot/Publications/2002/09/15201/9609> - pages 33-46

⁶ Respect Men's Advice Line Service Review 2020/21: Supporting male victims of domestic abuse during Covid-19

⁷ Supporting Local Domestic Abuse Partnership Boards, Mankind Initiative, June 2021

Gadd research that around half of males presenting as victims are in fact perpetrators still needs to be considered in this process as a proportion of males presenting to surveys such as the CSEW as victims when they are perpetrators goes some way to explaining the disproportionate numbers of women referred and seeking support. The rates amongst males reported in the tables below may therefore be half of what is shown. When calculating the potential number of victims in Sheffield (Section 5) the report will consider this 50% reduction in male victims.

Prevalence estimates for the number of victims of domestic abuse in the last 12 months and since the age of 16 years

Crime Survey of England and Wales Prevalence Estimates 2021/22 people aged 16-74						
National Estimate	In the last year			Since the age of 16		
	Men	Women	All	Men	Women	All
Any Domestic Abuse	3.0	6.9	5.0	14.1	29.3	21.9
Any Partner Abuse	2.1	4.8	3.5	9.9	25.2	17.7
Any Family Abuse	1.2	2.9	2.1	6.4	7.8	9.5

In 2021/22 it is estimated that:

- 5.0% of people aged 16 -74 experienced any form of domestic abuse; 6.9% of women and 3.0% of men
- 3.5% reported partner abuse; 4.8% of women 2.1% of men
- 2.1% reported any family abuse; 2.9% of women and 1.2% of men.

In total 21.9% of people reported having been a victim of domestic abuse at some point since the age of 16 comprising of 29.3% of women and 14.1% of men

Prevalence in the last year by age groups

	Men	Women	All
16-19	5.3%	14.0%	9.5%
20-24	4.9%	10.0%	7.4%
25-34	4.2%	7.7%	5.9%
35-44	4.2%	6.9%	5.6%
45-54	3.7%	7.7%	5.7%
55-59	2.5%	6.5%	4.6%
60-74	1.9%	4.4%	3.2%

The 2019/20 CSEW is the most recent information for the prevalence of domestic abuse by age. It found that prevalence of domestic abuse in the last year was highest amongst younger age groups, with 14% of females aged 16 – 19 experiencing domestic abuse in the last year. This data suggests many of the people accessing accommodation are likely to be younger and either in need of single properties or have young children and need family units. This should therefore be considered alongside commissioning decisions.

Prevalence of domestic abuse in the last year was reported to be highest amongst people who are bi-sexual in 2021/22 with 12.1% reporting being a victim, compared to 4.6% of heterosexual people. Data for gay/lesbian and also for Other was not reported due to disclosure constraints⁸. To understand this data in context however, it should be noted that in 2020 the ONS Annual Population Survey estimated that 1.8% of the population identify as gay or lesbian, 1.3% as bisexual, and 0.7% defined as Other.⁹

Although a small proportion of the total population this data suggests that the safe accommodation offer needs to ensure it meets the needs of the LGBT+ community. Questions on LGBT+ needs are part of the service user consultation to continue to inform commissioning and practice.

	Men	Women	All
White	2.9%	7.0%	5.0%
Mixed/multiple ethnic groups	*	*	8.7%
Asian/Asian British	4.5%	3.2%	3.9%
Black/Black British	*	10.2%	5.9%
Other ethnic group	*	*	*

* denotes suppressed figures for CSEW estimates because of disclosure constraints

From the data made available rates of domestic abuse are estimated to be higher amongst women than men who are white and those that are Black/Black British. In contrast to previous years, rates amongst Asian/Asian British people were estimated to be higher amongst men than women.

Estimated rates in 2021/22 are highest amongst people of mixed/multiple ethnicities although the disclosure constraints do not enable us to see the split between men and women. The 2nd highest prevalence rate was amongst those who are Black/Black British. This data does not allow us to breakdown the ethnic groups into more detail.

This data suggests that the safe accommodation offer needs to continue to ensure it meets the needs of ethnic minority communities. Questions on ethnicity were part of the service user consultation and will inform commissioning and practice.

	Men	Women	All
Disabled	6.7%	13.1%	10.3%
Not Disabled	2.4%	5.6%	4.0%

The 2021/22 CSEW estimates that 13.1% of disabled women and 6.7% disabled men have been a victim of domestic abuse in the last year, the table above also shows that these rates

⁸ <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/datasets/domesticabuseprevalenceandvictimcharacteristicsapendixtables>
⁹ <https://www.ons.gov.uk/peoplepopulationandcommunity/culturalidentity/sexuality/bulletins/sexualidentityuk/2020>

are more than twice as high as rates amongst people who are not disabled¹⁰. These estimates highlight the potential need for suitable accessible accommodation for victims of domestic abuse as the data suggests that a disabled person is more likely to be a victim of domestic abuse. However, this data does not indicate the type of disability that is most common e.g., whether this indicates the need for more units that are accessible for people with mobility issues or other forms of disability.

Most recent data CSEW on accommodation and domestic abuse is from 2017/18:

Partner Abuse in the Last Year 2017/18

	aged 16-59
Did victim live with an abusive partner	
Yes	21.4%
No	63.9%
Don't know / don't want to answer	14.7%

Victim left shared accommodation because of abuse

	aged 16-59
Yes	34.4%
No	65.6%

For the 2017/18 CSEW the Office for National Statistics (ONS) published a detailed section on partner abuse¹¹. The age of survey respondents to the CSEW in 2017/18 was 16 – 59 year olds. The data shows that for victims of domestic abuse in the last year, at least 21% (just over 1 in 5) lived with the abusive partner. The proportion could be higher as 14.7% did not want to respond to the question. Of those living with an abusive partner in the last year the majority (65.6%) did not leave the accommodation because of the abuse. However, this means one in three did leave due to domestic abuse which indicates the need for safe accommodation.

Why victim didn't leave the shared accommodation 2017/18

	aged 16-59
Love/feelings for partner	47.2%
Never considered leaving	37.1%
Presence of children	36.7%
Nowhere to go	29.8%
Partner stopped the abuse/behaviour	15.0%
Rely on partner for financial support	11.4%
Pressure from family to remain in relationship	5.3%
Fear of further abuse	2.1%
Other	15.1%

¹⁰ The definition of disability used in the CSEW is consistent with the core definition of disability under the Equality Act 2010. A person is considered to have a disability if they have a long-standing illness, disability or impairment which causes difficulty with day-to-day activities.

¹¹ <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/datasets/partnerabuseindetailappendixables>

The reason for not leaving the abuse is asked on the CSEW. The three main reasons given were love / feelings for partner, never considered leaving and presence of children.

In 2014/15 CSEW asked additional questions in relation to homelessness and domestic abuse and found that victims often spent their first night away from home with a relative¹² (65%) or with friends (18%), 5% went to a hotel and 12% stated they went somewhere else, including to a refuge or stayed on the streets.

Other key findings on partner abuse from the CSEW 2017/18 included:

- An estimated 4.5% of adults aged 16 to 59 years had experienced partner abuse in the last year.
- Female victims of partner abuse reported experiencing higher levels of non-physical abuse (emotional, financial) and sexual assault by rape or penetration (including attempts) than male victims of partner abuse.
- Male victims of partner abuse reported experiencing higher levels of physical force than female victims of partner abuse.
- Around one-quarter of partner abuse victims sustained a physical injury as a result of the victimisation.
- The most common non-physical effect of partner abuse was “mental or emotional problems”.
- The majority (72.4%) of victims told someone about the partner abuse that they suffered, with women (81.3%) being more likely to tell someone than men (50.8%).
- Both female and male victims were most likely to tell someone they knew personally about the abuse (73.5% and 43.7%, respectively) with victims most commonly telling a friend or neighbour (53.3% of women and 31.6% of men), followed by telling a family member or relative (46.2% women and 25.3% men).
- There was a significant decrease in the proportion of female victims reporting partner abuse to the police in the year ending March 2018 compared with the year ending March 2015 – the last time this was asked about in the Crime Survey for England and Wales.
- Just under one-third (31.2%) of all victims of partner abuse aged 16 to 59 years told someone in an official position about the abuse.

A majority of victims do confide in someone they know regarding the abuse they suffer, but only one third report the abuse to someone in an official position.

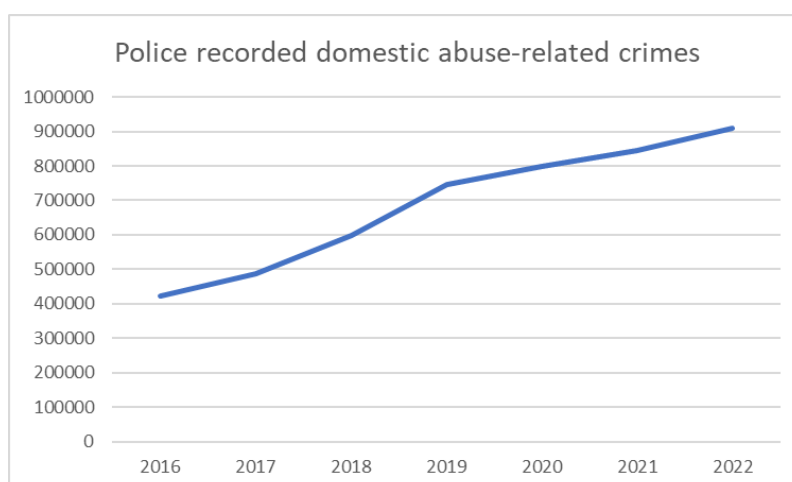
¹² Appendix table 4.25 – where the last year partner abuse victims spent their first night having left the shared accommodation because of the abuse, year ending March 2015

Recommendations

- Continue to promote domestic abuse services to the general public to raise awareness of the support available, to increase awareness amongst victims but also the people they talk to
- Continue to commission professional domestic abuse awareness training in order to help professionals identify abuse victims
- Provide targeted promotion to under-represented groups, such as those with disabilities as the data suggests prevalence rates are higher amongst this group than the general population

ONS Police Recorded Crime Data 2021/22¹³

- the police recorded over 1.5 million domestic abuse-related incidents and crimes in England and Wales (excluding Greater Manchester Police), this continues an ongoing trend that may reflect improved recording by the police alongside increased reporting by victims. 39% of these were incidents where after initial investigation the police concluded that no notable crime was committed.
- referrals of suspects of domestic abuse-flagged cases from the police to the Crown Prosecution Service (CPS) for a charging decision fell 14% to 67,063 from 77,812 in the year ending March 2021.
- the charging rate was 73%, an increase on the previous year which contrasts with a fall in the number of charging decisions.
- over three-quarters of domestic abuse-related CPS prosecutions were successful in securing a conviction (76%), a similar level to the previous year.



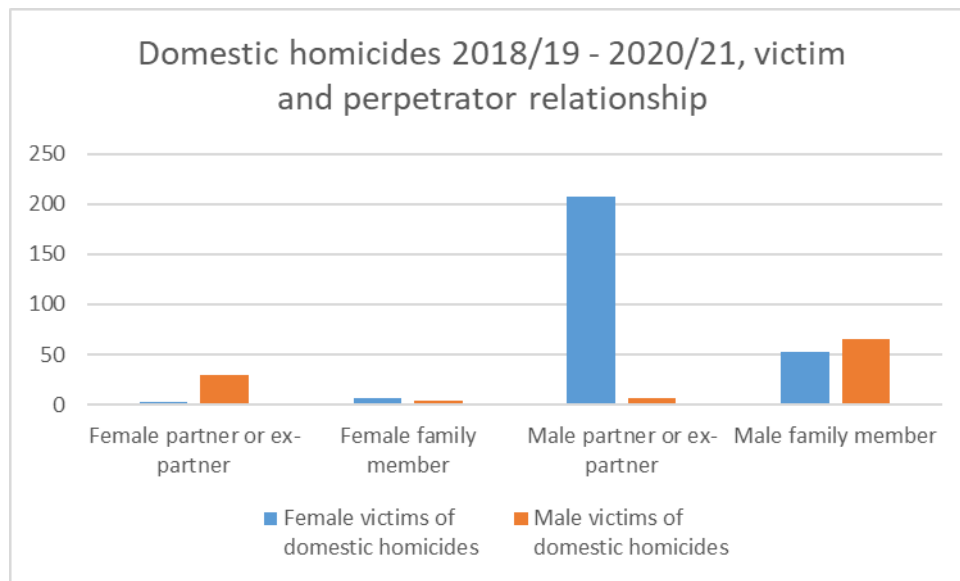
¹³

<https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/bulletins/domesticabuseinenglandandwalesoverview/november2022#police-recorded-crime>

The chart above shows that overall, the number of offences recorded since January 2018 has increased year on year. We know that some of the increase in offences recorded can be attributed to better recording by the police and increased reports following high profile cases.

An increase in the number of reported incidents to the police suggests that more victims may present in need of safe accommodation, which consequently may increase the need for additional and wrap-around support.

Data available for domestic homicides combines data in to a three year period to account for year-on-year variability in the volume of homicides:



The number of domestic homicides reported is a total of 373, 72% of which were female victims. Of the 269 female victims 97% had a male partner/ex-partner or male family member as the perpetrator.

Rates of domestic homicide highlight the potential risk to victims who are unable to escape an abusive home environment, have recently separated or are attempting to separate.

Women's Aid Annual Audit 2022¹⁴

The annual audit presents information on the provision and usage of domestic abuse services (both accommodation and community support services) in England, mainly focusing on the financial year 2020/21. This year the report also includes a section on the impact of the Covid-19 pandemic. Key findings from the audit included:

- It is estimated (based on the On Track data collection) that 10,809 women and 11,890 were supported by a refuge in 2020/21.
- It is estimated (based on the On Track data collection) that 124,044 women and 148,852 children were supported by a community-based service.

¹⁴ <https://www.womensaid.org.uk/wp-content/uploads/2022/03/The-Domestic-Abuse-Report-2022-The-Annual-Audit.pdf>

- 4,289 refuge spaces in England, falling short of the number of spaces recommended by the Council of Europe by 1,366, which represents a 24.2% shortfall¹⁵.
- It is estimated that a total of 28,370 referrals were received by refuges, 17,561 of those referrals were declined. This means that 62% of all referrals received for refuge were rejected. The main reason for rejection was a lack of space or capacity with 26.5% of all declined referrals being this reason.
- Only 26% of refuges commissioned by local authorities indicated that the funding covered all aspects of the support staff costs.
- 59.7% of women in refuge services had children and 7.3% were pregnant.
- 88% of service users had experienced emotional abuse, 67% had experienced jealous or controlling behaviour.
- 37.6% of service users in a refuge had support needs around mental health.
- 35.1% of service users in a refuge reported feeling depressed or having suicidal thoughts because of the abuse.
- 24.5% of women at refuge services have a disability; most common were mental health disabilities, 9% had a physical disability.
- Of service users who were not British nationals, 30% had no recourse to public funds (NRPF).
- Only 6.3% of vacancies posted on Routes to Support¹⁶ could consider women who had no recourse to public funds.
- Under half of refuge vacancies can accommodate a woman with two children and less than one in five for a woman with three children.

These statistics highlight that nationally there are barriers for some women to enter refuge. This includes women who are NRPF and who are a parent. Sheffield therefore needs to consider how to commission an adequate refuge offer that accepts women who are NRPF, who are parents and that provides sufficient therapeutic support to the significant cohort who are likely to have mental health needs. We also know that people with a disability are more likely to experience domestic abuse. The small percentage of women in refuge with a physical disability, is likely not reflective of demand from this group and impacted by the availability of accessible accommodation.

Women's Aid Nowhere to Turn 2022 – Findings from the No Woman Turned Away Project

The No Woman Turned Away (NWTa) project¹⁷ provides dedicated support to women who face barriers in accessing a refuge space, the most marginalised women tend to face the greatest barriers in their search for refuge provision. The barriers faced by women searching for refuge include no recourse to public funds, health and disability needs,

¹⁵ Council of Europe (2008) "...recommends safe accommodation in specialised women's shelters, available in every region, with one family place per 10 000 head of population.

¹⁶ Routes to Support is the UK violence against Women and girl's directory of services and refuge vacancies

¹⁷ <https://www.womensaid.org.uk/wp-content/uploads/2022/06/NWTA-2022-Final-A.pdf>

women with substance use support needs, and women with 4+ children and older male children, with many experiencing more than one barrier.

In 2021 the project received 337 referrals of which, 220 went on to receive support from the service and 127 referrals did not. For those not engaging with the service the most common reasons for not engaging were inability to contact the survivor (43.6%) and no longer wanting support (18.8%). 12.8% were already adequately supported by a domestic abuse organisation.

In total 184 women engaged and finished their support in the year, the rest continued to receive ongoing support. The table below, taken from the NWSA 2020 report, shows the barriers to accessing refuge that the 184 women experienced:

	Number of women	Percentage out of total number of women (out of 184)
Women with mental health support needs	77	41.8%
Women who had No Recourse to Public Funds (NRPF)	63	34.2%
Women who had one or more disability ¹⁵	38	20.6%
Women with substance use support needs – drugs and/ or alcohol	33	17.9%
Women with some language support needs ¹⁶	25	13.6%
Women who were tied to their local area	22	11.9%
Women with 4+ children	19	10.3%
Women with an offending history	19	10.3%
Women with older male children	17	9.2%
Women previously evicted from refuge	4	2.2%
Other circumstances or support needs that acted as a barrier to getting a refuge space ¹⁷	50	27.2%
*Many women had more than one of the listed support needs or circumstances.		

The table shows that the three most common challenges for women seeking a refuge space were mental health support needs, no recourse to public funds, and women who had one or more disability.

74 (40.2%) of the 184 women were from BME backgrounds. The Survival to Sustainability Report¹⁸ states that many women from these backgrounds prefer to be supported by specialist ‘by and for’ BME services.

Whilst waiting for a refuge space, 21.7% of women sofa-surfed, 17.4% spent time in emergency accommodation in the same local authority, 10.9% spent time in emergency accommodation in a different local authority, 4.3% paid to stay in a hotel/hostel/B&B, and 3.3% slept rough.

¹⁸ Imkaan 2018

The impact on health and well-being whilst waiting for a refuge space can be seen on the table below:

	Number of women	Percentage out of total number of women (out of 184)
Experienced further abuse from the perpetrator	60	32.6%
Was scared to go outside	34	18.5%
Called the police out to respond to an incident	26	14.1%
Experienced abuse from an additional perpetrator	24	13.0%
Did not have enough money to pay for essentials	21	11.4%
Spent time as an inpatient/overnight in hospital	14	7.6%
Was physically injured as a result of an assault by the perpetrator	10	5.4%
Spent time in police custody	2	1.1%
Spent time under section ²⁹	0	0.0%
*Some survivors experienced more than one category		

All the women received specialist support from the No Woman Turned Away project but due to some of the barriers faced not all women are placed in a refuge space. The outcomes at the end of support for the 184 women were recorded as follows:

	Number of women	Percentage of total number of women (184)
Accommodated in suitable refuge space	47	25.5%
Accommodated in emergency accommodation	35	19.0%
Outcome unknown/Lost contact	30	16.3%
Stayed put – living with perpetrator	16	8.7%
Stayed put – not living with perpetrator at time of referral	15	8.1%
Staying with friends and family	8	4.3%
Accommodated in private rental (out of area of residence)	5	2.7%
Able to return home after perpetrator moved out / was removed	2	1.1%
Accommodated in private rental (in area of residence)	2	1.1%
Accommodated by community or religious group	2	1.1%
Paying to stay in B&B or hotel or hostel	1	0.5%
Returned to perpetrator	0	0.0%
Sleeping rough	0	0.0%
Other	21	11.4%

The data shows that only around a quarter of the women were accommodated in a suitable refuge space, 19.0% accommodated in emergency accommodation and 2.7%

accommodated in private rental properties. It also shows that 8.7% stayed living with the perpetrator.

Although all these women had barriers to accessing a refuge space there also remains inequalities, as reported in previous Nowhere to Turn reports, within this group depending on the specific barrier(s) they faced. The table below shows that proportion of women with each support need who were accommodated in a suitable refuge.

	Number of women with this support need who were accommodated in a refuge
Women with some language support needs ⁴⁶	12 out of 25 (48.0%)
Women who had no recourse to public funds (NRPF)	20 out of 63 (31.7%)
Women with an offending history	6 out of 19 (31.6%)
Women who were tied to their local area	6 out of 22 (27.3%)
Women previously evicted from refuge	1 out of 4 (25.0%)
Women with substance use support needs – alcohol or drugs	8 out of 33 (24.2%)
Women with mental health support needs	16 out of 77 (20.8%)
Women who had one or more disability ⁴⁷	4 out of 38 (10.5%)
Women with older male children	1 out of 17 (5.9%)
Women with 4+ children	1 out of 19 (5.3%)
Overall	47 out of 184 (25.5%)

Women fleeing with an older male child and women with 4+ children had the lowest chance of finding refuge provision. Only one (5.3%) of the women with 4+ children and one woman (5.9%) with an older male child was accommodated, and four women (10.5%) were accommodated who had one or more disability. Overall, 28% of women with multiple support needs, and 18.4% of those with three or more needs were accommodated by a suitable refuge. These outcomes due to barriers highlight the need for making available and funding a range of accommodation types, including self-contained refuge.

The Nowhere to Turn Report makes the following recommendations for local authorities and commissioner:

- Adhere to the Homelessness Code of Guidance (MOJ, 2018) and refrain from putting women fleeing domestic abuse in mixed-sex emergency accommodation, or in other instances in which it may be inappropriate.
- Ensure changes delivered to ‘priority need’ in the Domestic Abuse Act 2021 are accompanied by robust training from specialist domestic abuse services to housing officers, with quality assurance and key points of accountability built in.

- Prioritise the needs of marginalised groups, including Deaf and disabled women, and Black and minoritised survivors, in commissioning decisions in order to meet the needs of all survivors.
- Building on national funding for ‘by and for’ services in 2021-22, provide ring-fenced funding for these specialist services and as set out in the statutory guidance to support implementation of the duty on local authorities to commission support in safe accommodation, where possible, conducted on a multi-year basis.
- Develop proportionate approaches to contract monitoring and quality assurance, with reference to and use of national outcomes data collection and quality standards developed by Women’s Aid, and other specialist VAWG sector organisations, as recommended by the Home Office’s VAWG Commissioning Toolkit.

The issue of women who have NRPF is complex due to the issue of funding of living and rental costs. Women on spousal visas have been able to access public funds via the Destitution Domestic Violence Concession scheme for nearly 10 years. Women on other visas or who are overstayers have not. The DAA did not cover this issue as the government wanted to conduct further fact finding. A national scheme to provide housing and living costs to victims of DA in this situation was established and locally is administered by Ashiana¹⁹ and has been promoted to the sector and local referrers.

Recommendations

- The above recommendations from the Nowhere to Turn report are already mostly implemented locally and should continue to be addressed.

Domestic Abuse in the LGBT+ Community

The national CSEW estimates show that domestic abuse prevalence is highest amongst gay, lesbian, and bi-sexual people. In contrast to this, the Sheffield data on people accessing safe accommodation (discussed in sections 5 through to 11) shows that LGB people are underrepresented. This hinders our understanding of the needs of people locally, as they are hidden. We also know that the wider LGBT+ community are underrepresented locally, supporting the view that there are barriers to the community in accessing support. National findings on domestic abuse experiences of the LGBT+ community are therefore important for us to commission an appropriate offer in Sheffield and work to reduce the barriers that people face.

A Needs Assessment produced by Durham University for Central Bedfordshire Council²⁰ found that the impact of the public story on domestic abuse, which focuses on cis²¹-heterosexual couples, leads to LGBT+ people believing that what is happening to them does not count as domestic abuse. Existing services are designed with the needs of cis-heterosexual women in

¹⁹ <http://www.ashianasheffield.org/>

²⁰ LGBT+ Domestic Abuse Needs Assessment for Central Bedfordshire Council, Donovan C. et al, April 2021

²¹ Describe a person whose gender identity matches their sex assigned at birth

mind, and LGBT+ people are wary of services that are not explicitly LGBT+ inclusive due to a fear of discrimination and/or a belief that their experiences will not be understood. The prevalence of some types of abuse are higher amongst LGBT+ people, and some of this increase can be attributed to the length of time a person suffers the abuse due to them not coming forward for support. As early interventions are key to reducing future domestic abuse and preventing escalation of harm, another problem is that LGBT+ inclusion is often lacking in the programmes and campaigns that are delivered in the UK. A third of LGBT+ people experiencing abuse from a partner or ex-partner told no one about the abuse they had experienced and for people experiencing abuse from a family member 15% told no one. The report finds that prevalence of domestic abuse amongst LGBT+ people are at least as high as they are for cis-gender heterosexual women. The largest barriers experienced to accessing support are from distrust of services. This is either because of a perceived or experienced instance of homophobia and transphobia.

It is therefore imperative that services are inclusive to all people and that the promotion of services informs the public that anyone can be a victim of domestic abuse and that support available for domestic abuse is for everyone.

4. Sheffield Prevalence

Prevalence of Domestic Abuse in Sheffield

The CSEW provides a national estimate of the prevalence of domestic abuse across England and Wales. We can use these findings and apply them to the Sheffield population of 16 -74-year-olds to estimate the prevalence of domestic abuse in Sheffield amongst this age group.

In this part of the report the finding of the Gadd research is also applied to the data shown as we know that domestic abuse is a gendered crime, females are more likely to be ‘highly victimised’, and the number of females presenting to services in Sheffield is much higher in comparison to males. The violent resistance research: Swan et al (2008), also indicates that 86% to 92% of women who perpetrate domestic abuse are not the primary perpetrator of the abuse. Johnson explains that the majority (75%) are acting in self-defence, retaliating, or protecting their children. Reporting the reduced prevalence estimate amongst males in the tables below therefore allows us to take these factors in to consideration when looking at the estimated local prevalence.

Crime Survey of England and Wales Prevalence Estimates 2021/22 people aged 16-74								
National Estimate	In the last year			Since the age of 16			Rates amongst males*	
	Men	Women	All	Men	Women	All	In the last year	Since age 16
Any Domestic Abuse	3.0%	6.9%	5.0%	14.1%	29.3%	21.9%	1.5%	7.1%
Any Partner Abuse	2.1%	4.8%	3.5%	9.9%	25.2%	17.7%	1.1%	5.0%
Any Family Abuse	1.2%	2.9%	2.1%	6.4%	7.8%	9.5%	0.6%	3.2%
Sheffield	Male	Female	All	ONS Mid 2019 estimates				
Population 16-74	217,446	216,222	433,668					
Sheffield estimate	In the last year			Since the age of 16			Rates amongst males*	
	Men	Women	All	Men	Women	All	In the last year	Since age 16
Any Domestic Abuse	6,523	14,919	21,683	30,660	63,353	94,973	3,262	15,439
Any Partner Abuse	4,566	10,379	15,178	21,527	54,488	76,759	2,392	10,872
Any Family Abuse	2,609	6,270	9,107	13,917	16,865	41,198	1,305	6,958

This allows us to estimate that in the last year there may have been as many as 21,683 victims of domestic abuse in Sheffield. 69% of the victims are female (14,919) and 31% are male (6,523). These numbers equate to 3.0% of men and 6.9% of women having been a victim of domestic abuse in the last year. The proportion of victims that are male, when considering the Gadd research, is 20%. In Sheffield this compares to males making up 12.3% of the people who received support from the community domestic abuse service in the year.

Nearly a third of women (29.3%) have experienced domestic abuse at some point since the age of 16 and 14.1% of men. This would equate to around 94,013 people in Sheffield having been a victim of domestic abuse at some time since the age of 16. 67% (63,353) of these victims are female and 33% are male (30,660).

When considering the Gadd research, the total estimated victims in the last year may be around 18,181, and victims since the age of 16 around 78,792. For victims in the last year

this would equate to a total prevalence of 4.2% in comparison to 5.0% reported in the CSEW.

The estimated rate of domestic abuse in the last year amongst 16 – 74-year olds has been relatively static over the last three years ranging from 5.3% - 5.7% suggesting that the number of victims experiencing domestic abuse will increase in line with population growth.

The findings on partner abuse and those that live with the abuser from the 2017/18 CSEW (when the CSEW last had a section focussing on partner abuse) showed what proportion of victims of domestic abuse in the last year left their partner following the abuse. Applying these findings to the estimated number of victims of domestic abuse in the last year in Sheffield shows the following:

Partner Abuse in last year (2021-22) based on 2017-18 CSEW					
Did the victim live with an abusive partner			Why victim didn't leave the shared accommodation		
	%	Estimated number		%	Estimated number
Yes	21.4%	4,640	Love/feelings for partner	47.2%	2,190
No	63.9%	13,855	Never considered leaving	37.1%	1,722
Don't know/does not want to answer	14.7%	3,187	Presence of children	36.7%	1,703
			Nowhere to go	29.8%	1,383
Victim left shared accommodation because of abuse			Partner stopped the abuse/behaviour	15.0%	696
	%	Estimated number	Rely on partner for financial support	11.4%	529
Yes	34.4%	1,596	Pressure from family to remain in relationship	5.3%	246
No	65.5%	3,039	Fear of further abuse	2.1%	97
			Other	15.1%	701

Of the 21,683 victims in the last year we can estimate, based on the findings in the tables above, that 4,640 (21.4%) lived with an abusive partner and of these, 1,738 would have left the shared accommodation because of the abuse. We know from local data for 2019/20 that in Sheffield 28% of people accessing the community domestic abuse service (with a home status recorded) were living with their partner, based on the prevalence estimate of 21,683 victims this would equate to 6,071 living with their partner.

Of those that didn't leave the shared accommodation 36.7% didn't leave because of the presence of children, 29.8% had nowhere else to go and 11.4% relied on their partner for financial support. These reasons are not mutually exclusive; a victim may have cited more than one reason for not leaving the shared accommodation. We cannot determine where victims who left the shared accommodation went from the CSEW data, but we can estimate that up to 1,596 victims could have needed some form of accommodation support, and a minimum of 1,383 additional victims may have left the accommodation if they had thought support and / or appropriate housing options would be available to them including appropriate provision for children and financial support.

5. Children and Young People Affected by Domestic Abuse in Sheffield

We know from the Women's Aid annual audit that 11,890 children were accommodated in refuge during 2020/21 and 10,809 women. This equates to 1.1 children per female on average.

Sheffield MARAC data for 2021/22 tells us that for every case discussed at MARAC there are 1.2 children affected on average.

If we take these rates and apply them to the estimated number of victims in Sheffield in the last year from the CSEW (21,683) we can estimate that there would have been around 26,019 children affected by domestic abuse in Sheffield in the last year.

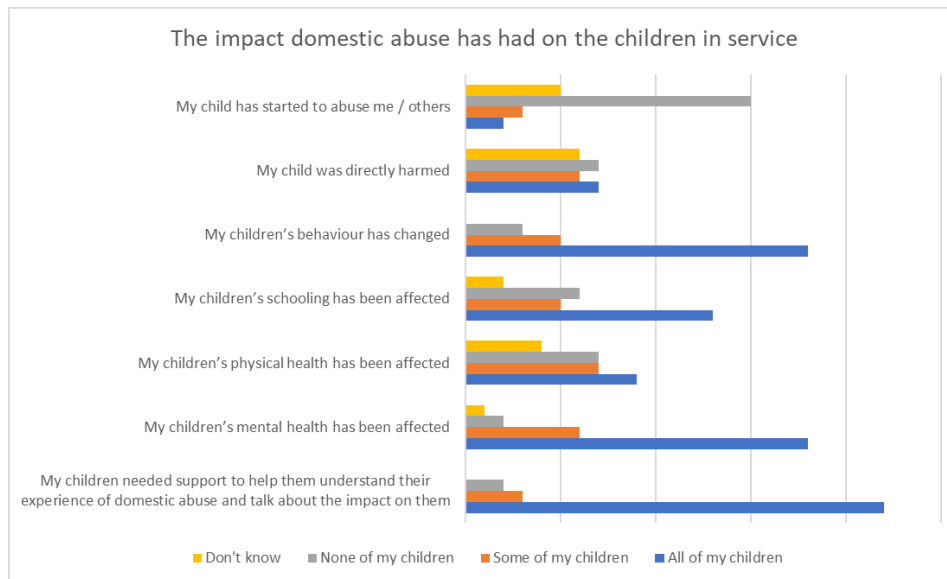
Changes in The Domestic Abuse Act 2021 recognise that children who experience domestic abuse in their families are direct victims in their own right²², therefore, their needs should be taken in to account when planning and commissioning services, including domestic abuse safe accommodation and support.

It is important that support for children who have been affected by domestic abuse is available and tailored to the needs and circumstances of the child or young person. Children / young people living with a parent who access safe accommodation because of domestic abuse in the family home are offered support via the commissioned domestic abuse services in Sheffield and new services have been commissioned using the DLUHC funding to support children living in all forms of safe accommodation, including homes with Sanctuary Scheme measures installed, however, we know that these services are not sufficient to meet demand.

Some young people experience homelessness because of family breakdowns due to domestic abuse and present to services as homeless in their own right. If the young person is not a direct victim of domestic abuse, there is a risk that support as a result of being affected by domestic abuse is not offered. There is no data for the number of young people that may be in this cohort but it is recommended that this is explored, that providers are aware of the support available to young people affected by domestic abuse, and collect data to inform future needs assessments of the potential demand for support. When commissioning support for young people capacity should be made available to include young people not in the family home.

As part of a service user consultation (the service user experience is discussed later in this report Section 11) people responding to the survey were asked about the impact of domestic abuse on their child(ren). The chart below shows how participants in the consultation felt their children had been affected:

²² <https://www.legislation.gov.uk/ukpga/2021/17/section/3/enacted>



93% stated that all or some of their child(ren) needed support to help them understand their experience of domestic abuse and to talk about the impact it had on them. 89% had seen the abuse impact on some or all of their children’s mental health, with 88% reporting that they had seen a change in some or all of their children’s behaviour. 69% of parents stated that some or all of their children’s schooling was also affected. Some or all of the children had been directly harmed as a result of domestic abuse in 50% of cases. 20% of parents had seen at least one of their children start behaving abusively towards other people including towards the non-abusing parent. These responses from victims in Sheffield show the extent to which children are affected by domestic abuse in their families and leaves them with support needs that need to be addressed and should therefore be included in the commissioning of safe accommodation provision for people affected by domestic abuse.

The chart above is based on responses to the specific questions asked, the survey also asked respondents to give more detail of how the children were affected or if there were other impacts on them. A variety of answers were received and included:

- Emotional Abuse and manipulation by the perpetrator
- Low confidence / self esteem
- Direct abuse of children by the perpetrator
- Child turned against the parental victim
- Child doesn’t see consequences because the perpetrator was not held to account

52% of respondents stated that a worker had talked to the family regarding children’s support needs and it was helpful, an additional 9% had spoken to a worker but the child was not interested in the support offered. However, the remaining 39% had not had a positive experience with a service regarding their children’s support needs; 17% had spoken to a worker but it was not helpful and the remaining 22% were not offered any support. Overall, 58% did not think that support for children in Sheffield was adequate.

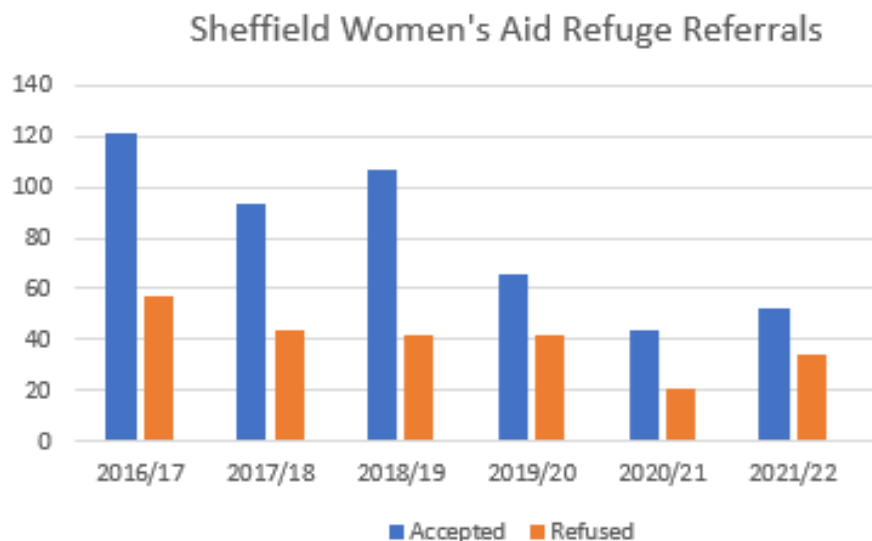
Recommendations

- Adequate provision to support children needs to be provided and should be included in core support requirements when commissioning domestic abuse safe accommodation
- All families accessing safe accommodation should have the opportunity to discuss their children's needs with key workers.
- Appropriate support / interventions need to be available in a timely manner to address the child's needs so that parents and children have a positive experience of support and find it helpful.

These recommendations are further supported by the findings of the Making Children Visible report²³ which recommends that as well as support to DA survivors in accommodation-based services, this must be underpinned by support services for all survivors and their children.

²³ Making Children Visible: A good practice guide from women's Aid specialist services from children and young people 2021

6. Sheffield Refuge Activity



In 2021/22 52 new referrals were accepted and entered the refuge²⁴. This is in comparison to an average of 86 referrals being accepted per year between 2016/17 and 2020/21.

The Housing Independence Service (HIS) data and data from the Oasis case management system below provides an insight into activity at the refuge:

- 100% had a female victim (which is line with the contract for refuge which is female only provision).
- 100% of those in the refuge have domestic abuse as either the primary or secondary need.
- In 2021/22 65% of residents at the refuge were with children, the proportion with children has been similar for the last three years.
- 68% of females supported at refuge were between the ages of 21 and 35, with 39% being aged 31 – 35. This data shows that 98% of service users were 55 years old or younger. We know that prevalence rates are higher in younger age groups, but there is also a lack of older age women accessing support. The oldest person at refuge in 2021/22 was 65 years old.
- 91% were heterosexual, 4% LGB+, 5% did not wish to disclose.
- 41% of those in refuge during 2021/22 stated their ethnicity as White British, 32% Asian/Asian British, 8% Black/Black British, 8% Eastern European, the remaining 11% were spread across other BAMER ethnicities.
- 84% of those exiting the refuge in 2020 were UK nationals.²⁵
- 28% of victims at the refuge during 2021/22 stated they had no religion, 39% said they were Muslim, 20% were Christian, 13% did not have this information recorded.
- A total of 76% reported a disability, 46% cited only mental health as their disability with a further 26% citing mental health alongside another disability.
- The main source of referrals to the refuge in 2021/22 was Housing Solutions who made 77% of all referrals received. A further 7% of referrals were received from other Sheffield

²⁴ HIS HSP Data

²⁵ CRD Analysis tool

local authority teams including Social Care and MAST.

- In 2021/22 the refuge made 5 referrals to Sheffield MARAC.²⁶ Other residents will have been heard at MARAC but referred by other agencies e.g. the police
- In 2021/22 123 children were accommodated alongside their mother at the refuge. This included 45 boys with an age range from 0 – 16.

However, in contrast to the findings of the national Women's Aid annual audit the Sheffield refuge data shows that applications are accepted from women of all backgrounds, those with additional support needs and those with older male children. It is however recommended that work continues to address inequalities in the provision available which will build on the progress already made in Sheffield against the recommendations of the Nowhere to Turn report.

There are also gaps in the data collected in respect of disability locally and this is also seen in the national Women's Aid data. We can identify the number of people who, for example, have a physical disability or a hearing disability, but the data does not tell us the living adjustments that they require such as wheelchair access or that an individual communicates using British Sign Language. It is imperative that this is addressed to better understand the need for accessible accommodation. In the absence of this data, it is important to remember that accessible accommodation is accessible to all, but standard accommodation will not be accessible for people with additional access needs.

It has also been identified through this needs assessment that although some improvements have been made since the previous report was compiled, there is not a lot of information locally on the LGBT+ community. As shown in the bullet points above 4% of residents at refuge stated that they were LGBT+, in comparison to 0% in the previous report. There is also a gap in the data collected in respect of people who are transgender, and work needs to be done to implement appropriate data collection to accurately collect this information. Due to the limited data and lack of visibility of these communities in Sheffield, the national findings need to be taken into consideration in local commissioning.

Recommendations

- Continue to provide support to people who face barriers to address inequalities.
- Improve the collection of disability data to better understand the access requirements needed.
- Ensure that promotion of services shows that they are inclusive and available to all
- Collect appropriate sexual orientation and gender identity data

The refuge receives referrals from victims fleeing from a number of local authority areas, and therefore is not an exclusive provision for Sheffield residents. Similarly, Sheffield residents can be and are referred to refuges in other Local Authority (LA) areas, if required. Limited information is known about Sheffield residents that seek refuge in other LA areas.

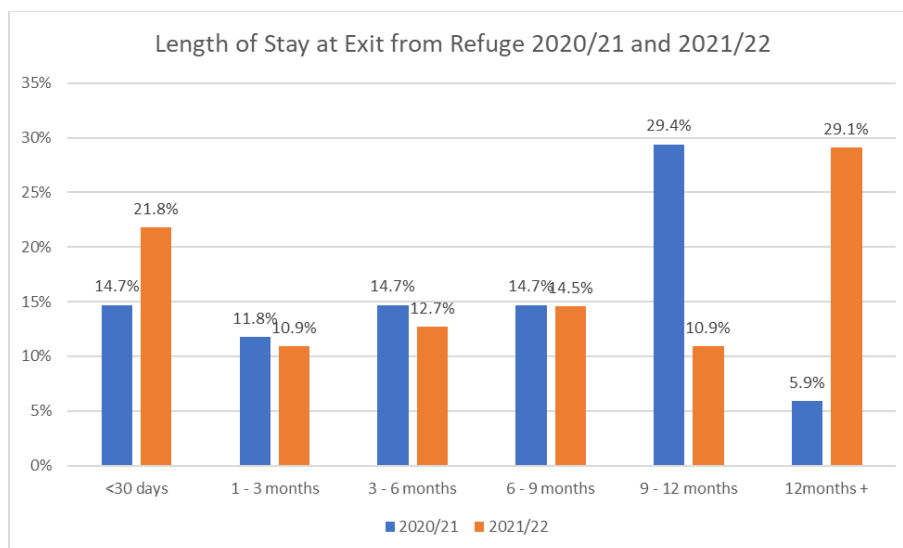
²⁶ Sheffield MARAC Rolling Record

Refuge Outcomes

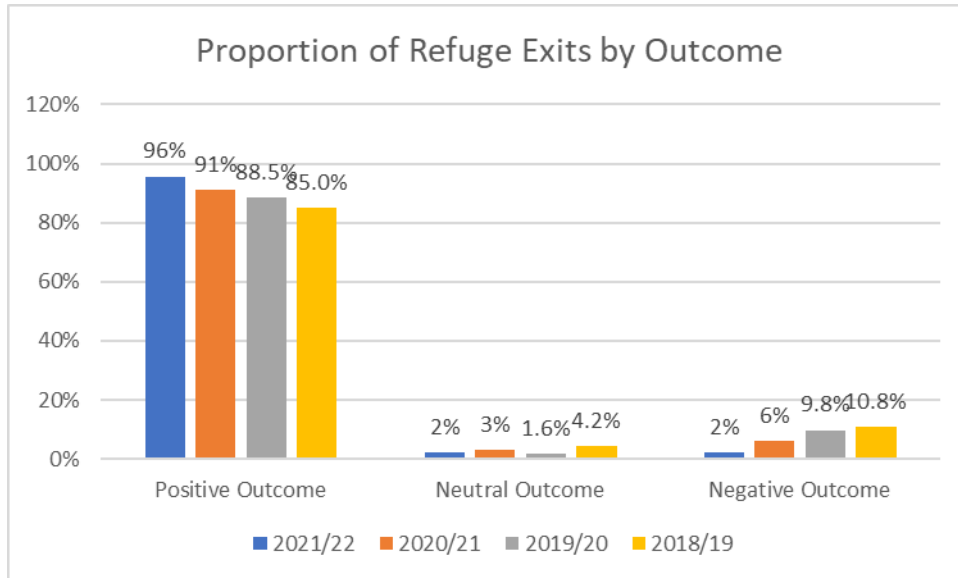
There was a total of 46 households that exited the refuge in 2021/22, this compares to 34 in 2020/21 and 62 in 2019/20. Exits were affected by the Covid-19 pandemic, the average number of households to exit the refuge per year was 103 during the 3 years 2016/17 to 2018/19.

The average length of stay for exits during 2021/22 was 262 days which is over 8 months but ranges from fewer than 30 days to over 2 years. However, 71% of exits were for people who had been at the refuge for 12 months or less, 46% stayed for 6 months or less.

See the table below for the exit data by length of stay in 2021/22 in comparison to 2020/21. It shows how the length of stay has changed due to the Covid-19 pandemic. The data shows that 2021/22 saw a large increase in the proportion of exits from refuge that had been resident for 12 months +. For example, 2020/21 there were only 34 leavers in comparison to 55 in 2021/22, and the longer length of stay in 2021/22 is because of those who entered the refuge during the lockdowns. Prior to the pandemic an average of 103 households left the refuge per year.



On exit from the refuge move-on outcomes are recorded. They record if the move-on from refuge was positive, neutral, or negative. The outcomes for the 55 households leaving the women’s refuge in 2021/22 are found below.



The proportion of exit outcomes that were positive was continued to increase in 2021/22 with 96% of outcomes being positive in the year. Consequently, the proportion of outcomes that were negative was lower in 2021/22 than in the previous three financial years. It should be noted however, that pre 2020/21 the number of exits per year exceeded 100 in the two years prior.

- 44 households or 96% of all leavers had a positive outcome.
- Of the positive outcomes 38% became an LA tenant with floating support, 15% returned home, 12% became a HA tenant with floating support, and 9% HA tenant (without floating support).
- Of the remainder of positive exits these were spread across the following exit reasons; Living with friends, moved to supported accommodation, moved to refuge, and now an owner/occupier.
- Negative exit reasons in 2021/22 were because the resident had been taken into custody.

The Oasis case management system collects additional information on people leaving the refuge and provides data on health and well-being allowing us to look at how the refuge has supported the victim to move on from the abuse.

Other outcomes achieved are collected for those exiting the refuge, the tables below show the types of support received and the impact this had on the victim. An individual may have more than one outcome in each of the tables:

Health Outcomes		
Any health outcomes	43	91.49%
Accessed Treatment Support Mental Health	34	72.34%
Accessed Treatment Support Physical Health	38	80.85%
Accessed Treatment Support Pregnancy Maternity	10	21.28%
Accessed Treatment Support Sexual Reproductive Health	8	17.02%
Better Able To Manage Mental Health	34	72.34%
Better Able To Manage Physical Health	35	74.47%
Better Able To Manage Sexual Reproductive Health	10	21.28%
Has Improved Positive Coping Strategies	35	74.47%
Has Reduced Self Harm	11	23.40%
Reduction in symptoms of trauma, anxiety	38	80.85%
Started Improved Engagement With Drug Alcohol Services	9	19.15%

Around 91% of exits reported at least one health outcome. Over 80% received support for physical health and 72% for mental health, with the same proportion reporting that they feel better able to manage their mental health. 81% of exits also reported a reduction in symptoms of trauma and anxiety.

Financial Outcomes		
Any financial outcome	45	95.74%
Accessed Material Aid	22	46.81%
Better able to manage finances	34	72.34%
Has Increased Access To Benefit Entitlements	29	61.70%
Is Better Able To Manage Debt	24	51.06%
Now Has Access To Public Funds	22	46.81%

Over 95% of women leaving the refuge received financial support. The refuge supported women to access material aid, better manage their finances, access the correct benefit entitlement, supported women to better manage their debts, and assisted service users to receive access to public funds. A specialist provider was commissioned to offer money and debt advice to refuge clients in 2021 using Domestic Abuse Act funding and this is ongoing.

Parenting Outcomes		
Any parenting outcome	29	61.70%
Survivor enrolled children in school/nursery through support	15	31.91%
Accessed parenting support group workshop programme	15	31.91%
Children registered with appropriate agencies	19	40.43%
Client supported through Contact Process	13	27.66%
Client supported through CP	10	21.28%
Improved relationship with children	22	46.81%
Increase parenting capacity	20	42.55%
Increased understanding of the impact of DVA on parenting	19	40.43%

62% of women also accessed parenting support. Women were supported to enrol their children in education and register children with appropriate agencies. Women were also supported to improve their relationship with their children and increase their understanding of the impact of the perpetrator's domestic abuse on their parenting. Again extra support for

children in refuges was commissioned using Domestic Abuse Act funding in 2021 that is ongoing.

Information is also collected at the beginning and end of support to look at how the victim's health and well-being changes during their time at the refuge. The information collected is for the OnTrack POWeR²⁷ scales produced by Women's Aid and available on the Oasis case management system. The forms ask how the victim is feeling about themselves and their ability to cope at a given point in time. By asking the same questions at the start and end of support we can see the person's improvement or deterioration over time. The form asks the following questions, and all are answered on a scale ranging from none of the time to all of the time:

- Have you been feeling safe?
- Have you been feeling confident?
- Have you been feeling good about yourself?
- Do you feel close to other people?
- Are you able to deal with problems well?
- Are you able to make up your own mind about things?
- Do you feel optimistic about the future?

In 2021/22 overall scores from these questions improved for around 77.5% of all exits from the service, 7.5% had an overall score that remained the same and 10% had a score that worsened.

At the end of support the following questions are also asked:

- Do you feel better able to recognise abusive behaviour?
- Do you feel more confident about asking for help when I need it?
- Has your support network improved?
- Are you clear that the abuse was not your fault?
- Do you feel more confident in your parenting skills?
- Do you understand more about the impact of abuse on your child(ren)?

In 2021/22 between 100% of those who responded to the question said that they agreed or strongly agreed with all the statements. No one reported disagreeing or strongly disagreeing with the statement, but some service users chose not to answer all questions.

The data highlights the importance of additional support provided to women who are accommodated at the refuge, beyond the access to a safe place to live, and the percentages reported show that this additional support is beneficial to most service users.

Additional information on the complex needs of refuge residents

²⁷ <https://www.womensaid.org.uk/what-we-do/ontrack/>

The exit assessment²⁸ also captures the additional needs of refuge residents. For the 55 individuals exiting in 2021/22 the following needs were identified:

- 27% were homeless families with support needs.
- 15% were single homeless with support needs.
- 11% had mental health problems.
- 7% were recorded as having complex needs.

The Oasis case management system reports the following needs for all who accessed the refuge during 2021/22:

- 34% had an insecure immigration status including being on a spousal visa, no status, and being on a visitor's visa.
- 25% required an interpreter.
- 39% had no recourse to public funds.
- 6% had accessibility requirements.
- 6% were pregnant.
- 15% had drug support needs.
- 9% had alcohol support needs.
- 7% had a physical disability.
- 33% had mental health needs.
- 9% were offenders.
- 93% had physical health needs.
- 72% were unemployed.
- 1% at risk of trafficking
- 24% at risk of Honour Based Violence (HBV)
- 9% involved in sex work.

The data above highlights the ability for Sheffield refuge to accommodate women with complex needs / vulnerabilities. This contrasts with the findings of the Women's Aid Annual Audit report which showed that these additional needs prevented some women from gaining a place at refuge. It also highlights the need to be able to support those with disabilities and mental health needs.

Further information regarding needs/issues:

- Experienced abuse before: Of those responding to the question 54% stated that they had experienced abuse before, and 31% had experienced or witnessed abuse as a child.
- Residents can have a range of mental health illnesses including borderline personality disorder, severe depression, PTSD, self-harming, eating disorders and thoughts of suicide.
- Residents often have a lack of self-esteem and confidence, trust issues, feel isolated and lonely, have little family support, and have a lack of control in their own life. Sometimes residents can be in debt as a result of the domestic abuse and therefore may have

²⁸ CRD Analysis Tool Refuge departures 2020

difficulties budgeting.

Residents are vulnerable due to a range of other issues including substance misuse issues and may have experienced adverse childhood experiences e.g. are more vulnerable due to having grown up in a household where domestic abuse happened or having been a victim of abuse as a child or young person.

- English was not a first language for 61% of victims accessing the refuge in 2021/22, they may have cultural and or religious needs including accessing children's religious education and sometimes a lack awareness of their legal rights.

The refuge supports the complex needs of the victims by applying a multi-agency model. This includes workers from the Homeless Assessment and Support Team (HAST) which provides access to healthcare and support services for homeless people in Sheffield who have mental health problems.

Staff also support residents with access to a midwife, solicitors and specialist BAMER support services and referrals are also made to drug and alcohol services where required. Using the DLUHC funding a substance misuse liaison worker for domestic abuse safe accommodation has been employed who works directly into refuge (amongst other domestic abuse safe accommodation) in order to ensure that residents have access to treatment for their substance misuse difficulties in a timely way.

Social media and the refuge - Historically a refuge hid the woman / family from the perpetrator; however, this appears to be changing. The use of and access to social media by residents (mobile smart-phones etc.) means that often the victim's location is shared and known to those who know her, and therefore refuges remain a safe haven to protect the victim physically, but residents are often no longer 'hidden' from the perpetrator.

Going into a refuge is a big decision. When service users were consulted it was found that they had several fears or concerns over accessing such provision. For example, one of the service users did not consider a refuge as she did not want to give up her home, and another did not consider refuge initially because she had an older male child and a number of other children and therefore did not think it would be an option based on the size of the family. Some stereotypes about the quality of accommodation offered by refuges also persist.

When the Sheffield refuges are full refuge options may be available via the Women's Aid Routes to Support database. The Women's Aid Annual Audit 2022 reports the change in refuge vacancies posted in England during 2020/21. The total vacancies posted reduced by 2060 in comparison to the previous year, a decrease of 20%. However, this data is impacted by the Covid-19 pandemic when refuges struggled to move on residents to suitable accommodation, or were not accepting new residents due to reduced staffing and having to reduce the number of residents to meet government guidelines.

The number of available places reduced further when specific needs were considered. Of the total spaces available 42.2% could accommodate a woman plus two children, and 15.3% a

woman with three children. Just 6.3% were available to women with NRPF. 1.4% had full wheelchair access and 1.2% could also accommodate a person with limited mobility.

For male victims of domestic abuse, the number of available spaces nationally for men only in May 2021 had reduced by 1 in comparison to the previous year, however, the overall number of spaces which men can access (because they are available to both men and women) has increased by 100 spaces, a 55% increase. 14.5% of all refuge services on Routes to Support had space for men, and 6.5% of all available spaces were available to men. Overall, there has been an increase in provision available for men in comparison to the previous year.

Refuge victims of domestic abuse with No Recourse to Public Funds (NRPF)

Sheffield domestic abuse refuges provide accommodation for some domestic abuse victims who have No Recourse to Public Funds, these are victims who are staying in the UK with a temporary immigration status.

The local authority has a duty since April 2012 to pay housing benefit for such individuals for an initial three-month period if they are granted temporary recourse to public funds under the Destitution Domestic Violence Concession (DDVC). The concession however only applies to women on spousal visas²⁹, therefore it is even more complex for victims who are an 'over stayer' or for those not on a spousal visa (e.g. student visa) to receive assisted funding. However, during the Covid-19 pandemic the Home Office announced a £1.5 million pilot fund to support those with no recourse to public funds in securing safe accommodation. This pilot will also be used to assess the level of support needed for migrant victims, to inform future funding decisions.³⁰

Information from the refuge case management system shows that out of all females accessing the refuge in 2021, 38% did not have recourse to public funds – demonstrating Sheffield's commitment to supporting women in this cohort.

Of these residents at the refuge³¹:

- 53% had multiple vulnerabilities.
- 70% had mental health needs and 77% had emotional health and well-being needs
- 77% had at least one need for their child(ren), 38% needed to access specialist support for their children, 31% had issues around child contact.
- 38% had a work, training and education need.
- 38% required support regularising their immigration status and 62% support with clarifying their status.
- Emotional and financial abuse (often features of coercive control) were the most experienced forms of domestic abuse suffered by 91% and 73% of victims, respectively.
- On average, victims had suffered domestic abuse for 3 years.
- 62% were at risk from a perpetrator with a history of violence
- 29% were vulnerable because of cultural issues
- 14% were involved in sex work.
- 36% were at risk of honour-based violence. There were no victims were recorded as

²⁹ <https://www.gov.uk/government/publications/application-for-benefits-for-visa-holder-domestic-violence>

³⁰ <https://migrate-uk.com/no-recourse-to-public-funds-nrpf-temporary-concessions/>

³¹ Oasis reports wizard client outcomes report

being at risk of forced marriage or FGM.

The data shows that individuals who are NRPF are more likely to need support for more needs than those who are not NRPF.

7. Sheffield Safe Zones

Safe Zones, a project offering dispersed safe accommodation with specialist domestic abuse support, was commissioned to work with men and women with complex needs, as well as women from LGBT+ communities, who did not wish to go into a refuge thanks to DLUHC funding awarded in early 2020, with support provided by IDAS. When the pandemic struck, a decision was made to take anyone with a domestic abuse need as demand had increased and there was pressure on refuge, other supported and temporary accommodation including B&Bs. Since September 2020, Safe Zones has been moving back to the original commissioning intentions.

In 2021 there were 57 people supported via Safe Zones³², 51 females and 6 males, representing a large increase in the number supported in 2020 (22). 39 of the 57 had children, with a total of 100 children accommodated. 17% of the males accommodated had children (a reduction from 50% in 2020), 75% of the women accommodated had children, similar to 2020.

There was a total of 68 referrals to Safe Zones in 2021 and 47 of them (69%) were accepted.

16% of those accommodated were aged 16 – 25, 51% aged 26 – 35, 26% 36 – 45, and 7% 46 – 55. Again, this data shows a lack of referrals for those in older age groups.

70% of Safe Zones residents have a disability, and 33% of those have more than one disability. The most common reported disability was mental health reported by 88% of those with a disability. Other disabilities reported were Learning, long term health condition, physical, visual and speech impairment.

42% of service users with Safe Zones in 2021 were BAMER.

2% Safe Zones service users were recorded as LGB+ in 2021. No service users are reported to be transgender.

Support plans for people accessing support via Safe Zones show that with the exception of housing need, service users mainly seek support around emotional health and well-being, criminal and civil justice, finances, safety, and children.

Available data shows that two of the service users did not have recourse to public funds.

For those who have exited the service, the duration of stay varies greatly from 1 week to over 12 months. 6% of service users were resident for over 12 months, 28% were resident for 6 days or fewer. Around 50% were resident for between 1 and 7 months. Positive outcomes were recorded for 69% of exits from Safe Zones in 2021.

From a data perspective there appears to be little difference in outcomes of refuge to Safe Zones provision, which is encouraging and indicates that the dispersed model is having a positive impact for those who need to flee domestic abuse.

³² Data taken from the Oasis Case Management System

8. Temporary and Supported Accommodation

In 2021/22 there were 765³³ homeless presentations in Sheffield because of domestic abuse, an 11% increase on the previous year. 87% of presentations were female and the increased number of presentations were all female, meaning that female presentation increased by 14%, they did not increase amongst males. Out of all accepted domestic abuse applications in 2021/22 10% were for males.

Regarding suitable accommodation for homeless applications because of domestic abuse, around 51% of female applicants had dependent children with them, in contrast to this around 12% of male applicants had children with them.

Of the 765 homeless presentations, data from the Housing Support Pathway (HSP) shows that 268 were allocated supported accommodation, 95 went to a Sheffield refuge and 258 were placed in other temporary accommodation locations across Sheffield. An additional 20 people received other types of support following their application, such as floating support. In total (including those who received only floating support) 506 of the 765 presentations were supported, equating to 66% of presentations. Some people may have received more than one type of support. In terms of those placed in accommodation the proportion is 64%.

Using the ONS population estimates for the relevant years we can see that, in 2021/22 homeless presentations because of domestic abuse were 0.13% of the Sheffield population, an increase on the previous year of 0.091% equating to an increase of 0.039 percentage points. If this percentage point increase remains the same year on year, we can estimate that by 2030 0.4% of the Sheffield population may present as homeless because of domestic abuse equating to 2,400 people (population estimate for 2030 is 618,261). If we suggest that the proportion presenting will remain somewhere around 0.13% this would equate to 804 presentations in 2030. The mid-point between the estimate of 2400 presentations and 804 presentations would be 1602 presentations per year.

Supported Accommodation

Including refuge provision 35% of female presentations were placed into supported accommodation in 2021/22, this compares to 10% in 2020/21, and 17% in 2019/20. It is reassuring to see that the proportion of females placed has increased following the Covid-19 lockdowns and is linked to increased move-on rates. In 2021/22 35% of male presentations were placed in to supported accommodation in comparison to 20% in 2020/21, and 32% in 2019/20. In respect of the actual number of people placed in supported accommodation, the number of females equated to 87% of all supported accommodation placements in 2021/22. Out of all males placed in supported accommodation 6% had a child, in comparison to 13% of all male presentations. For females 38% of those placed in supported accommodation had a child, and this compares 51% of all female presentations having a child.

³³ Data from the Housing Support Pathway (HSP)

Looking at those who were accommodated at refuge; 36% of people in receipt of supported accommodation accessed the refuge. 100% of service users at the refuge are female, 14% of all female presentations had an episode of support at the refuge, and 36% of those staying at the refuge had children.

Of those receiving supported accommodation but not with a refuge stay, 81% were female and 39% of them had children. Amongst males 6% had children.

An individual can receive more than one type of supported accommodation. The data available shows that 16% (43 service users) of the 268 supported were accommodated in the refuge but also had a stay at other supported accommodation at some point in the year.

Temporary Accommodation

36% of female presentations and 18% of male presentations were placed in temporary accommodation, equating to 240 females and 18 males. This represents a reduction from 32 for males placed, but an increase from 148 females placed in 2020/21. 52% of females placed in temporary accommodation had children with them, 33% of males placed in temporary accommodation had children with them, an increase from 2021/22 when no males placed in temporary accommodation had children. The high proportion of people placed in temporary accommodation highlights the need for more specialist safe accommodation to be available in Sheffield.

Unplaced Domestic Abuse Homeless Presentations

Out of the total 765 homeless presentations because of domestic abuse 66% received support following their application. 66% of all female presentations were supported and 67% of all male presentations. This is an increase from 40% of females and 60% of males in 2020/21. There is no data available on the outcome of the homeless presentations that do not receive support via the Housing Support Pathway. However, what we do know is that 3% of all presentations received only floating support in 2021/22. We also know that 31% of placements in the Sheffield Women's Aid refuge in 2021/22 were from outside of Sheffield. If 31% of domestic abuse homeless presentations in Sheffield were accommodated outside of Sheffield in 2021/22, this would equate to 237 people. This would mean 743 people may have been provided with suitable safe accommodation, which would leave 22 people not supported.

We also know from the Women's Aid No Woman Turned Away report that 4% of victims presenting to that service went to live with family or friends. Applying this to the 765 presentations in Sheffield in 2021/22 would equate to 31 presentations may have had a similar outcome, which is greater than the number not supported with accommodation or floating support in Sheffield.

9. Support in the Community

Dispersed Temporary Accommodation

Using funding allocated via Part 4 of the Domestic Abuse Act, the provider of community based domestic abuse support were commissioned to provide specialist domestic abuse support into a number of council properties which are utilised as temporary accommodation, therefore these additional properties are included in the definition of domestic abuse safe accommodation, the number fluctuates according to need and availability. As at the end of March 2022, there were 25 households supported in this way.

Housing referrals to the high risk and medium risk community support service

In 2021/22 housing support agencies³⁴ made 181 referrals to IDAS the community domestic abuse service in Sheffield, up from 171 in the previous year. During the same period housing support agencies also had 295 contacts with the helpline in comparison to 261 the previous year. Showing that there are now more contacts with the service from housing support agencies.

The proportion of referrals housing support agencies made that were high risk increased in 2021/22 in comparison to 2020/21; 27% were high risk in 2020/21, 32% in 2021/22. These rates are higher than the average for the service overall which is around 20% of all referrals to the service are high risk.

Sanctuary scheme

The Sanctuary Scheme provides victims of domestic abuse with safety equipment to keep them safer in their own home.

In 2021/22 599³⁵ households received Sanctuary Scheme support; this is a similar number to the previous year when 593 people received Sanctuary Scheme support.

In 2021/22 1,144 safety items were installed at victims' properties through the Sanctuary Scheme. Safety items include, solar lights, door chains, door bolts and window alarms. The most installed item was a window alarm, 53% of people receiving support from the Sanctuary Scheme received window alarms. Additionally, 14% received door chains and door bolts, 12% solar lights, 5% had their locks changed. An individual may have received more than one item. Although 2021/22 saw 6 more households receive Sanctuary Scheme support, in 2020/21 there were 2,920 safety items installed which is 1,776 more items that during 2021/22. This may indicate that people requiring Sanctuary Scheme support during 2020/21 were at greater risk and/ or that there were fewer options to move during the covid-19 pandemic.

³⁴ Any organisation providing housing related support in Sheffield

³⁵ IDAS contract monitoring PMF 2020/21

Sanctuary Scheme

Sex	
Female	97%
Male	3%

Ethnicity	
White British	72%
BAMER	26%
Unknown	2%

Age	
16 - 20	1.3%
21 - 25	13.3%
26 - 30	20.9%
31 - 35	21.8%
36 - 40	15.0%
41 - 45	9.8%
46 - 50	6.8%
51 - 55	5.6%
56 - 60	2.6%
61 - 65	1.3%
71 - 75	0.4%
unknown	1.3%

Sexuality	
Heterosexual	91%
LGB+	4%
unknown	5%

Transgender	
Yes	2%
No	87%
Unknown	11%

In 2021/22 97% of people receiving support from Sanctuary Scheme were female, 26% were BAMER, 4% LGB+, and 2% transgender. The data also shows that recipients of Sanctuary Scheme support are weighted towards younger age groups, with the 26 – 30 and 31 – 35 age groups each accounting for over 20% of all recipients.

52% of those receiving Sanctuary Scheme support had one or more disability:

Disability	
Hearing	1%
Learning	5%
Long term disability	9%
Mental health	44%
Physical	9%
Vision	1%

The most prevalent disability was mental health, 44% of those with a disability have mental health issues, 9% had a physical disability and 5% a learning disability. As highlighted previously, there is a need to better understand the additional access requirements of people with a disability.

It is difficult to determine the full impact of Sanctuary Scheme provision for those who accessed it from the data available, and there is a need for this to be improved in order to understand the effectiveness of the provision. What we can see in the data is that in 2021/22 only 2% disengaged with the scheme, 90% completed their support with the scheme positively and 2% went on to receive additional domestic abuse support from IDAS following Sanctuary Scheme support. Also, for those who had the data recorded, 92% of people

receiving Sanctuary Scheme support did not move to a new address, showing that the Sanctuary Scheme offer provided additional security to victims to allow them to be safe in their own home.

Further support for people at risk of domestic abuse

Specialist domestic abuse floating support is commissioned within the Homeless Prevention and Resettlement Service provided by Shelter.

Shelter provides support to people who are at risk of, or experiencing domestic abuse, to access safe and secure housing and enable them to receive the necessary advice, assistance, and support. Shelter will complete DASHs and will refer to MARAC where appropriate.

Once in accommodation, Shelter continue to provide support; and will support someone, if the victim chooses to remain in their own home. The support worker is responsible for “case co-ordination”, ensuring that all components of the safety and support plans work together to help clients increase their safety and reduce risks to themselves and their children as well as enable recovery from the impact of domestic abuse.

The service provides group activities to enable social interaction, combat isolation and promote recovery from the impact of domestic abuse. Additionally, they will facilitate access to provision in the city including structured group work programmes.

In 2021/22 3% of homelessness as a result of domestic abuse presentations in Sheffield were offered other support only (floating), 2.5% of female presentations and 3% of male presentations, a decrease from 3.4% of females but an increased from 1.2% of males in 2020/21. 76% of females receiving other support had children, no males receiving other support had children with them.

In 2021/22 Shelter supported 75 people with a domestic abuse support need, a small increase on the previous year when 63 were supported. In both years over 90% of the people supported have been female.

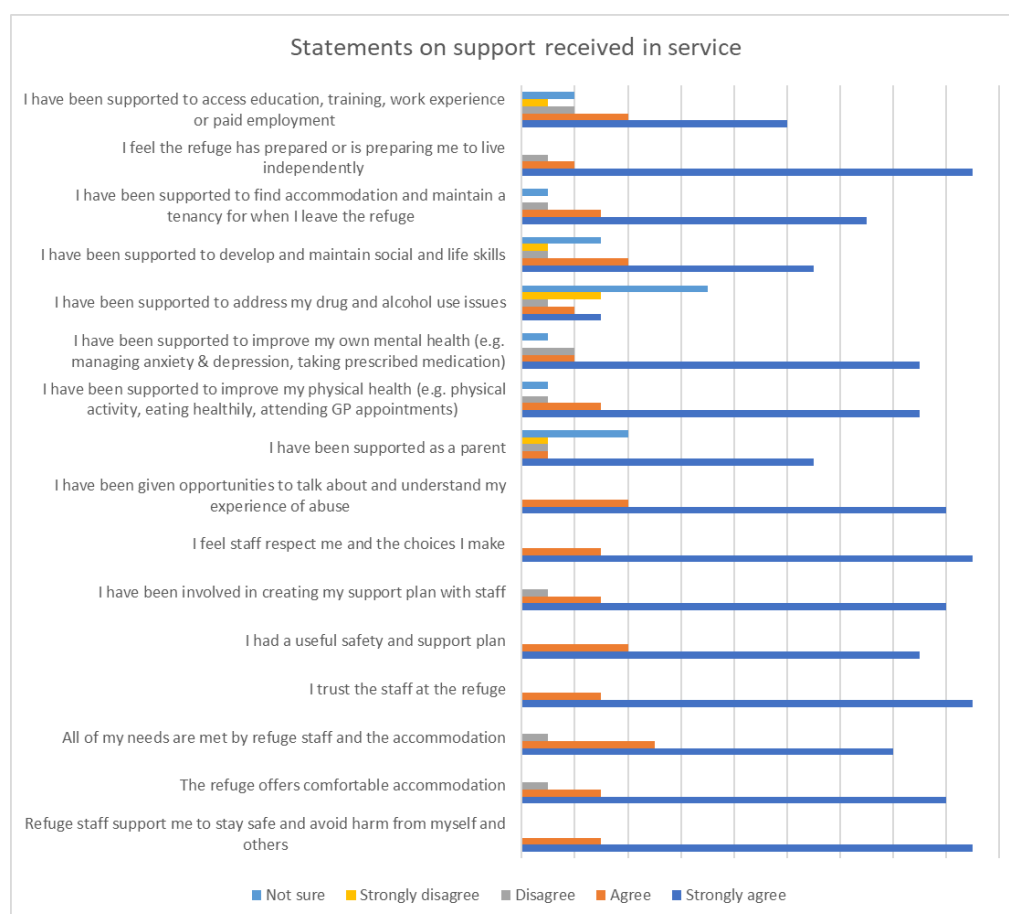
In 2021/22 31% of people supported were BAMER, however, this has reduced in comparison to 2020/21 when 40% of those supported were BAMER.

10. Service User Experience

In spring 2021 a consultation questionnaire on domestic abuse was run which included questions on the experiences of service users who have used domestic abuse related accommodation services. This consultation was carried out to help inform this Needs Assessment and the Domestic Abuse Safe Accommodation Strategy 2021-2024 for Sheffield. For this needs assessment refresh, this consultation has not been replicated. However, from information gathered in 2021, a range of additional support options for those in safe accommodation have been commissioned and continue to be so, including mental health counselling, access to substance misuse support, specialist welfare benefit advice, therapeutic support for children and specialist housing advice and support.

We know from The Women’s Mental Health Taskforce report³⁶ that there is an urgent need for support to better respond to women’s experiences and the realities of their lives and so this survey helps us to look at the needs that are not being met as well as those that are met.

Refuge – For women accessing a refuge 90% reported that they felt safe and secure, the remaining 10% stated that they felt somewhat safe and secure. The majority (85%) reported receiving the right amount of support from the refuge, however, 5% did not think that they had received enough support. The types of support received whilst at refuge are shown in the table below:



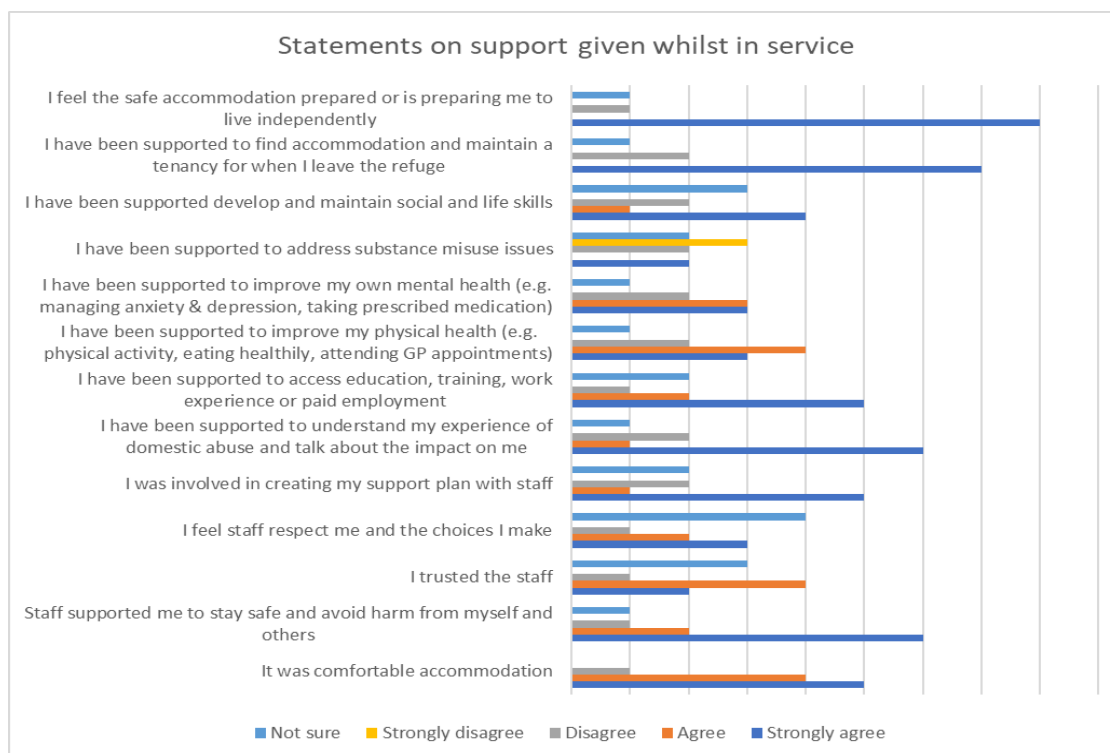
³⁶ <https://www.gov.uk/government/publications/the-womens-mental-health-taskforce-report>, Department of Health and Social Care

It is reassuring to see in the chart above that for every support type the majority of service users agreed or strongly agreed that they were supported in each of the areas listed. Given that the majority of women who accessed refuge stated that they received the right amount of support the responses to this survey highlight the need to ensure the support offer from refuge continues to include this range of support needs. However, the data also highlights the need to make improvements in some areas. This may be enhancing the offer available or ensuring that staff / support workers at refuge are aware of all the support available in Sheffield and how to access it. Areas for consideration based on the findings of the survey are:

I have been supported to address my drug and alcohol use issues	25% of service users disagreed or strongly disagreed with this statement
I have been supported to access education, training, work experience or paid work	16% of service users disagreed or strongly disagreed with this statement
I have been supported as a parent	11% of service users disagreed or strongly disagreed with this statement
I have been supported to develop and maintain social and life skills.	10% of service users disagreed or strongly disagreed with this statement

People were also asked what else could have been offered by the refuge to support them. Responses included educational classes, cooking skills, self-defence, and counselling / therapy for children. With regards to children of victims that stayed at refuge, 13% did not think that their child(ren) were supported to access and maintain their education while at refuge, the same percentage also felt that their child(ren) were not supported to understand their experience of domestic abuse and the impact it had on them.

Other Safe Accommodation – for people placed in alternative safe accommodation that was not a refuge, 20% responded to say that they did not feel very safe or secure in the accommodation, and 60% stated that they did not receive enough support from services when they were in the accommodation. Residents of safe accommodation also responded to questions on the support they received and this is shown in the chart below.



As with the refuge most people responded to say that they either strongly agreed or agreed with most of the statements above. However, similar to the experiences of refuge residents there was a varying proportion of people who disagreed with each of the questions asked, again reinforcing the need to continue to have the provision of these support types, but also to understand why some people’s needs have not been met and what could be done differently, either by the domestic abuse service supporting the individual or the support / services that provide the additional support. Support to address substance misuse issues stands out the most in the chart above. 71% of those responding to this question either disagreed or strongly disagreed that they were provided with support to address substance misuse issues.

Comments were received by those who had been placed in other safe accommodation to highlight that their individual circumstances were not properly taken into consideration when being offered alternative accommodation and they were given accommodation that was not suitable for them. These comments are not included in this document due to the sensitive nature of them, but the findings should be reviewed and considered so that they inform future decision making.

Sanctuary Scheme – Of the people receiving Sanctuary Scheme support 86% stated that the Sanctuary Scheme security measures made them feel safer in their own home. However, it was noted in the responses that none of the equipment offered had the ability to record video and they therefore felt that the equipment offered was not sufficient.

In regard to gaps in the provision provided to people who accessed support from the Sanctuary Scheme people felt they needed more support for their children and also how to keep the children safe, longer term support from providers, more legal advice, and also

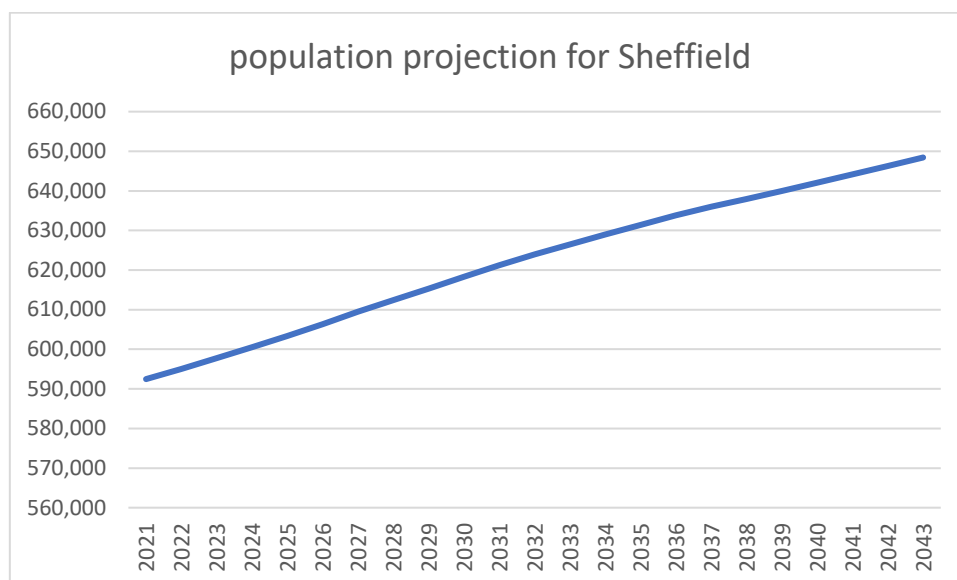
feeling that their safety issues were not addressed. Respondents also felt that services need better promotion and that overall there was not enough support available in Sheffield.

Recommendations

- Continue to provide a wide range of support for service users to support individual circumstances
- Ensure up to date information about additional support available and the appropriate pathways are available to support staff to find the right support for a service user's needs, and their children
- Explore additional and alternative practical and therapeutic support options
- Review the types of equipment made available through Sanctuary Scheme.

11. Conclusion

The Office for National Statistics projects that the population of Sheffield will continue to grow as is shown in the chart below, with an increase of around 29,000 people over the next 10 years³⁷:



Nationally police reported incidents also continue to grow and it can be estimated that demand for refuge and safe accommodation for those fleeing domestic abuse will increase year on year and this needs to be factored into commissioning decisions.

The data shows that the Sheffield refuge and Safe Zones project caters for a wide range of needs, which is encouraging as the Women's aid report indicates that not all refuges provide the same expansive offer.

Whilst recognising that Sheffield offers a broad offer of support this report has shown that some victims and their children do not always receive all the support they need. Consideration needs to be given for the continued provision of mental health support, including specialist counselling, and pathways into substance misuse treatment for those who require it also need to continue to improve. Additionally, support options need to stay in place for those who are NRPF and further work needs to be undertaken to better support those with additional needs due to disability. The needs of children must continue to be taken into account in future commissioning decisions, particularly given the change in legislation which recognises children as direct victims of domestic abuse in their own right. It is also important that there is a continued commitment made to the minimum number of safe accommodation spaces commissioned.

The public need to know that the services and safe accommodation offer is inclusive and available to all victims, fair representation of all groups should be seen across all services.

³⁷

<https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationprojections/datasets/localauthoritiesinenglandtable2>

12. Recommendations

1. Continue to build on progress made in Sheffield on the Nowhere to Turn Recommendations.
2. Review the impact of the additional DLUHC funding to services.
3. Ensure future commissioning of safe accommodation includes appropriate spaces to meet the needs of the LGBT+ community.
4. The safe accommodation offer needs to continue to ensure it meets the needs of ethnic minority communities. Questions on ethnicity to be part of the forthcoming service user consultation and will inform commissioning and practice.
5. Continue to promote domestic abuse services to the public to raise awareness of the support available, to increase awareness amongst victims but also the people they talk to.
6. Continue to commission professional domestic abuse awareness training to help professionals identify abuse victims.
7. Consider the prevalence estimates and findings that suggest domestic abuse rates are higher amongst younger people, meaning that safe accommodation provision needs to be suitable for single units and those with small children.
8. Increase the number of safe accommodation spaces available to reduce the need for those affected by domestic abuse to be placed in temporary accommodation.
9. Provide targeted promotion to under-represented groups, such as those with disabilities as the data suggests prevalence rates are higher amongst this group than the general population.
10. Allow services to be provided to meet the needs of the individual through innovation and utilising technology so that support can be delivered in different ways such as online group work.
11. Ensure that services providing homeless support to young people are trained to identify those who have been affected by domestic abuse and are aware of support available to them.

12. Collect data on homeless young people to inform future needs assessments of the demand for support from this cohort.
13. Additional support options for victims should be available to support individual needs and circumstances.
14. Adequate provision to support children needs to be provided and should be included as additional support requirements when commissioning domestic abuse safe accommodation. Focus should be given to counselling and therapeutic support for children, helping the child to understand the abuse, access their education and recover from their experience.
15. All families should have the opportunity to discuss their children's needs with key workers who will support them in a domestic abuse informed way.
16. Appropriate support / interventions need to be available in a timely manner to address the child's needs so that parents and children have a positive experience of support and find it helpful.
17. Ensure up to date information about the additional support available and the appropriate pathways are available to support staff to find the right support for a service user's needs and their children. Such as the support available to help a parent address their substance misuse.
18. Continue to explore additional and alternative practical and therapeutic support options.
19. Continue to provide support to people who face barriers to accessing services to address inequalities.
20. Improve the collection of disability data to better understand the access requirements needed.
21. All commissioned services need to improve data collection of service user demographics and equalities data.
22. Provide appropriate accommodation that can be accessed by people with disabilities, such as appropriate facilities for a person with a mobility or visual disability.
23. Ensure that promotion of services shows that they are inclusive and available to all

24. Collect appropriate gender identity data
25. Review the types of equipment made available through Sanctuary Scheme
26. Use the findings of this report to inform strategy and future commissioning.

13. Appendix A

The Report summaries below have been compiled from a variety of reports and a literature review carried out by VIDA Sheffield.

Report title	Summary / Key Points
<p>Sheffield Women & Girls Recovery & Empowerment Partnership Impact Report 2016 - 2020</p>	<ul style="list-style-type: none"> • The Women & Girls Recovery and Empowerment Partnership was funded through a national £45.5m lottery bid, investing in 63 projects. • Each partner offered “therapeutic” services • There were 5 themes used to summarise the range of approaches: <ul style="list-style-type: none"> ○ Learning about our feminist approach ○ Learning about our participation and user involvement ○ Learning about partnership working ○ Learning about responding to a pandemic. ○ Learning from the national women & girls initiative <p>Recommendations from the 3 service user involvement groups:</p> <ul style="list-style-type: none"> • Women’s services need to be better publicised online and in person. • The first contact is scary. Women may benefit from a “peer meeting” • Needs to be a range communication styles to suit the individual (text, phone, email, letter) • Services should be easy access from public transport and if possible, travel expenses provided ahead of time. • Services should be varied and include support outside 9-5 • Service users should be involved in all levels of recruitment for new workers
<p>Making Invisible Men, Visible. (ManKind Initiative, June 2021)</p>	<ul style="list-style-type: none"> • An inclusive needs assessment must include male DA victims and their children. It is important to assess where there is a difference between those visible in services and how many should statistically be visible, analyse the data and for services to establish why this may be the case. • Male DA victims are largely invisible to society and public services. Men make up 1/3 of all victims of DA and ¼ of all victims who report to police forces, but only 1/20 of victims supported by community services. 1/6 men will be a victim of DA in their lifetime. • Nationally, there is a lack of safe accommodation for male victims and their children. Mankind estimates 300 men are sleeping rough due to partner abuse each night. • It is important for Local DA partnership boards to consider “the real picture” of the safe accommodation needs of male victims. The board should be aware of where the nearest support is. • Safe accommodation options should be holistic i.e. inclusive of intersectionality of need. • Providers of male safe accommodation need to be clear to partner agencies that the service is available through proactive contact and provision.

	<ul style="list-style-type: none"> • Recommends including a wide range of agencies in the needs assessment (a list is included as an appendix) and conducting qualitative interviews. Partaking agencies should be named. • Recommends using gendered nouns (and non-binary) rather than generic “victims” to be clear it applies to all genders in the needs assessment. • Recommends considering the pathways for male victims as they may take longer to access safe accommodation. • Recommends ensuring male voices (qualitative and quantitative) are heard in the needs assessment and representation of male victims on the board. • Results of needs assessments for male victims should be pooled with other neighbouring LAs.
<p>Making Children Visible: A good practice guide from women’s Aid specialist services for children and young people 2021</p>	<ul style="list-style-type: none"> • One in seven (14.2%) children and young people under the age of 18 will have lived with domestic violence at some point in their childhood • In the financial year 2019-20, 62.5% of women in refuge services had children and 8.3% were pregnant <p>Recommendations:</p> <ul style="list-style-type: none"> • In their time of need, all children should have access to professionals in statutory and non-statutory services • Must be recognition of the long-term impact that domestic abuse has on CYP • increased recognition of the benefits of specialist support services, refuges, outreach work, prevention work in schools, and local communities in both challenging and changing cultures • As well as support to DA survivors in accommodation-based services, this must be underpinned by support services for all survivors and their children. • the needs of CYP must be considered as a central part of funding for domestic abuse services, to ensure funding for children is not an ‘optional extra’ but integrated as a core part of service delivery • Within funding and commissioning arrangements, there must be trust in the expertise of specialist organisations to use funding in the best way that reflects the needs of CYP they are supporting • Funding for a project or organisation should cover it in full so expectations are realistic. • Dedicated funding is needed to ensure there are trained front-line workers in the specialist sector with Continuing Professional Development (CPD) value, as well as funding for specialist services to deliver training to statutory and non-statutory staff on domestic abuse
<p>LGBT+ Domestic Abuse Needs Assessment for Central Bedfordshire Council April 2021</p>	<ul style="list-style-type: none"> • Nationally, the prevalence of domestic abuse for LGBT+ people is at least as high as for cisgender heterosexual women. Bisexual women and trans people are at particularly high risk of experiencing abuse from a partner. There is little research into the prevalence of abuse from family members. <p>In central Bedfordshire:</p> <ul style="list-style-type: none"> • Almost two thirds of LGBT+ people report abusive behaviour from family members and over three fifths from partners or ex-partners

	<ul style="list-style-type: none"> • Certain sub-groups within the LGBT+ community appear to be more likely to experience domestic abuse. These include trans people, non-binary people, bisexual and pansexual people. • Young LGBT+ people and LGBT+ people from BAME backgrounds appear to be more likely than other LGBT+ people to experience domestic abuse from family members. • One third of LGBT+ people who have experienced abuse from a partner or ex-partner, and approximately one sixth of those experiencing abuse from a family member have told no-one about these experiences • LGBT+ victims/survivors are much more likely to rely on informal networks such as friends and family for support, than they are to speak to professionals. Very few respondents had been in contact with specialist domestic abuse services or police. • Key recommendations for Central Bedfordshire council cover: Local Strategies, Prevention and early intervention, awareness raising, data and monitoring, and access to services. • Recommendation to adopt and implement Galop's <i>Commissioning for inclusion: Delivering services for LGBT+ survivors of domestic abuse</i> – see below.
<p>LGBT-Commissioning-Guidance-final-2.pdf (galop.org.uk) May 2021</p>	<ul style="list-style-type: none"> • Ensure that LGBT+ communities are considered from the start and are specifically identified in any needs assessment. • Identifying how the needs assessment will specifically consider LGBT+ communities is an opportunity to build-in inclusive practice from the start of the commissioning process (e.g. LGBT+ communities could be identified as a priority group within the assessment's terms of reference). • Include local LGBT+ services or community groups in needs mapping and assessments and consult with LGBT+ survivors in a way that treats LGBT+ survivors as a diverse group • As a minimum, it is important to understand: The size of the local LGBT+ population; and Service level data evidencing needs and outcomes (including the types of referral, levels of need, the services accessed and evidence of service use, together with outcomes and impact. This could also address evidence of unmet needs or barriers to help and support)
<p>The Women's Mental Health Taskforce DHSC & Agenda Final report Dec 2018</p>	<ul style="list-style-type: none"> • The Taskforce identified an urgent need for support to better respond to women's experiences and the realities of their lives, • This work has taken an important step forward in recognising the needs and experiences of women with mental ill-health and in sharing that learning with the health and care system. Based on the learning of this work, the Taskforce has produced a set of principles to be used across the health system, to embed changes to move towards more comprehensive gender and trauma-informed mental health service provision. <p>The six strategic priorities for the direction of this future work are:</p> <ol style="list-style-type: none"> 1. Explicitly considering women's needs in all future mental health policy development, locally and nationally.

	<ol style="list-style-type: none"> 2. Further embedding trauma-informed care by raising expectations across services and awareness across the system and developing the evidence base to demonstrate this value of these approaches. 3. Supporting Routine Enquiry. 4. there is better access for women and girls to gender-informed and gender specific holistic services and after care, including through the women’s sector. The Taskforce would like to see such support accessible in every area, providing specialist treatment for women 5. Recognising that women’s identities, 6. Ensuring the safety of women in residential mental health care.
<p>Women & Girls at Risk: evidence across the Life course Sara Scott & Di McNeish 2014</p>	<ul style="list-style-type: none"> • This review is to inform a new cross-sector strategic alliance focused on women and girls with complex needs. • Gender matters in the lives of women and girls at risk. In this part of the review, we consider how three sets of gendered factors – social inequalities, the impact of negative life experiences (in particular violence and abuse) and gender expectations – shape risks across the life course of women. Social inequalities Gender expectations Abuse & violence
<p>Hidden Hurt: Violence, Abuse & Disadvantage in lives of women Sara Scott & Sally McManus Jan 2016</p>	<p>Major implications of this analysis for policy makers, services providers and practitioners. The key message is that women with extensive experience of violence and abuse in their lives should constitute a priority group across many different areas of policy and service delivery.:</p> <ul style="list-style-type: none"> • Women and girls with extensive experience of violence and abuse often have multiple difficulties in their lives. These are more likely to require specialist services which provide holistic support, including the opportunity to address the trauma of violent and abusive experiences. Central and local government must make sure such services are adequately funded and properly commissioned. • ‘Gender neutral’ services often fail to respond to the different experiences of violence, abuse and other disadvantages in the lives of women and men and as such are far less likely to meet women’s needs. Greater priority must be given to commissioning gender specific services and to ensuring that public services which women come into contact with are gender responsive. • Staff in public services (including for example mental health, housing, substance misuse or employment support) need to have ongoing training and support that gives them insight into the impacts of inequalities, violence and abuse on women’s lives. This should be supported by a culture that encourages and enables them to work with women at risk in ways that are helpful and empowering. • ‘Routine enquiry’ should become standard practice
<p>Engaging with Complexity - Trauma Informed care for Women Centre for Mental Health Report Jo Wilton and Alec Williams</p>	<ul style="list-style-type: none"> • A Trauma Informed RESOURCE in 3 sections; Section 1 - the concept of trauma, including its causes, its impact (especially on women), its prevalence, and the role services can play in both perpetuating and preventing it. • Section two discusses the concept of trauma informed care in more detail. It covers the four essential aspects of trauma-informed care identified by our research

<p>April 2019</p>	<ul style="list-style-type: none"> Section three lists some organisations in the UK with expertise in different areas
<p>Breaking Down the Barriers National Commission on Domestic & Sexual Violence & Multiple Disadvantage 2019</p>	<ul style="list-style-type: none"> The Commission was established to evidence the connections between women’s experience of domestic and sexual violence and multiple disadvantages, and to fill a vital gap in the current response to their needs. Whilst progress has been made in raising awareness of the prevalence of violence against women and girls, understanding of the ways in which this can impact on women’s lives has tended to remain ignored. This frequently leads to women who face multiple disadvantages being stigmatised and overlooked in policy, practice and public discussions. Despite a growing international evidence base, trauma-informed approaches are still considered to be an emerging field in the UK, with an inconsistency of approach and a lack of trauma-informed support for survivors.
<p>A Sense of Safety: Trauma Informed Approaches for Women Centre for Mental Health / Agenda Lauren Bear, Dr Graham Durcan and Jessica Southgate Published November 2019</p>	<ul style="list-style-type: none"> Centre for Mental Health and Agenda carried out this research to better understand what a trauma-focused approach for women might look like ‘on the ground’; the barriers, challenges and potential benefits of delivering trauma informed support to women. Psychological trauma where the perpetrators of behaviours leading to trauma are closely connected to them and often hold a strong degree of power over them – such as controlling access to their children or finances. This can mean that women are unable to leave the situation causing the trauma, which can further compound the harm they suffer.
<p>The State of Intimate Partner Violence Intervention: Progress and Continuing Challenges Jill Theresa Messing, Allison Ward-Lasher, Jonel Thaller, and Meredith E. Bagwell-Gray 2015</p>	<ul style="list-style-type: none"> In conclusion, as practitioners seek to empower clients toward safety, they should take into account the factors affecting women’s choice to sever or remain in their relationship and the many ways they are connected to their partners (for example, love, finances, children) (Davies, 2009). Safety decision aids can be used to help clients clarify their priorities and make difficult decisions (Eden et al., 2015). Victim-survivors of IPV do not choose their abuse— they want it to stop but may want alternatives to leaving their relationship or staying in a shelter. The “housing first” model has been adopted by some domestic violence agencies to provide women with a stable alternative to either living in a shelter or with an abusive partner (Mbilinyi, 2015). An evolving social services response to IPV requires that practitioners apply an evidence-based framework and develop cultural competence while continuing to challenge larger patriarchal structures that result in gender inequality.