

# THE ANNUAL AUDIT

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## 2026



women's aid  
until women & children are safe

# Authors

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**Women's Aid**

## Acknowledgements

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Women's Aid is the national charity working to end domestic abuse against women and children. For over 50 years, Women's Aid has been at the forefront of shaping and coordinating responses to domestic abuse through practice, research and policy. We empower survivors by keeping their voices at the heart of our work, working with and for women and children by listening to them and responding to their needs.

**We are a federation of 185 organisations which provide over 300 local lifesaving services to women and children across the country.** We provide expert training, qualifications and consultancy to a range of agencies and professionals working with survivors or commissioning domestic abuse services and award a National Quality Mark for services which meet our quality standards.

We hold the largest national data set on domestic abuse and use research and evidence to inform all our work. Our campaigns achieve change in policy, practice and awareness, encouraging healthy relationships and helping to build a future where domestic abuse is no longer tolerated.

Our support services, which include the Survivors' Forum, the No Woman Turned Away Project, the Survivor's Handbook, Love Respect (our dedicated website for young people), the national Women's Aid Directory and our advocacy projects, help thousands of women and children every year.

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# Contents

<b>Executive Summary</b>	<b>4</b>
<b>Glossary</b>	<b>11</b>
<b>Definitions of service types</b>	<b>12</b>
<b>Foreword</b>	<b>14</b>
<b>Introduction</b>	<b>16</b>
<b>Methodology</b>	<b>17</b>
<b>1. Demand</b>	<b>22</b>
1.1 Number of survivors supported	23
1.2 Survivors turned away	24
<b>2. Provision</b>	<b>26</b>
2.1 General	26
2.2 Specialist provision	27
2.3 Provision for marginalised groups	28
2.4 Additional support needs	29
2.5 Provision for children and young people	30
2.6 Support around the family courts	30
<b>3. Funding</b>	<b>39</b>
3.1 Commissioned funding	39
3.2 Without dedicated funding	51
<b>4. Collaboration and accountability</b>	<b>57</b>
4.1 Local Partnership Boards	57
4.2 Accountability of local authorities	60
4.3 Multi-agency working	63
<b>5. Emerging trends and issues</b>	<b>70</b>
5.1 The use of Artificial Intelligence (AI) based tools	70
5.2 Technology-facilitated abuse	74
5.3 Politics and international conflict	78
<b>Conclusion</b>	<b>85</b>
<b>References</b>	<b>86</b>
<b>Appendix A: Women's Aid Annual Survey 2025 respondents' regional distribution</b>	<b>88</b>
<b>Appendix B: Tables on service users' access of support services from On Track</b>	<b>89</b>
<b>Appendix C: Data tables on service provision from Routes to Support</b>	<b>91</b>

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# Executive Summary

## Introduction and Methodological Approach

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This report is the 2026 edition of Women's Aid's yearly publication on the provision, usage and work of domestic abuse services in England, examining the financial year 2024-25. The Women's Aid data sources used in this report are On Track,<sup>1</sup> Routes to Support,<sup>2</sup> the Women's Aid Annual Survey 2025, and Freedom of Information requests. To provide a definitive national picture of the work and needs of domestic abuse services over the past year, we set out to explore the following research questions:

1. To what extent does the national response reflect the needs of children as well as diverse women as victims and survivors?
2. What unique value do specialist services, including 'by and for' services, provide in the national response to domestic abuse?
3. Are frontline services identifying changes in the perpetration of coercive control?
4. How are domestic abuse services using AI and what do they perceive as the risks and opportunities of using AI in service delivery?
5. What was the impact of the far-right riots on the sector and victim-survivors?

We have structured the findings in this report into the following five sections: Demand, Provision, Funding, Collaboration and Accountability, and Emerging trends and issues.

## Key findings

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### Section 1: Demand

#### *Key message*

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Demand for specialist domestic abuse services continues to far outstrip provision of the lifesaving support they provide to survivors. We saw the highest proportion of referrals rejected in five years, primarily due to lack of space or capacity.

The rising rate of rejected refuge referrals, now at its highest level in five years in spite of an increase in the number of spaces, indicates systemic pressures in the housing system that directly affect the availability of lifesaving refuge spaces.

<sup>1</sup> Women's Aid case management and outcomes monitoring system. On Track national data represents the experiences of over 200,000 survivors supported by local domestic abuse services across England, as well our own email and No Woman Turned Away Project. On Track reports to a core outcomes framework for survivors, developed in partnership with Imkaan.

<sup>2</sup> The UK-wide online database for domestic abuse and other violence against women services. It provides details of services available for women and children throughout the UK, including up-to-date refuge vacancies.

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## Key findings

- ▶ In the year ending March 2025:
  - 10,665 women and 11,732 children were supported by refuge services
  - 138,955 women and 180,642 children were supported by community-based support (CBS) services
- ▶ Almost two thirds (65.2%) of refuge referrals were rejected in 2024-25 - the highest proportion since 2019-20, and an increase of 5.1% since 2023-24.
- ▶ The most common reason for rejected refuge referrals was lack of capacity or space (42.7% of all rejected referrals). Available evidence suggests this may be linked to increased lengths of stay in refuge due to delays in accessing appropriate move-on accommodation.
- ▶ An estimated two million women and 2.5 million children in England experienced domestic abuse in the year ending March 2025. Based on ONS prevalence data, only around 7.0% of women and children who experienced domestic abuse during this period were supported by a refuge or CBS service.

## Implications

Domestic abuse continues to be widespread, yet the data shows a widening gap between the scale of domestic abuse and the capacity of specialist services to respond. While not all survivors will require refuge or community-based support, the proportion able to access these services remains small relative to overall prevalence. We know that many more who experienced abuse tried and failed to access this valuable support, and that women can experience further harm whilst

attempting to access refuge provision (Women's Aid, 2025).

These findings suggest that wider systematic constraints are directly impeding domestic abuse organisations in providing life-saving services to as many survivors as possible. Without addressing these issues, the gap between survivors seeking safety and those able to access it is likely to persist.

## Section 2: Provision

### Key message

The specialist domestic abuse sector provides a vital range of support to survivors, including critical support to survivors through the family courts and tailored support to safely and sensitively address intersecting needs to survivors with additional support needs who do not always receive appropriate responses from statutory agencies. The level of service provision has increased slightly year-on-year, however, as the On Track national referral estimates show, the number of survivors supported by refuge has

decreased, and the number of survivors who are unable to access refuge continues to grow. As discussed above, available evidence suggests this may be linked to structural issues, such as delays in accessing move-on accommodation leading to increased length of stay in refuges.

## Key findings

- ▶ On 1st May 2025 there were 4,619 bedspaces across 286 refuges, an increase of 68 bedspaces since the previous year. Despite this small increase, there is still a substantial shortfall of 19.9% of the Council of Europe's recommendation of one refuge bedspace per 10,000 head of population.
- ▶ 7,853 vacancies were posted on Routes to Support in 2024-25. This is an increase of 303 compared to the previous year, however it is still significantly lower than pre-pandemic levels.
- ▶ Only 11.5% of vacancies could consider a woman with no recourse to public funds in 2024-25. Vacancies suitable for wheelchair users are incredibly scarce at only 1.1% of vacancies.
- ▶ The proportion of refuges running a dedicated children and young people (CYP) service decreased by 11.6%, so only 58.0% of refuge services and 52.2% of CBS services had a dedicated CYP service as of 1st May 2025.

## Implications

Specialist services provide unique value in the national response to domestic abuse by offering a wide range of services designed to meet survivors' diverse needs. Despite small net increases in some services there continues to be a lack of provision, with the number of refuge bedspaces still being below recommended levels

and limited provision available for marginalised survivors. Evidence suggests that refuge services are constrained by broader structural challenges, such as the lack of social housing. Addressing these challenges and adequately resourcing specialist services would enable more survivors to access the support they need.

## Section 3: Funding

### Key message

Domestic abuse services continue to provide a wide range of services to support survivors. Yet these services remain significantly underfunded and funding remains short term. A growing proportion of services are operating without full commissioning, without dedicated funding

for core elements of provision, and are relying on reserves and volunteers to sustain essential support — with direct consequences for survivors, particularly those with more complex needs and those supported by 'by and for' Black and minoritised services.

### Key findings

- ▶ At least one in eight (13.3%) refuge services receive no local authority commissioned funding at all.
- ▶ Of those that do receive funding through local authority commissioning, only around a third (36.0%) are funded for all support staff costs, including salaries, clinical supervision and training.
- ▶ There has been an increase in partially commissioned services, suggesting greater reliance on diversified income streams and provision of bedspaces they are not commissioned for.

- ▶ Refuges run 'by and for' Black and minoritised women were less likely to be commissioned by the local authority, with 42.9% of Imkaan-member refuges being fully commissioned compared to the national proportion of 72.4% of all refuges being fully commissioned.
- ▶ Funding for community-based services from Police and Crime Commissioners remains consistent at around 50.0% year-on-year.
- ▶ Almost two fifths (39.1%) of organisations delivered part of their domestic abuse service without dedicated funding in 2024–25, an increase from 35.0% the previous year.
- ▶ Of organisations delivering unfunded services:
  - 74.0% used reserves to cover costs
  - 42.0% relied on volunteers
  - 22.0% closed or reduced part of their service during the 2024-25 financial year
  - 46.0% reported being unable to plan for the future
  - 30.0% reported reduced capacity to support women with more complex needs.

### Implications

The data indicates more services in the sector are operating on partial and unstable funding. While many organisations continue to manage provision through reserves, volunteer labour, and diversification of income, this model is not sustainable in the long term.

Most concerning is the impact on survivors of a reduced capacity to support women with more

complex needs. This will likely affect the most vulnerable survivors, where those with multiple intersecting support needs require additional support from services who hold specialist expertise in how this impacts experiences of domestic abuse. Without greater funding stability, the sector's ability to deliver safe, high-quality and equitable provision will continue to be constrained.

## Section 4: Collaboration and accountability

### Key message

While most specialist domestic abuse services are represented on local partnership boards, confidence in their decision-making, accountability mechanisms and oversight remains limited. Many services report mixed experiences of multi-agency working, ongoing power imbalances between statutory agencies and specialist providers, and lack of transparency in commissioning and

governance processes. These findings indicate that strengthening collaboration is not solely about the existence of partnership forums, but about ensuring they operate with clarity, accountability, transparency and genuine recognition of specialist expertise - with survivor voice embedded meaningfully within local decision-making processes.

### Key findings

- ▶ Three fifths (61.7%) of organisations were represented on their Local Partnership Board (LPB) in 2024–25.
- ▶ Of those represented on LPB's:
  - just over half (54.4%) agreed their LPB had delivered effective decision-making locally

- less than half (44.3%) agreed LPBs had improved conditions for survivors
  - less than a third (31.6%) agreed LPBs had improved commissioning for specialist services.
- ▶ Less than a third (29.7%) of organisations felt they were able to effectively hold their local authority to account for decision-making, and only 11.7% of organisations felt that accountability mechanisms in their local area were 'very effective.'
- ▶ Just under a third (32.0%) indicated that there had been positive improvements in their local area, however, the same proportion (32.0%) reported that multi-agency working had been mixed, with some positive improvements as well as some negative impact/ deterioration.
- ▶ Only 14.1% felt there was effective oversight of multi-agency working locally.

## Implications

The findings suggest that whilst formal partnership structures are in place in most areas, their impact is uneven. Representation on Local Partnership Boards does not consistently translate into confidence in decision-making, commissioning improvements or strengthened conditions for survivors.

A significant proportion of services report limited ability to hold local authorities to account, alongside low confidence in existing oversight mechanisms. Concerns about transparency, consistency and power imbalances indicate that governance arrangements may not be functioning as intended. Where specialist domestic abuse

services feel their expertise is undervalued or their input does not meaningfully influence decisions, the effectiveness of the wider system is weakened.

Experiences of multi-agency working reflect both progress and persistent challenges. While some areas demonstrate improved relationships and better shared understanding, others continue to experience siloed working, inconsistent responses and gaps in domestic abuse knowledge. Limited oversight of multi-agency arrangements further compounds these issues.

## Section 5: Emerging trends and issues

### Key message

The operating environment for specialist domestic abuse services continues to evolve rapidly with services adapting to increased use of AI. New forms of technology-facilitated abuse continue to emerge, alongside digital tools that can be used by survivors to protect themselves. Whilst most services report confidence in safety planning, it appears that their ability to support survivors around these issues is restricted by how technical devices operate, emphasising that device

manufacturers have a responsibility to consider safety allowances in their design and operation. Additionally, services are responding to wider social and political developments, including the far-right riots and the impact of international humanitarian crises, which are shaping survivor experiences and placing additional pressures on frontline provision.

## Key findings

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- ▶ Almost a third (32.2%) of services reported that they had a written AI policy or were in the process of developing one.
- ▶ Services reported using AI-based tools primarily for:
  - Secretarial tasks (20.0%)
  - Communications (17.1%)
  - Funding/benefit applications (15.7%)
  - Research and reporting (15.7%)
- ▶ The majority of services (64.9%) either agreed (47.7%) or strongly agreed (17.2%) that they were able to sufficiently safety plan around technology-facilitated abuse. However, they are restricted by how these technical devices operate.
- ▶ The most common forms of technology-facilitated abuse disclosed to services were:
  - Online stalking (78.1%)
  - Compromising social media profiles (68.0%)
  - Misuse of GPS trackers (68.0%)
  - Non-consensual intimate image sharing (or threats of sharing) (66.4%)
- ▶ The most common form of technology-facilitated abuse identified as new to services' experience in the past year was coerced participation in OnlyFans or other online activity.
- ▶ Services reported the following impacts of the far-right riots in Summer 2024:
  - Increased demand on services
  - Increased discrimination and direct racist abuse experienced by survivors
  - Two services reported having to close offices or cancel face-to-face provision during this period
  - Services expressed concern about longer-term impacts on survivors' willingness to seek help
- ▶ Services reported an increased need to support women affected by humanitarian crises, particularly migrant survivors, alongside a greater emotional and practical burden on frontline staff responding to trauma outside their usual remit.

## Implications

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The findings demonstrate that specialist domestic abuse services are operating within an increasingly complex and rapidly shifting context. The gradual adoption of AI tools reflects operational adaptation, particularly in administrative and communications functions. However, this shift also highlights the need for clear policies, ethical safeguards and ongoing consideration of risks in sensitive service environments.

The impact of the far-right riots and international humanitarian crises demonstrate that services are not only responding to domestic abuse, but also to trauma linked to these contexts. Taken together, these trends indicate that the specialist domestic abuse sector must continually adapt to technological change and wider societal pressures. This evolving landscape places additional responsibilities on frontline services and highlights the importance of flexible, informed and trauma-responsive practice in meeting survivors' changing needs.

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## Concluding remarks

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The findings of the Annual Audit 2026 present a stark picture of a sector under sustained pressure. While specialist domestic abuse services across England continue to demonstrate resilience, expertise and commitment, demand for services far outstrips provision. Refuge rejection rates are at their highest level since 2019-20, and bedspaces remain nearly a fifth below the Council of Europe's recommendation. Other available evidence suggests that systematic barriers – particularly delays in accessing safe move-on accommodation – are key problems. The funding landscape remains fragile, with many services operating without full commissioning for core staff and essential areas of work, relying on reserves and volunteers to sustain provision. This instability has direct consequences for survivors, especially those with more complex or intersecting needs, and is particularly concerning for specialist 'by and for' services supporting Black and minoritised women.

Collaboration and accountability mechanisms show mixed progress, with ongoing concerns about transparency, oversight, and power imbalances. Meanwhile, the environment and needs of survivors continue to evolve, with new forms of technology-facilitated abuse, cautious adoption of AI, and wider social and political developments placing additional pressures on survivors and frontline staff.

Overall, the evidence demonstrates how specialist domestic abuse services are a life-saving and essential infrastructure, and the national response to violence against women and girls cannot be delivered without a robust and sustainable specialist sector. Strengthening and stabilising this foundation is critical to narrowing the gap between need and support and ensuring a coordinated, survivor-centred response.

# Glossary

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

**Specialist 'by and for' services:** Specialist 'by and for' services are run by and for the communities they serve, such as for Black and minoritised women, D/deaf and disabled women and LGBT+ survivors. In doing so they offer a uniquely empowering experience to the communities they support, as the client group is reflected in staffing, management, and governance structures of these organisations.

**Dedicated provider:** an organisation constituted for the sole and specialist purpose of delivering domestic abuse services.

**Entry/entries:** one service listing on Routes to Support. A service provider may have multiple entries where they operate in more than one local authority or have services in the same local authority with different referral criteria, for example a general access refuge and another for Black and minoritised women only.

**No recourse to public funds:** if someone's residence permit to live in the UK includes the condition 'no recourse to public funds' then that person will not be able to claim most state benefits.<sup>3</sup>

**Service provider:** any organisation providing a domestic abuse service. This could be a dedicated provider or a larger organisation running a domestic abuse service, for example a housing association.

**Service types:** The type/s of service/s offered by a service provider e.g. refuge, advocacy, helpline. Routes to Support details which service types are offered against each entry, an entry can contain multiple service types.

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

**Specialist women's domestic abuse services<sup>4</sup>:** Specialist women's domestic abuse services are run by women's, feminist organisations. Their core business and organisational purpose it is to support survivors and/or children and young people impacted by domestic abuse and other forms of violence against women and girls (VAWG). Specialist services differ from generic services because they are independent from the state. They were established as local, grassroots and independent organisations, which is critical for women survivors' ability to trust them.

**Survivor:** At Women's Aid, we generally use the term 'survivor' rather than 'victim' (with the exception of children) as it speaks to the strength of people experiencing domestic abuse, is less criminal justice focused and more empowering.

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

<sup>4</sup> The full Women's Aid definition of specialist women's domestic abuse services and 'by & for' services can be found on the [Women's Aid website](#).

## Definitions of service types

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### Accommodation

**Refuge:** Offers accommodation and support which is tied to that accommodation only for women or women and children experiencing domestic abuse. The address will not be publicly available. It will have a set number of places. Residents will receive a planned programme of therapeutic and practical support from staff and access peer support from other residents. This will include:

- ▶ Access to information and advocacy
- ▶ Emotional support
- ▶ Access to specialist support workers (e.g. drugs/ alcohol use, mental health, sexual abuse)
- ▶ Access to recovery work
- ▶ Access to support for children (where needed)
- ▶ Practical help
- ▶ Key work and support planning (work around support needs including parenting, finances and wellbeing)
- ▶ Safety planning
- ▶ Counselling

**Accommodation (other than refuge):** Any accommodation offered to women experiencing domestic abuse which does not meet the definition above. For example, this may be move-on accommodation, a shelter where the address is disclosed or dispersed accommodation without the planned programme of support.

**Resettlement:** Only available to refuge residents moving on to independent living. A service is available to women staying in the refuge prior to move-on and post move-on.

### Community-based support (CBS) services

**Floating support:** Tied to accommodation, but the accommodation is not offered as part of the service. Will also have a set number of places. These services are primarily about supporting women and children to maintain their accommodation.

**Outreach:** Not offered in the project's building and it does not have a set number of spaces. The support offered is broader and not focused on accommodation. Women can access these services in a range of community centres, or the service may come to the women in their home or other venues (e.g. cafes or neutral meeting places).

**Domestic abuse advocacy project (including Independent Domestic Violence Advisor (IDVA)):** Involves the provision of advice, information and support to survivors living in the community based on an assessment of risk and its management. Operates within an inter-agency context and is usually part of a multiagency risk management strategy or MARAC process. It focuses on providing a service to victims judged to be at medium to high risk of harm, aims to address their safety needs and help manage the risk that they face.

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## Open access services

These services are available without a planned programme of support and can be accessed anonymously as and when the woman needs to.

**Helpline:** A helpline is a support and referral service that is accessed by phone and can be accessed anonymously. It needs to have a designated telephone line and be a specific service offered at fixed advertised times. The service is delivered by dedicated staff or volunteers trained for that purpose and not engaged in other tasks.

**Drop-in service:** Women can access support at a specified venue without a pre-arranged appointment from trained staff.

**Online chat:** Online chat is a support and referral service that is accessed via the web. It needs to be a specific service offered at fixed advertised times by dedicated staff or volunteers trained for that purpose and not engaged in other tasks.

## Recovery work

These services do not offer accommodation but may be offered to refuge residents. A woman and/or child has to attend the project's building to access these services.

**Counselling:** Counselling is formal counselling offered by qualified practitioners.

**Group work programmes:** Group work programmes are defined groups facilitated by trained staff.

**Support groups:** Support groups are attended by survivors within a refuge or community-based support setting and offer peer support/self-help work.

## Dedicated children and young people's service

**Children's work:** Staffed by trained children's workers. A service where they provide emotional support, group work, activities, afterschool clubs or holiday clubs for the children or do specific outreach work.

**Young people's work:** Staffed by trained youth workers who provide emotional support, group work, or activities.

## Other

**Prevention work:** Work carried out in community groups such as schools aimed at prevention/awareness raising. Clients do not self-refer but the service may be booked by professionals.

# Foreword



**Farah Nazeer**

CEO

Women's Aid

The Annual Audit 2026 is a unique report that provides insight into domestic abuse services in England, showcasing how the sector continues to grow, develop, and adapt, whilst demonstrating the areas that need to improve. This year's report is the first since the publication of the cross-government strategy to build a safer society for women and girls, following Labour's welcome election manifesto commitment to halve violence against women and girls (VAWG) in the next decade. Therefore, it presents one-of-a-kind, factual data regarding what must be done if the ambitious target to halve VAWG in the next decade is to be achieved.

The past year has been challenging for survivor services, and the pressure is unlikely to ease in the short term as the VAWG strategy provides important avenues to increase disclosures from victims and survivors of abuse. The creation of new referral pathways, for example via the health service, presents an opportunity to ensure that even more women and children can escape abuse and start to rebuild their lives. These pathways will bring in possibly significantly more survivors looking for help, given the estimated two million women and 2.5 million children in England who have experienced domestic abuse this year. Further demand could also come from the measures introduced in the Sentencing Act, such as the earned progression model which could see some domestic abuse perpetrators released early. We saw such a rise in survivors needing support from services during the introduction of the early prisoner release scheme and are likely to see it again here.

With the possibility of more women and children relying on services to escape abuse, the reality is that urgent change is needed across the sector to ensure that this demand is met. For example, a lack of suitable move-on accommodation means

that refuges are already retaining survivors for far longer than financially viable. Our data also tells us that demand already far outstrips provision – this year, we saw two-thirds of referrals be rejected - the highest proportion in five years, primarily due to lack of space or capacity.

Specialist services deliver life-saving care and support to women and children, and the fact that they are forced to turn away survivors at their point of need shows just how systemic the issues facing the sector are. While not all survivors will require access to a refuge, we know that those who do need it are likely to be exposed to further danger due to delays. Unless the systemic issues, such as poor commissioning practices, inadequate funding, and a lack of move-on accommodation are addressed, the gap between survivors seeking safety and those able to access it is likely to persist and increase, undermining the government's ambition to ensure survivor safety.

Sadly, the picture is even more desperate when it comes to accommodating survivors who have additional support needs or come from migrant or minoritised backgrounds. For example, only 1.1% of vacancies were suitable for wheelchair users, while just 11.5% of vacancies could consider accommodating a woman with no recourse to public funds. In a similar vein, despite the fact that the impact of domestic abuse on child survivors is significant and that they are now recognised as victims in their own right by law, the proportion of refuge services that have dedicated children and young people support decreased by 11.6% across the country.

Poor commissioning practices have also been an ongoing and increasingly pressing challenge for services, especially for refuges run 'by and for' Black and minoritised women. These services are less likely to be commissioned by the local authority, with only 42.9% of Imkaan-member refuges being fully commissioned compared to the national proportion of 72.4% of all refuges being fully commissioned. Despite the many challenges that faced specialist domestic abuse services this year, they also continued to evolve, operating in an increasingly volatile and rapidly shifting environment. This year, we saw the far-right movement's weaponisation of VAWG, leading to riots across the country. We are also seeing international humanitarian crises, which collectively mean that services are responding to increasingly complex trauma while supporting survivors. I am pleased to say that services across the country have gone above and beyond to deliver this support – they took on the additional responsibilities and once again, demonstrated the vital role that a flexible, informed and trauma-responsive practice has when it comes to supporting survivors.

As we look to the years ahead and the ambitious target of halving VAWG in, what is now less than, a decade, it is absolutely clear that a robust and sustainable sector is the essential foundation to delivering this ambition. If women and children are to continue receiving life-saving and survivor-centred support, then the priority must be on strengthening and stabilising this foundation.

# Introduction

This report is the 2026 edition of Women's Aid's annual publication on the provision and uptake of domestic abuse services in England, examining the financial year 2024-25. It aims to provide a definitive national picture of domestic abuse support work year on year, presenting data from On Track,<sup>5</sup> Routes to Support,<sup>6</sup> the Women's Aid Annual Survey 2025, and Freedom of Information requests. To provide a definitive national picture of the work and needs of domestic abuse services over the past year, we set out to explore the following research questions in this report:

## 1. To what extent does the national response reflect the needs of children as well as diverse women as victims and survivors?

- a. How does service provision, use and commissioning compare to previous years?
- b. How effective are current local accountability mechanisms, including local partnership boards, in relation to the distribution of public funding?
  - i. What is the impact of this on specialist domestic abuse services, including 'by and for' services?
  - ii. What are the barriers to effective multi-agency working?

## 2. What unique value do specialist services, including 'by and for' services, provide in the national response to domestic abuse?

- a. How do they support survivors through the family justice system?
- b. To what extent do they provide consistent, high-quality advice that contributes to the Government's mission to halve violence against women and girls (VAWG) within a decade?

## 3. Are frontline services identifying changes in the perpetration of coercive control, including increased use of digital forms of control?

- a. What impact does this have on service provision?

## 4. How are domestic abuse services using AI and what do they perceive as the risks and opportunities of using AI in service delivery?

## 5. What was the impact of the far-right riots on the sector and victim-survivors?

We have structured the findings in this report into the following five sections: Demand, Provision, Funding, Collaboration and Accountability, and Emerging trends and issues. This structure aligns closely with the Annual Audit 2025, including one-page summary findings for each section for the benefit of usability.

**Note on comparisons:** We would advise caution when making comparisons between findings from different Annual Audit reports. We have provided information about indicative trends, however, would note differences in sample size and composition each year that could affect results. Although we are consistent with our methodology and analysis, we cannot be sure that differences between them are the result of change due to time passing rather than other factors, for example structural inequalities faced by minoritised people, and differences in representation of minoritised people in each sample. For any questions about use of the data please contact Women's Aid: [researchandpolicy@womensaid.org.uk](mailto:researchandpolicy@womensaid.org.uk).

**Copies of all editions of our Annual Audit, along with Women's Aid's other research, can be downloaded for [free online](#).**

<sup>5</sup> Women's Aid case management and outcomes monitoring system. On Track national data represents the experiences of over 200,000 survivors supported by local domestic abuse services across England, as well our own email and No Woman Turned Away Project. On Track reports to a core outcomes framework for survivors, developed in partnership with Imkaan.

<sup>6</sup> The UK-wide online database for domestic abuse and other violence against women services. It provides details of services available for women and children throughout the UK, including up-to-date refuge vacancies.

# Methodology

Findings in this report draw upon four data sources: On Track (the Women's Aid case management and outcomes monitoring system); Routes to Support (the UK-wide online database

for domestic abuse and other violence against women services); the Annual Survey; and Freedom of Information requests. Details on each of these data sources are described below.

## On Track

### The Women's Aid national dataset, outcomes framework and monitoring tools

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This report presents data on the profiles, needs, and experiences of women accessing domestic abuse support services. The findings are drawn from the On Track national dataset. On Track is a programme of support designed to support our member services and other DA services to use

data to strengthen service delivery and outcomes for survivors. As part of the programme, services gain access to a series of outcomes measurement tools, based on Women's Aid's outcomes framework, in the OASIS On Track case management system.

### About On Track

On Track is a free additional module which can be enabled on the OASIS DA case management system.

The additional module gives local domestic abuse services access to a series of online outcomes measurement tools which are based on Women's Aid's outcomes framework. Women's Aid's outcomes framework was designed to enable DA services to collect data on the outcomes of support which mean the most to them, survivors and commissioners. The framework is based on five domains:

- 1. Safety**
- 2. Health**
- 3. Stability, resilience, autonomy**
- 4. Children**
- 5. Prevention**

The outcomes framework was developed in partnership with Imkaan and in consultation with commissioners, Women's Aid's member services and survivors. Since its launch in 2016, domestic abuse services across England have been using Women's Aid's outcomes framework and the On Track tools to record and report on the vital work they do to support survivors.

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Where survivors and services consent, the information collected through the case management system and outcomes monitoring tools contributes to an anonymous dataset held by Women's Aid. As of March 2025, the On Track dataset contains information on 313,047 survivors, 289,185 of whom are female<sup>7</sup> (92.4%), who have accessed domestic abuse services since the system was launched on 1st April 2016. The On Track national dataset is the largest dataset in the country on the experiences of survivors and their experiences accessing domestic abuse support services.

The national dataset includes a range of information about survivors' journeys including referral patterns, experiences of abuse, support needs, demographics, types of support provided, outcomes, feedback, negative experiences of external services (e.g. housing, legal services, local authority safeguarding, NHS, police). It contains data on both adults and children and young people accessing domestic abuse support services.

This report provides data on a sample of 42,369 individual female survivors recorded in On Track who finished a period of support from a refuge or community-based service using On Track in the year 1st April 2024 to 31st March 2025, and who consented for their anonymised data to be shared with Women's Aid. Of these:

- ▶ 3,607 accessed refuge services.
- ▶ 39,354 accessed community-based support (CBS) services.<sup>8</sup>

Some service users accessed both service types. The full presentation of the On Track national data on the demographics, experiences of abuse and support needs can be viewed in the *On Track data briefing*, which is supplementary to this report and can be found on the Women's Aid Annual Audit 2026 webpage.

## Routes to Support

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Throughout the report, data is included from a snapshot of the available provision in England on 1st May 2025 and analysis of change during the year from 1st May 2024, along with analysis of refuge referrals and vacancies during that same year<sup>9</sup>. Tables showing a full range of data on service provision are available in Appendix C. Information about the services (in England only) was taken from Routes to Support. Routes to Support is the UK violence against women and girls (VAWG) directory of services and refuge vacancies, run in partnership by Scottish Women's Aid, Welsh Women's Aid, Women's Aid Federation of England and Women's Aid Federation of Northern Ireland.

Routes to Support is part-funded by MHCLG. The resource provides VAWG services with 24-hour access to information that supports their work. Sophisticated search tools can identify the most suitable service for the women, children and men they are supporting. It facilitates referrals through national, regional and local helplines as well as between local services, and has been an integral part of the work of the domestic abuse sector since its creation in 2003.

During the year 2024-25, there were over 130,000 logins to the site by staff at domestic abuse support services in England alone, demonstrating how widely it is used. The directory gives Women's

<sup>7</sup> On Track collects information about female and male survivors and survivors who do not define as either male or female. This report will only present information on female survivors.

<sup>8</sup> Community-based services include floating support, outreach, IDVA and advocacy services.

<sup>9</sup> Vacancies posted to Routes to Support from April 2024 to March 2025.

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Aid comprehensive data on the full range of all domestic abuse services including, but not limited to, those run by Women's Aid members. This includes information about the types of domestic abuse services provided, the number of bedspaces available in refuge services, the people supported by these services and changes to provision over time. The directory is updated on a rolling basis by dedicated staff at Women's Aid, meaning each entry is fully updated every year in addition to any updates received from services during the year. Entries are added and removed throughout the year as providers change.

Referral estimates used in the report are calculated by using baseline data from On Track. The following steps were taken:

**a. Refuge:** ratio of women housed to refuge space for services using On Track, applied to services that are listed on Routes to Support for the same region which are not using On Track.

- b. Community-based support (CBS) services:** ratio of women supported to individual service type (e.g., outreach, IDVA, floating support) for responding services, applied to services not using On Track that are listed on Routes to Support for the same region.
- c. Number of children:** average number of children per woman accessing services from On Track applied to above two estimates.
- d. Estimated number of referrals declined to refuge and community-based services:** the percentage of referrals accepted and declined from our baseline data was applied to the estimated numbers of women accepted in steps A and B above to give an estimated number of referrals declined to each service type.

## Women's Aid Annual Survey 2025

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The Women's Aid Annual Survey is a national survey of the whole range of specialist domestic abuse services for women and children in England. The online survey was sent in August 2025 (with a deadline of early September) to all domestic abuse services in England that run both or one of refuge and/or CBS services, listed on Routes to Support (236 organisations running 413 services in total). We received responses from 128 organisations who were running 221 service entries on Routes to Support. This gives a response rate of 53.5%<sup>10</sup>. This is slightly higher than the response rate of 42.7% for the previous year's Annual Survey. Of these 128 respondents:

► 91 responded that they ran refuge services (37 indicated that they did not).

► 102 responded that they provided community-based support services (16 indicated that they did not, and ten did not respond to this question).

The survey contained both open and closed questions and open-text questions were categorised according to common themes. We asked questions to all domestic abuse and VAWG services about the value they had contributed to survivors, both nationally and locally over the past year, as well as how services were funded in 2024-25. We also asked services about their experiences of collaborating with Local Partnership Boards and working with statutory agencies and what kinds of accountability mechanisms are in place for effective oversight of this.

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<sup>10</sup> 221 out of 413 services responded.

## Freedom of Information (FOI) requests

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To provide a comprehensive picture of local authority refuge funding in England, we gathered additional evidence sources that were used alongside the snapshot of domestic abuse refuge services in England listed on Routes to Support and the responses to the Women's Aid Annual Survey 2025.

Women's Aid submitted an FOI request to all local authorities in England in May 2025. The purpose of the FOI request was to build up a picture of national commissioning trends, primarily by mapping which domestic abuse refuge and non-refuge services are commissioned by local authorities. The FOI request was sent to all 317 local authorities in England and of these, 315 local authorities responded (99.4%). All County Councils (100.0%) responded to our request.

Where it was not possible to determine the 2024-25 commissioned status of refuge services using the data sources outlined above, confirmation was sought from the remaining refuge services through phone calls and emails. We were unable to confirm the commissioned status of 13 refuge services so there is a proportion of data which is presented as 'no data' or 'missing data'.

Analysis and comparison of these data sources, along with Women's Aid sector expertise and specialist knowledge about domestic abuse service providers, has enabled us to confirm the numbers and proportion of refuge services and bedspaces in England that are funded through local authority commissioning arrangements.

**To find out more about Women's Aid's evidence base, including On Track and Routes to Support, and how they might support you, visit our research [online](#).**

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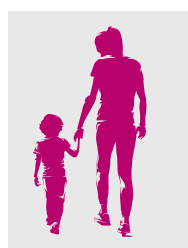
# 1. DEMAND

Demand for domestic abuse support services is difficult to measure because of the hidden nature of domestic abuse. Women are more likely than men to experience significant and harmful impacts of domestic abuse and require the lifesaving support of refuge and CBS services.

7%



An estimated **two million women** and **2.5 million children** in England **experienced domestic abuse** in the year ending March 2025. **Only around 7.0%** of women and children who experienced domestic abuse in the year ending March 2025 **were supported by a refuge or CBS service.**



An estimated **10,665 women** and **11,732 children** were supported by **refuge services**, and **138,955 women** and **180,642 children** were supported in **CBS services** across England in the year ending March 2025.



**Access to refuge has become even more limited compared to last year.** The proportion of rejected referrals into refuge was the highest this year since 2019-20. **Nearly two thirds (65.2%) of referrals into refuge were rejected by the service.** The most common reason for rejection was that the service **did not have the space or capacity** to meet the support needs of the survivor (42.7% of all rejected referrals).



**640 fewer survivors were supported in refuge** in 2024-25 compared to 2023-24, despite an increase in service provision. Other existing evidence suggests this may be linked to **structural issues, including delays in accessing move-on accommodation.**

# 1. Demand

To understand the extent to which the national response to domestic abuse reflects the needs of survivors, it is necessary to consider what we know about demand. This includes understanding the prevalence of domestic abuse, how many women and children access support services, and how many survivors are unable to access support services.

There is no definitive national measure of the demand for domestic abuse support services. Domestic abuse is largely a hidden crime, occurring primarily at home. Women often do not report to the police and underreport in research surveys and interviews (ONS, 2015). There is also limited research on the types of support services different groups of survivors require and at different times throughout their journey to safety and recovery. Headline prevalence data often does not take into account important context and impact information such as the sex of the perpetrator and where survivors experienced multiple and ongoing incidents of abuse, including controlling and coercive behaviour. All of this means measures of demand for support services is often difficult to calculate, is underestimated and hides the gendered nature of domestic abuse.

National prevalence data and Women's Aid's national datasets on service provision can provide some indication about the demand for support services and how current levels of service provision are able to meet this demand.

In England and Wales, the best available estimates of prevalence of domestic abuse are from the Crime Survey that is carried out annually by the Office for National Statistics (ONS). The latest figures estimate that in the year ending March 2025, 2.2 million women (9.1%) and 1.5 million men (6.5%) experienced domestic abuse in the previous year (ONS, 2025a) across England and Wales. The Crime Survey also estimated that in the year ending March 2025, nearly a third of women (30.3%) and around one in five men (21.7%) had experienced domestic abuse since the age of 16

(ONS, 2025a). This is 12.5 million people aged 16 and over in total.

Whilst anyone can be a victim of domestic abuse and can experience incidents of inter-personal violence and abuse, there are important differences between male violence against women and children and female violence against men in severity and impact. Women experience higher rates of repeated victimisation, are much more likely to be seriously hurt, (Walby and Towers, 2018; Walby and Allen, 2004), and more likely to be subjected to fatal/non-fatal strangulation (McGowan, 2024). Women are also more likely to experience higher levels of fear and be subjected to coercive and controlling behaviours (Dobash and Dobash, 2004; Hester, 2013; Myhill, 2015). Women are more likely to be killed than male victims of domestic abuse; across a three-year period to March 2024, at least one woman a week was killed by a male partner/ex-partner (ONS, 2025a).

It is also particularly important to understand that domestic abuse perpetrated by men against women is rooted in women's unequal status in society and is part of the wider social problem of male violence against women and girls; men do not experience domestic abuse as part of embedded, structural inequalities against their sex. Women's Aid's research with the University of Bristol found that sexism and misogyny serve to excuse men's abusive behaviours in intimate relationships and create barriers to female survivors being believed and supported to leave abusive men (Women's Aid, 2021).

Male violence against women and children is also different due to the use of coercive and controlling behaviour by male perpetrators. In the year ending December 2024, 97.5% of those convicted of coercive and controlling behaviour were male (ONS, 2025c). From On Track data, 76.1% of female survivors who were supported by refuge and CBS services experienced this form of abuse. This is a highly gendered type of domestic abuse designed to limit a woman's freedom and autonomy.

To better capture the gendered nature of domestic abuse and coercive control, Women's Aid and partners supported the development of new questions in the Crime Survey which were used by the ONS in this year's survey. As well as data on the prevalence of domestic abuse, the ONS data has now produced abuse scales which group all victims from the age of 16 (12.5 million) into three clusters based on the abusive behaviours perpetrated against them and the impacts of this abuse.

The abuse scales<sup>11</sup> show that women experienced significantly higher rates of domestic abuse in Clusters 2 and 3 (which indicate medium and higher numbers of abusive behaviours and

impacts) than men. For partner abuse specifically, women were over three times as likely to experience higher numbers of abusive behaviours and impacts – 4.1% of women were grouped as experiencing partner abuse recorded as Cluster 3 compared to 1.3% of men (ONS, 2025d).

The ONS prevalence data, abuse scales and evidence of the gendered nature of domestic abuse show us that women are more likely to experience significant and harmful impacts from domestic abuse and require lifesaving intervention from support services such as refuge and CBS services.

## 1.1 Number of survivors supported

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Women's Aid estimates that 10,665 women and 11,732 children were supported by refuge services and 138,955 women and 180,642 children were supported in community-based support services across England during the year ending March 2025.

The Crime Survey estimated that 2.2 million women experienced domestic abuse in England and Wales during the year ending March 2025.

Whilst the number for England alone has not been published, the prevalence rate for women over the age of 16 experiencing domestic abuse in Wales in that year was 10.8% (ONS, 2025a). The mid-year population estimate for females over the age of 16 in Wales in 2025 was 1,358,630 (ONS, 2025b). It could therefore be estimated that approximately 146,732 women experienced domestic abuse in Wales that year, and therefore **approximately 2,053,268 women experienced domestic abuse in England in the year ending March 2025** (2,200,000-146,732).

Data from On Track shows that women in CBS and refuge services had on average 1.2 children. If this figure is applied to the national prevalence estimate of 2,053,268 women who experienced domestic abuse in England in the year ending March 2025, this would mean that **an estimated 2,463,922 children also experienced domestic abuse in that year**. This excludes the abuse experienced by older children in their own intimate relationships.

Compared to the ONS prevalence data and Women's Aid referral estimates, only around 7.0%<sup>12</sup> of women and children who were victims of domestic abuse in the past year were supported by CBS and refuge services in England. Not all two million women and 2.5 million children will be aware of, require, or be ready to access these services; survivors have diverse support and safety needs. Some of these women may also have accessed support outside of the specialist domestic abuse sector which would not be included in the On Track sample.

<sup>11</sup> For victims of domestic abuse Cluster 1 indicates lower numbers of abusive behaviours and impacts, Cluster 2 indicates medium numbers of abusive behaviours and impacts, and Cluster 3 indicates high numbers of abusive behaviours and impacts. For victims of partner abuse, Cluster 1 indicates lower numbers of abusive behaviours and impacts, Cluster 2 indicates low numbers of abusive behaviours and higher impacts, and Cluster 3 indicates high numbers of abusive behaviours and impacts (ONS, 2025d). The abuse scales do not distinguish the timeframe which the abuse was experienced, or the impacts were felt; they apply to all victims aged over 16 and over, not just those who reported experiencing abuse in the past year.

<sup>12</sup> Women: 2,053,268 / 149,620 = 7.3%. Children: 192,374 / 2,463,922 = 7.8%.

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## 1.2 Survivors turned away

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On Track national data provides further information about unmet demand for domestic abuse support services.

The Women's Aid national referral estimates show that 65.2% of referrals into refuge were rejected, an increase of 5.1% since 2024. The proportion of referrals into refuge which were rejected this year was the highest it has been since the financial year 2019-20, and 640 fewer survivors were supported in refuge in 2024-25 compared to 2023-24. The most common reason why referrals were rejected was because the refuge did not have the space or capacity to accept the referral (42.7% of all rejected referrals). This includes where services could not accommodate the support needs of the client, including around mental health (4.8% of rejected referrals), drug and/or alcohol use (4.0% of rejected referrals) and no recourse to public funds (3.3% of rejected referrals). In our From Safety to Stability report (Women's Aid, 2025a), we looked at data from 34 refuge services in England and identified that the average length of stay for survivors in refuge has been increasing year on year since 2018-19 with the biggest increase between 2022-23 and 2023-24. This was caused by delays in accessing appropriate move-on accommodation, resulting in services being less able to meet the demand for women and children attempting to access refuge. As a result, these 34 services accommodated 114 fewer survivors in 2023-24 compared to 2022-23. This year's referral estimates show a similar trend with fewer survivors accessing refuge compared to last year and a significant proportion of referrals into refuge being rejected because they do not have the capacity to support the survivor. These new findings suggest that the lack of access to move-on accommodation is continuing to impact services' ability to meet demand, however, further research is needed to establish if this could be attributed to increased length of stay specifically during the financial year 2024-25.

Other reasons why referrals into refuge were declined include that the survivor does not want support (11.9%), the service was unable to contact

the survivor (7.2%), or the location of the refuge was considered unsafe (4.8%) (for example, the refuge is in an area near where the perpetrator is employed).

Just over half of referrals into CBS services were rejected (53.1%). The most reported reason for rejection includes that the survivor did not want support (25.1%), the service was unable to contact the survivor (23.9%), and the survivor was already being supported by the service (20.2%). A full breakdown of data on rejected referrals can be found in **Table B1** in **Appendix B**.

Women's Aid's referral estimates are based on referral numbers recorded by services using On Track. Not all unsuccessful referrals into services are recorded on a case management system, so demand may in fact be higher than the referral estimates calculate. Recording all unsuccessful referrals places a huge administrative burden on support services and is not always a priority when capacity in services is limited. Additionally, it is not appropriate to collect information about a survivor to record the referral when the service is not going on to support her. Some referrals are made through informal pathways without the information needed to record on a case management system. Similarly, On Track cannot record referrals which were not made in the first place when referral agencies know the domestic abuse service is already oversubscribed or are operating waiting lists and the survivor needs immediate support. As we know from our research, delays in accessing refuge can put survivors at risk, with almost a quarter of survivors (24.0%) supported by our No Woman Turned Away project experiencing further abuse from the perpetrator whilst waiting to access refuge in 2023-24 (Women's Aid, 2025b). It is unlikely that all unsuccessful referrals will be recorded in On Track and so the referral estimates will underestimate the unmet need for domestic abuse services.

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# 2. PROVISION



On 1st May 2025 throughout England there were **259 providers running 437 local services**.



There were **4,619 bedspaces across 286 refuges, an increase of 68 bedspaces since 1st May 2024**. Despite this small increase, there is still a substantial **shortfall of 19.9%** of the Council of Europe's recommendation of one refuge bedspace per 10,000 head of population.



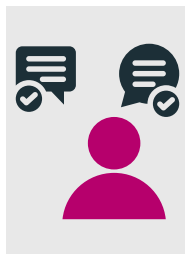
There were **7,853 vacancies posted on Routes to Support** in 2024-25. This is an **increase of 303 vacancies** compared to 2023-24, however the levels of vacancies posted on the system are still significantly lower than pre-pandemic levels.



**Only 11.5%** of vacancies could consider a woman with **no recourse to public funds** in 2024-25. Vacancies suitable for **wheelchair users** are **incredibly scarce at only 1.1%** of vacancies.



The number of refuges running a **dedicated children and young people (CYP) service decreased by 11.6%**, so only 58.0% of refuge services and 52.2% of CBS services had a dedicated CYP service.



Annual Survey respondents reported how they work with many survivors who present with **multiple and intersecting support needs**. Some local services provided specialist support for these survivors including around **mental health support** needs (52.8% of refuges, 44.0% of CBS), **drug use support** needs (7.4% of refuges, 5.3% CBS) and **alcohol use support** needs (5.9% of refuge and CBS).



The specialist **domestic abuse sector provides a vital range of support** to survivors who are going through **family court proceedings** including around advocacy and information, special measures and safety planning and enhancing the voice of the child.

## 2. Provision

Routes to Support data provides an overview of domestic abuse service provision across England, including service types, specialist service provision, provision for marginalised groups of survivors and survivors with additional support needs, and for children and young people. From this we can understand how service provision compares to previous years, to what extent the national response reflects the needs of children and the diverse needs of women, and the unique value specialist services provide in the national response to domestic abuse. Additionally, from the Annual Survey we can see how the specialist domestic abuse sector is meeting the needs of survivors going through the family courts.

We've seen that nationally, the demand for domestic abuse support services outweighs current levels of service provision, particularly for refuge services. The level of service provision has

increased year-on-year which shows that meeting the demand for specialist domestic abuse support services is not just about increasing bedspaces. Although this is absolutely vital, domestic abuse services operate within systems which are simultaneously experiencing delays, backlogs and waiting lists. For refuge services, delayed access to move-on accommodation, particularly social housing, is having a significant impact on their service provision and capacity to meet demand (Women's Aid, 2025a). The length of time survivors spend in refuge is increasing because they are unable to access permanent housing at an appropriate time during their recovery, meaning that bedspaces are becoming available less frequently (Women's Aid, 2025a). We will continue to see an increase in survivors being turned away from refuge until these broader structural challenges are addressed.

### 2.1 General

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On 1st May of 2025 throughout England there were 259 providers running 437 local services, an increase of 13 providers and 23 local services. These local services continued to offer a wide range of service types and there was a net increase in all service types between 1st of May 2024 and 1st of May 2025, except resettlement services where there was a net decrease of three services (see **Table C3** in **Appendix C** for a full breakdown). Prevention work and support group services saw the largest increase between the 1st of May 2024 and the 1st of May 2025, both having a net increase of 14 services. There was also an increase of six refuge services in this timeframe.

There continues to be a shortfall in refuge service provision. The number of bedspaces across England still falls short of the Council of Europe's recommendation that, at a minimum, one family place in a refuge should be provided per 10,000 head of population<sup>13</sup>. On 1st of May 2025 there was a shortfall of 1,150 spaces in England (based on the 2023 mid-year population estimate) which has decreased from a shortfall of 1,160 the previous year. This is a total shortfall of 19.9%.

There has been an increase in the number of bedspaces listed on Routes to Support year-on-year since 2010. This year there was a net

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**13** Council of Europe (2008): "...safe accommodation in specialised women's shelters, available in every region, with one family place per 10,000 head of population." (p. 51). Based on the ONS mid-year population estimate for 2023: 57,690,323.

increase of 68 spaces bringing the total number of bedspaces on the 1st of May 2025 to 4,619 across 286 refuges. We saw regional variation in the changes in the number of bedspaces over the past year. London saw the largest net increase of 32 spaces, followed by North East England, with an increase of 25 spaces. There were two regions where there was a net decrease; in South East England there was a decrease of 17 spaces and in South West England there was a decrease of 6 spaces.

Since 2019-20, we have been reporting on the decrease in the number of refuge vacancies

posted on Routes to Support each year (Women's Aid, 2022b, 2023, 2024). For the first year since the Covid-19 pandemic, the number of vacancies posted on Routes to Support in 2024-25 increased since the previous financial year. There were 7,853 vacancies posted in 2024-25 compared to 7,550 in 2023-24, which is an increase of 303 vacancies (4.0%). This is a positive trend; however, vacancy levels are still lower than pre-pandemic levels. More details on service types, refuge bedspaces and vacancies, and levels of shortfall can be viewed in **Tables C1 to C7** in **Appendix C**.

## 2.2 Specialist provision

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The specialist women's domestic abuse sector has been operating and expanding over the past 50 years, providing a national network of life-saving support services for women and children fleeing perpetrators of domestic abuse. These services are independent, women-led and are experts at meeting the needs of survivors and empowering them to lead meaningful, independent lives free from abuse.

Most of the services listed on Routes to Support are listed as 'dedicated providers' (66.1%) and are specialist services run for the purpose of delivering domestic abuse support. Of the remaining service providers 19.2% of listed services were run by housing associations, 11.0% by 'Other' providers, and 3.7% by local authorities. There was an increase of three services listed on Routes to Support run by local authorities, bringing the total to 16 services on 1st May 2025. Although this is relatively low, we are aware from FOI data that some local authorities run domestic abuse services which are not listed on Routes to Support.

Responses from the Annual Survey detailed how many specialist services were the only ones providing dedicated domestic abuse support to women and children in their local area. Many of these services focused on long-term recovery for survivors, distinguishing them from other agencies in their area who were often limited to crisis intervention.

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*“We continue to be unique as we are the only service in our local area who specialise in supporting women and children who have experienced domestic violence. We can offer accommodation and community services that are trauma informed, strength-based, needs led and intersectional.”*

– Annual Survey, 2025

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*“Our staff are specialists, trained exclusively in domestic abuse, trauma-informed care, and safeguarding. This expertise distinguishes us from statutory agencies (e.g., social care, health, or police), which may address abuse as one part of a wider remit but without the same depth of knowledge.”*

– Annual Survey, 2025

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*“While statutory services and other local agencies often focus on crisis intervention or safeguarding, we provide space for longer-term healing through specialist one-to-one support and peer-led recovery groups. Our early intervention model ensures that survivors are no longer held on a long waiting list without contact. We now offer immediate one-to-one support, helping survivors navigate housing, family court, and complex trauma-related needs from the outset. All our volunteers and most staff have lived experience, creating a sense of psychological safety and belonging that many survivors tell us they do not find elsewhere.”*

– Annual Survey, 2025

## 2.3 Provision for marginalised groups

There were 78 services (17.8%) run exclusively for particular groups of survivors, a slight increase from 2024 (72). This includes services run exclusively for Black and minoritised women (45), for women with substance use support needs (4) and for women with a disability (3). There were 52 refuge services run exclusively for particular groups, an increase of one since 2024. There were 34 refuges run exclusively for Black and minoritised women. Not all these services were run by ‘by and for’ expert organisations led by women or survivors from the group they support, however 20 were run by organisations that are members of Imkaan (the UK-based umbrella women’s organisation dedicated to addressing violence against Black and minoritised women and girls). A full list of services run exclusively for specific groups is available in **Table C1 in Appendix C**.

Access to refuges run exclusively for specific groups remains limited - spaces in dedicated services made up 11.7% of all refuge spaces in England. There is significant regional variation in access to these services as 42.4% of these dedicated bedspaces were in London. Other regions across England range from having 0-7 dedicated refuges.

Some women face additional barriers to accessing refuge services, for example women with no recourse to public funds, and women with physical accessibility needs. The proportion of vacancies that could consider a woman with no recourse to public funds was 11.5% in 2024-

25. Vacancies suitable for wheelchair users are incredibly scarce at only 1.1% of vacancies. See **Table C7 in Appendix C** for a full breakdown of vacancies posted on Routes to Support in 2024-25.

Annual Survey responses from organisations offering provision for marginalised groups discussed offering a unique service with specific support to meet the needs of these survivors.

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*“We are the only Jewish ‘by and for’ service so have ensured the experience of Jewish women has been heard [...]. Language, cultural stigma, and lack of awareness about available services continued to hinder access, particularly for minoritised women including within the Jewish community.”*

– Annual Survey, 2025

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*“Better communication gaps by providing BSL-fluent staff and interpreters, ensuring that Deaf survivors of abuse can disclose their experiences safely and confidently without relying on hearing family members or partners who may be the abuser.”*

– Annual Survey, 2025

## 2.4 Additional support needs

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When thinking about domestic abuse service provision and access to these services, it is important to consider the additional barriers and disadvantages particular social groups might face when fleeing abuse or accessing support or justice. To fully acknowledge such structural inequalities and understand all survivors' access to support an intersectional lens must be applied, recognising that everybody stands at an intersection of oppression and privilege and that certain individuals face multiple and intersecting forms of discrimination.

Looking at On Track data on survivors who accessed refuge and CBS services in 2024-25, we saw that many survivors have additional support needs, including around alcohol use (5.3% in CBS services, 7.4% in refuge) and/or drug use (5.9% in refuge and CBS services), and physical health (13.3% in CBS services, 19.2% in refuge). The most reported support need was around mental health (44.0% in CBS services, 52.8% in refuge). Full details of survivors' support needs can be found in the On Track Data Briefing supplementary to this report.

We know from our *No Woman Turned Away* project, that being met with inappropriate responses from statutory services, including even sometimes being given illegal immigration advice, is not an uncommon experience for survivors with additional support needs. As discussed by the Annual Survey respondents below, many survivors present to services with a range of additional support needs, and domestic abuse services can provide tailored support around these, demonstrating the importance of such provision.

Data from Routes to Support shows us how many services have specialist support workers. This includes support workers for survivors with mental health support needs (11.5% of refuges, 8.4% of CBS services), drug use support needs (11.2% of refuges, 6.2% CBS services) and alcohol support needs (11.5% of refuges, 6.2% of CBS services). This information can be viewed in full in **Tables C8 and C9 in Appendix C.**

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*“Many women presented with multiple, intersecting challenges—mental health issues, housing insecurity, immigration concerns, and trauma—which required intensive, multi-agency support.”*

– Annual Survey, 2025

“

*“[...] We are addressing a spectrum of survivors' needs—including those facing multiple barriers such as language, immigration status, or prior negative experiences with services—we offer a holistic, survivor-led approach that distinguishes us from statutory and other voluntary providers in the area.”*

– Annual Survey, 2025

Looking at On Track data, we can see that survivors with additional support needs continue to face barriers when accessing refuge services. Of the rejected referrals into refuge in 2024-25, 17.9% were because the service did not have the resources or capacity to meet the survivors support needs, with mental health (4.8%) and drug and/or alcohol use (4.0%) being the most reported. All reasons for rejected referrals into refuge and CBS services can be seen in **Table B1 in Appendix B.** Additionally, as discussed in Section Three, an increased proportion of services which were running an area of their domestic abuse service without dedicated funding over the past year reported this lack of dedicated funding meant they were unable to support women with complex needs.

## 2.5 Provision for children and young people

In 2025 there were 252 dedicated CYP services compared to 247 in 2024. This includes 194 refuge services (67.8%) and 154 (52.2%) CBS services. This is a slight net increase in the number of local services offering a dedicated CYP service. However, because there was an overall increase in the number of services listed on Routes to Support in 2025 compared to 2024, the proportion of all services which offer a dedicated CYP service has decreased by 11.6% since 2024. Full details of CYP services can be found in **Tables C12** and **C13** in **Appendix C**.

The types of CYP support these services provide has largely stayed the same since 2024 with dedicated emotional support (refuge: 71.3%, CBS: 50.8%), individual support (refuge: 69.6%, CBS: 51.2%) and support groups (refuge: 32.9%, CBS: 30.2%) being some of the most reported types of support provided.

Respondents to the Annual Survey shared details regarding some of the specialist support they provide to children and young people, recognising them as victims in their own right in line with the Domestic Abuse Act 2021.

“

*“[...] In contrast to statutory services or generalist providers, our work is gender-responsive, strengths-based, and culturally competent, and we take an intergenerational approach — supporting children not as witnesses but as victims in their own right [...]”*

– Annual Survey, 2025

“

*“We have a family support worker who has structured child’s voice sessions called “we hear you” to establish each individual child’s voice and the trauma they have suffered from domestic abuse.”*

– Annual Survey, 2025

## 2.6 Support around the family courts

Domestic abuse remains a largely unreported crime in the criminal justice system, with less than one in five survivors reporting to the police (ONS, 2023). Evidence does however suggest that a very high proportion of women and children who engage with the family justice system are survivors. Research indicates that domestic abuse is prevalent in up to 93% of private family law child arrangement cases, making domestic abuse the ‘everyday business’ of family courts (Domestic Abuse Commissioner, 2025). We know that decisions made in private law children’s proceedings in the family courts can have long lasting and, in some cases, fatal consequences on survivors and children (Women’s Aid, 2004; 2016; 2025).

In 2020, the Ministry of Justice ‘Harm panel’ report unveiled deep-seated and systemic problems with how the family courts identify, assess and manage risk to children and adults (Ministry of Justice, 2020). As a result, in 2022 a pilot Pathfinder court was launched; a new investigative, safety-focused and trauma-informed process for child arrangements applications. Under this model, domestic abuse services can contribute to a Child Impact Report<sup>14</sup> which is shared with the courts to provide support to survivors. The Government has outlined their commitment to system-wide reform to transform how survivors are treated in the family courts and improve outcomes for children and families involved in proceedings. As part of their work to achieve this aim, they have proposed

<sup>14</sup> A Child Impact Report (CIR) is developed which summarises the key evidence and issues for the court. In some cases, independent domestic abuse services will assess risk which will be included in the CIR. Ministry of Justice (2025) Private Law Pathfinder: An update on the implementation of the Government’s Pathfinder programme for private law reform. Available [online](#).

to continue expanding the Pathfinder model (Ministry of Justice, 2025a). Evaluation of these pilots identified the inclusion of domestic abuse support services to be integral to the success of the model, noting that the inclusion of these services should take into account their capacity, staffing, and available resources as a key lesson for rollout (Ministry of Justice, 2025b; 2026).

Given the recognition of domestic abuse services in achieving better family justice outcomes, we

were keen to explore what unique value specialist domestic abuse services provide in the national response to domestic abuse, including how they support survivors through the family justice system beyond the Pathfinder model. Whilst survivors can independently seek support from a domestic abuse service in traditional child arrangement proceedings, unlike the Pathfinder model this is not directly funded or guaranteed as part of the process.

## 2.6.1 Types of family court support provided

Submissions to the Annual Survey detailed a wealth of different types of support provided by services to survivors in relation to the family courts. The varied support offered by services demonstrates the key role services play in helping survivors access justice, coordinating statutory responses in line with legislation, and mitigating the impact of harm through engagement with the family courts. Whilst some respondents were able to provide a dedicated family courts support service, every organisation provided support around this in some way.

### 2.6.1.1 Special measures and safety planning

Domestic abuse services provide support to ensure that survivors are not put at direct risk through attending court hearings. The Domestic Abuse Act 2021 introduced the provision of special measures for all survivors of domestic abuse in the family courts (Domestic Abuse Act 2021; s. 63). Responses to the Annual Survey 2025 reveal that many services play a pivotal role in advocating for survivors to access these. Additionally, many responses discussed carrying out risk assessments and safety planning with survivors to help them attend court safely.

“

*“[...] We have a specialist family court support service which support[s] children and female survivor[s] who are ‘going through’ family courts proceedings [...]”*

– Annual Survey, 2025

“

*“[...] The IDVA team will support with arranging special measures and safe entrance and exit at the courts.”*

– Annual Survey, 2025

“

*“[Domestic abuse service] challenge any barriers faced by our service users, ensuring barristers request safe entry/exit to courts where it is not possible for hearing[s] to be held online. Also, safety within the court, with safe side rooms/partitions in court room[s] and interpreters where required.”*

– Annual Survey 2025

### 2.6.1.2 Accessibility

Limited provision of interpreters can be a key barrier for some survivors in the family courts, in some cases preventing them from being able to participate in these cases (Women's Aid, 2022c). Multiple responses in the survey demonstrated how specialist domestic abuse services are providing interpreters in the family courts context.

“

*“Accessibility, including interpreters, special measures, coming to court with survivors with no representation, safety planning”*

- Annual Survey, 2025

Even in cases that don't involve family courts, limited provision of interpreters in statutory agencies can prohibit the identification of domestic abuse in families where contact is informally arranged (Women's Aid, 2025c). Offering this service could therefore help some of the most marginalised survivors to better navigate the family courts when they are experiencing domestic abuse, possibly even saving lives.

### 2.6.1.3 Advocacy and information

Beyond advocating for special measures, many services discussed a varied range of advocacy they provided for survivors around the family courts, including liaising with statutory agencies to achieve better outcomes for survivors and children and empowering the survivor to understand the process and gather evidence.

“

*“Advocate with social services around family court proceedings – often receive pushback from social workers that they cannot make any suggestions about safe contact or contact with children and abusive parent and this should be managed via family court. Family court takes a very long time, and interim measures need to be put in place to safeguard children and survivors. Often this is very beneficial to survivor if it comes from social services, not them.”*

- Annual Survey, 2025

“

*“We would be seen as a DA advocate in family court and where funded we would utilise a local solicitor to represent the survivor. Staff are trained to understand the family court process and can support and advocate [with] the survivor gathering their evidence. We can complete any supporting letters where needed for family court.”*

- Annual Survey, 2025



“

“Yes, support around child contact includes specialised therapeutic programmes like DART<sup>16</sup> that help rebuild parent-child relationships safely, as well as 1:1 child therapy and counselling services to address trauma from domestic abuse. Services also offer advice, safety planning, and advocacy for both formal and informal contact arrangements to ensure children’s wellbeing and protection.”

– Annual Survey, 2025

“

“Locally, [domestic abuse service] has continued to provide a specialist, trauma-informed service that centres the voices of children and young people affected by domestic abuse — something that is still often overlooked in wider service provision.”

– Annual Survey, 2025

Much of this support by services to enhance the voice of the child extended beyond specific family court support. Some organisations noted contributing to local and national research and/or campaigns, as well as helping to train agencies on different approaches, such as the Safe & Together model.<sup>17</sup>

“

“[Domestic abuse service] has been involved with Tell Nicole regarding change for children’s voices being heard. We have shared data with the LA on how to shape DA services. We provide a bespoke service to women, men and children.”

– Annual Survey, 2025

“

“Increased collaborative working with external agencies within [local authority]. All front-line staff been trained on the Safe & Together model/approach and changes been made to practice using the whole family approach.”

– Annual Survey, 2025

“

“We attended Downing Street along with Claire Throssell MBE and WAFE to post the child first petition, we also attended the House of Lords as well.”

– Annual Survey, 2025

<sup>16</sup> Domestic Abuse, Recovering Together. For more information: NSPCC. (2025) Domestic Abuse, Recovering Together (DART™). NSPCC: [Available online](#). [Accessed 1st December 2025].

<sup>17</sup> Safe & Together Institute (2025) [The Safe & Together Model](#).

## 2.6.2 Meeting survivors' needs around the family courts

As outlined in Table 2.1 below, most domestic abuse services in our Annual Survey (76.5%) felt that they were able to meet the needs of survivors in relation to the family courts either 'very well' (32.0%) or 'somewhat' (44.5%). This highlights the crucial work undertaken by services for survivors going through family court processes, despite a lack of dedicated funding for this work. Only 8.6% of respondents answered 'not very well' (7.8%) or 'not at all' (0.8%). Open-ended responses in the survey detailed below reveal further insight into the issues services face when it comes to supporting survivors around the family courts.

“

*"[...] The system is overwhelmed, with long delays and frequent communication breakdowns, particularly for unrepresented survivors. Our Court Report Policy has provided some structure, but the burden of court-ordered reporting is escalating and requires national recognition. Survivors repeatedly describe the process as retraumatising, with inconsistent application of Practice Direction 12J (child contact and domestic abuse) and difficulties accessing legal aid. A more joined-up and survivor-focused approach within the family court system is urgently needed."*

– Annual Survey, 2025

**Table 2.1: How well do you feel your service is able to meet the needs of survivors specifically in relation to the family courts?**

**Women's Aid Annual Survey 2025**

Response	Number of respondents	%
Very well	41	32.0%
Somewhat	57	44.5%
Not very well	10	7.8%
Not at all	1	0.8%
Missing data	19	14.8%
<b>TOTAL</b>	<b>128</b>	<b>100.0%</b>

**2.6.2.1 Pro-contact culture and the minimisation of domestic abuse**

Many responses shared ongoing concerns relating to one of the key barriers the ‘Harm Panel’ report identified in the courts’ ability to respond effectively to domestic abuse: the pro-contact culture and the minimisation of domestic abuse (Ministry of Justice, 2020). More recent evidence continues to identify this as an ongoing issue (Women’s Aid, 2022c; 2025, Choudry and Rodriguez Gutierrez, 2024; Domestic Abuse Commissioner, 2025; Ministry of Justice, 2025c). Therefore, it is unsurprising that many services cited this as a major issue in the family courts.

These findings demonstrate that despite the Government’s recent announcement regarding their intention to repeal the legal presumption of contact (Ministry of Justice, 2025c), wider culture change continues to be needed in the family courts to improve the response to domestic abuse. Therefore, the Government should commit to mandatory domestic abuse training for all family court professionals as part of this. As discussed in further detail in Section Four, many specialist domestic abuse services noted improved responses to survivors amongst statutory professionals through better collaboration. For some services this appeared to be linked to training they had provided to statutory agencies.

**2.6.2.2 Resources and increased demand**

As discussed, the limited resources and capacity of domestic abuse services was noted as a key lesson for the rollout of the Pathfinder project. This was reflected in one particular response, however, the struggle to meet demand was also shared more generally, with some noting increasing workloads in this area.

“We are part of the Pathfinder Family Courts project in [name of local authority removed], with IDVAs supporting women and contributing to Child Impact Report. Insufficient resources and time pressures around the reports means less time for supporting women including at court.”

- Annual Survey, 2025

“Courts often don’t consider the ongoing risk of abuse via contact. Consideration to the full history isn’t given and therefore the impact missed.”

- Annual Survey, 2025

“Survivors often tell us that family courts are the worst system they have to interact with as a result of the domestic abuse they have been subject too. It is very common that survivors find the family courts to be retraumatising, result in unsafe child contact arrangements, result in survivors incurring significant debt and that their experiences of abuse are dismissed or minimised.”

- Annual Survey, 2025

“Extremely high referral rates and have impacted our resources and support at court has had to reduce at times.”

- Annual Survey, 2025

“This area of our work has increased & continues to increase.”

- Annual Survey, 2025

“[...] Over the past 12 months, we have observed an increase in unanswered emails and queries, as well as growing confusion regarding whether court orders have been properly served and are therefore legally in effect [...]”

- Annual Survey, 2025

### 2.6.2.3 Lack of dedicated funding

Along with this, another prominent theme identified was a lack of dedicated funding for family courts work, which restricted the amount of support many services were able to provide.

“

There is no dedicated funding streams to support providing family court support [...].”

– Annual Survey, 2025

“

Over the years funding for this declined and we are now only doing this on a spot purchased basis, when LAs commission it.”

– Annual Survey, 2025

“

It can be hard due to levels of staffing, and I believe there should be additional funding provided for this [...].”

– Annual Survey, 2025

### 2.6.2.4 Accessibility

As discussed, limited provision of interpreters can be a key barrier for some survivors in the family courts (Women’s Aid, 2022c). Responses in the survey discussed this as a specific issue for survivors attending court, with one response noting how a lack of deaf awareness amongst court staff led to interpreters not being booked.

“

It has been a significant challenge for our Deaf clients attending court due to a persistent lack of Deaf awareness among court staff and professionals. In many cases, interpreters are either not booked at all, booked too late, or arrive with severe delays. This not only causes confusion and distress but can also lead to serious consequences, such as adjournments, miscommunication, or the client being unable to fully participate in their own case [...].”

– Annual Survey, 2025

### 2.6.2.5 Barriers to legal aid

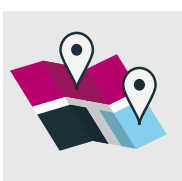
Not all survivors are able to access legal aid through the family courts, however, even in cases where survivors find that they are eligible, sourcing a legal aid solicitor can prove extremely difficult. According to recent data, around 70% of the population in England and Wales do not have access to a community legal aid care provider, and only about 14.4% have access to more than a single legal aid provider in their local authority area (The Law Society, 2025).

“

Getting legal aid solicitors has been so difficult and more challenging for women who own property or work. We try to support with this as much as possible, but it is a challenge.”

– Annual Survey, 2025

# 3. FUNDING

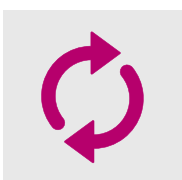


Almost **three out of four** refuge services were **commissioned by their local authorities** for all of their bedspaces in 2024-25 (72.4%). Of those **only around a third**

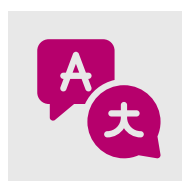
(36.0%) **received funding for all support staff costs** such as salaries, clinical supervision and training.



At least **one in eight** refuge **services** (13.3%) continue to run and support survivors, despite receiving **no local authority commissioned funding at all**.



Funding of **community-based support services** by Police and Crime Commissioners **remains consistent** at around 50.0% year-on-year.



Refuges run 'by and for' Black and minoritised women were less likely to be commissioned by the local authority, **with 42.9% of Imkaan-member refuges being fully commissioned** compared to the national proportion of **72.4% of all refuges**.



**Almost two fifths** (39.1%) of organisations were **providing an area of their domestic abuse service without any dedicated funding**.



**Just under three quarters** (74.0%) of domestic abuse organisations responding to the Annual Survey who were **running a service without dedicated funding used reserves to cover the costs; 42.0% relied on volunteers** to deliver the service, compared to 31.4% in 2023-24; and **almost a third** (30.0%) reported this **impacting their capacity to support women with more complex needs**, an increase from 22.9% in 2023-24.

# 3. Funding

To understand how commissioning of domestic abuse services compares to previous years, we collected evidence on the types of funding services receive. This includes local authority commissioning, Police and Crime Commissioner funding, and funding from Integrated Care Boards. We have also explored how many organisations were running an area of service without dedicated funding and what this impact had on their overall service delivery.

## 3.1 Commissioned funding

---

### 3.1.1 Refuge services

#### 3.1.1.1 Local authority funding

To determine the level of local authority funding for domestic abuse refuges, we used responses to our Annual Survey and Freedom of Information (FOI) requests which we sent to local authorities in England. Respondents to the FOI requests were asked about any refuge or safe accommodation services the local authority funded, and to indicate what form of funding was provided: funding secured through a competitive tender process; grant funding (a sum of money provided under a grant funding agreement where applicants must meet the conditions of a fund); or whether the service was provided in-house. Services were then categorised as 'commissioned' where they received either funding secured through a competitive process, grant funding, or both types, for all bedspaces. To address any gaps, we contacted refuge providers asking for information about local authority funding. (See section on Methodology for more details).

This year, 72.4% of refuge services were commissioned (207 out of 286) which is lower than in previous years. In 2023-24, 79.6% of refuge services were commissioned (223 out of 280), and in 2022-23, 77.1% of refuge services were commissioned (209 out of 271). There was a notably higher number of services defined as 'partially commissioned' this year (24 in 2024-25 compared with 14 in 2023-24), which received funding through a local authority commissioning

process for some of the bedspaces in their service, but which were also providing additional bedspaces that were not included in their commissioned contract and were funded through other means. This year we were unable to confirm the 'commissioned status' for all refuge services and 13 refuge services have been recorded as 'no data'. This will account for some changes in percentages compared to the previous year in 2023-24 when there was no missing data. For example, some of those 13 refuges recorded as 'no data' this year may have been recorded as 'commissioned' in 2023-24. There were 38 refuge services (13.3% of all refuge services) that received no commissioned funding from their local authority, which was a slight decrease on the previous year (13.9% in 2023-24).

There was regional variation in the proportion of refuge services commissioned by local authorities across England during 2024-25. Refuge services in some regions were more likely to be commissioned than others. For example, 87.0% of refuges in East of England, 84.6% of refuges in South East England, and 81.8% of refuges in South West England were commissioned. Comparatively, refuge services were less likely to be commissioned in certain regions, for example in the West Midlands (58.3% of refuges), East Midlands (65.2% of refuges) and North West England (67.6% of refuges). The highest proportion of partially commissioned refuge services was found in the East Midlands region of England (21.7% of refuge services). Please see **Table 3.1** for full details.

**Table 3.1: Regional breakdown of local authority commissioning of refuge services and bedspaces in 2024-25****FOI Requests 2025**

Region	Commissioned		Not commissioned		Partially commissioned		Other		No data		Total
	#	%	#	%	#	%	#	%	#	%	
Channel Islands	0	0.0%	0	0.0%	0	0.0%	2	100.0%	0	0.0%	2
East Midlands	15	65.2%	3	13.0%	5	21.7%	0	0.0%	0	0.0%	23
East of England	20	87.0%	1	4.3%	2	8.7%	0	0.0%	0	0.0%	23
London	43	70.5%	12	19.7%	3	4.9%	1	1.6%	2	3.3%	61
North East England	15	75.0%	3	15.0%	2	10.0%	0	0.0%	0	0.0%	20
North West England	23	67.6%	2	5.9%	5	14.7%	0	0.0%	4	11.8%	34
South East England	33	84.6%	1	2.6%	1	2.6%	0	0.0%	4	10.3%	39
South West England	18	81.8%	3	13.6%	1	4.5%	0	0.0%	0	0.0%	22
West Midlands	21	58.3%	7	19.4%	5	13.9%	0	0.0%	3	8.3%	36
Yorkshire & Humberside	19	73.1%	6	23.1%		0.0%	1	3.8%	0	0.0%	26
<b>Grand Total</b>	<b>207</b>		<b>38</b>		<b>24</b>		<b>4</b>		<b>13</b>		<b>286</b>

There has been an increase in the number of bedspaces in England each year since 2010. There was an increase of 68 spaces from 4,551 bedspaces on 1st of May 2024 to 4,619 spaces on 1st of May 2025. However, while the number

of bedspaces and therefore overall provision increased slightly, the proportion of all bedspaces which are commissioned did not. As presented in Section One, demand for domestic abuse support services outweighs current levels of

service provision, particularly for refuge services, and inadequate funding continues to undermine the sector's ability to meet demand and the capacity to provide such services. The figure of 4,619 bedspaces still falls short (by 1,150) of the Council of Europe's minimum recommendation and represents a 19.9% shortfall. As shown in

**Table 3.2**, 12.3% (570) of the total 4,619 bedspaces running on 1st May 2025 were not funded through local authority commissioning arrangements. If these non-commissioned spaces were not available, the level of refuge shortfall in England would increase from 19.9% (1,160) to 29.8% (1,720).<sup>18</sup>

**Table 3.2: Local authority commissioning of refuge services and bedspaces in 2024-25**  
**FOI Requests 2025**

2024-25	Number	% of Total	2023-24	Number	% of Total
Commissioned refuge	207	72.4%	Commissioned refuge	223	79.6%
Non-commissioned refuge	38	13.3%	Non-commissioned refuge	39	13.9%
Partially commissioned refuge	24	8.4%	Partially commissioned refuge	14	5.0%
Other	4	1.4%	Other	4	1.4%
No data	13	4.5%	No data	0	0.0%
<b>Total</b>	<b>286</b>	<b>100.0%</b>	<b>Total</b>	<b>280</b>	<b>100.0%</b>
2024-25			2023-24		
Commissioned bedspaces	3652	79.1%	Commissioned bedspaces	3947	86.7%
Non-commissioned bedspaces	570	12.3%	Non-commissioned bedspaces	513	11.3%
Bedspaces - other	42	0.9%	Bedspaces - other	63	1.4%
Bedspaces - no data	355	7.7%	Bedspaces - no data	28	0.6%
<b>Total</b>	<b>4,619</b>	<b>100.0%</b>	<b>Total</b>	<b>4,551</b>	<b>100.0%</b>

Notes: Four refuge services have been classed as 'other'. Two of these services are located in crown dependencies outside of England and therefore do not operate under the same local government commissioning arrangements. The other two refuge services classed as 'other' are managed and provided directly by the local authority rather than the contract being awarded to another organisation.

<sup>18</sup> The number of bedspaces here refers to the number of bedspaces in refuge, as per the service definitions above. This does not include the category of floating support, which is associated with maintaining tenancies.

Local authority commissioning does not mean that funding is sufficient to cover all the costs associated with running a refuge service, and providers often need to source additional funding in order to continue to provide their services. The increase in the number of services recorded as ‘partially commissioned’ could indicate that more services are having to diversify their income streams and provide more bedspaces than they are commissioned for. The Annual Survey provided further detail around the funding landscape for refuge services. Some respondents to the survey described the various ways in which they seek additional funding to meet the costs of running their refuge services.

“  
 \_\_\_\_\_  
 “We addressed the short fall by fundraising both community and trust funds, and by using some of our reserves as we were unable to fundraise all that we needed.”  
 \_\_\_\_\_  
 - Annual Survey 2025

“  
 \_\_\_\_\_  
 “We actively seek out other funding opportunities, eg. Trusts, corporate sponsorship. We also operate a Charity Shop, whose surplus supports the Charity as a whole.”  
 \_\_\_\_\_  
 - Annual Survey 2025

**3.1.1.1.2 How funding was delivered to commissioned refuge services**

Using the data collected from responses to our FOI requests and Annual Survey, we investigated how funding was delivered to refuge services which had been determined to be ‘commissioned’, ‘partially commissioned’, or ‘other’ (in-house service provision). The most common form of funding delivery was secured through a competitive tender process, with 55.6% of refuge services (129 out of 232) being determined as receiving competitive tendered funding only, followed by 14.2% (33 out of 232) determined to receive a mixture of competitive tendering and grant funding. A slightly smaller proportion of refuge services were determined to receive grant funding only (10.8%, 25 out of 232).

For 25 refuge services (10.8%), we were unable to determine how funding was delivered due to conflicting information between the local authority responses to the FOI requests, and the service responses to the Annual Survey. Similarly, for 19 refuge services (8.2%), there was no data available on the types of funding they received.

**Table 3.3 National breakdown of refuge funding by funding type  
 FOI requests and Women’s Aid Annual Survey 2025**

Commissioned only (competitive tendering)	129	55.6%
Mixed competitive & grant funding	33	14.2%
Grant funding only	25	10.8%
Conflicting information	25	10.8%
No data	19	8.2%
In-house only	1	0.4%
<b>Total services included in sample</b>	<b>232</b>	

**3.1.1.1.3 Amount of commissioned funding**

Of the respondents to the Annual Survey who were funded by the local authority to deliver refuge services in 2024-25, over half reported that

their funding had either stayed the same (58.7%) or increased (25.3%) over the past two years (see **Table 3.4**).

**Table 3.4: Has your refuge service received increased funding from your local authority over the past 2 years?**

**Women’s Aid Annual Survey 2025**

Response	Number of respondents	% of respondents funded by LA for refuge service/s (75)
Decreased	4	5.3%
Stayed the same	44	58.7%
Increased	19	25.3%
Don't know	3	4.0%
Missing data	5	6.7%
<b>TOTAL</b>	<b>75</b>	<b>100.0%</b>

We asked Annual Survey respondents who were funded for refuge services by the local authority to what degree all of the costs involved in providing the service were covered by this funding. Local authority funding is related to the ‘support costs’ of running a refuge, which includes staff salaries, training and clinical supervision, along with ‘activity costs’ and ‘central costs’ involved in running the organisation and premises. The costs associated with accommodation in refuge services, such as rental and service charges, are usually covered by housing-related benefits claimed by refuge residents. It should be noted that this is a major barrier to survivors with no recourse to public funds who are unable to claim state benefit, as well as women who want to keep their employment while resident in refuge, as this would prevent them from being able to claim the benefits needed to pay for their accommodation costs (Women’s Aid, 2023).

Funding for ‘support costs’ was found to be higher than for ‘activity costs’ and ‘central costs’ which highlights how receiving funding from the local authority does not mean that all costs are necessarily covered by that contract (see **Table 3.5**). This illustrates that even where refuges are commissioned and contracted to provide all the bedspaces in their service, they often need to source additional funding to meet the full costs of running the service in a safe and efficient way. It is worth highlighting that there is also a consistent number of services that do not receive any local authority commissioned funding but continue to run and support the sector.

**Table 3.5: How much funding did you receive through being commissioned by the local authority for your refuge services in 2024-25?****Women's Aid Annual Survey 2025**

<b>Amount of funding received from local authority</b>	<b>For activity costs (Direct activity costs, accessibility costs, external contractors)</b>	<b>For central costs (Admin/finance staff, management/governance staff, premises/other)</b>	<b>For support staff costs (Salaries, additional employment costs, clinical supervision, staff training)</b>
All costs	11 (14.7%)	18 (24.0%)	27 (36.0%)
More than half of costs	14 (18.7%)	15 (20.0%)	30 (40.0%)
Half or less of costs	22 (29.3%)	31 (41.3%)	13 (17.3%)
None	23 (30.7%)	6 (8.0%)	0 (0.0%)
Missing data	5 (6.7%)	5 (6.7%)	5 (6.7%)
<b>TOTAL</b>	<b>75</b>	<b>75</b>	<b>75</b>

The Annual Survey provided further details on the types of support that were funded by local authorities as part of refuge services (see **Table 3.6** on the next page). Of the Annual Survey respondents running refuge services who received funding from the local authority, the most common type of support that was funded was 'safety planning' (20.0%), followed by 'key work & support planning' (20.0%) and 'emotional support' (20.0%).<sup>19</sup>

<sup>19</sup> This is not statistically comparable with the previous year as the response rate to this question was much lower this year.

**Table 3.6: Did the funding you received from the local authority cover any of the following types of support tied to the accommodation?****Women's Aid Annual Survey 2025**

<b>Response</b>	<b>Number of respondents</b>	<b>% of respondents funded by LA for refuge service/s (75)</b>
Safety planning	15	20.0%
Key work & support planning (work around support needs including e.g. parenting, finances and wellbeing)	15	20.0%
Emotional support	15	20.0%
Access to information and advocacy	14	18.7%
Children and Young People's domestic abuse services in refuge	10	13.3%
Practical help	12	16.0%
Access to support for children (where needed)	7	9.3%
Access to recovery work such as counselling and support groups/group work programmes	4	5.3%
Therapeutic support services (counselling, group work)	9	12.0%
Specialist domestic abuse services for women with complex needs	5	6.7%
Access to specialist support workers (e.g. drugs/alcohol misuse, mental health, sexual abuse)	3	4.0%
Specialist domestic abuse services for Black and minoritised (BME) women	2	2.7%
Specialist domestic abuse services for women with disabilities	2	2.7%
Specialist domestic abuse services for Trans women	1	1.3%
Specialist domestic abuse services for Trans men	1	1.3%
Specialist domestic abuse services for Gay and Bisexual men	1	1.3%
Specialist domestic abuse services for Lesbian and Bisexual women	1	1.3%
Other	1	1.3%
None of the above	0	0.0%

## Specialist services - 'by and for'

A similar number of Imkaan members (the UK-based umbrella women's organisation dedicated to addressing violence against Black and minoritised women and girls) received local authority commissioned funding compared to last year, but some of these services are only partially commissioned. There is now a marked increase in the number of partially commissioned refuge services, with three Imkaan members partially commissioned in 2024-25 compared to zero in 2023-24. The proportion of non-commissioned Imkaan member refuge services remains around the same, therefore this increase could indicate that some (or at least one) Imkaan members' commissioning status changed from commissioned in 2023-24 to partially commissioned in 2024-25.

Members of Imkaan were still less likely to be commissioned by the local authority, with 9 out of 21 services (42.9%) being fully commissioned (see **Table 3.7**), a 20.3% decrease from 2023-24 (when 63.2% of Imkaan member refuge services were commissioned). This proportion remains significantly lower than the national proportion (72.4%).

**Table 3.7: Imkaan members - Local authority commissioning of refuge services and bedspaces in 2024-25**

### FOI Requests 2025

2024-25	#	%	2023-24	#	%
Commissioned	9	42.9%	Commissioned refuge	12	63.2%
Not commissioned	7	33.3%	Non-commissioned Refuge	7	36.8%
Partially commissioned	3	14.3%	Partially commissioned Refuge	0	0.0%
No data	2	9.5%	No data	0	0.0%
<b>Total</b>	<b>21</b>	<b>100.0%</b>	<b>Total</b>	<b>19</b>	<b>100.0%</b>
2024-25			2023-24		
Commissioned bedspaces	117	40.2%	Commissioned bedspaces	176	65.9%
Non-commissioned Bedspaces	110	37.8%	Non-commissioned Bedspaces	91	34.1%
No data	64	22.0%	No data	N/A	N/A
<b>Total</b>	<b>291</b>	<b>100.0%</b>	<b>Total</b>	<b>267</b>	<b>100.0%</b>

### 3.1.1.2 Police and Crime Commissioner (PCC) funding

The Annual Survey provided further information around funding sources for refuge services from other commissioning bodies. In 2024-25, 14.3% of Annual Survey respondents running refuge services received commissioned funding from a PCC (Police and Crime Commissioner). This is a slight decrease from the previous year (17.1% in 2023-24).

In November 2025, the Government announced that PCCs will be abolished from 2028 with the aim of redistributing funds directly to frontline policing<sup>20</sup>. The Government found that the

robustness and consistency of forces varied nationally which resulted in a ‘postcode lottery’ in terms of the quality of support survivors received. It remains unclear where oversight of individual police forces will sit, or how funding for domestic abuse services will be distributed to meet community needs and enhance local accountability. Given that a significant proportion of domestic abuse provision is currently commissioned through PCCs, it is important that the transition process is managed carefully and that the specialist knowledge of some PCCs is not lost during the transition process.

**Table 3.8: Did you receive any commissioned funding for your refuge services from a PCC (Police and Crime Commissioner) in 2024-25?**

Women’s Aid Annual Survey 2025

Response	Number of respondents	% of those with refuge provision
No	71	78.0%
Yes	13	14.3%
Missing data	7	7.1%
<b>TOTAL</b>	<b>91</b>	<b>100.0%</b>

### 3.1.1.3 Integrated Care Board (ICB) funding

In 2024-25, 4.4% of Annual Survey respondents running refuge services received commissioned funding from an ICB (Integrated Care Board). This

is a slight decrease from the previous year (7.1% in 2023-24).

**Table 3.9: Did you receive any commissioned funding for your refuge services from an ICB (Integrated Care Board) in 2024-25?**

Women’s Aid Annual Survey 2025

Response	Number of respondents	% of those with refuge provision
No	80	87.9%
Yes	4	4.4%
Missing data	7	7.8%
<b>TOTAL</b>	<b>91</b>	<b>100.0%</b>

<sup>20</sup> Home Office & The Rt Hon Shabana Mahmood MP (2025) [Police and crime commissioners to be scrapped](#). GOV.UK. (Accessed: 5 January 2026)

### 3.1.2 Community-based support services

#### 3.1.2.1 Local Authority funding

Of the 102 organisations responding to the Annual Survey that provided community-based support (CBS) services in 2024-25, 75.5% (77 out of 102) were funded by the local authority for that financial year. Fourteen (14) respondents had never been funded as a service by the local authority (13.7%) and a further eleven were not funded for the 2024-25 financial year but had been funded in the past (10.8%).

For the majority of these 77 respondents funded by the local authority to deliver CBS services, this funding was secured through competitive tendering processes (45.5%, 35 out of 77), or a mixture of competitive tendering and grant funding (27.3%, 21 out of 77). Nearly half of organisations funded by the local authority to run CBS services, therefore, secured their funding from the local authority through a competitive tendering process. Twelve (15.6%) respondents reported that their funding from the local authority was from grant funding specifically.

We asked the 77 respondents running CBS services funded by the local authority to give details about how much of the CBS service provision this funding covered. The results in **Table 3.10** show that funding rarely covered all costs and that ‘being commissioned’ should not be mistaken for being fully funded.

The Annual Survey provided further details on the types of support that were funded by local authorities as part of CBS services (see **Table 3.11**). Of the Annual Survey respondents running CBS services who received funding from the local authority, the most common type of support that was funded was for domestic abuse advocacy services (64.9%), followed by outreach (58.4%), and dedicated children and young people’s domestic abuse services in the community (50.6%). There has been a marked increase in the funding of dedicated children and young people’s domestic abuse services in the community compared to last year, in which 36.5% of CBS services received funding.

**Table 3.10: How much funding did you receive through being commissioned by the local authority for your community-based support services in 2024-25?**

**Women’s Aid Annual Survey 2025**

Amount of funding received from local authority	For activity costs (Direct activity costs, accessibility costs, external contractors)	For central costs (Admin/finance staff, management/governance staff, premises/other)	For support staff costs (Salaries, additional employment costs, clinical supervision, staff training)
All costs	20 (26.0%)	20 (26.0%)	34 (44.2%)
More than half of costs	13 (16.9%)	13 (16.9%)	27 (35.1%)
Half or less of costs	19 (24.7%)	33 (42.9%)	12 (15.6%)
None	22 (28.6%)	8 (10.4%)	1 (1.3%)
Missing data	3 (3.9%)	3 (3.9%)	3 (3.9%)
<b>TOTAL</b>	<b>77</b>	<b>77</b>	<b>77</b>

**Table 3.11: Did the funding you received from the local authority cover any of the following types of support as part of the community-based support service?****Women's Aid Annual Survey 2025**

Response	Number of respondents	% of respondents funded by LA for CBS service/s (77)
Outreach	45	58.4%
Domestic abuse advocacy services (including Independent Domestic Violence Advocate or Advisor (IDVA) services)	50	64.9%
Dedicated children and young people's domestic abuse services in the community	39	50.6%
Floating support	25	32.5%
Therapeutic support such as formal counselling and support groups	24	31.2%
Specialist domestic abuse services for women with complex needs	12	15.6%
Specialist domestic abuse services for Black and minoritised (BME) women	12	15.6%
Specialist domestic abuse services for women with disabilities	4	5.2%
Specialist domestic abuse services for Trans men	5	6.5%
Specialist domestic abuse services for Trans women	5	6.5%
Specialist domestic abuse services for Gay and Bisexual men	5	6.5%
Specialist domestic abuse services for Lesbian and Bisexual women	5	6.5%
Other	6	7.8%
None of the above	1	1.3%

**3.1.2.2 Police and Crime Commissioner (PCC) funding**

In 2024-25, over half (52.9%) of Annual Survey respondents running CBS services received commissioned funding from a PCC (Police and Crime Commissioner). This is a slight decrease

from the previous year (53.2% in 2023-24) however funding from PCCs remains consistent year on year, at around 50.0% of CBS services.

**Table 3.12: Did you receive any commissioned funding for your community-based services from a PCC (Police and Crime Commissioner) in 2024-25?**

**Women's Aid Annual Survey 2025**

Response	Number of respondents	% of those with CBS service provision
No	44	43.1%
Yes	54	52.9%
Missing data	4	3.9%
<b>TOTAL</b>	<b>102</b>	<b>100.0%</b>

### 3.1.2.3 Integrated Care Board (ICB) funding

In 2024-25, 14.7% of Annual Survey respondents running CBS services received commissioned funding from an ICB (Integrated Care Board). This is a small decline from the previous year (20.3% in 2023-24).

**Table 3.13: Did you receive any commissioned funding for your community-based support services from an ICB (Integrated Care Board) in 2024-25?**

**Women's Aid Annual Survey 2025**

Response	Number of respondents	% of those with CBS service provision
No	83	81.4%
Yes	15	14.7%
Missing data	4	3.9%
<b>TOTAL</b>	<b>102</b>	<b>100.0%</b>

### 3.2 Without dedicated funding

Almost two fifths (39.1%) of respondents to the Annual Survey this year were running an area of their domestic abuse service without any dedicated funding during 2024-25 (see **Table 3.14**). This is a slight increase compared to the previous year, where 35.0% were running an area of service without dedicated funding in 2023-24.

The most common service type that organisations were running without dedicated funding was therapeutic support (60.0%), followed by prevention work (58.0%) (see **Table 3.15**). The proportion running prevention work without dedicated funding was similar to the previous year (60.0% in 2023-24). We do not have comparable data for the category of ‘therapeutic services (counselling and group work)’ from 2023-24. However, based on findings from 2022-2023, where 43.1% reported running therapeutic services without dedicated funding, it appears that the proportion running this service without dedicated funding has increased notably, (Women’s Aid, 2024).

In the Annual Survey, we asked respondents what unique services or value they had provided to survivors over the past year, and how this distinguished them from other agencies in their area. Many of these responses detailed providing holistic specialist support to survivors, which often included therapeutic services, such as counselling and group work.

“We have provided in person community support for clients that have included group work and counselling. The focus has been on recovery and mental health which is often not identified.”

- Annual Survey, 2025

“We are the only Jewish service and provide a unique, holistic service for Jewish women and girls. We are able to support women for longer than the typical 12 weeks and provide each women with up to a year of free counselling.”

- Annual Survey, 2025

**Table 3.14: Were you running an area(s) of your domestic abuse service for women WITHOUT dedicated funding in 2024-25?**  
**Women’s Aid Annual Survey 2025**

Responses	Number of respondents	%
No	62	48.4%
Yes	50	39.1%
Missing data	16	12.5%
<b>TOTAL</b>	<b>128</b>	<b>100.0%</b>

“We offer support to women who experienced DA historically. It’s really important for them to talk in order for recovery and healing and some come to us even 30 years after the abuse happened to begin that journey. We have an incredible wellbeing service that uses therapeutic activities to promote recovery and reduce isolation. We have also opened a charity shop that has a wellbeing hub upstairs for survivors to meet together or for the public to drop in for advice and information. We run a course called The Survivors Programme written by one of our outreach workers. This has relevant current information on coercive control, non-fatal strangulation, post separation abuse and lots more. Local agencies are now coming to us for us to train them to become facilitators of this course.”

- Annual Survey, 2025

**Table 3.15: Which areas of your domestic abuse service were you running without dedicated funding in 2024-25****Women's Aid Annual Survey 2025**

<b>Area of service run without dedicated funding</b>	<b>% of respondents running an area of service without dedicated funding (50)</b>
Therapeutic support services (counselling, group work)	60.0%
Domestic abuse prevention or educational work	58.0%
Community-based domestic abuse services for women (outreach, floating support, advocacy)	44.0%
Other	22.0%
Domestic abuse refuge provision	20.0%
Specialist domestic abuse services for Black and minoritised (BME) women	20.0%
Children and Young People's domestic abuse services in refuge	18.0%
Children and Young People's domestic abuse services in the community	14.0%
Specialist domestic abuse services for women with disabilities	14.0%
Specialist domestic abuse services for women with complex needs	12.0%
Accommodation-based services (other than refuge)	10.0%
Specialist domestic abuse services for Lesbian and Bisexual women	6.0%
Specialist domestic abuse services for Trans men	6.0%
Specialist domestic abuse services for Gay and Bisexual men	6.0%
Specialist domestic abuse services for Trans women	6.0%
Tick box question – respondents can tick more than one category.	

### 3.2.1 Sustainability

Over a fifth (22.0%) of respondents who were running an area of their service without dedicated funding had to close (12.0%) or reduce (10.0%) an area of work in their service between 2024-25.<sup>21</sup>

“We lost funding for a specialist pregnancy and maternity service. Survivors are still able to access the generic service but waiting lists are longer.”

- Annual Survey, 2025

“We had to stop delivering much needed services. We are no longer able to provide Children and Young people therapeutic programs and 1-2-1 mental health support. This service was mainly funded by small trusts and foundations.”

- Annual Survey, 2025

**Table 3.16: In 2024-25, did you reduce or stop providing an area of work in your service?  
Women’s Aid Annual Survey 2025**

Response	Number of respondents	% of respondents running an area of service without dedicated funding (50)
No, we have not reduced or closed any areas of work in our service	39	78.0%
Yes, we closed an area of work in our service	6	12.0%
Yes, we reduced an area of work in our service	5	10.0%
<b>TOTAL</b>	<b>50</b>	<b>100.0%</b>

<sup>21</sup> This figure is not comparable to last year where 15% of all survey respondents had to close or reduce an area of service. This because only those who indicated that they were running an area of service had the opportunity to answer the question in this year’s survey.

### 3.2.2 Use of reserves

Just under three quarters (74.0%) of domestic abuse organisations responding to the Annual Survey who were running a service without dedicated funding used reserves<sup>22</sup> to cover the costs. Over the past three years, this figure has remained relatively stable (71.4% in 2023-24, 72.5% in 2022-23). This presents a serious challenge for the sustainability of domestic abuse services over the long-term, as funding for these are failing to be replenished over the long-term. Therefore, it is unsurprising that a similar but slightly higher proportion reported being unable to plan for the future than last year (46.0% in 2024-25, compared to 42.9% in 2023-24).

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*“In 2024–25, we have been running key parts of our domestic abuse recovery service/CAPVA work due to lack of full cost recovery funding from PCC. Due to the cost-of-living crisis and a gap between grant cycles, we have had to rely on unrestricted donations and reserves (and luckily some core funding) to continue providing support to women on our waiting list. This includes one-to-one support and group recovery and CAPVA programmes. We made a conscious decision not to suspend services, given the high level of need and the risk of retraumatisation for survivors left without timely support. However, this is not sustainable in the long term and places significant pressure on the charity’s financial stability.”*

– Annual Survey, 2025

**Table 3.17: How did this lack of dedicated funding impact delivery of the service?**

**Women’s Aid Annual Survey 2025**

Response	Number of respondents	% of respondents running an area of service without dedicated funding (50)
We used reserves to cover the costs	37	74.0%
We are unable to plan for the future and this impacts on the service we deliver	23	46.0%
We relied on volunteers to deliver the service	21	42.0%
We have had to reduce the number of women we can support in the service	18	36.0%
We are unable to support women with more complex needs due to the level of support available	15	30.0%
We lost staff as a result of job insecurity	12	24.0%
We have had to reduce the number of children and young people we can support in the service	11	22.0%
We have had to reduce staff hours within the service	10	20.0%
Other	8	16.0%

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

<sup>22</sup> Financial reserves are funds set aside to protect a charity from loss of income; therefore, they must be replenished to protect from future uncertainties.

### 3.2.3 Reliance on volunteers and reduced service

Of the services running an area of their domestic abuse service without dedicated funding during 2024-25, 42.0% were relying on volunteers to deliver the service. Along with this, 36.0% reported having to reduce the number of women they were able to support. Almost a third (30.0%) of services said this impacted their capacity to support women with more complex needs.<sup>23</sup>

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*“We have reduced capacity (e.g. by not recruiting) in some of our services, due to insufficient funding.”*

– Annual Survey, 2025

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*“We had to reduce our support for women with complex needs in refuge and our internal training team. We have also had to reduce our number of dispersed properties, and the staff contracts associated with these due to rising costs.”*

– Annual Survey, 2025

<sup>23</sup> These figures are not comparable to the last year because only those who indicated that they were running an area of service had the opportunity to answer these set of questions in the Annual Survey 2025.

# 4. COLLABORATION AND ACCOUNTABILITY



**Just over half (54.4%) of services agreed** that their **Local Partnership Board (LPB)** had **delivered effective decision making** in their local area in 2024-25, and only 11.4% strongly agreed.



**Less than half (44.3%) of services agreed** that **LPBs** had **improved conditions for survivors**, and only 10.1% strongly agreed.



**Less than a third (31.6%) agreed** that **LPBs** had **improved commissioning for specialist services** over the past year, and only 10.1% strongly agreed.



**Less than a third (29.7%)** of respondents felt they **were able to effectively hold their local authority to account for decision making**, and only 5.5% said very effectively, around a quarter (25.7%) answered not very effectively, and 7.8% said not at all effectively.



**Only 11.7% felt** that **accountability mechanisms in place in their local area were very effective** for holding the local authority to account for decision-making, and just over a third (36.7%) said 'somewhat effective,' and almost a fifth (17.2%) were not sure.



**Just under a third (32.0%)** indicated that there had been **positive improvements in their local area**, however, the same proportion (32.0%) reported that **multi-agency working had been mixed**, with some positive improvements as well as some negative impacts and deterioration.



**Only 14.1% of services felt** that there was **effective oversight of multi-agency working** in their local area, with almost half (46.9%) saying there was 'somewhat' effective oversight, and 14.1% said there was not.

# 4. Collaboration and accountability

The Government's economic stability mission sets out a commitment to principles of sound money and economic responsibility, with an aim of "putting money back in people's pockets" and fixing the NHS (HM Government, 2024). In light of this and the Government's devolution agenda,<sup>24</sup> we were keen to explore how effective domestic abuse services perceive current local accountability mechanisms to be in their area. This includes the distribution of public funding by local partnership boards, and the impact on specialist domestic abuse services, as well as barriers to effective multi-agency working.

The Freedom from violence and abuse cross-government (VAWG) strategy sets out a mission to drive systematic change in the response to domestic abuse across society, by strengthening

accountability and improving multi-agency responses. As part of this, they are exploring options to introduce a statutory duty to collaborate, to ensure agencies work together seamlessly to manage risk and prevent harm. The strategy proposes to deliver a radical transformation of the commissioning landscape, which means reforming how services are commissioned to ensure victims and survivors receive consistent, high-quality support that is fit for purpose and meets their needs (Home Office, 2025a; 2025b). Findings from the Annual Survey presented in this section highlight the need for this reform and provide valuable insight into what current accountability mechanisms are effective, and where the gaps are.

## 4.1 Local Partnership Boards

Local Partnership Boards (LPB) are a key site where collaboration takes place in local authorities. The Annual Survey found that 61.7% of services were represented by their Local Partnership Board in 2024-25. This is a slightly lower but similar figure to 2023-24, where 65.0% of respondents to the Annual Survey were part of their Local Partnership Board. Five out of the six organisations responding the survey who were members of Imkaan (83.3%) indicated that they were represented by their Local Partnership Board.<sup>25</sup>

**Table 4.1: Is your domestic abuse service represented on the Local Partnership Board?**

**Women's Aid Annual Survey 2025**

Response	Number of respondents	%
No	21	16.4%
Yes	79	61.7%
Don't know	11	8.6%
Missing data	17	13.3%
<b>TOTAL</b>	<b>128</b>	<b>100.0%</b>

<sup>24</sup> The government's devolution agenda involves transferring power and funding from central government to local areas across England. It is a system-wide reform intended to shift decision-making closer to local people and deliver services that are more tailored to regional needs. For more information see: [English Devolution White Paper](#).

<sup>25</sup> One of the respondents did not answer this question, therefore the remaining 16.7% is missing data.

### 4.1.1 Effective decision making

Just over half (54.4%) of respondents represented on their Local Partnership Board agreed with the statement, *'The Local Partnership Board in my area delivered effective decision making during 2024-25,'* and only 11.4% strongly agreed. Almost a quarter (24.1%) responded neutrally to this question, by neither agreeing nor disagreeing with it. Meanwhile 7.6% disagreed, and 2.5% strongly disagreed with the statement. Open-ended responses in the Annual Survey provided further insight into issues regarding the effectiveness of the decision making of Local Partnership Boards. These fell into three main categories: inconsistent approaches across different local authorities; lack of strategy or planning; and power imbalances. Examples of these power imbalances include where domestic abuse providers are not listened to, and meetings are instead used as an opportunity for the local authority and statutory services to uphold their own decisions.

“*Different areas work differently and therefore effectiveness is a mixed picture. Partnership Boards can be good for enabling network building and multi-agency forum (e.g. links with Adult Social Care), but tangible outcomes and systemic change are more difficult.*”

– Annual Survey, 2025

“*Local Partnership did not sit for nearly a year, awaiting new strategy, so hard to say.*”

– Annual Survey, 2025

“*Very LA heavy. Multi agency meetings are not used to resolve issues, rather they are for rubber stamping the LA/police decisions. Lack of failure to listen to specialist services to seek improvement.*”

– Annual Survey, 2025

**Table 4.2: To what extent do you agree with the following statement?**  
*'The Local Partnership Board in my area delivered effective decision making during 2024-25'*

**Women’s Aid Annual Survey 2025**

Response	Number of respondents	% represented by LPB
Strongly agree	9	11.4%
Agree	43	54.4%
Neither agree nor disagree	19	24.1%
Disagree	6	7.6%
Strongly disagree	2	2.5%
<b>Total</b>	<b>79</b>	<b>100.0%</b>

### 4.1.2 Improving conditions for survivors

Less than half (44.3%) agreed with the statement, *'The Local Partnership Board in my area improved conditions for survivors during 2024-25,'* and only 10.1% strongly agreed. Almost a third (31.6%) responded neutrally to this question, neither agreeing nor disagreeing with it. Meanwhile, 10.1% disagreed, and 2.5% strongly disagreed. Again, respondents shared in open-ended responses how different approaches are taken by Local Partnership Boards across local authorities.

A specific concern was raised regarding the Government’s previous proposal to un-restrict some of the ring-fenced funding received by councils. The Government has recently announced that the wider grant Safe Accommodation funding which sits within the Homelessness, Rough Sleeping and Safe Accommodation grant is legally ring-fenced for the first time, strengthening protections for domestic abuse funding. However, the specific allocation for the Safe Accommodation Duty is *not* ring-fenced within the grant. While councils remain legally required to provide support in safe accommodation and will continue to be advised to spend the funding on refuge provision, they can legally reallocate funding across homelessness, rough sleeping and domestic abuse within the permitted scope. There is therefore an ongoing risk that funding could be diverted away from specialist domestic abuse services.

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*“As we sit a number of local partnership groups for different boroughs we see a mixed response to their work. Some are really seeking to improve their survivor voice and are commissioning expert lived experience work whereas others are less focused.”*

– Annual Survey, 2025

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*“The partnership boards in our area (we are on 4) are positive and are keen to make improvements for survivors across the area; however, they could do more. They are also often restricted in what they can do by the funding provided to them by central government. This will only get harder as they are aware the current government are proposing to un-restrict some of the ring-fenced funding they currently receive (e.g. Safe Accommodation funding) in the upcoming budget and therefore can't be sure their own funding envelopes will stay the same.”*

– Annual Survey, 2025

Table 4.3: To what extent do you agree with the following statement? <i>'The Local Partnership Board in my area improved conditions for survivors during 2024-25'</i>		
Women’s Aid Annual Survey 2025		
Response	Number of respondents	% represented by LPB
Strongly agree	8	10.1%
Agree	35	44.3%
Neither agree nor disagree	25	31.6%
Disagree	8	10.1%
Strongly disagree	2	2.5%
Missing data	1	1.3%
<b>Total</b>	<b>79</b>	<b>100.0%</b>

### 4.1.3 Improving commissioning of specialist services

Less than a third (31.6%) of respondents agreed with the statement, *'The Local Partnership Board in my area improved commissioning of specialist domestic abuse services during 2024-25,'* and only 10.1% strongly agreed. In comparison to the previous two statements, respondents

were more likely to give a negative response to these questions, with 12.7% disagreeing, and 10.1% strongly disagreeing with this statement. However, over a third (35.4%) responded neutrally to this question, by neither agreeing nor disagreeing with it.

**Table 4.4: To what extent do you agree with the following statement? *'The Local Partnership Board in my area improved commissioning of specialist domestic abuse services during 2024-25'***

Women's Aid Annual Survey 2025

Response	Number of respondents	% represented by LPB
Strongly agree	8	10.1%
Agree	25	31.6%
Neither agree nor disagree	28	35.4%
Disagree	10	12.7%
Strongly disagree	8	10.1%
<b>Total</b>	<b>79</b>	<b>100.0%</b>

## 4.2 Accountability of local authorities

Although there is evidence that good practice exists (see section 4.2.1 below), there isn't widespread confidence across respondents regarding their ability to hold their local authority accountable for decisions. Only 5.5% of respondents felt they were able to hold their local authority to account for decision making 'very effectively,' and less than a third (29.7%) said they felt able to do this 'somewhat effectively.' Almost a quarter (25.8%) answered 'not very effectively' to this question, and 7.8% 'not at all effectively,' and 14.1% said they were not sure.

**Table 4.5: How effectively do you feel able to hold your local authority to account for decision making?**

Women's Aid Annual Survey 2025

Response	Number of respondents	%
Very effectively	7	5.5%
Somewhat effectively	38	29.7%
Not very effectively	33	25.8%
Not at all effectively	10	7.8%
Not sure	22	17.2%
Missing data	18	14.1%
<b>TOTAL</b>	<b>128</b>	<b>100.0%</b>

## 4.2.1 Accountability mechanisms of local authorities

We asked respondents in the Annual Survey what accountability mechanisms were in place in their local area to ensure the effective delivery of domestic abuse services. Most respondents were able to provide details of where they could provide feedback issues or concerns in their area. Examples of these mechanisms included Local Partnership Boards, and other multi-agency forums such as MARAC, along with commissioning reviews/regular reporting, and domestic homicide reviews.

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*“Domestic abuse local partnership, supporting vulnerable people partnership boards, local contract management and reporting.”*

**- Annual Survey, 2025**

“

*“Safeguarding Partnerships (Adults and Children) provide scrutiny of practice and ensure domestic abuse responses are embedded in wider safeguarding frameworks. Domestic Homicide Reviews (DHRs) and Safeguarding Adults Reviews (SARs) recommendations and action plans from reviews are now being monitored more closely to ensure agencies and the local authority follow through on commitments.”*

**- Annual Survey, 2025**

A small number of specific responses expressed positive improvements in their local area around the accountability of local authorities. One response cited the implementation of the Domestic Abuse Act 2021 as bringing about these accountability mechanisms.

“

*“I believe that previously [domestic abuse service] were of the opinion that because we are commissioned by the LA, we are accountable to them and not vice versa. I have the support of a Board Member to take a firm stand in this space, and push back when demands exceed funding limitations, which would not happen in the past.”*

**- Annual Survey, 2025**

“

*“In the local area, accountability mechanisms include oversight by the Domestic Abuse Commissioner, which holds statutory bodies and government accountable for service delivery and response improvements under the Domestic Abuse Act 2021. Local authorities have statutory duties to provide safe accommodation and specialist support, with regular inspections, performance reviews, and multi-agency coordination forums such as MARAC ensuring effective service delivery and risk management.”*

**- Annual Survey, 2025**

Nonetheless, there were reservations regarding the effectiveness of these accountability mechanisms. When asked how effective respondents thought these mechanisms were for meeting the needs of survivors, only 11.7% of respondents answered, ‘very effective,’ and just over a third (36.7%) thought they were ‘somewhat effective.’ Meanwhile, 5.5% of respondents thought these were ‘not at all effective,’ 10.2% answered ‘not very effective,’ and almost a quarter (21.9%) said they were not sure. Open-ended responses revealed issues around consistency; lack of accountability for statutory agencies; lack of transparency around funding decisions; high expectations placed on commissioned domestic abuse services that are not grounded in the reality of how much financial assistance they receive; elected officials being detached from the work of these providers; and failing to properly include the experiences of survivors in consultation.

**Table 4.6: How effective do you think these mechanisms are for meeting the needs of survivors?  
Women’s Aid Annual Survey 2025**

Response	Number of respondents	%
Very effective	15	11.7%
Somewhat effective	47	36.7%
Not very effective	13	10.2%
Not at all effective	7	5.5%
Not sure	28	21.9%
Missing data	18	14.1%
<b>TOTAL</b>	<b>128</b>	<b>100.0%</b>

“Accountability mechanisms in our area are limited and often fragmented. While commissioning bodies require monitoring reports and MARAC oversight provides some scrutiny, there is no consistent, independent mechanism to ensure services are survivor-focused or that statutory agencies deliver on their responsibilities. Feedback from survivors and specialist providers is not always meaningfully included in evaluation, which risks gaps in accountability and quality.”

- Annual Survey, 2025

“There should be more consultation with survivors to address their needs e.g. use of Lived Experience groups. This change is happening but too slowly. More accountability should be given to councils to hear directly from survivors themselves regarding the support and help they need.”

- Annual Survey, 2025

“[...] Early this year a VAWG, DVA, SVA Strategy launched with connected local partnership in [local authority]. This Strategy is the first in the area since 2017 – it is not hugely inspiring and does not show a commitment to support for the women-led specialist sector. There is a lack of transparency around funds for DVA, SVA and current delivery and data – It feels we have gone back 10 years from being a groundbreaking authority.”

- Annual Survey, 2025

“There is an over reliance on local domestic abuse charities labelled as ‘commissioned providers’ when around only a third of funding is commissioned. Elected officials do not attend VAWG events or sit on committees yet have oversight of decisions. It is concerning they are too detached from frontline services.”

- Annual Survey, 2025

## 4.3 Multi-agency working

The Government's VAWG strategy outlines a plan to develop a coordinated approach to domestic abuse by improving collaboration among frontline professionals. To do this, they propose developing new guidance on best practice for effective multi-agency working, with a clear focus on multi-agency approach to domestic abuse and risk. The Annual Survey set out to explore services' experiences of multi-agency working in their local area, including examples of good practice, as well as barriers to effective multi-agency working. These insights provide key learnings from the specialist domestic abuse sector on how this guidance can ensure professionals better meet the needs of survivors.

As detailed in **Table 4.7** below, we asked respondents to select the statement that most closely aligned with their views regarding changes in multi-agency working in their area over the past year. Just under a third (32.0%) indicated that there had been mostly improvements in multi-agency working in their local area over the past year. However, the same proportion (32.0%) selected the statement that multi-agency working had been mixed in their local area over the past year. Just under a fifth (15.6%) expressed that they had experienced no changes, either positive or negative, 3.9% reported a negative impact/deterioration, and 3.1% said they didn't know.

**Table 4.7: Which of the following statements do you feel aligns most closely with your views?  
Women's Aid Annual Survey 2025**

Response	Number of respondents	%
<i>'There have been mostly positive improvements in multi-agency working in my local area during 2024-25'</i>	41	32.0%
<i>'Multi-agency working has been mixed in my local area during 2024-25, with some positive improvements as well as some negative impact/deterioration'</i>	41	32.0%
<i>'There have been no changes, either positive or negative, in terms of multi-agency working in my local area during 2024-25'</i>	20	15.6%
<i>'There has been mostly a negative impact/deterioration in multi-agency working in my local area during 2024-25'</i>	5	3.9%
I don't know	4	3.1%
Missing data	17	13.3%
<b>TOTAL</b>	<b>128</b>	<b>100.0%</b>

### 4.3.1 Good examples of multi-agency working

The Government’s VAWG strategy action plan outlines an intention to embed a coordinated approach through improving collaboration between frontline professionals, ensuring they properly understand and respond to risk. Within this proposal is the commitment to develop new guidance on best practice for effective multi-agency working, with a clear focus on the multi-agency approach to domestic abuse. This guidance will set out key principles and ‘what good looks like’ in responding to domestic abuse (Home Office, 2025).

We asked respondents in the Annual Survey to share good examples of multi-agency working in their local area. Some responses noted improvements in statutory responses to survivors, who were working in a way which demonstrated increased domestic abuse awareness. Many of these responses explicitly discussed how improvements in relationships between specialist domestic abuse services and agencies had directly improved collaborative working and resulted in better outcomes for survivors.

“

*“In [local authority removed], the Police have implemented changes to how domestic abuse is responded too. Neighbourhood police teams now respond to domestic abuse incidents & we have noticed a change in the way some cases are dealt with. We have more calls from women who have been told to contact us for (for legal remedies) instead of the police using their powers to deal with some instances [...].”*

- Annual Survey, 2025

“

*“DRAMM/MARAC has been redeveloped and reviewed well; improvements have been made to support all [local authority removed] agencies. More reflective group practice opportunities for front line staff. Professionals are becoming more confident in challenging situations and other agencies to prevent risk of harm and to safeguard. [local authority removed] DAPB is crucial including the working groups linked to the [local authority removed] strategy and 5 key priorities.”*

- Annual Survey, 2025

“

*“We feel our multi-agency partnerships are growing stronger and this is largely due to interpersonal relationships with service providers making sure their client have seamless care despite the financial crisis in funding shortfalls from government and independent funders pausing or closing funding all together.”*

- Annual Survey, 2025

“

*“Overall, multi-agency working in our area has strengthened, particularly through MARAC and MATAAC and joint safeguarding processes. There is a greater recognition of the value of specialist domestic abuse input, and improved collaboration has helped ensure safer, more coordinated responses for survivors [...].”*

- Annual Survey, 2025.

These quotes demonstrate the key role that specialist domestic abuse services play in enabling agencies to better respond to domestic abuse. In the Annual Survey 2025, we asked services what unique value they felt their service had contributed to both the local and national response to domestic abuse over the past year.

A high proportion of services discussed how they had shared their knowledge and expertise with a range of agencies, including statutory services. This included delivering training, working in partnership, and amplifying the voices and experiences of survivors to these organisations. These responses suggest that these approaches often led directly to improved outcomes for survivors.

“ \_\_\_\_\_

*“We have delivered free multiple DA awareness and training sessions to local services, statutory agencies and non-statutory.”*

- Annual Survey, 2025

“ \_\_\_\_\_

*“[...] We work in close partnership with domestic abuse services, police, housing providers, and local authorities, embedding our support into the wider safeguarding response. This integrated approach has both a local and national impact, helping to remove a key barrier for many victim-survivors. [...]”*

- Annual Survey, 2025

“ \_\_\_\_\_

*“[...] [Organisation name] have represented ‘by and for’ women in attending local Domestic Abuse/VAWG partnership strategy meetings, sharing the captured voice of BME women and children on their experience of services accessed and barriers faced.”*

- Annual Survey, 2025

When cross-referenced with the findings above, these responses suggest that the unique value specialist domestic abuse services have contributed locally and nationally have had a directly positive impact on multi-agency working.

### 4.3.2 Barriers to effective multi-agency working

When we asked about the barriers to effective multi-agency working, responses fell into five main categories: inconsistent responses; resource constraints and silo working; power imbalance and lack of recognition of specialist domestic abuse services; limited domestic abuse knowledge of statutory agencies; conflicting priorities.

#### ► Inconsistent agency responses

Whilst some respondents pointed out differences between local authorities, others discussed how responses sometimes depended on specific staff members in statutory organisations.

“ \_\_\_\_\_

*“[...] consistency remains a challenge. Positive practice often depends on individual professionals rather than being embedded system-wide. Sustained investment in joint training, stronger accountability, and continued emphasis on survivor-centred approaches will be key to building on the progress already made.”*

- Annual Survey, 2025

“ \_\_\_\_\_

*“Postcode lottery responses”*

- Annual Survey, 2025

“ \_\_\_\_\_

*“The police need to do more. Social services, this depends on who you get. Some are great, some not so great.”*

- Annual Survey, 2025

“ \_\_\_\_\_

*“We work across three areas so it’s a mixed response. I think there is willing but high turnover of staff in the LA/OPCC makes it difficult to progress anything.”*

- Annual Survey, 2025

► Resource constraints and silo working

Respondents raised communication issues, lack of funding, and resource issues across different agencies negatively impacting multi-agency working.

“Communication - between professionals. timely communication - often if [there] is a response, it may be a delay before receiving it.”  
 - Annual Survey, 2025

“Funding in all areas has to be the number one barrier that impacts on time and commitment that can often result in lack of communication between services, minimal information sharing that can lead to repeat referrals to external agencies or funding for service users.”  
 - Annual Survey, 2025

“Currently there is no adult social care and children’s social care representation at MARAC which I find dangerous and sad that it’s not prioritised, lack of police response to complaints that leaves women feeling unheard, unbelievably and retract as its too overwhelming.”  
 - Annual Survey, 2025

► Power imbalance and lack of recognition of specialist domestic abuse services

A notable number of responses discussed how power imbalance, along with a lack of recognition about their services, were barriers to effective multi-agency working. These factors contributed to statutory organisations failing to effectively collaborate with service providers, respond to their communications consistently, and listen to services’ expertise.

“Main barriers in our area is lack of clarity and awareness of what DA agencies can do.”  
 - Annual Survey, 2025

“[...] Failure to Collaborate with Specialist Services. Despite [organisation name] proven expertise, some authorities resist partnership or fail to refer survivors to culturally specific support—missing vital opportunities for safety and healing.”  
 - Annual Survey, 2025

“Statutory agencies do not always respond to our communication. They are reactionary and often are only collaborative when something goes wrong or they need a service. There is a high responsibility put on the IDVA/outreach services without taking responsibility and accountability.”  
 - Annual Survey, 2025

“Very LA heavy. Multi agency meetings are not used to resolve issues, rather they are for rubber stamping the LA/police decisions. Lack of failure to listen to specialist services to seek improvement.”  
 - Annual Survey, 2025

### ► Limited domestic abuse knowledge of statutory agencies

Some responses pointed to this resulting in inadequate responses to survivors. This linked back to the previous theme, with some responses discussing how the value of specialist domestic abuse services was not recognised, along with misunderstandings regarding statutory duties and domestic abuse legislation.

“Inconsistent Safeguarding Responses - Local authorities fail to recognize coercive control, emotional abuse, or cultural dynamics, resulting in inadequate protection plans or delayed interventions.”

– Annual Survey, 2025

“Staff not understanding the impact of DA, blaming the victim. Social services taking children away from their mothers with no continued support for the mother. Staff not appreciating the professionalism of an IDVA and their concerns. Not many agencies understand the dynamics of post separation - clients end up feeling helpless. Police not doing enough DAPOs and taking too long with the cases, so the CPS decides not to prosecute.”

– Annual Survey, 2025

“Some statutory services do not recognise the difference between their statutory duties and the work of local charities. People are told they must work with the charities as part of support plans, and this can be damaging to forming a relationship with a client.”

– Annual Survey, 2025

“Feels like we case manage other agencies to safeguard the risks posed to women we work with.”

– Annual Survey, 2025

### ► Conflicting values and priorities between different organisations and agencies

This point was raised by several respondents as a barrier to multi-agency working. Most of these comments discussed different approaches between statutory agencies and specialist domestic abuse services.

“Conflicting priorities and values: Specialist domestic abuse services often operate from a trauma-informed, survivor-led perspective, while statutory agencies may focus on risk management and legal thresholds.”

– Annual Survey, 2025

“Social services remit in [local authority removed] is holistic family focus which can and often clashes with IDVA work to ensure client and child safety. [...]”

– Annual Survey, 2025

“We work from a risk based approach and they work from a strength based approach. This leads to risks not being identified and over looked by other agencies.”

– Annual Survey, 2025

### 4.3.3 Oversight of multi-agency working

As demonstrated in **Table 4.8**, when asked if services felt that there was effective oversight of multi-agency working in their local area, only 14.1% answered 'Yes.' Almost half (46.9%) of respondents felt that there was only 'somewhat' effective oversight of multi-agency working, and 14.1% answered 'no,' and a further 11.7% selected 'Not sure.' Open-ended responses again

highlighted issues of power imbalance between statutory agencies and specialist domestic abuse organisations, where agencies continue to fail to recognise the expertise of the sector. As a result, survivors' safety can depend too heavily on individual professionals, as opposed to robust systems where specialist domestic abuse services consistently feed into decision making.

**Table 4.8: Do you feel there is effective oversight of multi-agency working in your local area?**  
**Women's Aid Annual Survey 2025**

Response	Number of respondents	%
Yes	18	14.1%
Somewhat	60	46.9%
No	18	14.1%
Not sure	15	11.7%
Missing data	17	13.3%
<b>TOTAL</b>	<b>128</b>	<b>100.0%</b>

“A lot of people attend a lot of meetings - What I am not always certain of is, what changes and what actions really are followed through. We still experience a perspective of not being seen as relevant as statutory agencies at times also.”  
 - Annual Survey, 2025

“While there are good examples of collaboration, multi-agency working in our area is still inconsistent. Survivors' safety can depend too heavily on individual practitioners rather than robust systems. Oversight of MARAC could be stronger, with clearer accountability and more consistent follow-up on actions agreed. It is also vital that specialist domestic abuse organisations are recognised as equal partners, with their expertise informing decisions rather than being treated as optional.”  
 - Annual Survey, 2025

# 5. EMERGING TRENDS AND ISSUES



**Almost a third** (32.2%) of services reported that they had a **written AI policy** or were in the process of developing one.



Services reported **using AI-based tools primarily for:**

- ▶ Secretarial tasks (20.0%)
- ▶ Communications (17.1%)
- ▶ Funding/benefit applications (15.7%)
- ▶ Research and reporting (15.7%)



**The majority of services** (64.9%) either agreed (47.7%) or strongly agreed (17.2%) that they **were able to sufficiently safety plan around technology-facilitated abuse.**

However, they are restricted by how these technical devices operate.



The **most common forms of technology-facilitated abuse** disclosed to services were:

- ▶ Online stalking (78.1%)
- ▶ Compromising social media profiles (68.0%)
- ▶ Misuse of GPS trackers (68.0%)
- ▶ Non-consensual intimate image sharing (or threats of sharing) (66.4%)



The most common form of technology-facilitated abuse identified as **new to services' experience** in the past year was **coerced participation in OnlyFans or other online activity.**



Services reported the following **impacts of the far-right riots** in Summer 2024:

- ▶ Increased demand on services
- ▶ Increased discrimination and direct racist abuse experienced by survivors
- ▶ Two services reported having to close offices or cancel face-to-face provision during this period
- ▶ Services expressed concern about longer-term impacts on survivors' willingness to seek help



Services reported **increased need to support women affected by humanitarian crises, particularly migrant survivors,** alongside a greater emotional and practical

burden on frontline staff responding to trauma outside their usual remit.

# 5. Emerging trends and issues

To understand how, in the context of political instability and a rapidly evolving digital world, survivors and the services that support them may be impacted, we asked Annual Survey respondents to share their experiences. We set out to explore whether there have been changes in the perpetration of coercive control, particularly through the use of digital technology. We also sought to understand what services perceived as risks and opportunities in the use of artificial intelligence in service delivery.

Women's Aid member services expressed their concerns about the rise of far-right ideology and subsequent riots, largely coupled with anti-migrant sentiment and often presented under the guise of protecting women and girls. Services also expressed concerns around how international conflict and humanitarian crises affect women accessing support services in the UK.

## 5.1 The use of Artificial Intelligence (AI) based tools

The role of Artificial Intelligence (AI) technology in impacting survivors' lives is still ambiguous since the ways in which survivors come into contact with AI is varied. Women's Aid sought to explore how services are using AI and what they do to mitigate risk and consider opportunities for service delivery. In April 2025, Women's Aid administrated an All-Party Parliamentary Group (APPG) event on the role of AI in supporting survivors of domestic abuse to explore the potential uses of AI in the context of domestic abuse service delivery<sup>26</sup>.

We have seen some innovative use of AI based tools amongst Annual Survey respondents, with 32.2% having written an AI policy or being in the process of developing one, compared with 53.1% not having an AI policy or being in the process of developing one.

While we have not measured this previously, and therefore lack comparable data, there is some information about services' awareness of AI based tools with some keen uptake in exploring its potential, which **Tables 5.1** and **5.2** detail further.

Respondents have considered how AI can be used safely, particularly relating to confidentiality. One service said:

“Our policy makes it clear that AI should be used ethically ensuring info is anonymous and that it is a draft. It is the staff member's responsibility to critically review the draft and make amendments as necessary.”

**Annual Survey, 2025**

<sup>26</sup> Women's Aid Federation of England (2025) *Minutes of the APPG on Domestic Violence and Abuse Meeting: Should AI have a role in supporting survivors of domestic abuse and violence against women and girls?* 29 April. (Accessed: 5 January 2026).

Some services noted that funders are also considering their position on the use of AI in funding applications, with varied decisions being made:

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 \_\_\_\_\_  
 “Some funders will now accept AI assisted application forms”  
 \_\_\_\_\_  
 - Annual Survey, 2025

“  
 \_\_\_\_\_  
 “Some grant funders will not consider an application if it is written by AI”  
 \_\_\_\_\_  
 - Annual Survey, 2025

Conflicting funder expectations and an uneven adoption of AI might push organisations into a guessing game. Without clear assurance and guidance about the use of AI, some services might face a disadvantage compared to others, feeling penalised for using or not using AI in funding applications. One response suggested there could be an overselling of AI, giving mixed signals about whether AI can resolve capacity issues.

“  
 \_\_\_\_\_  
 “We lost a contract to another DA service whose bid stated that their IDVAs could work with a caseload of 75 plus owing to AI support”  
 \_\_\_\_\_  
 - Annual Survey, 2025

**Table 5.1: Are you aware of whether your organisation has a written policy in place regarding the use of AI based tools?**

**Women’s Aid Annual Survey 2025**

Response*	Number of respondents	%
Indicates having a written AI policy	22	17.1%
Indicates being in the process of developing an AI policy	18	14.1%
Indicates not having an AI policy or being in the process of developing one	68	53.1%
Answer unclear	2	1.6%
Missing data	18	14.1%
<b>TOTAL</b>	<b>128</b>	<b>100.0%</b>

\* Note that this question required an open-ended response and therefore answers have been coded into categories the response aligned with.

A notable number of respondents to the Annual Survey indicated that they have been using AI based tools over the past year and will continue to do so (15.6%) however, the majority of respondents (38.3%) responded that staff members (including themselves) were using them in their work, but not the organisation specifically. Just over a quarter (27.3%) of respondents said they were not aware of the organisation or staff members using AI based tools in their work over the past year. At least one service attempted to use AI based tools and another was but no longer does.

The complexity of AI and relying solely on this to interpret and respond to domestic abuse-related content, as raised by Women's Aid at the APPG for Domestic Violence and Abuse in April 2025, was echoed in Annual Survey responses. Annual Survey respondents frequently shared concerns of not knowing enough about AI to

effectively respond. Nonetheless, AI is being used by over half of Annual Survey respondents, and it is serving a purpose as an efficient, time-saving tool which allows services to shift their focus to strengthening their positions in funding applications and processes. When asked how their organisation uses AI based tools, the majority of respondents said their use was 'secretarial' (20.0%), followed by 'communications' (17.1%), 'funding/benefit applications' (15.7%) and 'research and reporting' (15.7%). Respondents told us about the varied purposes AI served:

“

*Staff use AI to support the writing of external focused communications such as press releases, website content and social media posts.”*

– Annual Survey, 2025

**Table 5.2: Are you aware of whether your organisation has been using AI based tools in 2024-25?  
Women's Aid Annual Survey 2025**

Response	Number of respondents	%
Yes, my organisation has been using AI based tools over the past financial year and continues to do so	20	15.6%
My organisation does not specifically use AI based tools, but I am aware of staff members using them in their work (this can include yourself) over the past financial year	49	38.3%
I am not aware of my organisation or staff members using AI based tools in their work over the past financial year	35	27.3%
My organisation was using AI based tools over the past financial year but no longer does	1	0.8%
My organisation attempted to implement AI based tools over the past financial year but decided not to do so	1	0.8%
Don't know	4	3.1%
Missing data	18	14.1%
<b>TOTAL</b>	<b>128</b>	<b>100.0%</b>

“We’ve also used AI to assist with funding and grant applications, helping us structure responses, summarise impact, and tailor language to funder priorities. This has improved the efficiency of our bid-writing process.”

- Annual Survey, 2025

“Some staff members use it to write emails, when the conversation is difficult.”

- Annual Survey, 2025

“We do not cut and paste directly rather [...] We use AI to inform only.”

- Annual Survey, 2025

“Ensuring written communication to clients is as trauma informed as it could be.”

- Annual Survey, 2025

There is still reluctance from many services in relation to safeguarding and risk assessment however services are intrigued about other ways AI, if deemed appropriate and safe to use, can continue to contribute to more efficient ways of working.

Women’s Aid are considering both the potential benefits and possible unintended consequences of AI, in particular how AI tools and products may come into contact with vulnerable groups including survivors of domestic abuse, and implications for data privacy and security.

**Table 5.3: Please tell us more about how your organisation has been using AI based tools over the past financial year.**

**Women’s Aid Annual Survey 2025**

Response	Number of respondents	%
Service delivery e.g. AI Chatbots to provide support to survivors (including generative, rule-based, and hybrid models)	1	1.4%
Case management e.g. writing case notes	1	1.4%
Communications e.g. writing blogs or social media posts	12	17.1%
Secretarial e.g. summarising meetings, minute taking	14	20.0%
Funding/ benefit applications e.g. funding/ grant applications, benefit applications	11	15.7%
Research and reporting e.g. data analysis, reports to funders	11	15.7%
Assistance with recruitment e.g. screening for candidates	1	1.4%
Other	6	8.6%

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

## 5.2 Technology-facilitated abuse

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The Annual Survey gives us vital insight into the perpetration of technology-facilitated abuse. Women's Aid asked respondents to the Annual Survey how confident they felt being able to sufficiently safety plan around technology-facilitated abuse. The majority of respondents (64.9%) either agreed or strongly agreed with the statement that they felt confident.

Services identify that the specifics of this type of abuse can change rapidly with new technology and the implications of this for practice. Many services identified the need for continuous training, and challenges in their practice, particularly their ability to safety plan. Technology-facilitated abuse as a way to perpetrate coercive control adds to the complexity of risk management. Services recognised this, adding disclaimers to their response by telling us they were not '100%' or 'fully' confident.

“*I don't think I will ever feel we are fully able to safety plan, because the technology changes so quickly and perpetrators are always one step ahead.*”

– Annual Survey, 2025

“*It is very difficult to be 100% confident that we have helped a woman to be free of all tracking. The technology changes very quickly. We would like access to a digital stalking expert/service*”

– Annual Survey, 2025

“*We are not IT experts so do not feel we know enough & do not know any designated service who can help.*”

– Annual Survey, 2025

“*While I would 'strongly agree' in regard to what is currently happening I am conscious that tech abuse moves so fast we are always having to keep up so think it would be inappropriate to say more than 'agree' to this.*”

– Annual Survey, 2025

Some services identified the need to create a dedicated role within their organisations or to seek such assistance externally:

“*In 24-25, the [tech abuse team] at [domestic abuse service] saw almost a third increase in number of referrals to the team to support survivors with complex cases of tech-facilitated abuse and economic abuse compared to the previous financial year.*”

– Annual Survey, 2025

“*Making plans to identify a tech specialist to provide clinics in our services.*”

– Annual Survey, 2025

Personal technology and social media are just as important to safety plan around as considering a survivor's physical proximity to her danger zone(s). Respondents noted heightened concerns when attempting to manage survivors' safety after fleeing and while staying in refuge. This suggests that services' ability to support survivors around these issues is restricted by how technical devices operate, and that device manufacturers have a responsibility to consider safety allowances in their design and operation.

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**Table 5.4: To what extent do you agree with the following statement?*****'I feel confident that my organisation is able to sufficiently safety plan around technology-facilitated abuse'*****Women's Aid Annual Survey 2025**

Response	Number of respondents	%
Strongly agree	22	17.2%
Agree	61	47.7%
Neither agree nor disagree	21	16.4%
Disagree	5	3.9%
Strongly disagree	1	0.8%
Missing data	18	14.1%
<b>Total</b>	<b>128</b>	<b>100.0%</b>

“

*"It is so hard to actually prevent this form of abuse, even if a woman has fled and come into refuge. For some women, a barrier to their safety can sometimes be their inability to believe that their perpetrator could be using some kind of tech abuse. We can offer advice, but we cannot solve all tech abuse problems. For example, one woman has got a tracker somewhere on her car but the Police do not have the technology to be able to locate it. The specialists at [car manufacturer] cannot locate it either and have said it is like looking for a needle in a haystack."*

- Annual Survey, 2025

“

*"We have multiple accounts of survivors are being tracked and found after fleeing through digital methods, that they are unable to identify, making safety planning difficult."*

- Annual Survey, 2025

“

*"Even everyday rewards apps can now pose a risk of disclosing a location."*

- Annual Survey, 2025

We also asked Annual Survey respondents specifically what forms of tech-facilitated abuse were disclosed to them over the last year. The most common form was 'online stalking' which 78.1% (n=100) of respondents selected, followed by 'compromising social media profiles' (68.0%, n=87), 'misuse of GPS trackers' (68.0%, n = 87) and 'non-consensual intimate image sharing (or threat of)' (66.4%, n = 87). Each of these show the various ways abusers attempt and succeed at keeping survivors under surveillance. Respondents could tick more than one option, therefore such forms could have been taking place concurrently. We know from our work that women will experience multiple forms of abuse, and often coercive control extends beyond the physical element of control, to the digital world.

**Table 5.5: Over the last year which of these forms of tech-facilitated abuse have been disclosed to your service?****Women's Aid Annual Survey 2025**

Response	Number of respondents	%
Coerced participation in Only Fans	20	15.6%
Coerced participation in other online activity	36	28.1%
Compromising/ destroying devices	77	60.2%
Compromising social media profiles	87	68.0%
Deep fake imagery	28	21.9%
Misuse of GPS trackers	87	68.0%
Non-consensual intimate image sharing (or threat of)	85	66.4%
Online stalking	100	78.1%
Other	18	14.1%
Missing data	18	14.1%

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

“

*“There is a normalisation of location tracking/location apps within families and relationships.”*

– Annual Survey, 2025

“

*“For our service, this has increased the complexity of risk management, created a need for specialist digital-safety training, and placed extra demands on resources as survivors often need new devices or safer ways to communicate.”*

– Annual Survey, 2025

“

*“Snapchat especially for young people. Ability of snapchat photos to disappear quickly – lack of evidence.”*

– Annual Survey, 2025

“

*“[Associated perpetrator of abuse] using the removal of technology as coercive control/ isolation.”*

– Annual Survey, 2025

In a multiple-choice question seeking information about specific disclosures relating to ‘OnlyFans’, 15.6% (n=20) respondents told us that women accessing their service disclosed being coerced into participating in ‘OnlyFans’; 28.1% (n=36) respondents also told us women disclosed being coerced into participated in other online activity. It is not uncommon for abusers to exploit their partners, and since it is difficult to establish consent online, it is unsurprising that some respondents shared this is an ongoing issue, and others shared it as new to their experience.

## 5.2.1 New forms of tech-facilitated abuse

When we asked services in the Annual Survey which forms of tech-facilitated abuse were disclosed to them over the last year, almost three quarters (71.1%) told us that the forms they selected were not new to their experience. While an overwhelming majority of services told us those forms of tech-facilitated abuse were not new to their experience, just under 10% of services found that at least some of those were.

**Table 5.6: Are any of these forms of tech-facilitated abuse new to your experience?**

Women's Aid Annual Survey 2025

Response	Number of respondents	%
Yes	11	8.6%
No	91	71.1%
Don't know	8	6.3%
Missing data	18	14.1%
<b>Total</b>	<b>128</b>	<b>100.0%</b>

The most common form of tech-facilitated abuse new to their experience was 'OnlyFans'. OnlyFans is an online content subscription service, where payment can be received in exchange for exclusive content. Nudity is permitted on OnlyFans, so the content posted by content creators is typically intimate. According to Ofcom, the regulator for communication services, OnlyFans is the largest of UK-based sites that host adult content<sup>27</sup>. It has also become a space of online sexual

exploitation<sup>28</sup>. In March 2025, Polly Billington MP for East Thanet raised concerns in parliament about young women being coerced into setting up an OnlyFans account to generate income for their abusive partners, submitting evidence supported by domestic abuse charity Oasis<sup>29</sup>.

There was specific mention of smart home devices such as digital doorbells, with services noting the benefits to survivors of being able to fulfil their safety needs by being aware of who is at their door and retaining evidence of this but also the same device being a dangerous platform where abusers can remotely monitor and stalk their victims.

---

*"We have accounts of perpetrators hacking into someone's ring doorbell to delete footage and spy on the victim. Although the use of ring door bells have been invaluable for the safety of our survivors, in addition to gathering vital evidence, perpetrators are now using this technology to monitor victims, or to destroy vital evidence that would support prosecutions."*

– Annual Survey, 2025

---

*"The increased use of ring doorbells appears to be creating the perfect storm for healthy relationships to fall into the spiral of coercive control with more and more people making contact around this."*

– Annual Survey, 2025

<sup>27</sup> Ofcom (2024) [Ofcom investigates OnlyFans' age verification measures](#). (Accessed: 5 January 2026).

<sup>28</sup> UK Parliament (2025) [House of Commons Debate, Violence against Women and Girls: Pornography Prostitution](#), vol. 772, col. Debated on 2 September 2025. (Accessed: 5 January 2026).

<sup>29</sup> UK Parliament (2025) [House of Commons Debate: Oral Answers to Questions](#), vol. 764, debated on 26 March 2025. (Accessed: 5 January 2026).

Other online spaces, such as social media platforms, appear to be simultaneously supporting survivors while also enabling abusers. On the same platform, women are reaching out to other women to find out if the person they are dating may be dangerous, but this platform is also equipping men with the space to share pictures of women with much worse intentions and potential for harm.

“

*“The rise of social media groups sharing pictures and sometimes contact details of women, encouraging other men to harass and verbally abuse them. This has come as a ‘retaliation’ to Facebook groups such as ‘are we dating the same guy’ which women have been using for safety in dating.”*

– Annual Survey, 2025

## 5.3 Politics and international conflict

### 5.3.1 Impact of Far-right riots

On 29th July 2024, a 17-year-old teenage boy, born in Wales and a UK citizen, deliberately murdered three girls in Southport.<sup>30</sup> Due to the perpetrator’s age at the time of the offence, little information was released about him in the media.<sup>31</sup> Very quickly, false information about the identity of the attacker circulated online, including an incorrect name and the claim that he was an immigrant who had recently arrived in the UK.<sup>32</sup> Following this, between the 30th of July and the 7th of August, an estimated 29 anti-immigration demonstrations and riots took place across 27 towns and cities in the UK. Many of these demonstrations involved violence, with participants targeting mosques and hotels housing asylum seekers (House of Commons Library, 2024).

During this period, Women’s Aid held two member meetings – one for all member services, and another for led ‘by and for’ Black and minoritised

specialist services only.<sup>33</sup> Based on this response, we have explored this issue with a larger sample size by asking respondents to the Annual Survey about the impact of this on services and the survivors they support, including any immediate impact as well as longer term impact and on-going concerns.

Whilst most respondents said they had not experienced a direct impact, it is important to note that many further anti-immigration protests took place during the summer and early autumn 2025,<sup>34</sup> with one of the largest occurring just days after the survey deadline.<sup>35</sup> Nonetheless a notable number of responses provided extremely valuable insight into how the 2024 summer riots had impacted their services, the survivors they support, and any ongoing concerns.

<sup>30</sup> [R – v - Axel Rudakubana](#) [2025] Criminal Crown Court (Sentencing remark, 27 January 2025).

<sup>31</sup> Under section 49 of the Youth Justice and Criminal Evidence Act 1999 there are automatic reporting restrictions for any child concerned in proceedings in a court.

<sup>32</sup> For example, see: [Written evidence submitted by Marc Owen Jones](#) (PhD) (SMH0071).

<sup>33</sup> [Written evidence from Women’s Aid Federation of England](#) (Women’s Aid) [CCI0016]. [Accessed January 2026].

<sup>34</sup> For example, see: Symonds, T. (2025) [‘Asylum protests putting police under chronic pressure, chief says,’](#) BBC News, 3rd September.

<sup>35</sup> On the 13th of September more than 110,000 participated in a rally in London: Vinter, R., Gecsoyler, S., Pidd, H. and Ahmed, A. (2025) [‘Far-right London rally sees record crowds and violent clashes with police,’](#) The Guardian, 14th September.

► Increased demand on services:

including increased referrals for women from Black and minoritised backgrounds, including out of area referrals and those in need of urgent help. Two specific responses also noted an increase in so-called “Honour” Based Abuse (HBA) referrals.

“  
\_\_\_\_\_”  
*“We have seen raise in HBA victims and have specialist IDVA in place.”*  
- Annual Survey, 2025

“  
\_\_\_\_\_”  
*“We have identified a sustained increase in women & girls from [Black, Asian, Minority Ethnic, and Refugee] communities presenting at our door in need of immediate help. We do not have an open-door policy however we respond to need.”*  
- Annual Survey, 2025

“  
\_\_\_\_\_”  
*“Risk escalation a concern/HBV.”*  
- Annual Survey, 2025

“  
\_\_\_\_\_”  
*“We have recognised an increase in out of area referrals for Muslim women. [...]”*  
- Annual Survey, 2025

Respondents also noted increased demand on services’ resources and capacity. This included providing more emotional support and safety planning to survivors during this period, as well providing additional support, such as transportation to survivors.

“  
\_\_\_\_\_”  
*“[...] We had several DA perpetrators remanded for their part in the riots. The impact on our Muslim colleagues and clients was felt immediately, and we changed our support model to colleagues spending more time working from the office and clients being collected and taken to appointments rather than use public transport.”*  
- Annual Survey, 2025

“  
\_\_\_\_\_”  
*“Community service users were offered increased emotional support and safety planning around safety both inside and outside of the home.”*  
- Annual Survey, 2025

“  
\_\_\_\_\_”  
*“[...] During those days women staying at the refuges were afraid of leaving the house and we had to put in place safety plans for them.”*  
- Annual Survey, 2025

► **Increased experiences of discrimination:**

including direct racist abuse experienced by survivors they were supporting in their services. Whilst most responses discussed this as an issue in the community, two responses noted increased discriminatory behaviour from professionals from external agencies. Services described how this further exacerbated the isolation and fear that many survivors already experience.

“Some of our service users have been verbally abused as a result of the riots. This has left the service users feeling fearful and unsafe in the places they have grown up in.”

- Annual Survey, 2025

“Services users continue to share their experiences of discrimination by local services and within their communities which can impact on their feeling of safety and trust in support services.”

- Annual Survey, 2025

“It has caused higher anxiety and worry. We feel there is an emboldening of some workers in statutory service to practice discrimination (conscious and unconscious). We are now more concerned about the areas women might move to. Discrimination in the communities they live in. Increase of Islamophobia in all spheres.”

- Annual Survey, 2025

“[...] Some faced direct racist abuse, adding to the isolation and control already experienced from perpetrators. [...]”

- Annual Survey, 2025

“Clients moving on from refuge being targeted in new area triggered by heightened levels of racism.”

- Annual Survey, 2025

► **Safety concerns and access to support:**

with survivors being afraid to leave refuges and travel. Some respondents were especially concerned that survivors have been left more afraid because of the riots and some were even staying with abusive partners due to this heightened fear.

“The riots caused significant fear and re-traumatisation for Muslim and Black and minoritised survivors, many of whom became too anxious to leave refuge, travel, or let children outside. [...]”

- Annual Survey, 2025

“Happening again now. Profound impact on our clients – makes them afraid. Impact on those in temporary accommodation – e.g., protests keeps women in relationships – more vulnerable.”

- Annual Survey, 2025

“Our concern is around people not feeling able to speak out or access help and support.”

- Annual Survey 2025

One service highlighted the racialised fear felt by survivors and an apparent lack of cultural awareness by the local authority of how perceptions of safety may differ from one part of the city to another.

“This is a genuine concern for women who are advised via housing options that as band A, they will be expected to bid on properties across the city, regardless of risk. Given the low percentage of BME people in decision making positions, capacity to understand the reality of living in fear of racist/Islamophobic attack/abuse is outweighed by the desire to reduce homelessness in the city.”

- Annual Survey, 2025

► **Closed operation:**

two respondents stated they had to close their offices or cancel face to face meetings around this time.

“

*“[...] We closed our offices when protests were planned nearby. Partners closed offices as staff did not feel safe to travel to work.”*

- Annual Survey, 2025

“

*“We had to cancel our face-to-face services due to fear of attack.”*

- Annual Survey, 2025

► **Ongoing and long-term concerns:**

raised by several respondents including survivors feeling unsafe in their communities and feeling unable to access support or help as a prolonged consequence of the riots.

“

*“[...] Longer term, survivors remain fearful of hostility and discrimination, which undermines recovery and confidence in services.”*

- Annual Survey, 2025

“

*“Our concern is around people not feeling able to speak out or access help and support.”*

- Annual Survey 2025

“

*“[...] There is a longer-term impact in terms of confidence around help seeking and feeling safe in the local community.”*

- Annual Survey, 2025

“

*“The escalation of racist riots increased the hostile environment against migrant women fleeing domestic violence continues to have an ongoing effect. The abuse going beyond the situation they are fleeing from and being perpetuated by a systematic and institutional criminalisation of migrant women, re-victimising and re-traumatising them and their children. We continue to advocate at different levels, from local authorities, housing teams in specific boroughs to national spaces that are key in decision making to make long lasting change. This environment creates uncertainty and fear among women who are already trying to recover from the abuse they experience, resulting in negative impacts on their mental health. [...]”*

- Annual Survey, 2025

### 5.3.2 International conflict and humanitarian crises

International conflict and humanitarian crises have left survivors and the services that support them in a state of powerlessness. We asked domestic abuse services about any impact of international conflict and humanitarian crises that they or the survivors they support have experienced. As with last year, we sought to explore the extent of this by also asking how they might mitigate any impact as well as their thoughts on the wider impact on women's rights. Concerns around deeper division and delayed recovery continued this year however there is a discernible rise in feelings of unsafety. International crises have unfortunately ignited an increase in Islamophobia, antisemitism and right-wing extremism, which has impacted on survivors, support provision and the staff within these organisations.

In an open-ended question, the majority of services reported no impact on their service or the survivors they support. Some noted there was not any significant or measurable impact while another reported they do not have robust monitoring systems in place to capture impacts. However, amongst the responses, reference to survivors' wellbeing was the most common theme, followed by themes of increased demand and impact on resources.

#### 5.3.2.1 Survivor wellbeing

Fear, anxiety and distress were common themes amongst Annual Survey responses about the impact of international conflict. Several respondents drew on their experience of supporting survivors who have friends and family in countries experiencing international or civil conflict and the greater responsibility this placed on them to safeguard around such a unique support need. For example, one service reported a need to encourage staff to support women affected by international conflict, indicating greater emphasis on frontline workers to respond to more complex presentations of trauma, which is outside of their usual remit and likely to demand more emotional labour. We have heard from our 'by and for' member services that, in the rise of far-right movements, they were expected to cover the costs of added security measures with

no increase in funding to support this. For some services, the need to safeguard survivors from this harm became an additional consideration in safety planning.

“

*“Invasion of Gaza had huge impact on staff and survivors. We made space to talk about it organisationally and encouraged staff to support women around it... Part of an overall sense of increasing sense of hostility towards Arab/Muslim/minoritised communities”*

– Annual Survey, 2025

“

*“This has been noted as a cause of anxiety & distress for some service users, specifically where it may concern countries they have links to.”*

– Annual Survey, 2025

“

*“Anxiety about the world”*

– Annual Survey, 2025

“

*“There was an impact on our staff and service users (Russia & Ukraine conflict) in that there was a fear of what would happen next and if the conflict would then go into neighbouring Poland.”*

– Annual Survey, 2025

“

*“Our survivors have family and friends in countries that are part of the conflicts and this is affecting their mental health.”*

– Annual Survey, 2025

#### 5.3.2.2 Increased demand and reduced support

The need to address heightened fears in safety planning led one service to monitor the political and funding climate in case access to support may be at risk for some survivors, particularly survivors

with insecure immigration status. Cuts to funding or provision could severely undermine services' ability to respond effectively, echoed in the Annual Survey responses.

“Some women are now questioning whether services remain safe and inclusive, and whether their immigration status or access to support will be threatened. For our service, this has meant addressing heightened fears in safety planning, providing reassurance, and monitoring potential changes in local policy and funding. Longer term, we are concerned about the impact on community cohesion, survivors' confidence in approaching statutory agencies, and the wider normalisation of racist attitudes.”

– Annual Survey, 2025

“More recently, [Middle Eastern origin] women, the impact is mainly financial as we need to access language line more frequently.”

– Annual Survey, 2025

Immigration enforcement action, coupled with the rising normalisation of racist attitudes, is increasing fear for survivors and causing doubt and mistrust about whether services can genuinely support them.

“International conflicts have impacted survivors by retraumatising those with past experiences of war or displacement and increasing anxiety for women with family abroad. We have also seen a rise in community tensions and hate incidents, particularly affecting Muslim and other minoritised survivors, which can deter them from seeking statutory support. For [domestic abuse service], this has meant increased demand for culturally sensitive, trauma-informed services to ensure survivors feel safe, supported, and heard within a challenging global climate”

– Annual Survey, 2025

A small number of services noted referrals for women who originate from areas currently experiencing humanitarian crises. How this resonates financially for services is more apparent this year, with services reporting on the need to adapt provision in line with the diverse needs of survivors, such as additional and intersecting barriers relating to their ethnicity, language, trauma from war, lack of access to state benefits or insecure immigration status, all of which are complex, multi-layered and demanding. In one city, an IDVA is funded to identify and support survivors going through the asylum process, demonstrating increased demand and how services continue to adapt to increasing or evolving support needs.

“Based in a dispersal area of [city], [domestic abuse service] has always supported displaced women.”

– Annual Survey, 2025

“Increase in resettlement referrals and some from international conflict. The resettlement service fund an IDVA post to support in hotels and with victims they identify.”

– Annual Survey, 2025

The struggles of civilians in international crises and the trauma it bears resonates largely with migrant survivors, particularly in a greater context of anti-migrant sentiment. One service highlighted the impact of a local Citizen's Advice ending their immigration contract and the lack of accessible immigration advice and support, and how this combined with racialised tensions increases fear and perhaps reduces a sense of belonging.

“General increase in fear and isolation from clients who are not UK nationals. The local CAB service has ended their immigration contract and this has led to many people with a lack of affordable options for their status.”

– Annual Survey, 2025

### 5.3.2.3 Restricted travel

The needs of survivors are changing as a consequence of international crises, with many survivors unable to access their usual support networks, an element of support embedded within safety plans and which many services rely on to support survivors' sense of safety and wellbeing. Where survivors are travelling, this also added an additional layer to safety planning since services found themselves having to safeguard around risk abroad.

“Current conflict abroad has been impacting survivors either directly affected (trapped, unable to travel, etc) or indirectly (family members that could be a source of support needing support themselves, etc)”

– Annual Survey, 2025

“We have had to support clients who have travelled to see family and struggled to navigate restrictions as a consequence of international conflict. This included navigating significant costs, safeguarding of the child and advocating for info held by the perpetrator.”

– Annual Survey, 2025

### 5.3.2.4 Increased polarisation

One service spoke about women's ability to leave, and how this is impacted by antisemitism, and a discomfort about attending sector meetings due to concern of misconceptions held widely. Other services addressed concerns around community cohesion which supports the observation that the gap is widening in terms of beliefs held and potential prejudice.

“Women are frightened to leave the perpetrator and move out of the Jewish community and experience antisemitism [...].”

– Annual Survey, 2025

There have been instances in refuge settings where survivors have also felt unsafe or uncomfortable amongst each other, with some services identifying training needs and upskilling staff to deal with deescalating challenging disagreements. To respond to this, a number of services created safe spaces for survivors to engage in discussions. This appears to be a constructive way of reducing polarisation.

“We became aware of disagreements or challenging situations within our accommodation services arising from views on international conflicts. We developed some training and guidance for staff to upskill them in addressing conflict when this occurs.”

– Annual Survey, 2025

“We recognise that global violence mirrors the powerlessness and injustice women are experiencing personally and create space for safe discussion...”

– Annual Survey, 2025

Since the greatest need is managing survivors' wellbeing, safeguarding survivors in this unprecedented way reinforces the need to embed trauma informed practice into service provision. To support this, services are calling for greater cohesion, safer spaces to engage and equal treatment of survivors. Amongst our members and Annual Survey respondents, there is also a call to create safer spaces to engage with one another at a sector wide level.

# Conclusion

The findings of the Annual Audit 2026 present a stark and urgent picture. While the specialist domestic abuse sector in England continues to demonstrate resilience, innovation and unwavering commitment to survivors, the gap between need and provision remains profound. Demand continues to outstrip capacity, and the proportion of referrals to refuges is now at its highest level since 2019-20. Whilst provision has increased in some areas, support for the most vulnerable survivors remains scarce, and accessing a refuge appears increasingly difficult. The fact remains that the number of bedspaces still falls short by almost a fifth (19.9%) of the Council of Europe's recommendation. However, evidence appears to suggest that meeting demand is not solely an issue of overall resources, but also linked to wider systematic issues, such as delays in accessing safe move-on accommodation.

The funding landscape remains fragile, with too many services operating without full commissioning, funding for core staff costs, or dedicated funding for key areas of work. Whilst the increasing reliance on reserves and volunteers threatens the sustainability of the sector, this is most concerning of all for the most vulnerable survivors, who too often receive inadequate and unsafe support from statutory organisations. That specialist 'by and for' services are less likely to receive commissioned funding is particularly concerning, given their critical role in meeting the needs of Black and minoritised women and other marginalised groups. Without secure, long-term investment, the very services best placed to respond to survivors facing intersecting inequalities are placed at greatest risk.

Collaboration and accountability mechanisms show mixed progress. While there are examples of improved multi-agency working, many services report inconsistent oversight, limited transparency, and persistent power imbalances between

statutory bodies and specialist providers. Too few services feel able to effectively hold local decision-makers to account. For a system that relies on partnership working to function effectively, these findings underscore the need for clearer accountability, meaningful survivor involvement, and genuine recognition of the expertise held within specialist domestic abuse organisations.

Emerging trends further illustrate the evolving context in which services operate. The growing prevalence of technology-facilitated abuse, including new forms of exploitation, demands continuous training, resources and policy development. The sector's cautious but increasing use of AI reflects both opportunity and risk, requiring clear ethical frameworks and survivor-centred safeguards. Meanwhile, the impact of the far-right riots and wider humanitarian crises highlights increasing pressure on frontline staff, often without additional funding or recognition.

Taken together, the evidence in this report reinforces a clear message: specialist domestic abuse services are an essential, life-saving infrastructure. They provide far more than crisis intervention - they deliver holistic, trauma-informed, and culturally competent support; they safeguard survivors and children; they enable access to justice; and they act as a critical bridge between survivors and statutory systems. Yet they are being asked to do more, for more survivors, with insufficient and insecure resources.

A sustainable and effective national response must match the scale and complexity of the need. Without decisive action, the gap between survivors' needs and available support will continue to widen. With it, however, there is the opportunity to build a national response that truly reflects the realities of women's and children's experiences of domestic abuse - one that is adequately resourced, survivor-centred, and fit for the challenges ahead.

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# Appendix A

## Women's Aid Annual Survey 2025 respondents' regional distribution

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**Table A1: Regional distribution of survey respondents**

**Women's Aid Annual Survey 2025**

<b>Region</b>	<b>Number of respondents</b>	<b>% of total respondents (128)</b>
East Midlands	25	19.5%
Yorkshire and Humberside	19	14.8%
West Midlands	21	16.4%
North West England	24	18.8%
North East England	14	10.9%
South East England	33	25.8%
South West England	15	11.7%
London	27	21.1%
East of England	23	18.0%

Respondents could choose more than one region.

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# Appendix B

## Tables on service users' access of support services from On Track

The full presentation of the On Track national data on the demographics, experiences of abuse and support needs of survivors can be viewed in the On Track data briefing supplementary to this report.

<b>Table B1: Reasons for rejected referrals</b>	<b>Community-based support services</b>	<b>Refuge</b>
Accepted alternative safe accommodation	0.3%	4.8%
Advice and information provided only	5.6%	1.1%
Already active in service	20.2%	0.4%
Child was not brought to service by Parent / Carer	0.0%	-
Client / survivor does not want support	25.1%	11.9%
Client / survivor was unable to afford refuge space	-	1.0%
Client / survivor was referred by agency without their consent	0.9%	0.1%
Duplicate referral	1.2%	0.2%
Identified as perpetrator	0.5%	0.2%
Identified as unsafe to work with	0.1%	1.0%
Ineligible for support (age)	0.1%	0.2%
Ineligible for support (borough)	3.2%	0.4%
Ineligible for support (not domestic abuse)	1.2%	2.4%
Ineligible for support (service description)	1.7%	0.9%

<b>Table B1 continued: Reasons for rejected referrals</b>	<b>Community-based support services</b>	<b>Refuge</b>
Location of refuge is unsafe	-	4.8%
Location of refuge is unsuitable (e.g. for accessing work/schools)	-	2.5%
Needs better met elsewhere - Referred to a partner agency	3.0%	3.1%
Needs better met elsewhere - already supported by DV agency	2.2%	2.2%
No response from referral agency	0.2%	1.2%
No space / capacity to support	0.4%	24.9%
Personal connection to refuge staff or another client	-	0.2%
Previous convictions for violent / sexual offences / arson	-	0.9%
Unable to contact client / survivor	23.9%	7.2%
Unable to meet client / survivor's child(ren)'s support needs	0.1%	1.9%
Unable to meet support needs around NRPF	0.0%	3.3%
Unable to meet support needs around disability	0.0%	1.7%
Unable to meet support needs around drug and alcohol	0.0%	4.0%
Unable to meet support needs around language	0.0%	0.7%
Unable to meet support needs around large family	0.0%	1.4%
Unable to meet support needs around mental health	0.0%	4.8%
Other	8.9%	9.4%
Missing data	1.0%	1.3%

# Appendix C

## Data tables on service provision from Routes to Support

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**Table C1: Services (with number of refuge bedspaces) exclusively for groups, May 2025  
(Routes to Support)**

<b>Service for</b>	<b>London</b>	<b>All England</b>
Black and minoritised women	24 (205)	48 (416)
d/Deaf women	1 (0)	1 (0)
Eastern European women	1 (0)	2 (0)
LGBT+ survivors	2 (0)	7 (14)
Women from specific religious group	0 (0)	1 (0)
Women aged over 45	0 (0)	2 (8)
Women with insecure immigration status	0 (0)	3 (21)
Women with learning disability	2 (10)	2 (10)
Women with substance use/alcohol use/ mental health support needs	2 (14)	4 (38)
Women who have experienced/are experiencing forced marriage (no refuge services)	0 (0)	1 (0)
Young women (aged 16-25)	0 (0)	3 (24)
<b>Total</b>	<b>32 (229)</b>	<b>78 (540)</b>

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**Table C2: Provider types of services run exclusively for groups, May 2025  
(Routes to Support)**

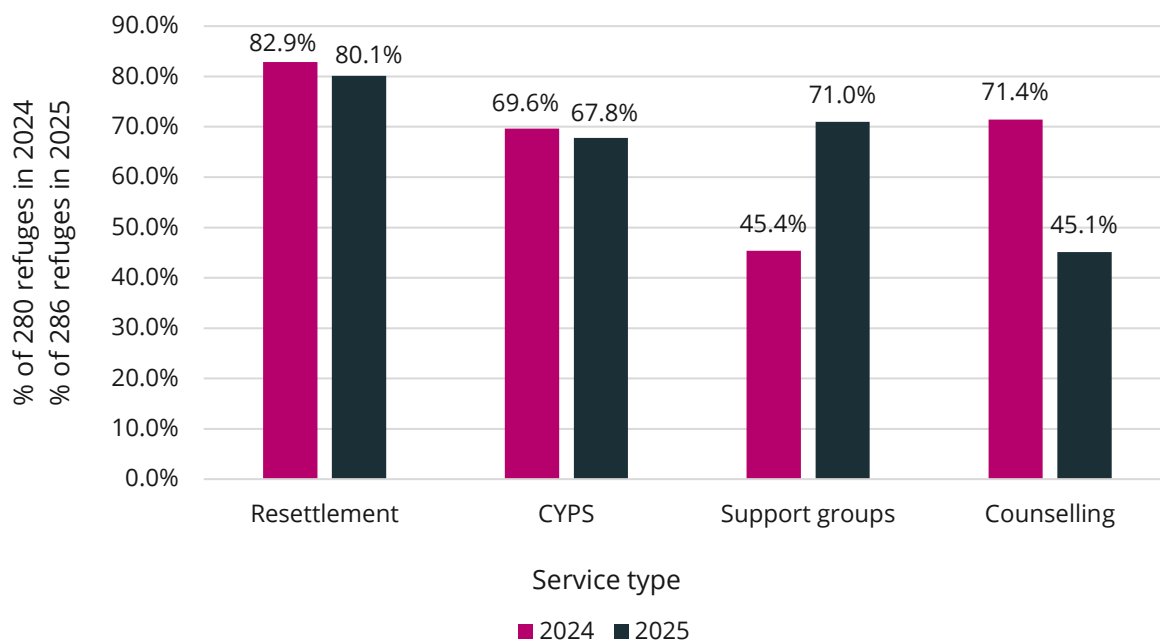
Service dedicated for	Dedicated provider	Housing Association	Other	All
Black and minoritised women	44	2	2	<b>48</b>
Disability	0	0	1	<b>1</b>
d/Deaf women	0	0	2	<b>2</b>
Eastern European women	4	0	0	<b>4</b>
LGBT+ survivors	6	1	0	<b>7</b>
Women from specific religious group	1	0	0	<b>1</b>
Women over 45	1	1	0	<b>2</b>
Women with insecure immigration status	2	0	1	<b>3</b>
Women with learning disability	0	1	1	<b>2</b>
Women with substance use/alcohol use/mental health support needs	4	0	0	<b>4</b>
Women who have experienced/are experiencing forced marriage (no refuge services)	1	0	0	<b>1</b>
Young women (16-24)	3	0	0	<b>3</b>
<b>Total (%)</b>	<b>66 (84.6%)</b>	<b>5 (6.4%)</b>	<b>7 (9.0%)</b>	<b>78</b>

**Table C3: Types of support services for women available in England, May 2025  
(Routes to Support)**

Service types	Number of services	Change from May 2024
Refuge	286	6
Resettlement	230	-3
Floating support	92	3
Outreach	229	11
IDVA service*	181	11
Prevention work	200	14
Helpline	183	2
Drop-in	111	6
Online chat	66	3
Formal counselling	173	3
Support groups	294	14
CYP service	252	5

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

**Chart C1: Service types in refuge services for women available in England, May 2024  
(Routes to Support)**



**Table C4: Refuge bedspaces and level of shortfall, May 2025**  
(Routes to Support)

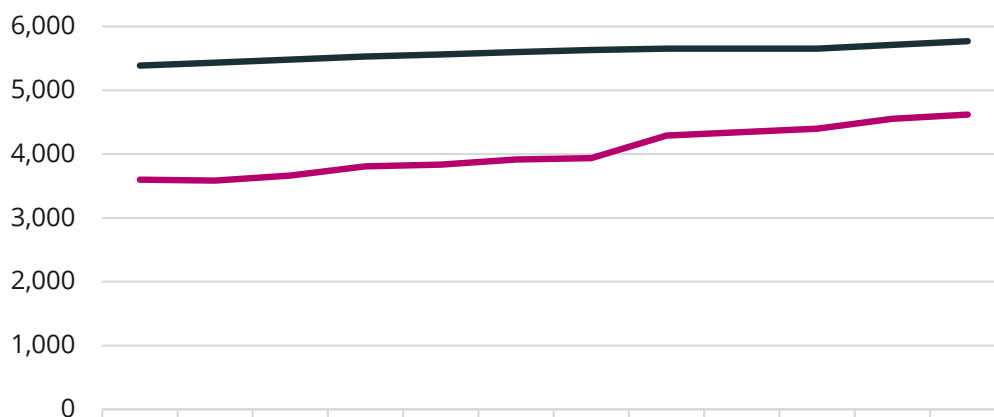
Year	Total bedspaces for women	Number of bedspaces recommended*	Shortfall	%shortfall
2025	4,619	5,769	1,150	19.9%
2024	4,551	5,711	1,160	20.3%

\*This is based on the number of spaces recommended by the Council of Europe 2008: "...safe accommodation in specialised women's shelters, available in every region, with one family place per 10,000 head of population." (p. 51) and calculated using ONS mid-year population estimates.

**Table C5: Refuge bedspaces for women and numbers available for men, May 2025**  
(Routes to Support)

Year	Total bedspaces for women	Bedspaces for women only	Bedspaces available for women or men	Dedicated bedspaces for men
2025	4,619	4,180	439	39
2024	4,551	4,177	374	33

**Chart C2: Refuge bed spaces since 2013 by year (Routes to Support)**



	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Refuge spaces	3,599	3,585	3,666	3,809	3,833	3,914	3,935	4,289	4,344	4,397	4,551	4,619
Recommendation*	5,387	5,432	5,479	5,527	5,562	5,598	5,629	5,655	5,655	5,654	5,711	5,769

\* (one space per 10k pop.)

**Table C6: Bedspaces and vacancies on Routes to Support May 2025 (change from 2019-20 before the Covid-19 pandemic)****Routes to Support**

Year	# bedspaces	# vacancies	Change from 2019-20	% decrease from 2019-20
2019-20	3,935	10,340	-	-
2020-21	4,289	8,280	-2,060	19.9%
2021-22	4,344	8,051	-2,289	22.1%
2022-23	4,397	7,600	-2,740	26.5%
2023-24	4,551	7,550	-2,790	27.0%
2024-25	4,619	7,853	-2,487	24.0%

**Table C7: Refuge vacancies posted to Routes to Support in 2024-25. % vacancies for each group (change from 2023-24)****Routes to Support**

Types of vacancies	Vacancies available to different groups	Change since 2023-24
# All vacancies posted, England	7,853	303
Woman plus two children	36.9%	-1.3%
Woman plus three children	15.7%	0.4%
No recourse to public funds	11.5%	-0.8%
Full wheelchair access	1.1%	0.4%
Person with limited mobility	1.8%	0.0%

Table C8: Community-based services with specialist support workers, May 2025			
Routes to Support			
Specialist worker type	Mental health support needs	Drug use support needs	Alcohol use support needs
Number of community-based services	27	20	20
<b>Change from 2024</b>	<b>0</b>	<b>0</b>	<b>0</b>

Table C9: Refugees with specialist support workers, May 2025			
Routes to Support			
Specialist worker type	Mental health support needs	Drug use support needs	Alcohol use support needs
Number of refuge services	33	32	33
<b>Change from May 2024</b>	<b>0</b>	<b>2</b>	<b>1</b>

Table C10: Referrals to all services in 2024-25 (estimates calculated from baseline data from On Track)		
	Refuge services	CBS services
<b>Women</b>		
Estimated referrals accepted/women supported during the year	10,665	138,955
Estimated referrals declined during the year	19,982	157,325
Estimated total referrals received during the year	30,647	296,280
<b>Children</b>		
Estimated children supported during the year	11,732	180,642

**Table C11: Dedicated services for children and young people (CYP) in refuges\*, May 2025****Routes to Support**

Service	Number of refuges	% of refuges	% change from 2024
Dedicated emotional support	204	71.3%	-3.3%
Outings/activities/play sessions	203	71.0%	-2.6%
Individual support	186	65.0%	-1.8%
CYP worker	199	69.6%	-2.2%
Advocacy	85	29.7%	0.8%
Play therapy	119	41.6%	-0.9%
Support group	94	32.9%	0.7%
Mentoring	36	12.6%	-1.7%
CYP counselling	50	17.5%	0.3%
Family support worker	3	1.0%	0.0%
Art therapy	3	1.0%	0.0%
Refuges with a dedicated CYP service **	166	58.0%	-11.6%
<b>Total number of refuges</b>	<b>286</b>		

\* A total of 252 local services were running a CYP service at May 2025, in either their refuge, CBS services or both.

\*\* Note that some refuge services reported on Routes to Support that they provided one or more of the services outlined in this table without indicating they offer a dedicated CYP service.

**Table C12: Dedicated services for children and young people (CYP) in CBS service\*, May 2025****Routes to Support**

<b>Service</b>	<b>Number of services offering CBS</b>	<b>% of services offering CBS</b>	<b>% change from 2024</b>
Dedicated emotional support	150	50.8%	-0.9%
Outings/activities/play sessions	76	25.8%	-3.9%
Individual support	151	51.2%	-1.0%
CYP worker	142	48.1%	-0.8%
Advocacy	83	28.1%	0.6%
Play therapy	62	21.0%	-1.5%
Support group	89	30.2%	0.2%
Mentoring	34	11.5%	-0.3%
CYP counselling	38	12.9%	-0.3%
Family support worker	2	0.7%	0.0%
Art therapy	1	0.3%	0.0%
CBS services with a dedicated CYP service	154	52.2%	0.4%
<b>Total number of CBS services</b>	<b>295</b>		

\* A total of 252 local services were running a CYP service at May 2025, in either their refuge, CBS services or both.

\*\* Note that some CBS services reported on Routes to Support that they provided one or more of the services outlined in this table without indicating they offer a dedicated CYP service.

**Table C13: Services for men in England\*, May 2025 (and change from May 2024)****Routes to Support**

<b>Service types</b>	<b>Number of services in England in May 2025</b>	<b>Net change since May 2024</b>
Refuges with bedspace for men	66	7
Floating support	45	1
Helpline	113	1
Outreach	142	2
Project based	26	1
Domestic violence advocacy project	129	8
Sexual violence advocacy project	39	2
Information and advice	156	9
<b>Total entries with one or more services for men</b>	<b>227</b>	<b>14</b>

\* This is not an exhaustive list of the services provided for male victims, rather these numbers are for services offering support to women who also work with male victims

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