The Women’s Resource Centre is a charity which supports women’s organisations to be more effective and sustainable. We provide training, information, resources and one-to-one support on a range of organisational development issues. We also lobby decision makers on behalf of the women's not-for-profit sector for improved representation and funding.

Our members work in wide range of fields delivering services to, and campaigning on behalf of, some of the most marginalised communities of women.

There are over ten thousand people working or volunteering for our members who support almost half a million individuals each year.

**Women’s Resource Centre**
Ground Floor East
33-41 Dallington Street
London EC1V 0BB
Tel: 020 7324 3030
Email: info@wrc.org.uk
www.wrc.org.uk
Registered Charity 1070606
Company Limited by Guarantee 2462336
Funding of London Women's Refuges

Report for London Councils

Women's Resource Centre

August 2007
Many people have contributed to this research.

The Women’s Resource Centre is very grateful to the borough officers and refuge staff that gave up their time to complete the detailed questionnaires.

We would also like to thank the Steering Group for their advice and guidance:

- Women’s Aid Federation of England (WAFE)
- Greater London Domestic Violence Project (GLDVP)
- SITRA
- LB Southwark
- LB Haringey
- LB Redbridge
- London Councils (Health & Social Care, Community Safety & Human Rights, Housing and Social Policy & Grants teams)
Contents

Executive summary .......................................................................................................................... 1
Introduction .................................................................................................................................... 15
  Aims of the research .................................................................................................................. 15
  Definitions ................................................................................................................................. 16
  Report structure ....................................................................................................................... 18
Methodology ................................................................................................................................... 20
  Literature review ...................................................................................................................... 20
  Questionnaires ......................................................................................................................... 20
  Borough responses ................................................................................................................... 21
  Refuge provider responses ....................................................................................................... 22
    Identifying refuge providers .................................................................................................... 22
    Profile of refuge respondents .................................................................................................. 23
1. Supporting People .................................................................................................................... 24
  1.1 Boroughs’ Supporting People spending on domestic violence services ................................... 25
  1.2 Types of domestic violence services funded ...................................................................... 27
  1.3 Profile of providers ............................................................................................................ 28
  1.4 Contract prices .................................................................................................................. 31
  1.5 Successes and challenges of the Supporting People programme ....................................... 32
    1.5.1 Successes .................................................................................................................... 32
    1.5.2 Challenges ................................................................................................................ 34
    1.5.3 Utilisation/occupancy problems .................................................................................. 35
    1.5.4 Boroughs’ recommendations ...................................................................................... 37
  1.6 Impacts of Supporting People on refuge providers .............................................................. 38
    1.6.1 Improved quality and accountability ........................................................................... 38
    1.6.2 Bureaucracy of Supporting People ............................................................................ 38
    1.6.3 Funding ....................................................................................................................... 39
    1.6.4 Lack of flexibility ........................................................................................................ 40
    1.6.5 Commissioners .......................................................................................................... 40
    1.6.6 Inappropriate outcomes framework .......................................................................... 41
2. Refuge accommodation funded by Supporting People ............................................................ 42
  2.1 First stage refuge accommodation ....................................................................................... 43
Key findings

Overwhelmingly, refuge accommodation (particularly first stage accommodation) is the main domestic violence service funded by boroughs through Supporting People programmes. However, boroughs are also increasing floating support services.

Of 2007/08 Supporting People spending on domestic violence services:

- First stage refuge accommodation: 81%
- Second stage refuge accommodation: 6%
- Floating support: 12%
- Other community services: 1%

Despite the emphasis on funding refuge accommodation, it was acknowledged by both boroughs and refuges that more bed spaces were needed. As many as 27% of boroughs may not be meeting Best Value Performance Indicator 225, which states that there should be a minimum of one refuge place per 10,000 population in each local area.

Both refuges and boroughs commented that Supporting People has driven up quality standards in the refuge sector. However, the reporting requirements are placing a heavy burden on providers. Refuges were deeply concerned about the impact this has on service users, as providers must now spend significant human resources on Supporting People monitoring at the expense of front-line support of service users.

Local authorities are the mainstay of refuge providers’ income – mostly through Supporting People but also other funding streams. Although there is a general shift from grants to contracts with public bodies across the voluntary and community sector (VCS), the refuge sector is overly reliant on Supporting People contracts, placing them in a vulnerable position. On average, 54% of providers’ annual income comes from Supporting People contracts, whilst the average annual income from contracts with the state across the VCS is 38%. Therefore, any decreases in the price of contracts will have significant effects on providers.
Refuges rely on rent received, which is the second largest source of income after Supporting People contracts. This may have significant impacts on refuges’ ability and willingness to provide safe housing to women with no recourse and working women.¹

Funding is also levered in by refuge providers to local areas through grants obtained from charitable trusts to deliver a range of activities, particularly children’s services. However, the largest proportion of all ‘other’ (non-Supporting People) funding comes from various council funding streams.

On average, refuge providers receive income from:

- Supporting People: 54%
- Rents: 22%
- Other local authority funding: 12%
- Charitable trusts: 9%
- Pan-London authorities: 2%
- Central government: 1%

There is undoubtedly a shift towards ‘super providers’. Thirty-five percent of refuge providers have Supporting People contracts in two or more boroughs. This is further reflected in events over the last three years where at least seven refuges have been taken over by larger providers. Five providers are currently considering being taken-over or merging.

There appears to be no standard methodology for determining unit prices across boroughs, with wide ranges existing even within similar services. The only London-wide patterns that could be determined were that refuges for single women and contracts for 15+ units and seven day cover were generally funded below the average unit price.

However, there was evidence of a relationship between staffing levels in refuges and the contract unit price received by the provider. It is highly likely that greater investment in refuges to improve staffing capacity, and therefore the level of support provided to service users, is critical in achieving positive outcomes for women experiencing domestic violence, including reducing the risk of service users returning to perpetrators.

¹ The term ‘women with no recourse to public funds’ usually refers to women with insecure immigration status experiencing domestic violence who are not eligible for benefits from the public purse including temporary accommodation, housing or income support benefits, making accessing refuge accommodation extremely difficult for these women.
About this research

Commissioned by London Councils and carried out by the Women’s Resource Centre, this research examined funding to women’s refuges in London. During April – June 2007, London boroughs and refuge providers were surveyed to determine the:

- range of services/support being delivered in and across boroughs by refuge providers;
- funding, particularly from Supporting People, received by refuge providers to deliver services;
- cost variances in delivering services to different equalities groups of women, women with specialist needs and location;
- types of support provided to women with no recourse to public funds and the costs to refuge providers; and
- sustainability of refuge providers.

Methodology

Two different questionnaires were distributed to boroughs and refuge providers.

Of the 32 London boroughs surveyed (excluding the City of London which does not fund any domestic violence services through Supporting People), 72% replied (in full or part) to the questionnaire. The nine boroughs that did not respond were telephoned by the researcher for ‘basic’ information about Supporting People domestic violence services for 2007/08.

Of the 39 refuge providers identified, correct contact details for two of the providers could not be found and questionnaires reached 37 providers. The response rate for refuge providers was 62%. A total of 62 refuge sites (both first and second stage) were managed by the 23 refuge providers that responded to the questionnaire. Respondents included women’s voluntary and community organisations (VCOs) (48%), Black and Minority Ethnic (BME) housing associations (13%), BME women’s VCOs (17%) and general housing associations (17%). While most respondents delivered refuge accommodation in only one borough, 35% had refuges in two or more boroughs.

Supporting People

Over £12.1m of boroughs’ Supporting People grants have been spent on services for ‘people at risk of domestic violence’ (as the primary client group) in 2007/08, with
individual borough spending ranging from £75,041 to £807,468.\(^2\) Boroughs’ spending as a proportion of their total Supporting People grants ranged from 2% to 9%.\(^3\) However, the majority of boroughs spent between 2% and 4% of their grant on domestic violence services. Four boroughs recorded reduced spending on domestic violence services in 2007/08 than for 2005/06 and two have held spending at 2005/06 levels.

For 2007/08, boroughs reported 123 different Supporting People contracts, for all types of domestic violence services, with 43 providers.\(^4\) Of providers, 67% were women’s VCOs (including two women’s housing associations), 26% were housing associations (general and BME) and 7% were services managed by local authorities.

Only 43% of contracts received an inflationary uplift in 2007/08 from the previous year. Four per cent of contracts received an increase in funding greater than inflationary levels. Over 30% of contracts have stayed at the same level of funding and 2% received the same contract price for increased number of units – both of which represent a loss of income in real terms. Sixteen per cent of contracts have had funding reduced to deliver the same number of support units.

Camden, Hackney, Ealing, Lambeth and Lewisham are adding considerable accommodation capacity to the capital. Collectively, these boroughs fund over 25% of all (first and second stage) refuge bed spaces.

**Impact of Supporting People**

Boroughs believed that the successes of Supporting People included improvements in the quality of services and strategic and ‘joined up’ planning and commissioning of services.

Many ‘challenges’ were named, in particular problems with the procurement model in enabling a diverse provider base. Boroughs also acknowledged the strain that the bureaucracy and requirements of Supporting People has on providers.

Boroughs made a number of recommendations on possible improvements to the Supporting People programme, but in particular:

- Department of Communities and Local Government to provide clearer direction about the future of Supporting People.

---

\(^2\) Domestic violence Supporting People spending was not reported by Hammersmith & Fulham or Kensington & Chelsea. However, responses from refuge providers (funded by Supporting People) in Hammersmith & Fulham have provided some information but this may not be the total spend.

\(^3\) Excludes the City of London (no Supporting People spending on domestic violence services). See Appendix 3 for borough breakdowns.

\(^4\) Providers were not named by Hammersmith & Fulham or Kensington & Chelsea. However, responses from refuge providers (funded by Supporting People) in Hammersmith & Fulham have provided some information but this may not be the total spend.
• Better strategic planning within and across boroughs such as sub-regional Supporting People programmes to improve consistency, transparency and workloads of both boroughs and providers.

• ‘Lighter touch’ monitoring of providers.

• Capacity building programmes for existing and potential providers to ensure an effective, sustainable and diverse provider base.

Refuge providers agreed that Supporting People had improved the quality of services and accountability systems. They also commented that while Supporting People funding has provided a greater sense of financial security (because it is has to date been generally consistent), it also accounts for, on average, over half of providers’ income. Therefore, any changes to contracts (such as reductions in funding, decommissioning or reorientation of services) are acutely felt by providers, and are likely to have a significant impact on their sustainability.

All refuge providers commented on the resources and time required to comply with the bureaucracy of the Supporting People programme, often at the expense of time spent with service users. They also commented that the Supporting People programme is unable to accommodate the different and/or multiple needs of women experiencing domestic violence. Concerns were expressed about the lack of knowledge about domestic violence amongst commissioners and there were many comments that funding is inadequate, that annual increases are minimal and that Supporting People is unable to cover children’s services.

**Occupancy/utilisation benchmark**

The average occupancy (first and second stage accommodation) and utilisation (community services) benchmark for Supporting People across London is 85%, with rates varying from 80-95%.

Eleven boroughs reported that 15 providers delivering specialist refuge accommodation or floating support have had problems with under-utilisation. In one case where prolonged staff shortages led to under-utilisation, £70,000 was reclaimed by Supporting People. In contrast, refuge respondents reported consistently high occupancy rates and were often unable to meet demand. A range of measures were introduced to improve use of services, particularly promotion of the service and expanding referral routes.
First stage refuge accommodation

Boroughs in this research reported 805 first stage refuge bed spaces funded by Supporting People for 2007/08 (see Table A, p.62). First stage refuge accommodation accounted for 81% of all Supporting People domestic violence spending across boroughs.

Specialist refuge bed spaces accounted for 24% of spending on first stage accommodation. Most (178) were for BME women, 15 for women from faith groups and eight for women from a specific borough. There were 15 providers delivering these specialist services in 17 boroughs.

Unit price analysis of first stage refuge accommodation

There were significant differences in unit prices between organisations both within these categories and across different types of contracts.

The overall average unit price of first stage accommodation (for any household type, specialism or location) was £13,659. The number of bed spaces in any one contract to deliver first stage accommodation varied from three to 40 units.

Specialist refuges for BME women accounted for 38% of all contracts above the average unit price and 21% of contracts below the average. However, the 38% of contracts above £13,659 tended to be towards the lower end of the range of unit prices above the average. Only two of the ten contracts with the highest unit prices were BME services.

There were many different contract combinations of service level and household type. However, of all of these possible combinations, half of all contracts were for services for ‘any household’ type and providing 9am to 5pm weekday cover. This was the most ‘typical’ type of contract for first stage refuge accommodation regardless of specialism.

Many factors are likely to influence contract prices and the price variations between services within and across boroughs. These include the level borough's Supporting People budget, local needs, the type of service commissioned, commissioners’ knowledge about domestic violence and interventions, providers’ negotiation skills, relationships between commissioners and providers and the costs for which providers are able to deliver a service.

However, from the information provided by boroughs and refuges, there were few London-wide patterns regarding contract prices, which varied considerably, even amongst

---

Refuge bed spaces funded by Supporting People were not given by Hammersmith & Fulham or Kensington & Chelsea. However, responses from refuge providers in these boroughs have provided some information but this may not be all providers.
similar services. There appears to be no standard methodology for determining unit prices across boroughs. The only London-wide patterns that could be determined were that refuges for single women and contracts for 15+ units and seven day cover for first stage accommodation were generally funded below the average unit price.

It is clear that unit prices have an impact on providers and the service they are able to deliver to women. Significantly, providers with lower than average unit prices were 60% more likely to report 10% or more of women returning to perpetrators after leaving refuges.

In 2006, Inner London boroughs conducted a benchmarking exercise which showed that staffing levels were generally higher for providers with unit prices above £206 per week. These refuges employed 33% more managers and 59% more front-line staff, and provided 54% more support hours per week and 28% more support hours per head than providers with unit prices below this figure.

**Second stage refuge accommodation**

Nine boroughs commissioned 106 units of second stage accommodation, which accounted for 13% of all refuge bed spaces funded by Supporting People in 2007/08. In total, second stage accommodation accounted for 6% of Supporting People funding spent on all domestic violence services for 2007/08.6

Second stage accommodation for BME women (the vast majority of which is for women from the Indian Subcontinent) accounted for 56% of all second stage bed spaces, but only 49% of all second stage funding. Almost 80% of all BME second stage bed spaces are delivered by one provider across two boroughs. Unlike general second stage bed spaces, 78% of BME specific second stage bed spaces were for single women.

**Women in refuges**

Across 22 providers, the average stay for a woman in a refuge during 2006/07 was 173 days, but this rose to 217 days in specialist refuges for BME women.

During 2006/07, 21 refuge providers turned away over 2,300 requests for support from women, overwhelmingly because the refuge was full.7 In particular, BME providers were more likely to turn women away for this reason.

---

6 Excludes Greenwich (two units) and Wandsworth (12 units) as no cost information provided.
7 Not the total number of women as many of these will be requests from the same women trying to access subsequent refuges after being initially turned away.
On leaving the refuge, a quarter of women went on to council housing. However, refuges stated that more council housing was urgently needed. The lack of 'move on' accommodation (i.e. non-hostel supported housing and settled accommodation) was also identified by boroughs in their Supporting People Strategies and in this research.

Moving on to council housing was followed by private rented accommodation, then housing associations or friends and relatives. Nine per cent of women returned to perpetrators, although this is likely to be an underestimate as the whereabouts of 12% of women upon leaving refuges was unknown.

Service users of BME providers were more likely to move on to second stage accommodation, return to their previous home (including back to the perpetrator) or move into housing association property than the average. They were significantly less likely to move into private rented accommodation.

The lack of bed spaces to accommodate more women was evident in the number of women turned away by refuges and there was some evidence that the lack of move on housing, resulting in longer stays in refuges, may be influencing whether or not women return to perpetrators.

**Floating support**

For 2007/08, floating support accounted for the second largest portion (14%) of Supporting People domestic violence spending.

Over 338 units of floating support were commissioned by 22 boroughs, of which 15% was for BME women.\(^8\)

Floating support was most likely to be delivered by housing associations, followed by women's VCOs.

**Other Supporting People funded services**

Southwark and Haringey spent almost £90,000 on sanctuary schemes in 2007/08. Three boroughs fund community alarms for women experiencing domestic violence as part of their Supporting People domestic violence spend.

Harrow is currently piloting a six month resettlement project (ten units) which will end in August 2007. Haringey funds 20 units of outreach through its Hearthstone project.

---

\(^8\) Excludes the number of units for floating support services in Kensington & Chelsea, Hammersmith & Fulham, Havering and Wandsworth as no data provided.
Domestic violence services in refuges funded by ‘other’ sources

On average, just over 75% of refuge providers’ income comes from just two sources – Supporting People contracts and rental income. The remaining 25% of providers’ income comes from ‘other’ sources, namely local authorities (non-Supporting People funding), charitable trusts and to a lesser extent, public donations and central government.

Thirty-seven per cent of ‘other’ income came from charitable trusts. However, funding from local government accounted for the largest proportion of ‘other’ income at 49%.

This ‘other’ funding obtained by refuges was used to deliver a range of services but the most cited were children’s services, help lines, outreach, drop in sessions, education and counselling.

Refuge providers reported that 20% of all grants and contracts received were for children’s services. In particular, over half (52%) of charitable trust grants were for a range of children’s services, from play groups to therapeutic work. Recent research by the Government Office for London found that refuges in 80% of boroughs have either a full- or part-time Children’s Worker and that 45% of Children’s Workers are funded, or part funded, by the local authority.9

Nineteen boroughs distributed over £2.862m to the VCS for domestic violence services and projects, 44% of which were grants and 36% contracts (the remainder were ‘unknown’). There were a total of 57 different recipients, 35% of which were refuges from this study. However, only 23% of funding went to refuge providers signalling that services provided by non-refuge domestic violence VCOs are significant.

Women with no recourse to public funds

During 2006/07, 238 women with no recourse were supported by 15 providers (65% of all respondents). Of the 15 providers: seven were women’s VCOs, four were BME women’s VCOs, three were BME housing associations and one was a general housing association. The majority of women with no recourse to public funds (73%) were supported by just four organisations.

Less than 20% of the 238 women were provided accommodation. The remaining 80% had accessed community services only.

Fourteen providers accommodated women with no recourse, at an average cost of £149 per week (rent). Seven providers were able to negotiate with Social Services to cover rent

(and in some cases, subsistence); although most noted that this was only successful if the women had children. Four of the providers funded a woman’s stay out of reserves (in one case a designated reserve fund for this specific purpose) and three used a combination of unrestricted funds, under-sPENDs from other services, reserves, their organisation’s welfare fund, small grants and public donations.

BME providers (both women's BME VCOs and BME housing associations) accommodated proportionately more women with no recourse – 45% of all women with no recourse were supported by a BME refuge.

Of the 2,300 requests for accommodation turned away by refuge providers in 2006/07, 9% were because the woman had no recourse to public funds. In total, 18 providers had to turn away 222 requests for services from women with no recourse to public funds. As well as accommodating proportionately more women with no recourse, BME providers were, on average, more likely to have to turn away women with no recourse than non-BME providers. Possible explanations are that, with the exception of two providers, collectively they have fewer bed spaces, and resources generally, than non-BME providers and so meet the threshold of the number of women they can support more quickly. It is also likely that BME women's refuges have women with no recourse referred to them more frequently because they are specialist providers.

When asked about their support of women with no recourse, boroughs referred to the advice and outreach services provided by both public bodies and VCOs. However, the majority of boroughs acknowledged that accommodation support for women with no recourse, in particular, was ad-hoc, variable and generally poor across London. Unanimously, boroughs stated that lack of resources was the key problem and that adequate, ring-fenced funding is needed so that women with no recourse can access safety.

Unmet needs

Refuges named a plethora of ‘unmet needs’, identified mostly through the number of referrals received (and often declined), the number of women using services and on waiting lists and the day-to-day experience of working with women.

Primarily, these ‘unmet needs’ were cases of providers’ inability to meet demand for their services due to lack of resources and capacity, rather than lack of expertise to deliver the service. The four most cited ‘unmet needs’ were women with no recourse, children’s services, support for women with specialist, complex, high level and/or multiple support

\footnote{See footnote 7.}
needs and access to refuges for working women (who often face difficulties in affording the rent) and access to legal injunctions.

Boroughs also identified services for children, women with high level or complex support needs and women with no recourse to public funds in their top four unmet needs, as well as services for young people.

**Sustainability of women’s refuges**

The 2005/06 audited accounts of 29 providers were examined. These providers had a combined income of over £20.4m – up 12% from the year before. On average, 74% of providers’ income was unrestricted, overwhelmingly because the two largest sources of income, Supporting People and rental income, are unrestricted funds.

Across England and Wales, grants and contracts from the state continue to be the largest source of funding for VCOs, accounting for 38% of all registered charities’ income in 2004/05. However, there has been a considerable shift in how income from the state is distributed, from grant giving to commissioning and procurement. Earned income (contracts) has now eclipsed voluntary income (grants) – in 2004/05, almost 40% of VCS income came from contracts with the public sector and only 14% came from grants.\(^\text{11}\)

The refuge sector is a good illustration of this shift from grants to commissioning and procurement. Earned income from Supporting People contracts accounted for 54% of refuge providers’ annual income in 2006/07. While providers were able to name several benefits of the Supporting People programme, such as greater financial security, the shift from local authority grants to Supporting People contracts has restricted and redefined the services refuges are able to deliver. Refuge providers depend on contracts with the state, more so than the VCS on average. This is likely to have significant impacts on the relationships between councils and providers. Providers who are unhappy with their contract terms, such as price, are unlikely to withdraw their services as there are no (realistic) alternatives to Supporting People funding. Some refuge providers commented that this has led to an unequal relationship between commissioners (councils) and providers.

On average, refuge providers have the equivalent of four months expenditure in reserves, ranging from just two weeks to one year. Many refuges have been able to make financial provisions to cover staffing and other organisational issues. However, less than half of all providers have made financial provisions to cover redundancies, maternity cover and enhanced pay, sick leave or pension contributions.

---

There were 493 paid staff and volunteers working for the 23 refuge providers that responded to the survey, over half of which were full-time front-line workers. Staffing levels were generally consistent across the different provider categories except for BME women’s VCOs who were three times more likely to employ sessional workers and two times less likely to have part-time front line staff.

As expected, the greater the annual income of the provider, the greater the proportion of central services staff. Refuges reported that, on average, over half of all fundraising is undertaken by central services staff. Providers who have fewer central services staff relied on the Director, front-line workers and trustees to apply for funding.

Interestingly, only nine providers answered the question on the number of trustees in their organisation. This may indicate that, like most other women’s VCOs, refuge providers find it difficult to recruit suitable trustees.

Seventeen (74%) providers reported recruitment difficulties. In particular, 70% of respondents had experienced problems with recruiting staff with the appropriate level of skills and experience, 47% cited salary, 23% the need for workers fluent in two or more languages and 3% have had difficulties because of the location of the post. Providers encountered problems recruiting children’s workers and finance staff. Five providers reported problems retaining staff, particularly with staff leaving for higher salaries.

What was noticeable in relation to staffing was that 77% of providers who have merged or have been taken over, or are considering it, reported staffing problems. Boroughs also reported in their responses problems with staffing levels and the impact of support on service users.

Refuge providers were asked to name the top four challenges facing their organisations. Eleven different challenges were named but funding for children’s services, resources to support women with no recourse to public funds, full cost recovery and funding for current services were the most frequently cited.

Over the past three years, at least seven refuges have been taken over by larger providers: two by larger women’s organisations, one by a BME housing association and four by general housing associations. In addition, two women’s VCOs and two BME housing associations are considering being taken over and a general housing association is considering a merger.

Four providers have had to close a service in the last four years due to lack of funding. These services were outreach, including a children’s outreach programme, and a parallel support programme for women whose partners were attending a perpetrator programme. Three providers have had to reduce their outreach services due to cuts in funding.
Recommendations

To ensure a diverse provider base in the future, and strategic, effective and value for money services, boroughs will need to address the key issues identified in this research, namely ensuring that Supporting People and other funding enables provider diversity and the sustainability of organisations, particularly in regards to staffing.

1. Ensuring the sustainability and diversity of refuge providers
   - Supporting People and other local authority funding should be geared towards improving the capacity (e.g. staffing) of current services and preventing the risk of reduction or closure of services (e.g. further losses of outreach services).
   - All funders to consider annual inflationary increases as a minimum standard.
   - Funders to consider continuation of grants programmes, where appropriate, along with shifting funding to commissioning programmes.
   - Commitment to services delivered by specialist and smaller VCOs (such as organisations led by women, for women) to ensure a diverse provider base.

2. Capital development
   - Capital development strategies to increase the number of bed spaces to be linked to revenue strategies for packages of support services.

3. Benchmarking
   - Benchmarking exercises should be undertaken (such as at sub-regional levels) to reduce discrepancies in contract and unit prices between boroughs and between providers.
   - Benchmarking exercises should avoid reverting to the lowest common denominator and be linked to provider sustainability and diversity strategies.

4. Supporting People monitoring requirements
   - Ongoing commitment to reducing the bureaucracy of Supporting People.
   - Boroughs to participate in the consultation (and possibly the pilot) of the National Service Standards for Domestic and Sexual Violence currently being developed by the Women’s Aid Federation of England (WAFE).12

5. Package of support services across London
   - Consistent coverage of certain services across London boroughs in all refuges such as children’s services and counselling.

---

12 See the WAFE website for information – www.womensaid.org.uk
• Boroughs to consider establishing 'last resort funds' (such as sub-regional funds) to increase refuges’ ability to accommodate women with no recourse.

6. Investing to save
• All borough strategies on domestic violence funding, particularly Supporting People, to consider greater investment in refuge services. Greater investment at the earliest stage is most likely to improve outcomes for women and reduce repeat victimisation.
Aims of the research

This report details the findings of research into the funding of women’s refuges in London – specifically the types of services delivered and how they are funded.

The research was commissioned and project managed by London Councils. It was designed and carried out by the Women's Resource Centre (WRC).

The findings will assist local and pan-London authorities in determining domestic violence (strategic and local) needs across authorities. In addition, this research provides further evidence about the infrastructure and sustainability of London’s domestic violence sector which will be of interest to both public bodies and the voluntary and community sector (VCS).

The aims of the research were to identify and evaluate the:

- range of services/support being delivered in and across local authorities by refuge providers;
- funding, particularly from Supporting People, received by refuge providers to deliver services;
- cost variances in delivering services to different equalities groups of women, location of refuge etc;
- types of support provided to women with no recourse to public funds, and the costs to refuge providers; and
- sustainability of refuge providers.

Only Supporting People funded services where the primary client group was ‘people at risk of domestic violence’ have been examined. However, where boroughs reported funding refuges to deliver domestic violence services under other Supporting People categories this was noted.

The survey was limited to providers of domestic violence refuge accommodation. It was not possible to include the vast number of other voluntary and community organisations (VCOs) providing non-refuge based community services and projects, including those funded by Supporting People to deliver community services such as floating support.
range of services these VCOs provide, and the funding they acquire to deliver them, is likely to be significant. Also excluded were local authorities delivering front-line domestic violence services.

Definitions

Community or non-refuge services – services which are not provided in conjunction with refuge accommodation. Both refuges and other non-accommodation domestic violence VCOs deliver community services. These services can include counselling, children’s services, advocacy, advice, outreach, drop-in, help lines, training/workshops etc.

Accommodation services – first or second stage refuges (see below).

Emergency/first stage refuge accommodation – temporary supported refuge accommodation (although some users may stay for a year or longer). In this research, the term was used to differentiate these refuges from second stage refuges/accommodation.

Second stage accommodation – refuges specifically for women to move in to for longer periods of temporary supported accommodation, such as after leaving first stage refuges.

Floating support services – advocacy and other support services provided to specific families to help maintain their current accommodation in the community. Outreach, resettlement or sanctuary schemes may also be funded as ‘floating support’.

Resettlement services – assisting women and children to make new lives upon leaving a refuge, for example when they move on to permanent accommodation.

Sanctuary schemes – (professionally installed) security measures which enable some women experiencing domestic violence to stay in their own accommodation (where it is safe for them to do so, where it is their choice and where the perpetrator no longer lives within the accommodation). In this research, we have only looked at sanctuary schemes

---

13 Includes frontline services (such as counselling, advice, information, advocacy, casework, user support groups) and second tier work (including campaigning, policy work, lobbying, training to frontline workers, research) on issues such as forced marriage, ‘honour’ killings, perpetrators, same-sex domestic violence etc. A 2004 study of WRC’s London membership found that ‘domestic violence’ was the core and only remit of 12% of member VCOs. However, a further 39%, whose core remit was not domestic violence, were campaigning/lobbying on domestic violence issues or delivering services to large numbers of domestic violence survivors. Many had obtained specific funding to deliver domestic violence projects. These organisations included women’s centres, counselling organisations, advice agencies, training and education organisations and second tier VCOs. In total, 51% of women’s VCOs in the study were involved in some form of domestic violence work.

14 For many of the definitions, we have referred to Williamson, Dr. E. (2005) 2005 Survey of Domestic Violence Services Findings. Women’s Aid Federation of England: Bristol. [www.womensaid.org.uk/downloads/WA_survey_dv_service_findings.pdf]
that are specifically funded as a domestic violence service under Supporting People (i.e. ‘people at risk of domestic violence’ are the primary client group), although many boroughs fund this service through other funding streams.

**Women with no recourse to public funds** – this usually refers to women with insecure immigration status who are not eligible for benefits from the public purse including temporary accommodation, housing or income support benefits.

**Community alarm schemes** – a telephone linked and operated system which enables people to call for help in the case of an emergency. In this research, we have only looked at community alarm schemes that are specifically funded as a domestic violence service under Supporting People, although some boroughs fund this service through other funding streams.

**Refuge based services** – services provided in and from a refuge for women and children living in the refuge such as counselling, advocacy, user/peer support groups and children’s services.

**Household** – ‘household’ definitions in this research are ‘single women’ (i.e. women unaccompanied by children), ‘women with children’ or ‘any household’ (for any woman, either single or with dependents).

**Specialist domestic violence services** – is often used to refer to VCOs whose only remit is domestic violence, such as Women’s Aid organisations. In this research, it is used to describe services which are for specific groups of women, for example women:

- from different equalities groups (e.g. Black and Minority Ethnic (BME), disabled, lesbian, bisexual, trans, older and younger women and women from faith groups);
- from a particular geographical area of London (e.g. borough); or
- with particular support needs (such as women with drug and alcohol misuse or mental health needs).

**Provider categories** – in this research, refuge providers have been categorised as one of the following (unless otherwise stated): BME women’s VCOs; women’s housing associations; women’s VCOs (all other women’s VCOs which are not BME-led or BME specialist organisations or housing associations); BME housing associations; and general housing associations (all other housing associations which are not women- or BME-led/specialist organisations).
Report structure

Executive Summary
- Summary of key findings.

Introduction
- Outlines the aims of the research and definitions used.

Methodology
- Describes how data for the research was gathered.
  - Response rates for boroughs and refuge providers.
  - Profile of refuge providers that responded to the survey.

Chapter 1 Supporting People
- Overview of Supporting People spending, across London boroughs, on domestic violence services and breakdown of total Supporting People domestic violence spending by type of service.
  - Profile of providers.
  - Describes the successes and challenges of the Supporting People programme, as reported by boroughs and refuge providers.
  - Describes utilisation problems with services and measures introduced by boroughs to address these issues.

Chapter 2 Refuge accommodation funded by Supporting People
- Examines first and second stage refuge accommodation funded by Supporting People including costs, provider profiles and specialist services.

Chapter 3 Community services funded by Supporting People
- The community services examined in this chapter are floating support, community alarms, sanctuary schemes and ‘other’.

Table A Summary of domestic violence services funded by Supporting People 2007/08
- Table illustrating all services and number of units funded by boroughs through Supporting People for ‘people at risk of domestic violence’ (primary client group).
Chapter 4  Domestic violence services funded by 'other' sources

- Describes the range of services being delivered by refuge providers which are funded by 'other' sources (i.e. not Supporting People) including other local authority funding streams and charitable trusts.

Table B  Domestic violence services delivered by refuges and funded by 'other' sources 2007/08

- Table illustrating the types of domestic violence services funded by other local authority funding streams and charitable trusts.

Chapter 5  Women with no recourse to public funds

- Identifies refuges accommodating women with no recourse to public funds and the costs to providers.

- Describes responses from boroughs on how women with no recourse are, and could be, supported by local authorities and others.

Chapter 6  Unmet needs

- As identified by refuge providers and boroughs.

Chapter 7  Sustainability of refuge providers

- Identifies the financial and other challenges facing refuge providers.

Chapter 8  Conclusions and recommendations

- The main conclusions drawn from the research and recommendations for funders' consideration.

Table C  Summary of key statistics and services delivered by refuges 2007/08

- Table drawing together information on domestic violence statistics and refuge and community services delivered by women's refuges in London.
Methodology

A Steering Group, organised and coordinated by London Councils, has overseen the research and provided guidance and advice on all aspects of the project, particularly the methodology and data analysis. Members of the Steering Group included a range of people with expertise in domestic violence including representatives from London Councils, VCOs and boroughs (Supporting People and Domestic Violence Officers).

Data for this research were gathered through questionnaires, a literature review, analysis of refuge providers' annual audited accounts and *The Gold Book* (2007).

Literature review

Current research on domestic violence was reviewed as well as related documents on strategic decision making mechanisms such as Crime and Disorder Reduction Partnerships and Local Area Agreements. This information assisted the development of the questionnaire and analysis of the findings.

Questionnaires

This report is primarily based on the results of questionnaires distributed to boroughs and refuge providers.

Questionnaires were distributed via email in April 2007. The questionnaire for London boroughs was disseminated by London Councils and the refuge questionnaire by WRC. Some follow-up (by telephone) was conducted with both boroughs and refuge providers to clarify information or further discuss points raised.

---

15 See Appendix 1 for Steering Group members.

Two different questionnaires were developed – one for boroughs and another for refuges – although both covered the same issues. The refuge questionnaire included additional questions about finances, staffing and service users and boroughs were asked about intra- and inter-borough working.

<table>
<thead>
<tr>
<th>Issues covered in borough questionnaire:</th>
<th>Issues covered in refuge questionnaire:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Supporting People domestic violence services contracted for the financial years 2004/05 to 2007/08</td>
<td>1. Supporting People income received to deliver domestic violence services</td>
</tr>
<tr>
<td>2. Other (non-Supporting People) grant and contract funding provided to VCOs to deliver domestic violence projects and services</td>
<td>2. Other (non-Supporting People) grant and contract funding received to deliver domestic violence projects and services</td>
</tr>
<tr>
<td>3. Support provided to women with no recourse to public funds</td>
<td>3. Support provided to women with no recourse to public funds and how funded</td>
</tr>
<tr>
<td>4. Emerging and unmet needs</td>
<td>4. Emerging and unmet needs</td>
</tr>
<tr>
<td>5. Engagement of key borough decision making structures with the VCS</td>
<td>5. Engagement with key borough decision making structures</td>
</tr>
<tr>
<td>6. Intra- and cross- council collaboration on domestic violence policy, services and research</td>
<td>6. Staffing and fundraising</td>
</tr>
<tr>
<td>7. Service user statistics</td>
<td></td>
</tr>
</tbody>
</table>

**Borough responses**

All boroughs were sent the questionnaire except the City of London as it does not fund any domestic violence services through its Supporting People programme. Of the 32 London boroughs surveyed, 23 (72%) replied in full or part to the questionnaire (see Appendix 1 for borough respondents).  

---

<Kensington & Chelsea did not provide Supporting People costs and provider details, Enfield excluded information on the costs of the different Supporting People services the borough commissions and Hammersmith & Fulham did not answer any of the questions about Supporting People in the questionnaire.>
costs (i.e. where the primary client group were ‘people at risk of domestic violence’ in their boroughs) was primarily obtained from borough responses. The (nine) boroughs that did not respond to the questionnaire were asked to provide ‘basic’ information on the type of services, number of units and costs of Supporting People domestic violence services contracted for 2007/08.

Refuge provider responses

Identifying refuge providers

The criteria for inclusion in the research were that respondents had to be a third sector organisation and providing domestic violence refuge accommodation to women (and their children) in London. Non-refuge VCOs and local authorities delivering domestic violence services (regardless of whether they were funded by Supporting People) were not surveyed.

Supporting People and Domestic Violence officers supplied contact details of current providers funded by Supporting People to deliver domestic violence services. Most boroughs responded to this request. A variety of directories were also used including The Gold Book (2006) and WRC’s membership database. In total, 39 refuge providers were identified, 36 of which were known to be in receipt of Supporting People funding from boroughs. Of the 39 refuge providers identified, correct contact details for two of the providers could not be found and questionnaires reached 37 providers. The response rate for refuge providers was 62% (n=23, see Appendix 1 for refuge provider respondents).

In the case of seven providers that did not respond to the questionnaire, basic financial and funding information was ascertained from their audited accounts.

---

18 Supporting People client groups are: People who have been homeless or a rough sleeper; Ex-offenders and people at risk of offending and imprisonment; People with a physical or sensory disability; People at risk of domestic violence; People with alcohol and drug problems; Teenage parents; Elderly people; Young people at risk; People with HIV and AIDS; People with learning difficulties; Travelers; and Homeless families with support needs. This research only examines Supporting People domestic violence services where ‘people at risk of domestic violence’ were the primary client group. Data that falls outside of the research criteria, such as refuges where ‘people at risk of domestic violence’ were the secondary client group or the refuge is not funded by Supporting People, have been noted and included in Table C (p.96), but not included in the analysis of questionnaire findings.

19 Boroughs which did not respond to the questionnaire were: Barking & Dagenham; Bexley; Bromley; Hackney; Harrow; Merton; Newham; Sutton; and Wandsworth.


21 Some information on the services and finances of providers that did not respond to the questionnaire was obtained via publications (including audited accounts) but there are gaps in information and total figures (Chapters 4, 5 and 7 which are focussed on responses from refuges) and should be treated as underestimates. In particular, it is important to note that two of the largest refuge providers did not respond to the questionnaire. Between them, these women’s VCOs manage 16 refuge sites across eight boroughs. However, information on Supporting People funding and units (Chapters 1 to 3) have been captured for these providers through borough responses with the exceptions of Kensington & Chelsea and Hammersmith & Fulham who did not provide information about providers.
Profile of refuge respondents

Respondents to the survey were categorised as women’s VCOs (48%); women’s housing associations (4%); BME women’s VCOs (17%); BME housing associations (13%); and general housing associations (17%).

A total of 62 refuge sites (both first and second stage) were managed by the 23 respondents. Sixty-two per cent of providers managed two or more refuges.

<table>
<thead>
<tr>
<th># Refuges managed</th>
<th># BME housing associations</th>
<th># BME women’s VCOs</th>
<th># General housing associations</th>
<th># Women’s VCOs</th>
<th># Women’s housing associations</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1</td>
<td>2</td>
<td></td>
<td>4</td>
<td>1</td>
<td>8</td>
</tr>
<tr>
<td>2</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>3</td>
<td>1</td>
<td></td>
<td></td>
<td>3</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>4</td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>TOTAL</td>
<td>3</td>
<td>4</td>
<td>4</td>
<td>11</td>
<td>1</td>
<td>23</td>
</tr>
</tbody>
</table>

Thirty-five per cent of providers had refuges in two or more boroughs.

<table>
<thead>
<tr>
<th># Boroughs</th>
<th># BME housing associations</th>
<th># BME women’s VCOs</th>
<th># General housing associations</th>
<th># Women’s VCOs</th>
<th># Women’s housing associations</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>9</td>
<td>1</td>
<td>15</td>
</tr>
<tr>
<td>2</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td></td>
<td>6</td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>TOTAL</td>
<td>3</td>
<td>4</td>
<td>4</td>
<td>11</td>
<td>1</td>
<td>23</td>
</tr>
</tbody>
</table>

22 Does not add to 100% due to rounding.
1. Supporting People

Over £12.1m of boroughs’ Supporting People grants have been spent on services for ‘people at risk of domestic violence’ (as the primary client group) in 2007/08, with individual borough spending ranging from £75,041 to £807,468.23

Domestic violence Supporting People contracts are the single most important source of funding for refuge providers, accounting for, on average, over half of providers’ annual income.24

In July 2007, the Department for Communities and Local Government (DCLG) published the national Supporting People strategy, Independence and Opportunity: Our Strategy for Supporting People. Under the strategy, Supporting People will be integrated into Local Area Agreements and greater levels of decision making will be devolved to local authorities.

VCOs play a vital role in the Supporting People programme – two thirds of providers across England are third sector organisations. It is most appropriate then that one of the four key areas of the national strategy is “building on the already successful partnerships with the Third Sector”. Third sector issues addressed in the national strategy include capacity building for providers to meet the requirements of Supporting People, three year funding, Compact compliance and full-cost recovery – all of which the Government states are necessary to ensure an ‘equal playing field’ amongst providers and a diverse ‘market’. This research provides information about the current ‘market’ and highlights some of the issues that could affect an ‘equal playing field’ and provider diversity in the future – namely issues affecting the sustainability of refuges.

23 Domestic violence Supporting People spending was not reported by Hammersmith & Fulham or Kensington & Chelsea. However, responses from refuge providers (funded by Supporting People) in Hammersmith & Fulham have provided some information but this may not be the total spend.

24 The vast majority of respondents to the refuge survey received Supporting People funding. Only one refuge provider (a recently established refuge in Newham) did not. This refuge relied on small grants, donations and volunteers/unpaid workers.
1.1 Boroughs' Supporting People spending on domestic violence services

Individual boroughs’ spending on services for women at risk of domestic violence, as a proportion of their total Supporting People grants from the DCLG, ranged from 2% to 9% (see Appendix 3 for spending per borough). However, the majority of boroughs spent between 2% and 4% of their grant on domestic violence services.

Figure 1: Number of boroughs by percentage of Supporting People grant spent on domestic violence services 2007/08

Supporting People spending on domestic violence services across all London boroughs has remained fairly consistent over the years, varying slightly from 3% in 2005 to the current 4%.

Four boroughs recorded spending less on domestic violence services in 2007/08 than the previous year:

Croydon -£ 2,815
Hounslow -£ 95,053
Kingston -£ 14,622
Lambeth -£182,187

The decreases in spending in Hounslow and Lambeth are the results of corrections in commissioning purchasing rather than a reduction in services or domestic violence.

25 Excludes the City of London which spends 0% of its Supporting People grant on domestic violence services.
spending per se, as both boroughs were contracting services at prices well above the London average. However, Hounslow continues to spend the highest proportion of its Supporting People grant on domestic violence services (9%) compared to any other London borough.

Brent and Haringey were the only boroughs to have held spending on domestic violence services at the same levels during the three year period.

The remaining boroughs uplifted spending, most commonly up to 3% to 4%. However, some boroughs have increased domestic violence spending by greater amounts – Camden spent £282,195 (53%) more on domestic violence services for 2007/08 than it did in 2005/06 and Havering has increased the proportion of its domestic violence spend from 5% to 7%, resulting in an extra £62,000 for services this year.
1.2 Types of domestic violence services funded

The domestic violence services funded by Supporting People (see Chapters 2 and 3), as identified by borough officers, fell into two categories:

1. refuge accommodation – first and second stage refuges (Chapter 2); and
2. community services – floating support, sanctuary schemes, community alarms and other services (Chapter 3).

Overall, boroughs spent 87% of their Supporting People domestic violence funding on accommodation based services (mostly first stage refuges and some second stage accommodation) in 2007/08. Community services accounted for 13% of spending.

First stage accommodation 81%
Second stage accommodation 6%
Floating support 12%
Other (sanctuary schemes, community alarms, resettlement pilot) 1%

Figure 2: Breakdown of Supporting People funding on domestic violence services 2007/08

Over a quarter of contracts are for specialist refuges or floating support for BME women (predominantly women from the Indian Subcontinent) or women from faith communities.
1.3 Profile of providers

For 2007/08, boroughs recorded 123 different Supporting People contracts, for both accommodation and community services, with 43 providers. Of providers, 67% were women’s VCOs, 26% were general or BME housing associations and 7% were services managed by local authorities.

<table>
<thead>
<tr>
<th>Provider category</th>
<th>Total # of providers</th>
<th>As % of all providers</th>
<th>As % of VCS providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Women’s VCOs</td>
<td>20</td>
<td>47%</td>
<td>50%</td>
</tr>
<tr>
<td>BME women’s VCOs</td>
<td>7</td>
<td>16%</td>
<td>18%</td>
</tr>
<tr>
<td>Women’s housing associations</td>
<td>2</td>
<td>5%</td>
<td>5%</td>
</tr>
<tr>
<td>BME housing associations</td>
<td>3</td>
<td>7%</td>
<td>8%</td>
</tr>
<tr>
<td>General housing associations</td>
<td>8</td>
<td>19%</td>
<td>20%</td>
</tr>
<tr>
<td>Other (e.g. local authority)</td>
<td>3</td>
<td>7%</td>
<td>Not applicable</td>
</tr>
<tr>
<td>TOTAL</td>
<td>43</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

Thirty-eight providers managed first and/or second stage refuges and the remaining five were non-refuge providers (i.e. delivering community services only).

Over half (51%) of providers named by boroughs delivered two or more different types of services, most commonly refuge accommodation and floating support, followed by first and second stage refuge accommodation.

In addition, 35% of providers, particularly the largest women’s VCOs (one of which was contracted in six boroughs) and housing associations, had Supporting People contracts in multiple boroughs. Between them, three of the larger providers had contracts in almost half of all London boroughs.

---

26 Domestic violence Supporting People providers were not named by Hammersmith & Fulham or Kensington & Chelsea. However, responses from refuge providers (funded by Supporting People) in Hammersmith & Fulham have provided some information but this may not be the total number of providers.

27 Of the five non-accommodation providers, three were women’s VCOs and two were local authority managed services.
On average, boroughs commissioned two different providers (rising to three for Inner London boroughs) to deliver services.\textsuperscript{28} Haringey had the most diverse provider base, funding seven different organisations in 2007/08.

<table>
<thead>
<tr>
<th>Borough</th>
<th># Women’s VCOs</th>
<th># BME women’s VCOs</th>
<th># BME housing associations</th>
<th># General housing associations</th>
<th># Other \textsuperscript{30}</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Barnet</td>
<td></td>
<td>1</td>
<td>1</td>
<td></td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Bexley</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Brent</td>
<td></td>
<td></td>
<td>1</td>
<td>1</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Bromley</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Camden</td>
<td>1</td>
<td></td>
<td>2</td>
<td></td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>City of London</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Croydon</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Ealing</td>
<td>2</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>Enfield</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td></td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>Greenwich</td>
<td>3</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>Hackney</td>
<td>1</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham\textsuperscript{31}</td>
<td></td>
<td></td>
<td>1</td>
<td>2</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>Haringey</td>
<td>3</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td></td>
<td>7</td>
</tr>
<tr>
<td>Harrow</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Havering</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Hillingdon</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
</tr>
</tbody>
</table>

\textsuperscript{28} Excludes Kensington & Chelsea and only partial information from refuge providers available for Hammersmith & Fulham.

\textsuperscript{29} This is not the total number of providers as some have contracts with multiple boroughs.

\textsuperscript{30} E.g. local authorities, multi-agency partnerships etc.

\textsuperscript{31} No data from borough. Based on refuge provider responses so may not be the total.
Table 4: Number of providers by category contracted by boroughs to deliver Supporting People domestic violence services 2007/08

<table>
<thead>
<tr>
<th>Borough</th>
<th># Women's VCOs</th>
<th># BME women's VCOs</th>
<th># BME housing associations</th>
<th># General housing associations</th>
<th># Other</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hounslow</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Islington</td>
<td>2</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>Kensington &amp; Chelsea 32</td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Kingston</td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Lambeth</td>
<td>3</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>Lewisham</td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Merton</td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Newham</td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Redbridge</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Richmond</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Southwark</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Sutton</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Tower Hamlets</td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Waltham Forest</td>
<td>2</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>Wandsworth</td>
<td>2</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>Westminster</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2</td>
</tr>
</tbody>
</table>

32 Ibid.
1.4 Contract prices

During 2006/07, Supporting People funding accounted, on average, for over half (54%) of all providers’ income and it is for this reason that the research has focussed on Supporting People more than any other source of funding. Any changes to Supporting People funding, particularly the loss of a contract or reduction in contract price or even lack of inflationary uplift, are likely to have a significant impact on providers.

Most boroughs made small increases in their total Supporting People domestic violence spend from 2006/07 to 2007/08. However, this has not necessarily resulted in an even spread of funding increases across providers. In the case of providers with multiple contracts within and across boroughs, inflationary uplifts or other increases in funding (or lack of) were highly variable.

For 2007/08, 43% of contracts had an uplift of 4% or less. Four per cent received an increase (greater than 4%). Over 30% of contracts have stayed at the same level of funding and 2% received the same contract price for an increased number of units, representing a loss of income in real terms. Sixteen per cent of contracts have had funding reduced to deliver the same number of support units.

Figure 3: Contract status – funding and unit levels between 2006/07 and 2007/08
1.5   **Successes and challenges of the Supporting People programme**

In the borough questionnaire, officers were asked to comment on what they believed were the successes and challenges of the Supporting People programme.

### 1.5.1 Successes

The two most reported successes of the Supporting People programme by boroughs were:

1. **Improvements in the quality of services:**

   “One of the big successes of the Supporting People programme in [this borough] is the Quality Assessment Framework. It has been instrumental in establishing improvement plans for individual organisations, raising standards of support services and acknowledging the good/excellent work of our providers.”

   “I believe the implementation of the Supporting People programme has had significant achievements in assisting support providers to develop minimum standards in relation to quality performance and service user involvement.”

2. **Strategic and ‘joined up’ planning and commissioning of services across the borough:**

   “The Supporting People programme has helped focus attention on housing related support services for a previously disparate range of vulnerable adults and to identify needs and gaps in the supply of services in a co-ordinated manner. This has led to the identifying of new services for commissioning.”

   “The Supporting People Programme has enabled [us] to deliver high quality and strategically planned housing related support services, which are cost effective and reliable.”

   “The...strategic relevance of all Supporting People funded domestic violence services in the borough has been improved.”

Other successes identified were:

- services which are cost effective;
- a greater degree of security for providers (because Supporting People funding has generally been consistent);
- better outcomes for service users;
• greater service user involvement; and
• improved relationships and partnership working between local authorities and the VCS, resulting in better services:

“Partnership working...has resulted in an improved ability to identify areas of unmet need, for example, services for young women 16-19 experiencing domestic violence.”

“The Supporting People Team has been instrumental in improving partnership working between statutory and voluntary agencies, in particular the housing sector, to ensure that the front-line service delivery is responsive to the needs of the victims and families. This has led to the formation of the Housing Sector Domestic Violence Lead Officers Group which aims to raise awareness of domestic violence for front-line officers, improve partnership working across the housing sector and to improve front-line practices and service delivery.”

Figure 4: Percentage of boroughs by comment
1.5.2 Challenges

Borough officers named many ‘challenges’ in the Supporting People programme.

In particular, boroughs identified problems with the procurement model in enabling and sustaining a diverse provider base:

“The challenges have been, and will continue to be, stabilising the market place in a climate of funding uncertainty and constant change. Providers, especially smaller organisations and the voluntary sector, need to be supported to better understand procurement and tendering processes.”

“The future procurement of services will involve competitive tendering and there may be a capacity issue for [smaller] organisations.”

“Local Authorities will need to be mindful of the challenges of creating a stable and vibrant market with a diverse and sustainable supply of providers.”

Boroughs also acknowledged the strain that the bureaucracy and requirements of Supporting People has on providers:

“For small organisations it is difficult to meet the requirements of Supporting People in terms of the time it takes to complete forms and develop an appropriate infrastructure. Because of this, managers of refuges do not have enough time to apply for other funding for needed services such as a refuge based children’s worker.”

“Another challenge which has been noted has been [ensuring] providers of support services understand the requirements of the programme and that this is engrained within the structure of the organisation so that when there is staff turnover the requirements of the programme are maintained.”

Other challenges identified were:

- Supporting People grants from DCLG are not reflective of true need in the borough.
- Inadequate administration grants from DCLG to boroughs to manage Supporting People programmes.
- Late grant announcements from DCLG.
- Managing year-on-year cuts to Supporting People grants without compromising services commissioned.
- Constant shifts in central government priorities.
• The 'one size fits all approach' introduced by Supporting People, reducing variation between the quality standards and differing client groups which some providers believe are inappropriate for their services.

• Managing providers’ expectations.

• Inconsistent application across boroughs, which was noted as being particularly frustrating for providers delivering in multiple boroughs.

• Lack of benchmarking for boroughs to refer to.

• Being able to demonstrate positive service user outcomes more effectively.

• Maintaining the profile of domestic violence services within the Supporting People programme as a whole.

• Partnership working and joint commissioning with other teams or local authorities that are experiencing a period of instability and change (such as Primary Care Trusts).

• The impact of public sector procurement rules on (capital) development of refuges (e.g. so as to increase bed spaces):

“Revenue for new Supporting People services is subject to public sector procurement regulations. It is difficult for housing associations to develop new accommodation based supported housing services, such as women’s refuges, because the interface of Government policies on target rents, Housing Corporation capital grants and public sector procurement regulations makes it uneconomic or too risky. There would be little point in calling for more capital investment in women’s refuge provision without also calling for changes to these policies.”

1.5.3 Utilisation/occupancy problems

The average utilisation (community services) and occupancy (accommodation) benchmark across London was 85%, with rates varying between 80% and 95%.

Eleven boroughs reported that 15 Supporting People domestic violence providers had experienced problems with under-utilisation/occupancy. In particular, boroughs were most likely to report utilisation/occupancy problems with floating support services and some specialist refuges.
Table 5: Reasons for under-utilisation/occupancy and measures (borough responses)

<table>
<thead>
<tr>
<th>Reasons for under-utilisation/occupancy</th>
<th>Measures put in place to address under-utilisation/occupancy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of referrals</td>
<td>• Promoted the service</td>
</tr>
<tr>
<td></td>
<td>• Expanded referral routes</td>
</tr>
<tr>
<td></td>
<td>• Criteria expanded</td>
</tr>
<tr>
<td></td>
<td>• Regular monitoring</td>
</tr>
<tr>
<td></td>
<td>• Action plans</td>
</tr>
<tr>
<td>Small scheme (only six units) so turnaround would affect the rate disproportionately</td>
<td>• Regular monitoring</td>
</tr>
<tr>
<td>Drastic dips in women accessing the refuge during Ramadan and Eid which did not stabilise for sometime (six months)</td>
<td>• Review and further research to be undertaken</td>
</tr>
<tr>
<td>Policies and procedures not robust and some poor quality management</td>
<td>• Service reviews with action plans implemented</td>
</tr>
<tr>
<td>Users failed to take up the offer of accommodation</td>
<td>• Monitoring</td>
</tr>
<tr>
<td>Provider failed to spend the full allocation due to under staffing</td>
<td>• Staff pay reviews in line with other London boroughs</td>
</tr>
<tr>
<td></td>
<td>• £70,000 reclaimed by Supporting People</td>
</tr>
<tr>
<td></td>
<td>• Regular monitoring</td>
</tr>
<tr>
<td>Service not strategically relevant</td>
<td>• Service decommissioned</td>
</tr>
<tr>
<td>Lower than usual standard of accommodation with shared facilities</td>
<td>• Improvements and extensions to the accommodation included in the council’s Capital Strategy</td>
</tr>
</tbody>
</table>

In contrast, provider respondents reported consistently high occupancy rates and could often not meet demand. During 2006/07, over 2,300 women were turned away from the refuges of providers responding to the survey, overwhelmingly because the refuge was full. In particular, BME providers were more likely to turn women away for this reason.

33 The borough respondent went on to explain that “the Service Manager explained that this was to be expected as Muslim women find this period a particularly difficult time to leave home”.


1.5.4 Boroughs' recommendations

Boroughs made a number of recommendations on improvements to the Supporting People programme:

- Generally, on all aspects of Supporting People (not just domestic violence services), boroughs wanted the DCLG to provide clearer direction about the future of the programme. This included faster implementation of the Distribution Formula (“to ensure an ‘even playing field’ between boroughs”), clarity about grants to boroughs post-2010 and the publication of the national Supporting People strategy.\(^34\)

- Despite boroughs’ comments that strategic working and joint arrangements were a success of Supporting People, many boroughs believed there was still considerable room for improvement. Greater strategic planning within and across boroughs, including sub-regional Supporting People programmes to improve consistency, transparency and workloads of both boroughs and providers was suggested.

- ‘Lighter touch’ monitoring of providers.

- Capacity building programmes for existing and potential providers to ensure an effective, sustainable and diverse provider base.

- Establish methods of linking capital expenditure to Supporting People revenue funding.

- Greater flexibility that will enable responses to different client groups, allow unmet and emerging needs to be addressed effectively, fund children’s services and widen eligibility criteria.

- Mapping of service provision to identify duplication and enable better benchmarking.

- Consistent service user involvement across boroughs.

---

\(^{34}\) The national strategy has since been published by the DCLG in July 2007 (after questionnaires for this research were submitted). The strategy, Independence and Opportunity: Our Strategy for Supporting People, is a framework for the devolution of decision making on all Supporting People services (including funding) to local government.
1.6 Impacts of Supporting People on refuge providers

Refuge providers were asked to comment on any impacts that Supporting People has had on their organisations. Their responses identified seven key issues, many of which were also named by borough respondents.

1.6.1 Improved quality and accountability

Refuge providers, generally, agreed with boroughs that Supporting People had improved the quality of services and accountability systems:

“Supporting People funding enabled staffing levels to be increased and this impacted on the quality of the service provided to users.”

“We have been able to provide some consistent services [and] improve quality.”

“[The positive impact has been] streamlining our processes and making us look at how things like monitoring and evaluation is completed and recognised.”

“Supporting People has had some positive effects associated with the imposition of a comprehensive and externally validated quality framework.”

1.6.2 Bureaucracy of Supporting People

All providers commented that the bureaucracy of the Supporting People programme has significantly reduced time spent with service users:

“With the introduction of the QAF [Quality Assessment Framework], it has meant that we are evidencing the work we do, much more so than previously. However, it has also meant that the attendant paper work and monitoring has detracted from the amount of contact time with the client. Much of the time is taken up with paper work. Having to introduce risk assessment and support plans has meant that key-working is approached in a more systematic way than previously but this can also at times seem more about ticking boxes than doing quality work.”

“The paper work generated by the Supporting People programme has resulted in restricting the hours of support provided to [our] BME client group. Due to being a specialist project and the needs of our client group being high, the workers feel they are not able to provide as much support due to constantly having to deal with paper work.”
“Limited time spent with service users regarding emotional and psychological support, with possible risk of return to perpetrator. Lack of external support such as counselling due to high waiting lists and refuge workers striving to meet demands of Supporting People instead of demands of service users.”

“Staff have spent many days engaged in Supporting People inspections as well as many days preparing for them.”

“[The] additional administration, monitoring and evaluation equates to approximately half day a week on my time on average.”

“Frontline staff do feel that so much has to be evidenced in record keeping that it sometimes reduces the amount of spontaneous time they have with the users – contact tends to be more pre-planned e.g. key working sessions, appointments etc.”

It is clear that the excessive reporting requirements are diverting resources away from front-line support of service users and, thereby, reducing the value for money that local authorities are seeking. This issue is also acknowledged by boroughs. Despite calls from the Better Regulation Task Force for Government to find better and more appropriate ways of reporting how funds have been used and its recommendations on a number of ways to help reduce unnecessary regulatory burdens placed on VCOs, the Government has yet to respond.35

1.6.3 Funding

Most refuges agreed that Supporting People has provided a greater sense of financial security because funding since 2003/04 has been generally consistent. However, there were many concerns that Supporting People has reconfigured refuge services, funding is inadequate, increases are minimal and support for specific children’s is excluded:

“Supporting People funding has enabled us to provide refuge accommodation to women, however it has not been able to meet all their holistic needs i.e. counselling, group work, life skills sessions. In addition there has been no recognition of children’s services and meeting their support needs, which is paramount as we work with the whole family in domestic violence cases.”

“Expectations from Supporting People have continuously increased in the quality and range of services we offer to women. However it has not been reflected in the funding allocated. This has placed additional pressures on providers to meet the demands of Supporting People and provide an affordable high quality service.”

“In the beginning it was great to know we would receive this funding, but after 2003/4 we could see that the funding was just not enough. We underestimated the cost of the project as a result of it thriving. Its success meant that we could not stop the service but rather [had to] consider merging possibilities.”

“Our service has seen a reduction in staff/client ratio in the refuges. This is because we have been given an additional 16 outreach clients per annum. Secondly, pre-Supporting People, our local authority grant was used to fund two Children’s Workers. Supporting People will only fund one post and this has been renamed "Family Support Worker". We have had to fundraise year-on-year for the second post.”

1.6.4 Lack of flexibility

Like some boroughs, refuges also commented on the ‘one size fits all’ nature of the Supporting People programme. In particular, refuge providers identified that Supporting People is unable to accommodate the different and/or multiple needs of women experiencing domestic violence. This may impact on how willing refuges are to accept women with higher level support needs such as women from BME communities and other women, such as those with substance misuse issues or sex workers:

“The amount of support that goes into working with mothers is not recognised [and neither is it recognised that] BME clients have high support needs due to residing with the extended family and having to be dependant on family.”

“Women can present with multiple needs in addition to DV i.e. substance misuse and mental health which places further demands on the support staff /time.”

“Supporting People needs to look at culturally specific projects and in-house activities and services for women and children and the extra support hours needed to provide a language specific service to women who do not understand English – the VFM [value for money] principle.”

1.6.5 Commissioners

Concerns were expressed about the lack of knowledge about domestic violence amongst commissioners and the subsequent impact on services commissioned:

“Local Supporting People teams do not always have expertise in the effective commissioning of domestic violence services. In one area, [we] ran an excellent floating support service. This was re-tendered and the new contract won by a provider which was extremely cheap per support hour but had no record whatsoever
of domestic violence provision. They subsequently approached [us] for advice after winning the contract as they were very nervous about running the service and managing the risks, either to women or to their own staff.”

"We have been invited to bid for refuge tenders where the specification included, for example, ...male role models, in one case, [for a] very cheap rate, or in another that staff had to provide supervision to women during mealtimes. Although [we have] a lot of experience in handling development of new services and of working with housing departments and social services on such projects, with the rigid tendering processes there is no longer the opportunity to explain the inappropriateness of such approaches and we have been obliged to decline to bid."

1.6.6 Inappropriate outcomes framework

As also noted by boroughs, some refuge providers felt that the outcomes framework, which is applied across all Supporting People services, was inappropriate for domestic violence:

“The new outcomes framework is also very inappropriate for domestic violence services and [we have] been consulting women about this and obtaining their feedback.”

This is an issue which has been identified nationally by women’s refuges. The Women’s Aid Federation of England (WAFE) is currently developing National Service Standards for Domestic and Sexual Violence (NSSDSV) as part of the National Domestic Violence Action Plan (led by the Home Office).

The NSSDSV aims to provide a more effective quality assessment framework – a framework based on the specific and specialist needs of domestic (and sexual) violence services to provide high quality services and support to a survivor and her children. The NSSDSV are intended to provide a benchmark for quality domestic (and sexual) violence services across the UK and are intended to replace the standard generic Supporting People standards for domestic violence services. The NSSDSV will be consulted on later in 2007 and boroughs will be invited to participate.36

______________________________
36 For more information about the NSSDSV, see the WAFE website – www.womensaid.org.uk
2. Refuge accommodation funded by Supporting People

According to WAFE, by 2004/05 the number of domestic violence residential properties across England had increased to 3,851 bed spaces - a total increase of 26% from three years earlier.\(^{37}\) No figures were given for London but according to responses from boroughs, at least 16% of the 3,851 bed spaces were funded by London boroughs through their Supporting People domestic violence spends.\(^{38}\)

Point 2 of the Best Value Performance Indicator (BVPI) 225 states that there should be a minimum of one refuge place per 10,000 population in each local area. Whilst local authorities do not necessarily have to fund the refuge provision to meet BVPI225, the provision must be specific emergency accommodation for women and children. From information gauged from this research, some 27% of boroughs may not be meeting the indicator (see Table C, p.96), although there may be other refuges not funded by local authorities and that have not been identified.

In 2007/08, London boroughs funded a total of 911 bed spaces – 805 in first stage and 106 in second stage refuges. Boroughs allocated over £10.5m to accommodation, which accounted for 87% of all Supporting People funding spent on services for 'people at risk of domestic violence'. While most bed spaces were general (i.e. not specific to any particular groups of women), 26% of all bed spaces were for BME women.

Research into London Supporting People services in 2005 found that of domestic violence services, some boroughs were providing "significant capacity to the capital" and that 30% of household units funded by Supporting People were supplied by five boroughs.\(^{39}\) This is also the case for bed spaces in 2007/08. Over a quarter of all first and second stage bed spaces are funded by five boroughs – Camden, Hackney, Ealing, Lambeth and Lewisham.\(^{40}\)


\(^{38}\) Based on responses of 22 boroughs which found that these boroughs alone funded 634 bed spaces, through Supporting People, in 2004/05.


\(^{40}\) See Table C (p.86).
2.1 First stage refuge accommodation

Boroughs in this research reported 805 first stage refuge bed spaces funded by Supporting People for 2007/08 (see Table A, p.62).\(^{41}\) First stage refuge accommodation accounted for 81\% of all Supporting People domestic violence spending across boroughs.

All boroughs except the City of London fund first stage refuge accommodation through Supporting People.

2.1.1 Changes in bed space numbers 2004/05 to 2007/08

Of the 21 boroughs that provided detailed information about Supporting People services for the years 2004/05 to 2007/08, there was a net increase of 27 bed spaces funded. Sixty-two per cent (n=13) of boroughs maintained the same level of bed spaces during this period. Barnet, Enfield, Southwark, Tower Hamlets, Camden increased bed spaces funded whilst Brent, Greenwich and Croydon decreased units.\(^{42}\)

Of current refuge bed spaces:

- 51\% are in Inner London and 49\% in Outer London boroughs; and
- the majority (82\%) were for ‘any household’, 9\% were for ‘single women’, and 6\% specifically for ‘women with children’ (the household for 3\% was not stated).

Thirteen per cent of boroughs identified the need for more bed spaces/refuges. Tower Hamlets reported that it is working with a large registered social landlord to develop further refuge accommodation to increase bed spaces and facilities in the borough.

2.1.2 Profile of providers

Thirty-seven different providers of refuge accommodation were identified by boroughs including housing associations, women’s VCOs and one local authority (Waltham Forest).\(^{43}\)

For each of the provider categories, the proportion of Supporting People funding received for first stage accommodation roughly matched the share of all bed spaces.

\(^{41}\) Refuge bed spaces funded by Supporting People were not given by Hammersmith & Fulham or Kensington & Chelsea. However, responses from refuge providers in these boroughs have provided some information but this may not be the complete picture.

\(^{42}\) Increases in bed spaces: Barnet=8; Enfield=10, Southwark=8; Tower Hamlets=6; and Camden=6. Decreases in bed spaces: Brent=7; Croydon=2; and Greenwich=2.

\(^{43}\) No information for Kensington & Chelsea and based on refuge responses for Hammersmith & Fulham.
Table 6: Bed space breakdown by category of provider 2007/08

<table>
<thead>
<tr>
<th>Category of provider</th>
<th># Providers</th>
<th>% of all providers</th>
<th># Bed spaces</th>
<th>% of all bed spaces</th>
<th>% of SP funding on first stage accomm.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Women’s housing associations</td>
<td>2</td>
<td>5%</td>
<td>93</td>
<td>12%</td>
<td>11%</td>
</tr>
<tr>
<td>BME housing associations</td>
<td>2</td>
<td>5%</td>
<td>49</td>
<td>6%</td>
<td>8%</td>
</tr>
<tr>
<td>General housing associations</td>
<td>7</td>
<td>19%</td>
<td>145</td>
<td>18%</td>
<td>17%</td>
</tr>
<tr>
<td>BME women’s VCOs</td>
<td>7</td>
<td>19%</td>
<td>72</td>
<td>9%</td>
<td>10%</td>
</tr>
<tr>
<td>Women’s VCOs</td>
<td>18</td>
<td>49%</td>
<td>431</td>
<td>54%</td>
<td>55%</td>
</tr>
<tr>
<td>Local authorities</td>
<td>1</td>
<td>3%</td>
<td>15</td>
<td>2%</td>
<td>(&lt;0.1%)</td>
</tr>
<tr>
<td>TOTAL</td>
<td>37</td>
<td>100%</td>
<td>805</td>
<td>100%</td>
<td></td>
</tr>
</tbody>
</table>

2.1.3 Specialist refuges

A quarter (n=201) of all first stage bed spaces were in specialist refuges and accounted for 24% of spending on first stage accommodation.

Of specialist bed spaces, 178 were for BME women, 15 for women from faith groups and eight for women from a specific borough. There were 15 providers delivering these specialist services in 17 boroughs.

- Women from the Indian Subcontinent: Brent, Greenwich, Haringey, Kingston, Lambeth, Merton, Newham, Richmond, Tower Hamlets, Waltham Forest, Wandsworth
- African and Caribbean women: Greenwich
- Turkish and Iranian women: Waltham Forest

---

44 Ninety-three per cent of these bed spaces are delivered by one organisation.
45 Eight Inner London boroughs and nine in Outer London.
In addition, one of the providers funded by Barnet to deliver general first stage accommodation also offers specialist services for women with mental health support needs. A provider funded by Southwark offers specialist services to women with substance misuse support needs. However, these refuges are not exclusive to these groups of women.

### 2.1.4 Specialist refuges for BME women and women from faith groups

There were 14 different providers of ethnic or faith specific first stage refuge accommodation. As expected, BME women's VCOs were the main providers of specific services followed by (general) women's VCOs, BME housing associations and then general housing associations. However, it was general women's VCOs and BME housing associations that were more likely to have contracts for specialist first stage refuges in multiple boroughs:

- With the exception of one women's organisation, all of the women's VCOs and BME housing associations providing specialist refuges did so across two or more boroughs.
- In contrast, all of the general housing associations and BME women's VCOs (except for one BME women's VCO) delivered specialist services in one borough only.
<table>
<thead>
<tr>
<th>Provider category</th>
<th># providers delivering EFS bed spaces</th>
<th>As % of providers delivering EFS bed spaces</th>
<th>Total # EFS bed spaces provided</th>
<th>As % of ESF bed spaces</th>
<th>% of all funding to deliver ESF bed spaces</th>
</tr>
</thead>
<tbody>
<tr>
<td>Women’s VCOs</td>
<td>3</td>
<td>21%</td>
<td>52</td>
<td>27%</td>
<td>27%</td>
</tr>
<tr>
<td>Women’s BME VCOs</td>
<td>7</td>
<td>50%</td>
<td>72</td>
<td>38%</td>
<td>40%</td>
</tr>
<tr>
<td>BME housing associations</td>
<td>2</td>
<td>14%</td>
<td>49</td>
<td>26%</td>
<td>27%</td>
</tr>
<tr>
<td>General housing associations</td>
<td>2</td>
<td>14%</td>
<td>18</td>
<td>9%</td>
<td>6%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>14</td>
<td>100%</td>
<td>191</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>
2.2  Unit price analysis of first stage refuge accommodation

Although the percentage of funding received by category of provider roughly matches the percentage of bed spaces delivered (see Table 7), there were significant differences in unit prices between organisations both within these categories and across different types of contracts.

The overall average unit price of first stage accommodation (for any household type, specialism or location) was £13,659.

Specialist refuges for BME women accounted for 38% of all contracts above the average unit price and 21% of contracts below the average. However, the 38% of contracts above £13,659 tended to be towards the lower end of the range of unit prices above this average. Only two of the ten contracts with the highest unit prices were BME services.

The number of bed spaces in any one contract to deliver first stage accommodation varied from three to 40 units.

There were many different contract combinations of service levels and household type. However, of all of these possible combinations, half of all contracts (41% of all bed spaces) were for services for any household and providing 9am to 5pm weekday cover. This was the most ‘typical’ type of contract for first stage refuge accommodation regardless of specialism.

2.2.1 Determining unit prices

Many factors influence contract prices and the cost variations between services, both within and across boroughs. These include the level of each borough’s Supporting People budget, local needs, the type of service commissioned, commissioners’ knowledge about domestic violence and interventions, providers’ negotiation skills and the costs for which providers are able/willing to deliver a service.

However, from the information provided by boroughs and refuges, there were few London-wide patterns regarding contract prices, which varied considerably, even amongst similar services. Where there were patterns by certain types of services, these are detailed in the sub sections below.

Other factors, for example additional costs associated with premises, were examined to determine if these had an impact on how contract prices were determined and the variations across London.
For example it could be assumed that:

1. Providers who had to rent their refuge premises may receive a higher contract/unit price than those who own their own premises or receive free rent, to reflect the extra costs in delivering their service. However, this was not the case. In fact, of the eleven providers renting premises (21 refuge sites between them), 72% received a lower unit price than the average.

2. Providers who had two or more refuges in a borough would have additional utility costs etc than organisations with all bed spaces at just the one refuge site, and therefore this would be reflected in the contract price. Again, this was not the case and of the 19 providers that had two or more refuges in a borough, 58% received a lower unit price than the average.

2.2.2 The impact of unit prices

While there doesn’t appear to be any standard benchmarking or methodology across all London boroughs to determine contract prices, it is clear that unit prices have an impact on providers and the service they are able to deliver to women.

Providers with lower than average unit prices were 60% more likely to report 10% or more of women returning to perpetrators after leaving refuges.

In 2006, Inner London boroughs conducted a benchmarking exercise which showed that staffing levels were generally higher for providers with unit prices above £206 per week. Refuge providers with unit prices greater than £206 per week employed 33% more managers and 59% more front-line staff, and provided 54% more support hours per week and 28% more support hours per head than providers with unit prices below this figure.

2.2.3 Refuges for single women

Across contracts, services for ‘single women’ were more likely to have a lower average unit price than for refuges for ‘any household’ or ‘women with children’, with the exception of contracts for single BME women in Outer London. Generally, contracts for refuge accommodation for ‘women with children’ had the highest unit price, followed by refuges ‘for any household’.
Despite a general pattern in regards to average unit prices for different household types (as shown in Figure 5 above), the range between the lowest and highest unit price was significant.

Table 8: Unit price variation between contracts for first stage accommodation 2007/08

<table>
<thead>
<tr>
<th>Variation</th>
<th>Single women average unit price</th>
<th>Any household average unit price</th>
<th>Women with children average unit price</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Lowest unit price</td>
<td>Highest unit price</td>
<td>Lowest unit price</td>
</tr>
<tr>
<td>All contracts</td>
<td>£3,553</td>
<td>£15,195</td>
<td>£2,269</td>
</tr>
<tr>
<td>5 day, day cover for all contracts</td>
<td>£3,553</td>
<td>£9,573</td>
<td>£6,253</td>
</tr>
<tr>
<td>All contracts for BME services</td>
<td>£9,573</td>
<td>£14,214</td>
<td>£10,506</td>
</tr>
<tr>
<td>5 day, day cover contracts for BME services</td>
<td>£9,573 – only one service</td>
<td>£10,506</td>
<td>£22,358</td>
</tr>
<tr>
<td>All contracts Inner London</td>
<td>£9,573</td>
<td>£10,092</td>
<td>£10,116</td>
</tr>
</tbody>
</table>
Table 8: Unit price variation between contracts for first stage accommodation 2007/08

<table>
<thead>
<tr>
<th>Variation</th>
<th>Single women average unit price</th>
<th>Any household average unit price</th>
<th>Women with children average unit price</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Lowest unit price</td>
<td>Highest unit price</td>
<td>Lowest unit price</td>
</tr>
<tr>
<td>5 day, day cover contracts Inner London</td>
<td>£9,573 – only one service</td>
<td>£10,116</td>
<td>£17,488</td>
</tr>
<tr>
<td>All contracts Outer London</td>
<td>£3,553</td>
<td>£15,195</td>
<td>£22,358</td>
</tr>
<tr>
<td>5 day, day cover contracts Outer London</td>
<td>£3,553</td>
<td>£6,253</td>
<td>£22,358</td>
</tr>
<tr>
<td>Contracts Inner London for BME services</td>
<td>£9,573 – only one service</td>
<td>£11,169</td>
<td>£15,956</td>
</tr>
<tr>
<td>5 day, day cover contracts Inner London for BME services</td>
<td>£9,573 – only one service</td>
<td>£11,169</td>
<td>£15,956</td>
</tr>
<tr>
<td>All contracts Outer London for BME services</td>
<td>£14,214</td>
<td>£15,195</td>
<td>£22,358</td>
</tr>
<tr>
<td>5 day, day cover contracts Outer London for BME services</td>
<td>£0 – no services</td>
<td>£10,506</td>
<td>£22,358</td>
</tr>
</tbody>
</table>

2.2.4 Unit prices for contracts for 15+ bed spaces and seven day coverage

While 80% of all contacts are for 10 units or less, the five contracts with the largest number of bed spaces accounted for 22% of all first stage refuge accommodation bed spaces funded, yet made up only 9% of all contracts.

Across all contracts for first stage refuge accommodation (for all household types, and regardless of service level, location of refuge or specialism) the average unit price for contracts for larger numbers of units (15 bed spaces or more) was lower than the average unit price across all accommodation and was significantly less that the average unit price of contracts for seven bed spaces or fewer.

Table 9: Unit prices by size of contract

<table>
<thead>
<tr>
<th>Average unit price across all contracts</th>
<th>Average unit price for contracts for 15 or more bed spaces</th>
<th>Average unit price for contracts for 7 or fewer bed spaces</th>
</tr>
</thead>
<tbody>
<tr>
<td>£13,659</td>
<td>£11,829</td>
<td>£16,631</td>
</tr>
</tbody>
</table>
There were 14 contracts for 15 or more bed spaces – 14% were delivered by BME housing associations, 7% by women’s housing associations, 7% by general housing associations and 71% by women’s VCOs.\footnote{Lower contract prices for larger contracts are likely to reflect the economy of scale achieved but requires further investigation.}

With the exception of one contract, the average unit price of services with seven day coverage was also less than the overall average (£11,587 compared with £13,659). Of contracts for seven day cover, half were for 20 bed spaces or more.

There were no other findings in the research to indicate why larger contracts and those for seven day coverage had a lower than average unit price compared to the overall average, such as specialism or location of refuge. While most of the providers delivering contracts for the highest number of bed spaces and/or seven day coverage were some of the bigger organisations funded by boroughs, this was not the case for four of the providers.

2.2.5 Specialist refuges for BME women

For ‘typical’ contracts (i.e. weekday cover, for ‘any household’), the average unit prices for specialist refuges for BME women was 6% higher than the than the overall average. It is likely that the slightly higher average unit cost for specialist BME refuges reflects the higher level, multiple and/or specialist support needed by BME women as described by refuges in Chapter 1. However, BME women’s refuges also stated that Supporting People funding was inadequate in light of the various and complex support needs of service users.

Average unit prices for specialist BME first stage accommodation in Outer London were 7% higher than in Inner London boroughs. Providers of specialist services for BME women in Inner London boroughs were BME housing associations (26% of bed spaces), BME women’s VCOs (39% of bed spaces) and (general) women’s VCOs (35% of bed spaces). However the average unit price for women’s VCOs was 8% more than for BME women’s VCOs and 17% more than for BME housing associations.

2.2.6 Benchmarking contract prices and ‘value for money’

It is important to note that a straight unit price analysis (contract price divided by number of units) does not take into account crucial aspects of a ‘value for money’ analysis such as the quality of the service, the various outcomes achieved and impact on service users lives.
The analysis undertaken here does not take into consideration other methods that are being used (and perhaps are preferred) by boroughs to benchmark the price of contracts and ‘value for money’. The benchmarking exercise conducted by Inner London boroughs used three different methods to ascertain unit prices, each giving rise to different results, which could be used to compare the costs of like services:

- Unit cost per week = contract price / number of units;
- Ratio of support staff to clients = number of front-line and total staff funded / number of units; and
- Support hours per unit = (sum of the number of total staff funded / number of hours worked) / number of units.

The research was not able to assess the wide range of short-, medium- and long-term outcomes achieved as a result of refuges' services and which could be used to determine 'value for money'. Nor does it take in to account the multiple factors, many of which are beyond the control of refuges such as move on housing, which influence outcomes for women.

However, there were some indications of the key issues that help and hinder better outcomes for women; in particular the correlation between pricing and staffing in refuges (i.e. increasing capacity to enable providers to meet demand and increase time spent supporting women and children).

As such, the unit price data in this research should be approached with caution.
2.3 Second stage refuge accommodation

Nine boroughs commissioned 106 units of second stage accommodation, which accounted for 13% of all refuge bed spaces funded by Supporting People in 2007/08.

In total, second stage accommodation accounted for 6% of Supporting People funding spent on all domestic violence services for 2007/08.\(^{47}\)

Forty-six per cent of second stage bed spaces were for single women and the reminder are for any household.

There were eleven providers delivering second stage accommodation – four women’s VCOs, one BME women’s VCO, two BME housing associations and four general housing associations.

Over the last two years, Camden and Greenwich have reduced the number of second stage bed spaces funded and Lambeth decommissioned its service in 2006/07.

Only Kingston has significantly increased its number of second stage units – from four units in 2006/07 to 19 in 2007/08.

Havering is planning to implement a second stage service in 2008/09.

2.3.1 Second stage refuges for BME women

Out of the nine boroughs funding second stage accommodation, three funded both general and specialist services, two have specialist services only and four boroughs fund general accommodation only.

Second stage accommodation for BME women (the vast majority of which is for women from the Indian Subcontinent) accounted for 56% of all second stage bed spaces, but only 49% of all second stage funding. Almost 80% of all BME second stage bed spaces are delivered by one provider across two boroughs. Unlike general second stage bed spaces, 78% of BME specific second stage bed spaces were for single women.

\(^{47}\) Excludes Greenwich (two units) and Wandsworth (12 units) as no contract price information provided.
Table 10: Second stage accommodation funded through Supporting People by borough 2007/08

<table>
<thead>
<tr>
<th>Borough</th>
<th>Type of second stage accommodation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Greenwich</td>
<td>Both general and specialist (women from the Indian Subcontinent)</td>
</tr>
<tr>
<td>Newham</td>
<td>Both general and specialist (women from the Indian Subcontinent)</td>
</tr>
<tr>
<td>Wandsworth</td>
<td>Both general and specialist (women from the Indian Subcontinent)</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>Specialist only (BME women)</td>
</tr>
<tr>
<td>Ealing</td>
<td>Specialist only (women from the Indian Subcontinent)</td>
</tr>
<tr>
<td>Camden</td>
<td>General only</td>
</tr>
<tr>
<td>Kingston</td>
<td>General only</td>
</tr>
<tr>
<td>Sutton</td>
<td>General only</td>
</tr>
<tr>
<td>Tower Hamlets</td>
<td>General only</td>
</tr>
</tbody>
</table>

2.3.2 Difficulties experienced with second stage accommodation

Boroughs were more likely to report difficulties other than under-occupancy with second stage accommodation than any other service. Problems included:

- low levels of support given to service users;
- lack of strategic relevance;
- provider no longer wished to deliver service; and
- provider had difficulties with staffing. One borough respondent stated:

"[The service] used to be run by an Asian women’s group but they closed. Having a mainstream housing association running an Asian women’s refuge has had difficulties despite the staff being Asian, particularly with high staff turnover. Service users are not really getting the support needed."

Of the contracts where boroughs stated that difficulties arose, all were services for women from the Indian Subcontinent being delivered by housing associations at extremely low prices compared to similar services commissioned by other boroughs.
2.4 Women in refuges

2.4.1 Average stay

Of the 22 providers that responded to the question, the average stay for a woman in a refuge during 2006/07 was 173 days, but this rose to 217 days in specialist refuges for BME women.

The shortest average stay was five days and the longest was 14 months. However, 52% of providers reported average stays of between three to six months and 26% of providers reported one month or less. Twenty-two per cent of provider respondents reported average stays of six months or more.

Figure 6: Percentage of refuge providers by average stay of women in refuge 2006/07

2.4.2 Requests for accommodation turned down

During 2006/07, 21 refuge providers were unable to meet 2,300 requests for support, overwhelmingly because the refuge was full.\(^48\) In particular, BME providers were more likely to turn women away for this reason.

As well as accommodating proportionately more women with no recourse to public funds, BME providers were, on average, more likely to have to turn away women with no recourse than non-BME providers. Possible explanations are that collectively BME providers have fewer bed spaces, and resources generally, than non-BME providers and so

\(^{48}\) This figure does not represent the total number of women turned away as it is highly likely that each woman would have made several requests to subsequent refuges after being turned down initially.
meet the threshold of women they can support more quickly. It is also likely that they have women with no recourse referred to them more frequently because they are specialist providers.

**Figure 7: Percentage of women turned away by reason 2006/07**

![Percentage of women turned away by reason](image)

2.4.3 Where women go after leaving refuges

Sixteen refuge respondents provided information about the move on of 830 service users. \(^{49}\)

On leaving the refuge, a quarter of women went on to council housing. However, refuges stated that more council housing was urgently needed:

“*At any one time we can have 3–5 women ready to move on but because of housing stock situation they have to remain with us longer than necessary.*”

The lack of ‘move on’ accommodation (i.e. non-hostel supported housing and settled accommodation) was also identified by boroughs in their Supporting People Strategies and in this research. \(^{50}\) There was some evidence from providers’ responses that women who stay in a refuge longer than six months were, on average, three times more likely to

---

\(^{49}\) This figure is not the total number of women accessing refuge accommodation as the data is based on the responses of only 19 providers with, between them, 323 bed spaces. Given the response rate the true number of women accessing refuge services across London will be significantly higher.

return to the perpetrator after leaving the refuge, than women whose stay was less. Women with shorter stays were three times more likely to move on to second stage accommodation and 82% more likely to move in to council housing. Women with stays of six months or more were three times more likely to move on to housing associations and twice as likely to rent from private landlords than women with shorter stays. This issue requires further research, as the questionnaire only asked for information about where women go upon immediately leaving the refuge\textsuperscript{51}, but it is acknowledged that the lack of move on accommodation is primarily responsible for longer stays in refuges which possibly increase the risk of women returning to perpetrators.

Moving on to council housing was followed by private landlords and housing associations or friends and relatives. Nine per cent of women returned to perpetrators, although this is likely to be an underestimate as the whereabouts of 12% of women upon leaving refuges was unknown.

Service users of BME providers were more likely to move on to second stage accommodation, return to their previous home (including back to the perpetrator) or move into housing association property than the average. They were significantly less likely to move into private rented accommodation.

**Figure 8: Where women go when they leave refuge 2006/07**

\textsuperscript{51} For example, women may return to perpetrators at a later date or enter relationships with other violent partners.
Note 1 – Other refuges

Refuges funded by Supporting People but primary client group is not 'people at risk of domestic violence'

Waltham Forest and Redbridge jointly fund safe accommodation for young women experiencing forced marriage. The service, Y Stop, is a joint project between the boroughs, two registered social landlords and a BME women's VCO.

Beverley Lewis House, based in Newham, provides safe accommodation for women with learning difficulties who are experiencing domestic violence. However, 'women experiencing domestic violence' are the secondary client group.

Both of these services were funded by Supporting People but not as domestic violence services – Y Stop is funded as a young people's service and the primary client group for Beverley Lewis House is 'people with learning difficulties'. Subsequently, these refuges have not been included in the research as they are not primarily categorised as 'domestic violence services' although they are noted in the overview of services across boroughs (Table C, p.96).

Refuges not funded by Supporting People

The majority of refuges in London are funded by Supporting People and this chapter addressed those services. However, the research identified refuges in three boroughs which are not funded by Supporting People. One of these was a recently established refuge in Newham which relies on donations and volunteers. Two refuges (one in Croydon and another in Lewisham) are managed (and funded) by a religious organisation. All are noted Table C.
3. Community services funded by Supporting People

3.1 Floating support

For 2007/08, floating support accounted for 14% of all Supporting People spending on services for 'people at risk of domestic violence'.

Over 338 units of floating support were commissioned by 22 boroughs. The vast majority of floating support services units are for any household.

Boroughs funding floating support were:

- Barnet
- Brent
- Camden
- Croydon
- Ealing
- Enfield
- Greenwich
- Hammersmith & Fulham
- Haringey
- Harrow
- Havering
- Hillingdon
- Hounslow
- Islington
- Kensington & Chelsea
- Lambeth
- London
- Richmond
- Southwark
- Tower Hamlets
- Waltham Forest
- Wandsworth
- Westminster

However:

- Islington decommissioned its non-gender specific floating support service in June 2007 (eight units) but continues to fund 18 units of support for women.
- Lambeth decommissioned seven units of BME support in May 2007 which will be replaced by a £150,000 sanctuary plus scheme.
- Barnet is considering, with the current provider, changing its floating support service to an advocacy scheme.
- Havering’s floating support scheme, which started in April 2007, is a pilot.
- Westminster’s service is an advocacy scheme jointly funded with the borough’s Crime and Disorder Reduction Team.

Lewisham is considering implementing a floating support service in the next 12 months.

---

52 Excludes number of units for floating support services in Kensington & Chelsea, Hammersmith & Fulham, Havering and Wandsworth as no data provided.
3.1.1 Profile of providers

Seventeen different providers were contracted by boroughs in 2007/08 to deliver floating support, three of which are women’s VCOs that provide community services only (i.e. do not provide refuge accommodation).

Floating support was most likely to be delivered by housing associations, followed by women’s VCOs.

<table>
<thead>
<tr>
<th>Category of provider</th>
<th># providers</th>
<th>% of total floating support units</th>
</tr>
</thead>
<tbody>
<tr>
<td>Women’s housing associations</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>BME housing associations</td>
<td>1</td>
<td>6%</td>
</tr>
<tr>
<td>Generic housing associations</td>
<td>5</td>
<td>43%</td>
</tr>
<tr>
<td>BME women’s VCOs</td>
<td>1</td>
<td>1%</td>
</tr>
<tr>
<td>Women’s VCOs</td>
<td>6</td>
<td>39%</td>
</tr>
<tr>
<td>Women’s VCOs – NON refuge providers</td>
<td>3</td>
<td>9%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>17</td>
<td>100%</td>
</tr>
</tbody>
</table>

3.1.2 Specialist services

Specialist BME floating support accounted for 15% of all Supporting People domestic violence floating support funded in 2007/08. Hillingdon, Lambeth (until May 2007), Waltham Forest, Tower Hamlets and Camden have commissioned 51 units of floating support for BME women (see Table A for breakdown, p.62).

Islington recently decommissioned its non-gender specific floating support but is considering funding floating support for teenage parents and BME communities within the next 12 months. Enfield is the only borough which (now) funds non-gender specific support (20 units).
3.2 Sanctuary schemes

Southwark and Haringey spent almost £90,000 on sanctuary schemes in 2007/08.

Southwark commissions a large women’s VCO (refuge provider) to deliver the six units of support through Supporting People and further funding is provided through homelessness grants. In 2007/08, £39,982 was spent on this service.

In Haringey, the service is delivered by Hearthstone – a ‘one-stop-shop’ of a range of domestic violence services including housing officers, a Police community safety officer and VCOs. Haringey funds 12 units of sanctuary support for £49,999. Community alarms and outreach are also delivered as part of the sanctuary scheme service.

Two boroughs stated they were intending to commission sanctuary schemes within the next 12 months. Lambeth is replacing its floating support service with a sanctuary plus scheme and Enfield is launching a sanctuary scheme in June 2007.

Of respondees, two further boroughs had sanctuary schemes which were not funded by Supporting People. In 2006/07, Greenwich funded the local Victim Support (through Neighbourhood Services funding) and Hammersmith & Fulham commissioned Advance (through housing funding) to deliver sanctuary scheme services to women experiencing domestic violence.

3.3 Community alarms

Three boroughs fund community alarms for women experiencing domestic violence as part of their Supporting People domestic violence spend. A total of 116 units were funded.

- Greenwich has commissioned a women’s housing association since 2004/05 to provide four community alarm units at a total price of £703 per annum. The provider also delivers Supporting People funded refuge accommodation in another borough.
- Haringey’s community alarms service is part of its sanctuary scheme service, delivered by Hearthstone. Twelve units were funded.

---

53 Hearthstone co-locates staff from the council’s housing department, the Police Community Safety Unit, BME VCOs and legal advisors and a specialist domestic violence and substance misuse worker. Signposting, counselling, legal advice, safety planning and free mobile phones are also offered along with floating support from other Supporting People funded organisations.
• Linkline is a community alarms service which is part of the LB of Lewisham. £10,000 of Lewisham’s Supporting People grant per annum has been spent on 100 community alarm units since 2006/07.

As stated in the Introduction, this research has only looked at community alarm services that are specifically funded as a ‘domestic violence service’ under Supporting People. However, it is likely that women affected by domestic violence may access community alarms through other (non-domestic violence) Supporting People, or other local authority, services.

3.4 Other

Harrow is currently piloting a six month resettlement project (ten units) which will end in August 2007.

Haringey funds 20 units of outreach through its Hearthstone project. Also, as part of the project, counselling and a free night-line phone service are provided.
Table A: Summary of domestic violence services funded by Supporting People 2007/08

<table>
<thead>
<tr>
<th>Borough</th>
<th>First stage bed spaces</th>
<th>Second stage bed spaces</th>
<th>Floating support units</th>
<th>Other community services</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td># bed spaces</td>
<td>% of London total</td>
<td># bed spaces</td>
<td>% of London total</td>
</tr>
<tr>
<td>Barking &amp; Dagenham</td>
<td>32</td>
<td>4%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Barnet</td>
<td>24&lt;sup&gt;54&lt;/sup&gt;</td>
<td>3%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bexley</td>
<td>31</td>
<td>4%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brent</td>
<td>19&lt;sup&gt;55&lt;/sup&gt;</td>
<td>2%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bromley</td>
<td>36</td>
<td>4%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Camden</td>
<td>54</td>
<td>7%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>City of London</td>
<td>0</td>
<td>0%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<sup>54</sup> Jewish women – 8 bed spaces. The general refuge delivers specialist services to women with mental health support needs although the refuge is not exclusive to this group of women.
<sup>55</sup> Women from the Indian subcontinent – 6 bed spaces.
<sup>56</sup> Women from the Indian subcontinent – 12 units
<table>
<thead>
<tr>
<th>Borough</th>
<th>First stage bed spaces</th>
<th>Second stage bed spaces</th>
<th>Floating support units</th>
<th>Other community services</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td># bed spaces</td>
<td>% of London total</td>
<td># bed spaces</td>
<td>% of London total</td>
</tr>
<tr>
<td>Croydon</td>
<td>20</td>
<td>2%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ealing</td>
<td>18&lt;sup&gt;57&lt;/sup&gt;</td>
<td>2%</td>
<td>31&lt;sup&gt;58&lt;/sup&gt;</td>
<td>29%</td>
</tr>
<tr>
<td>Enfield</td>
<td>28&lt;sup&gt;59&lt;/sup&gt;</td>
<td>3%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Greenwich</td>
<td>26&lt;sup&gt;61&lt;/sup&gt;</td>
<td>3%</td>
<td>14</td>
<td>13%</td>
</tr>
<tr>
<td>Hackney</td>
<td>49&lt;sup&gt;62&lt;/sup&gt;</td>
<td>6%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>18&lt;sup&gt;63&lt;/sup&gt;</td>
<td>2%</td>
<td>5&lt;sup&gt;64&lt;/sup&gt;</td>
<td>5%</td>
</tr>
<tr>
<td>Haringey</td>
<td>35&lt;sup&gt;65&lt;/sup&gt;</td>
<td>4%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Harrow</td>
<td>6</td>
<td>1%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<sup>57</sup> BME women – 12 units.
<sup>58</sup> All bed spaces for women from Indian Subcontinent.
<sup>59</sup> Muslim women – 7 bed spaces.
<sup>60</sup> All non-gender specific.
<sup>61</sup> Women from Indian Subcontinent – 8 bed spaces and African and Africa and Caribbean women – 8 bed spaces.
<sup>62</sup> BME women – 16 units.
<sup>63</sup> Women from Indian Subcontinent – 10 bed spaces.
<sup>64</sup> All bed spaces for BME women.
<sup>65</sup> As part of sanctuary scheme, delivered by the borough’s multi-agency partnership Hearthstone.
<sup>66</sup> Ibid. Units for counselling and free night line service are unknown.
<sup>67</sup> Six month resettlement pilot until August 2007.
<table>
<thead>
<tr>
<th>Borough</th>
<th>First stage bed spaces</th>
<th>Second stage bed spaces</th>
<th>Floating support units</th>
<th>Other community services</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td># bed spaces</td>
<td>% of London total</td>
<td># bed spaces</td>
<td>% of London total</td>
</tr>
<tr>
<td>Havering</td>
<td>9</td>
<td>1%</td>
<td>Not stated</td>
<td></td>
</tr>
<tr>
<td>Hillingdon</td>
<td>18</td>
<td>2%</td>
<td>50</td>
<td>15%</td>
</tr>
<tr>
<td>Hounslow</td>
<td>33</td>
<td>4%</td>
<td>14</td>
<td>4%</td>
</tr>
<tr>
<td>Islington</td>
<td>27</td>
<td>3%</td>
<td>26</td>
<td>8%</td>
</tr>
<tr>
<td>Kensington &amp; Chelsea</td>
<td>8</td>
<td>1%</td>
<td>Not stated</td>
<td></td>
</tr>
<tr>
<td>Kingston upon Thames</td>
<td>11</td>
<td>1%</td>
<td>19</td>
<td>18%</td>
</tr>
<tr>
<td>Lambeth</td>
<td>52</td>
<td>6%</td>
<td>7</td>
<td>2%</td>
</tr>
<tr>
<td>Lewisham</td>
<td>40</td>
<td>5%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Merton</td>
<td>22</td>
<td>3%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

69 Pilot from April 2007.
70 BME women – 10 units.
71 Latin American women – 6 bed spaces.
72 Eight units are non-gender specific but ended June 2007.
73 Women from Indian Subcontinent – 5 bed spaces.
74 Women from Indian Subcontinent – 19 bed spaces; BME women – 15 bed spaces; Irish and Traveller women (targeted but not exclusive) – 10 bed spaces.
76 All units delivered by local authority.
77 Women from Indian Subcontinent – 3 bed spaces.
<table>
<thead>
<tr>
<th>Borough</th>
<th>First stage bed spaces</th>
<th>Second stage bed spaces</th>
<th>Floating support units</th>
<th>Other community services</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td># bed spaces</td>
<td>% of London total</td>
<td># bed spaces</td>
<td>% of London total</td>
</tr>
<tr>
<td>Newham</td>
<td>1678</td>
<td>2%</td>
<td>1079</td>
<td>9%</td>
</tr>
<tr>
<td>Redbridge</td>
<td>10</td>
<td>1%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Richmond upon Thames</td>
<td>1480</td>
<td>2%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Southwark</td>
<td>3281</td>
<td>4%</td>
<td>28</td>
<td>8%</td>
</tr>
<tr>
<td>Sutton</td>
<td>8</td>
<td>1%</td>
<td>4</td>
<td>4%</td>
</tr>
<tr>
<td>Tower Hamlets</td>
<td>2982</td>
<td>4%</td>
<td>7</td>
<td>7%</td>
</tr>
<tr>
<td>Waltham Forest</td>
<td>2984</td>
<td>4%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

7) Women from Indian Subcontinent – 8 bed spaces.
8) Women from Indian Subcontinent – 7 bed spaces. Newham also funds refuge accommodation for women with learning difficulties experiencing domestic violence but this service is not funded as a domestic violence refuge so units, costs etc have not been included in the analysis.
9) Redbridge and Waltham Forest joint fund refuge accommodation for women at risk of forced marriage. However, this refuge is not funded as a domestic violence service so units, costs etc have not been included in the analysis.
10) Women from Southwark – 8 bed spaces. This refuge also provides specialist services for women with substance misuse support needs although the refuge is not exclusively for this group of women.
12) All units for women from Indian Subcontinent.
13) Women from Indian Subcontinent – 7 bed spaces; women from Indian Subcontinent, Turkish and Iranian women – 7 bed spaces.
14) Redbridge and Waltham Forest joint fund refuge accommodation for women at risk of forced marriage. However, this refuge is not funded as a domestic violence service so units, costs etc have not been included in the analysis.
15) All units for women from Indian Subcontinent and Turkish and Iranian women.
<table>
<thead>
<tr>
<th>Borough</th>
<th>First stage bed spaces</th>
<th>Second stage bed spaces</th>
<th>Floating support units</th>
<th>Other community services</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td># bed spaces</td>
<td>% of London total</td>
<td># bed spaces</td>
<td>% of London total</td>
</tr>
<tr>
<td>Wandsworth</td>
<td>16&lt;sup&gt;86&lt;/sup&gt;</td>
<td>2%</td>
<td>12&lt;sup&gt;87&lt;/sup&gt;</td>
<td>11%</td>
</tr>
<tr>
<td>Westminster</td>
<td>35</td>
<td>4%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td>805</td>
<td>100%</td>
<td>106</td>
<td>100%</td>
</tr>
</tbody>
</table>

<sup>86</sup> Women from Indian Subcontinent – 10 bed spaces.
<sup>87</sup> Women from Indian Subcontinent – 5 bed spaces.
4. Domestic violence services funded by ‘other’ sources

Three quarters of refuge providers’ income comes from just two sources – Supporting People contracts and rental income. The remaining 25% of income comes from ‘other’ sources such as local authorities (not Supporting People), charitable trusts and to a considerably lesser extent, public donations (with the exception of two women’s VCOs) and central government.

It was noted that a few women’s VCOs are also making considerable inroads in generating their own income through ‘selling’ training and consultancy services to frontline workers, decision makers, commissioners and others in the public and third sectors.

4.1 Funding received by refuges – 2006/07

Thirty-seven per cent of refuge providers’ ‘other’ income came from charitable trusts. Refugee respondents received funding from 14 different charitable trusts. Comic Relief and BBC Children in Need were particularly cited, followed by the Big Lottery Fund, City Parochial Foundation, Bridge House Trust, Tudor Trust and Wates Foundation.

Twelve providers reported receiving funding from London Councils. The only other pan-London authority cited by a provider was the Learning and Skills Council.

However, funding from local government accounted for the largest proportion of ‘other’ (non-Supporting People) income.

---

88 Boroughs and refuges were not always able to find or provide all information on non-Supporting People funding so the figures here are an underestimate. More data from 2006/07 was available than for 2007/08 so figures from this year were used to provide an indication of the diversity of refuges income. However, Table B (p.70) details services currently being delivered.
Funding from ‘other’ sources was used to deliver a range of services but the most cited were children’s services, help lines, outreach, drop-in sessions, education and counselling.

4.2 Funding distributed by boroughs – 2006/07

Nineteen boroughs distributed over £2.862m to the VCS for domestic violence services and projects in 2006/07, 44% of which were grants and 36% contracts (20% were unknown).

There were a total of 57 different recipients, 35% of which were refuges from this study. However, only 23% of the funding went to refuge providers indicating that services provided by non-refuge domestic violence VCOs are significant.

Local government funding came from a number of different streams including:

- Children’s Funds;
- VCS main grants programmes;
- partnership funds;
- Crime and Disorder Reduction Partnerships;
- Borough Command Units;
- Social Services;
- Housing Departments;
- Neighbourhood Renewal Funds;
- New Deal for Communities; and
- Community Safety Units.

Camden and Islington distributed funding through their Local Area Agreements.

Local authorities funded a vast range of services including children’s services, counselling, outreach and contributions to refuge running prices and salaries.

### 4.3 Children's services

Refuge providers reported that 20% of all ‘other’ funding was for children’s services. In particular, over half (52%) of charitable trust grants were for a range of children’s services, from play groups to therapeutic work. Boroughs reported that in 2006/07, 14% of funding distributed to refuges was for children’s services.

Recent research by the Government Office for London found that:

- refuges in 80% of boroughs have either a full- or part-time Children’s Worker;
- 45% of Children’s Workers are funded, or part funded, by the local authority; and
- 15% of boroughs have a full-time worker funded, or part funded by the local authority in all refuges in the borough.\(^{89}\)

Despite this, both refuges and boroughs cited children’s services as one of the top four unmet needs.

---

### Table B: Domestic violence services delivered by refuges and funded by ‘other’ sources 2007/08

<table>
<thead>
<tr>
<th>Borough</th>
<th>Advocacy</th>
<th>Children</th>
<th>Counselling</th>
<th>Drop-in</th>
<th>Local helpline</th>
<th>User support groups/peer support</th>
<th>Outreach</th>
<th>Other services/specialism</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Barnet</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Advice surgeries</td>
</tr>
<tr>
<td>Bexley</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brent</td>
<td></td>
<td></td>
<td>Advice surgeries</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bromley</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Advice surgeries, Mental health</td>
</tr>
<tr>
<td>Camden</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Legal advice, Advice surgeries</td>
</tr>
<tr>
<td>City of London</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Croydon</td>
<td></td>
<td></td>
<td>Court advocacy</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ealing</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enfield</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Advice surgeries</td>
</tr>
</tbody>
</table>

---

90These are services delivered by refuges which are not funded by Supporting People only. Information obtained from refuge provider responses, *The Gold Book 2007* (Women’s Aid Federation of England: Bristol) and some information from boroughs.
<table>
<thead>
<tr>
<th>Borough</th>
<th>Advocacy</th>
<th>Children</th>
<th>Counselling</th>
<th>Drop-in</th>
<th>Local helpline</th>
<th>User support groups/peer support</th>
<th>Outreach</th>
<th>Other services/specialism</th>
</tr>
</thead>
<tbody>
<tr>
<td>Greenwich</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hackney</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Financial help, Legal advice</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Haringey</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Harrow</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Drug &amp; alcohol misuse</td>
</tr>
<tr>
<td>Havering</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hillingdon</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hounslow</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Islington</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Advice surgeries, Legal advice</td>
</tr>
<tr>
<td>Kensington &amp; Chelsea</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Legal advice</td>
</tr>
<tr>
<td>Kingston upon Thames</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Advice surgeries</td>
</tr>
<tr>
<td>Lambeth</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Advice surgeries</td>
</tr>
<tr>
<td>Lewisham</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Advice surgeries</td>
</tr>
<tr>
<td>Borough</td>
<td>Advocacy</td>
<td>Children</td>
<td>Counselling</td>
<td>Drop-in</td>
<td>Local helpline</td>
<td>User support groups/peer support</td>
<td>Outreach</td>
<td>Other services/specialism</td>
</tr>
<tr>
<td>-----------------------</td>
<td>----------</td>
<td>----------</td>
<td>-------------</td>
<td>---------</td>
<td>----------------</td>
<td>----------------------------------</td>
<td>----------</td>
<td>---------------------------</td>
</tr>
<tr>
<td>Merton</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Advice surgeries</td>
</tr>
<tr>
<td>Newham</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Redbridge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Richmond upon Thames</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Southwark</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Mental health</td>
</tr>
<tr>
<td>Sutton</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tower Hamlets</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Advice surgeries</td>
</tr>
<tr>
<td>Waltham Forest</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wandsworth</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Westminster</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Legal advice</td>
</tr>
</tbody>
</table>
5. Women with no recourse to public funds

Although there are increasing moves to collect data on the number of women with no recourse to public funds who experience domestic violence, there are no comprehensive figures, either nationally or for London. \(^91\)

Some indication of the number of women affected by the no recourse to public funds rule is given in the 2005 WAFE survey of affiliated refuges. On 2 November 2005, 177 women with no recourse to public funds were being housed in refuges across England. Refuges also reported a further 54 requests for accommodation that they could not meet. \(^92\)

Despite the lack of data, it is widely acknowledged, by both refuges and public bodies, that the lack of recourse to public funds for women with insecure immigration status (who are experiencing domestic violence) places these women at great risk and often presents them with a stark choice – to leave and face possible destitution and homelessness or stay with the perpetrator/s and risk continued, and possibly escalated, violence.

5.1 Women supported by providers in 2006/07

During 2006/07, 238 women with no recourse were supported by 15 providers (65% of all respondents).

Seventy-three per cent of these providers supported ten or fewer women with no recourse during the year. The majority of women with no recourse to public funds (73%) were supported by just four organisations. Of these four providers, two were large\(^93\) women’s organisations (one a BME women’s VCO) and one was a large housing association. However, the provider supporting the largest number of women with no recourse (80),

\(^91\) One estimate is that there are 600 women with no recourse to public funds affected by domestic violence in London in any one year. From: London Councils (July 2007) Service specification 43: Increase access to services for women with no recourse to public funds to enable them to exit domestic violence or prostitution. (www.londoncouncils.gov.uk/upload/public/attachments/1158/Service43.pdf)

\(^92\) Williamson, Dr. E. (2005) Survey of Domestic Violence Services Findings Women’s Aid Federation of England: Bristol. No figures for London were available. (www.womensaid.org.uk/downloads/WA_survey_dv_service_findings.pdf)

\(^93\) i.e. £1m+ income per annum
although a specialist in this area, was a medium sized BME women's VCO with an annual income of less than £500k.

5.2 Profile of providers

Of the 15 providers: seven were women's VCOs, four were BME women's VCOs, three were BME housing associations and one was a generic housing association.

Collectively, these 15 providers managed 40 refuges in the following boroughs:

- Barnet
- Brent
- Camden
- Croydon
- Ealing
- Greenwich
- Hackney
- Harrow
- Hounslow
- Islington
- Lambeth
- Lewisham
- Merton
- Newham
- Richmond
- Southwark
- Tower Hamlets
- Waltham Forest
- Wandsworth

5.3 Type of support provided

Almost 20% of the 238 women were provided accommodation. The remainder had accessed community services only.

Over 60% of the 15 providers had advocated for women with no recourse to public funds, 38% provided 'other' services (including referrals, advice, support to children, money/vouchers for subsistence), 31% delivered counselling and a quarter provided specialist legal advice. All respondents provided at least two of these services.
BME organisations (both women’s VCOs and housing associations) made up 46% of the providers that had supported women with no recourse. However their share of total bed spaces was less than 30%. Despite this, BME providers accommodated proportionately more women with no recourse – 45% of all women with no recourse were supported by a BME refuge.

### 5.4 Cost to refuges

Fourteen providers accommodated women with no recourse, at an average cost of £149 per week (rent).

Seven providers were able to negotiate with Social Services to cover rent and in some cases, subsistence, although most noted that this was only successful if the women had children. Four of the providers funded a woman’s stay out of reserves (in one case a designated reserve fund for this specific purpose) and three used a combination of unrestricted funds, under-sPENDs from other services, reserves, their organisation's welfare fund, small grants and public donations.

It is acknowledged that many refuges that do accommodate women with no recourse place themselves at risk financially. A small scale study conducted by WAFE identified that “through unclaimed monies accrued, refuges lost total revenue of £147,000. Many individual refuges carry ‘bad debts’ and are penalised by their Registered Social Landlords
as a result”. An analysis of the audited accounts of London refuges (from April 2003 to March 2006) showed that this point is highly significant – after Supporting People funding, rents from service users is the second largest source of income, accounting for, on average, 24% of refuge providers’ annual incomes. Furthermore, this income is unrestricted.

5.5 Women turned away

As illustrated in Chapter 2, 61 refuges turned away 2,300 requests for support from women in 2006/07, 9% because women had no recourse to public funds. In total, 18 providers turned away 222 requests from women with no recourse to public funds. Of the 14 providers that had provided accommodation to women with no recourse to public funds, ten had to turn women away (because they had no recourse to public funds). Providers that supported any women with no recourse to public funds were more likely to have women with no recourse to public funds referred to them than refuges that could not support these women. As a result, they were also more likely to turn women with no recourse away.

As well as accommodating proportionately more women with no recourse, BME providers were, on average, more likely to have to turn away women with no recourse than non-BME providers. Possible explanations are that, with the exception of two providers, collectively they have fewer bed spaces, and resources generally, than non-BME providers and so meet the threshold of the number of women they can support more quickly. It is also likely that they have women with no recourse referred to them more frequently because they are specialist providers.

Of providers that did support women with no recourse, the issue of ‘no recourse’ was, on average, rated as the third greatest challenge facing their organisations, following ‘funding for core costs’ and ‘full-cost recovery’. However, ‘no recourse’ was the most frequently cited ‘unmet need’ by all providers.

---

95 The majority of these women would have tried to access at least one other refuge, possibly more, after being turned down from the first refuge approached. Therefore, this does no represent the total number of women trying to access services, as it is highly likely that there were multiple requests from the same women.
5.6 Boroughs' responses

When asked about their support of women with no recourse, boroughs referred to the advice and outreach services provided by public bodies and VCOs. However, the majority of boroughs acknowledged that accommodation support for women with no recourse, in particular, was ad-hoc, variable (depending on assessment against s7 of the Local Authority Services Act 1970, Children’s Acts 1989 & 2004 and the Every Child Matters agenda) and generally poor across London.

5.6.1 Funding

Unanimously, boroughs stated that lack of resources was the key problem and that funding, including ring-fenced funding, is needed so that women with no recourse can access refuge accommodation:

“Whilst local services do as much as they can to support this client-group, there is still a severe lack of funding for the provision of accommodation within the borough. A number of women with no recourse to public funds have been housed within local refuge services, however funding is done on an ad hoc basis through the refuge’s own funding (which is limited if not non-existent) or through limited funds provided by the Domestic Violence Forum e.g. a woman and her three year old child are currently being funded to stay at [a local Women’s Aid] out of the Domestic Violence Forum Trust Fund. This funding has now been exhausted however.”

“The funded agency had an increase of women with no recourse to public funds experiencing domestic violence referred to them but find it difficult to support them effectively due to the lack of their own resources and not able to get adequate support from other departments in the council.”

“Identifying or raising funds for victims with no recourse to public funds would mean that victims are not having to resort to 'sleeping rough' or riding night buses as what they feel is their only viable option to escape violence at home.”

“Most crucially, local authorities should be required to fund women with no recourse to public funds.”

“Outreach support will continue for these women, and the council is continually lobbying for more resources to provide emergency accommodation.”

“Seek funding, such as from the London Councils, which can be allocated to housing support for women who have no recourse to public funds.”
Southwark provided £37,000 in 2006/07 to a refuge provider specifically to support women with no recourse to public funds.

5.6.2 Joint working

However, in the absence of funding for accommodation, there were several examples of boroughs working across departments and with VCOs and others (such as immigration solicitors) to improve the outcome of a woman’s immigration case (to secure her status) and the speed in which it is dealt with:

“Local funding for 3-4 months is available to allow women with no recourse to public funds to remain in [the borough] until their immigration status is sorted out. Funding [has been obtained] for a Sanctuary Support Worker and Domestic Violence Courts Advocacy Worker to support and enable victims through the court system and reduce the requirement of housing to provide emergency and alternative accommodation in the borough. Victim Support led on this and funding for has been gained from the Home Office.”

“We are working in partnership with local services to improve co-ordination of responses to this group through provision of guidelines, monitoring, training and regular reports to the borough Domestic Violence Forum to maintain a high level of awareness of the issues.”

“[We have] commissioned Southall Black Sisters to produce a report on the problems of women with no recourse to public funds [which was] identified via Victim Support and the Domestic Violence Forum Action Plans”.

“Since 2006 the council has worked in partnership with members of the Domestic Violence Forum to produce local multi-agency guidelines on responding to domestic violence victims with no recourse. We have also developed training on working with this group. The main aim is to improve the co-ordination of services to facilitate speedy and successful applications under the Domestic Violence Rule for indefinite leave to remain.”

“[We] provided NRPF [no recourse to public funds] training to the Domestic Violence Forum from the Southall Black Sisters to ensure domestic violence services respond to survivors with insecure immigration status appropriately and are anti-discriminatory in practice....[Implementing] quarterly monitoring for all domestic violence agencies to start July 2007 (monitor number and case outcomes of women with NRPF accessing their services).”
5.6.3 Policy changes needed

Another key issue identified was the need for a clearer steer from central government and/or changes to policy that prohibits women with insecure immigration status from accessing refuge accommodation/public funds in cases of domestic violence:

"I think more stringent guidelines need to be drawn for all local authorities outlining how to work effectively and in partnership when supporting women with no recourse to public funds. Currently there is an inconsistent approach. To ensure consistency I think it should be included as part of the Best Value Performance Indicator Actions Against Domestic Violence 225 for local authorities."

"We either need a change in the law to enable women in this situation to claim benefits while their application is being processed, or for these applications to be processed very quickly (within a matter of days rather than months). Also, people entering the UK on a spousal visa should be advised of their rights if the relationship breaks down. These changes need to happen at a national level."
6. Unmet needs

6.1 Refuge providers' responses

Refuges named a plethora of unmet needs identified mostly through the number of referrals received (and often declined), the number of women using services and on waiting lists and the day-to-day experience of working with women.

More often than not, these 'unmet needs' were cases of providers’ inability to meet demand for their services due to lack of resources and capacity, rather than lack of expertise to deliver the service. The need for greater capacity was often named as having a significant impact on service users as well as the organisation.

The top four 'unmet needs' were:

1. Women with no recourse (half of all providers also named 'no recourse' as one of the four top challenges facing their organisation), particularly single women:

   "Women who have no children are particularly unable to access refuge when they are of uncertain immigration status."

   "We ourselves will only take women with no recourse if they are being financially supported by Social Services and clearly, that only happens when a woman has a dependent child."

2. Services for children – from playgroups to therapeutic work (38% of providers also named obtaining funding for children's services as one of their top four organisational challenges):

   "Service users have commented several times that they would like a children and families worker to be full time, as well as the staff team. It would allow more play sessions with the children and key sessions with parents, thus providing greater support."

   "While we have a part time worker for children living in the refuge, we are extremely limited by what we can do for our Outreach children."
“With regard to children with serious behavioural problems – we make referrals to CAMHS but usually by the time an appointment is made the family will have moved out of the refuge or are about to leave.”

3. Support for women with specialist, complex, high level and/or multiple support needs:

“Asian sex workers are not being reached and do not access refuges.”

“HIV is becoming an issue amongst African and Asian women however there are no specialist centres for women who have this condition.”

“Mental health support in refuges is difficult to access and due to associated risk we are unable to house women who are unwell.”

“Lack of counselling/psychotherapy services to support through trauma and transitional periods of change. Service users feeling isolated and frustrated at not being able to access services due to waiting lists. Lack of this provision available within the refuge for women to access.”

“Women who are trafficked from African or Asian countries are not accessing refuges.”

“The mental wellbeing of women and their children is not being anywhere near effectively [provided for] so the recovery of women is prolonged and they are more likely to relapse into a controlling relationship or not fully recover from their trauma.”

“We are unable to take women who have high levels of support needs [so] referrals have been declined.”

4. Access to refuges for working women, who are likely to face difficulties in affording the rent, and access to legal injunctions:

“It is becoming increasingly difficult to accept working women, as refuge rents are very high with the loss of outside funding for certain parts of the service.”

“We have identified that working women are financially unable to obtain civil orders through the courts and we have began to support women with DIY injunction applications. However, we have limited time and resources to offer this service on a scale that we would like.”
Figure 11: Percentage of providers identifying most commonly cited unmet needs

Other needs identified were:

- accommodation for women with large families;
- BME outreach;
- legal advocacy;
- telephone counselling;
- European women experiencing problems with benefits;
- bed spaces;
- services for women who have experienced sexual violence;
- services for women experiencing forced marriage;
- childcare for women so they can access services; and
- welcome and leaving packs for refuge residents:

"We have had several cases where the mother and children and no food or clothing at first arrival. As we do not give out loans to residents, and depending on what time they arrive they can apply for a crisis loan, but if not the case then they go without any food and clothing for the 1st night and then they apply for the crisis loan. It is
very difficult to see these women and children struggle on barely anything for the first few days."

In Chapter 1, all refuges commented that the bureaucracy of Supporting People was impacting on the support given to women. Some refuges again reiterated the need for more time and physical space, generally, for informal emotional support of service users:

“Paperwork around housing/benefit needs has increased so much it is extremely difficult for emotional support work to be consistently carried out under the current system.”

“It is evident during our day to day working – we do not have any communal space – one small room is used as an office, playroom, meeting room, one-to-one room, etc. We only have one small office for the Manager and Project Workers. Women constantly tell us that they need a place where they can all meet informally and the children complain because they can only go into the playroom at certain times – it is very restrictive.”
6.2 Boroughs' responses

Boroughs also identified many of the same needs such as services for children, women with high level or complex support needs and women with no recourse to public funds.

Figure 12: Percentage of boroughs identifying most commonly cited unmet needs

Unmet needs were identified through a number of ways and it is through these avenues that Supporting People services were often determined:

- Domestic Violence Forums;
- steering groups attached to Supporting People teams;
- Supporting People teams in other boroughs;
- research, reviews and needs mapping exercises;
- consultation service users;
- the number of referrals declined by providers;
- other agencies within the borough such as the Police, homelessness and drug and alcohol teams;
- Multi-Agency Risk Assessment Conferencing (MARAC) and murder review cases; and
- feedback from/consultation with providers.
7. Sustainability of refuge providers

7.1 Annual income

Annual income data (for each of the financial years April 2003 to March 2006) were obtained for 29 of the refuge providers named by boroughs in their questionnaire responses. Across providers (during this period), there has been a steady increase in annual income. In 2005/06, these 29 providers had a combined income of over £20.4m – up 12% from the year before.

On average, three quarters of providers' income was unrestricted, overwhelmingly because the two largest sources of income (Supporting People contracts and rental income) are unrestricted funds. Only three providers had less than 40% unrestricted income. In 2005/06, Supporting People and rental income accounted for, on average, 76% of providers' total income. Supporting People income as a proportion of providers’ income ranges from 28% (a BME women’s VCO) to 81% (also a BME women’s VCO).

Across England and Wales, grants and contracts from the state continue to be the largest source of funding in the VCS, accounting for 38% of all income in 2004/05. However, there has been a considerable shift in how income from the state is distributed - from grant giving to commissioning and procurement. Earned income (contracts) has now eclipsed voluntary income (grants) and in 2004/05, almost 40% of VCS income came from contracts with the public sector and only 14% came from grants.

The refuge sector is a good illustration of this shift to commissioning and procurement. Earned income from Supporting People contracts accounted for 54% of refuge providers’ annual income in 2006/07.

While providers were able to name several benefits to the Supporting People programme, particularly greater financial security, the shift from local authority grants to Supporting People contracts has restricted and redefined the services refuges are able to deliver:

---

96 Financial information obtained from audited annual accounts. In the case of housing associations, including women's housing associations, only income directly related to the delivery of domestic violence services was included in the analysis.

“…pre-Supporting People, our local authority grant was used to fund two Children’s Workers. Supporting People will only fund one post and this has been renamed “Family Support Worker”. We have had to fundraise year-on-year for the second post.”

Refuge providers depend on contracts with local authorities more so than the VCS average. This is likely to have significant impacts on the relationships between councils (commissioners) and providers. Providers who are unhappy with their contract terms, such as price, are unlikely to withdraw their services as there are no (realistic) alternatives to Supporting People funding. Some refuge providers commented that this has led to an unequal relationship between commissioners (councils) and providers:

“I think that Supporting People funding has caused us to be in a very vulnerable position – if we can’t meet the required standards then funding is withdrawn and there is no real alternative to Supporting People funding for refuge services. This gives local government the ultimate say on who provides services and how.”

The second largest source of income came from rents which accounted for, on average, 22% of providers’ income in 2005/06. Rental income as a percentage of total annual income ranged from 13% (a BME women’s VCO) to 36% (a women’s VCO).

There were no clear patterns in regards to rental or Supporting People income – larger providers were just as likely as smaller organisations to be significantly dependent, or not, on these sources of funding. The same was true for geographical location and specialist services. Only one refuge in the research did not receive Supporting People funding or receive significant income from charges to residents (relying instead on small grants, donations and volunteers).

The remaining income came from a number of sources including charitable trusts, other local government funding, pan-London government bodies and central government departments.
7.2 Financial provisions

On average, refuge providers have the equivalent of four months expenditure in reserves, ranging from just two weeks to one year.

Many refuges have been able to make financial provisions to cover staffing and other organisational issues. However, less than half of all providers have made financial provisions to cover redundancies, maternity cover and enhanced leave, sick leave or pension contributions.

<table>
<thead>
<tr>
<th>Issue</th>
<th>Percentage of refuges that have made financial provision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternity pay and cover</td>
<td>48%</td>
</tr>
<tr>
<td>Redundancy payouts</td>
<td>48%</td>
</tr>
<tr>
<td>Building repairs and maintenance</td>
<td>53%</td>
</tr>
<tr>
<td>Moving premises</td>
<td>23%</td>
</tr>
<tr>
<td>Pension contributions</td>
<td>38%</td>
</tr>
<tr>
<td>Sick leave cover</td>
<td>48%</td>
</tr>
<tr>
<td>ICT</td>
<td>53%</td>
</tr>
<tr>
<td>Furniture</td>
<td>63%</td>
</tr>
<tr>
<td>Training of staff</td>
<td>63%</td>
</tr>
<tr>
<td>Other</td>
<td>8%</td>
</tr>
</tbody>
</table>
7.3 Staffing

7.3.1 Staffing levels

There were 493 paid staff and volunteers working for the 23 refuge providers that responded to the survey, over half of which were full-time front line workers.

Figure 14: Staffing in refuges

Staffing levels were generally consistent across the different provider categories except for BME women’s VCOs who were three times more likely to employ sessional workers and two times less likely to have part-time front line staff, possibly because staff require a wider range of skills and expertise to support women, such as counsellors who are able to speak multiple languages.

As expected, the greater the annual income of the provider, the greater the proportion of central services staff to front-line staff. Refuges reported that, on average, over half of all fundraising is undertaken by central services staff. Providers who have few central services staff relied on the Director, front-line workers and trustees to apply for funding.

Interestingly, only nine providers answered the question on the number of trustees in their organisation. This may indicate that, like most other women’s VCOs, refuge providers find it difficult to recruit suitable trustees.
Research commissioned by the National Association for Voluntary and Community Action found that staffing and governance are key factors in ensuring the future prosperity of VCOs.\(^9\) Staff continuity, strong leadership from directors and good governance by trustees were found to be the driving forces of a sustainable organisation. Equally, the absence of stable staffing and strong leadership and governance were the factors most cited in hindering a VCOs ability to continue existing or thrive in the future.

### 7.3.2 Staffing problems

Seventy percent of providers reported recruitment difficulties. In particular:

- 70% of providers that reported recruitment difficulties had problems employing staff with the appropriate level of skills and experience;
- 47% believed the salary was a barrier to recruiting staff;
- 23% cited the need for workers to be fluent in two or more languages; and
- 3% have had difficulties because of the location of the post.

In particular, providers encountered problems recruiting Children’s Workers and finance staff.

Five providers reported problems retaining staff, particularly with staff leaving for higher salaries. These providers also reported difficulties in recruiting staff as well.

What was most noticeable in the research was that 77% of providers who have merged or been taken over, or are considering it, reported staffing problems. Boroughs also reported in their responses provider problems with staffing levels and the impact of this on support of service users (Chapter 1).

---

7.4 Priorities

Refuge providers were asked to name the top four ‘challenges’ for their organisations. Ten different issues were named but funding for children’s services, resources to support women with no recourse to public funds, full cost recovery and funding for current services were the most frequently cited.

Figure 14: Percentage of refuge providers citing issue as one of top four challenges
7.5 Mergers/take-overs and closing/reducing services

Over the last three years, at least seven refuges have been taken over by larger providers: two by larger women's organisations, one by a BME housing association and four by general housing associations.

In June 2007, Enfield, Camden and Islington Women's Aids merged to form Solace.

Two women's VCO providers are currently considering a merger or takeover:

“We are currently considering merging/being taken over because we are in a weak financial position and have been for a number of years. We are working in a hostile environment where it seems that there is no longer a place for small/medium providers and where tendering for services will become the norm requiring economies of scale. Also, [we are considering merging] because [of] the constantly changing monitoring requirements of Supporting People [which] requires huge staff resources which we cannot keep up with. We would hope to merge with an organisation with a similar ethos to our own.”

In addition, two BME housing associations are considering being taken over by larger housing associations and one general housing association is merging.

Four providers have had to close a service in the last four years due to lack of funding. These services were outreach, including a children's outreach programme, and a parallel support programme for women whose partners were attending a perpetrator programme.

Three providers have had to reduce their outreach services due to funding constraints.
8. Conclusions and recommendations

8.1 Conclusions

Women’s refuges in London are funded by a variety of sources but local authorities are the mainstay of providers’ income, both through Supporting People contracts and other funding streams such as VCS grants programmes.

However, it is the sustainability of income derived from delivering accommodation services – Supporting People contracts and rent – which is most important. Even small reductions in these sources of income could have significant impacts on refuges.

Of Supporting People funding, most is for accommodation, rather than community, services. Whilst there has been a small net increase in the number of bed spaces funded by Supporting People, both boroughs and refuges reported the need for more refuge accommodation. As many as 27% of boroughs may not be meeting Best Value Performance Indicator 225, falling short on the number of bed spaces needed.

Income from rent has both advantages and disadvantages to refuges. On average, it is the second largest source of income. The advantages are that rental income is unrestricted, (and therefore flexible in how it can be spent) and has been fairly dependable and consistent over the years. However, refuges’ dependency on rental income is also likely to be impacting on their ability and willingness to accept women who cannot afford the rent and who are not eligible for housing benefit, such as women with no recourse to public funds and working women.

There appears to be no standard methodology for determining unit prices across boroughs, with wide ranges existing even within similar services. The only London-wide patterns that could be determined were that refuges for single women and contracts for 15+ units and seven day cover were generally funded below the average unit price.

The benchmarking exercise undertaken by Inner London boroughs showed that there are various ways in which value for money and average unit prices could be determined, such as the ratio of support staff per client or support hours per women.

There was evidence of a relationship between staffing levels in refuges and the contract unit price received by the provider:
In Chapter 1, refuges reported that Supporting People reporting requirements has reduced time spent supporting service users. Boroughs also reported that staffing has impacted on utilisation rates for some services.

As described in Chapter 2, boroughs were most likely to report problems with second stage accommodation, including the lack of support given to women and staffing problems. All of these second stage services were being delivered at contract prices well below that of similar services commissioned by other boroughs.

In Chapter 6, providers describe the unmet needs in their local areas which showed that rather than being new or emerging issues, these unmet needs are primarily about the lack of capacity to meet demands for current services. As a result, many refuges are having to turn women away or placing women on waiting lists – neither of which are appropriate for women survivors of domestic violence who may often be in crisis.

Chapter 7 described the current staffing situation in refuges and noted that many of the organisations that have recently merged or been taken-over, or are considering doing so, have experienced difficulties in recruiting and retaining staff.

It is highly likely that greater investment in refuges to improve staffing capacity, and therefore the level of support provided to service users, is critical in achieving positive outcomes for women experiencing domestic violence, including reducing the risk of service users returning to perpetrators.

Refuges and boroughs reported many of the same unmet needs but in particular, funding for children’s services and women with no recourse to public funds.

The need for more bed spaces was evident in the number of women turned away by refuges and there was some evidence that the lack of move on housing may be influencing whether or not some women return to perpetrators.

There is undoubtedly a shift towards ‘super providers’. Thirty-five percent of refuge providers have contracts in two or more boroughs. This is further reflected in events over the last three years where at least seven refuges have been taken over by larger providers and five providers are currently considering being taken-over or merging.
8.2 Recommendations

To ensure a diverse provider base in the future and strategic, effective and value for money services, boroughs will need to address the key issues identified through this research, namely ensuring that Supporting People and other funding enables provider diversity and the sustainability of organisations, particularly in regards to staffing.

1. Ensuring the sustainability and diversity of refuge providers
   - Supporting People and other local authority funding should be geared towards improving the capacity (e.g. staffing) of current services and preventing the risk of reduction or closure of services (e.g. further losses of outreach services).
   - All funders to consider annual inflationary increases as a minimum standard.
   - Funders to consider continuation of grants programmes, where appropriate, along with shifting funding to commissioning programmes.
   - Commitment to services delivered by specialist and smaller VCOs (such as organisations led by women, for women) to ensure a diverse provider base.

2. Capital development
   - Capital development strategies to increase the number of bed spaces to be linked to revenue strategies for packages of support services.

3. Benchmarking
   - Benchmarking exercises should be undertaken (such as at sub-regional levels) to reduce discrepancies in contract and unit prices between boroughs and between providers.
   - Benchmarking exercises should avoid reverting to the lowest common denominator and be linked to provider sustainability and diversity strategies.

4. Supporting People monitoring requirements
   - Ongoing commitment to reducing the bureaucracy of Supporting People.
   - Boroughs to participate in the consultation (and possibly the pilot) of the National Service Standards for Domestic and Sexual Violence currently being developed by the Women’s Aid Federation of England (WAFE).[^99]

[^99]: See the WAFE website for information – [www.womensaid.org.uk](http://www.womensaid.org.uk)
5. **Package of support services across London**
   - Consistent coverage of certain services across London boroughs in all refuges such as children’s services and counselling.
   - Boroughs to consider establishing ‘last resort funds’ (such as sub-regional funds) to increase refuges’ ability to accommodate women with no recourse.

6. **Investing to save**
   - All borough strategies on domestic violence funding, particularly Supporting People, to consider greater investment in refuge services. Greater investment at the earliest stage is most likely to improve outcomes for women and reduce repeat victimisation.
<table>
<thead>
<tr>
<th>Borough</th>
<th>DV statistics</th>
<th>Population</th>
<th>First stage refuge accomm.</th>
<th>2nd stage accomm.</th>
<th>BVPI 225 met?</th>
<th>Floating support</th>
<th>Advocacy</th>
<th>Children's services</th>
<th>Counselling</th>
<th>Drop-in</th>
<th>Local helpline</th>
<th>User support group/peer support</th>
<th>Outreach</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td>2,137</td>
<td>164,500</td>
<td>32</td>
<td>4%</td>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Barnet</td>
<td>1,832</td>
<td>329,700</td>
<td>24</td>
<td>4%</td>
<td></td>
<td>No</td>
<td>40</td>
<td>12%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bexley</td>
<td>1,307</td>
<td>220,300</td>
<td>31</td>
<td>4%</td>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brent</td>
<td>1,729</td>
<td>270,100</td>
<td>19</td>
<td>4%</td>
<td></td>
<td>No</td>
<td>16</td>
<td>5%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bromley</td>
<td>1,742</td>
<td>301,900</td>
<td>36</td>
<td>4%</td>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Camden</td>
<td>1,656</td>
<td>226,100</td>
<td>54</td>
<td>3%</td>
<td></td>
<td>Yes</td>
<td>36 (12)</td>
<td>11%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>City of London</td>
<td>69</td>
<td>9,200</td>
<td></td>
<td></td>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Croydon</td>
<td>2,690</td>
<td>342,700</td>
<td>20</td>
<td>2%</td>
<td></td>
<td>No</td>
<td>10</td>
<td>3%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ealing</td>
<td>2,375</td>
<td>301,800</td>
<td>18 (12)</td>
<td>2%</td>
<td></td>
<td>Yes</td>
<td>7</td>
<td>2%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enfield</td>
<td>1,890</td>
<td>320,500</td>
<td>28</td>
<td>3%</td>
<td></td>
<td>Yes</td>
<td>20 (15)</td>
<td>6%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Greenwich</td>
<td>2,545</td>
<td>228,100</td>
<td>26</td>
<td>3%</td>
<td></td>
<td>Yes</td>
<td>16</td>
<td>5%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hackney</td>
<td>2,285</td>
<td>207,700</td>
<td>49</td>
<td>6%</td>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>1,452</td>
<td>179,900</td>
<td>18 (10)</td>
<td>2%</td>
<td></td>
<td>Yes</td>
<td>NS</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Haringey</td>
<td>1,963</td>
<td>224,500</td>
<td>35</td>
<td>4%</td>
<td></td>
<td>Yes</td>
<td>28</td>
<td>8%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Harrow</td>
<td>1,169</td>
<td>214,000</td>
<td>6</td>
<td>1%</td>
<td></td>
<td>No</td>
<td>6</td>
<td>2%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Havering</td>
<td>1,245</td>
<td>226,200</td>
<td>9</td>
<td>1%</td>
<td></td>
<td>No</td>
<td>NS</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(100) As identified through refuge and borough responses so will exclude services of refuges that did not respond. Information also sought from The Gold Book 2007 (Women's Aid Federation: Bristol).
(103) Refuge provides specialist mental health support for service users but refuge not exclusive to this group of women.
(104) Refuge not funded by Supporting People in this borough but no information on bed spaces available.
(105) All non-gender specific.
(106) No data from borough. Based on refuge responses only. May not be all bed spaces funded by borough.

* Delivered as part of the multi-agency Hearthstone project. Unclear if delivered by a women's refuge.
<table>
<thead>
<tr>
<th>Borough</th>
<th>DV incidents</th>
<th># of DV incidents</th>
<th>% of London total</th>
<th>Population</th>
<th>Total popln.</th>
<th>% of London total</th>
<th>First stage refuge accomm.</th>
<th># of bed spaces</th>
<th>% of London total</th>
<th>2nd stage accomm.</th>
<th># of bed spaces</th>
<th>% of London total</th>
<th>BVPI 225 met?</th>
<th>Floating support</th>
<th>Advocacy</th>
<th>Children's services</th>
<th>Counselling</th>
<th>Drop-in</th>
<th>Local helpline</th>
<th>User support group/peer support</th>
<th>Outreach</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hillingdon</td>
<td>2,038</td>
<td>3.5%</td>
<td>252,400</td>
<td>3%</td>
<td>252,400</td>
<td>3%</td>
<td>18</td>
<td>2%</td>
<td>2%</td>
<td>No</td>
<td>50 (10)</td>
<td>15%</td>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hounslow</td>
<td>1,975</td>
<td>3.4%</td>
<td>212,500</td>
<td>3%</td>
<td>212,500</td>
<td>3%</td>
<td>33</td>
<td>4%</td>
<td>Yes</td>
<td>14</td>
<td>4%</td>
<td></td>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Islington</td>
<td>1,572</td>
<td>2.7%</td>
<td>182,800</td>
<td>2%</td>
<td>182,800</td>
<td>2%</td>
<td>27 (6)</td>
<td>3%</td>
<td>Yes</td>
<td>26(^{108})</td>
<td>8%</td>
<td></td>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kensington &amp; Chelsea</td>
<td>844</td>
<td>1.4%</td>
<td>196,200</td>
<td>3%</td>
<td>196,200</td>
<td>3%</td>
<td>g(^{109})</td>
<td>1%</td>
<td>No</td>
<td>NS</td>
<td></td>
<td></td>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kingston upon Thames</td>
<td>859</td>
<td>1.5%</td>
<td>153,000</td>
<td>2%</td>
<td>153,000</td>
<td>2%</td>
<td>11 (5)</td>
<td>1%</td>
<td>19</td>
<td>18%</td>
<td>Yes</td>
<td></td>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lambeth</td>
<td>2,774</td>
<td>4.8%</td>
<td>269,100</td>
<td>4%</td>
<td>269,100</td>
<td>4%</td>
<td>52 (44)</td>
<td>6%</td>
<td>Yes</td>
<td>7 (all)(^{106})</td>
<td>2%</td>
<td></td>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lewisham</td>
<td>3,110</td>
<td>5.3%</td>
<td>247,500</td>
<td>3%</td>
<td>247,500</td>
<td>3%</td>
<td>40(^{110})</td>
<td>5%</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Merton</td>
<td>1,243</td>
<td>2.1%</td>
<td>194,700</td>
<td>3%</td>
<td>194,700</td>
<td>3%</td>
<td>22 (3)</td>
<td>3%</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Newham</td>
<td>2,505</td>
<td>4.3%</td>
<td>246,200</td>
<td>3%</td>
<td>246,200</td>
<td>3%</td>
<td>22 (8)(^{111})</td>
<td>2%</td>
<td>10 (7)</td>
<td>9%</td>
<td>Yes</td>
<td></td>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Redbridge</td>
<td>1,315</td>
<td>2.3%</td>
<td>251,500</td>
<td>3%</td>
<td>251,500</td>
<td>3%</td>
<td>10</td>
<td>1%</td>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Richmond upon Thames</td>
<td>676</td>
<td>1.2%</td>
<td>186,300</td>
<td>2%</td>
<td>186,300</td>
<td>2%</td>
<td>14 (7)</td>
<td>2%</td>
<td>No</td>
<td>2</td>
<td>1%</td>
<td></td>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Southwark</td>
<td>2,643</td>
<td>4.5%</td>
<td>257,700</td>
<td>3%</td>
<td>257,700</td>
<td>3%</td>
<td>32(^{113})</td>
<td>4%</td>
<td>Yes</td>
<td>28</td>
<td>8%</td>
<td></td>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sutton</td>
<td>985</td>
<td>1.7%</td>
<td>177,700</td>
<td>2%</td>
<td>177,700</td>
<td>2%</td>
<td>8</td>
<td>1%</td>
<td></td>
<td>4</td>
<td>4%</td>
<td></td>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tower Hamlets</td>
<td>2,340</td>
<td>4.0%</td>
<td>213,200</td>
<td>3%</td>
<td>213,200</td>
<td>3%</td>
<td>29 (19)</td>
<td>4%</td>
<td>7</td>
<td>7%</td>
<td>Yes</td>
<td>20 (all)</td>
<td>0%</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Waltham Forest</td>
<td>2,259</td>
<td>3.9%</td>
<td>224,100</td>
<td>3%</td>
<td>224,100</td>
<td>3%</td>
<td>29 (14)(^{114})</td>
<td>4%</td>
<td>Yes</td>
<td>2 (all)</td>
<td>1%</td>
<td></td>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wandsworth</td>
<td>1,893</td>
<td>3.2%</td>
<td>281,400</td>
<td>4%</td>
<td>281,400</td>
<td>4%</td>
<td>16 (10)</td>
<td>2%</td>
<td>12 (5)</td>
<td>11%</td>
<td>Yes</td>
<td>NS(^{116})</td>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Westminster</td>
<td>1,228</td>
<td>2.1%</td>
<td>244,400</td>
<td>3%</td>
<td>244,400</td>
<td>3%</td>
<td>35</td>
<td>4%</td>
<td>Yes</td>
<td>10(^{117})</td>
<td>3%</td>
<td></td>
<td></td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

\(^{107}\) Eight units of non-gender specific support ended June 2007.

\(^{108}\) See footnote 106.


\(^{110}\) Service ended May 2007.

\(^{111}\) Refuges not funded by Supporting People in this borough. The six bed spaces that this refuge provide have been included in the total figure given. Also, LB Newham funds accommodation for women with learning difficulties experiencing domestic violence but primary client group is 'people with learning difficulties' and not domestic violence. Bed spaces unknown so not included in figure.

\(^{112}\) Redbridge and Waltham Forest joint fund safe accommodation for young women at risk of forced marriage. However, the primary client group is 'young people' rather than 'people at risk of domestic violence'. Bedspaces unknown so not included in figure.

\(^{113}\) Includes a refuge with eight bed spaces for women from the LB Southwark. This refuge also provides specialist support to women with substance misuse support needs although the refuge is not exclusive to this group of women.

\(^{114}\) Fifteen of these units are delivered by the local authority.

\(^{115}\) See footnote 112.

\(^{116}\) Not delivered by refuge provider but is provided by a women’s VCO.

\(^{117}\) Ibid.
Appendix 1: Steering Group members

Steering Group members

Deborah McIlveen, Women’s Aid Federation of England (WAFE)
Deirdre Cregan, LB Haringey
Doug Flight, London Councils
Eileen McMullan, SITRA
Elizabeth Alexander, London Councils
Eve Featherstone, LB Haringey
Hilary McCollum, London Councils (Chair)
Ian McIntyre, London Councils
Joanne Creighton, London Domestic Violence Project (GLDVP)
Joanne Tutt, London Councils (Project Manager)
Julia Tint, London Councils
Maxine Quintyne, London Councils
Maya Martinez, London Councils
Nicola Pearce, LB Redbridge
Penny Phillips, London Councils
Rebecca Smith, LB Southwark
### Appendix 2: Questionnaire respondents

#### Boroughs

<table>
<thead>
<tr>
<th>Boroughs</th>
<th>Boroughs</th>
</tr>
</thead>
<tbody>
<tr>
<td>LB Barnet</td>
<td>LB Islington</td>
</tr>
<tr>
<td>LB Brent</td>
<td>RB Kensington &amp; Chelsea</td>
</tr>
<tr>
<td>LB Camden</td>
<td>RB Kingston upon Thames</td>
</tr>
<tr>
<td>LB Croydon</td>
<td>LB Lambeth</td>
</tr>
<tr>
<td>LB Ealing</td>
<td>LB Lewisham</td>
</tr>
<tr>
<td>LB Enfield</td>
<td>LB Redbridge</td>
</tr>
<tr>
<td>LB Greenwich</td>
<td>LB Richmond</td>
</tr>
<tr>
<td>LB Hammersmith &amp; Fulham</td>
<td>LB Southwark</td>
</tr>
<tr>
<td>LB Haringey</td>
<td>LB Tower Hamlets</td>
</tr>
<tr>
<td>LB Havering</td>
<td>LB Waltham Forest</td>
</tr>
<tr>
<td>LB Hillingdon</td>
<td>LB Westminster</td>
</tr>
<tr>
<td>LB Hounslow</td>
<td></td>
</tr>
</tbody>
</table>

#### Refuge providers

| Ashiana Network           | Jewish Women's Aid       |
| ASRA Housing Association  | Kiran Asian Women's Aid  |
| Camden Women’s Aid        | Labo Housing Association |
| Christian Action HA       | Lambeth Women’s Aid      |
| Croydon Women’s Aid       | Newham Asian Women’s Project |
| Dove Women’s Organisation | Redbridge Action against Domestic Abuse |
| Ealing Women’s Aid        | Refuge                   |
| Ebony Sistren             | Servite Housing          |
| Greenwich Women’s Aid     | Shepherds Bush Housing Association |
| Hestia Housing and Support| Sutton Women's Aid       |
| Housing for Women         | Tower Hamlets Women’s Aid|
## Appendix 3: Boroughs’ domestic violence spending as proportion of Supporting People grants in ascending order 2007/08

<table>
<thead>
<tr>
<th>Borough</th>
<th>SP grant from DCLG 2007/08</th>
<th>SP DV spend 2007/08 (£)</th>
<th>Percentage of SP grant spent on DV 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kensington &amp; Chelsea</td>
<td>£11,170,507</td>
<td>No data</td>
<td>No data</td>
</tr>
<tr>
<td>City of London</td>
<td>£698,534</td>
<td>£0</td>
<td>0%</td>
</tr>
<tr>
<td>Sutton</td>
<td>£3,667,041</td>
<td>£75,040</td>
<td>2%</td>
</tr>
<tr>
<td>Ealing</td>
<td>£11,125,397</td>
<td>£245,345</td>
<td>2%</td>
</tr>
<tr>
<td>Camden</td>
<td>£35,723,266</td>
<td>£807,468</td>
<td>2%</td>
</tr>
<tr>
<td>Westminster</td>
<td>£17,051,638</td>
<td>£397,138</td>
<td>2%</td>
</tr>
<tr>
<td>Brent</td>
<td>£12,806,959</td>
<td>£304,775</td>
<td>2%</td>
</tr>
<tr>
<td>Croydon</td>
<td>£8,951,651</td>
<td>£229,977</td>
<td>3%</td>
</tr>
<tr>
<td>Islington</td>
<td>£15,934,504</td>
<td>£421,798</td>
<td>3%</td>
</tr>
<tr>
<td>Wandsworth</td>
<td>£11,177,258</td>
<td>£305,279</td>
<td>3%</td>
</tr>
<tr>
<td>Harrow</td>
<td>£3,582,678</td>
<td>£99,485</td>
<td>3%</td>
</tr>
<tr>
<td>Haringey</td>
<td>£21,330,020</td>
<td>£592,887</td>
<td>3%</td>
</tr>
<tr>
<td>Waltham Forest</td>
<td>£7,882,823</td>
<td>£226,054</td>
<td>3%</td>
</tr>
<tr>
<td>Redbridge</td>
<td>£4,467,863</td>
<td>£129,568</td>
<td>3%</td>
</tr>
<tr>
<td>Lewisham</td>
<td>£17,219,829</td>
<td>£504,006</td>
<td>3%</td>
</tr>
<tr>
<td>Tower Hamlets</td>
<td>£15,384,899</td>
<td>£467,316</td>
<td>3%</td>
</tr>
<tr>
<td>Lambeth</td>
<td>£20,792,197</td>
<td>£737,024</td>
<td>4%</td>
</tr>
<tr>
<td>Hackney</td>
<td>£22,221,917</td>
<td>£792,130</td>
<td>4%</td>
</tr>
<tr>
<td>Southwark</td>
<td>£18,765,619</td>
<td>£679,774</td>
<td>4%</td>
</tr>
<tr>
<td>Newham</td>
<td>£11,068,502</td>
<td>£413,000</td>
<td>4%</td>
</tr>
<tr>
<td>Enfield</td>
<td>£11,055,312</td>
<td>£445,722</td>
<td>4%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>£12,826,145</td>
<td>£558,397</td>
<td>4%</td>
</tr>
<tr>
<td>Barking &amp; Dagenham</td>
<td>£5,061,217</td>
<td>£231,936</td>
<td>4%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>£9,302,736</td>
<td>£450,893</td>
<td>5%</td>
</tr>
<tr>
<td>Barnet</td>
<td>£7,497,667</td>
<td>£435,085</td>
<td>6%</td>
</tr>
<tr>
<td>Merton</td>
<td>£3,385,278</td>
<td>£218,420</td>
<td>6%</td>
</tr>
<tr>
<td>Kingston</td>
<td>£4,405,694</td>
<td>£310,352</td>
<td>7%</td>
</tr>
<tr>
<td>Havering</td>
<td>£2,578,536</td>
<td>£182,304</td>
<td>7%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>£5,954,047</td>
<td>£466,480</td>
<td>8%</td>
</tr>
<tr>
<td>Bromley</td>
<td>£5,428,129</td>
<td>£427,777</td>
<td>8%</td>
</tr>
<tr>
<td>Bexley</td>
<td>£2,984,688</td>
<td>£241,000</td>
<td>8%</td>
</tr>
<tr>
<td>Richmond</td>
<td>£2,847,584</td>
<td>£238,606</td>
<td>8%</td>
</tr>
<tr>
<td>Hounslow</td>
<td>£5,525,734</td>
<td>£486,389</td>
<td>9%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>£349,875,869</strong></td>
<td><strong>£12,111,425</strong></td>
<td><strong>Average: 4%</strong></td>
</tr>
</tbody>
</table>

121 No information provided by borough. All figures taken from refuge provider responses so may not be total Supporting People spending on domestic violence services in the borough.